

at last fix its full value as an analgesic, and possibly justify the hope that it may take a valuable, if restricted, place in the group of those bodies which relieve suffering.

Aberdeen.

THE USE OF EXALGINE IN GRAVES' DISEASE, AND THE POISONOUS DOSE OF EXALGINE.

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THE poisonous dose of exalgine seems to vary greatly for different persons. A woman aged twenty-eight, of fair complexion, having typical Graves' disease, had, after some months, extreme exophthalmos and congestion of both conjunctivæ, with ulceration of the left cornea. Leeches, lotions, &c., gave very little relief. At length, the pain becoming severe, exalgine was tried, half a grain dissolved in five minims of spirit of wine, and a tablespoonful of water, every half hour for three times when pain was present. Next day not only was the patient free from pain, but the congestion had entirely disappeared; the eyes had changed from flaming red to perfectly white. During the next month, to satisfy myself and several critical observers as to the influence of exalgine, experiments were made; all the other drugs and appliances were tested in turn. The result was always the same: when exalgine was given, the eyes were white; when it was omitted, they became red and painful within a day, no matter what other drugs were given or lotions applied. As upon trial being made it seemed that the good effect was less marked when the whole dose of a grain and a half was given at one moment than when it was given in divided doses—half a grain every quarter of an hour for three times,—it was ordered to be taken regularly in this manner every four hours from a bottle kept for the occasional use of other persons as well as of herself. By a mistake of the transcriber of an old and damaged label, "gr. i. in 3i." became "gr. i. in 3i." This prescription being dispensed, the mixture contained eighty grains in ten ounces—of this there is no doubt; inquiries and testing by comparative evaporations established the fact. On a Thursday at 4.30 P.M. the patient had her ordinary dose of half a grain; a second dose at 4.45; at 5 the new mixture was begun. She merely remarked that this dose felt hot, but complained no further. This 4-grain dose was repeated at the following times: Thursday, 10 P.M., 10.15 P.M., and 10.30 P.M., or twelve grains in all within half an hour. Friday at 3 A.M. and 3.15 A.M. (she begged to be excused the third dose on account of pain and burning in the stomach); 7 A.M., 7.15 A.M., and the third dose after breakfast at 8.15 A.M.; at 1 P.M. one dose only; she declined the others on account of gastric pain; no other bad effect from forty grains of the drug given in twenty hours was observed. At 10 A.M. on Friday the complaint of pain led to the pulse being again counted, and it was found to be 144; it had never previously exceeded 136; its usual rate was between 100 and 120. Respiration rate 32 (above average). Temperature unaltered—98° to 99°. I saw the patient at 5 P.M. on this day (Friday), and suspected nothing until she complained of the pungent taste of the medicine and of the pain which it gave her. On the following day she felt much better in every way; the eyes were much less prominent, and the corneæ could now be covered by the eyelids. Pulse 120; respiration 26; morning temperature 98.4°; evening 99°.

Another woman having toothache, but otherwise healthy, had taken on Thursday, at 5.15 P.M., an ounce of the mixture—that is, eight grains of exalgine; at 5.30 a second ounce, and at 5.45 a third, or twenty-four grains in half an hour. This woman is about twenty-eight years of age, 5 ft. 5 in. in height, 9 st. in weight, has very fair hair and complexion, is very intelligent, of quiet, pleasant disposition, has a large head with relatively rather small face, and grey eyes. She states that after the second dose she felt dazed, but even after the third she was able to go out to call upon a friend half a mile away, though walking unsteadily and with difficulty, and fearing to speak lest she should say foolish things. On her return in an hour she felt giddy and stupid, but could do her work. On going to bed

at 10 o'clock she instantly fell asleep; awoke at 7 A.M. on Friday with dry mouth and frontal headache; no toothache; was better after breakfast, but the mouth still felt dry on Saturday evening.

Of the quality of the exalgine used there is no doubt. It has been found effective in cases of neuralgia, headache of (probably) cerebellar glioma, "lightning" pains of tabes (two cases), gouty arthritis, &c. The patient with Graves' disease resumed the use of the drug after a week's interval, and for three days she had three grains every four hours; then, for a week, four grains and a half every four hours. After an interval of four days she took three grains in one dose every four hours for ten days; afterwards, as she could not be kept longer under daily observation, the quantity was reduced to three grains three times a day. The corneal ulcer healed, and the pain and congestion were held in check by these doses, which were given in the hope of hastening the improvement of the original disease; they effected little if anything apparently in this way, but no discomfort of any kind was caused by them. Exalgine does not seem to be in any sense a "cumulative" drug. I have, however, heard of a case in which very alarming symptoms were produced by a single dose of five grains.

Leeds.

HERNIA INTO THE FORAMEN OF WINSLOW; LAPAROTOMY; RECOVERY.

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THERE are few rarer surgical maladies than hernia into the foramen of Winslow, and the few recorded cases have been verified by post-mortem examinations. This case, therefore, in its fortunate result is unique. The patient came under our observation on the seventh day of the obstruction, was watched closely for twenty days, during which intussusception was considered the most probable cause. On account of continued symptoms and progressive emaciation an operation was performed on Jan. 1st, at which a hernia into the foramen of Winslow was discovered, though reduction could not be effected. Forty-eight hours later a large enema was given for recurrent spasmodic pain, and from that time onwards all symptoms were relieved, and the tumour was found to have disappeared. Rapid and complete convalescence then set in. Such is the *résumé* of an interesting case which is worth relating in further detail.

R—, aged seventeen years, a Mohammedan Kashmiri, came to the Mission Hospital on Dec. 10th, complaining of acute pain and absolute constipation of seven days' standing. It had begun with an attack of vomiting. Before that he was quite well, and had not suffered from constipation. The cause of the attack was unknown. From that day (Friday) he had taken no solid food. A native doctor had administered purgative medicines, but only blood had passed. He had vomited once or twice, and brought up water only. The pain came on in fearful spasms. His appearance bore out the history. His face was pinched and sallow; eyes anxious-looking; he walked stooping, with abdominal muscles contracted; temperature normal; the pulse was small and thready. On examining the abdomen, it was seen to be flaccid and somewhat retracted, except in the lower part of the epigastric region, especially to the right of the middle line, where there was a distinct prominence. This was found to be of an irregular oval shape, about five inches long; part felt solid, and part was tympanitic. Dulness extended into the right hypochondriac region. A large enema (four pints) was given, and the patient was suspended by the heels and well shaken. By careful percussion it then appeared that there was no obstruction below the transverse colon. About an ounce of shreddy fæces came away with the fluid. From the general shape and position of the tumour and the symptoms, the tentative diagnosis of intussusception was adopted, and operation was postponed. The swelling became less tense after the enema had been returned. It could not be moved downwards or laterally, but could be pushed a little upwards.

Daily large enemata were given, and morphia to relieve the pain. The patient's usual attitude was sitting crouched