

stagnation, or deposits of blood and serum in the injured part. On the same principle, the old practice, now long forgotten, of giving opium in the commencement of pleurisy, proves, of all others, the most ready method of arresting the inflammation; it is, in most cases, infinitely preferable to instantly bleeding the patient; this I know from experience in my own person, as well as in others. At the same time, in actual plethora we should deplete, so as to set free the absorbent and capillary vessels, promoting the cutaneous transpiration and other secretions. In cholera and fevers the abstraction of blood is of use only when reaction has occurred; and the same is observable whenever we wish to lower excitement by the application of cold. Neither cold affusion nor bleeding, however, will be attended with benefit in the stage of depression or collapse.

In accordance with the foregoing remarks, I may here observe, that it is a notorious fact, and spoken of with surprise, that persons intoxicated, or actually under the full influence of alcoholic stimuli, are far less subject to receive injury from falls, contusions, &c., than those in the ordinary state. An instance of this occurred only a few days since; a gentleman of my acquaintance, after a free use of vinous potations, fell with extreme violence, his head coming in contact with a strong cast-iron fender, the latter being broken in the collision, without causing the least degree of injury in the head or body, or any subsequent soreness.

Alcoholic stimuli, then, by rousing the absorbents, and quickening the circulation, tend to prevent stagnation and congestions of blood and serous fluids; a fact exemplified, likewise, in cholera and agues. In such cases, the blood wanting its due stimulus, is driven by the muscular contractions of the heart and arteries into the great veins and internal viscera, which occasions the collapse or algid stage in these diseases. A glass or two of hot brandy and water, taken on first perceiving the symptoms, has frequently prevented the formation of cholera, and of agues, whether of the mild or more malignant species. Bleeding has been found, we are told, very fatal at the commencement, or in the cold stage of intermittents; and not unfrequently it may have been equally fatal in cholera. I think it probable, too, that a speedy resort to depletion has not unfrequently accelerated, or been the cause of death in apoplexy, whether traumatic, or the result of injuries causing concussion of the brain, or from other causes.

I observed a paragraph some short time since in an American paper, in which it was stated that a person reduced in strength by some previous illness, was suddenly attacked with lethargy or apoplexy; that he was immediately bled, but he still remained insensible, and expired in a few hours afterwards. This case may serve to illustrate

what has been already said. A similar case occurred a few days since in this parish, in a woman between seventy and eighty years of age.

Equally, if not more pernicious, is the common officious practice of immediately raising up persons who fall down in fainting fits; which are mostly occasioned by a paucity of blood in the brain; for thus the blood, by its own gravity, descends to the extremities, and thus, no doubt, many persons are destroyed, who otherwise might recover, were they permitted to repose in a recumbent posture, to favour the return of the vital fluid to parts so essential to life, and to restore the general circulation. In such cases, if, instead of raising the head and trunk, the feet and legs be elevated, the patient will generally recover very speedily.

In conclusion, as to apoplexy, I cannot entirely agree with a remark in a very popular, and, indeed, scientific work, the "Physician's Vade Mecum," that, "as apoplexy depends on a determination of blood to the head, and generally on a plethoric habit, we should advise a total abstinence from animal food, and all vinous or fermented liquors; and that cupping the neck occasionally is a valuable prophylactic." In the same work I observe that M. Serres has cited numerous cases to prove that clots and effusions on the brain are the effects and not the causes of apoplexy. I remain, Sir, yours obediently,

JOHN HANCOCK, M.D.

Welbeck-street, Jan. 18, 1839.

## NITRATE OF SILVER IN PURULENT OPHTHALMIA.

*To the Editor of THE LANCET.*

SIR:—Should the following cases of ophthalmia neonatorum and gonorrhoeal ophthalmia, with the accompanying observations on the use of Mr. Guthrie's ointment in those diseases, be deemed worthy of insertion in your valuable periodical, I beg a place for them. I remain, yours; &c.,

HENRY OBRÉ, M.R.C.S.L, &c.  
North London School of Medicine,  
January 11, 1839.

Mary H., æt. one month; two days after birth was observed to have a discharge from both eyes, for which a lotion has been constantly applied, by order of a medical man, but with no benefit; the discharge is now (Dec. 22) of a thick purulent character and very profuse, the lids are much swollen, the child has not opened the eyes for the last fortnight; they were ordered to be syringed with warm water every hour or half-hour; the *black ointment*, made with *nitrate of silver*, gr. xij; *lead lotion*, gtt. x;

and *lard*, ʒj.; to be applied to both eyes; and *castor oil*, ʒss; to be taken directly. 23rd: The discharge very much lessened, the cornea cannot be seen distinctly, but appears clear; the syringing and ointment to be repeated. 24th. Discharge decreasing. Cont. remed. 25th. Discharge has not appeared since yesterday; the eyes are quite open, and the cornea quite clear from nebula or ulceration. Nitrate of silver lotion in the proportion of ten grains to the ounce of water, to be dropped into the eyes. 26th. Discharged quite cured.

John W., æt. 22, has had gonorrhœa for the last three months, for which he has received medical treatment; on the 16th of October he was attacked by inflammation of the left eye; he is not aware of having applied the discharge from the urethra to the eye; on the 20th I first saw him, the conjunctivæ much inflamed and chemosed, of a pale red colour, discharging a large quantity of purulent matter; the cheek much excoriated from the discharge; the eye was well washed with warm water, and the black ointment applied. An emetic of *mag. sulph.*, ʒss.; *ant. tartratis*, gr. ij.; to be taken at bed-time. 21st. Eye much improved, discharge less, can bear a little light; the same treatment was continued daily until the 26th, when he was quite well.

My desire to bring the above cases forward is not with the object of recommending a new remedy, for I may almost say the certain cure of a disease which, if allowed to run its course even for a few hours in some cases, will terminate in the total destruction of the eye; but with a wish to make a treatment which was brought forward many years ago by Mr. Guthrie more generally known. Surgeons have objected to the use of the black ointment in purulent or gonorrhœal ophthalmia for two reasons: one, because it produces pain when applied to the inflamed conjunctivæ; the other, that they see no use in using a violent remedy when the disease may be checked by milder ones, and at the same time stating that they can wait a few days, and should the alum lotion and other such mild applications fail, they may have recourse to the severe. Now, these are two most absurd objections for trifling with the future happiness of any individual. In the first place, is it not better to put a stop to disease at once with a little pain, than allow it to linger on and terminate no one knows how? They might as well say that pain should not be produced by the knife in a case of strangulated hernia in which the pain has ceased from mortification. As for the second objection, they will not use ointment until the disease has existed some time. Now, every one knows, who has seen much ophthalmic practice, that purulent matter when allowed to remain in contact with the cornea, even a few hours, will produce the most severe disasters, sloughing,

not only of the cornea, but the whole structure of the organ; it is not supposed that any remedy will cure the disease at this crisis, but the remedy should be applied in time to prevent those dreadful terminations. I remember some time since a surgeon in the country, after using lotions and blowing calomel into an eye affected with this disease for days ineffectually, stated that he was afraid to use Mr. Guthrie's ointment, because it produced such pain. If purulent ophthalmia be properly taken care of from the very commencement, and the eyes syringed with mild stimulants every quarter of an hour, I have no doubt but that the disease will be subdued; but how seldom do we find that the class of patients whose children are afflicted, will take due care? If they make an attempt, how few mothers, particularly of the lower orders, will open the child's palpebra and remove every particle of the poison? I have repeatedly stood by, and desired them to cleanse the infant's eye, when they have applied the remedy externally instead of internally. Of course the nitrate of silver ointment, like all other remedies, must occasionally fail, but I may safely say that nineteen of every twenty, will recover without nebula or any obstruction to vision. Before the ointment is applied the conjunctivæ should be well cleansed with warm water, when about the size (not as Mr. Houston in his edition of Mr. Little's work, page 51, states, the size of a pin's head) of a split pea of the unguent is to be applied with a camel's-hair brush, having been previously softened before the flame of a lamp, to the conjunctivæ, when friction is to be used externally to the lids, so as to diffuse it over the whole internal surface; having been allowed to remain five or ten minutes it is to be removed with warm water; should there be much inflammation and swelling of the lids a leech may be applied to the external angle of the eye. I have given the above directions, fearing that a great number of the cases in which the application has failed is in consequence of its improper application.

## GANGRENOUS ULCERATION OF THE INTEGUMENTS.

CONDUCT OF A "PURE" TO A GENERAL PRACTITIONER.

To the Editor of THE LANCET.

SIR:—Your inserting the following case in the forthcoming Number of your valuable Journal will much oblige, Sir, your obedient servant,

G. B. WADSWORTH.  
2, Great Marlborough-street.  
Jan. 16, 1839.