

ing draught: laudanum, thirty drops; carbonate of ammonia, four grains; camphor julep, two tablespoonfuls; followed in about fifteen minutes with five grains of calomel and one grain and a half of opium. His wife states that his stomach rejected the pills and draught in about half an hour, though Mr. Walton did not observe any vomiting while he was present. About one P.M. my father saw him; the man was then in a most complete state of collapse, of a blue colour, cold, and to all appearance dead, but that there was a slight steam on a looking-glass applied to his mouth, and a scarcely perceptible pulsation of the heart; the stools, which were then being carried away, he describes as having the smell of animal matter in the first stage of decomposition, looking like imperfectly made oatmeal gruel, with the addition of distinct fluid, resembling beef-gravy. He ordered, first, friction generally of the trunk and extremities, the application of hot salt-bags to the sides, and hot bottles to the feet; and three grains of calomel with the same quantity of opium and cayenne pepper, to be placed on the tip of his tongue every half-hour. At three P.M. Mr. Walton and my father visited him, and found him better. The same remedies were ordered to be continued every hour. At seven o'clock a great improvement had taken place; the livid hue had disappeared, the countenance had assumed a serene and placid expression, the pulse had become full and soft, and a warm, glowing perspiration was beginning to be diffused over the body. His wife states, that after the third or fourth dose of the medicine, the purging had become materially lessened, and for the last hour no evacuation had taken place. The latter motions were certainly, though slightly, tinged with unhealthy bile. The medicines were now ordered to be repeated every two hours during the night. Towards bed-time he began to complain of the medicine "burning his inside out," and craved incessantly for cold water, of which he drank nearly a gallon during the course of the night. He perspired profusely, and early in the morning passed a little urine, which was the first for four-and-twenty hours.

19th.—This morning he was convalescent—in fact, well, though, of course, weakened by the tremendous nature of the attack. He drank several cups of strong coffee during the day, and had the following mixture:—Powdered rhubarb, one drachm; carbonate of magnesia, a drachm and a half; oil of cinnamon, four drops; water, six ounces. Two tablespoonfuls to be taken every three hours. He kept his bed for a day or two after this, taking beef-tea and other light nutritious diet, and by the end of the week was able to resume his work.

The opium, of which he took altogether more than two scruples, was tolerated, there being no narcotism or even sleep induced by it; nor was there the slightest symptom of ptialism present.

The great thirst, though no doubt partly owing to the cayenne pepper, is also frequently attendant upon that stage of cholera as a part of the disease, and may probably be an effort of nature to supply the great deficiency of the liquor sanguinis, produced by the excessive purging; and if so, how very desirable to attend to the patient's craving for drink by a supply of broth, gruel, whey, or even cold water. It may not be unimportant to state, that the patient is a native of Stafford, and had not been out of the town for three years previously, and that there were certainly not more than half a dozen cases in the town, if there were even any other than the one I have narrated. For many of the particulars of this case I am indebted to Mr. Walton, now of Birmingham, and my father, Mr. Masfen, of Stafford.

Infirmary, Stafford, 1849.

ON THE TREATMENT OF UNHEALTHY INFLAMMATIONS.

[STRICTURES ON THE OBSERVATIONS OF MR. BROKE GALLWEY.]

By JOHN LANGLEY, Esq., Surgeon, London.

I TAKE it for granted, that what Mr. Gallwey means to convey by the expression of "unhealthy inflammations" is, inflammation, general or local, occurring in the systems of persons of cachectic or unhealthy constitutions; and he insists that the treatment of such inflammatory diseases should be conducted upon principles and measures opposite to those indicated when the same character of disease attacks persons of more robust and vigorous system, and also avows that he would not treat the same inflammatory disease in the same manner in a different locality, as in "Little France or Smithfield." Upon this most important professional point I beg to differ from him *toto cælo*. I must first bring my mind to the absurd conclusion, that an engine of inferior power, a hose of smaller

calibre, and fluid of a less extinguishing character than water, should be used and applied to subdue the flame of a burning edifice in Little France or Smithfield, to that used for the same purpose to a mansion in St. James's-square. If thirty years' practice and experience in my profession have taught me anything, it is this, that, figuratively speaking, the weaker and more fragile the tenement, the more decisive, prompt, and vigorous should be the means used to destroy and annihilate the destructive element, and *in tempore*, which is the *omnium primum*, before the nervous system and general vital energy is destroyed by continued inflammatory and insidious febrile action. I would here presume to ask Mr. Broke Gallwey what he really means by "unhealthy inflammation"? Does he use the term in contradistinction to *healthy* inflammation? If so, I beg to observe that I consider no inflammation healthy, for whenever action is morbidly carried to such a height as to induce inflammation, whenever the friction of the circulating molecules has so far increased in intensity as to generate morbid heat or inflammation, then such a condition can never be healthy, excepting only the instance where the *vis medicatrix naturæ* establishes a limited inflammatory action to promote the union of divided parts in incised wounds, through the intermediate agency of coagulable lymph, Nature's size, or glue, for that purpose. But, even in that instance, I have much doubt whether the action set up does not fall short of the inflammatory point, as we find high inflammatory action frustrates the design, and converts the adhesive lymph into a sero-purulent fluid, incompatible with the promotion of union by the first intention.

Where and whenever the phenomena of inflammation, the "rubor, tumor, et calor, cum dolore," exist, organic disease has commenced, and will progress, and insidiously increase in intensity, until the structure or organ attacked is functionally or substantially destroyed, by ulceration, effusion, or adhesion, and consequent obliteration of parts, to the impediment or destruction of natural function, as in tracheal, peritonæal, pleural, or cardiac inflammations, or if not fatal, a most serious impairment of health follows, entailing misery throughout future existence.

I am quite aware that Mr. Gallwey is supporting the opinions of his professional brethren in general, and arguing in accordance with the present fashion of medical practice; for I have been replied to, when advocating full depletion in fevers and inflammatory diseases, and also in acute local inflammations of large joints, as the hip and knee joints—"I never bleed in London; that practice may do in the country, but not here." But my firm belief, and that founded upon long and considerable experience, is, that where the "rubor, tumor, et calor cum dolore" exist, the only efficient and controlling power, and if I may be allowed the expression, the sheet-anchor of the surgeon, is his *lancet*, if timely, properly, and perseveringly used, until the goal aimed at is attained, ever steadily keeping in view the object which determined him to resort to it, with this motto encouraging him in his good course—"Tu ne cede malis sed contra audentior ito." The disrepute into which active general depletion has fallen has arisen in consequence of its not having been carried to a determinate curative point. A first, second, and third bleeding have been audaciously resorted to by some practitioners, at distant intervals, and without relief; the cause which induced such treatment remaining *in statu quo*, a conclusion is erroneously arrived at, that bleeding is of no use; the disease advances, and the patient dies. Much attention has been paid, much medicine administered, much unnecessary pain and suffering endured, and everything is believed to have been done: and it is well if these repeated small bleedings have not been charged with the production of the fatal result, for whoever reads, or has read, the Dicksonian fallacies of the profession, a pamphlet written *ad captandum vulgus*,—an occasional rivulet of sense and reason runs—must attribute the unfortunate issue of all the ills that "flesh is heir to" to the use of the lancet; while I, unless mentally and physically blind to the reflection of my scalpel, aver, that among the numerous post-mortem researches I have read of, and my own frequent autopsies in search of the cause of death, in scarcely a single instance could I attribute it to other than organic disease of the brain, lungs, or heart, which three primary organs, the late Dr. Beddoes, in his usual elegant style of writing, designated the "Tripod of Life," or of some other important structure, caused unequivocally by unsubdued inflammation.

I fear I am trespassing too deeply upon the space of your valuable columns, but briefly wish to remark upon one of the grave absurdities, urged even by medical men, and very lately to me by a physician of great repute and notoriety, "that the

abstraction of blood engenders in the habit and system from which it has been taken a disposition to a morbid accumulation of that vital fluid, to the prejudice of future health. I will admit, that when a deviation from health has existed, caused by a general plethora, local congestion, or hypertrophy of any important organ, is relieved and cured by bleeding, and the sufferer is restored to health, and his gastric and chylipoietic organs brought into perfect order and health. If he is unwise enough to "eat, drink, and gormandize," and generate the same morbid condition, surely it is unjust and unwise to charge the remedy which has placed him in a condition of health, with being the cause of his future malady! This is too absurd an hypothesis to merit contradiction. It is a theory which has been unfortunately inculcated, by a late highly venerated medical author, Dr. Cullen, in his "First Lines of the Practice of Medicine," vol. ii., Aphorism 787, p. 308; and I marvel to find that so powerful and lucid an intellect should have been warped by so baseless and visionary a prejudice.

Southampton-street, Fitzroy-square, Oct. 1849.

Reviews.

Practical Remarks on the Use of the Speculum in the Treatment of Diseases of Females. By THOMAS R. MITCHELL, M.D., Master of the South-Eastern Lying-in Hospital, Dublin, &c. Dublin: Fannin & Co. 1849. pp. 83.

DR. MITCHELL tells us that these "Remarks" were written for the benefit of his pupils, and as small books and short practical hints are more palatable to students than voluminous works, the author may at least be certain that his little treatise on the speculum will be read by those for whom it was intended. As for ourselves, we have perused Dr. Mitchell's "Remarks" with great pleasure; he is evidently fully and practically acquainted with his subject, and deserves credit for making good use of his opportunities, both in private practice and at his hospital. The different kinds of specula are carefully described, (a few drawings of these, and of the various instruments used for uterine injections might have been advantageously added,) the author finally giving the preference to Ricord's four-valved speculum. For the application of leeches, he gives it as a result of his experience, that the strong conical glass speculum is the best than can be used. We are successively shown how the discreet and gentle use of the instrument has been advantageous in the diagnosis and treatment of—1, chronic congestion of the cervix uteri, with slight abrasion; 2, prolapsus uteri; 3, uterine leucorrhœa; (Dr. Mitchell injects the uterus fearlessly, and does not belong to the timorous school;) 4, ulceration and induration of the os and cervix uteri, &c. Cauterization with the acid nitrate of mercury, the modification of surfaces by the solid nitrate of silver, or a strong solution of this salt, astringent injections combined with hip-baths and appropriate medicines, have, according to the author, yielded excellent results. We also find that deep cauterization with the Vienna paste has done much good in congestion and induration of the cervix. Dr. Mitchell has imagined a very neat way of applying the paste, by means of a glass rod running through a cylinder of the same substance, the rod ending in a disk, on which the paste is placed. Our author lays claim to having been the first practitioner who used the collodion to the vaginal walls, to give them a protecting, impervious coat. We confess that we have not much faith in the efficacy of the firing-iron on the back, to cure uterine catarrh, and we regret that we cannot congratulate Dr. Mitchell on the style of his plates. On the whole, however, we are convinced that both pupils and practitioners will read this little practical work with advantage.

Traitement de la Fièvre Intermittente, mis à la portée de Public. Par le Dr. J. F. Gondret, of Paris.

WE have been favoured by Dr. Gondret with a pamphlet on the above subject, and also with a translation of the same, the doctor having got his treatise "done into English," for insertion in our pages. Dr. Gondret coolly pushes quinine and

Fowler's solution aside, and maintains that the application of a dozen or two of cupping-glasses, without scarification, on either side of the spine, will cut short the disease, provided the dry cupping be used at the very onset of the cold stage. We should have no objection in giving due attention to this method if the pamphlet were calculated to create confidence, but we are sorry to say that we feel very little edified by the production. Dr. Gondret says, that he went into the Sologne districts, where ague is endemic, in order to put his method to the test, but we get no authenticated results, no comparative tables of cases and cures; and our faith must rest merely on the statement of the author, who mentions that he cured *many* cases of ague! A memoir on this subject, sent to the various ministers of state, seems to have had but little effect, and the copy of it given in the pamphlet appears merely an ingenious mode of bringing before the public the title of certain works formerly published by the author. We were rather amused to find the doctor stating in his instructions for the application of the glasses, that the piece of paper is to be lighted at the end which is not held by the fingers, (*allumé par le bout opposé aux doigts.*) Dr. Gondret makes short work of the pathology of ague; according to him, the seat of the disease is in the head when there is pain in that region, in the chest when there is cough, in the heart when there are palpitations, in the spinal marrow when there is torpor in the movements, in the cerebro-spinal axis when the sight is affected, &c. As to proofs or arguments, *nihi!* Of course, cholera is to be cured by dry cupping also, through the powerful derivation which this operation produces; but as the pamphlet is dated May, 1849, and the mortality has been very great in Paris, we are driven to the opinion that the discoverer was rather too sanguine (not sanguinary) on that head. We have been accustomed to hear Dr. Gondret's name in conjunction with an ammoniacal ointment, composed of one part of fatty matter to one of strong liquor ammoniæ. We know this combination to be useful for rapid vesication, and should not now have found fault with its inventor, had not his self-laudatory pamphlet been thrust under our notice. *Mis à la portée*—literally, "put within the reach," or, in other words, intended to be read and practised by the public without the intervention of a professional adviser—is the term used by the author himself in the title of his production. Appeals to the public in matters medical are always peculiarly distasteful to us, and with the above remarks the one before us may be *mis à la porte*, or "sent to the door," unless there be any more appropriate destination.

Medical Societies.

WESTMINSTER MEDICAL SOCIETY.

SATURDAY, OCTOBER 27, 1849.—MR. HIRD, PRESIDENT.

DISEASE OF THE KNEE-JOINT.

MR. HENRY SMITH exhibited a specimen of a diseased knee, which he had removed by amputating the thigh of a young man, aged eighteen. The patient had had a considerable enlargement of the bone for six years. It was seated over the inner side of the joint; it had latterly increased so much in size, as materially to affect the motions of the joint. It was considered to be an exostosis. No symptoms of disease within the joint itself appeared, until three months previously, when an injury was received; the joint became inflamed, and notwithstanding the employment of leeches, rest, and counter-irritation, the disease went on: it soon became evident that the joint was seriously affected. As the patient was suffering very much, was completely crippled, and likely to remain so from the existence of the bony growth alone: Mr. Smith, at his urgent request, and with Mr. Fergusson's approval, removed the limb. The disease consisted of a great enlargement of the inner condyle of the femur, which was so soft as easily to allow the knife to penetrate its substance. There was pus in the joint; the cartilage was removed from the outer condyle of the femur, and it was in process of separation from the whole of the rest of the articulating