

bedside. To him the laying down of fixed principles—as to the “frequency with which we should appeal to the instrumental resources of our art,” and the time when—are fraught with danger of the highest magnitude, especially if followed with that empirical exactness which generally attends the dawn of medical career. To affix definite rules on a subject like this is a difficult and most responsible task, and one in which I would not readily engage. The axiom should alone suffice that where we would wish to accelerate delivery, and the forceps can be fairly employed, we ought never to hesitate to use them. This is the principle on which for many years I have acted, and I have never had the slightest opportunity for regretting the decision to which I came, but, on the contrary, have felt, with Dr. Wilson of Glasgow, that “I have always had a very high opinion of the benefits resulting from the proper use of the forceps, and that that favourable opinion has grown with the opportunities I have so frequently enjoyed of using and seeing them used,” and by their timely applications I have avoided a multitude of dangers, and have procured many hours of comfort and enjoyment, which otherwise must have been spent in severe and exhausting pain. Thus sayeth the learned Baudelocque: “Those who regard the forceps as an instrument absolutely dangerous, and entirely useless, neither know the mode of acting with them, nor the difficulties of the art, and have doubtless judged them by the abuse they themselves have made of them, and have forgot that the most safe and useful instrument often becomes hazardous in the hands of ignorance and prejudice.”

Dumblane, 1849.

ON MERCURY AS A REMEDY IN CHRONIC DISEASE OF THE BRAIN.

By W. THORP, Esq., Bawtry, Yorkshire.

THE value of a well-sustained course of mercury, kept up for weeks, and perhaps months, for amaurosis, dependent on disease of the cerebral substance, has been well known and appreciated since Mr. Tyrrell published his successful treatment by its aid, in the numerous cases detailed in his valuable work on the eye: but the excellence of mercury as a remedial agent, in cases of paralysis of long standing, is not so well known, and therefore I wish to place on record the following case:—

Mr. B—, of Bawtry, Yorkshire, a house and portrait painter, age now fifty-five, being of a corpulent habit, with large chest and head, and short neck, had, before my acquaintance with him, five years ago, an apoplectic seizure, which deprived him partially of the use of one side. The loss of motion, however, after much treatment by various medical men, had in some degree been restored, when he was seized last Christmas with paralysis on the opposite side, and for which, twelve weeks ago, he consulted me, presenting the following symptoms:—Hypertrophy, with dilatation of the left ventricle of the heart, but without valvular disease; loss of motion of the newly seized side, together with the other, so great that he could only walk with great difficulty, very slowly, and by the aid of another person; in fact, he dragged one side miserably after the other; he had also considerable difficulty in his articulation, and if addressed suddenly, required a few seconds to collect his ideas before he could give an answer to an ordinary question; considerable pain was experienced above the ears, extending into the orbits; his vision, at times, was obscured as by a dark gauze or net-work, but this was not constant, although he could only read with glasses, and by holding out the book to the distance of two feet. He had occasional fits of giddiness, with great occasional pains down the recently affected side, and a constant sensation of numbness in it.

Treatment and present symptoms.—My object being, to bring him under the influence of mercury, and sustain him in this state for several weeks, and be guided by symptoms, I prescribed small and repeated doses of calomel and opium, and on the fourth day his mouth was fairly sore, and has been maintained in this state now eleven weeks. After the third week he began to improve in every symptom, and in the fifth week he walked five miles, a task he had not performed for as many years. His articulation is completely restored, and his sight so greatly improved, that he can see to read newspaper print with his glasses at the ordinary distance, and it is now perfectly impossible for any person, who is a stranger, to declare which side was affected the last, or to affirm that he had ever been paralytic.

I have only to add, that if the effects of mercury, as described by Mr. Tyrrell, are so well known, in blindness arising

from lesion of the brain, (and which is only as much a symptom of disease as palsy,) why is it not recommended more frequently, and especially in those apparently hopeless cases of the latter disease seen so commonly among us?

Bawtry, Yorkshire, 1849.

ON A CASE OF ACCIDENTAL POISONING BY ARSENIC SUCCESSFULLY TREATED BY EMETICS AND CHALYBEATES.

By MICHAEL M'GEE, M.D., Kirkcubbin, County Down.

A FEW weeks past, I was requested to visit Eliza —, aged ten years, who, I was informed, had eaten a considerable quantity of meal mixed with arsenic an hour previous, that had been put down for rats. On my seeing her, she was very much excited, and crying, but quite free from the symptoms attending corrosive poisons. I was very unwilling to adopt any line of treatment on the mere assertion of the friends, lest this story might have been got up for some interested motive, until I learned that arsenic had been purchased that morning, and the little girl seen in the act of taking the meal off the plate. I at once determined on giving an emetic of sulphate of zinc, although she had neither vomiting, thirst, dryness, nor constriction of the throat or fauces, abdominal pain, epigastric tenderness, nor discharge from the bowels. The first emetic did not act, assisted with large draughts of tepid water; a second was given, which acted powerfully. I immediately analyzed a little of the fluid part of what was rejected; it gave, on the addition of ammonio-sulphate of copper, a bright green deposit, ammonio-nitrate of silver, a yellow. I became convinced that not a moment should be lost in using very active remedies. A third emetic of zinc was given, the effect of which was kept up by copious draughts of linseed-tea and new milk, until I felt satisfied that nothing more could be removed from the stomach. On the retching subsiding, I gave albumen. Not having any hydrated peroxide of iron, and being anxious to give it a trial, I made, in a very hurried manner, a solution of sulphate of iron, added to it aqua ammonia as long as it gave a precipitate, which I washed and dried; of this I gave two teaspoonfuls every quarter of an hour, till a considerable quantity was taken. The patient, being very much exhausted, fell into a composed sleep for two hours. On awaking, she complained of great thirst; drink was immediately rejected; pulse very weak, and spasms in the legs; two hours after, complained of pain in the stomach; the bowels were griped, and freely moved; had a little tea and toast; much better. This night no sleep; motions from the bowels very numerous; thirst excessive; much better towards morning; complained of tenderness of the gums, with a great loathing of stomach. The second night she slept well; made no complaint the following day; is now quite well. I saved as much as possible of the contents of the stomach, which should never be neglected in such cases. When in the act of decanting the contents into a smaller vessel, I observed a white powder in the bottom of the jug; this I had carefully washed and dried: after testing and weighing it, I had ten grains of white arsenic.

Kirkcubbin, 1849.

ON THE INADEQUACY, IMPOLICY, AND INJUSTICE OF THE PRESENT SYSTEM OF POOR-LAW MEDICAL RELIEF.

By JOHN LIDDLE, Esq., Surgeon, London.

AFTER a long experience of visiting the sick of a large union, I am satisfied that the present method of administering medical relief is very unsatisfactory both to the poor and to the medical officers; and it is my sincere hope, in bringing the question before the public, that attempts will be made to place this department on a better foundation.

The principal evils of the present system of medical relief arise from the circumstance of the medical officers not being responsible to a properly-constituted medical authority. They are annually elected by boards of guardians, who are profoundly ignorant of everything that relates to medical science; and they are subject to the control of the latter and to that of the poor-law commissioners, who are equally uninformed upon medical subjects. Now, if in the medical department of the army and navy the supervision which is exercised by the director-general and the medical inspectors has proved to be so efficient in reducing the amount of mortality and improving the physical condition of the men, it surely is a duty incumbent