

sharp. Suffers most indescribable pain after every effort to urinate; constant dribbling of urine. The pain is chiefly concentrated in the end of urethra; complains, however, of some pain about the region of the kidneys. Percussion of lower part of the abdomen increases the pain. I made an effort to pass a small sound, which gave rise to much pain when it reached the prostatic portion, which seemed to offer some obstruction, and I found myself obliged to desist. Riding in a carriage of any kind, running, jumping, or even walking, occasions great pain. Prepuce enlarged and elongated. Bowels generally relaxed, but now somewhat costive.

Diagnosis.—Inflammation of the neck of the bladder, with stricture of the urethra.

Treatment.—After a sufficient anodyne, gr. 4 of calomel, to be followed in the morning with sulph. mag. and senna; the same to be repeated after three days. Dov. pulv. with nit. pot. night and morning. Strong decoction of uva ursi, a wineglassfull, containing eight drops tr. opii, at noon each day. Alkaline solution frequently during the day, and also to use, as a common drink, a decoction of the galium aparine. Foment abdomen. Diet, antiphlogistic.

Sept. 5th.—All the symptoms much relieved. Continue same treatment.

12th.—Has had, since last visit, one severe paroxysm of pain, caused by riding. No more incontinence of urine. Can pass a full stream at will, and with very little pain. Still complains of pain in bladder and loins from any violent exercise. Treatment as on 5th, except the fomentations to give place to the daily application of sinapisms to the hypogastrium.

19th.—Still improving; less pain; general health better. Treatment as before.

26th.—No urinary trouble since last visit; and only complains when he receives a sudden jar. Cervical glands swollen and tender. Has had dysentery part of the week, but is quite relieved; some blisters on the abdomen and loins from the mustard. Treatment mercurial but once during coming week. No other change.

October 3d.—Convalescing. Treatment, omit mustard. No other change.

18th.—Still convalescing.

31st.—Discharged well.

March 11th, 1852.—Had a slight paroxysm of pain from over-exertion, since which he has continued *well*, and rapidly increased in stature. He now presents a ruddy countenance, and endures all sorts of exercise and exposure as well as other children. C. B. GALENTINE.

Rush, Monroe Co., N. Y., July 7th, 1852.

CURE BY IMAGINATION—TREATMENT OF RHEUMATISM.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I have just been looking over the 23d No. of the "Boston Medical and Surgical Journal," dated July 7th, 1852. In it I notice

an "Extraordinary cure of rheumatism, by Dr. J. E. Stewart, Jackson, Tenn." The article is certainly calculated to excite the risibles—as we imagine the ludicrous appearance of the patient in the morning, when daylight revealed the *dyeing* effects of the remedy! But if the doctor had looked deeper into the matter, he might perhaps have learned a physiological truth that would have been of some service to the healing art. In noticing "Acton's Treatise on the Urinary Organs," in the same number of the Journal, you say: "Since it is the business of physicians to cure diseases, their first ambition should be to keep pace with the progress of discovery in the various branches of medicine." Now if the doctor *has* "kept pace" with recent discoveries and experiments in physiological chemistry, and microscopical observations on living organisms, the motion and action of "animal juices," the porosity of animal membranes, ligaments, tendons and other organic tissues—the penetrability and permeability of certain fluids into and through these structures, imparting flexibility, elasticity and irritability to these organs when they have become dried, hardened and brittle by being deprived of the fluids they contain when in a normal condition—he must have learned some important truths in relation to rheumatism, and many other diseases that have heretofore been shrouded in mystery more dark than the inky covering of his hero. He must also have learned that the dull aching pains constantly experienced by the rheumatic patient, are caused by a hardening and contracting of the tendons at the origin and insertion of the muscles, and of the ligamentous appendages about the joints, and a consequent tension of the muscles; and that the sharp, darting and piercing pains on the least motion of the patient in the same disease, are caused by the pressure of these hardened structures upon the nerves that pass through them, or along their parietes. He would also have learned that this hardening, and contracting of the tendons, ligaments, and cartilages, was caused by their being deprived of the fluids that give them elasticity and flexibility when in a normal state. And if he had extended his observations still further with the same laudable desire, viz., "to keep pace with the discoveries in medical science," he would have learned that the nostrum mentioned in the article referred to was a scientific preparation of a naphthaline substance, combined with volatile and fixed alkalies, and *water*—possessing the properties of penetrating and permeating animal membranes, opening the porous tubes, stimulating the absorbents and secretories, and thus restoring healthy action. He might also have learned that even the *ink*, in the case quoted by him (being a tannate of iron), may have played no mean part in restoring the patient—it being a powerful astringent; and being applied *after* the liniment had been freely used, it contracted and closed the external orifices of the minute capillary tubes that discharge the fluids from the surface, and thus retained them until, by the constant pressure, accumulations, and movements outward (called endosmosis), in their efforts to escape, dilated, injected and filled up the indurated tendons, and caused them to become softened, relaxed and flexible, and the man was cured—not by "the force of the imagination," but in fact by a purely scientific action of the remedies used. I would not, however, recom-

mend a repetition of the *ink*, as the liniment will effect a cure and not leave a *stain*!

Yours respectfully,

New York, July 13th, 1852.

G. W. WESTBROOK.

DIARRHŒA AT THE ISTHMUS OF PANAMA.

BY JOHN A. LIDELL, M.D., OF NEW YORK.

THIS disease was exceedingly common on the Isthmus. Almost every body had at least occasional attacks of it, and some persons suffered severely.

Besides that depending upon intestinal ulceration we noticed *three* distinct forms: first, the *simple*, or *diarrhœa crapulosa* of some nosologists; second, the *bilious*; and third, the *catarrhal*.

The simple form of diarrhœa resulted principally from excesses in eating and drinking. When food was taken in so great a quantity that it could not be properly chymified in the stomach, and absorbed by the lacteals, it ran off by the bowels, occasioning, in this manner, more or less flux. On the days when rations of fresh beef were dealt out to the men, we always expected that the following morning would bring us a large increase in the number of diarrhœa patients, and we were never disappointed. The fault did not lie in the quality of the meat, but in the quantity which the people consumed. Those who partook moderately of it did not suffer at all.

In most cases the only treatment required was the complete removal of the cause. This we generally effected by a dose of castor oil, containing ten or fifteen drops of laudanum. But in some persons the intestinal mucous membrane was strongly predisposed to take on morbid actions, and the diarrhœa, though simple in its origin, was accompanied by prostration of strength, much griping, and tenderness of the belly. To them it was necessary to administer, besides a laxative, mucilage, small doses of opium, sinapisms, or poultices to the abdomen, and a light unirritating diet.

Bilious diarrhœa seemed to be directly occasioned by the excessive quantity and acrid quality of the hepatic secretion, and was one of the most common forms that came under our observation. The flux in these cases was occasioned both by the abnormal amount of bile poured into the alimentary canal, and by the morbid action (irritation), which its abnormal quality produced in the intestinal mucous membrane.

The following plan of treatment was adopted. At the outset a laxative was administered for the purpose of clearing out the bowels. We used castor oil and laudanum, *infusum rhei cum sodâ*, *pulvis rhei et magnesia* and Seidlitz powders; but generally preferred castor oil and laudanum. To neutralize the acidity of the intestinal contents, and to allay intestinal irritation, we gave powders containing two or three grains of bicarbonate of soda, and one quarter or one half grain of opium every four hours, or as often as the bowels moved, commencing as soon as the laxative had operated well. Rest was also conjoined, and a light, bland diet, consisting of arrow-root, farina or oatmeal gruel. The laxative was