

Individual and family peculiarities appear, however, to favour in an important manner the development of the affection.

The time has not arrived when the meteorology of the epidemic can be submitted to discussion, our data extending only to the acme of the outbreak, supposing the acme to have occurred in 1859.* In the meantime, however, it is important to note that the epidemic of diphtheria must not be studied alone, if we would rightly appreciate the "constitution" of the period in which it occurred.

If we examine the mortality returns for the thirteen years 1847-59, we find that *scarlet fever* underwent a prodigious increase in 1858, and prevailed in that year to a greater extent than in any previous year of the thirteen. (The annual average of deaths from this disease in the thirteen years was 17,411; the deaths in 1858 amounted to 30,317.) The mortality from *croup* advanced year by year from 1854, the disease being epidemic in 1856, '57, '58, and '59—the epidemic culminating in 1858. The mortality from this disease was also prodigiously above the average of preceding years, increasing from 3660 in 1853 to 6220 in 1858. The mortality from *thrush* was also greatly in excess in 1858-59, though not to the same extent as in 1848 and 1852. The mortality from *quinsy* was in excess in 1857-58, in the latter year attaining a higher point than in any previous year. The mortality from *noma* underwent a remarkable increase in 1855, '56, '57, '58, and '59, the acme being in 1857. Finally, the mortality from *laryngitis* underwent a steady development from 762 in 1847 to no less an extent than 1439 in 1858! In fact, it is not too much to say that *all the affections allied to diphtheria prevailed epidemically contemporaneously with the epidemic of diphtheria*.

The foregoing facts give additional significance to the unusual prevalence of sore-throat at the same time as diphtheria. Dr. Greenhow has aptly said that "diarrhoea and sore-throat are respectively congeners of cholera and diphtheria, from which their difference is less one of character than of degree."

Guildford-street, Russell-square, July, 1862.

ON A

CASE OF ENCYSTED ABSCESS IN BOTH HEMISPHERES OF THE BRAIN.

By A. LEITH ADAMS, M.B.,
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PRIVATE R—, aged thirty-one, was admitted into hospital May 24th for what appeared to be a painful form of dyspepsia. He complained of pains in the epigastrium, extending towards the left side; constant sickness of the stomach, which, however, did not amount to vomiting; and a sense of oppression in the chest: all of a few days' standing. These symptoms continued for upwards of a fortnight, and then gradually disappeared, and he left hospital on the 10th of June, apparently almost cured, complaining only of a feeling of slight dyspnoea. The former sensations, however, soon recurred, and he was obliged to be readmitted on the 28th of August. His general health and appetite were then pretty good, and bowels regular; over the stomach there was some tenderness on pressure, and the sickness was more severe and persistent. It was evident, moreover, that since he left hospital a great change had taken place in his appearance and manners; his countenance was now heavy and careworn, and he had become taciturn and indifferently, and never spoke to anyone unless when addressed. For about a week after admission, he kept assuring me daily of an improvement in his state of health, and answered questions quite rationally; his memory to all appearance seemed unimpaired. At that time he began to pass urine and stools in bed when asleep, and was in the habit of walking about at night. On the 8th of September he complained for the first time of dull, heavy pain in the crown of the head, which becoming more severe on the following day, he was given a strong purgative, and two dozen leeches were applied to the forehead and temples; head shaved, and a blister to the nape. The latter, he said, removed the headache entirely; but his mind and body were evidently becoming daily weaker, and he con-

tinued passing the evacuations involuntarily, even during his waking hours,—the urine by drops. It was now with great difficulty he was persuaded to take nourishment, and could scarcely be kept in bed. On the 13th of September he fell into a comatose state, which continued up to his death on the 15th of the same month. There was no paralysis or twitching of the extremities.

A post-mortem examination showed the membranes of the brain to be somewhat congested, but without any opacities, thickening, or effusion. There was a small quantity of serous fluid in the lateral ventricles. Two abscesses, each of the size of an orange, and filled with pure, yellow, inodorous pus, were found in the anterior lobes of both hemispheres, and surrounded by firm cysts of considerable thickness. The surrounding cerebral substance was soft, and easily broken up; even the cerebellum was less firm than usual. The other organs appeared healthy.

This case seems to me worthy of being placed on record on account of the general obscurity of the symptoms, and absence of convulsions or paralysis, beyond weakness of the sphincters. It is also worthy of note that the pain almost invariably present in such-like cases* existed only for a few days, and was not unusually severe, and disappeared after the application of a blister. Coma only came on within three days of his death. Sickness of the stomach, so frequently noticed by authorities as a valuable symptom of organic disease of the brain, was well marked, and became the earliest and most constant symptom. Taking this into account, with the thickness of the walls of the cysts, we can conjecture the existence of the abscesses from the first appearance of the symptom about three months and a half before death. There was no history of the man having received an injury to the head, and up to a few days before his first admission into hospital he had always been stout and healthy.

Malta, June, 1862.

A SINGULAR

CASE OF RESUSCITATION IN A FŒTUS AFTER LONG-SUSPENDED ANIMATION.

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THERE is nothing connected with the practice of midwifery which can afford more satisfaction to the parents and credit to the medical attendant than the restoration of the suspended life of a newly-born infant; and to effect this object it behoves us in every case to try all means that experience has approved. The following case is, perhaps, not an uncommon one; but I have never read of an instance in which life has been restored after so long a period as forty minutes after delivery, and more especially after the child has been pronounced dead by a surgeon. It is on account of the latter circumstance that I would present the particulars to the profession, with the object of cautioning others against falling into a similar error.

I was summoned to a case of labour, but by some means the message was delayed, and another surgeon was sent for; the child was born before he arrived, and upon examination he pronounced it still born, soon afterwards taking his departure. Twenty minutes after this I arrived, and found the family in deep sorrow for the supposed dead infant. I hastened to the bed-room, where the nurse was washing the body prior to laying it out on a table already prepared for that purpose. I determined, however, to examine the little thing; and, placing my fingers over the region of the heart, I detected a fluttering, so slight that at first I hardly knew whether it was the pulsation in my own fingers or the feeble action of the child's heart. The surface of the body was of a dark-livid colour, as also the lips, &c. I at once commenced forcing air through the mouth, by means of my own, into the chest, alternately inflating the lungs and depressing the ribs, taking care to compress the nostrils, and with my other hand slightly pressing the stomach to prevent air entering that organ as much as possible. The body was enveloped in flannel and held before the fire. After continuing this for forty minutes it gave a sigh. I persevered twenty minutes more, after which time it began to breathe of itself, and was handed to the thankful mother.

Blombsbury-square, July, 1862.

* Since this was written, the Registrar-General's Report for 1860 has been published. In 1859 the deaths from diphtheria amounted to 9507; in 1860, to 5212.

* See Romberg on Diseases of the Nervous System, vol. ii., p. 186; and Abercrombie on Diseases of the Brain.