

that in case the sore be of a specific nature, that at the end of three days, as a medium, a sore having all the characters of the original one, from which the inoculation had been made, will present itself; should, however, no such sore declare itself, then he says, we may rest assured that the nature of the sore upon the genitals is not specific; Monsieur Ricord has prepared beautiful drawings, which he owes to the skill of Mr. Acton, a most promising English surgeon, which very well illustrate his views; Monsieur Ricord also is in the habit of inoculating from the discharge of gonorrhœa, as he is of opinion, that where it is more than the product of simple irritation, it is caused by syphilitic ulcers in the urethra; and his cases and dissections would appear to warrant him in the opinion.

*Remarks.*—The best practitioners amongst the French, including Monsieur Ricord, are now generally persuaded that the cure of syphilis can be effected by mercury alone; and though they make use of other adjuvants, they rely more upon it considerably than formerly; and I may add that few books have been received or read with more interest than Mr. Colles's work upon the use of mercury.

In a future communication I will lay before the Association the present condition of vaccination in France.

ART. XXII.—*Case of very long-continued Epilepsy without any appreciable Lesion of the Brain or spinal Marrow.*  
By ROBERT J. GRAVES, M.D.

[Read at a Meeting of the Pathological Society.]

MR. A. B., the subject of the following case, was visited during his long illness by a great many medical men; among the rest by Mr. Colles, Sir P. Crampton, Mr. Smyly, Mr. Cathcart Lees, and myself. He died on the 27th December, 1839, aged 30 years.

He had been a very fine, robust, and intelligent boy, until he was nine years old, when he unfortunately got possession of five or six hard, unripe pears, and devoured them greedily ; in a few hours he became thirsty, and drank a large quantity of buttermilk ; in the course of the evening he fell into a state of insensibility, during which he was convulsed ; a physician of great experience and judgment from Kilkenny was called in, who opened the temporal artery immediately on seeing the patient, and employed the usual means resorted to on such occasions ; notwithstanding this, the insensibility continued, and in about seven hours it was observed that a hard tumour could be felt distinctly in the epigastric region. This induced the suspicion of the presence of some undigested substance, and a strong purgative enema was therefore administered ; its effect was most satisfactory, for after the discharge of some copious stools the tumour subsided and the boy recovered his senses. The injury inflicted on the cerebral system by this violent shock manifested itself soon after in the recurrence of the fit, and from that time forth he was subject to epileptic attacks. They annually became more frequent and more severe, but the vigour of his intellect was not impaired until after the disease had continued six years, when his mental faculties displayed a manifest dulness, and in the course of a few years more he gradually lapsed into idiocy, with however occasional gleams of reason, particularly on subjects connected with religion.

He now remained entirely in the house, and for many years had several epileptic fits daily ; the convulsive stage did not usually last more than three or four minutes, but the coma often continued nearly an hour. The disorder generally exhibited a manifestly increased severity twice a year, when the fits would return about ten times daily, and with more than ordinary violence ; after such a paroxysm had lasted about a week it invariably terminated in outrageous madness, the appearance of which was a sure sign that the paroxysm, so far as regarded the fits, was over ; this madness was of the most

violent and noisy description, and required restraint ; when it had subsided, as it usually did in about three days, he relapsed into his ordinary state with a few and comparatively slight fits daily.

Such was the course of the disease for sixteen years, during which he was most tenderly and assiduously nursed. I ought to have mentioned that a sudden and copious bleeding from the nose often took place when a fit came on ; the breathing was invariably violent, irregular, and heaving, for eight or ten minutes after the convulsions had ceased, but then gradually became tranquil, and so continued for the remainder of the comatose stage. During the last five years of this gentleman's life the fits became gradually less violent, but never ceased ; for several years before his death he remained free from the attacks of madness.

In 1833, he became subject to diarrhœa, which recurred frequently, was difficult to stop, and seemed to have induced a most depraved appetite ; in fact at certain times he would swallow every thing he could lay hold of, paper, coals, cork, lead, glass, (after due mastication,) boxes of family pills, straw, bits of books, &c. &c., from none of which did he seem to sustain any permanent injury. These fits of depraved appetite used to come on at irregular intervals ; about 1833, he began to fall away in flesh, and for the last few years was pale, haggard, and emaciated. His sleep was, however, sound, and his appetite usually normal. About two months ago the bowel complaint returned with more than its usual violence, and soon weakened him so much, that for the first time from the commencement of his illness, he was confined to bed, and every thing failed to check the diarrhœa, which finally proved fatal, exhibiting during its progress the usual symptoms of chronic inflammation succeeded by ulceration of the mucous membrane of the intestines. While the diarrhœa was on him, and indeed all through his illness, (except perhaps during the convulsions,) *his pulse was perfectly natural, slow, and soft*, and so continued to within

two days of his decease. The respiration (with the exception formerly noted) was always perfectly natural; never the least short or hurried, and he never had a cough until two nights before he died, when he had a violent fit of coughing which lasted a quarter of an hour, and was apparently stopped by a dose of hartshorn in water; the same happened on the following night. He was never observed on any occasion to expectorate, and never had a vestige of wheezing in his chest, in fact he was to all appearance so free from the least suspicion of pectoral complaint, that neither I nor any one else had examined his chest for many years. It is true that ever since the first epileptic seizure he frequently complained of what he termed pain in his heart, and nineteen years ago he was blistered for it by Doctor Ryan of Kilkenny. This pain referred invariably to the left side, used often to go away for considerable intervals, and was consequently believed to arise from a straining produced by the violence of the convulsions; during the last year of his life this pain was very constantly complained of. About three years ago I saw him for jaundice, which lasted about three weeks, and disappeared without medicine; I could not, at the time, make out the cause of the jaundice; he had no pain, no fever, no hepatitis.

The preceding history of my patient's case, is imperfect, but as far as it goes its accuracy may be relied on. I am particularly anxious to impress this on the minds of my audience, before I relate the result of the *post mortem* examination, which was conducted under the most favourable circumstances, and at the express wish of the family of the deceased, by my friends and former pupils, so distinguished for zeal and ability, Dr. Cathcart Lees, and Mr. Quinan, in the presence of myself and Mr. Smyly: we had the advantage of a well aired and admirably lighted room, and during the dissection the morning sun shone brightly on each organ in succession as we examined it; I mention these facts, lest any one should hereafter attempt to explain away the extraordinary discrepancy which this case

exhibited between the symptoms observed during life, and the morbid appearances discovered after death; the dissection was slowly and carefully conducted, and occupied five hours.

The following account will prove, that except ulceration of the bowels, we found nothing we expected, and many things totally unexpected.

*Post Mortem Examination of Mr. A. B. twenty-four Hours after Death.*—Body emaciated to an extreme degree: the scalp, cranium, dura mater, arachnoid, pia mater, together with the cortical and medullary substance of both cerebrum and cerebellum, all perfectly healthy; a very small quantity of transparent serum was found in the ventricles; there was no notable subarachnoid effusion.\* The spinal marrow and its investments were quite normal.

The *pleura pulmonalis* of the right side was every where intimately adherent to the ribs; *the right lung itself was rendered quite solid by tubercles*, which occupied its whole structure, and presented themselves in every stage of development, but no tubercular cavities could be detected; many crude tubercles were scattered through the otherwise healthy tissue of the lung.

The mucous membrane of the lower third of the ileum, of the cæcum, and colon was thickened, highly vascular, and extensively ulcerated. The liver healthy, gall bladder thickened, not larger than a *walnut*, and entirely filled with a gall stone.

This case is in many respects worthy of notice; in the first place we have here an example of a very violent form of epilepsy lasting for twenty-one years, giving rise to fatuity, and yet the most minute examination failed to detect the least trace of organic lesion in the cerebro-spinal system. That so for-

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\* In the short report of this case given in the last number of this Journal, subarachnoid effusion was erroneously stated to have been observed.

midable an affection of the brain could continue for so many years, producing a daily recurrence of convulsions, a frequent return of violent mania, and a thorough dilapidation of the intellect,—that such an affection could continue, without the occurrence of any observable changes of structure, is truly surprising, and militates strongly against the doctrine of many modern pathologists, who seek to explain every derangement of cerebral function by the lesions found on dissection. I have long ago stated in my published lectures, my agreement in opinion with those who maintain that epilepsy, mania, insanity, and fatuity, *may* arise without being caused by appreciable changes of structure in the brain or elsewhere ; in support of these views, I brought forward the remarkable case of a gentleman, subject to frequent attacks of falling sickness, for nearly thirty-years, and who was quite free from the disease during the last twenty-five years of his life. But if the case above related is well calculated to moderate our hopes of being always able to find lesions corresponding to symptoms, it is more strikingly available in teaching us that most extensive lesions may exist, without giving rise to a single notable symptom, for, during my patient's life neither acceleration of the pulse, cough, nor derangement of the respiration ever existed, and he never expectorated, and yet one of his lungs was consolidated by tubercles.

Without detracting from the true value of morbid anatomy, these facts (with many others already published by various authors) prove that the attempt to connect symptoms with diseased alterations of structure is attended with many difficulties, and is often impracticable.