

of compound fracture of the elbow-joint (the subject was a gentleman aged 74, a neighbour of Sir Astley's), a pasteboard splint and an evaporating lotion were used. This dressing was not disturbed until the twenty-fifth day after the accident." "The wound was some time in healing, *being prevented by the pressure of the splint.*" This suffering was endured for a month, wanting three days only, by an old man with all the fidgety uneasiness of seventy-four years upon him. I fear this case did not end to the patient's comfort at those gastronomic seasons, when he wanted to carry a cup or a fork to his mouth. This recluse system of casing up limbs from the eye for a month, much as I admire Sir Astley Cooper as an operative surgeon, takes I think from his credit for penetration into the remedial processes of the body.*

At page 259 of the treatise, we are recommended to apply a many-tailed bandage; and at page 370 "a light bandage in cases of fracture, wetted with spirits of wine and water." This application to most recent cases of fracture is decidedly bad. Let spirit be diluted with water ever so much, still the compound will be a stimulant. The first indication of surgery in these cases is to prevent heat which stimulation excites, and the second is to allay and subdue heat when it has been excited. The injury of the fracture itself, when effected with as little violence as may be, the jarring extremities of the bone acting on the soft parts, will always be a powerful exciting cause of heat,

* A very ugly "cure" of fracture at the upper portion of the tibia, four or five inches from the inferior point of the patella, occurred to a respectable farmer in the prime of life, a few miles from hence, by a cart-wheel passing over it. The surgeon splinted and bandaged as usual. The leg was seldom examined, the real position of the fractured ends of the bones was for the greater part of the time concealed; and when the limb was examined, the soreness was so great from the pressure, and the tumefaction so long remained, that little good was done by gentle extensions from time to time, or any other kind of motion. Twelvemonths afterwards the good man showed me the limb. I concealed my surprise, for the projection of the superior edge of the fractured portion of the tibia, over the inferior portion of the bone, was full *three quarters of an inch*. Of course that projection was anteriorly and superiorly. He called it a "cure!" Why it was five years before the man could bear to step firmly with the leg, the weight of his body overhanging the line of bearing on the foot! He was told by his surgeon that all this displacement and weakness was a part of the consequences naturally attendant on so bad a species of fracture. Of course I did not disturb this opinion. I only recommended him to make "the best of a bad matter," encouraging him with the hope that time would mend it a little, under the long-continued auspices of a plastered, circular, dressed skin, and a bandage which he wore for a year, having them from time to time renewed.

irritation, and pain. But in cases where severe contusion has been unfortunately superadded, I have found ample employment in obviating the accession of heat and its effects in the use of a very weak lotion of water and superacetate of lead, or some decided sedative; or in tepid bathing, with exposure to the atmosphere to promote evaporation. This object cannot be attended to under the customary mode of proceeding.

(To be concluded.)

PECULIAR RELAXATIONS OF THE UTERUS.

By F. MONTGOMERY, M.D., *Physician-Accoucheur to Sir Patrick Dun's Hospital.**

WHEN the uterus has expelled the product of conception at any period of its growth, active contraction should immediately commence, and its volume be speedily reduced to its original dimensions. But matters do not always proceed thus favourably, the uterus being liable to fall into a state of atony and relaxation. One condition of this accident, of whose existence I have fully satisfied myself in many instances, has not, as far as I am aware, been noticed by any writer; the peculiarity of it being, that it continues in a chronic form, occurring most frequently after early abortions, which, however, are not necessarily connected with any loss of blood during the miscarriage; but when the patient is beginning to take exercise, she is unexpectedly seized with considerable hemorrhagic and leucorrhœal discharges, inducing great debility and alarming apprehensions, with, most frequently, no pain, but a sense of internal fulness, which appears to her to interfere with her passing water; she has a dull aching feel in the small of the back, and is constantly annoyed by a sensation of relaxation in the whole contents of the pelvis. On examination the vagina is found unusually relaxed, and the os uteri gaping, with its lips tumid, thickened, and projecting, soft, and flabby; the cervix is dilated, its natural tapering form is gone, and the body of the uterus itself is felt to be enlarged and doughy when pressed by the finger, the organ appearing quite insensible. This condition may persist sometimes for months, with various degrees of constitutional disturbance, the discharges being sometimes so profuse as to endanger life, sometimes but slight, or only occasional, at length attracting attention more by their continuance, than by the severity of the attending symptoms. Conception even is very apt to

* Condensed from the Dublin Journal, Nov. 1835.

occur under these circumstances; but if the tone of the uterus is not soon completely restored, abortion will almost inevitably happen. The details of a few cases will elucidate these points.

CASE 1.—In July, 1830, I was called to see a lady who had just miscarried in the second month of gestation, with profuse hemorrhage. She had miscarried twice already within the preceding six months. On this third occasion she *seemed* to recover well, and left her bed in a week. A tonic system of treatment now employed by me failed, and she did not cease to have vaginal discharges. I then examined the os uteri, and found it just in the state it had been in a month before, gaping open, soft, relaxed, and flabby. I recommended her to go to the sea-shore, leaving her husband behind. This was done; she took small quantities of quinine and gentian, with aromatic sulphuric acid, and bathed every day until November, when she returned home completely re-established in health, and immediately afterwards conceived, and on the 6th of the following August* gave birth to a fine healthy child, which she nursed with success. She has had two children since.

CASE 2.—On the 30th of January, 1832, Mrs. V. aborted, without either pain or hemorrhage, on making water, in the third month. She had been some time before greatly startled by a hatching hen, and she now gravely asked me if I did not think what she had been delivered of was very like a chicken. At the end of a week she was able to go about as usual. Two months after the miscarriage she sent for me; from the time of the abortion she had never been entirely free from vaginal discharge, and pains, resembling slight after-pains, with vesical irritation and dysuria. I found the uterus almost exactly in the state I had felt it two months before. Tonics, free ablation of the lower part of the trunk with cold salt water, and opening sea-bathing as soon as the weather permitted, perfectly re-established her health in about six weeks, during which time she lived *absque marito*. She conceived again, and was delivered in February 1835.

CASE 3.—In the middle of April 1834, a sister to the patient Case 1, and mother of six or seven children, miscarried early in the third month, with very little pain or hemorrhage. At the end of a fortnight she went to church, felt greatly fatigued, was seized suddenly with a smart uterine hemorrhage, nearly fainted, and was conveyed home. Her medical attendant next day established a rigorous system of low diet, with water for drink, full doses of laudanum,

and constant cloths wet with vinegar and water; in addition to which a bag of chalk, moistened with vinegar, was introduced into the vagina. In a week matters had become much worse, and when I first saw her, she was unable to move, and almost without pulse, and shivering from being constantly soused in wet, and the mind depressed to the lowest degree of despair. I found excessive relaxation of the vagina, the os uteri so open that it would have admitted the points of three fingers, its lips tumid, but soft and puffy, and the body of the organ enlarged and doughy. I immediately had the wet cloths replaced with dry and warm ones, and ordered a jar of warm water to the feet, a scruple of ergot of rye in warm wine; jelly, good broths, chicken, and claret; tonics as in the former cases, and removal by-and-by into the country. She was soon much better, but had remained in town, and conceived again in June, and again miscarried in August, when I attended her; there was little hemorrhage, but the uterus was still relaxed, which I obviated by rest in the horizontal position for several days, a generous diet, and tonics. I also prevailed on her to go to the sea-side, her husband remaining at home. By the beginning of winter she had completely recovered, returned, conceived again, and in September 1835 was safely delivered of a daughter.

These facts promise to be useful from suggestions to us, in addition to other considerations, the obvious indication of using restoratives for the general powers of the system, the local application of tonic agents, and the use of specific stimulants to brace the uterus; but the chain of morbid actions can only be effectually broken by withdrawing the individual for the time from the possibility of conception, the uterus being, as is said in agriculture, allowed to lie fallow for a season. I have had a case in which this relaxed condition of the uterus was ascertained by dissection four weeks after labour, accompanied by profuse hemorrhage.

The uterus was found considerably larger than it ought to be at such a period after delivery (one month); measuring $4\frac{1}{2}$ inches in length, and more than $2\frac{1}{2}$ in breadth; its cavity would have contained an egg; the os uteri and cervix were quite open, and sufficiently relaxed to allow the introduction of my fore-finger; its parietes were about three-eighths of an inch thick, with the structure as soft and flabby as that of any other muscle in the body, so that it might be rolled round the finger, and when divided by the knife the vessels were found uncontracted and pervious.

There is a question which very often meets us in practice which it may be proper to notice here; ought patients who have experienced considerable hemorrhage in labour to be allowed to nurse? In my opinion they ought, if no other reason interfere, be-

* This lady told me on the 10th of December that her confinement would take place on the 5th of August; she had a few pains on the 4th, and again on the 5th, and was delivered on the 6th.

cause the mammary excitement which accompanies the early part of lactation, propagates its influence to the uterine system, promoting there active contraction. Indeed, it appears to me very probable that chronic relaxation after early abortion (independently of hemorrhage) being so much more frequent than it is after delivery at advanced periods of pregnancy, is attributable to the want of the mammary excitement. But the nursing we may find it necessary to prohibit beyond half or a quarter of the usual period. Every day's experience convinces us, that one woman will suffer more exhaustion by three months' nursing, than will another by twelve; and one of the ill effects thus produced is, I have reason to believe, this very condition of the uterus. It is perfectly well known that when nursing disagrees, or has been too long continued, the prominent symptoms are precisely those which accompany a relaxed uterus induced by other debilitating causes, and from examinations made under such circumstances, I have learned that the condition of the uterus which I have been describing is very frequently induced in a greater or less degree. In July last I saw a lady, of apparently sound constitution, who had been nursing for nearly seven months, and presented many of the morbid effects of undue lactation, such as derangement of the digestive organs, pain in the back and left side, with almost constant slight red discharges, and occasional leucorrhœa. I found the vagina greatly relaxed, the uterus slightly descended, enlarged, and softened, and the os uteri sufficiently open to admit the end of my finger. Immediate weaning, attention to the digestive organs, tepid salt-water baths, tonics, and sea-bathing, soon completely restored her health. Dr. M. Hall says that "the uterus suffers," but he does not specify how. I have only to add to what he has said, that what "the uterus suffers" is relaxation, both of its tissue, by which its vessels are allowed to discharge their contents too readily; and of its connexions, by which it acquires a tendency to prolapse: and when patients who have unduly given milk, conceive within a short time, they very generally miscarry.

The remedies that will do most service are in these cases, preparations of cinchona, gentian, colomba chalybeates, mineral acids, country air, sea bathing, and cold topical ablation. Should the hemorrhage burst out profusely, the tampon with pressure, instantly, and the ergot of rye, are the means on which generally our greatest reliance ought to be placed. *Occasionally* an opiate, or the application of cold, may be used with advantage; but I cannot avoid observing, that the indiscriminate liberality with which both these remedies are applied in practice is greatly to be deprecated. A napkin is often soaked in cold vinegar and water, laid

on the external parts, and removed smoking with heat; this is only a pretence of doing good. The general principle on which cold should be used, is that of its sudden application, as a stimulus to contraction, and not from its refrigerating power. With regard to the ergot of rye in cases of protracted menorrhagia, the specific action of that remedy is strongly confirmative of a belief that those discharges are often dependent on the relaxed state of the uterine fibres we have been considering, constantly leading to a suspicion of organic uterine disease, a suspicion which a vaginal examination rather tends to confirm, the organ being found increased in size, with the cervix and os uteri tumid and puffy; and I am strongly disposed to believe that this is really the condition of the uterus represented by Madame Boivin, 23rd Plate, Fig. 1, which she describes as "a scirrhus tumefaction of the posterior lip of the os uteri, taken from a woman who died of pulmonary consumption, after an abortion in the sixth month."

POISONING BY HYDROCYANIC ACID.

By T. G. GEOGHEGAN, M.D., *Prof. of Med. Juris. to the Coll. of Surg. in Ireland.*

THE particulars of the following instance of poisoning with hydrocyanic acid were related to me by the individual himself, and those who witnessed its effects:—

A gentleman, aged 21, being subject to uneasiness in the stomach, was induced to have recourse to hydrocyanic acid. He commenced with one minim of the acid of the Dublin Pharmacopœia (sp. gr. .998); this dose he repeated twelve times the first day, without any perceptible effect. On the following day he took half a drachm, on the third a drachm, which he repeated on the fourth day, and on the fifth day a drachm and a half; all without effect of any kind. On the sixth day he increased the dose to two drachms, and two minutes afterwards (a sensation of extreme bitterness being produced in the mouth), having walked a few paces, he experienced a feeling of great confusion, with headache, and loud ringing in his ears. With difficulty he retraced his steps, leaned forward on a table, became insensible, and then fell backwards, remaining in this state three or four minutes, during which time he was violently convulsed, and, to use the expression of the medical gentlemen present, affected like a rabbit poisoned with the acid. After he had become insensible, and while leaning on the table, his thighs were drawn up on the abdomen, and rigid; and as he was about falling they caught him, and placed him on the ground. The upper extremities were then