

when they saw a traveller wounded by the way, came and looked on him, and passed by on the other side. Those who act in this way should recollect that our Saviour did not consider these men neighbours unto him who fell amongst thieves, but the Samaritan who showed mercy unto him, and bound up his wounds. The would-be Christian may read with advantage the injunction of our Redeemer contained in the following verse, when he said to his disciples, "Go thou and do likewise."

Prostitution, it is true, may not be a proper subject of conversation for the domestic hearth; but even the father of a family, be he rich or in needy circumstances, may himself do well to consider, whether, with sons growing up who in after life will be exposed to the temptations which many others have given way to, he may not feel interested in doing something to improve this neglected state of a large portion of the population, from filial interest, even if he be indifferent to the subject on grounds of public hygiene.

To those who would not treat prostitutes, but would shut them out of every institution, and would not even subscribe a guinea for their recovery, it is, I fear, hopeless to appeal. Experience shows that society will not do this, but will shirk its duties, just as the private individual has attempted to do, who will grumble and object to be taxed for the formation of public sewers not in his immediate neighbourhood. In all these and similar cases Government must interfere, otherwise nothing will be done; but I have always maintained that it is, as it has always been, the noble privilege of our profession, for medical men to point out to the authorities and the public the mistaken notions and popular errors existing on these and similar subjects, when they feel convinced that they are advocating measures for the public good.

I would wish my readers to remark, that in making the preceding observations I by no means wish to introduce into England French notions on prostitution. I at once state that I think them incompatible with British habits and the liberty of the subject; but I intend shortly to lay preventive measures before the profession in detail.

In my next I propose treating of the modern treatment of gonorrhoea.

Queen Anne-street, Dec. 1855.

ON THE

BENEFICIAL EFFECT OF CREOSOTE ON WARTY EXCRESCENCES.

By GEORGE RAINEY, Esq., M.R.C.S.,

LECTURER ON ANATOMY AND DEMONSTRATOR OF MICROSCOPICAL AND SURGICAL ANATOMY AT ST. THOMAS'S HOSPITAL.

It occurred to me, about three years ago; whilst making some experiments on the effects of creosote in preventing and arresting cell-growth, in solutions of substances remarkable for their rapid development of fungi, that it might possibly be applied with advantage in that obstinate form of porrigo called "porrigo lupinosa," especially if taken internally at the same time. This idea I mentioned some time afterwards to Dr. Bristowe, assistant-physician to St. Thomas's Hospital, who thought it sufficiently feasible to deserve a trial, and accordingly he resolved to employ it in the next case of this complaint which came under his care. He has not, however, since met with a case of this disease; I therefore determined to try it in some other disease resulting from excessive or abnormal cell-development, and last summer I took the opportunity of trying its effect on an obstinate warty excrescence on the finger, which was spreading very fast, in which case its action was very decisive, and to all appearance specific.

In order to secure the full effect of the creosote on the disease, after applying it freely to the part, I prevented its removal by a piece of adhesive plaster put several times round the finger, which was allowed to remain for two days. On removing the plaster, a visible change had taken place in the character of the surface of the excrescence, which now, in the place of being dry and hard, had become so soft and friable as to admit of being broken down by the slightest friction of the finger. The daily application of the creosote was, however, still continued until the remains of the wart had become of a horny consistence, after which, in about a fortnight, it desquamated, leaving the part beneath perfectly healthy.

The creosote, in this case, caused no pain or uneasiness, or any symptom which indicated an escharotic action on the

affected part, but seemed to act entirely by destroying that excessive and abnormal cell-development which is the essential character of this form of disease.

In these excrescences there is what pathologists call hypertrophy of the epidermis. The epidermic cells also retain their nuclei and power of cell-growth longer than the normal epidermic cells of the stratum Malpighii of the surrounding parts; and the transformation of these cells into non-nucleated particles or scales, takes place irregularly and at no certain distance from the surface, as in the healthy epidermis. After a time the capillaries become enlarged, but this seems to be only the effect of the excessive and abnormal development of the cells which are dependent upon their contents for their supply of nutritive material.

As only one instance of the beneficial effects of this substance would be totally insufficient to establish its claim to be a specific, I asked Mr. Ord, the house-surgeon of St. Thomas's Hospital, if he would try its effects on some of the out-patients, as, if it did no good it could not possibly do harm, which he informs me he has done, with a satisfactory result. It is also with the view of further testing its efficacy that I have been induced to ask permission to insert the present communication in this widely-circulated periodical, hoping that, if any reader should think proper to try its effects upon the disease in question, he will give it a complete trial.

I may further add, that it seems to me no unreasonable inference, that if creosote is capable of destroying excessive or abnormal cell-growth in the dermic tissue, it may also do the same in analogous diseases of the mucous tissues, and therefore that it may possibly be applied with advantage in nasal and uterine polypi. In these cases I would not recommend it unless it could be kept in contact with the diseased part for a considerable length of time. I have even recommended a professional friend of mine, who has at this time a case of epithelial cancer under his care, to make a trial of it in this disease.

As this class of diseases, besides being distinguished by abnormal cell-growth of greater or less activity, is also attended with a disordered condition of the system, the local application of creosote would not of itself be likely to be of much service. In such cases it would require to be taken also internally, and probably to be persisted in for many months, according to the effect it might have upon the local disease or upon the general health. I may observe that I am by no means sanguine as to the beneficial effects of the remedy I am proposing in those diseases which are known by the term malignant. My expectations upon this point are far from rising to an extravagant elevation. I merely think from what I have seen of its action that it is just worthy of a fair trial, especially as these diseases are at present incurable, and as the remedy which I propose for their cure or relief, very different to many others employed for the same purpose, is incapable of doing any harm, should it fail to do any good. It is impossible for me to say how far creosote may have been used in the diseases for which I have proposed to employ it. I have not read of any case of the kind where it has been employed, and no one of the medical men that I have interrogated upon the subject knows of any instance of its employment in the same complaint, and with the same physiological view, as that I have advanced. About a month since I went to a medical man's house to ask him if he could furnish me with any cases of warts, &c., upon which he could employ creosote. A person not in the profession was present, who, hearing the conversation, said he had taken a little boy to a druggist's some time before to have something applied to a wart, which he believed was creosote, and which cured it. This is all that I have heard of the employment of this substance in any of the above-named diseases.

St. Thomas's Hospital, November, 1855.

A CONTRIBUTION TO THE MATERIA MEDICA.

By ISAAC PIDDUCK, M.D.,

PHYSICIAN TO THE BLOOMSBURY DISPENSARY.

DESIROUS of obtaining a convenient form of iodine for the purpose of inhalation in a case of laryngeal phthisis, it occurred to me that the iodine might be disengaged from the hypoiodite of lime—a salt similar in its constitution to the hypochlorite of lime—by means of an acid when diffused in hot water.

Conversing with Mr. Morson, the chemist, upon the subject, he kindly undertook to prepare some of the salt for me, which

he named iodized lime. The salt in its dry state is probably a hypoiodite of lime. Diffused in hot water, a clear solution of iodate of lime and iodide of calcium is formed, and the excess of the lime is precipitated.

The *rationale* of this transformation appears to be as follows: A portion of lime parts with its oxygen to a portion of the iodic acid of the hypoiodite, and forms iodic acid (I O_3), which, combining with its equivalent of lime, forms iodate of lime (Ca O, I O_3), and the portion of calcium thus set free, combining with its equivalent of iodine, constitutes the iodide of calcium.

In the clear solution the presence of free lime, iodate of lime, and iodide of calcium are detected by the usual tests, besides a small quantity of iodoform. That the solution contains all the iodine is proved by none of it remaining in the deposit. A solution of uniform strength is obtained by employing definite proportions of iodine and lime in preparing the salt. The proportions are one part of iodine to seven parts of lime, so that one drachm of the salt contains about eight grains and a half of iodine; and in the proportion of one drachm of the salt to one pint of water a fluid ounce of the solution contains half a grain of pure iodine in the state of the above-mentioned combinations.

For the purpose of inhalation, external application, and internal administration, this salt affords an inexpensive and convenient mode of employing iodine.

For inhalation, one drachm of the salt diffused in one pint of boiling water, adding one drachm of diluted sulphuric acid to the clear solution poured off from the deposit. The watery vapour containing the iodine may be collected and inhaled through a glass or porcelain funnel inverted over the basin containing the hot solution, with or without the addition of tincture of conium or henbane. But the easiest and safest mode of inhalation is by surrounding the patient with an iodized atmosphere. This is done by rubbing the chest with the following liniment:—Half a drachm of the salt mixed with one ounce of soap-liniment, pouring off the clear part from the deposit, or with an ointment made by mixing one drachm of the salt with one ounce of lard.

For internal administration, one drachm of the salt may be diffused through one pint of boiling water; when cold, decanting off the clear solution, and keeping it in a well-closed bottle. Dose, half a fluid ounce, with two drachms of the compound fluid extract of sarsaparilla, or one ounce of a bitter infusion, one hour or two after food.

It is incompatible with the vegetable and mineral acids, which precipitate the iodine, and with the alkaline carbonates which throw down the lime.

It is true that the quantity of iodine in the solution is minute, half a grain only of pure iodine in the ounce. But this is an advantage, the introduction of mineral substances into the system being more readily effected by small than by large doses, which, by inflaming the mucous membrane of the alimentary canal or the cutaneous surface, close the orifices of the absorbents, and bar the entrance of the remedy. The question is not how large a dose or how large a quantity of an active agent the constitution of a patient will bear, but how small a quantity is sufficient to effect the cure of a disease; and that there are medicinal as well as natural diseases every day's experience tends to prove; neither can there be a doubt that medicines which are potent to cure disease are equally potent to cause disease, though of a totally different kind.

The action of iodine upon the body is so well understood that it is unnecessary to enter upon the consideration of this subject. I may, however, mention a few of the intentions for which this preparation is extensively used at the Bloomsbury Dispensary.

1. As an inland succedaneum for sea-air in cases of scrofula and general debility, or, in combination with iron, in chlorotic and anæmic diseases.

2. As a deobstruent and absorbent of hypertrophied structures and tuberculous deposits. The liniment externally and the solution internally have been successfully employed in the early stage of phthisis, with or without cod-liver oil.

3. As an antidote for metallic poisons—mercury, lead, copper. Hence the efficacy of the solution in muscular tremors, in neuralgia, and rheumatism of internal organs and external parts caused by these poisons. The evidence of their presence in the system is obtained from the history of the case and from the appearance of the free margin of the gums, which is red in mercurial, blue in leaden, and green in cupreous poisoning. The *modus operandi* of the iodine is probably by uniting with these metals in the blood and tissues, and promoting their expulsion from the body.

The patients at the dispensary affected with one or other of these forms of constitutional poisoning are numerous, and I hope at some future period to publish a sufficient number of them to establish the efficacy of iodine in relieving a large class of sufferers under a hitherto hopeless and intractable form of disease.

Montague-street, Russell-square, November, 1855.

ON A CASE OF GUN-SHOT WOUND.

By WILLIAM LONEY, Esq., M.R.C.S.E.

On the 28th of August, 1855, I was called to see a case just brought into the Macclesfield workhouse, to which I am surgeon. The patient, W. M—, aged fifteen years, had been shot by a boy with a rifle bullet at two yards' distance. Blood was flowing from a wound in the inner angle of the left eye, and he was evidently suffering great pain, though in a state of partial insensibility, perhaps from the loss of blood. On the following day he was able to tell me that the bullet was in his head. The sight of the *right* eye was gone, and although the left was uninjured, he was several days before he could open it. On the 7th of September, I succeeded in extracting the ball from the back of the head; it was lying on the occipital bone. He died on the 10th of October greatly emaciated, being sensible to the last moment, and in no degree paralysed; having lived forty-three days in a state of great agony.

On making a post-mortem examination ten hours afterwards, I found bloody points in the medullary portion of the brain, all the ventricles filled with pus. I traced the wound from the inner angle of the left eye through the sphenoid bone and squamous portion of the temporal bone, through the right ventricle of the brain to the external wound or opening about one inch above the tip of the helix. A small fragment of bone was driven under the scalp round to the protuberance of the occiput. The opening in the skull was jagged and irregular.

Macclesfield, November, 1855.

Medical Societies.

ROYAL MEDICAL & CHIRURGICAL SOCIETY.

TUESDAY, NOV. 27TH, 1855.

MR. CÆSAR HAWKINS, PRESIDENT.

ON THE ACTION OF DIGITALIS UPON THE UTERUS.

BY W. HOWSHIP DICKENSON, ESQ.,
LATE OBSTETRIC ASSISTANT AT ST. GEORGE'S HOSPITAL.
(Communicated by Dr. BENCE JONES.)

THE writer commenced his paper by stating that during the month of October, 1854, a patient in St. George's Hospital, labouring under most severe menorrhagia, was cured by the infusion of digitalis, exhibited for the relief of cardiac affection, from which she also suffered. In consequence of this, he had been induced to try the remedy, by the permission of Dr. Lee, in a series of cases of uterine hæmorrhage which had occurred in the hospital. These cases, of which a table was given, were seventeen in number, and the general results of their treatment was as follows:—In every case of uterine hæmorrhage, unconnected with organic disease, requiring the employment of active remedies, admitted into the hospital after October, 1854, the administration of digitalis was had recourse to as the sole treatment, and the discharge was invariably arrested by it. The time which elapsed before the hæmorrhage subsided varied with the dose in which the digitalis was exhibited. When large doses were given, as an ounce to an ounce and a half of the infusion, the discharge never appeared after the second day; when smaller doses, it never continued beyond the fourth day. In uterine hæmorrhage connected with organic disease, the remedy acted with less certainty; its exhibition was required for a longer time, and the effect was sometimes transient. The author then spoke of the mode in which the digitalis operated in controlling uterine hæmorrhage; and after concluding that its effect could not depend on the sedative influence of the drug in the heart and arteries, he showed, by various experiments and observations, that the arrest of the hæmorrhage was due to the action of the digitalis on the ganglia of the uterus, by which the organ was stimulated, and the muscular substance powerfully contracted.