

Necrological register of all cases admitted to general hospital, Portugal, in 1827, compiled by William M. Ford, Assistant Surgeon to H.M. Forces in Portugal

Publication/Creation

1827-1828

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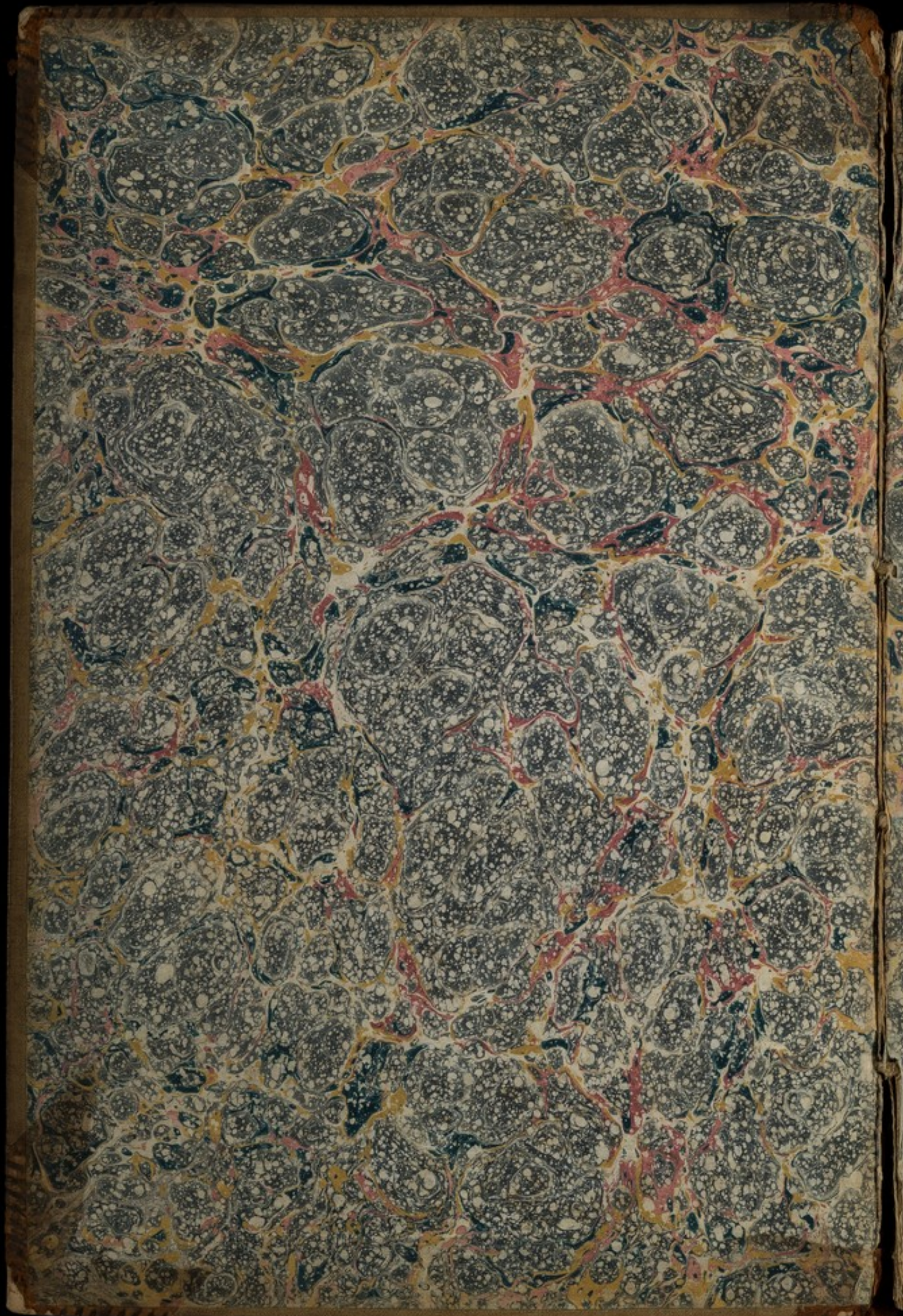


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*Necrological Register,
General Hospital, Lisbon;*

1827.

For Museum Reference.





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Sam. M. Ford, A. B.

Printed by the Press.

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HISTORY

Vol. 1
1827

AND

POST-MORTEM EXAMINATION

all
OF THE

FATAL CASES

OCCURRING

In His Majesty's
GENERAL HOSPITAL

PORTUGAL.

COMMENCING

JANUARY 17th

1827.

William M. Ford, A. 93.

Physic Surgeon to the Forces.

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HISTORY
AND
POST-MORTEM
EXAMINATION

OF THE
FATAL CASES

OCcurring

In His Majesty's

GENERAL HOSPITAL

By

COMMISSIONERS

JANUARY

1831

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Regiment.	Rank and Name.	Age	Disease.	Admitted.	Died.	Reg ^o .	Folio.
10 th Infantry	Private Michael Leahy	23	Febris Cont. Com: death on 5 th day	January 17 th	January 18 th	1	3

For four days previous to this man's reception into General Hospital he had laboured under pyrexial symptoms, for which he was reported to have been freely purged with Calomel and Jalap; on admission, high febrile excitement being present, attended with severe pain of head and chest, Venesection ad. 3xx was practiced with temporary relief, after which Purgative medicines were given; on the following morning he appeared stupid and dull, but when roused expressed himself as feeling better; a blister was applied to the back of his neck, and he had a stimulating draught, notwithstanding which he became gradually comatose, and expired within twenty four hours after his admission —

Sectio Cadaveris

The body was particularly well formed and wore the appearance of having been in perfect health up to a late period —

Cranium — The Encephalon had very little morbid appearance; the vessels of the Pia Mater were full, and many red specks were seen on the different sections which were made of the substance of the Brain; there was not any effusion observable —

Thorax — The posterior lobes of both Lungs were much inflamed but not hepaticized nor were there any adhesions — The Bronchial membrane was very vascular and covered with thick mucus

Abdomen — The Liver was much gorged with blood and the Stomach was very vascular, particularly its mucous lining; the small intestines were all vascular and thickened in some degree — signed, Edward Bradford.

Case treated by M^r Bradford — W. M. F.

Hospital Assistant —

N^o 2

Regiment.	Rank and Name.	Age	Disease.	Admitted.	Died.	Reg ^o .	Folio.
60 th Infantry	Private John Sweeney	30	Dyspnoea	January 23 rd	January 24 th	2 nd Div ^o No 2	1

About twelve months previous to his last illness this man had been for a considerable period under treatment with a Catarrhal affection, after which he was subject to Pectoral disease; on the second day's march from Lisbon to Leiria, being seized with violent pain in his breast attended with hurried respiration, he fell out of the ranks and on arriving at Leiria was taken into Regimental hospital, where he remained some time under treatment and was eventually transferred to General Hospital, labouring under cough attended with

puriform expectoration, pain of chest, and hurried, short respirations; he had also occasional febrile exacerbations. The treatment adopted consisted in the application of a blister to his chest, friction with Unguent. Ant. Tart. along the spine, and the use of purgative, demulcent, and expectorant medicines, notwithstanding, he gradually sunk, low delirium supervened and he expired at 2 o'clk P.M. of the 24th January —

Sectio Cadaveris.

Cranium — On examining the Brain, the veins were found loaded with dark coloured blood, and when the substance of the Brain was cut into, dark puncta were very numerous; there was not any effusion, either into the Ventricles or at the base of the Brain.

Thorax — The Lungs presented a much darker colour than natural and were also heavier; when cut into, a large quantity of dark coloured blood mixed with serum flowed from them — adhesions of old standing were found between the inferior lobe of the left Lung and the Diaphragm — The lining membrane of the Bronchia as also that of the Trachea was highly vascular and small quantities of lymph adhered to it — The Pericardium appeared remarkably full and tense and when cut into about $\frac{3}{4}$ of straw coloured fluid flowed out; the right ventricle and auricle contained much venous blood, and the parietes of the left ventricle were slightly thickened — valves sound.

Abdomen — No morbid appearance was detected in this cavity —

signed, J. Murtagh M.D.

Case treated by Dr. Murtagh — W.M.S.

Hospital Assistant —

.N^o 3

Regiment.	Rank and Name.	Age	Disease.	Admitted.	Died.	Regist.	Folio
11 th Infantry	Private John Lambert	25	Admitted - Febris Int. Com. Died - Pneumonia.	January 26 th	January 29 th	1	38

This man was received into General from Regimental Hospital on the evening of the 25th of January, having been nine days ill with fever, pain of chest, and oppressed breathing, for which he had been "bled, blistered and purged"; on admission the latter symptoms were so urgent that he was bled to $\frac{3}{4}$ with some degree of relief; on the following morning however, his breathing was short and oppressed, attended with cough, expectoration of bloody mucus, and considerable pains; pulse 100, small; in addition to the bleeding, purgative and sedative medicines were given but without producing much benefit, he gradually sunk and expired on the morning of the 29th, at 7 o'clk, A.M. —

Sectio Cadaveris.

Cranium — The Brain presented but little morbid appearance; its veins were full of blood and there was about $\frac{3}{4}$ of Serum in the Ventricles, but its arterial system appeared to have been but little excited; there were many red puncta observable on the surface of different sections, but they were of a darker colour than arterial blood —

Thorax - In this cavity there existed marks of violent inflammation; the right lung was covered with a thick layer of coagulable lymph, which caused it to adhere to the Pleura of the Ribs, Diaphragm and Pericardium universally; the substance of this lung was excessively firm, being as hard as Liver, and much heavier than in its natural state; when cut into, it presented marks of the extreme degree of inflammatory action, it was very dense, of a dark colour, and from its section there was poured out much bloody, purulent matter, which did not escape from any observable cavity, but from the surface generally - The left lung was healthy and the Heart of natural size and structure -

Abdomen - The Liver was much diseased, its size being increased, particularly on its convexity, which caused the space of the right Pleura to be much abridged; when cut into, it was firmer than natural, and of a much paler colour, very little blood escaped from the divided vessels; the gall bladder contained a small quantity of dark, thin bile - The other Abdominal viscera presented but little worthy of notice, not being altered either in colour or thickness from their natural structure, but the Spleen was rather larger and less full of blood than usual -

signed, Edward Bradford

Case treated by Mr Bradford - W. M. F.

Hospital Assistant -

N^o 4

Regiment	Rank and Name	Age	Disease	Admitted	Died	Regi ^o	Folio
R. S. Corps	Private Stephen Earle	19	Febria Remittens	January 21 st	January 30 th	1	21

This man was seized with fever on his passage out from England, or about the 4th of January, and was disembarked labouring under all the symptoms characterising the disease in its concentrated form; when first seen by a medical Officer (on the 14th of January) his debility was extreme, blood flowed from his nostrils and his stomach was excessively irritable, pain being produced by pressure on the Epigastrium; pulse about 100, full - a small quantity of blood was abstracted, which produced a perturbed action of the heart, a blister was applied over the stomach, and gr^o of Calomel with ℞. xxvij. of Laudanum were exhibited; these allayed the vomiting but sleep supervened and continued for two days, a blister was applied over his head and Calomel was given in small and repeated doses, green stools were passed and he slowly roused from his lethargic state into that of fretfulness, his pulse being quick and small and his tongue covered with brown fur and chapped; in this state he was removed on the evening of the 21st to General Hospital on the evening previous to which he was seized with pain in his right breast attended with troublesome cough, for which symptoms a blister was now applied to his chest, the debility continuing, Stimulating medicines and Port Wine were given, notwithstanding he gradually sunk and expired at 12 O'clock midnight of the 30th -

Sectio Cadaveris

Cranium - No disease observable in this cavity -

Thorax - The right Lung was collapsed and the cavity of the Chest on that side filled with turbid serum, in which were diffused portions of congluable lymph; the substance of the Lung when cut into, presented no diseased appearance further than fullness of the bloodvessels, the consequence of the contiguous inflammatory action having extended from the Pleura to the Viscus - The left Lung adhered by nearly the whole of its surface to the Pleura costalis; the firmness of these adhesions shewed that their origin was not recent - The Pericardium contained about $\frac{1}{2}$ of high coloured serum -

Abdomen - The Liver was much enlarged and gorged with deoxygenated blood, it adhered throughout its whole surface to the Diaphragm above, and to the Peritonium lining the Ribs and the fore part of the Abdomen; the Spleen was enlarged to about four times its natural size, its substance being changed into a soft, gummy, breaking mass -

Signed, Benjamin Campbell

Case treated by Doct^r Campbell - W. M. J. -

Spilt Lung^s to the Lungs -

N^o 5

Regiment.	Rank and Name.	Age.	Diseases.	Admitted.	Died.	Regist.	Folio
65 th Infantry	Private James Inkster	21	Febris cont: com:	January 17 th	February 1 st	1	1

For three months previous to this man's leaving England he had been under treatment for a Pectoral affection, from which however he had completely recovered before embarking for this country and he continued to enjoy good health until about a fortnight before his admission into General Hospital, at which time he laboured under Pyrexial symptom, his head being chiefly complained of, he had also much irritability of Stomach and his bowels were extremely torpid; various purgatives were given and cathartic enemata administered, blisters were applied to his head, neck and legs and leeches to his temples; notwithstanding, he became delirious on the 22nd Jan^y and appeared much dejected, in which state he continued, always complaining of his head, until the 28th when he became very stupid and almost fatalous, fever much subsided but extreme debility present, which latter continuing, Port wine and nutritious diet were given, a second blister was applied to his head, and purgative medicines were frequently given in consequence of the continued obstinacy of his bowels; on the 31st he became comatose, sometimes calling out in an incoherent strain, his extremities became cold, and he passed his excretions involuntarily; from this period he rapidly declined, and died at 7 O'clk P. M. of the 1st of February -

Cranium - The vessels of the Dura Mater, and particularly the veins were full of blood, and on that membrane being removed, the vessels of the Pia Mater were found quite full of dark coloured blood, which had imperfectly coagulated in them; the convolutions of the Brain were flattened by pressure, and sections of its substance presented many dark puncta; the Ventricles were full of limpid fluids and appear'd to contain about $\frac{3}{4}$; nothing remarkable was observed at the base of the Brain, except a very small quantity of purulent looking matter on the Pituitary gland -

Thorax - The Lungs were full of Miliary tubercles, some few of which were in a state of maturation, but the majority of them were still crude and insular, the left Lung adhered firmly to the Pleura - The Pericardium contained about $\frac{3}{4}$ of yellowish serum -

Abdomen - A great number of small, flat tubercles were found on the Diaphragm, between its Peritoneal coat and mesenteric fibres, on that part which is in contact with the right lobe of the Liver - The Liver itself was dark coloured but of healthy structure, and the Abdominal viscera were all healthy though of a dark colour, and the small intestines were in many places much contracted - The Gall bladder contained about $\frac{3}{4}$ of dark bile -

signed, Edward Bradford

Case treated by Mr. Bradford - W. M. S. -

Hospital Assistant -

N^o 6

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died.	Regist. Folio
4 th Infantry	Private Will ^m Standing	25	Pneumonia.	January 29 th	February 8 th	1 44

This man was transferred from Regimental to General Hospital on the 29th of January having laboured under the pyrexial symptoms since the 26th and the following treatment had been adopted, "an emetic, a purgative and on the following day Calomel and James's Powder;" he was afterwards bled to $\frac{3}{4}$ for a pain in his right side which subsided.

On admission into General Hospital, the pain of side having returned, a blister was applied; on the morning of the 30th however he had difficult respiration and distressing coughs, the pain of side being much increased; pulse 100. full, skin hot, tongue loaded; Venesection to $\frac{3}{4}$ was practiced and with temporary relief, purgatives were administered and in the evening the symptoms not being relieved, he had a warm bath, and a second blister was applied. On the 31st he was more tranquil, and on the 1st of February he could draw a free inspiration with much less pain and he expectorated some thick mucus, brought up by coughing; bleeding to $\frac{3}{4}$ was repeated,

and Tincture of Digitalis was given in doses of ℥ʒiij every fourth hour; during the previous night he talked incoherently but remained tolerably composed during the day; pulse 110 - at night he again became delirious and all his symptoms grew worse, respiration hurried and laborious, pain in right side and Hypochondrium increased, Abdomen tumid and tender; an cathartic enema was administered and he had some stimulating medicines, Subsaltes Terebinthinae superadded, the warm bath was repeated but all without advantage, he died at 6 A.M. of the 3rd of February -

Visio Cadaveris

Cranium - This cavity did not exhibit any morbid appearance -

Thorax - The chest contained a large quantity of Serum, which escaped freely from both sides, when opened; the Pericardium was also full, containing nearly a pint of yellowish, turbid fluid, resembling curds and whey; the serous membrane was thickly coated with a layer of lymph which adhered strongly to the surface both of the Heart and Pericardium, but might with some care be stripped off, its external surface was irregular and villous, having much the appearance of the tongue of different animals; the Pericardium itself was thickened - The right Lung exhibited excessive inflammation, and the Pleura on this side contained at least a pint and a half of clear serum of a yellow colour; the superior lobe of this lung was completely condensed and impervious to air, and greatly increased in weight, but its Pleura was not altered from its natural appearance; the inferior lobe on the contrary was vesicular, though full of blood, but its Pleura was coated with a tough and thick layer of lymph and adhered both to the Diaphragm and Pleura of the Ribs. The left Lung had scarcely any morbid appearance, excepting that much blood exuded from it when cut, but it was vesicular and of a healthy colour; the Pleura on this side contained an equal quantity of Serum with the other -

Abdomen - The Abdominal viscera were all perfectly healthy, and in particular the Liver, which did not in any degree deviate from its natural structure or appearance -

The body was generally of a sallow hue, and was slightly oedematous, but had no appearance of having suffered from disease previous to the last attack -

Signed, Edward Broodford

Case treated by Mr. Broodford - W. M. F.

Hospital Assistant -

N^o 7

Regiment.	Rank and Name.	Age	Disease.	Admitted	Died.	Regist.	Folio.
53 rd Infantry	Private John Cousins	22	Pneumonia	January 30 th	February 6 th	^{the Diary} N ^o 2	25

This man was transferred from Regimental Hospital on the 30th of January, having been under treatment for Catarrh, to which, on the least exposure to cold, he

Had been for some time subject; on admission into General Hospital, he complained of severe pain in the left side of his chest, increased by drawing a full inspiration; his breathing was short, hurried and attended with dry husky cough; For these symptoms $\mathfrak{z}\text{xvi}$ of blood were drawn from his arm, and Calomel and Antimonial Powder, of each gr. were given every fourth hour, for twelve hours; on the following day he was free from pain, had slept well during the night, coughed much, but expectoration was scanty; from this period he was treated with laxatives, expectorants, demulcents and a sparing diet until the evening of the 2nd of February, when he complained of the pain having resumed its former situation; a blister was applied and a saline and vegetable purgative given; on the following morning, the pain not being ^{removed} and the other symptoms having increased, venesection was again repeated to $\mathfrak{z}\text{xviii}$ and the Calomel and Antimony were given as before; during the succeeding night he was occasionally delirious, but in the return of morning, declared that the pain was completely subsided, pulse being 80, full, breathing less hurried, bowels torpid, for which latter symptom a saline purgative was again administered - in the evening the pain of chest became excessively severe, respiration much hurried and impeded, pulse 100, small and hard, skin hot, face flushed, and he had been occasionally delirious; the emission of $\mathfrak{z}\text{xviii}$ of blood was again had recourse to, a second blister was applied over the seat of pain, and the Calomel and Antimony were again employed; he slept some during the night but was frequently delirious - from this period his symptoms grew worse, he rapidly sunk, and at 2 O'Clock P.M. of the 6th of February he expired -

Sectio Cadaveris

Cranium - The Brain was found to abound with more red puncta than natural; about $\mathfrak{z}\text{i}$ of fluid was found in the Ventricles and about $\mathfrak{z}\text{ii}$ of a reddish coloured fluid were contained at the base of the Brain -

Thorax - On opening this cavity the Lungs were found to adhere to the parietes of the chest in almost every part; the adhesions were of long standing and well organized, and were so strong that a hand could not be pushed between the Lungs and the anterior and lateral parietes of the chest without lacerating either the Pulmonary or Costal Pleura; adhesions for a considerable space existed between the right inferior lobe and the Diaphragm, and about $\mathfrak{z}\text{iv}$ of red serum with $\mathfrak{z}\text{ij}$ of lymph floating in it, were effused into the cavity of the chest; the Lungs were of a darker colour than natural, though when cut into, they did not bleed as much as a healthy Lung generally does; in the posterior part of the right superior lobe, there was a circular cavity, about one third of an inch in diameter, with whitish bands crossing it, not apparently communicating with a Bronchial tube - No morbid appearance was discovered in the Pericardium or its contents -

Abdomen - The mucous membrane of the Stomach was very little more vascular than natural - The Spleen was so softened down that it appeared to be of a semi-fluid consistence, so that you could push your finger into it with the greatest possible ease, which it tinged of a dark greyish colour - The Liver was of a sound and healthy appearance -

(signed) J. Meutagh M.D.

Case treated by D^r Meutagh - W. M. 7 -

Hospital Assistant -

N^o 8

Regiment.	Rank and Names.	Age	Diseases.	Admitted.	Died.	Regist. Folio
60 th Infantry	Private George Yromans -	19	Dyspnoea -	January 17 th	February 6 th	1 10

This lad had been in the service for fifteen months, during which period he was always delicate and had suffered at different periods from an affection of his chest; when he first arrived in this country, whilst on the march to barracks he was attacked with an acute pain in his chest, attended with hurried and oppressed breathing; he was received into Regimental Hospital (Dameny 5th) where he was bled, blistered and purged; which together with the use of sedative medicines afforded some relief; on his reception into General Hospital on the evening of the 16th of January, he was very weak, had much difficulty of respiration and pain of chest, attended with pyrexia & cough, but he had not any expectoration; he had some purgative medicine given and a blister was applied to his chest, his symptoms grew rather better until the evening of the 21st, when on making a sudden exertion in bed, he was seized with a violent paroxysm of Dyspnoea, during which his face and extremities became livid and his pulse scarcely perceptible; this was succeeded by reaction and his face became flushed - he stated that he had frequently experienced similar attacks when he used sudden exertion - Very little effect or benefit was produced by any medicine except Opium, which procured sleep and allayed uneasiness; he daily became weaker, his pulse sinking and his breathing becoming more oppressed, until the 6th of February, when at 3 o'clock P. M. he expired -

Sectio Cadaveris

Cranium - The surface of the Brain exhibited effusion between the Arachnoid membrane and the Pia Mater and the Ventricles contained about $\frac{1}{2}$ pint of lumpy serum; the Brain itself had scarcely any morbid appearance, but its veins contained much dark blood -

Thorax - The Lungs adhered in all their surface to the Pleura, and with such strictness as to be with great difficulty separated from their attachments; they

were very firm, and except a small portion of the left lung, at its upper part, appeared quite impervious to air; the whole of both lungs were crowded with tubercles in various stages of maturation; some of them, although but few, were still in their grey transparent stage, but the majority were about the size of a radish seed, opaque and soft in their centre; in many places the tubercles had coalesced and formed small *Vomicae* of the size of hazel nuts, and having cartilaginous cysts; in the posterior lobe of the left lung, there was a very large *Vomica*, which contained about $\frac{1}{2}$ ss. of matter, but would have contained at least $\frac{1}{2}$ ij, this cavity was crossed by several bands of a fleshy texture and of the bigness of a quill, the cyst of this cavity was not so cartilaginous as those of the smaller ones. The Bronchial tubes and Trachea contained but a very small quantity of purulent looking fluid, and it is remarkable, that with this extensive disease, the patient had scarcely any cough and no expectoration - The Heart was of its natural size, but much softer than natural; the Pericardium and both Pleura contained altogether about two pints of fluid -

Abomen - The small intestines had, all of them, tubercles on their surface or in their substance, and many of these in the *Ilium* had ulcerated on their inner surface - signed, Edward Bradford
 Case treated by M^r. Bradford - M. M. 3 - Hospital Assistant -

N^o 9

Regiment,	Rank and Name.	Age.	Diseases.	Admitted	Died.	Regist ^r Folio
Genesee Guard	Sergeant William Roberts	40	Febris Int. Bow.	February 11 th	February 13 th	Diary N ^o 3 7

About a week previous to his admission into General Hospital, he had been under treatment for an attack of fever, having been several times bled and purged; from this illness he was convalescing, when by the improvident use of wine and spirituous liquors, he had a relapse; on admission into this establishment, his head was chiefly affected, his pupils being dilated, with some degree of Strabismus, and he was occasionally delirious; pulse quick, tongue furred, countenance palid; a blister was applied to the back of his neck, and gr^{ss}. of Calomel with gr^{iv} of Antimonial powder were given, these succeeded in reducing the delirium, but his bowels being torpid, ss . of the Pulvis Jalapa Compositus were given, this produced several evacuations, but on the third day he sunk into a state of Coma and passed his excretions in bed, Calomel & Antimony were given in small and frequent doses, and Camphor Pulep at intervals, however he continued in a state of insensibility, his pupils being dilated and regardless of the action of light, until the evening of the 13th when he expired -

Sectio Cadaveris

Cranium - The Calvarium having been removed, the membranes and the external surface of the Brain appeared natural, but on laying open the lateral Ventricles (from above) I observed the right to be quite full, holding about $\frac{1}{2}$ of a serous fluid, the left containing not more than $\frac{1}{4}$ - On examining the other parts of the Brain, they appeared healthy and natural -

Thorax - On opening the Thorax I found very strong adhesions formed between the Lungs and the parietes of the cavity; on cutting into their substance however, it was found quite healthy -

Abdomen - No morbid appearances could be detected in this cavity -
signed, Charles Gordon

Case treated by M^r. Gordon - W. M. F. -

Hospital Assistant -

N^o 10

Regiment	Rank and Name.	Age.	Disease.	Admitted.	Died.	Regist.	Folio
11 th Infantry	Private Owen McGarvey	30	Admitted, Catarrh of Bladder. Died, Hepatitis of Liver.	January 25 th	February 15 th	1	30

This man was transferred from Regimental Hospital (on the evening of the 26th of January) where he had been treated with bleeding, blisters, and purgative medicines for a Catarrhal affection, apparently convalescent; on admission his gums were spongy and sore and he was apparently recovering from the effects of mercury, his bowels being confined a draught of the Infus. Sennae was given, and on the following day he felt better; on the 28th he complained of pain in the right Hypochondrium, the purgative draught was frequently repeated and dark coloured stools passed off, his skin was of a sallow colour, tongue foul, and a tumor could be felt, extending from the Costiform cartilage to the eleventh ribs; on the 31st, the tenderness of side continuing, a blister was applied, which afforded relief; nothing particular occurred from this period until the 12th of February when he became restless, vomited, and complained of excessive thirst, face occasionally flushed, pulse 100, skin hot, tongue white and dry, and symptoms of Diarrhea ensued - Chalk mixture with Aromatic Confection and Tincture of Opium were frequently given - during the night he was noisy and delirious, the febrile symptoms continued and he discharged a quantity of white, curdy matter from his bowels - On the 14th he was evidently sinking, pulse being weak and frequent, his face blue and cold, the Diarrhea unabated and constant delirium present, in the evening his body became universally yellow, he continued to sink and at 8 O'Clock A. M. of the 15th next death took place -

The body was completely yellow and considerably emaciated, in some parts the integuments were scumulous -

Cranium - No disease

Thorax - There was not any morbid appearance in this cavity; the Lungs were perfectly healthy although they adhered to the Pleura in several places; the Heart was also quite natural in size and structure -

Abdomen - The Liver was larger than natural, it was soft and pale and its divided surfaces exuded but little blood; the Gall bladder contained a small quantity of bile - The Stomach was very considerably distended with air and it contained a quantity of dark fluid; the condition of the intestines was very remarkable, they were for the most part contracted and empty, and particularly the parts most remote from the Stomach; the Jejunum was thicker than natural and was intussuscepted in five different places, one of which was to the extent of at least three inches, the gut was at this place quite thick and fleshy, but it did not exhibit any mark of inflammation, but was rather paler than natural; the other portions of this intestine were in a similar condition although to a less extent; as there did not exist any adhesions, the parts could be easily restored to their natural condition, but they required some degree of force to effect this - In the middle of the Sigmoid or rather nearer to the Caput Coli there was found a Diverticulum of about the length of a finger -

signed, Edward Bradford

Case treated by Mr. Bradford - W. M. B. - Hospital Assistant -

Nº 11

Regiment,	Rank and Name.	Age.	Disease,	Admitted.	Died.	Regist ^r	Folio
63 rd Infantry	Private John Henney	19	Ascites	February 22 nd	April 18 th	1	91

For three days previous to his admission into Hospital he had complained of headache, lassitude and loss of Memory, and on the morning of his reception he had been found lying on the floor in a state of insensibility, his pupils much dilated and not obeying the stimulus of light, for some time these organs had been affected with Generalopia; he appeared stupid and answered questions slowly and irrelevantly. (It appeared from evidence that he had a similar attack about six months previously at Windsor.) A large blister was applied over his head and purgative medicines were prescribed, he gradually improved, and on the 25th February he appeared to be free from all unfavourable symptoms and continued to enjoy tolerably good health until the 10th of March, when his Abdomen was observed to be

becoming swollen and tympanitic, active purgatives were employed, but without producing much alteration in the appearance of his Abdomen; on the 23rd the swelling had increased and fluctuation could be distinguished, Hydragogue and Diuretic Medicines were then employed and subsequently Mercury to produce Ptyalism; on the 4th of April his feet became œdematous, great debility ensued and the effusion of fluid increased in proportion, tonics and stimulants together with generous diet and wine were given, notwithstanding, his pulse began to intermit on the 17th a lethargic, comatose state supervened, in which he continued until 5 o'clock A.M. of the 18th when he quietly expired -

Section Cadaveris

Cranium - The Brain was found of much softer consistence than natural and when cut into horizontally, very few red puncta were to be seen; there was about ʒij of serum of light colour found at the base of the Brain, communicating with the Spinal Canal, none was found in the Ventricles -

Thorax - The Lungs were perfectly healthy both in appearance and structure; there was found a slight adhesion, of old standing, between the Pleura Pulmonalis and Costalis; the Heart appeared smaller than natural and its fibres appeared more lax -

Abdomen - There was found in the Abdomen the v. of a reddish coloured serum with a bilious tinge; the small and large intestines were a good deal distended with air; the mucous membrane of the Colon was more vascular than natural and was dotted in many places with depositions of tuberculous matter between the mucous and muscular coats, but no abrasions of the mucous surface was observable -

The Liver was greatly diminished in size, being at least one third less than natural and completely covered with dark brown tubercles, from the size of a pea to that of a walnut, and of hard consistence; there was not any appearance of the Liver being divided into lobes, but the whole appeared one mass of those tubercles -

The Gall bladder contained about ʒij of bile, much darker and more viscid than natural - The Spleen was three times its usual size and much softer than natural.

(signed) S. Muntagh M. D.

Cadaverised by D^o Muntagh - W.M.S.

Hospital Assistant -

N^o. 12

Regiment	Rank and Name	Age.	Disease.	Admitted.	Died	Reg ^o Folio
43 ^d Infantry	Private Charles Mead	20	Dyspnoea	April 25 th	May 5 th	1 94

About two months previous to the 25th of April (on which day this man was last

received into Hospital, he had been several weeks under treatment for Dyspnoea, to which disease he had been very subject during the last three years; on admission, he complained of his respiration being hurried and difficult, with sense of tightness across his chest, and attended with a short, dry cough, particularly by night, but he did not experience any particular pain; he had also a superficial ulcer on either leg, which soon healed - Occasional gentle purgatives were given, and he constantly used demulcent and expectorant medicines; he continued without any particular alteration in his symptoms until the 2nd of May, when his breathing became more oppressed and he was much troubled with Nausea, which latter was removed by an emetic and a blister was applied to relieve the former, which it did partially; on the following evening however, he was suddenly seized with a violent fit of Orthopnoea, his countenance was pale and anxious, and he complained of a peculiar, thrilling sensation in both shoulders and arms, but continued free from pain of chest; this paroxysm was quieted by an antispasmodic draught and afterwards by immersion in a warm bath and by the exhibition of an enema; he passed a pretty good night, but on the following morning, the paroxysm recurred, though with less violence, he was then bled to ℥xxx. and a second blister was applied to his chest; on the morning of the 5th his respiration was more laboured and the tightness of chest was increased, and he complained of the sensation already mentioned in his upper extremities, his countenance was excessively anxious, his lips being livid; ℥xx of blood were drawn from his arm, from which he experienced some relief, and the warm bath was again employed; he continued however in a state of great uneasiness and anxiety until 9 o'clock P.M. of the 5th May, when he expired suddenly, having retained his mental faculties and powers of speech till within a few minutes preceding dissolution.

Sectio Cadaveris

Cranium - No disease

Thorax - The lungs were healthy in appearance and texture, with the exception of containing rather more blood than usual; there was a slight frothy effusion into the Bronchi and Trachea, but the mucous membrane presented a healthy appearance; about ℥iij of serous fluid were found in the right Pleura - The Heart was found enlarged to at least twice the size of its natural state, being both preternaturally dilated, and its substance, particularly that of the left Ventricle, being considerably increased; the Aorta as it arises from the Heart was thickened and had assumed somewhat of a cartilaginous appearance, and this texture was more or less preserved until it perforated the Diaphragm; there was not any effusion of serum into the Pericardium -

Abdomen - The Liver was rather increased in size, and had a speckled

appeared externally; about $\frac{3}{4}$ of serous fluid were in the Peritoneum; all the other viscera were healthy —

(signed, William Milne)

Case treated by M^r. Milne — W.M. 3 —

Asst. Surgeon to the Forces —

N.B. I have prepared the Fracture and commencement of the Aorta as removed from the body previous to my arrival in Portugal, and sent it to the Museum of the Medical Staff, at Chatham — Marked in Catalogue } William M. Ford

N^o 70, Circulation, Division 1st }

Asst. Surgeon to the Forces

N^o 13

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died.	Register.	Folio.
3 rd Guards	Private John Jones	40	Erysipelas	May 5 th	May 8 th	1	102

About a month previous to this man's reception into General Hospital, where he arrived on the 5th of May, by boat, from Barlazo, being unable to proceed to his Regimental Hospital at Val da Pereira, he received a small wound on the right knee by striking it against a stone whilst bathing; Erysipelas which at that time, frequently followed the slightest abrasion of skin, ensued, and notwithstanding active treatment, ran its course, producing extensive destruction of the integuments and cellular tissue — The following were the appearances of the limb when he was taken into this hospital, the muscles of the leg were completely laid bare, the adjacent integuments having a black, gangrenous appearance and discharging a thin, ichorous, fetid fluid; there was also a sinus about the middle of the inner part of the thigh from which flowed a considerable quantity of the same fetid discharge, the integuments for several inches around, having a gangrenous appearance and doughy feel; another spot had assumed the same appearance on the outer side of the thigh, and was rapidly spreading. From the extreme debility which was present and the ravages the disease had made, nothing could be attempted except to support vital action by means of tonics, wine & porter, these however were not sufficient to restore exhausted nature and he expired at 11 o'clock P.M. of the 8th day.

Sectio Cadaveris

The body was removed without the cavities being opened, at the request of the Regimental Medical Officer; however the limb was examined and the following were the appearances —

The cellular substance of the whole was diseased to within about three inches of the superior spinous process of the Ilium, the integuments that remained had a dark, gangrenous appearance, and the matter which issued from it was excessively fetid —

(signed, William Milne)

Case treated by M^r. Milne — W.M. 3 —

Asst. Surgeon to the Forces —

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died.	Regist ^r .	Folio
12 th Lancers	Private Owen Hyland	25	Febris Cont. Com.	July 31 st	August 4 th	3	14

Was seized with fever at Ajambura on the 23rd of July and was treated in Regimental Hospital until the 30th when, in consequence of the station of the regiment being changed to Luz, he was transferred to General Hospital; he had been bled to ℥xij and ℥xiv, used purgative medicines and had cold applied to his head. On admission here, on the morning of the 31st, he did not complain at all of his head, but referred to his Abdomen as being the seat of uneasiness; his pulse was 96, not very full, skin hot, eyes suffused, tongue dry and loaded, and he had much thirst; the treatment then adopted was the exhibition of a Cathartic enema followed by a Mercurial purgative combined with Antimony, and after some time a saline and vegetable laxative, cold was applied to his head and his body was sponged with an evaporating lotion; from these remedies he experienced relief, and during his illness they were repeated frequently - No material change took place until the evening of the 2nd of August, when he appeared to be much weaker, his pulse had become small, and he still complained of his Abdomen; an enema was given and his belly was fomented after which he had some warm Brandy & water, by those means he was for a time resuscitated but towards the close of the following day he again sunk, notwithstanding that he used wine at intervals during the day, the Brandy was again had recourse to, but delirium supervening during the night it was discontinued and Carbonate of Ammonia with Camphor Julep were given in doses of grx to ℥j. every hour, and at different periods he had some port wine; the delirium, of rather a low muttering type, continued and a blister was applied to his head, he rallied a little at 12 o'clk. P.M. of the 4th but again sunk and at 8 o'clk. P.M. he quietly expired -

Sectio Cadaveris

Cranium - When the Calvarium was removed, no particular appearance was observable, the vessels of the Dura mater not being at all turgid, but on raising that membrane, a quantity of straw coloured fluid issued from beneath the Arachnoid membrane, having been effused over the whole surface; the vessels of the Pia Mater contained some blood of thin consistence, which readily flowed out when they were divided - The substance of the Brain was firm, and when cut into, blood like coloured serum, issued from many small points on the surface of the medullary portion; the Ventricles contained about ℥j. of clear serum -

Thorax - Both Lungs were very healthy and of natural structure, the right one had contracted some old adhesions at its upper lobe to the parietes of the chest, and about $\frac{ziv}{2}$ of fluid was found in each Pleura, but this I rather think was produced after death - Heart and Pericardium sound -

Abdomen - The Liver was somewhat larger than natural, dark coloured, and its structure condensed, and the Gall bladder was distended with dark coloured, viscid bile - The Stomach contained a considerable quantity of fluid, mixed with a green, bilious matter, and the whole course of the intestinal canal contained fluid of nearly the same appearance but of more yellow colour; not the slightest trace of inflammation could be detected in either the small or large intestines, the other viscera were healthy -

Williams or Ford

Case treated by Dr. Ford

Afflict. Lung[?] to the Focus -

N^o 15

Regiment	Rank and Name.	Age.	Disease.	Admitted	Died	Regist.	Folio
23 rd Infantry	Private William Francis	32	Amenia	August 2 nd	August 5 th	5	14

This man had been affected with absorption of intellect for six months, during which period he had been in Regimental Hospital, never evincing the least disposition for mischief nor requiring restraint, and as his malady was not likely to be removed, he was sent down to General Hospital on the 2nd of August for the purpose of being invalided home; he conducted himself quietly and inoffensively, and on the morning of the 5th was lying quietly in bed when visited by the Medical Officer of the ward, in a few minutes afterwards he suddenly sprang out of bed, ran to the window and precipitated himself from a height of about sixty feet, he was taken up in a state of insensibility and carried into hospital where he expired in about quarter of an hour -

Sectio Cadaveris

Cranium - On removing the Calvarium the vessels of the Dura Mater appeared turgid, as were also those beneath that membrane, but no rupture of any vessel was observable - The structure of the Brain was firm, and the Ventricles did not contain an unusual quantity of serum - There was not any appearance either in the Brain or Cranium to account for the malady under which he had laboured, neither was there any recent fracture of the Cranium, but the lower jaw was broken completely across at the symphysis, the left condyle being luxated inwards and the right outwards -

Thorax - The structure of the Lungs was natural and healthy, but on raising up the left lung, a rupture to the extent of three inches was observed at its root, from which

about one quart of blood had been effused into the Pleura, a considerable quantity having also insinuated itself into the cellular texture of the Lung. The Heart and Pericardium were natural — The fourth, fifth, and sixth Ribs were fractured near to their Sternal extremity —

Abdomen — No disease could be found in this cavity —

Varia — Both wrists were luxated, and on examination very considerable injury of the bones, particularly in the left wrist, had taken place; in both, about an inch and a half of the lower end of the Radius was fractured off obliquely, and the small portion was comminuted, the fractures extending into the joint; the ligament connecting the Radius and Ulna was lacerated and those bones were separated from each other for the space of half an inch — on the left side the articulating head of the Ulna for the Radius was broken off, and the Styloid process protruded through the integuments, the internal lateral ligament and the inter-articular cartilage between the Ulna and the Os Cuneiforme being torn off — The last Phalanx of the little finger of the right hand was dislocated upwards. Both Patella were fractured, the left one being comminuted, and the right divided into two pieces by a perpendicular fracture —

X N.B. I have prepared the bones of the left Carpus and sent them to the Museum of the Medical Staff at Chatham —

William M Ford

Case under charge of M^r Joseph —

Apert^r Lung^r to the Forus —

N^o 16

Regiment.	Rank and Name.	Age	Disease.	Admitted	Died	Regis ^r	Folio
10 th Infantry	Private David Dowling	22	Fibrous Out: Com:	August 2 nd	August 11 th	5	19

This man was admitted into Regimental Hospital on 24th of July labouring under fever, for which he was treated with bleeding, purging &c, and on the Regiment changing quarters he was transferred to General Hospital on the 2nd of August in an extremely exhausted and reduced condition, his head appearing to be principally engaged, which was relieved by the application of a blister, but the debility increasing, brandy was given on the evening of the 4th and from this period stimulating medicines together with wine or brandy were constantly exhibited; notwithstanding, he rapidly sunk, on the 9th became comatose in which state he continued, having subsulted Lindinum, his breathing being stertorous, and his eyes fixed and insensible to light, until 6 o'clock A.M. of the 11th when death took place —

Sectio Cadaveris

Cranium - On removing the Calvarium the outer surface of the Dura Mater did not present any remarkable appearance, but when this membrane was raised, serum, not to any great extent escaped, the Arachnoid membrane having been rendered opaque by its presence; the veins on the surface of the Brain contained a quantity of thin, attenuated blood, which readily escaped when those vessels were divided - The Cerebrum substance of the Brain presented a peculiar leaden colour, which I have frequently observed to have existed in cases of Bilious Remittent fever, which had a fatal termination, its structure apparently not being altered; the Medullary portion was firm and when divided numerous puncta poured out their blood, resembling coloured serum - The Ventricles contained about $\frac{1}{2}$ of limpid serum, and about $\frac{1}{4}$ were effused at the base of the Brain -

Thorax - The Lungs presented an excellent specimen of these organs in a healthy state; not the smallest deviation from natural structure could be detected - The Pericardium contained about $\frac{1}{4}$ of clear serum, and the Heart appeared to be smaller than natural, the left Ventricle being firm and its fibres firmly contracted, whilst those of the right were lax and flabby -

Abdomen - The Liver which was of natural size presented a blue hue and when cut into was found to be gorged with dark blood, the Gall bladder was filled with dark coloured bile - The Spleen had acquired more than double its natural size, was extremely heavy, and hard on its surface, but becoming softer towards its centre - The Stomach, small intestines, and arch of the Colon were distended with flatus, the descending Colon being strongly contracted; when cut into, the Stomach was found to contain a quantity of green fluid, and some patches of substance resembling copper grounds adhered to its mucous surface, but were easily detached; the intestinal canal contained a quantity of yellow mucus, and the blood vessels presented a high degree of vascularity - The other viscera of this cavity were healthy, but the Mesenteric glands were all slightly enlarged -

Case treated by Mr. Joseph

William M Ford

Majr. Surgeon to the Forces -

N^o 17

Regiment.	Rank and Name	Age	Disease -	Admitted.	Died.	Register Folio
12 th Lanark	Private Denis McGill	37	Admitted. Feb; Cont. 8m Died. Apoplexia	August 9 th	August 12 th	5 30

This man was seized with febrile symptoms on the morning of his admission into General Hospital, for which an emetic was given followed by mercurial and Saline purge

tives, and his head being much complained of, evaporating lotion was kept applied; on the 11th he complained of considerable pain at the Scrobiculus Cordis which was removed by the application of a blister, and on the following morning he expressed himself as feeling better in every respect; his bowels being torpid $\frac{3}{4}$ of Cathartic mixture were given and repeated twice afterwards, the last dose having been given at six o'clock P.M. when visited by the Medical Officer of the ward; about two hours afterwards, the attention of the other patients was attracted by his breathing being difficult and stertorous, and observing that he struggled as if in a fit, a Medical Officer was called but before he could reach the ward, the man had expired. He was a man of tall stature, plethoric habit, and an unusually short neck; his character was that of an habitual drunkard, and being otherwise ill conducted.

Sectio Cadaveris

Cranium. - On dividing the scalp, blood issued from the Temporal, Occipital, and other vessels in considerable quantity, and when the Calvarium was removed there was evident turgescence of the meningeal vessels; the Sinuses were all full of dark coloured blood, particularly the lateral sinuses, from which, when laid open, blood flowed in a continued stream, the vessels of the neck being very turgid; the veins on the surface of the Brain as also those more deeply seated contained much blood - When sections of the Medullary substance were made, innumerable red puncta appeared, from which blood, equally dark coloured with that contained in the other vessels, issued; there was not any appearance of blood being extravasated either on the surface or in the substance of the Brain; the Ventricles did not contain above $\frac{1}{2}$ of serum, and about the same quantity was detected in the base of the Cranium -

Thorax. - The structure of the Lungs was quite healthy, but these viscera were extremely gorged with deoxygenized blood; on the right side some adhesions of old standing had agglutinated the middle lobe to the parietes of the Chest and to the Pericardium, which bag contained about $\frac{3}{4}$ of clear serum; the Heart was of natural size and healthy structure, and its cavities, especially those of venous circulation were full of fluid blood, as were also the large vessels connected with it -

Abdomen. - The structure of the Liver was natural, but it partook of the generally loaded state of the sanguiferous system, and when transverse sections were made of the viscera, blood flowed in considerable streams from the divided branches of the Hepatic Vessels. The Stomach and intestinal canal were distended with flatus but did not present any trace of disease; other viscera healthy -

William M Ford

Case treated by M^r Joseph -

Asiatic Surgeon to the Forces -

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died.	Register.	Folio.
11 th Infantry	Private Michael Gession	24	Phthisis Pulmonalis	July 25 th	August 15 th	2	32

From the period of this man's arriving in Portugal, ^{his} health had been generally bad, having been frequently in Regimental Hospital afflicted with bowel complaint and latterly for a Pectoral affection, labouring under which he was transferred to General Hospital on the 25th of July; on admission his person was extremely emaciated and debilitated, he had frequent coughs attended with slight expectoration, but without any pain of chest, and was much troubled with Diarrhoea; a bland, nourishing diet was given, and demulcent and expectorant medicines were employed; debility increasing wine was given, and he did not complain of any pain until the 3rd of August, when he experienced pain in the Abdomen while at stool, and he now began to expectorate a mucous-purulent fluid in considerable quantity; On the 12th he again complained of pain in his Abdomen, increased by pressure for which Calomel and Opium were given in small and repeated doses, and on the following day it had subsided; from this period he did not refer either to his chest or his Abdomen as the site of any uneasiness; the cough and expectoration however, continued, the Diarrhoea did not abate, hectic symptoms and debility, notwithstanding the continued use of wine and nutritious diet, increased, and at half past nine o'clock A.M. of the 15th of August he quietly expired.

Sectio Cadaveris

Cranium - No morbid appearances were detected in this cavity.

Thorax - Both lungs had contracted old adhesions at their superior part to the parietes of the chest, and on removing the left its surface afforded an irregular, hardened feel, from the existence of tubercles; those bodies in the inferior lobe were found in their first and second stages, but in the upper lobe they had congregated and in many places had softened down into Vesicles, varying from the size of a pea to that of a small orange, the cysts, more especially of the smaller cavities, being apparently of cartilaginous structure, and the intermediate tissue of the lung being consolidated. In the upper lobe of the right lung, much the same appearance was afforded as on the left side, but in a less advanced stage; the upper part of the inferior lobe contained some groups of crude tubercles, its lower half being in a state of high inflammation, of a vivid red colour, quite void of expectoration, and affording a tough, leathery feel; the Pleura lining the parietes which corresponded to this part, was extremely vascular and inflamed, and lymph, not yet organized,

had been effused in considerable quantity - The Pericardium was so thin as to admit of the Heart being distinctly seen through it, and this bag contained about $\frac{1}{2}$ of clear serum; the Heart itself appeared to be smaller than natural, its cavities were firmly contracted and its surface was adematous; on the right ventricle exterior to the serous covering, a portion of lymph of irregular shape, and about the size of a sixpence, was effused, constituting the white spot of Corvisart -

Abdomen - On opening this cavity, the whole surface of the Peritoneum, more particularly that covering the small intestines presented a highly vascular appearance, and lymph, which in many places had become organized and had agglutinated the folds of the intestines together, had been effused, being particularly abundant in the Pelvis; the small intestines felt thicker than natural, and when the Flum was laid open, its mucous coat appeared to be in a state of high inflammation, which became more intense as it approached the Cecum; small fleshy tubercles, situated exterior to the mucous membrane, were found in this intestine being more numerous towards its extremity, where they coalesced and had ulcerated, the ulcers having the appearance of a portion of mucous membrane being cut out with a scissor; the Cecum also was extensively ulcerated - The Mesenteric glands were slightly enlarged; other viscera healthy -

William M Ford

Case treated by M^r Meade

Appt. Surgeon to the Forces

N^o 19

Regiment	Rank and Name.	Age.	Disease	Admitted	Died.	Regis ^d	Folio
25 th Infantry	Private John Green	24	Phthisis Pulmonalis Admitted Haemoptysis.	August 2 nd	August 23 rd	5	3

This man had an attack of Haemoptysis, while at Coimbra in May last, and two relapses, on the 26th and 27th of June following, since which time he had laboured under extreme Dyspnoea, inability to lie on his left side, and cough occasionally attended with puriform expectoration; labouring under those symptoms he was received into General Hospital on the 2nd of August; he was treated with expectorants, demulcents, sedatives, light diet and wine; however his symptoms grew worse rapidly, hectic symptoms supervened and he expired at 10 o'clock P.M. on the 23rd of August -

Sectio Cadaveris

Cranium - No disease -

Thorax - The apex of the left Lung had contracted adhesions to the parietes of the chest and its inner surface was adherent to the Pericardium, both lobes were also agglutinated together by a layer of coagulable lymph; on removing the Lung from its

situation, it afforded a firm, hard, irregular surface, its substance being thick, studded with tubercles in every stage from the crude tubercle to the perfectly formed Pomicæ, and its structure (excepting a small portion along the anterior edge of the superior lobe, and part of the inferior lobes, which were crepitous), was completely carnified, rendering it totally impervious to air and adding very considerably to its weight - On the right side, numerous adhesions, of old standing, existed between the Pleura, many of which were so intimate as to be with difficulty broken down; the lung itself was not so extensively diseased as the left, and had been evidently the sole support of life for some time; its substance however was thickly set with tubercles in various states of maturation, but the process of consolidation had not yet totally destroyed the natural structure of this organ; in both lungs, the Bronchia contained a considerable quantity of puriform fluid, and the Trachea and Larynx (the lining membrane of which was post-naturally vascular), when cut into, poured out a similar fluid in very considerable quantity - The Heart appeared healthy and the Pericardium contained about 3vj of clear serum -

✓ Abdomen - The viscera of this cavity were healthy, no ulceration of either the small or large intestines could be discovered; in the Cecum, a few spots more vascular than natural, presented - About one pint of straw coloured fluid, having a gelatinous substance floating through it, had been effused, and was collected in the basin of the Pelvis -

William Morda

Case treated by Mr Joseph -

Appt. Surgeon to the Forces -

N^o 20

Regiment.	Rank and Name.	Age	Disease.	Admitted	Died.	Regis ^r .	Folio
60 th Infantry	Private John Hart	21	P ^h th ^{is} Pulmonalis	August 2 nd	Septem ^r . 8 th	5	90

While at Coimbra this man had several attacks of Acute Catarrh, and was last received into Regimental Hospital on the 10th of June, where he remained until the removal of the Regiment caused him to be transferred to General Hospital on the 2nd of August, labouring under the following symptoms - "severe cough attended with puriform expectoration, Diarrhoea, night sweats, and other symptoms of hectic fever" - Demulcent and Pectative medicines were employed, together with light, nutritious diet; his strength however rapidly declined and on the 14th the Diarrhoea became more distressing but was relieved by the Pulvis Cretæ cum Opio - from this period however the hectic symptoms increased; the cough and expectoration were incessant, his respiration became

extremely difficult, and the debility increased, in this state he continued until the 8th of September on which day he died at 11 O'clock A. M. -

Sectio Cadaveris

Cranium - No morbid appearances -

Thorax - The Sternum being removed the left Lung was observed to fill its Pleura accurately, being closely adherent to the parietes of the chest, to the Pericardium and Diaphragm and both lobes being firmly agglutinated together, the surface of the Lung itself being firm, hard and irregular -

The adhesions being with difficulty detached and the Lung cut into, it presented the most extreme degree of disease, its substance being completely solidified and thickly set with tubercles, most of which were in a state of solution, forming small vomicae having firm cysts and communicating freely with the Bronchiae; in the apex of the superior lobe there was one large Vomica equal to $\frac{1}{2}$ ij. and crossed by several firm bands - The superior lobe of the right Lung also contained one large and several small Vomicae, and towards its anterior edge, numerous Miliary and crude tubercles existed; the middle and inferior lobes (the only portions of either lung which were crepitous), also contained tubercles, many of which had clustered together but had not yet arrived to a state of solution, and the intervening cellular texture was gorged with dark coloured blood - The Bronchiae, Trachea and Larynx were filled with puriform fluid - The Pericardium contained about $\frac{1}{2}$ ij of clear serum and the edges of the Heart were slightly oedematous, in other respects its structure was healthy -

† Abdomen - About $\frac{1}{2}$ iv. of dark coloured serum had been effused into this cavity; the glandular viscera were all healthy; The lower portions of the small intestines, the Caecum and Colon presented externally a plumbeous colour, and when those tubes were opened, the upper part of the Plum was found studded with small fleshy tubercles, which in the inferior part had collected together and ulcerated, the ulcers having the appearance of a portion of the lining membrane having been cut out; ulceration was also extensive in the Caecum and ascending Colon -

William M Ford

Case treated by Mr. Joseph -

Assistant Surgeon to the Forces -

N^o 21

Regiment.	Rank and Name.	Age.	Disease.	Admitted	Died - Regio ^{is} Folio
4 th Infantry	Private David Proving	22	Dysentery post Febrilis	July 23 rd	Septem ^r 24 th 2 70

This man was received into Regimental Hospital at Belem on the 17th of July labouring under fever, from which he was convalescing, but from the great debility which ensued he was unable to proceed with his Regiment when removed to Fort St. Julien and he was consequently transferred to General Hospital on the 23rd of July; When admitted he appeared to be considerably emaciated and he was much debilitated and on the second day afterwards he was seized with dry cough attended with pain of chest; these symptoms were shortly removed by means of demulcent medicines and the application of a blister, after which generous diet and wine were given, and he improved slowly; on the 10th of August he was deemed "convalescent"; on the 22nd however he was attacked by Diarrhoea, without any urgent concomitant symptoms, which was checked by gentle purgatives; at this period a Phlegmon appeared at the Epigastrium which interfered with his nocturnal rest, but which eventually suppurated and ceased to be a cause of uneasiness - Dysenteric symptoms however now supervened with increased urgency and notwithstanding the various remedies employed, ran its course, his strength being at the same time much reduced, in consequence of which nutritious diet with wine and latterly brandy were resorted to, notwithstanding, he gradually sunk and although he rallied a little on the day before his death, he again lost ground, and died at 12 o'clock P.M. on 24th of September -

Actio Cadaveris

Cranium - No disease was observable in the Cranium -

Thorax - On raising the Sternum, the anterior surface of the Lungs presented a healthy appearance, but on further examination they were found to be universally adherent to the parietes of the chest and to the Pericardium, the adhesions being much firmer and apparently of longer standing on the left than on the right side; the substance of the lungs when cut into was in some places condensed and contained a few, scattered, coarse tubercles, most of which were very superficial, and a quantity of frothy mucus issued from the divided Bronchia and air cells, but puriform fluid, not in very considerable quantity, flowed from sections of the inferior lobe of the right lung - The Heart was healthy and the Pericardium contained about ½ pint of serum -

Abdomen - When this cavity was laid open, the Caecum, ascending portion and arch of the Colon presented, being much distended with flatus and containing much hardened faeces and scybala in the sacculi of the intestine; the descending Colon and Rectum on the contrary, were firmly contracted - The arch of the Colon being raised, the Stomach was observed so firmly contracted as to resemble a portion of jejunum intestine - Having opened the intestinal canal, several small, honey-combed ulcers were evident in the Ileum, near its termination in the Caecum, in which latter intestine extensive ulceration commenced, the ulcers being, in its upper portion, small.

defined, and closely dispersed over the mucous surface, but gradually becoming more congregated at length ended in total destruction of the lining coat, and in some places even the muscular coats of the intestine had been destroyed. - The glandular viscera were all healthy -

William M Ford

Case treated by M^o Milne -

Apieith. Surg^o to the Forces

N^o 22

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died.	Page ^s .	Folio
10 th Infantry	Private Michael Gaffney	26	Dysentery Chronica	August 2 nd	October 4 th	5	136

This man had been for a considerable time under treatment in Regimental hospital, affected in the first instance with Intermittent fever to which Dysentery supervened, and this latter disease having assumed a chronic form he was transferred to General Hospital, where he arrived on the 2nd of August; on admission he laboured under the usual symptoms of this disease in an advanced stage, these were occasionally palliated by gently purgative, and astringent, medicines; one constant symptom was extreme tenderness chiefly referable to the right Iliac fossa, where the slightest pressure was intolerable, and where a hard tumor of considerable size could be plainly felt; in addition to those distressing complaints, he was seized on the 6th of September with cough, which gradually became more severe, and was particularly distressing during the night, being attended with expectoration; under this complication of diseases nature became exhausted, he rapidly sunk, and at 11 O'clock P.M. of the 4th of October death took place -

Sectio Cadaveris

Cranium - Free from any appearance of disease -

Thorax - The Sternum being raised, the Lungs presented, being apparently free from adhesions to the parietes of the chest, and of healthy texture; on further examination however, the apex of the left Lung was found to be firmly adherent, of solid texture, and when cut into, to contain numerous milium and crude tubercles surrounding a Pomico which equalled the size of a small hazel nut; the whole of the superior lobe contained a number of small, transparent tubercles, which had not as yet produced any inflammation or consolidation of the Pulmonary tissue, the inferior lobe contained but few of those bodies, but blood and frothy mucus issued from its divided surfaces in considerable quantity - All the lobes of the right Lung also contained numerous milium and crude tubercles, the greater number

being superficial and easily felt beneath the serous covering, in the apex of the superior lobe many of these had coalesced, and in the centre there existed a portion of cheesy matter enclosed in a cyst, but not any of it had yet become fluid. - In the left Pleura was found about $\frac{ziv}{iv}$ of transparent, gelatinous fluid. - The surface of the Heart was slightly oedematous and the Pericardium contained about $\frac{ziii}{iv}$ of clear serum, in other respects this viscus was healthy -

Abdomen - On opening this cavity, the Colon appeared much distended with flatus the Stomach being considerably collapsed, and in the right Iliac fossa the Caecum presented a dark plum colour externally, numerous adhesions having taken place to the contiguous intestines, to the parietes of the Abdomen, and to the Mesenteric glands, which were very considerably enlarged in this situation as also around the head of the Pancreas, many of them being firmly adherent to that viscus and when cut into were found to consist externally of a cheesy substance enclosing a quantity of green coloured matter resembling pus - When the intestinal canal was opened, no remarkable appearance was observed until within about six inches of the Iliocolical valve, where a few superficial ulcers were observable in the small intestine; in the Caecum however the principal disease had taken place, the intestine being thickened, its diameter contracted, and the whole of the mucous coat being completely destroyed, affording an irregular, hard surface, of a dusky red colour, many of the ulcerations penetrating to the serous covering, which in two places had been corroded through, one opening into a portion of small intestine which had adhered and the other burrowing into the subjacent muscle - this state of parts existed for the extent of six inches, when the ulcers abruptly became distinct and scattered over the lining membrane; but towards the Sigmoid flexure of the Colon and through the whole extent of the Rectum, the intestine was extensively ulcerated, thickened and contracted, affording much the same feel and appearance as in the Caecum, but in a less advanced degree - The Liver was gorged with blood but its structure was healthy, and the Gall bladder was filled with healthy bile, all the other glandular viscera were free from disease -

N.B. I have prepared the Caecum and a portion of the Colon for the Museum of the Medical Staff at Chatham -

William M Ford

Staff Surgeon to the Forces -

Case treated by Mr. Joseph and
by Mr. Melrose -

Regiment.	Rank and Name.	Age	Disease.	Admitted	Died.	Regist ^r Folio
23 rd Infantry	Private George Volkes	27	Feb: Cont: Com:	August 2 nd	October 6 th	5 143

This man had been in Regimental Hospital for some time, afflicted with fever attended by much delirium to the head, for which bleeding, blistering, purging &c were practiced; when transferred to General Hospital on the 2nd of August he was considered as convalescing; when received however, he appeared to be much debilitated and exhausted, lay in a state of careless insensibility until roused, when he uttered a child-like cry, but could not be prevailed upon to speak - Stimulating medicines, Wine, Brandy and nutritious diet were given, blisters were applied to his head, and on the morning of the 5th he was better and asked for his breakfast, on the following day however he relapsed into his former state, having been very restless and crying incessantly during the preceding night; in this state he continued, crying constantly by night, and drawing his limbs closely together, he lay in a state of torpor during the day, when roused from this state of lethargy and apathy he did whatever he might be desired, but could not be prevailed upon to speak more ^{than} a few words, and those incoherently and inarticulately -

Some time previous to the febrile attack he had received a wound on the scalp and there existed a cicatrix over the left Parietal bone; when asked at different periods during his illness if he suffered any pain, he invariably placed his hand on the seat of this injury - The stimulating medicines, wine and brandy were continued, Opium was given to procure sleep, and the application of blisters to his head was repeated; on the 28th he was evidently improved in health, being able to sit up in bed and call for his food, but still his Mental faculties appeared much impaired and he was in a state approaching to fatuity - On the 10th of September he was attacked with swelling of his throat and neck and he had symptoms of general Anasarca, which soon yielded to Mercurials and saline purgatives and he again gained ground until the 4th of October when he complained of pain in his head, and during the ensuing night he was seized with symptoms resembling an Epileptic Frangorson, flung himself violently from his bed and inflicted a wound over his right eye which bled profusely, when replaced in bed he again flung himself off, gnashed his teeth and moaned incessantly, and he passed his excretions involuntarily; towards morning he became more tranquil, and lay during the day in a state of Coma, the

convulsions recurring at intervals; his breathing was extremely laboured, froth issuing from his mouth and nostrils, and his pupils were dilated and insensible to light; a blister was applied to his head and sinapisms to his feet, but without producing any benefit and at 12 O'clock M. of the 6th October he expired.

Sectio Cadaveris

Cranium - On dividing the scalp a quantity of blood was found effused for a considerable extent into the cellular membrane, the effects of the recent injury, but there was not any depression or injury of the bone corresponding to the old cicatrix - The Calvarium being removed and the Dura Mater raised, some fluid escaped, and more ^{was} contained between the Arachnoid membrane and the Pia Mater, in the Ventricles also there was found about 1/2 ss. On further examination there could not be detected any visible cause for the great fatuity which had existed, or for the Epileptic symptoms which had latterly supervened, and the only remarkable circumstance which could be observed, was the almost perfectly bloodless state of the Cerebral vessels, both arterial and venous, and perhaps this might account for the former state, on the principle of the nervous system not having the necessary stimulus usually produced by an active state of the sanguiferous system -

Thorax - The Lungs appeared at first view to be perfectly healthy but on further examination, the middle lobe of the right Lung was found to be in a state of Hepatization and the whole tissue of both those organs was gorged with deoxygenized blood; there had not existed any adhesions between the Pleurae, but each of those bags contained nearly one pint of bloody serum - The Heart was sound and the Pericardium contained about 3/4 of a similar fluid to that found in the Pleurae -

Abdomen - On opening this cavity, the intestines were found distended with flatus but when cut into, there could not be detected any morbid appearance and the only thing to be observed in this Canal was a peculiar mottled appearance which existed in the mucous lining of the Caecum - The Liver was gorged with blood, and in the right lobe there existed a cicatrix, probably of an abscess which had formerly existed in this situation, adhesions (apparently of long standing) having formed around the place - The Spleen was enlarged, was of a dark purple colour, and its structure was so completely degenerated, as to resemble a clot of blood in a state of semiputrefaction, no other disease could be detected -

William M Ford

Case treated by Mr Joseph & Mr Malcolm -

Assistant Surgeon to the Forces -

Regiment	Rank and Name	Age	Disease.	Admitted	Died.	Regi ^o	Folio
11 th Infantry	Private Tho ^s Heyburn	24	Variocela	May 10 th	October 8 th	4	104

About eighteen months prior to this mans being last received into General Hospital, (on the 10th of May) he received a blow on the left testicle, which produced effects for which he had frequently been under treatment both in Regimental and General Hospital; on the day of his last admission the testicle was considerably enlarged and matter issued from a small opening in the Scrotum, which being deemed not sufficiently free was dilated by incision, and the opening afterwards assumed a healthy appearance. From this period nothing of particular interest occurred until the 6th of June, on which day hemorrhage to the extent of $\frac{1}{2}$ viij. followed the application of a stimulating lotion to a small fungoid mass which had protruded through the opening in the Scrotum, this produced considerable prostration of strength, which was increased by two or three recurrences of the bleeding, although to less considerable extent, those circumstances connected with a peculiarity of constitution, a few hours pain being sufficient to reduce him in an extraordinary degree, prevented the operation of castration being performed about the middle of September, which was the only period at which it would have been justifiable, after this date, the fungus which protruded through the opening gradually became larger and appeared to be liberating itself from the scrotum, which became proportionably smaller, the surface of the mass being covered with a lumpy coloured slough; the Scrotum at length becoming flaccid and empty on the side of the diseased gland, indicated that it composed a considerable proportion of the diseased mass. From the time at which the hemorrhage occurred his health had been gradually declining and at this period it was very indifferent, he was excessively emaciated and debilitated, spent sleepless nights and sweated profusely when he dozed during the day; Port wine together with tonic medicines were given, and he had an anodyne at night; however he continued ^{to sink} and Diarrhea supervened, different astringents were employed and Brandy was allowed. his right side, on which he usually lay, became oedematous, and at half past 11 O'clock of the 8th of October, he quietly expired without any particular augmentation of his symptoms —

Sectio Cadaveris

Cranium - No morbid appearances could be observed -

Thorax - Both Lungs were found to be universally adherent to the Costal Pleura, to the Diaphragm and to the Pericardium, and in the apex of each there existed numerous tubercles in a Miliary and crude state, but not any of them had yet reached the stage of solution; the remainder of those organs was healthy, except that two or three small tubercles were found in different parts of their substance and the cellular tissue contained much blood - The Heart was perfectly sound and the Pericardium contained a very small quantity of clear serum -

Abdomen - In this cavity there was found about half a pint of bloody serum, and the intestines exhibited externally some slight traces of inflammation; when opened, the lower part of the Stomach presented several patches of inflamed mucous membrane and some small ulcers had commenced to form, at the entrance of this small intestine into the Caecum, there was an ulcer about one inch in diameter and this large intestine itself was much inflamed -

The Liver, the surface of which was irregular, was condensed, hard and heavy. the cut surface presenting an appearance resembling a section of a nutmeg, and but little blood escaped from the divided vessels - The Spleen and Pancreas were perfectly healthy but the latter viscus was surrounded by enlarged mesenteric glands, which as also the Lumbar glands had become indurated, but did not contain any scrophulous matter, some few of them were studded in their substance with small bodies resembling crude tubercles in the Lungs -

Varia - The diseased Testicle had completely escaped from the scrotum, and was suspended by the chord which was perfectly healthy about one inch and a half above the gland - When divided, the substance of the Testicle was found perfectly indurated, but did not present any nodular appearance of a specific character - The glands in both Groins were enlarged, those in the left being merely indurated while those in the right side were studded with small bodies similar to those found in the Mesenteric and Lumbar glands - The right lower extremity was edematous -

N.B. I have prepared the Generative organs, and sent them to the Museum of the Medical Staff, at Chatham, } marked in the Catalogue -
N^o 20, Generative functions, Division 1st
 William M Ford

Case treated by M^r: Milne & M^r: Bradford -

Apptt. Surgeon to the Forces -

N^o 25

Regiment.	Rank and Name.	Age	Disease -	Admitted	Died	Reg ^t	Solis
23 rd Infantry	Private Patrick Beady	29	Febris Remittens	August 2 nd	October 23 rd 3 months & 10 days	5	157

This man was attacked with Remittent fever, on the 14th of July, while at Coimbra.

being attended with considerable determination to the head, and requiring active treatment, the consequence of which was subsequently, extreme debility; the Regiment having received orders to march from Coimbra to Braga, he was transferred to General Hospital, where he arrived on the 2^o of August, in an extreme degree of exhaustion, his lips and Lænum being ulcerated from being long bedridden, and a large abscess existed beneath the angle of the jaw on the right side; this was opened and evacuated, stimulating medicines, wine and brandy were given, and he slowly improved and was acquiring strength; on the 15th however it was discovered that a large abscess existed beneath the great Pectoral muscle on the right side, which contained about half a pint of purulent fluid, it was evacuated but on the morning of the 17th had again become full; a second removal of the matter afforded much relief, pressure was applied and the secretion of pus ceased. His health again improved, tonics, wine and nutritious diet were continued, and he was apparently about to recover, when on the 24th he evidently laboured under Pyrexial symptoms which continued for some days; on the morning of the 27th the cause of this constitutional derangement was discovered, namely, a large collection of matter which had formed beneath the fascia of the right thigh; when opened about one quart of thick purulent fluid escaped, and the evacuation of the sac afforded immediate relief, the fever subsided, and moderate pressure caused adhesion of its parietes; this last attack however threw ^{him} back considerably and greatly increased his exhaustion and debility, notwithstanding, he again rallied and was gaining ground when a fourth abscess made its appearance beneath the fascia on the back of his right leg, and at the same time (Septem. 11th) his right knee became swollen and tender, on the 13th the swelling had considerably increased, being attended with a ^{high} degree of inflammation and fever; on this day it was thought that he must necessarily die, but in two days afterwards the symptoms began to subside, and he was again likely to do well when Dysentery supervened, and notwithstanding various remedies employed, terminated fatally on the 23rd of October at 5 O'clk. P.M.

Sectio Cadaveris

Cranium - Free from disease -

Thorax - The right Lung had contracted some few adhesions, apparently of long standing, to the parietes of the chest; in every other respect these organs were perfectly healthy - The muscular fibres of the Heart were firmly contracted, and on the surface of the right Ventricle there existed an excellent specimen of the "White Spot" of Corvisart, a patch of lymph having been effused external to the serous membrane, of an oval figure, the longest diameter being about two inches and a half -

Abdomen - The Liver was of natural size, its colour externally being dark blue and when sections were made transversely, this Viscus was found to be fully surged with venous blood; the Gall bladder contained a quantity of thin, saponaceous bile -

The Pancreas was smaller than it is usually found, its substance being hard and the particles of which it is composed feeling like grains of millet; the other glandular viscera were healthy - The Stomach at its lower extremity was much inflamed, and some small ulcers existed in the Caecum, which became more numerous and more extensive in the Colon, this intestine being considerably enlarged and distended with flatus -

Varia - On cutting through the right Pectoral muscle, a cavity was exposed which reached from near to the nipple of the breast to the Axilla, this had been the sac of the abscess which formerly existed here; its walls consisted of a smooth surface, of yellow colour and perfectly dry, the opening which had been made to evacuate its contents had healed, forming a completely shut sac -

The right knee joint was rigidly flexed, and could not by moderate force be extended; on opening the joint, the Synovial membrane presented traces of previous inflammation; the condyles of the Femur were enlarged and on either edge they had become carious the cartilage being absceded, there was also a small spot on the centre of the Patella where abrasion of the cartilage and incipient caries had occurred - The right lower extremity was oedematous -

N.B. I have prepared the Heart, its substance being injected with red fluid, for the Museum of the Medical Staff, at Chatham } Marked in Catalogue -
} Circulation, Div: 1 - No. 75 -
William M. Ford,

Case treated by M^r. Joseph and M^r. Malcolm -

Asst. Surgeon to the Forces -

N^o 26

Regiment.	Rank and Name.	Age	Disease -	Admitted.	Died.	Days -	Folio
23 rd Infantry	Private John Rowlandson	40	Dysentery Chronic	October 21 st	October 31 st	5	165

This man was admitted into Regimental Hospital at Mafra on the 17th of August labouring under fever, which assumed the Remittent form and subsequently became Inter-mittent; Purgatives, and Colomel combined with Antimony were given in the first instance afterwards Bark and Sulphate of Quinine were employed and on the 1st of September, he was considered convalescent, the Bark however was continued until the 3rd; the Inter-mittent paroxysms however recurred on the 6th for which the same medicines were employed, and they were again becoming less frequent when he was seized with Dysentery symptoms in a very severe form on the 14th - Leeches, fomentations, Castor Oil, Starch Emulsion, and Colomel with opium were the means employed up to the 25th of October, when he was sent down to General Hospital for the purpose of being invalided and sent home; on arrival here he was excessively emaciated and exhausted and the Dysentery symptoms were aggravated, for which

seasons, although he was invalided he was deemed unfit to embark -
 Opium, astringents, wine and nutritious diet were given, which seemed
 to alleviate the severity of the symptoms, but he gradually sunk and
 died at 12 O'clock. M. on 31st of October -

Sectio Cadaveris

Cranium - No disease -

Thorax - Adhesions, apparently of old formation, existed between
 the Pulmonary and Costal Pleura on either side, being much more exten-
 sive and firmer on the right than on the left, the different lobes of the Lungs were
 also connected by bands of lymph; externally the Lungs appeared to be
 healthy, but when the superior lobe of the Left Lung was divided, it showed
 evident traces of inflammation, being of a vivid red colour, while the posterior
 part, which from gravitation contained much blood was dark coloured -

In the right Lung, the different states produced by inflammation of the
 Pulmonary tissue were well marked, the inferior lobe being highly
 vascular and of a bright red colour, which gradually became more faint
 the substance of the Lung being proportionally condensed, the upper lobe
 was almost perfectly bloodless, of a white appearance and completely soli-
 dified - The Heart was sound and the Pericardium contained
 not more than $\frac{3}{4}$ of clear serum -

Abdomen - The Liver contained much venous blood, and near
 to its thin edge and immediately above the notch for the Gall bladder,
 there existed a cicatrix, which probably denoted the seat of an abscess at some
 former period; the Spleen was enlarged and of firmer structure than natural, on
 its convex surface there was (apparently) a cicatrix of about an inch and a
 half in length, of cartilaginous texture to which the Peritoneum adhered closely,
 the surface of the viscus being wrinkled all around; the other glandular viscera
 were healthy - The lower extremity of the Stomach presented externally a plum-
 colour, and when opened the mucous membrane was found highly vascular and exten-
 sively ulcerated, the ulcers being large with defined margins as if a portion of the mucous
 lining had been cut out with a scissor; the large intestines were also inflamed and ulcer-
 ated throughout their whole course, but not to the same extent as the Stomach had been,
 the ulcers being small and scattered closely over the mucous membrane which was
 thickened - Attached to the loose margin of the Omentum and floating in the Peritoneum
 was found a round cartilaginous tumor of the bigness of a large pea -

N.B. I have prepared the small tumor found in the Peritoneum for the Museum
 of the Medical Staff, at Chatham - { Marked in Catalogue, Williams. M. Ford's
 No. 80, Division IV.
 Case treated by Mr. Malcolm - Digestion Assiet's Lung to the Forces -

Regiment	Rank and Name	Age	Disease	Admitted	Died	Regist. Folio
63 rd Infantry	Private James Rutherford	19	Dysentery post februm	Septem ^r 6 th	November 1 st	2. 85

This lad who was naturally of a delicate habit and weakly frame, was seized with fever while at Thomar in July, from which he with difficulty recovered, being left in a state of great debility; whilst on the march from Thomar to Loures on the 25th of July he had a relapse, and on the arrival of the Regiment at Loures he was taken into hospital where he continued under treatment until the 6th of September, when the Regiment having orders to proceed to Belem, he was transferred to General Hospital in an incipient stage of convalescence; and by means of tonics, wine and nutritious diet he was gaining strength, though slowly; on the 15th however (Dysentery being very prevalent) he was attacked with the usual symptoms of this disease, which he did not report until their urgency obliged him to do so on the morning of the 17th; Dovers powder with an excess of gr^o of Specaubran in gr^o was given three times during the day and on the following morning he was better; subsequently he used oily purgatives, Blue pill combined with Dovers powder and Calomel and Opium so as gently to affect his mouth, at the same time using light, farinaceous food; his symptoms sometimes became alleviated but as certainly again relapsed; on the 24th he complained of tenderness of the Abdomen, which was removed by the application of a blister and he was ever after free from it - When the disease assumed a chronic form, Nitrous acid and Opium in Camphor Julep, Sulphate of Lime and Opium and occasionally Castor Oil were given and he evacuated a quantity of dark coloured Sybala; on the 8th of October the tenesmus and frequency of purging abated, Opate cremata were thrown up and he used Chalk mixture with Tincture of Kino, his strength however sunk rapidly, wine and tonics were given, notwithstanding which he declined, his appetite, which had been for some time capricious, at length totally failed, and at 1/2 past 10 O'Clock A.M. on the 1st of November he expired without any particular alteration in his symptoms -

Sectio Cadaveris

Cranium - The contents of this cavity were free from morbid appearance -

Thorax - Each Pleural cavity contained about half a pint of clear serum; the left Lung was perfectly healthy, but the right, particularly its inferior lobe, was heavy and when pressed had an edematous feel, this part being divided a quantity of frothy mucus mixed with blood issued from

every point - No further disease could be detected in those organs - The Heart was firmly contracted and small and the Pericardium contained about $\frac{3}{4}$ of clear serum -

Abdomen - All the glandular viscera were healthy; the stomach was distended with flatus, and the small intestines, particularly the Ilium, presented a purple colour on the Peritoneal surface, when those tubes were opened, the mucous membrane was found much inflamed and in some places abraded, and at about four inches from the Ilio Caecal valve extensive ulceration had taken place in the Ilium; vascularity and abrasion were also observable in the Coecum and ascending Colon, but in the descending Colon and Rectum the whole of the Mucous membrane was ulcerated, being of a dark green colour, while the edges of the ulcers (which were superficial), were quite black - The lower extremities were oedematous -

Williams M Ford,

Case treated by M^r. Ford -

Assistant Surgeon to the Forces -

N^o 28

Regiment	Rank and Name.	Age	Disease.	Admitted	Died	Reg ^t Folio
10 th Infantry	Private William Keys	35	Dysentery Chronica	October 20 th	Novemb ^r 2 nd	3 244

William Keys was received into Regimental Hospital at Mafra. on the 10th of August having Remittent fever and was sent to the convalescent ward on the 27th of September, where he remained until the 7th of October when he again came under treatment for Dysentery; the pain in his Abdomen being very great and attended with inability to evacuate his urine, seventy leeches were applied and afterwards warm fomentations with benefit to both symptoms; afterwards oily purgatives, Calomel and Opium in small and repeated doses, opiate and oily enemata were also frequently thrown up and with advantage, yet he always relapsed, and being generally worn out and his period of service being nearly expired he was at length sent down to General Hospital for the purpose of being invalided home; when received, his principal complaint was frequency of purging, his stools being fluid and yellow coloured unattended by tenesmus or pain when pressed; Dovers powder with an excess of gr^ot of Speacchan in gr^ot was given thrice daily and with relief to the symptoms; on the second day afterwards he passed a Tania about four feet and a half in length, having passed others similar while in Regimental Hospital; on the supposition

that others still remained in his intestines and were the cause of irritation, ʒss of Castor Oil with ʒij of Spirits of Turpentine were given which operated freely and brought away another tape worm - Being very weak, wine and other nutritious diet were given, and his bowels continuing relaxed, astringents were employed; he again improved - but his appetite after some time failed, weakness increased, he passed his faeces, which were extremely fetid, in bed, his pulse became intermittent, and he lay in a state of apparent tranquillity until the 2nd of November when he expired at 7 o'clock. A.M. -

Sectio Cadaveris

Cranium - No morbid appearance -

Thorax - A few slight adhesions had formed between the inferior lobe of either Lung and the upper surface of the Diaphragm, and the left Lung was also adherent to the Pericardium; but not the slightest morbid appearance could be detected in the structure of those organs, the Heart was sound and the Pericardium contained about ʒiij of serum -

Abdomen - The Liver presented on its surface a blue, mottled appearance, when cut into the acini were large and when its structure was torn, they separated leaving a ragged surface; the venous vessels were full of blood - On the convex surface of the right lobe there was a deep sulcus to which the Peritoneum adhered firmly, and when a section was made across this, a white, dense cavity was observed, being probably the situation of a Hepatic abscess at some former period; the Gall bladder was distended with attenuated, light coloured bile - The Spleen was enlarged, its structure softened, and the bag of the Omentum adhered in many parts to its convex surface - the other glandular viscera were sound - When the intestinal canal was opened, the Ileum presented several patches of inflamed mucous membrane, and at its inferior part this membrane was abraded - the whole course of the large intestines, from the Caecum to the Anus, was extensively ulcerated, the mucous membrane, where it had not been destroyed, being much thickened and thrown into firm rugae, these tubes were also much contracted in diameter.

William M Ford

Case treated by M^r Ford -

Apist's List to the Forces

N^o 29

Regiment,	Rank and Name,	Age,	Disease -	Admitted	Died	Regim ^t Folio
R.S. Corps	Private Michael Dolan	24	Dysentery post febrile	August 9 th	Novem ^r 14 th	2 103

Shortly after the arrival of the Army in Portugal, this man was first received into Hospital labouring under Intermittent fever, which disease he had suffered from while stationed at Ayr, in England; On the 7th of February he again came into hospital complaining of pain in his breast and in his right hip, caused by a large stone having fallen upon him; he had at the same time a relapse of the fever, which yielded to the use of Sulphate of Quinine and a blister removed the pain of his breast, but that in the hip remained, notwithstanding the frequent application of blisters, friction with Tartar Emetic conguent, the operation of cupping and the use of leeches, it was therefore deemed advisable to place a caustic issue on either side of the Lumbar Vertebra; on the 6th of May, when the sloughs were about to separate from the eschars, erysipelatous inflammation attacked their edges and rapidly spread, and the sores assumed a gangrenous ^{appearance;} cataplasms, and afterwards a solution of the Hydrag. Oxymuriat. were applied to the part and Dovers powder and subsequently solid Opium were given to allay the excessive pain, purgatives were also used, and afterwards tonic medicines and wine - he ultimately recovered both from the Erysipelas and the original complaint, and was discharged to duty on the 26th of July.

On the 9th of August he was again readmitted, having a severe attack of Continued fever, also cough and inflammation of the fauces; purgatives, diaphoretics demulcents and an astringent gargle were prescribed in the early stage of the disease, subsequently tonics and he was rapidly convalescing when Dysentery's symptoms made their appearance, on the evening of the 2nd of September, induced as he afterwards acknowledged, by his using improper articles of diet, obtained by stealth - At first he complained much of pain and tenesmus and his dejections were scanty, slimy and tinged with blood, afterwards his faces assumed a flocculent, shreddy appearance and green colour, and subsequently he passed light, frothy fluid of a brown colour and resembling yeast, the pain and tenesmus becoming at this time easier; his feet latterly became oedematous and his emaciation was rapid - Various medicines were employed during the progress of the disease - in the early stage a purgative of Calomel and James's powder combined, and followed by Castor oil, was given; afterwards Dovers powder with an excess of Specacuan in gr^{ss}, three times daily, and occasionally a small dose of oil - the symptoms not subsiding however, blue pill combined with Dovers powder were given as gently to affect his mouth, and with benefit, when the Dovers powder and Specacuan were given as before - the disease however again assumed a more severe character, and Sulphate of Zinc in doses of gr^j combined with gr^{ss} of Opium were given 4 times daily and an anodyne at night, for a short period his evacuations appeared more natural but again relapsed into their former state and he passed scybala; Blue pill and Dovers powder were given as to produce gentle ptyalism, and occasionally a small dose of oil, but without producing any permanent benefit - On the evening of the 10th of November he was

suddenly seized with a spasmodic affection in his right side, which rendered respiration excessively difficult and painful, this was relieved by an antispasmodic draught and by the application of a blister, but until death took place he was not altogether free from pain in this situation; he rapidly sunk, his extremities became adematous and cold and his countenance was contracted and livid; Camphor mixture with Ammoniac, Brandy and Wine were given and he continued to linger until 8 o'clock A.M. of the 14th when he quietly expired -

Section Cadaveris

Cranium - No disease observable -

Thorax - The Sternum being raised, the right Lung appeared collapsed being attached by long bands of lymph to the Costal Pleura in several parts, these adhesions being evidently of old formation; on removing the Lung, examination of its structure proved it to be perfectly healthy, being crepitant and free from the existence of tubercles or traces of previous inflammation - The left Lung which filled its Pleura accurately, was also adherent at its upper part to the parietes of the chest, its weight was considerably greater than the right (which might have been occasioned by the man constantly lying on his left side for some time previous to death), but its substance was crepitant and equally free from disease as the right - The Heart was slightly adematous at its apex, but in other respects was healthy and the Pericardium contained about $\mathfrak{z}iv$ of Clear Serum -

Abdomen - The Liver was larger than natural and its surface presented a mottled appearance, when a section was made, its structure was found to be condensed and to contain but little blood; the Gall bladder was fully distended with bile of a light green colour, and externally it had contracted adhesions to the great Omentum and to the Colon - The Spleen was also enlarged and heavy, its capsule was of a blue grey colour, and its substance contained less blood than usual - The other glandular viscera were sound. The small intestines were free from disease, except that at the lower part of the Ileum there were a few spots of inflamed mucous membrane; in the Caecum however extensive, superficial ulceration commenced and extended along the whole course of the large intestines, becoming more intense towards the extremity of the Colon and in the Rectum, particularly along the course of the longitudinal bands, being attended with much vascularity and thickening of the coats of the intestines -

Vaxis - The Spine, and the Hip joint in which disease had been supposed to exist, were both examined but not the slightest morbid appearance could be detected in either -

William M Ford

Case treated { formerly, by Mr. Campbell and Mr. Milne -
latterly, by Mr. Ford and Mr. Bradford -

Apert Surgeon to the Forces -

Regiment.	Rank and Name.	Age.	Disease.	Admitted.	Died -	Age.	Folio
60 th Infantry	Private William Mellows	22	Dysentery Chronica	1827 August 2 nd	1828 January 8 th	5	213

This man was received into Regimental Hospital at Leiria on the 11th of July 1827, apparently labouring under Hepatic disease, for which Venesection to ℥xxiv. was practised and he took Calomel combined with Antimony; on the 15th, Dysentery supervened for which Calomel and Opium were given and the pain in the right Hypochondrium returning, blisters were applied; on the 2nd of August he was transferred to General Hospital in consequence of the removal of the Regiment to Mafra - When admitted he had much tenderness of Abdomen attended with severe griping and tenesmus, he also complained of pain in his right side and chest; a draught containing Pulv: Crota cum Opio ʒj. was given, and the pain and tenesmus continuing without his having a free evacuation, ℥ij of Castor Oil was administered on the following morning, after which he had a copious stool, but attended with much distressing pain; the Pulvis Crota cum Opio was again resorted to and subsequently Calomel with Spicacuban and Sulphate of Lime with Opium; these medicines not producing any material benefit, Calomel and Opium were given in small and repeated doses so as to affect his mouth slightly, and anodyne enemata were thrown up to soothe the great irritation which existed in the large intestines; for some days he felt easier, passed larger quantities of faeculent matter and had much less tenesmus; however he again relapsed into his former state, becoming considerably emaciated and debilitated - Astringent and tonic medicines were now employed, and light, nutritive diet with Port wine were given; occasionally he experienced relief, but as certainly had a return of severe symptoms - On the 9th of September he had slight cough which increased and was attended with expectoration and pain of chest, being most urgent during the night, mucilaginous mixtures, Squill and Opium were given, notwithstanding which, the severity of the symptoms increased and on the 21st he complained of acute pain in either side of his chest - the Dysenteric symptoms not improving, Calomel with Opium were again had recourse to and astringent enemata were frequently exhibited; from this period the tenesmus and pain of Abdomen were constant, he frequently complained of pain in his chest and as often referred to the uneasiness existing in the right Hypochondrium, debility was evidently increasing for which reason Aromatic medicines were combined with the astringents, for a short

period he obtained some ease, but about the middle of December, symptoms resembling hectic fever set in, he perspired profusely by night, his cheeks became flushed and he was excessively restless, his countenance became distorted, the left angle of his mouth being drawn up and causing a Sardoniac smile; the symptoms went on as usual and on the 27th of December, he suddenly became jaundiced, the yellow colour of his skin daily increasing, and he had some tenderness when pressed over the Hepatic region - his strength now rapidly declined, and he passed his evacuations involuntarily; Stimulants, astringents and solid Opium were given frequently and he lingered until the 8th of January 1828, when he died at $\frac{1}{2}$ past 5 o'clock, A. M. —

Sectio Cadaveris

Cranium - The structure of the Brain was perfectly natural, and the Ventricles contained about from $\frac{3}{4}$ ss. to $\frac{3}{4}$ i of clear serum -

Thorax - Both Lungs, but more particularly the left, had contracted adhesions to the parietes of the chest, this latter being also closely connected to the Pericardium and to the Diaphragm, when removed from the body and divided, frothy mucus, of yellow colour and mixed with blood, issued from the whole surface, and the substance of the organ seemed to be gorged with blood; numerous tubercles, about the size of small peas were scattered through it, being particularly abundant in its apex and generally superficially situated; these bodies were each distinct from another, of an irregular shape, composed of a cheesy substance, which had been tinged by the Biliary secretions, surrounding a small nucleus, which was harder than the enveloping matter, and quite black, these were contained in cysts apparently of cartilaginous structure, out of which they were easily removed, no process resembling solution of those bodies could be observed - In the right Lung much the same appearances were found as those described to have existed in the left; its apex however had a more hard and irregular feel, and when a section was made and the surface squeezed, puriform matter exuded in small quantity from many points, but close examination could not detect that it issued even from minute cavities. the inferior lobe was heavy and solid, of a dark colour and resembling a portion of liver when cut - About $\frac{3}{4}$ ss. of bloody serum were found in the right Pleura - The structure of the Heart was natural, and the Pericardium contained straw-coloured fluid to the amount of $\frac{3}{4}$ ii -

Abdomen - The structure of the Liver did not appear to be disorganized, its surface presented a blue colour, and when a transverse section was made; venous blood flowed profusely from the branches of the Cava

Hepatica; the Gall bladder contained a small quantity of dark coloured, viscid bile and there was not any obstruction of its ducts - The Spleen was considerably increased in size and weight, and its convex surface adhered firmly to the Peritoneum lining the Abdominal muscles; when removed from the body, its capsule was found to be unusually dense, firm and opaque, and the body of the viscus was also preternaturally firm, of dark colour, and very much resembling the appearance afforded by a smooth section of a healthy Liver - The other glandular viscera were healthy - The small intestines were extremely thin and transparent, and excepting two small patches which were more vascular than the remainder of those tubes, did not present any disease - The Caecum contained a quantity of thin, dark coloured faeculent matter, which being washed away, exposed the mucous surface completely abraded, distinct ulceration being more observable the farther the examination was carried along the intestine, the lining membrane being completely destroyed and leaving a rough, dark coloured surface from the commencement of the descending Colon to the Anus, the coats of these viscera were also much thickened and their diameter considerably diminished -

The body was excessively emaciated and the whole surface was of a deep yellow colour; the distortion of the countenance which was observed during life still existed -

Case treated by M^r. Joseph,
M^r. Malcolm, M^r. Bradford & M^r. Milne

William M Ford

Assistant Surgeon to the Forces -

N^o 31

Regiment	Rank and Name.	Age	Disease -	Admitted	Died.	Regis ^r .	Folio.
			X				
23 rd Infantry	Private Denis Murphy	27	Phthisis Pulmonalis	October 21 st 1827	January 25 th 1828	2	157

In the month of February 1827, while at Coimbra this man was exposed to cold and damp, the consequence of which was a cough followed by pains of chest, particularly on the left side and by expectoration of puriform fluid, these symptoms becoming more severe, he was taken into Regimental Hospital where he remained under treatment until the 21st of October when he was sent down to General Hospital from Oporto, for the purpose of being insalivated and sent home; the Medical Board to which he was subjected, however, judging that the climate of Portugal was more favourable for his complaints than the effects of a cold winter in England, deferred his departure until a more favourable season, and he was accordingly taken under treatment on the 22nd - On admission he complained of severe pain

in chest, especially the left side, most distressing by night, a deep inspiration did not increase this pain but excited a cough which was attended with expectoration. Percussion on the left side afforded a dull sound, and the application of the Stethoscope indicated the respiratory murmur indistinct and attended with mucous rattle superiorly - Having assured himself of being sent to England, the disappointment, notwithstanding that the cause of his detention was frequently explained to him, seemed to prey much upon his spirits and he at length became quite Nostalgic; - His symptoms continued pretty stationary until the 9th of November, when he complained of an acute pain in his left buttock increased by pressure over the Sciatic nerve; during this period demulcent and sedative medicines, with occasional mild laxatives, were given and blisters were applied to his chest, he was also blistered on the affected hip and friction with stimulating liniments and the warm bath were frequently employed, but with little more than temporary relief - about the 17th Hectic symptoms made their appearance, he became heated and flushed in the evening and perspired profusely during the night, his strength proportionably declining, and on the 27th his expectoration contained flakes of curdy matter, his spirits continuing depressed and the pain of hip unalleviated. - on the 3rd of January 1828 Diarrhoea ensued and continued with very little abatement until death, notwithstanding the use of strong astringent medicines, Opium both in liquid and solid form and the exhibition of anodyne and astringent enemata; his strength being considerably exhausted light nutritious diet and Port wine had been constantly allowed, however he rapidly sunk and expired without any particular increase of symptoms at a quarter before 2 o'clock P.M. of the 25th instant -

Sectio Cadaveris

Cranium - The Calvarium being raised and the Dura Mater divided, a small quantity of serous fluid escaped, about $\frac{1}{2}$ of a similar fluid being contained in the base of the Cranium while the contents of the Ventricles did not exceed $\frac{1}{2}$ ss - The veins on the convolutions of the Brain were full of blood, but the structure both of the Medullary and Cerebrations substances appeared to be perfectly healthy -

Thorax - When the anterior boundary of this cavity was removed, the left Lung was observed to fill its Pleura accurately while the right appeared to be collapsed and lying in the bottom of its sac; the latter when handled, afforded a granular feel, and although crepitous, was of a tough, leathery consistence; when sections were made in various directions, the whole substance was found so crowded with creude tubercles, that the tip of a finger could not be placed on any one spot without covering several of those bodies, none of which

had arrived to a state even approaching to maturation; when the superior lobe was squeezed a puriform secretion issued from the divided Bronchia -

The left lung was so intimately united to the Pleura Costalis that they could not possibly be separated; when removed from the body, this organ afforded a heavy, consolidated feel, its surface being irregular and hard; sections of its substance presented tubercles equally as numerous as on the right side but in more advanced stages, many of them having arrived to a state of solution, in the upper lobe particularly where several Vomica had formed, one of which, in its apex, was equal to about $\frac{1}{2}$ in. and contained a quantity of dark coloured, turbid puriform matter, with which were mixed some particles of calcareous consistence and others having the appearance of portions of the yolk of a hard boiled egg - The Pericardium was very thin and contained about $\frac{1}{2}$ of clear serum - the structure of the Heart was natural -

† Abdomen - The glandular viscera were all healthy and the Gall bladder was filled with thin, light coloured bile - When the alimentary canal was opened, small fleshy tubercles were observed in the mucous coat of the Plicae, at first distinct from each other, but more inferiorly, gradually clustering together and coalescing they had terminated in ulceration, the ulcers being irregular in their form and having defined, sloping edges; there were also some ulcers of larger size and more irregular form in the caecum, but they did not extend farther along the course of the large intestines -

William M Ford

Case treated by Mr. Ford, Mr. Bradford and Mr. Milne - Apisth. Lung² to the Force -

N^o 32

Regiment.	Rank and Name.	Age	Disease -	Admitted -	Died	Regist. Solis
60 th Infantry	Private Richard Burke	25	Aneurisma Aorta	February 17 th	February 17 th	died on March,

Richard Burke by trade a tailor, a stout, healthy looking man, and a free drinker, had not suffered from disease until the 7th of January when he was received into Regimental Hospital at Madras complaining of violent pain in the region of the Heart and left Hypochondrium, also between the Scapulae action of the Heart violent and frequent, pulse irregular at the wrist, not synchronous with the pulsations of the Heart, which could be felt for a considerable space over the chest - He was bled to Delirium, which was repeated twice afterwards and he subsequently used Tincture of Digitalis in doses of $\frac{1}{2}$ xxx. three daily, which lessened

The violence of the Heart's action and diminished the frequency of the pulse; the most comfortable position while in bed was lying on his back; his respiration was much impeded and blisters were applied to relieve this symptom as also the pain of chest and Extract of Hyoscyamus was given to procure rest by night. On the 17th of February he was placed in a spring waggon for the purpose of being conveyed to General Hospital at Belém. When about two miles from Mafra he complained that the pain about his Heart and in his left side were considerably increased, he suffered much uneasiness between the Scapulae, and he expectorated a small quantity of blood, the Heart's action became increased, his pulse being small, quick and irregular, countenance expressive of great anxiety, and extremities cold; when arrived at Belém, he was removed from the waggon, had drink of Sulphuric acid in water, and he drank some warm tea, after an hour he said that he felt better and complained less of pain, however it was with much difficulty he was replaced in the waggon, when the symptoms again increased, and after some time he exclaimed that he was "dying", immediately about 1/2 pints of florid blood gushed from his mouth and nostrils and he instantly expired, at 1/2 past 5 o'clock. P. M.

Sectio Cadaveris

Cranium - When the Calvarium was raised the vessels on the convolution of the Brain were found to be filled with dark coloured blood and the Sinuses were turgid, but the structure both of the Medullary and Cerebrations substances were healthy - about 3/5 of limpid serum flowed from the ventricles when opened -

Thorax - On removing the anterior boundary of the Thorax, both Lungs appeared to fill their Pleura completely, being crepitous and apparently of healthy structure, but they both were adherent to the parietes of the cavity superiorly and posteriorly; when examined separately from the body, the structure of the left was found to be perfectly free from disease, but the superior and middle lobes of the right, although crepitous, exhibited a mottled appearance on the surface of different sections, small patches of effused blood being thickly dispersed over every part; the inferior lobe, which was completely of a dark purple colour and closely connected to the Pericardium, covered the base of a large Aneurism, to which it also had close connexion; a large rupture having occurred into this portion of the Lung, gave it the appearance of a ~~large~~ lot of blood -

The Pleura each contained about half a pint of red coloured serum, and in the left closely attached to the upper surface of the Diaphragm there was found a small conical cyst, having the appearance of a portion of small intestine protruding through this muscle; its ^{covering} serous was highly vascular and its weight was equal to 3/5 - When punctured, rather more than an ounce of a muddy coloured, extremely viscid and tenacious fluid flowed out, which readily sunk in water. The Pericardium contained about 3/4 of yellow coloured serum - The structure of the Heart was flaccid, the

parietes of the right ventricle being thinned; the cavities contained but little blood and their valves were free from disease; the edges of the Aortic valves were thickened, and this vessel being opened, insipient disease of its coats was observed immediately below the origin of the left Subclavian artery. A short distance above its passage through the Diaphragm, an opening about one inch and a half in diameter, was found in its back part, the lining membrane having a vascular appearance for a considerable distance around; this opening allowed the extravasation of blood and the subsequent formation of an Aneurism - a small tumor which extended upwards behind the Aorta and Heart, protruding for a short distance into the left Pleura as also into the right, where it contracted close adhesions to the inferior lobe of the lung and eventually burst into it - The bodies of the Dorsal Vertebrae which were in contact with the sac, had been completely denuded and rendered carious, forming its posterior boundary -

Abdomen - The stomach was nearly filled with a dark coloured fluid containing some small coagula, some part of this was, most probably, blood which had regurgitated into the Stomach at the time of death, there was not any communication between the Oesophagus and the Aneurism -

The Liver was increased in size and weight, was of a pale colour and the acini were large and granular, but little blood flowed from the divided vessels; the Gall bladder was contracted and contained a very small quantity of bile - The Spleen was also enlarged, was easily ruptured and its structure had completely degenerated into a soft, grumous mass - The other viscera of this cavity were wholly free from disease -

N.B. I have prepared the Heart and Aneurism as also the cyst found in the left Pleura for the Museum of the Medical Staff at Leitham
(marked in Catalogue, N^o 51, Circulation, Division 2nd)
(marked in Catalogue, N^o 76, Respiration, Divis^o 3)

William M Ford

Case treated by Mr. Melvin, Surgⁿ 60th Reg^t.

Aspiratⁿ Surgⁿ to the Forces -

P.S. On making a more close examination of the Aorta, it was found that from its origin from the left Ventricle to the place where the rupture had taken place in the vessel, it was thickly set with small white tubercular spots being most numerous at the "Arch" and situated beneath the lining membrane, and in some places affording an uneven granular feel - The margin of the large opening is firm and dense - approaching to cartilaginous structure -

W. M. F. -

Regiment	Rank and Name	Age	Disease	Admitted	Died	Regis ^r	Folio
10 th Infantry	Private John Watts	24	Admitted - Pneumonia Died - Gastritis -	February 18 th	March 4 th	2	220

This patient had been for a considerable period under treatment in Regimental Hospital for Intermittent fever when he was sent out to barracks as a convalescent, being in a state of debility; shortly afterwards he was seized with pain of chest and oppressed respiration, which gradually increased in urgency, yet he did not report himself sick until the 17th of February, on which day he was conveyed in a spring Wagon from Mafra to General Hospital, where he arrived at 8 o'clock in the evening, apparently extremely exhausted; he then complained of pain in his chest, and oppressed, short respiration which was most easily performed in the sitting posture (these symptoms he stated to have been much aggravated by the motion of the Wagon) his pulse was hard, quick and rather small, with occasional intermissions, and he was much troubled by a short, dry cough, —

$\mathfrak{z}\mathfrak{i}$ of blood were taken from his arm with immediate relief, and as further Venæsection was interdicted by his reduced and exhausted condition, a solution of Tartarized Antimony, in the proportion of $\mathfrak{gr}\mathfrak{xviii}$ to $\mathfrak{℥}\mathfrak{v}$ of water, was given in doses of $\mathfrak{℥}\mathfrak{i}$ every hour during the following day, and a blister was applied to his chest; the medicine usually produced nausea, reduced the circulation and also acted upon his bowels, the dose was then reduced to $\mathfrak{℥}\mathfrak{ss}$ every second hour, and on the following morning he felt considerably better, expectorated a quantity of viscid mucus, pulse 90, occasionally intermitting — Medicine continued — On the morning of the 20th he did not experience any pain on the deepest inspiration, the cough had considerably decreased, his pulse was 80, small, not intermitting and his appearance was altogether improved — the Tartar Emetic solution was now omitted and a mucilaginous pectoral mixture was substituted; from this date he continued free from pain or oppressed respiration (his bowels being rather torpid on the 23rd ~~for which~~ $\mathfrak{℥}\mathfrak{v}$ of Castor Oil were given and with effect; during the night however his former symptoms returned, accompanied with chilliness, his pulse being scarcely perceptible, a stimulating and anodyne draught was given in the morning, and a second blister was applied on his breast; soon after using the draught, his pulse rose, and he became warm. The pain also decreased considerably after the action of the blister, he slept tolerably well during the ensuing night, and on the morning of the 25th he felt easy, surface of body being warm, pulse 90, stronger and regular, $\mathfrak{℥}\mathfrak{i}$ of Castor Oil was given to obviate a torpid state of his bowels and the Pectoral medicine was continued — Considerable debility being present on the 20th Sulphate of Quinine was employed in small doses; from this date until the evening of the 2nd of March he had occasional slight febrile exacerbations, and perspired pro-

fully by night, the cough and expectoration, which now became purulent, continuing -
 On the last mentioned date he became ^{extremely} weak and had frequent inclination to Syncope
 which was prevented however by a stimulating draught and some warm brandy and water,
 he afterwards passed a good night and on the next morning was quite free from pain
 of chest, pulse weak and intermitting every 3rd beat, the debility continuing, a stimulating mix-
 ture was substituted for the Quinine and he remained tranquil until evening when the tendency
 to Syncope returned with increased urgency, his body being covered with cold perspiration, breathing
 much oppressed, he complained of a sense of tightness across his chest, the lightest pressure causing
 intolerable pain, he moaned incessantly and frequently fainted, his pulse being occasionally
 wholly imperceptible & intermitting during expiration when it could be felt; an aromatic draught,
 friction with a stimulating liniment and the use of brandy & water again revived him, and he did not
 express much suffering until evening, when the same symptoms returned, and rapidly increased until
 1/2 past 10 o'clk when he expired, retaining his faculties to the last moment of life -

Sectio Cadaveris

Cranium - There was not any disease found in the cranium -

Thorax - This cavity afforded rather a dull sound on percussion, and when the
 Sternum was removed the Pericardium was exposed being closely adherent to all contiguous parts
 extending for a considerable distance into either Pleura and distended with fluid; when the
 adhesions, which were evidently of recent formation, were broken down, the external surface
 of the Pericardium exhibited an extremely vascular appearance, its coats being also
 much thickened, and when laid open, at least one quart of Low-Purulent fluid having
 flakes of lymph floating through it, escaped, this being evacuated the whole serous
 surface presented being thickly coated with a layer of coagulable lymph, which in
 some places was of considerable thickness, the surfaces were not agglutinated but some
 slender shreds formed a medium of attachment -

Both Lungs were wholly free from organic disease, and had not contracted any
 adhesions except to the Pericardium; when removed from the body they afforded an elastic
 feel, and were evidently emphysematous as was also the cellular membrane in the anterior
 mediastinum - No further disease in this cavity -

Abdomen - The Liver was considerably enlarged, particularly the right lobe, heavy
 and condensed, when cut into the surface presented a marbled appearance, and blood flowed
 in considerable quantity from the divided vessels; on the convex surface existed two white, super-
 ficial patches apparently of effused lymph; the gall bladder was nearly filled with thin, viscid
 bile - The Spleen was also slightly enlarged - all the membranous viscera were healthy -

N.B. I have prepared the Heart &c, its substance being minutely injected, for the
 Museum of the Medical Staff at Chatham - Marked N^o 77, Circulation, Division 1st

Williams M Ford

Regiment	Name	Age	Disease	Admitted	Died	Regist	Folio
			X				
15 th Infantry	Serg ^t David Paterson	30	Phthisis Pulmonalis	1827 December 1 st	1828 March 5 th	6	28

In the month of June 1827 this man had an attack of *Sandies* while at *Leiria*, and was subsequently under treatment in Regimental Hospital at *Mafoa* for fever; his convalescence being tedious he was sent down to *Belo* for change of air and after a short lapse of time was taken into General Hospital evidently labouring under *Confirmed Phthisis*; the symptoms ran their usual course and nothing particular presented until the evening of the 1st of January when he was seized with vomiting of green coloured, acid fluid, and ever afterwards he was constantly annoyed by *Dyspepsia* and acidity of Stomach, which were occasionally relieved by absorbent medicines and effervescent draughts; the hectic symptoms continued, Diarrhoea being latterly very urgent and accompanied with pain of Abdomen increased by pressure - On the 8th of July the *Plethroscope* was applied, and the following indications were afforded - beneath the right Clavicle and in the Axilla, the "respiratory murmur" was feeble and Pectoriloquy distinct, at the nipple of the breast respiration distinct; on the left side the respiration was more feeble and pectoriloquy more distinct in the Axilla & beneath the Clavicle and breathing more indistinct at the left nipple than on the right side, pectoriloquy also audible posteriorly between the base of the Scapula and the spine - Percussion afforded a hollow sound all over the chest and did cause any uneasy sensation -

The means employed during his illness were, in the early stage tonics, subsequently emollient medicines, expectorants, occasional gentle purgatives, absorbents and sedatives, together with light nutritious diet and wine, however he continued to decline rapidly without any particular suffering, his mind being engaged up to the evening previous to death in making preparations for his passage to England, and on the morning of the 5th of March he quietly expired without any particular augmentation of symptoms, at 8 o'clock A.M. -

Section Cadaveris

Cranium - Free from morbid appearance -

Thorax - The apex of either lung was extremely firm and dense, of a dark colour and most intimately united to the Pleura of the ribs; when removed from the body and sections were made through these portions, they were found to be quite impervious to air and containing numerous small vesicles having cartilaginous cysts and filled with a turbid, dark coloured matter, these were more numerous and more extensive on the left side, the upper part of the inferior lobe of the left lung also contained clusters of tubercles which had

run into a state of solution, and produced several small vesicles with firm cysts; the substance of both contained very many minute tubercles, principally situated superficially, and the intervening cellular tissue was gorged with blood. The Pericardium contained about \mathfrak{z} ij of clear serum and the Heart's structure did not present any deviation from health.

Abdomen - When this cavity was opened, about four quarts of yellow colorid serum were removed, and immediately the Mesenteric glands presented being in a state of extreme disease, forming a mass of enlarged bodies along the root of the mesentery which when opened were found to contain soft cheesy matter - The surface of the Liver had a mottled appearance; internally it was of a pale colour and its structure was condensed the gland itself being unusually small, the gall bladder was filled with thin bile - In the P^lura several small fleshy bodies were found situated beneath the mucous membrane, and towards the termination of the intestine, these coalescing, degenerated into ulcers, having defined edges, in the Cecum, Colon and Rectum very extensive ulceration had taken place, the ulcers being large and their edges irregular and raised.

William M Ford

Case treated by Dr^s Bradford and Dr^s Milne -

Spent Surgⁿ to the Forces -

This was the last fatal case which occurred in the General Hospital; the Army returned to England in March & April 1828 - Wm Ford M.D.

Regiment	Name	Age	Disease	Admitted	Died	Regt ^l	Folio
10 th Hussars	Private Rich ^d Whitaker	28	Dysenterical Chronica	March 11 th	March 16 th		

This man was admitted into Regimental Hospital on the 23rd of October 1827 with symptoms of Dysentery. These were of so slight a nature as to yield easily to a few doses of Castor^{oil} followed by Nuxtark and Magnesia and he was discharged to duty on the 27th November. On the 28th November he was readmitted, labouring under symptoms similar to those of previous month, but in a more aggravated form, there being violent Stomach & Tenesmus. Nuxtark & Magnesia were given in the first instance subsequently Calomel and opium, the latter medicines were continued so as to affect the bowels when all the symptoms became mitigated and the number of stools diminished. The Calomel was discontinued, & Opium was given here with Infusion of Gentian and afterwards small doses of sulphate of Zinc combined with Myrrh. Under this treatment he considerably recruited his strength, & regained his flesh, & his evacuations reduced to two or three in the twenty four hours. On the 17th February his evacuations increased in frequency & accompanied with debility. Calomel in small doses combined with opium were again prescribed with bitter Infusion but, without benefit, evacuations continuing frequent & fluids coming away often without any poisonous urining. There is swelling with hardness to be felt in Scrotulus Cordis extending into Right Hypochondrium, undisturbed by pain on pressure. He never had pain of right side, but has been formerly troubled with pain of left side on sitting hard. On his admission into General Hospital he was extremely emaciated & exhausted & the Dysenteric symptoms, were severe & urgent. He had Opium, Luteal Hydraz, Wine & nutritious diet given him, which seemed to alleviate the severity of the symptoms, but he gradually sunk & expired at 10 o'clock A.M. on the 16th March.

Seccio Cadaveris

Cranium - Free from morbid appearances

Thorax - The Sternum & Cartilages being raised, both lungs were found to be collapsed the inferior lobes in either cavity adhered firmly to the superior surface of Diaphragm they felt oedematous & when cut into, a considerable quantity of frothy mucus escaped from the Bronchial tubes, their structure was not disorganized.

Abdomen - The Liver was considerably enlarged & heavy particularly the left lobe its surface was a bright red colour & when a section of it was made, its structure was found to be very much condensed & to contain very little blood. The Gall bladder was fully distended with a dark viscid bile. Spleen was the usual

