

**Medical researches on the effects of iodine in bronchocele, paralysis, chorea, scrophula, fistula lachrymalis, deafness, dysphagia, white swelling, and distortions of the spine / by Alexander Manson.**

### **Contributors**

Manson, Alexander.  
Francis A. Countway Library of Medicine

### **Publication/Creation**

London : Longman, Hurst, Rees, Orme, Brown, and Green, 1825.

### **Persistent URL**

<https://wellcomecollection.org/works/e8s7mm99>

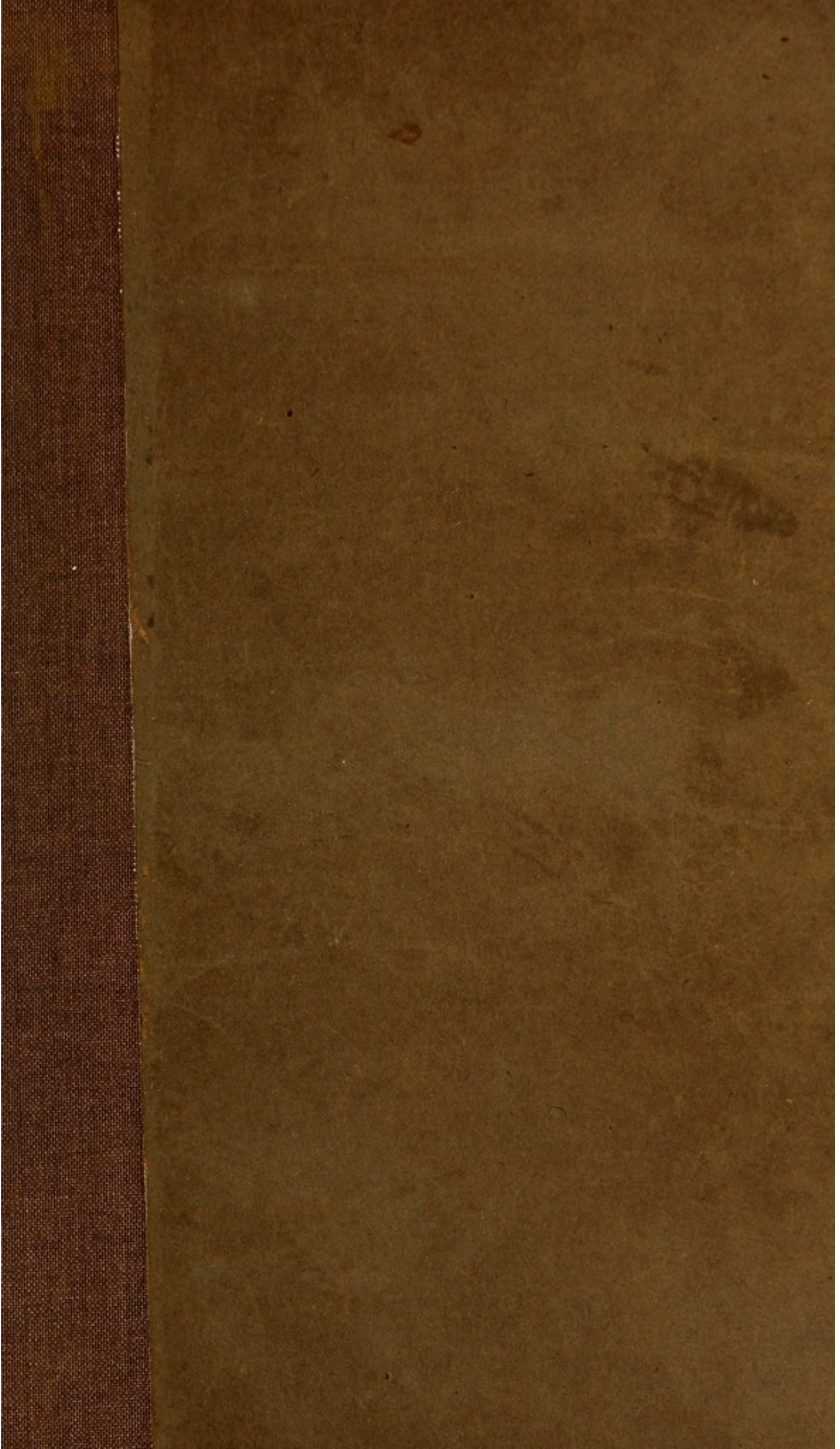
### **License and attribution**

This material has been provided by This material has been provided by the Francis A. Countway Library of Medicine, through the Medical Heritage Library. The original may be consulted at the Francis A. Countway Library of Medicine, Harvard Medical School. where the originals may be consulted. This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>





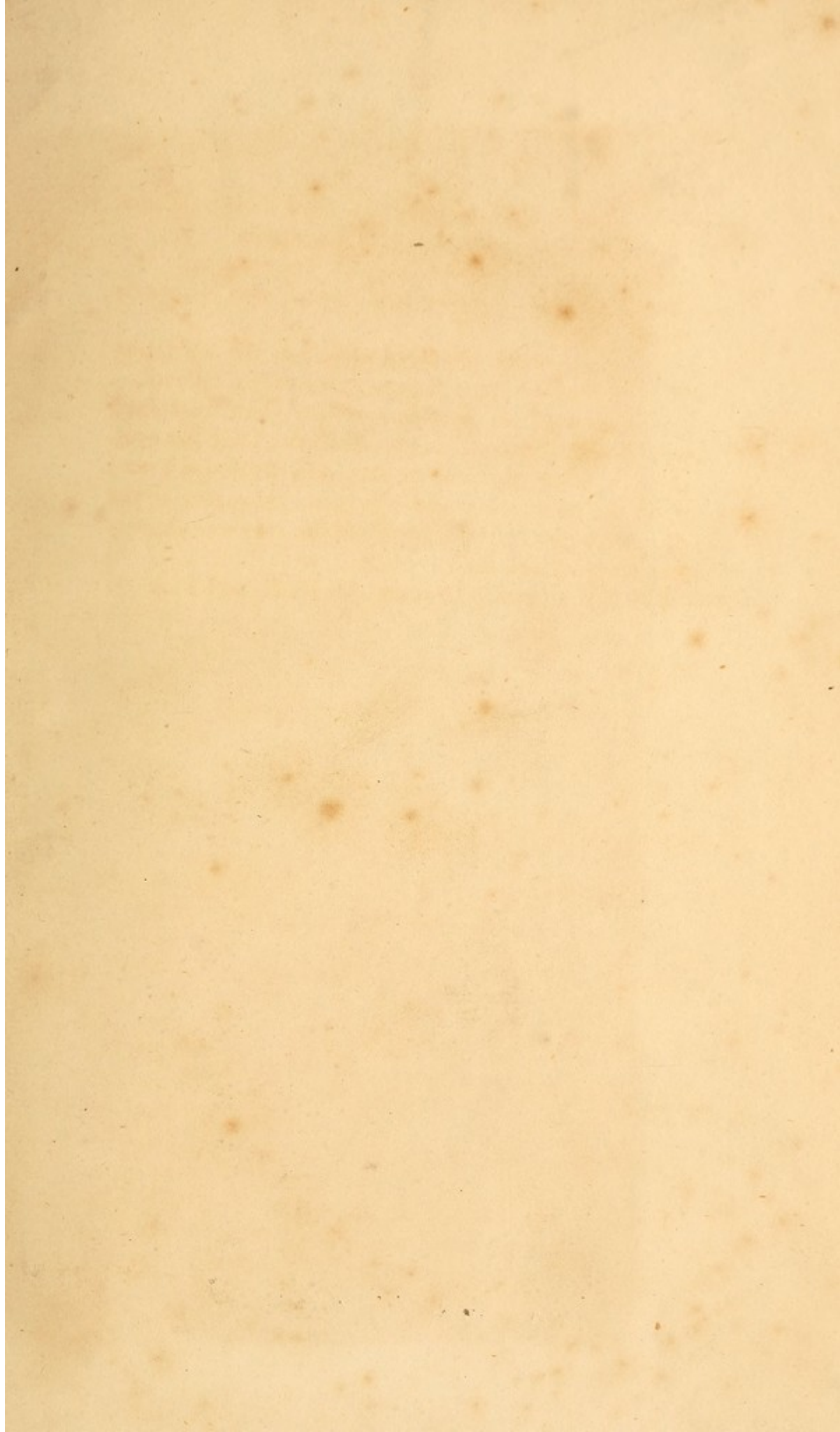
3.25 m  
1  
No. 22. A 48.

**BOSTON  
MEDICAL LIBRARY  
ASSOCIATION,  
19 BOYLSTON PLACE.**

Received.....


Loaned by

G. B. Shattuck M.D.



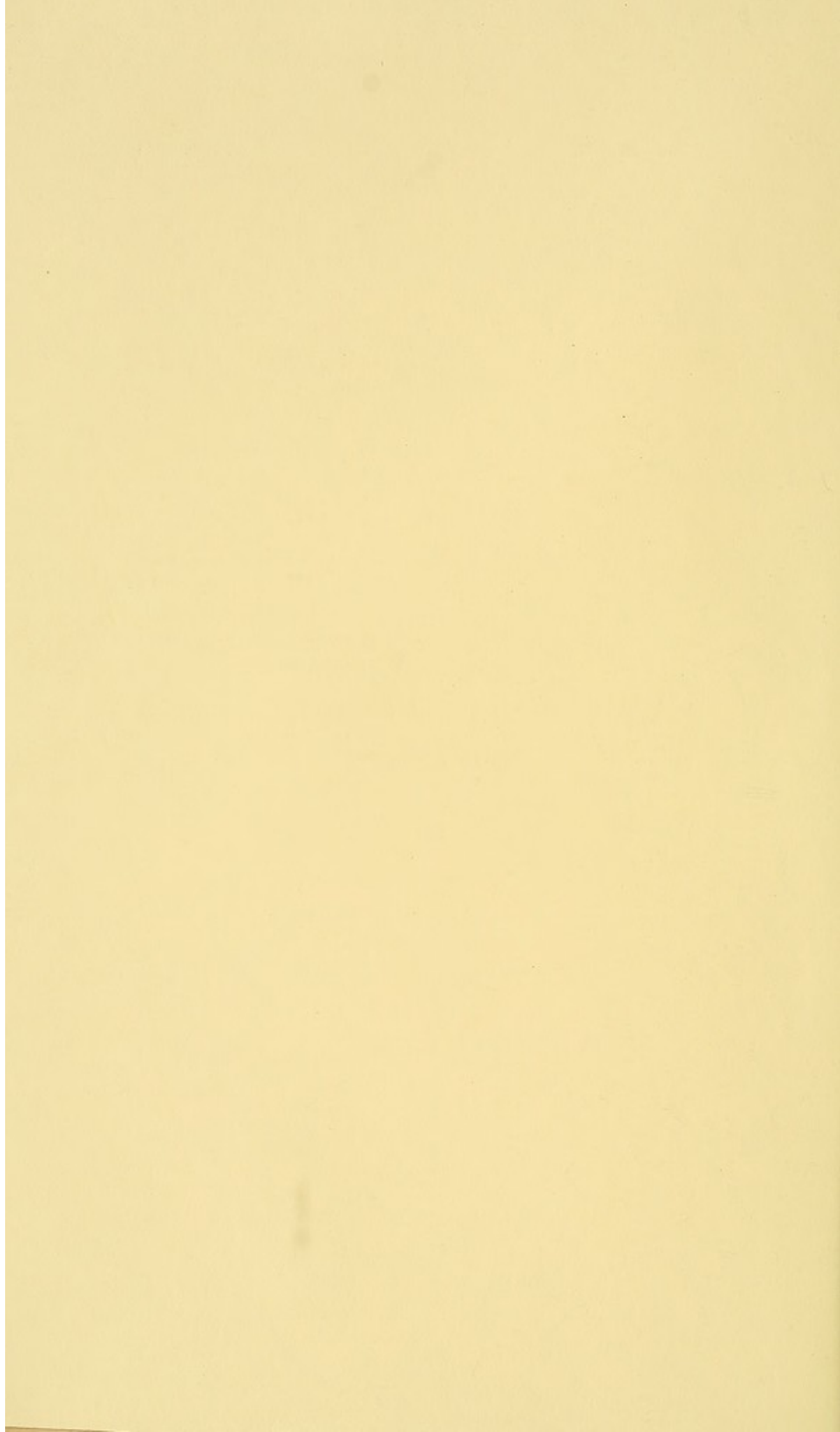






Digitized by the Internet Archive  
in 2011 with funding from  
Open Knowledge Commons and Harvard Medical School











*Geo. C. Shattuck*

**MEDICAL RESEARCHES**

*G. C. Shattuck, Jr.*

ON THE EFFECTS

OF

**I O D I N E,**

IN

BRONCHOCELE, PARALYSIS, CHOREA,  
SCROPHULA,  
FISTULA LACHRYMALIS,  
DEAFNESS, DYSPHAGIA, WHITE SWELLING,  
AND  
DISTORTIONS OF THE SPINE.

---

**BY ALEXANDER MANSON, M.D.**

PHYSICIAN TO THE GENERAL HOSPITAL,  
AND ST. MARY'S HOSPITAL AND DISPENSARY, NOTTINGHAM.

---

LONDON:

PRINTED FOR LONGMAN, HURST, REES, ORME, BROWN, AND GREEN,  
PATERNOSTER ROW.

---

1825.



MEDICAL MISCELLANIES

OF THE EFFECTS

BY

JOHN

[ENTERED AT STATIONERS' HALL.]

BRONCHITIS, PARALYSIS, CHOREA,

SCROPHULA,

FISTULA LACHRYMALIS,

DEAFNESS, DYSPHAGIA, WHITE SWELLING,

AND

DISTORTIONS OF THE SPINE.

BY ALEXANDER LEWIS, M.D.

PHYSICIAN TO THE GENERAL HOSPITAL,

AND ST. MARY'S HOSPITAL AND DISPENSARY, NOTTINGHAM.

LONDON:

PRINTED BY JOSEPH HARRIS, BELL-YARD, AND GREEN,  
PATERNOSTER ROW.

1852.

TO

*Sir GILBERT BLANE, Bart. M.D. F.R.S. of L. and E.*

*Physician to the King, &c.*

WHOSE LEARNING AND EMINENT TALENTS

HAVE DESERVEDLY PLACED HIM

*IN THE FIRST RANK OF THE MEDICAL PROFESSION,*

THE FOLLOWING

RESEARCHES

ARE HUMBLY INSCRIBED,

AS A SMALL TRIBUTE OF RESPECT AND GRATITUDE

FOR FAVORS CONFERRED

*(WHEN IN THE PUBLIC SERVICE)*

UPON HIS MUCH OBLIGED

AND VERY HUMBLE SERVANT,

THE AUTHOR.



AN EIGHTH BLIND, FROM M.D. F.R.S. of L. and M.

Appointments to the King, &c.

WHOSE LEARNING AND EMINENT TALENTS

HAVE DESERVEDLY PLACED HIM

IN THE FIRST RANK OF THE MEDICAL PROFESSION.

THE FOLLOWING

RESERVICES

ARE HUMBLY INSCRIBED

AS A SMALL TRIBUTE OF RESPECT AND GRATITUDE

TO THE AUTHOR

(A MAN IN THE PUBLIC SERVICE)

FROM HIS MUCH OBLIGED

AND TRUE FRIEND

THE AUTHOR



## PREFACE.

---

IN the present unsettled state of medical opinion respecting Iodine as a remedial agent, and in the almost total absence of detailed information respecting its effects on the human body, by the Medical Practitioners of this country, it occurred to me, as my experience has been very considerable with this remedy (having prescribed, at least, 180 ounces of it since March, 1821), that a Report of my practice might be productive of some benefit, by shewing, that the prejudices at present entertained against its *internal* use, are unfounded; and that it possesses very great powers in the cure of many obstinate diseases, over which other remedies have little or no influence.

It will be seen on the perusal of the work, that owing to Bronchocele being endemic in Nottingham and its vicinity, my attention had for some time been directed to discover the active matter in burnt sponge, that proves remedial in that disease, when I learnt through the medium



of the London Medical Journals, that Dr. Coindet, of Geneva, had employed Iodine in the cure of Goitre with very great success. I immediately obtained a supply of this substance, and experience very soon convinced me of its superior powers over burnt sponge in the cure of that disease. When employed in administering Iodine in the cure of Bronchocele, I was so fortunate as to discover several new facts; and partly from these, and partly from analogy, I was induced to extend the employment of this medicine to the cure of the other diseases enumerated in the title page—with what success I must leave to others to decide, after they shall have carefully perused the Cases now fairly and candidly submitted to their inspection. As I have confined myself, as much as possible, to facts, the greater number of which were cognizable by my senses; I hope and trust, that under similar circumstances, similar effects will follow its exhibition in the hands of those practitioners who may think proper to adopt the practice which I have recommended, not from caprice, or fondness for novelty, but because I have found the treatment by Iodine much more efficacious than any other method with which I am acquainted.



I may here observe, that I have employed Iodine with benefit in other diseases, besides those enumerated in this work ; but I do not consider my experience as sufficiently matured in the greater number of them, to justify me in recommending the practice to the attention of my professional brethren, at present.

To the younger members of the profession, who may read this work, I beg to observe, that if they expect, by the exhibition of Iodine, to cure every case of the different diseases in which it has been found decidedly useful, they will be much disappointed, as it is impossible for that, or any other medicine, to be invariably efficacious. For example, I find, from practice, that Iodine is greatly superior to any other remedy we possess, in the different species of Palsy ; but I also know from experience, confirmed by dissection, that it will not cure that disease, when it arises from a softening down of the brain, or any other considerable disorganization of this most important organ ; and, therefore, beg to caution them against rejecting a remedy as useless and inefficient, before giving it a fair and unprejudiced trial, in a sufficient number of cases : and if they will do so, I am quite certain



that in the great majority of them, if taken in time, the medicine will recommend itself more powerfully and convincingly than I am able to do, as personal experience must always carry home deeper conviction, than a detail of facts by any practitioner.

It has been my wish to make these Researches as practical as possible, and to avoid theory, as far as I was able; but, if I should not have done so in every instance so rigidly as I intended, I hope the facts I have detailed will be allowed to stand, independently of any speculation that I may have broached.

I think it necessary here to remark, that it does not come within my plan to notice what has been done by other practitioners, in investigating the effects of Iodine in the cure of diseases; indeed, it would have been superfluous to have done so, as all the Essays, Cases, and Notices that I have read on this subject, are already before the public in an English dress; and I am anxious not to mingle the observations of others with these Researches, which, with the exception of Bronchocele, are original, so far as regards myself, and are re-



ported from personal observation, without any bias or influence whatever, in consequence of any thing I may have read respecting the noxious or salutary influence of Iodine in the hands of others.

I can with great truth say, that it is not from the vanity of appearing in print, or from any fondness for writing, that I now appear before the public as an author, for which I know that I am, in many respects, ill qualified; but, to communicate, as well as I am able, what I consider as useful practical information, which must, at all times, be interesting to both patients and practitioners, and contribute, in a certain degree, to the advancement of medical science.

As some further apology for the very imperfect manner in which I have executed this undertaking, and for the numerous defects and omissions that I fear will be too frequently found in the following pages: I beg to observe, that the work was written as I could snatch a moment's repose from my professional engagements, and printed in half sheets as soon as written, often without my having sufficient



leisure to correct the press, which has occasioned the list of Errata to be longer than I could have wished. If, notwithstanding all its errors and imperfections, this little work shall in any degree contribute to the alleviation or cure of disease, and to the advancement of medical knowledge, it will *be some consolation to me to reflect*, that the time I have devoted to it has not been spent in vain.

1st July, 1825.



## CONTENTS.

---

### SECTION I.

Medical Researches on the Effects of Iodine in Bronchocele, 15 Cases, from page 16 to 47.

A Tabular View of Cases of Bronchocele, from N<sup>o</sup>. 16 to 120, page 48 to 56.

Remarks on the Cases contained in the above Table, from page 57 to 71.

Appendix, N<sup>o</sup>. 1, page 445, et seq.

### SECTION II.

Medical Researches on the Effects of Iodine in Paralysis, or Palsy, page 73.

Paralysis Paraplegia, or Paraplegic Palsy, 5 Cases, from page 76 to 99.

Paraplegia, the Morbid Appearances in two Cases of, from page 99 to 102.

Paralysis Hemiplegia, or Hemiplegic Palsy, 9 Cases (the 6th by Mr. Jowett), from page 103 to 134; and 2 Cases of Hemiplegia and Sectio Cadaveris, from page 134 to 149.

Paralysis Partialis, or Local Palsy, 5 Cases, from page 149 to 165; and Case VI. treated without Iodine, page 165.

A Case of Paralysis of the superior extremities, from Lead introduced into the Body, page 171.

### SECTION III.

Medical Researches on the Effects of Iodine in Chorea, or St. Vitus's Dance, page 175; 11 Cases, from page 187 to 225.

A Tabular View of the Cases of Chorea, treated at the General Hospital, near Nottingham, between the 6th of October, 1812, and 6th of October, 1824, at page 226, et seq.

### SECTION IV.

Medical Researches on the Effects of Iodine in Scrophula, or Struma, page 231.



On the Effects of Iodine in Scrophulous Enlargement of the Conglobate Glands, 4 Cases, from page 235 to 243.

On the Effects of Iodine in Scrophulous Ulcers, 4 Cases, from page 243 to 257.

On the Effects of Iodine in Scrophulous Ophthalmia, page 257; 4 Cases, from page 259 to 270.

General Remarks, page 270.

#### SECTION V.

Medical Researches on the Effects of Iodine in Fistula Lachrymalis, page 273; 1st Case, page 149, and 10 Cases from page 276 to 304.

#### SECTION VI.

Medical Researches on the Effects of Iodine in Deafness, page 305. (See Sarah Carlin's Case, page 235, which ought to have been first noticed.) Case I. (see Case IV. page 23); II. and III. from page 311 to 315; IV. page 279; V. to IX. from page 315 to 324.

#### SECTION VII.

Medical Researches on the Effects of Iodine in Dysphagia, page 325; 7 Cases, from page 330 to 350.

See Appendix to Case IV. at page 450.

#### SECTION VIII.

Medical Researches on the Effects of Iodine in White Swelling, page 352, 11 Cases, from page 354 to 387.

Cases of the Morbus Coxarius, or Disease of the Hip Joint, in which Iodine was employed as the chief remedy, page 388, 4 Cases, from page 388 to 401.

#### SECTION IX.

Medical Researches on the Effects of Iodine in Distortions of the Spine, page 402, 11 Cases, from page 409 to 440.

A Case of Paraplegia, Curvature of the Spine, and Phthisis Pulmonalis; with a Report of the morbid appearances observed after death, page 440.

Appendix, N<sup>o</sup>. 1, page 445.

———, N<sup>o</sup>. 2, page 450.

Formulæ, page 451.

Errata and Addenda.



# MEDICAL RESEARCHES

ON THE

## *Effects of Iodine in Bronchocele.*

---

THE enlargement of the Thyroid gland, called by medical men Bronchocele, and commonly known in this country by the name of Derbyshire Neck, and in France, by that of Goitre, is an endemial disease, or one that takes place only in certain districts.

It is a complaint that occurs very frequently in Nottingham, and the surrounding country. The disease is to be met with, I believe, throughout Derbyshire, but in some places more commonly than in others; I was lately told, that there are not fewer than a hundred women in the village of Cromford, near Matlock, who labour under Bronchocele, of a large size. As to the cause of this disease, there are various opinions: the vulgar one here ascribes the disease to the hardness of the water, and, as far as I have had an opportunity of enquiring, the same opinion obtains in Derbyshire.

This popular notion certainly receives confirmation from the circumstance, that Bronchocele is more frequently to be met with, and



of a larger size, where the water in common use is very hard, than when it is of a softer quality. The water with which the inhabitants of Nottingham are chiefly supplied, is from the river Leen, that runs close to the town, and well water. The Leen is chiefly surface water and is forced by an engine into a reservoir, from which it is conveyed in leaden pipes, to the greater part of the town, and is certainly a soft water, and answers very well for washing, and all other domestic purposes. The well water is more or less hard; the softest is brought from Sion Hill and New Radford water works, in carts, to supply the inhabitants of those parts of the town that are not furnished with water by pipes from the reservoir.

The well water in the town is very hard and unfit for domestic purposes, although many persons I know, use it for drinking, brewing, and making tea, in preference to the river water. Well water is also very much employed by the inhabitants of the country around Nottingham, and some of the wells are very deep, particularly in the coal district, where they are often drained of their water by sinking deep shafts to get the coal. A respectable surgeon, who practises in the coal district, informs me, that Bronchocele is more common now than it was in his younger days, and he ascribes it to the wells being sunk



deeper than formerly, from the circumstance mentioned above. \*

In certain districts of the Alps, Bronchocele occurs so frequently and so generally, that it appears to be both hereditary and endemial; by some, the disease has been ascribed to elevated situation and low temperature—by others, to the use of snow or ice water.

If elevated situation and low temperature had any share in the production of the disease, we ought to meet with it every day in Sweden, Norway, and the Highlands of Scotland; but, so far from this being the case, the fact is, that the disease is unknown in those countries, except by name.

The late Dr. Reeve, of Norwich, who had travelled in Switzerland, and was familiar with Bronchocele, observes, “with regard to the alleged causes of *Goitre*, the general opinion of

---

\* Dr. Coindet says, that † “the use of hard waters, or the pump water of the lower streets of the city (Geneva), brings on the *Goitre* very speedily,” this coincides with my own observation, but Dr. C.’s second class of causes of *Goitre*, viz. “laborious parturition, vomiting, coughing, crying, anger, women bearing heavy burthens upon their heads,” I can admit as aggravating circumstances, but, not as exciting causes, for it is notorious that these causes do *not* produce *Goitre* in districts where the disease is not endemial. † Observations on the remarkable effects of Iodine, &c. by Dr. Coindet. P. 7. et seq.



its being endemial in mountainous countries is of no value, because the disease is rare in Scotland, and very common in the county of Norfolk.”\*

That Bronchocele is occasioned by something in the river or well water, used by persons residing in the district where the disease is endemic, and not by snow or ice water, is, I think, proved beyond a doubt, by the following facts recorded by Dr. Richardson, who accompanied the late arduous expedition to the American Polar Regions, under the command of Captain Franklin, of the Royal Navy. He says, “Bronchocele, or Goitre, is a common disorder at Edmonston. I examined several of the individuals afflicted with it, and endeavoured to obtain every information on the subject from the most authentic sources.”

“The following facts may be depended upon: The disorder attacks those only who drink from the *water* of the *river*. It is indeed in its worst state, confined almost entirely to the half breed women and children, who reside constantly at the fort, and make use of river water, drawn in Winter, through a hole made in the ice. The men, from being often from home on journeys through the plain, when their drink is

---

\* Edin. Med. and Surg. Jour. vol. v. page 34.



*melted snow*, are less affected; and if any of them exhibit, during the Winter, some incipient symptoms of the complaint, the annual Summer voyage to the sea coast generally effects a cure. The natives, who confine themselves to *snow water* in the Winter, and drink of the small rivulets which flow through the plains in the Summer, are exempt from the attacks of this disease."

"A residence of a single year at Edmonston, is sufficient to render a family bronchocelous. Many of the Goitres acquire great size. Burnt sponge has been tried and found to remove the disease; but an exposure to the same cause immediately produces it."

"A great proportion of the children of women who have Goitres, are born idiots, with large heads, and the other distinguishing marks of *cretins*. I could not learn, whether it was necessary that both parents should have Goitres to produce cretin children." \*

I may here remark, that, in no instance have I observed mental imbecility, or the disease called Cretinism, in the least connected with Bronchocele, as it occurs in this part of the country.

From what has been stated above, it is suffi-

---

\* Franklin's Narrative of a Journey to the shore of the Polar Sea, p. 118 and 119.



ciently clear, that *elevation* of situation, and *temperature* of the water, have nothing to do with the production of Bronchocele.

That it is occasioned by something in the water commonly used, in the place where the disease is endemic, is, I think, sufficiently proved by the extracts, from Captain Franklin's Journal, given above. As to the particular substance, in solution in the water, that occasions Bronchocele, I freely confess my complete ignorance ; but let us hope, that this noxious matter will sooner or later be detected by some one gifted with superior talents for chemical research.

For centuries, burnt sponge was the chief remedial agent in the cure of Bronchocele ; and till lately, we were as ignorant of the active substance in it, that dissipated Goitrous swellings, as we are at present respecting the substance in the water, that occasions Bronchocele in those pre-disposed to the disease.

The pre-disposition appears to me to be owing to a natural weakness, or laxity of constitution, analogous to what we generally find in persons who labour under Scrofula. This view of the case is confirmed by the fact, that Bronchocele is much more frequently met with in females than in males ; and never, so far as I have observed, in males of a firm and robust constitu-



tion. In what proportion it attacks the sexes, I cannot pretend to speak with any degree of accuracy, owing to the necks of males not being exposed to view ; but so far as the disease has come under my notice in the way of treatment, it is in the proportion of fifteen males to a hundred and one females, as will appear from inspecting the following cases and table.

I know several instances of females, who were exempt from Bronchocele when they resided at the place of their nativity, who were attacked by it, after a residence of some years in this town ; and some of the *female* children of these parents have had the disease, at an early period in life, in a still greater degree than the parent, thereby shewing, in the language of the schools, that the disease is *hereditary*.

I am quite convinced, that it is only the disposition to the disease that is hereditary ; and that if the children of the parents I have alluded to, had been removed, in early infancy, to the natal spot of the parent, they would have remained free from the disease.

In Bronchocele, the Thyroid gland is very often found nearly uniformly enlarged, and of different degrees of firmness to the touch in different cases. I believe it will invariably be found, that the smaller and softer the Broncho-



cele is, the more readily will it admit of cure, and the larger and harder, the greater will be the difficulty in dissipating it. We often find one side of the gland very much enlarged, and the opposite side scarcely larger than natural. Very often the gland is developed in irregularly shaped lobes; and occasionally only a small portion of the gland on one side is enlarged.

In almost every case when the Thyroid gland is enlarged in a considerable degree, more or less hoarseness, difficulty of breathing, and wheezing take place, when the patient walks fast, ascends a stair, or runs. But I have found the greatest degree of dyspnoea and wheezing to take place in those cases, in which the middle portion of the gland is developed in a globular form, and by pressing on the trachea, occasions much distress in breathing.

I have met with only three cases of bony tumour in the enlarged Thyroid gland. The first was in a female subject about 25 years of age (obtained, I believe, from London, which was dissected by Professor Alison and myself, at Edinburgh, in the Winter of 1810.) The second occurred in a female, about 30 years of age, an out-patient of the Nottingham General Hospital, who was under my care for the cure of Bronchocele, about 10 years ago. In both these instances, the bony tumour was of a lenticular



form, and appeared to be produced by the membrane covering the anterior part of the enlarged gland. The third example of bony tumour was lately found in the *substance* of the Thyroid gland, in an old woman, who died of general dropsy, in St. Mary's Hospital, in this town; the gland was but slightly enlarged, and two irregularly formed bony masses were found, one about the size of a hazel nut, the other about the size of a cherry stone. Doctor Baillie informs us, that the "Thyroid gland, or a part of it, is occasionally changed, in old people, into a bony mass, but this disease is of rare occurrence." \*

Celsus, in the short paragraph he has favoured us with on Bronchocele, mentions, that small bones mixed with hair are sometimes found in tumours of this description. To show the antiquity of the disease, and the mode of treatment practised in his time, I copy the paragraph for the benefit of those who may not be in possession of his work.

"At in cervice, inter cutem et asperam arteriam, tumor increscit (Βρογχοκήλην Græci vocant), quo, modo caro hebes, modo humor aliquis, melle, aquæve similis, includitur; inter-

---

\* Morbid Anatomy, page 87, third edit.



dum etiam minutis ossibus pili immixti. Ex quibus quicquid est, tunica continetur. Potest autem adurentibus medicamentis curari: quibus summa cutis cum subjecta tunica exeditur. Quo facto, sive humor est, profluit; sive quid densius digitis educitur: tum ulcus sub linamentis sanescit. Sed scalpelli curatio brevior est. Medio tumore una linea inciditur usque ad tunicam: deinde vitiosus sinus ab integro corpore digito separatur, totusque cum velamento suo eximitur: tum aceto cui vel salem vel nitrum aliquis adjecit, eluitur, oræque una sutura junguntur; ceteraque eadem, quæ in aliis suturis, superinjiciuntur: leniter deinde, ne fauces urgeat deligatur. Si quando autem tunica eximi non potuerit, intus inspergenda adurentia, linamentisque id curandum est, et ceteris pus moventibus.”\*

Dr. Baillie, in his valuable work already quoted, informs us, that the following morbid appearances are found on dissecting bronchoceleous tumours:—

“ When a section is made of the Thyroid gland, affected with this disease, it is found to consist of a number of cells, which contain a transparent viscid fluid. These cells vary in their size, in different parts of the same gland, and in dif-

---

\* Celsus Book vii. Cap. xiii.



ferent swellings of the same kind in different individuals. Some of them are so large as to be able to contain a small pea, but most of them are of a smaller size. The viscid fluid, when the gland has been preserved for some time in spirits, is changed into a transparent jelly. From this account of the morbid change of structure, which takes place in Bronchocele, it seems not unreasonable to suppose, that the swelling depends upon a vitiated and increased secretion in the gland. The secretion being in large quantity, gradually distends the cells, increasing thereby their capacity; and this enlargement of the cells forms the general swelling of the gland. What is now said, however, is thrown out merely as a conjecture, and should be received with caution.”\*

My own observations, as far as they go, coincide with Dr. Baillie’s account of the morbid appearances just quoted.—Since the year 1811 (when I settled in Nottingham, as a physician), I have had very considerable experience in the treatment of Bronchocele. In the beginning of my practice in this disease, I employed different means to reduce these swellings, viz. : Ta. Scillæ, Ta. Ferri Muriatis, stimulant liniments rubbed on the part, warm plasters applied to

---

\* Morbid Anat. p. 85, third edition.



the tumour, and sometimes blisters, but without any marked advantage. I had conceived a prejudice against burnt sponge, as a remedial agent in Bronchocele, its sensible qualities, and, at that time, supposed composition, leading me to think that it could not possess much energy in the cure of any disease. In this, however, I was greatly mistaken, for I succeeded in curing many cases of Bronchocele by the internal exhibition of burnt sponge, in the form of an electuary.

Having had ocular demonstration of the efficacy of burnt sponge in the cure of Bronchocele, I was exceedingly anxious to discover the substance to which its efficacy was due, and thought that it must be owing to the carbonate of soda, which it is well known exists in a greater or smaller quantity in sponges, and in all marine plants.

Under this impression, I added, sometimes the sub-carbonate of soda, and sometimes that of potash, to the sponge electuary, by way of increasing its power.

Many cases were cured under this form of prescription, still it was impossible to say what share of the cure was owing to the sub-carbonate of soda or potash, or indeed whether they had



any share ; I therefore resolved to exhibit the alkali by itself, and I was proceeding with this treatment, when I learnt, through the medium of the Medical and Physical Journal, No. 262, that Dr. Coindet had found Iodine to be the active ingredient of burnt sponge.

At my request, Mr. Thompson (at that time the Apothecary of the General Hospital, near Nottingham), procured some Iodine, one drachm of which was dissolved in two ounces and a half of the rectified spirit, \* supplied to the Hospital, being exactly double the quantity of spirit employed by Dr. Coindet, consequently, one drop of his tincture is exactly equal to two drops of the tincture used by myself. I was compelled to use a tincture of a different strength from that of the ingenious physician of Geneva, as the rectified spirit of the Hospital would not dissolve the Iodine in the proportion which he employs, and I found double the quantity of rectified spirit added in portions, and assisted by trituration, only sufficient to dissolve and keep permanently suspended the quantity of Iodine he has directed. This tincture I have employed for the last three years, and I have never found any deposition of Iodine, or change in the sensible qualities of the tincture to take place,

---

\* Specific gravity .916.



an occurrence which is reported to have happened to the tincture employed by Dr. Coindet, and others, who have imitated him.

I shall now proceed to detail a few cases of Bronchocele, with the treatment by Iodine, as followed by myself, with occasional remarks. As it appears to me unnecessary to publish all the cases of Bronchocele (amounting to 116), that I have treated within the last three years by the exhibition of Iodine, I think it best to give a tabular view of the cases not given in detail, and to add remarks on the respective cases, so that no curious or useful fact may be lost to the profession.

---

### CASE I.

Hannah Wollatt, æt. 16, frame-work knitter, Hucknall, admitted as an out-patient of the Nottingham General Hospital, the 6th of March, 1821. Labours under Bronchocele of considerable size, that presses on the trachea so much as to occasion shortness of breath and wheezing. It is three years since the gland first began to enlarge. Has not yet menstruated. Complexion florid. Lips thick. Her aunt labours under Bronchocele, or, as she calls it, a thick neck.



Capiat Pil. Aloes cum Myrrha gr. x. h. s. si tarda est alvus.

℞. Pulv. Sodæ Carbon. et Pulv. Tragacæ. C. āā. ʒss. Misce et divide in Pulv. xx. Capiat iter in die ex aqua.

March 9th. Is nearly in the same state. Pills move her once in 24 hours. Cont<sup>r</sup>. Remed.

March 16. There is no change in the tumour, and her breathing is no better. Pills keep the body open, appetite good. P. 84 and soft. Sk. cool. T. clean. Catamenia have not yet appeared. Omitt<sup>r</sup>. Pulveres.

Cont<sup>r</sup>. Pil. Aloes cum Myrrha h. s. pro renata. Sumat Tæ. Iodini gutt. x. ter in die ex aquæ cyatho vinario.

March 23. The tumour is considerably smaller and softer. Breathing improved and wheezes less. Has had three or four loose motions daily. Cont<sup>r</sup>. Pilæ. Aper. si opus sit. Capt. Tæ. Iodini gutt. xv. ter in die.

March 30. Breathing not affected unless she walks fast. No wheezing now. The tumour is about half the original size and quite soft.



Has three stools in 24 hours. Appetite very good. Drops occasion no sickness or inconvenience. Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Pil. Aloes cum Myrrha p. r. n.

April 13. Much better. Cont<sup>r</sup>. Remed.

April 27. The tumour is not quite dissipated. Drops agree. Cont<sup>r</sup>. Remed.

June 15. Has been from home for the last fortnight, and has taken none of the medicines. Pergat in usu Medicamentorum.

July 27. The Bronchocele is quite gone. Breathing free, no wheezing. Has not yet menstruated. Says she feels quite well. Discharged cured.

I beg leave to remark, that I was trying the effects of the Carbonate of Soda in this case, with a view to ascertain the efficient matter in burnt sponge, when Dr. Coindet's discovery of Iodine being the active ingredient in burnt sponge was announced to the the medical world to my great joy and satisfaction. I lost no time in getting a supply of the Iodine, and the above case led me to believe that it possessed great remedial powers in the cure of Goitre.



## CASE II.

Ruth Meakin, æt. 9, from Newthorpe, admitted an out-patient of the General Hospital, on the 27th of March, 1821. The Thyroid gland is prodigiously enlarged, being nearly as thick as her neck: it has been three or four years in attaining its present size. On the left side are three enlarged Conglobate glands resting on the surface of the tumour. Does not experience any inconvenience in her breathing from the tumour. Her father and three other children labour under Bronchocele. Her mother and five children are perfectly free from the disease. The children have all been brought up together in the same house. General health, good. Bowels, regular. Sumat Tæ. Iodini, gutt. x. ter in die ex aqua.

April 6. Bronchocele no smaller or softer. Conglobate glands in the same state. B. regular. Capiat Tæ. Iodini gutt. xv. ter in die ex aqua.

April 13. Tumour said to have diminished half an inch last week. Cont<sup>r</sup>. remed.

June 15. Has taken 15 drops of the Tincture three times a day regularly. The neck and tumour measure two inches less than when she



was admitted. The Conglobate glands have also diminished more, in proportion, than the Goitre. B. open. Tongue, clean. Capiat Tæ. Iodini gutt. xx. ter in die.

June 29. The tumours continue to subside. Has lost the tape with which the neck was measured. No sickness or inconvenience from the Tincture. Cont<sup>r</sup>. remed.

July 13. The left lobe is almost dissipated, the right one is still of considerable size, and rather hard. Conglobate glands continue to diminish in size. Neck measures  $2\frac{1}{2}$  inches less. Cont<sup>r</sup>. remed.

August 3. Tumour diminished a quarter of an inch since last report. Sumat Tæ. Iodini gutt. xxv. ter in die.

Aug. 17. Reported improving. Cont<sup>r</sup>. remed.

August 24. Bronchocele not reduced in size since last report. The Conglobate glands have subsided so as not to deserve further notice. Capiat Tæ. Iodini gutt. xxx. ter in die.

Sept. 7. The Bronchocele is nearly half an inch less, by measure, than on the 24th ult. B. open. Cont<sup>r</sup>. remed.



Sept. 28. The tumour exactly of the same size as on the 7th inst. but is rather softer. Capiat Magnes. Sulph. ʒij omni mane et Tæ. Iodini gutt. xxxv. ter in die.

Nov. 10. Discharged for non-attendance.

Nov. 23. Came to the Hospital this day to return thanks. There is still a greater degree of fullness in the right side of the gland than natural, but it is soft to the touch. Has passed 15 *lumbrici* since the 28th of Sept. last. Discharged cured.

---

### CASE III.

Ann Cale, æt. 13½, seamer, Hucknall Torkard. General Hospital, 17th April, 1821. The Thyroid gland is considerably swelled and hard; the left side is more enlarged than the right. It is two years since the Bronchocele began to form, and it has gradually been increasing in size. Has never menstruated. Bowels regular. Her mother, who has accompanied her to the Hospital, labours under a large soft Bronchocele; it never gives her any inconvenience, and does not wish to use any means to remove it. For the daughter I prescribed the following drops:



R. Tæ. Iodini ss. Sumat gutt. xv. ter in die  
ex aquæ cyatho vinario.

April 27. Says that the drops make her sick, and occasion head ache. Bowels became costive soon after she began to take the drops. T. furred. Breasts have sensibly enlarged since she began to take the Iodine. Sumat Misturæ Purgantis ʒi. omni mane si tarda est alvus. Capiat Tæ. Iodini gutt. x. ter in die.

May 18. The Bronchocele is much smaller. Conglobate gland is not sensibly diminished.\* Cont<sup>r</sup>. remed.

June 15. Has taken no drops for a week, having had the head ache. The Bronchocele is nearly dissipated; and the Conglobate gland has now subsided as much in proportion to its size. The purging mixture keeps the bowels sufficiently open. Cont<sup>r</sup>. Mist. Purgans p. r. n. Capiat Tæ. Iodini gutt. xv. ter in die.

This patient was almost cured when she last came to the Hospital, and like many others,

---

\* There was an enlarged Conglobate gland in the neck, which I neglected to mention in detailing the particulars of the case, but it is noticed in the Reports, and also the effects of the Iodine upon it.



never gave herself the trouble to come near it again, or to return thanks to the Governors.

---

#### CASE IV.

Miss N. æt. 20. May 15, 1821. Born and brought up in Nottingham. Is of a florid complexion, brown hair, rather stout made. Has had a certain degree of Bronchocele for seven years; it continues gradually to increase in size, and is hard to the touch. About seven years ago, had a scrofulous ulcer in the left instep, that continued open and discharged for about four years. After the Catamenial discharge took place, the ulcer healed, but the foot generally, and particularly the instep, remains much larger and fuller than the other, so that she is obliged to have a shoe made on purpose to fit it, although the ulcer has been healed for three or four years. Has also laboured under a considerable degree of deafness for ten or twelve years, which occasions her to have a vacant look. Is in tolerable health for a person who is almost constantly in the house. Catamenia regular. Bowels only moved twice or thrice in a week.

℞. Pil. Cambogiæ Comp. ʒi. forma in Pilulas xij. quarum sumant duas omni nocte h. s.



℞. Tæ. Iodini ℥ss. capiat gutt. xv. ter in die ex aquæ cyatho vinario.

May 16. The drops last evening made her sick, and she afterwards felt very cold. Bowels costive. Has not taken the pills. Pulse 84, and of moderate strength. Statim capiat Pil. Cambogiæ, C. gr. x. et post alvi solutionem sumat Tæ. Iodini guttas x. ter in die ex aqua.

May 19. Tumour softer, and thinks she can move her head more freely. Cont<sup>r</sup>. Pil. aper. et Tæ. Iodini.

May 23. Goitre smaller and a great deal softer. Her foot smaller, and not so puffy. Drops agree. B. regular. Cont<sup>r</sup>. Pil. Cambogiæ. Comp. p. r. n. Sumat Tæ. Iodini gutt. xv. ter in die.

May 26. The Bronchocele continues to diminish in size, and is much softer. The left foot also continues gradually to subside, and she can move her toes much better. Cont<sup>r</sup>. Pilul. Cambogiæ. C. p. r. n. Sumat Tæ. Iodini gutt. xx. ter in die ex aqua.

May 31. The foot measures one inch less at the instep than it did previous to her taking the Iodine. The skin is loose and in wrinkles, from



the speedy reduction in size, and the parts are much softer. The Bronchocele is also much smaller and softer, but, as the measure has been lost, I cannot ascertain the exact diminution. Cont<sup>r</sup>. remed.

June 5. Continues to improve. Cont<sup>r</sup>. remed.

June 7. Bronchocele has diminished three-quarters of an inch since the 31st of May. Foot no smaller since that time. Cont<sup>r</sup>. remed.

June 18. Her neck, including the tumour, measures one inch less than on the 31st of May, and the instep also measures a quarter of an inch less since that time. Cont<sup>r</sup>. Tæ. Iodini et Pilul. Cambogiæ. Comp.

July 7. I have seen the patient occasionally since the last report, without making any notes or alteration in the treatment. The Thyroid gland is now very little larger than natural, and her foot is so much reduced that she can wear shoes that are fellows, which she has not been able to do for the last seven years.

July 14. There is merely a perceptible fulness of the throat, but it is quite soft, and gives no inconvenience whatever. The feet are now nearly of a size, and she wears shoes of the same di-



mensions without inconvenience. A most important feature in this case has almost passed without notice—the patient's *hearing* has been restored in nearly a *perfect* degree. \*—Discharged cured.

---

### CASE V.

Mr. N. jun. æt. 22, ——— Nottingham.  
24th June, 1821. Is a brother of the patient whose case has been last detailed. For four or five years has laboured under Bronchocele of very considerable magnitude, but *much softer* than any of the size I ever handled. He thinks that the pressure of the tumour on the trachea affects his breathing. Is naturally very weak, and not in good health, having lately been too much confined to the desk. His mother laboured under Bronchocele, and about a year ago died of distinctly marked Phthisis Pulmonalis. Bowels inclined to be tardy.

Capiat Pilæ. Cambogiæ Comp. gr. v. vel x.  
omni nocte h. s.

---

\* I have pleasure to remark that Miss N. continued in perfect health, and without any relapse, up to the 3d of March, 1824, when I last saw her.



R. Tæ. Iodini ʒss. sumat gutt. xx. ter in die  
ex aquæ cyatho vinario.

July 3. The Bronchocele is nearly dissipated, the skin loose and flaccid. Has got a bad cold, and expectorates a great deal of mucus. P. 100. The Iodine was discontinued, being no longer necessary. And the catarrhal complaint was cured in about ten days. Cured. \*

---

### CASE VI.

Elizabeth Henson, æt. 16, servant, native of Bunny, five miles from this town. April 26, 1822. For several years has had a swelling of the Thyroid gland, which is now very large, and projects as far out as her chin; when the neck is grasped with one hand and the tumour with the other, the neck does not appear to be above one third larger than the tumour. Wheezes very much when she walks fast, or ascends a stair, and her breathing is short. Has never menstruated. The tumour is smooth and

---

\* Remarks.—The Bronchocele was dissipated more rapidly in this instance, than in any case I have ever witnessed; perhaps this was owing to its uncommon softness, which enabled the absorbents to take in its contents more readily; as it is a matter of daily observation with me, that the *larger* and *harder* the Goitre, the more difficult it is to dissipate it, or even to reduce it in size; and vice versa.



firm. The gland is very uniformly developed.  
B. inclined to be tardy.

R. Pilæ. Aloes Comp. ʒi. forma in Pilulas xij.  
quarum capiat ij. omni nocte h. s. Sumat Tæ.  
Iodini gutt. 15, ter in die ex aquæ cyatho  
vinario.

April 29. Drops agree. Capiat gutt. xx.  
Tæ. Iodini ter in die. Cont<sup>r</sup>. Pilulæ Aloes C.

May 5. The tumour is not sensibly smaller  
or softer. B. open from the pills. Capiat gutt.  
xxx. Tæ. Iodini ter in die. Continuentur Pilulæ.

June 3. The tumour is softer, wheezes less,  
breathes better. Began to menstruate about  
three weeks after being under my care. I find  
she has often omitted to take the drops. Cont<sup>r</sup>.  
Pilulæ. Capiat Tæ. Iodini gutt. 35 ter in die.

June 7. The tumour is considerably softer,  
and a little reduced in size, scarcely wheezes any,  
and breathes with more ease. Contr. remed.

After this young woman was relieved from  
the most troublesome symptoms, wheezing, and  
shortness of breath, I could not get her to pre-  
severe in the use of the Iodine, and then gave  
up taking any more notes of her case; but in



my occasional professional visits to the family, I had the pleasure to observe, that the tumour continued gradually to become smaller and softer, until November of the same year it had entirely disappeared, without leaving the least vestige of the previous disease. I have met the young woman several times since ; the last time was on the 12th of September, 1823, and up to that time she had not had the slightest return of the disease, and continued in good health. Cured.

---

### CASE VII.

Rebecca Knight, æt. 17, West Street, New Radford, 16th December, 1822. Labours under Bronchocele of moderate size. The tumour has, of late, increased very much, and she wishes me to prescribe something to take it down. Has menstruated for two years. General health good ; bowels regular. Sumat Pil. Cambogiæ Camp. gr. v. omni nocte et Tæ Iodini gutt. xv. ter in die ex aquæ cyatho vinario.

January 9, 1823. The pill moved her too much, and lately has taken one every other night. Drops agree. Tumour softer. Has left the measure at home, so that I cannot ascertain the decrease, if any. Capiat gutt. xx. Tæ. Iodini ter in die et Pilulas p. r. n.



This young woman did not call on me again, because the tumour, I suppose, was not reduced so rapidly as she wished or expected. Being on a visit to a patient in the village where she resided (the 18th of September, 1823), her father came with great joy to inform me, that the tumour in his daughter's throat had entirely disappeared. I called at his house and found the statement to be correct, except that I could just feel a slight degree of fulness, and softness, opposite the union of the two lobes, arising from relaxation of the skin, and some loose cellular substance. She informed me, that she took two ounces of the tincture before leaving it off; and that about five months afterwards, the tumour began rapidly to diminish in size, and in three or four weeks, had disappeared as above stated. I have thought it might be useful to detail the two last cases, to show that the effects produced in the system by Iodine, continue to operate, even for months, after the medicine has been discontinued. I have observed the same thing to occur in some other cases, in which Iodine was exhibited, but, in a much less marked degree.

---

### CASE VIII.

Ann Smith, æt. 17, servant. General Hospital, April 17, 1821. Labours under lepra



vulgaris, chiefly in the legs and thighs. Two of her sisters laboured under the same affection, and were cured by the use of the *Liquor Arsenicalis*, under my prescription. This young woman also labours under a considerable sized *Bronchocele*, and more of a horse-shoe form than we usually meet with it. There is also a swelled Conglobate gland at the anteriopur, and lower part of the Thyroid cartilage, and in the sinus of the *Bronchocele*.

The patient's mother labours under *Bronchocele* of moderate size. General health good. *Catamenia* regular. Bowels seldom costive.

*Sumat Tinct. Iodini gutt. xv. ter in die ex aquæ cyatho.*

April 27. Says that the drops make her feel as if she were tipsy, for some time after taking them, and that she feels sleepy all day, and has some degree of sickness at stomach. The *Bronchocele* is much smaller. The leprous spots continue nearly in the same state. Two small leprous spots have appeared in the arms since she was admitted. I suppose that the bowels are not sufficiently open. *Sumat Mist. Purgantis ℥ij. primo mane si tarda est alvus. Capiat Tæ. Iodini gutt. xv. ter in die.*



May 8. The Bronchocele is softer and smaller on the left side ; the right side is still rather hard. Conglobate gland not sensibly smaller. Lepra in the same state. Cont<sup>r</sup>. remed.

May 11. Bronchocele smaller ; also the Conglobate gland. Lepra continues without much improvement. B. open. Drops agree. P. 80. Breathes with more ease since the Thyroid gland has been reduced in size. Cont<sup>r</sup>. remed.

May 25. The glands continue to diminish in size. Leprous spots not so red or scaly. Capiat Tæ. Iodini gutt. xx. ter in die ex aqua. Cont<sup>r</sup>. Mist. Purgans p. r. n. Illin<sup>r</sup>. partes cutis affectæ Ung. Hydr. Præcip. Alb. omni nocte h. s.

June 22. The Bronchocele is nearly dissipated, and also the Conglobate gland.

Sept. 2. Has not been to the Hospital since last report, but says, that she has regularly used the medicines. The glands are reduced to the natural size. Leprous eruption continues to disappear. Cont<sup>r</sup>. remed.

Nov. 2. Leprous spots entirely gone. Feels very well. Discharged cured.



## CASE IX.

Sarah Shelton, æt. 16, lace runner, Nottingham. General Hospital, 8th May, 1821. Has been ill six weeks with wheezing and bad cough. There is a bunch of swelled Conglobate glands at the left angle of the jaw, of a month's standing. Also labours under Bronchocele in a globular form, which by its pressure on the trachea occasions the wheezing, and perhaps in some degree the cough. Is pale and debilitated. Has never menstruated. Much troubled with head ache. Bowels generally costive. P. 84, and very small and weak.

Capiat Pilul. Aloes cum Myrrha gr. x. omni nocte sub forma Pilularum.

R. Tæ. Iodini ʒss. Sumat gutt. x. ter in die ex aquæ cyatho vinario.

May 18. The Iodine agrees. Bronchocele is almost dissipated, and the bunch of glands at the angle of the jaw has greatly subsided. Bowels open from two pills. No head ache for a week past. Got rid of the wheezing in two or three days after she began to take the medicines. Cont<sup>d</sup>. remed.



This young woman did not return to the Hospital, but I was informed by her mother a short time afterwards, that she had completely recovered. Cured.

---

### CASE X.

Ann Robinson, æt. 14. July 10, 1821, Kimberley, near Nottingham. Out-patient of the Hospital. When she was two years of age, the Thyroid gland began to enlarge, and has now acquired a size equal to the neck. The right lobe is much larger than the left; they are both very hard. Moderate pressure on the tumour gives no uneasiness. Hoarse, and wheezes since the tumour became large, which is now six or seven years. Has never menstruated. Her mother laboured under Bronchocele, and she informs me, died of a decline. General health good. *Capiat Magnes. Sulphat. ʒij. omni mane et Tinct. Iodini gutt. xv. ter in die ex aquæ cyatho vinario.*

July 20. The tumour is half an inch smaller, and considerably softer. Bowels open by the Salts, wheezes less, and the hoarseness is not so great in degree. For three days has taken 18 drops in an ounce of water, thrice a day. Says the liquid burns her throat. *Capiat gutt. xx.*



Tæ. Iodini ter in die. Cont<sup>r</sup>. Magnes. Sulphas  
nisi nimis fusa est alvus.

August 24. The neck and tumour measure two inches less. The gland appears now in distinct lobes. Has taken the drops regularly; says that they make her weak. Bowels regular. Cont<sup>r</sup>. remed.

Sept. 7. There are two hard lumps which have not subsided much since last report; the other parts of the tumour are soft. Drops make her sick. T. clean. Cont<sup>r</sup>. remed.

Sept. 28. One of the lumps has nearly disappeared, the other is considerably smaller and softer. Capt. Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. Magnes. Sulphas.

Oct. 19. The drops make her sick. The Bronchocele is quite dissipated. I find that the nucleus of the tumour, which remained at the last report, is an enlarged lymphatic gland, and there are three or four lymphatic glands near it, that are slightly enlarged, but none of them disfigure the neck, or are offensive to the eye, except the first. Patient wishes to continue the drops for some time longer. Cont<sup>r</sup>. T. Iodini and Magnes. Sulph. p. r. n. Did not return again to the Hospital. Discharged cured.



## CASE XI.

John G——. æt. 20, apprentice to a miller, at Lenton, near this town. Nov. 6, 1821. Is rather stout made, 5 feet 7 inches high. For several years has been troubled with frequent returns of bleeding at the nose, often in a considerable quantity. The last return of Epistaxis was on the 6th of last October, when the hemorrhage was very profuse; a cloth wet with cold water put round the neck, at last put a stop to it. His face is swelled, and particularly the lips, the eye-lids are oedematous, and when he stoops, the face is of a purplish colour; he is then troubled with head ache, giddiness, and dimness of sight. He labours under a considerable degree of Bronchocele, which extends more towards the clavicles than usual. Bowels regular. Pulse 88, full and firm. No thirst, appetite good. Mitt<sup>r</sup>. sanguis e brachio ad 3xij. Sumat Magnesiae Sulphatis 3ss. omni mane. Capiat Tæ. Iodini gutt. xx. ter in die.

Nov. 10. The swelling of the face is much subsided, and the Bronchocele is less. Still some giddiness. The Salts purge him twice or thrice daily.



Cont<sup>r</sup>. Magnesæ Sulphas. Sumat Tæ. Iodini gutt. xxx. ter in die.

Nov. 17. Only feels a little dizziness at times. Neck sore from a cold. Bronchocele smaller and softer. B. open by the Salts. Pulse 84, and soft.

Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. xl. ter in die.

Nov. 24. Neck sore all the week, but easier now. Is free from giddiness. Tumour softer. Has taken no drops for the last two days. Cont<sup>r</sup>. remed.

Dec. 1. Better in every respect. Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. xlv. ter in die.

Dec. 15. The Bronchocele is nearly dissipated, and is soft. All the morbid symptoms have disappeared. Nose bled a little last week. Cont<sup>r</sup>. remed.

Dec. 22. The Bronchocele is smaller and softer.

Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. L. ter in die.

Jan. 12, 1822. Feels very well. Has taken



no medicines for the last 14 days. **Bronchocele** dissipated. **Cured.**

I may remark, that in this case the **Epistaxis**, purple colour of the face, and oedema of the eye-lids appear to have been owing to the pressure of the **Bronchocele** on the great veins that return the blood from the head; that this was the case is clearly shewn, by the disappearance of the symptoms after the **Goitre** was dissipated. Except **Iodine** I know of no substance (but burnt sponge, which contains an uncertain quantity of this matter), that could have accomplished a cure in a case like the present, and the case shews in a striking manner the great powers of **Iodine**, in reducing morbid swelling, and in removing the affections depending upon it.

---

## CASE XII.

Mary Ann M——t, æt. 15, Nottingham, 2d July, 1822. Has been ill several weeks. Complains of pain in the stomach. Bowels in general costive. For 12 months has laboured under **Bronchocele**, which continues gradually to increase in size. There is an enlarged conglobate gland on the upper and right side of the tumour. No pain in the affected parts. Her mother has



a pretty large Bronchocele, and a younger sister, who was troubled with Bronchocele, and cured by the use of burnt sponge under my prescription, has experienced some return of the disease. Catamenia regular. Bowels open. Sumat Pilæ. Cambogiæ c. gr. xv. omni nocte h. s.

R. Tinct. Iodini, ʒss. Sumat gutt. xv. ter in die ex aquæ cyatho vinario.

July 5. Has been sleepy for the last three weeks. Complains of pain above the spine of the right ilium, aggravated by coughing. Pulse 100. Cont<sup>r</sup>. Pil. h. s.

Sumat Magnes. Sulphatis, ʒij omni mane. Capiat Tæ. Iodini, gutt. x. ter in die.

July 7. Pain in abdomen easier. Both the Bronchocele and conglobate gland are smaller. Pulse 96. Cont<sup>r</sup>. remed.

July 12. Bowels rather costive, although she has taken the salts to assist the operation of the pills. Complains of pain in the region of the caput caecum coli. The Bronchocele is smaller. Complains of some soreness in the conglobate gland. Cont<sup>r</sup>. remed. Capiat Magnes. Sulph. ʒss. omni mane.

July 23. Says that the Bronchocele and conglobate gland are smaller. Only one stool from



the physic. Feels better. Catamenia have not appeared at the usual time. Cont<sup>r</sup>. remed.

Aug. 13. The Bronchocele is dissipated. Conglobate gland now about the size of a hazel nut. No pain in the stomach. Catamenia have not returned. Cont<sup>r</sup>. remed.

Sept. 13. About 3 weeks ago the Catamenia re-appeared. Conglobate gland very small. Has taken no Iodine for the last week. The Catamenia have again appeared in consequence of some degree of tenesmus from a dysenteric attack. Passes blood and mucous by stool. Omitt<sup>r</sup>. remed.

Sumat Pulv. Ipecacæ. c. gr. v. tertia quaque hora perstante tenesmo, et Magnesiae Sulph. primo mane p. r. n.

Oct. 27. Discharged cured.

---

### CASE XIII.

Miss Mary P—, æt. 16. March 13, 1822. Was born and brought up in Nottingham. Labours under Bronchocele of considerable size. It is rather firmer to the touch than usual, and has been gradually enlarging for the last two



years. Has no pain in the tumour, but it occasions wheezing, and a sensation of choking when she walks fast. Has never menstruated. Bowels generally costive. Much troubled with head-ache. Her mother was born in Leicestershire, and is free from Bronchocele in any degree, as is also her father, but he is subject to shortness of breath and copious expectoration of mucus, particularly in cold moist weather.

℞. Pilæ. Aloes Comp. ʒij. forma in pilulas xxiv. quarum capiat ij omni nocte h. s.

℞. Tinct. Iodini ʒss. sumat ægra guttas xv. ter in die ex aquæ cyatho vinario.

March 20. Has been almost free from head-ache for three or four days. Pills open the bowels two or three times daily. Neck, including the tumour, measures about a quarter of an inch less. The wheezing is much diminished. Pulse 96. Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Pilul. aper.

April 11. Tumour softer, but not smaller since last report. Cont<sup>r</sup>. Pilul. aper. Sumat Tæ. Iodini gutt. xxv. ter in die.

April 18. Neck and tumour reduced a quarter of an inch by measure; two motions daily by the pills. Capiat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>. Pilul. aper.



May 1. Nearly as at last report. Cont<sup>r</sup>. remed.

May 15. Tumour softer, but very little diminished in size. Has not yet menstruated. Cap<sup>t</sup>. Tæ. Iodini gutt. xxxv. ter in die. Cont<sup>r</sup>. Pil. aper.

July 1. Tumour half an inch less by measure. Has had some degree of Epistaxis for several days past, but none to-day. Has not yet menstruated. B. open. Continuentur remedia, Utatur pediluvio omni nocte h. s.

July 24. Has not taken the drops regularly of late. Tumour smaller, and much softer. Cont<sup>r</sup>. remed.

Sept. 4. The Bronchocele is now scarcely perceptible, and gives no inconvenience. The drops having made her sick, she has not taken them for the last month. Cured.

REMARKS.—This patient was cured of the Bronchocele without any effect being produced on the uterine system, over which Dr. Coindet thinks the Iodine has a *specific* influence. The above case, and many others which I have treated, have not given me any reason to suppose that Iodine does possess any specific powers as



an emmenagogue, further than as a stimulant and tonic to the whole body, in which the uterine system must of course participate. This *patient* began to *menstruate* about six weeks after she was cured of the Bronchocele. The tonic effects of this medicine, as well as of others, depend upon their judicious exhibition: in a case that came under my care, which will be noticed in its proper place, the tincture of Iodine occasioned so much sickness and disorder of the stomach, that the menstrual discharge was suppressed altogether, which never had happened to the patient before, except, during pregnancy and lactation.

---

#### CASE XIV.

Rebecca Walters, æt. 27. May 13, 1822. Married, has four children, born in Nottingham, now resides at Pentridge, in Derbyshire. Complains of lowness and weakness, attended with a sensation of sinking in the epigastric region. Labours under Bronchocele. Tongue furred. Bowels generally costive.

R. Pulv. Rhei. ʒi. Magnes. Sulphatis ʒiss. Magnes. Carbonatis ʒi. Pulv. Zingiberis ʒi. Tere simul et divide in Pulveres vi. Capiat i. ex aqua



tepida omni mane si tarda est alvus. Sumat Tæ. Iodini gutt. xv. ter in die ex aquæ cyatho vinario. Post tres dies capiat ægra guttas xx. Tæ Iodini ter in die.

May 24. Rather better, still low, some forcing when at stool. Capiat dimidiam Pulveris omni mane. Sumat Tæ. Iodini gutt. xx. ter in die ut antea.

May 29. Not so low now. Bronchocele smaller. Bowels open, without straining, by half the Powder ordered. Has resided in Nottingham since she first applied to me. Is about to return home. Sumat gutt. xxv. Tinct. Iodini per septimanam et postea gutt. xxx. Tæ. Iodini ter in die. Continuentur Pulveres pro re nata.

June 26. Bronchocele almost dissipated. Complains of heat and pain in the oesophagus and tongue, "like the stinging of a hariff leaf" (Galium Aparine.) Feels better and stronger. Cannot take above twenty drops of the Tincture of Iodine. Cont'. remed.

I saw nothing more of this patient till the 28th of July, 1823, when she informed me, that she continued the drops seven or eight weeks with great advantage, and felt much



stronger, and that the unpleasant sensations of which she at first complained, had all "*dissolved away.*" Cured.

---

### CASE XV.

Elizabeth Norman, æt. 42 years, married, and has four children. Out-patient of the Hospital, Feb. 10, 1824. Has resided all her life at Wilford, situated on the banks of the Trent, two miles from Nottingham. Says that she has laboured under thick neck *from a child.* The tumour and neck measure 19 inches in circumference. The Bronchocele is firm to the touch, and consists of many lobes. There is one portion that feels hard like bone, and I believe is bone, (this is the patient who was under my care about ten years ago, and is noticed at page 10, as having a bony mass imbedded in the Bronchocele. She was discharged without material relief, but having lately heard of my success in curing Bronchocele, she has again applied to try if any relief can be afforded her.) Cannot walk fast from shortness of breath, owing to the pressure of the tumour. Suckles a child four months old. Her sister and a maternal aunt, labour under Goitre.



Capiat Liq. Iodini gutt. x. ter in die ex aqua et Magnes. Sulph.  $\text{ʒss}$ . mane p. r. n. Rain water only to be taken internally.

Feb. 20. Says that she has wheezed less this morning in coming to the Hospital. Thinks she can move her head more forward than when admitted. B. open by the Salts. Sumat Liq. Iodini gutt. xij. ter in die.

March 12. Neck and tumour measure rather less than 18 inches; and the different lobes of which the Goitre is composed are more distinct, and have freer motion on each other. The hardness of the lobes is also sensibly diminished. The bony tumour is in the same state. Much less wheezing, and shortness of breath. Capiat Liq. Iodini gutt. xvi. ter in die per septimanam et postea sumat gutt. xvij. Liq. Iodini ter in die. Fricetur tumor Linimento Iodini omni nocte.

April 9. The neck and Goitre measure nearly two inches less. The right side is subsiding faster than the left, and the whole tumour is considerably softer than it was at the last report. From the great diminution in size that has already taken place in this case, there is every reason to believe, that this very voluminous Goitre will be dissipated as completely



as ever occurs in cases of such long standing. The bony tumour, as was to be expected, remains in the same state. If she takes more than fifteen or sixteen drops three times a day, her head aches, and she becomes very sleepy.

Cap<sup>t</sup>. Liq. Iodini gutt. xv. ter in die. Cont<sup>r</sup>.  
Linim. Iodini. Sumat Magnes. Sulph. p. r. n.

Recovering under treatment.



A Tabular View of the other Cases of Bronchocele, treated by the exhibition of Iodine, in my Hospital and Private Practice, between the 24th of March, 1821, and the 23d of March, 1824.

Abbreviations employed in this Table:—Pr. P. for Private Patient; I. P. H. for In-Patient of the Hospital; O. P. H. for Out Patient of the Hospital. In the Column for the Disease, the Figures with y. imply the number of Years, and with m. the number of Months that the Disease has been present. L. prefixed to Bronchocele, signifies, that it was larger than usual; and F. M. B. S. A. and C. following the Disease, that the Father, Mother, Brother, Sister, Aunt, or Cousin, laboured under Bronchocele; p. and m. prefixed to any of these capitals, signify paternal and maternal.

N <sup>o</sup> .	NAME AND AGE.	RESIDENCE.	ADMITTED, 1821.	DISEASE, &c.	TREATMENT, &c.	WHEN AND HOW DIS- CHARGED.
16	Miss J. N. at. 13, Pr.P.	Nottingham	March 24th	Bronchocele	Tæ. Iodini gutt. x. ad xv. ter in die. Pæ. Aloes C. p. r. n.	July 7, 1821—Cured
17	William Holmes, æt. 10, Pr.P.	Nottingham	April 10th	Bronchocele	Pulv. Aper. p. r. n. et Tæ. Iodini gutt. x. ter in die ex aquæ 3ss.	July 1821—Discharged cured
18	Sarah Carlin, æt. 17, I.P.H.	Eastwood	April 17th	Bronchocele, &c.	Mist. Purg. 3iss. p. r. n. et Tæ. Iodini gutt. xv. ad xx. ter in die ex aquæ 3i.	May 12, 1821—Cured
19	Eliza Cliff, æt. 18, Pr.P.	Arnold	April 23d	Bronchocele, Dys- pnoea, &c. 4 y.	Spongia Ust. T. Iodini gutt. xv. ad xx. ter in die.	Relieved; not seen since May 12, 1821
20	F. Huntington, æt. 18, O.P.H.	Nottingham	May 8th	Bronchocele, &c.	Tæ. Iodini gutt. x. ad gutt. xxx. ter in die.	Dec. 28, 1821—Cured
21	C. Wylde, æt. 31, O.P.H.	Nottingham	May 8th	Bronchocele, &c.	Mist. Purg. p. r. n. Tæ. Iodini gutt. xv. ad xxxv. ter in die.	Feb. 8, 1822—Cured
22	Sarah Orme, æt. 26, O.P.H.	Ilkeston	May 8th	Bronchocele, &c. 13 y.	Pil. Cambogiæ C. gr. v. vel. x. h. s. Tæ. Iodini gutt. xv. ad xxx. ter in die.	Nov. 2, 1821—Cured
23	Eliz. Dennis, æt. 29, I.P.H.	Basford	May 11th	Bronchocele	Pil. Cambogiæ C. and Tæ. Iodini gutt. xv. ter in die.	June 29, 1821—Cured
24	Sarah Pym, æt. 39, O.P.H.	N. Sneinton	May 29th	Bronchocele, &c. 20 y.	Pil. Aper. and Magnes. Sulph. p. r. n. T. Iodini gutt. xv. ad gutt. xxxv. ter in die.	Dec. 7, 1821—Cured



25 Mrs. L—, æt. 40, Pr. P.	Arnold	June 14th	Bronchocele and Dyspnoea	Pil. Cambogiæ. C. T. Iodini gutt. xv. ter in die.	July 14, 1821—Much relieved, the medicines to be continued some time longer
26 Hannah Wilkinson, æt. 39, O.P.	Gedling	June 19th	Bronchocele, &c.	Mist. Purg. p. r. n. T. Iodini gutt xv. ter in die.	July 13, 1821—Dischar- ged for non-attendance
27 Miss J. ——— æt. 23.	Nottingham	July 3d	Bronchocele, &c.	Pil. Cambogiæ C. gr. x. h. s. T. Iodini gutt. x. ad xL. ter in die. Linim. cum T. Iodini. h. s.	October 1, 1821—Cured
28 Catherine Joyce, æt. 7, O.P.H.	Gotham	July 10th	L. Bronchocele and Dyspnoea, 2 y.	Magnes. Sulph. 3ij. p. r. n. T. Iodini gutt. x. ad xv. ter in die.	Aug. 24—Much relieved; left off attending
29 Sarah Meakin, æt. 33, O.P.H.	Greasley	July 10th	Bronchocele, 16 y. M.A.L.S.	Pilæ. Cambogiæ C. gr. x. h. s. T. Iodini gutt. xv. ad xL. ter in die.	Sept. 7, 1821—Bronch. nearly dissipated; left off attending—Cured
30 Mary Goodhead, æt. 27, Pr. and O.P.H.	Nottingham	Sept. 19th— Pr. H. Nov. 13th	L. Bronchocele, 6 y. M.	Pil. Cambogiæ C. gr. x. h. s. T. Iodini gutt. xv. ad. xxx. ter in die	Jan. 10, 1823—Not re- duced in size; could not take the medicine in sufficient quantity
31 Anne James, æt. 25, O.P.H.	Southwell	Dec. 4th	Bronchocele, &c. 7 y.	Pulv. Rhei. C. p. r. n. T. Iodini gutt. xx. ad xxx. ter in die.	April 6, 1822—Cured
32 Mary Weston, æt. 18, O.P.H.	Nottingham	Dec. 4th	L. Bronchocele, 4 y.	Pil. Alæs C. gr. x. h. s. Tæ. Iodini gutt. xx. ad xL. ter in die.	April 26—Much reduced; left off the medicines, owing to leaving Not- tingham
33 Eliz. Cummings, æt. 13, Pr.P.	N. Radford	Dec. 31st 1822.	Bronchocele	Pil. Alæs C. gr. x. h. s. T. Iodini gutt. x. ad xxxv. ter in die	April 6, 1822—Cured
34 Sarah Scott, æt. 17, O.P.H.	Nottingham	Jan. 11th	Bronchocele	Pil. Cambogiæ C. T. Iodini gutt. xx. ad xxx. ter in die	May 17, 1822—Cured
35 Charlotte Shaw, æt. 8, O.P.H.	Nottingham	Feb. 15th	Bronchocele, &c.	Tæ. Iodini gutt. vi. ter in die. Mist. Purg. p. r. n.	March 15, 1822—Cured
36 Martha Cox, æt. 48, O.P.H.	Nottingham	Feb. 26th	Bronchocele, &c.	Pilæ. Cambogiæ C. gr. x. h. s. T. Iodini gutt. 20. ad 30. ter in die.	May 31, 1822—Not re- duced in size. Disch.



N <sup>o</sup> .	NAME AND AGE.	RESIDENCE.	ADMITTED, 1822.	DISEASE, &c.	TREATMENT, &c.	WHEN AND HOW DIS- CHARGED.
37	Mrs. J. æt. 35, Pr. P.	Nottingham	Feb. 28th	Bronchocele, 1 S.	Hirud. vi. tumori Pil. Cambogiæ C. Tæ. Iodini gutt. xx. ter in die.	March 6, 1822—Better. Cured in about 6 weeks
38	Anne Thoresby, æt. 18, Pr. P.	Nottingham	March 11th	Bronchocele, 5 y. M.	Magnesiæ Sulph. ʒij. m. Tæ. Iodini gutt. 20. ad 30. ter in die.	Mar. 23—Tumour smaller Left off the medicines
39	Eliz. Booth, æt. 31, O.P.H.	Nottingham (Native of Derbyshire)	March 19th	Bronchocele, 26 y. &c.	Pulv. Jalapæ C. ʒi. mane p. r. n. Tæ. Iodini gutt. xx. ter in die, &c.	May 17, 1823—Cured
40	Anne Daykin, æt. 36, O.P.H.	Lenton	April 6th	L. Bronchocele	Pil. Cambogiæ C. p. r. n. Tæ. Iodini gutt. 15. ad 40. ter in die.	August 30, 1822—Cured
41	H. Wollatt, æt. 17, O.P.H.	Hucknall	April 9th	Bronchocele (re- turn of)	Pilæ. Alæs C. gr. x. h. s. T. Iodini gutt. xx. ad xL. ter in die.	Oct. 11, 1822—Cured
42	Mary Overin, æt. 34, O.P.H.	Nottingham (from Derby- shire)	April 30th	Bronchocele and Dysphagia	Pilæ. Cambogiæ C. gr. h. s. Tæ. Iodini gutt. xx. ad xxx. ter in die.	June 28, 1822—Cured
43	Elizabeth Fox, æt. 47, O.P.H.	Nottingham	April 30th	Bronchocele, 20 y.	Pilæ. Cambogiæ C. gr. x. h. s. T. Iodini gutt. xx. ad xLv. ter in die.	April 18, 1823—Cured
44	Miss H. T. æt. 21, Pr. P.	Nottingham	May 5th	Bronchocele, 13 y. Dyspnoea, &c.	Pilæ. Cambogiæ C. gr. x. p. r. n. Tæ. Iodini gutt. xv. ad xxxv. ter in die.	June 23, 1822—Cured
45	Fanny Kitchen, æt. 16, Pr. P.	Nottingham	July 4th	Bronchocele, &c.	Pilæ. Cambogiæ C. gr. v. h. s. T. Iodini gutt. xx. ter in die.	Has not returned
46	Hannah Pollard, æt. 15, Pr. P.	Nottingham	August 26th	Bronchocele	Pil. Alæs C. gr. x. h. s. T. Iodini gutt. xx. ad xxx. ter in die.	Nov. 28, 1822—Cured
47	Mary Smith, æt. 48, O.P.H.	Lenton	Sept. 24th	Bronchocele, 8 y. &c.	Mist. Purg. ʒij. M. p. r. n. Capt. Tæ. Iodini gutt. 20. ter in die.	Dec. 27, 1822—Cured
48	Mary Tomlinson, æt. 20, Pr. P.	Nottingham	Oct. 17th	Bronchocele	Pil. Cambogiæ C. gr. v. ad xv. h. s. Tæ. Iodini gutt. xv. ter in die.	Has not returned
49	Elizabeth Mart, æt. 14, Pr. P.	Nottingham	Oct. 17th	Bronchocele, 2 y. M. S.	Pilæ. Cambogiæ C. gr. x. h. s. T. Iodini gutt. xv. ad xx. ter in die.	Dec. 16, 1822—Cured



50	Mr. Wm. B. æt. 41, Pr. P.	Over Broughton	Oct. 18th	L. Bronchocele, 30 y.	Pulv. Purg. p. r. n. Mist. Tonica T. Iodini gutt. xv. ad xxx. ter in die.	April, 1823—Cured
51	Francis Soar, æt. 15, O.P.H.	N. Radford	Nov. 5th	L. Bronchocele, Dyspnoea, &c.	Magnes. Sulph. ʒijm. p. r. n. T. Iodini gutt. 15 ad 30 et Ung. Iodini.	Sept. 5, 1823—Much reduced; will not take the medicines. Discharged April 24, 1823—Cured
52	Hannah Elliott, æt. 26, Pr. P.	N. Radford	Dec. 18th	Bronchocele, &c.	Pil. Cambogæ C. gr. x. h. s. T. Iodini. gutt. xv. ad xliij. ter in die.	April 24, 1823—Cured
53	Ellen Whiting, æt. 18, Pr. P.	Bunny	Dec. 21st	L. Bronchocele, 9 y.	Pil. Alces C. gr. x. T. Iodini gutt. xv. ad xxxv. ter in die. Linnim. cum T. Iodini.	Feb. 18, 1823—Cured
54	Miss Ann P. æt. 19, Pr. P.	Nottingham	Dec. 23d	Bronchocele, &c.	Tinct. Iodini. gutt. xij. ad xx. ter in die.	Feb. 18, 1823—Cured
55	Miss S. æt. 30, Pr. P.	Nottingham	Jan. 8, 1823	Bronchocele, &c.	Pil. Aper. Tæ. Iodini gutt. xv. ad xx. ter in die.	Feb. 20, 1823—Cured
56	Sarah Gibson, æt. 26.	Nottingham	Feb. 24th	L. Bronchocele, 8 y.	T. Iodini gutt. xv. ad xx. ter in die.	Feb. 27, 1823—Has not returned; result unknown
57	Ann Osborne, æt. 14, Pr. P.	Nottingham	Feb. 26th	Bronchocele, 3 y. Dyspnoea	Pil. Alces C. gr. x. h. s. T. Iodini. gutt. xv. ad xxx. ter in die.	Oct. 22, 1823—Cured
58	Elizabeth Joynes, æt. 15, Pr. P.	Nottingham	Feb. 27th	Bronchocele, 1 y. 2 p. A.	T. Iodini gutt. xv. ad xx.	March 6, 1823—Has not returned
59	Sarah Hardy, æt. 17, Pr. P.	Ruddington	March 3d	Bronchocele, 4 y. &c.	Magnes. Sulph. ʒij. mane T. Iodini gutt. xv. ad xxx. ter in die.	March 26, 1823—Much reduced in size. Has not returned since
60	Susan Marshall, æt. 15, Pr. P.	Nottingham	March 4th	Bronchocele, 4 y.	Pil. Cambæ. C. gr. x. p. r. n. Tæ. Iodini gutt. xv. ter in die.	March 10, 1823—Better.
61	Sarah Osborne, æt. 17, O.P.H.	Hucknall	March 11th	Bronchocele, 4 y.	Pil. Cambæ. C. gr. xv. h. s. T. Iodini. gutt. xv. ad xxxv. ter in die.	has not returned
62	Mr. T. æt. 22, Pr. P.	Nottingham	March 19th	L. Bronchocele, M.	Pil. Cambæ. C. gr. x. h. s. T. Iodini gutt. xv. add xxxv. ter in die. (Taken irregularly.)	May 30—Cured
63	Mrs. L. æt. 25 Pr. P.	Nottingham	March 27th	Bronchocele, 4 y. Dyspnoea	Pilæ. Cambogæ C. gr. x. h. s. Tæ. Iodini gutt. xv. ad xx. ter in die.	July 1823—Cured
						April 17, 1823. B. much reduced. Has not returned—



N <sup>o</sup> .	NAME AND AGE.	RESIDENCE.	ADMITTED, 1823.	DISEASE, &c.	TREATMENT, &c.	WHEN AND HOW DIS- CHARGED.
64	German Hodgkinson, O.P.H.	Eastwood	April 1st	Bronchocele, 9 m. Dyspnoea	Pilæ Cambogiæ C. gr. x. h. s. Tæ Iodini gutt. xv. ad xx. ter in die.	June 24, 1923—Cured
65	Lydia Barton, æt. 35, O.P.H.	Hucknall Common	April 1st	Bronchocele, 6 y. Dyspnoea	Pilæ Cambogiæ C. gr. x. h. s. Tæ Iodini gutt. xx. ad xxx. ter in die.	November 17—Cured
66	Frances Wainwright, æt. 37, O.P.H.	Hucknall (native of Derbyshire)	April 1st	Bronchocele	Pilæ Cambogiæ C. gr. xv. h. s. Tæ Iodini gutt. xx. ter in die.	May 30, 1823—Cured
67	Mary Beeston, æt. 18, Pr. P.	Radford	April 12th	Bronchocele, 2 y. Lepra vulg.	Pil. Cambogiæ C. gr. x. h. s. Tæ Iodini gutt. xv. ad xx. ter in die.	June 28, 1823—Cured
68	Mrs. S. æt. 53, Pr. P.	Nottingham	April 20th	Bronchocele, 5 y.	Tæ Iodini gutt. xv. ad xx. ter in die, and Magnes. Sulph. 3ij. P. r. n.	July 23—Cured
69	Miss Sarah S. æt. 15, Pr. P.	Nottingham	April 20th	Bronchocele, 1½ y.	Tæ Iodini gutt. xv. ad xx. ter in die. Pilæ Cambogiæ C. gr. x. h. s. p. r. n.	October 4—Cured
70	Miss Jane S. æt. 18, Pr. P.	Nottingham	April 20th	Bronchocele, 6 m.	Tæ Iodini gutt. xv. ter in die. Pilæ Cambogiæ C. gr. x. p. r. n.	May 28—Cured
71	Sarah Davis, æt. 39, O.P.H.	Hucknall	April 22d	Bronchocele, &c.	Pil. Hydr. gr. x. m. et h. s. Tæ Iodini xv. ter in die.	May 23, 1823—Broncho- cele almost dissipated— Cured
72	Anne Sharp, æt. 18, Pr. P.	Worthington (Leicester- shire)	May 6th	Bronchocele, S.	Tæ Iodini gutt. xv. ad xx. ter in die. Mag. Sulph. 3ij. alter matut.	Sept. 2, 1823—Cured
73	Miss C. æt. 32, Pr. P.	Nottingham	May 8th	Bronchocele, 15 y.	Pilæ Cambogiæ C. gr. x. h. s. Tæ Iodini gutt. xv. ter in die.	Nov. 1, 1823—Cured
74	Miss C. C. æt. 24, Pr. P.	Nottingham	May 8th	Bronchocele, 4 y.	Pilæ Cambogiæ C. gr. x. p. r. n. Tæ Iodini gutt. xv. ter in die.	Sept. 15, 1823—Cured



75 Elizabeth Butler, æt. 8, Pr. P.	Blooms Grove	May 29th	Bronchocele, 6 m. and upwards	Pulv. Purg. p. r. n. Tæ. Iodini gutt. viii. ad x. ter in die.	Sept. 3, 1823—Cured
76 Sophia Saunders, æt. 18, Pr. P.	Nottingham	May 29th	Bronchocele, 5 y. F. Bronch. (from Derbyshire)	Tæ. Iodini gutt. xij. ad. xxv. ter in die. Ung. Iodini, m. et h. s. Pil. Cambogiæ C. gr. x. h. s. p. r. n.	September 30—Cured
77 Miss F., æt. 20, Pr. P.	Nottingham	May 31st	Bronchocele	Tæ. Iodini gutt. x. ad xv. ter in die. (Taken irregularly.)	September 3—Cured
78 Miss L. F. æt. 18, Pr. P.	Nottingham	May 31st	Bronchocele	Tæ. Iodini gutt. x. ad xv. ter in die. (Taken irregularly.)	Dec. 17, 1823—Cured
79 Elizabeth Reddish, æt. 24, Pr. P.	Lowdham	June 2d	L. Bronchocele 10 y. M. large Bronchocele	Tæ. Iodini gutt. xv. ad xviii. R. Linim. Super. C 3ij. Tæ. Iodini 3ij. m. fl. Linim. quo frictur tumor.	July 27, 1823—Tumour much smaller. Medicines to be continued.
80 Mrs. M. æt. 36, Pr. P.	Nottingham	June 13th	Bronchocele, 28 y. D.	Pilæ. Cambogiæ C. gr. x. h. s. Tæ. Iodini gutt. xv. ad xx. ter in die.	B. greatly reduced, still under treatment
81 Maria Barnett, æt. 17, O.P.H.	Carlton Hill	June 24th	Bronchocele, 5 y.	Tæ. Iodini gutt. xij. ad xv. ter in die.	Bronchocele much reduced, Oct. 5, 1823
82 Eliz. Brown, æt. 17, O.P.H.	Nottingham	June 24th	Bronchocele, from a child	Tæ. Iodini gutt. xv. ad xx. ter in die. Ung. Iodini h. s. and Pil. Alces C. gr. x. h. s. p. r. n.	April 2, 1824—Cured
83 William Cale, æt. 14½, O.P.H.	Hucknall	August 5th	Bronchocele, 2 y.	Tæ. Iodini gutt. xij. ad xv. ter in die. Ung. Iodini m. et h. s. tumori—Mag. Sulph. 3ij. m. p. r. n. Capiat Tæ. Iodini gutt. x. ter in die. Pil. Cambogiæ C. gr. x. h. s.	Nov. 7, 1823—Cured
84 Eliz. Selby, æt. 14, I.P.H.	Lenton	August 5th	Bronchocele	Tæ. Iodini gutt. xv. ad xx. Ter in die. Linim. Iodini h s	Sept. 9, 1823—Cured
85 Mary Anne Allen, æt. 16, Pr. P.	Brewhouse Yard	August 28th	Bronchocele, 7 y.	Tæ. Iodini gutt. xv. ad xx—	Feb. 17, 1824—Cured
86 Sarah Redgate, æt. 21, Pr. P.	Leen Side	Sept. 4th	Bronchocele, 4 y.	Tæ. Iodini gutt. xv. ter in die. Magnes. Sulph. 3ss. p. r. n.	Has not returned
87 Elizabeth Peet, æt. 14, Pr. P.	Radcliffe	Sept. 27th	Bronchocele, 1 y.	Tæ. Iodini gutt. xij. ter in die. ex aqua.	Has not returned



N <sup>o</sup> .	NAME AND AGE.	RESIDENCE.	ADMITTED, 1823.	DISEASE, &c.	TREATMENT, &c.	WHEN AND HOW DIS- CHARGED.
88	Sarah Pickering, æt. 16, Pr. P.	N. Radford	October 6th	L. Bronchocele, 4 y.	R Tæ. Iodini gutt. xv. ad xx. Hirud. Mag. Sulph. 3ij. p. r. n.	March 10, 1824—Bron- chocele much smaller— still under treatment
89	Charles Birkett, æt. 7, O.P.H.	Linby	October 7th	Bronchocele, 6 m.	Mag. Sulph. 3i. m. p. r. n. Tæ. Iodini gutt. viij. ad viij. ter in die.	Feb. 6, 1824—Cured
90	Sarah Smith, æt. 15, Pr. P.	Bunny	October 16th	Bronchocele, 4 y. 2 S. M. 2 p. A.	Tæ. Iodini gutt. xv. ad xxv. Magnes. Sulph. p. r. n.	Jan. 10, 1824—Cured
91	Harriet Taylor, æt. 12, Pr. P.	Brinsley	October 22d	Bronchocele	Tæ. Iodini gutt. vj. ad viij. Mag. Sulph. 3i. p. r. n.	Jan. 11, 1824—Cured
92	Mary Bostock, æt. 18, O.P.H.	Nottingham	October 28th	Bronchocele, 8 y. S.	Pil. Cambogiæ C. gr. x. h. s. Tæ. Iodini gutt. xv. ter in die.	March 5, 1824—Cured
93	Benj. Shipley, æt. 55, O.P.H.	Nottingham	October 28th	L. Bronchocele, since a child	Pilæ. Cambogiæ x h. s. Tæ. Iodini gutt. xv. ad xx. ter in die.	Feb. 20, 1824—Cured
94	Anne Oats, æt. 27, Pr. P.	Cromford (Derbyshire)	October 30th	Bronchocele	Pil. Cambogiæ C. gr. x. h. s. Mag. Sulph. p. r. n. Tæ. Iodini gutt. xv. ad xvij. ter in die.	Has not returned
95	Anne Smith, æt. 19, O.P.H.	Lenton	Nov. 18th	Bronchocele (re- turn of) & Lepra Vulg.	Tæ. Iodini gutt. xv. ter in die. Pilæ. Cambogiæ C. and Magnes Sulph. 3ij. m. p. r. n.	Jan. 2, 1824—Cured
96	Francis Maltby, æt. 60, Pr. P.	Bingham	Dec. 3d	Bronchocele, D.	Tæ. Iodini gutt. xv. ad xx. Pil. Cambogiæ C. gr. x. h. s.	Has not returned
97	Mary Richardson, æt. 27, Pr. P.	Not noted down	Dec. 6th	Bronchocele, 4 y.	Tæ. Iodini gutt. xv. ad xx. ter in die. Pil. Aper.	Has not returned
98	Hannah Bromhead, æt. 17, O.P.H.	Nottingham	Dec. 9th	L. Bronchocele, 3 y.	Tæ. Iodini gutt. xv. add xx. Pil. Aper. Lin. Iodini h. s. Hirud. viij. bis tumori	Bronchocele much reduced —still under treatment
99	Anne Thorseby, æt. 20, O.P.H.	Nottingham	Dec. 9th	L. Bronchocele, 4 y. M.	Liq. Iodini gutt. viij. ad xxiv. ter in die. Linim Iodini. Pil. Aper.	Bronchocele much reduced —still under treatment
100	George Bull, æt. 19, Pr. P.	Nottingham	Dec. 15th	L. Bronchocele, M. and S.	Tæ. Iodini gutt. xv. ad xx. Pil. Aper. p. r. n.	Bronchocele much smaller, left off, but has resumed the use of the Medicines



101	Eliz. Smith, æt. 3, and 9 m.	N. Radford	Dec. 21st 1824.	Bronchocele, two m. standing	Liq. Iodini gutt. iv. ad v. ter in die. Mag. Sulph. coch. 1 mini- mum p. r. n.	March 7, 1824—Cured
102	Miss G. æt. 18, Pr. P.	Nottingham	January 3d	Bronchocele	Liq. Iodini gutt. viij. ad x. ter in die. Pil. Aper. p. r. n.	March 23, 1824—Cured
103	Eliz. Warren, æt. 32, Pr. P.	Ilkeston (Derbyshire)	January 7th	Bronchocele, 23 y.	Tæ. Iodini gutt. xij. ad xvij. ter in die. Pil. Aper. p. r. n.	Tumour much smaller— under treatment
104	Anne Hickinbottom, æt. 51, O.P.H.	Wilford	January 20th	Bronchocele, large and hard, 18 y.	Liq. Iodini gutt. x. ad xxvi. ter in die. Linim. Iodini h. s. Pil. Aper.	Bronchocele much reduced —still under treatment
105	J. Mellows, æt. 4, O.P.H.	Linby	January 20th	Bronchocele, &c. 5 m.	Liq. Iodini gutt. iv. ad. vi. ter in die. Magnes. Sulph. Coch. 1 minimum p. r. n.	April 13, 1824—Cured
106	Anne Watson, æt. 34, Pr. P.	Nottingham (from Derby- shire)	January 27th	Bronchocele since a child	Tæ. Iodini gutt. xij. ad xx. ter in die. Linim. Iodini h. s.	B. not much smaller—still under treatment
107	Mary Flinders, æt. 16, O.P.H.	Arnold	Feb. 10th	Bronchocele, 4 y. F.M. and P.A.	Liq. Iodini gutt. x. ad xvij. ter in die.	B. smaller and softer—still under treatment
108	Jane Everett, æt. 21, I.P.H.	Nottingham (born in Rutlandshire)	Feb. 10th	Bronchocele, 11 y.	Liq. Iodini gutt. x. ad xv. ter in die. Mist. Purg. p. r. n.	April 13, 1824—Cured
109	Mary Humphries, æt. 45, Pr. P.	Lenton	Feb. 28th	Bronchocele, several y. standing	Tæ. Iodini gutt. xij. ter in die. Pil. Aper. p. r. n.	Under treatment
110	Isaac Knowles, æt. 24, O.P.H.	Heanor, Derbyshire	March 2d	L. Bronchocele, 9 y.	Liq. Iodini gutt. xv. ter in die. Mist. Purg. p. r. n. Linim. Iodini.	B. much smaller—still under treatment
111	A. Knutteries, æt. 15, I.P.H.	Southwell	March 6th	Bronchocele, 4 y.	Pulv. Rhei. C. 3ss. p. r. n. Liq. Iodini gutt. viij. ter in die.	Discharged at her request March 27, 1824
112	Mary Goodhead, æt. 30.	Nottingham	March 8th	L. Bronchocele, 9 y. M.	Solut. Iodini gutt. xv. ad xx. ter in die. Linim. Iodini h. s.	Bronchocele softer—under treatment
113	William Leavers, æt. 9, Pr. P.	Greasley	March 10th	L. Bronchocele, 15 m.	Liq. Iodini gutt. viij. ter in die. Mag. Sulph. 3i. mane. p. r. n.	April 20, 1824—under treatment
114	Mary Herbert, æt. 13, Pr. P.	N. Radford	March 10th	Bronchocele, &c. M.	Liq. Iodini gutt. x. ter in die. Mag. Sulph. 3ij. p. r. n.	Under treatment



N°.	NAME AND AGE.	RESIDENCE.	ADMITTED, 1824.	DISEASE, &c.	TREATMENT, &c.	WHEN AND HOW DIS- CHARGED.
115	Maria Bamford, æt. 18, Pr. P.	Nottingham	March 15th	Bronchocele, 4 y.	Liq. Iodini gutt. x. ter in die. Mag. Sulph. 3ij. p. r. n.	Under treatment
116	Martha Rice, æt. 16, Pr. P.	Ilkestone, Derbyshire	March 20th	Bronchocele, 4 y.	Liq. Iodini gutt. xij. ter in die. ex aqua.	May 1, 1824—Cured
117	Rebecca Lovett, æt. 15, Pr. P.	Nottingham	March 20th	Bronchocele, 2 y.	Liq. Iodini gutt. x. ter in die. Mag. Sulph. 3ij. mane. p. r. n.	April 24, 1824—Cured
118	Susan Maltby, æt. 23, Pr. P.	Nottingham	March 22d	Bronchocele, right side of Thyroid Gland, &c.	Pil. Cambogiæ C. gr. x. h. s. Liq. Iodini gutt. viij. ad gutt. x. ter in die.	Under treatment
119	Mary Carrington, æt. 19, lace runner, O.P.H.	Nottingham	March 23d	Bronchocele, 5 y.	Pil. Cambogiæ C. gr. x. p. r. n. Liq. Iodini gutt. viij. ad gutt. ter in die.	May 13, 1824—B. much smaller and softer—still under treatment
120	Anne Hall, æt. 14, servant, O.P.H.	Nottingham	March 23d	Bronchocele, 1 y. catamenia regu- lar.	Liq. Iodini gutt. viij. ad gutt. xviii. ter in die. Pil. Cambogiæ C. gr. x. h. s. p. r. n.	April 23, 1824—B. softer. Under treatment

## GENERAL ABSTRACT.

Total number of Cases	-	-	-	-	-	-	120
From these deduct four Females twice admitted	-	-	-	-	-	-	4
Viz.—MALES—Cured	-	-	-	-	-	-	116
Ditto much relieved	-	-	-	-	-	-	
Ditto discharged for non-attendance	-	-	-	-	-	-	
Ditto improving under treatment	-	-	-	-	-	-	
FEMALES—cured	-	-	-	-	-	-	
Ditto much relieved	-	-	-	-	-	-	
Ditto without relief	-	-	-	-	-	-	
Ditto discharged for non-attendance	-	-	-	-	-	-	
Ditto improving under treatment	-	-	-	-	-	-	
Number of Individual Cases	-	-	-	-	-	-	
Men, Total 15	10	1	1	3	66	9	
Women, Total 101	9	2	10	14			
Number of Individual Cases as stated above	-	-	-	-	-	-	116



## REMARKS

### ON SOME OF THE PRECEDING CASES.

---

*(The number of the Remark corresponds with the number of the Case.)*

---

No. 18.—This case will be given in detail, under the head of Scrofula. It was the first instance of the beneficial effects of Iodine, in reducing enlarged lymphatic glands, that had come under my notice. Respecting the Goitre, in this instance, nothing deserving particular notice occurred; but it may not be uninteresting to those who are in the habit of employing the Tincture of Iodine, as a medicine, to know, that this young woman swallowed, by mistake, nearly an ounce of this Tincture, of the strength employed by myself, without being diluted; it was immediately rejected by vomiting; and I am happy to add, that no inconvenience, or bad effects, ensued.

No. 27.—This is the first case in which I employed Iodine externally. To one ounce of the Liniment. Saponis Comp. of the London Pharmacopœia, I added one drachm of the Tincture of Iodine to form a Liniment, which most patients can bear to be rubbed into the tumour once a day, and some morning and evening; but, in some persons, the skin is apt to become tender, and disquamation of the cuticle to take place, from using the Liniment twice a day; the frequency of its application must, therefore, be regulated, according to what the skin will bear in different individuals.—This is a very convenient form of exhibiting the Iodine externally; and it has the advantage



of allowing the preparation to be kept stopped up in a phial, thereby preventing the evaporation of the Iodine, which takes place when the Tincture of Iodine is mixed with Hog's Lard, to form an ointment. I have not yet had occasion to employ the Hydriodate of Potass in the form of ointment, and cannot, therefore, speak as to its efficacy from personal observation; but I mean to avail myself of those opportunities that daily occur to me, to try its comparative powers, and to ascertain, as far as I am able, the advantages and inconveniencies, if any, attending its exhibition. —I had almost omitted to remark, that the Tincture of Iodine blanches the Compound Soap Liniment with which it is mixed. Is this owing to the Iodine attracting Hydrogene, and disengaging Oxygene from some substance of which these gasses are constituent parts; or is it owing to some inherent property of the Iodine itself? The professed Chemists must settle this point.

No. 28.—This was a very large Bronchocele in so young a patient, and, for six months before applying for medical assistance, the Goitre, by pressing on the Trachea, occasioned great difficulty of breathing, with wheezing and hoarseness. In ten days the tumour was much softer, and measured half an inch less, and the distressing symptoms were very much alleviated. After finding herself at ease, she left off attending at the Hospital, and I saw nothing more of her till the beginning of April last, when a heavy snow storm forced me to seek shelter in a cottage, near the village where she resides. Here I found her, and was happy to see that the Goitre was nearly dissipated, and I learnt from her, that it continued gradually to diminish in size for a long time after she had left off the Tincture of Iodine; at the time I saw her, she experienced no inconvenience from the remains of the Goitre

No. 29.—No impression could be made on the Bronchocele in this case till the patient took forty drops of the



Tincture of Iodine three times a day. The tumour was nearly dissipated in course of two months.—In this case the Tincture of Iodine occasioned a good deal of disorder of the system, with loss of flesh and strength, owing to the dose of the medicine having been too large for her.—Greater experience has since taught me, that a cure, in all probability, might have been accomplished in this case by the exhibition of smaller doses of the medicine, if continued for a sufficient length of time.—I thought it necessary to leave off the Iodine, at least for a time. The patient did not return to the Hospital, but, I learnt, from a neighbour of her's, some time after, that she was well, and cured of the Goitre.

No. 30.—This woman first applied to me as a gratuitous patient; but owing to the expense of the medicine, she got recommended as an out-patient of the General Hospital, and came under my care. For a short time she took thirty drops of the Tincture of Iodine three times a day; but it occasioned so much sickness and disorder of the stomach, that I was obliged to reduce the dose to fifteen drops three times a day; and even in this small dose the stomach was affected with more or less nausea and disorder, and no sensible effect was produced on the Goitre. In this case, too, the menstrual discharge that had always been very regular, and rather copious, disappeared for some time, owing, I believe, to the debility and disorder of the system, induced by the Iodine in this patient, from idiosyncrasy of constitution.—I may observe, that her mother laboured under a large Goitre, of sixteen or seventeen years standing, that had resisted the use of burnt sponge. She recommended her mother to use the same drops that I had prescribed for herself, and she took them and was cured of the Goitre, at the same time her general health was improved in a very marked degree. This information I received from my patient, who has often expressed her surprise that the same medicine should have



such opposite effects on her mother and herself, when the dose was the same.—This woman applied to me again on the 8th of March, 1824, to endeavour to dissipate the Goitre, as it had increased in size and also in hardness since she left off the use of the Iodine, which, it appears, kept the tumour from enlarging, if it could not accomplish a cure, owing to the small quantity she was able to take. I prescribed fifteen drops of the *Solutio Iodini*, to be taken in water three times a day; and for the last week she has taken twenty drops of the Solution of Iodine three times a day, without inconvenience, and for the same period has rubbed the Goitre with *Linimentum Iodini* every night, at bed time.—The patient, her husband, and myself agree in opinion, that the Goitre is softer, but it was not sensibly smaller, when measured. As the patient is anxious to be cured, I mean to give the Hydriodate of Potass a fair trial in this case, both internally and externally, before I give up the case as incurable.

No. 41.—This patient experienced a return of Bronchocele, eight months after being cured by the internal use of Iodine, as detailed in the first case. She has again been cured by the same means, and I hope that the cure will now be more permanent, from the circumstance that the menses appeared for the first time a few days before the Goitre was last dissipated. The water she was in the habit of using is very hard; I, therefore, advised her only to take rain water internally.

No. 44.—This young woman breathed with difficulty, and wheezed very much when she ascended a stair, or walked quick. She experienced great relief at the end of fourteen days, and felt quite well in thirty-seven days; but the Tincture of Iodine was given twelve days longer to prevent a relapse. The only inconvenience that this patient complained of was, that the Tincture of Iodine burnt her throat, but she was quite delighted at the rapidity



of the cure, as she fully believed she was going into a consumption, when she first applied to me.

No. 46.—The Thyroid gland began to enlarge when the patient was three years of age. Three paternal aunts labour under the same disease. The Goitre was dissipated *without the catamenia* having ever appeared. Her mother was 18 before she menstruated, and perhaps the daughter may take after her in that respect. The drops occasioned a little sickness at stomach after taking them, but it soon went off, and the patient found no other inconvenience.

No. 49.—This young woman laboured under Goitre, and came under my care as an out-patient of the Hospital, the 6th of June, 1820, and was discharged cured on the 8th of September following, by taking the following medicines :—

Pulv. Jalapæ C. ʒ. ij. omni mane, p. r. n. R. Spongiæ Ustæ. Syr. Zingib. a. a. ʒi. M. ft. Elect. cujus capiat coch. i. minimum (tea spoonful) ter in die.

The Goitre has since returned, and was firm to the touch, and larger than a goose's egg, and by pressing on the Trachea, occasioned shortness of breath and wheezing. When re-admitted, she was cured in two months, by the internal use of Tincture of Iodine. Catamenia regular, and not affected by the medicines exhibited.

No. 62.—This young man is of a delicate constitution, and laboured under a large Bronchocele, which is now nearly dissipated.—There is nothing unusual to remark in this case, except that soreness of the gums, and a very considerable Ptyalism came on during the exhibition of the Iodine, and that it was necessary to restrain the discharge by the use of an Alum Gargle.

No. 64.—This patient laboured under Dyspnoea, at-



tended with a great degree of wheezing, which first attracted the attention of his parents and led them to examine his neck.—The Bronchocele was about the size of a hen's egg, and by pressing on the Trachea, occasioned the distress in breathing. In course of four days the breathing was relieved; and in thirty-two days the tumour was nearly dissipated. The Tincture of Iodine was continued some time longer, to complete the cure and prevent a relapse.

Nos. 68, 69, & 70,—Refer to a mother and two daughters.—I have nothing particular to remark, except that the mother, a native of Rutlandshire, remained free from the disease till five years previous to the time she applied to me, although she has resided 26 years in this town. The daughters seem to have had a stronger disposition to the disease than the mother. Their general health was improved, and they suffered no inconvenience whatever from the Iodine.

No. 71.—I find that the Tincture of Iodine given in doses of fifteen drops, occasioned so much giddiness in this case, that the patient was at first obliged to keep in bed for two or three days; but, after it had been taken for a week, that it agreed very well. This case will again be noticed under a different head.

No. 72.—I have nothing particular to remark respecting this case, but it may be worth while to observe, that a sister of her's, who laboured under Bronchocele, got rid of it, when travelling in Ireland and Scotland, without using any means to dissipate the tumour. This information I received from my patient.

Nos. 73, & 74,—Refer to the cases of two sisters—they took the Tincture of Iodine very irregularly and at considerable intervals of time, otherwise they might have been



sooner cured. The Mother has the left side of the Thyroid Gland very much enlarged, but being upwards of 65 years of age, she does not wish to try any means to dissipate it.

No. 77, & 78.—I am disposed to notice, being the cases of two sisters of delicate constitutions, in which the tonic effects of the Iodine was so remarkable, that it did not escape the observation of the mother of the young ladies, who is a woman of acute discernment and sound understanding, and being an invalid, she consulted me as to the propriety of her taking some of the same medicine herself, with a view to its tonic effects on her own system. To obtain tonic effects from Iodine, it is necessary to exhibit it in small doses, so as not to overpower and disorder the system, and to preserve a regular and open state of the bowels.

No. 80.—This is a case of long standing, but it is gradually yielding to the use of the Iodine, which is now taken in doses of fifteen drops, two or three times a day, occasionally omitting it for a week.—This patient has often remarked to me, how much her general health has been improved since she began to take the Iodine.

No. 81.—This young woman began with twelve drops of the Tincture of Iodine, in water, and after ten days the dose was increased to fourteen drops.—After continuing the medicines for a month, it is stated that the Goitre is much smaller and softer, and measures about an inch less—and that the Tincture of Iodine occasioned some dizziness and head-ache.—Her bowels tardy, having only one stool in twenty-four hours—ordered to take three aperient pills. The next report mentions that the sickness, after taking the drops, only continued about ten minutes.—Bowels continued tardy, and ʒij of the Sulphate of Magnesia were ordered to be taken every second morning, in addition to the pills, being convinced that the head-ache and dizziness depended in a great measure on the tardy state of the



bowels. The last time the patient made her appearance at the Hospital, she told me that she had not taken any of the Tincture of Iodine for fourteen days, owing to its making her dizzy, and occasioning pain and heaviness in the head; and she stated, that she was so ill in the morning, with lowness and faintness, that she was unable to follow her employment of lace-mender. Under these circumstances, I ordered the Aperient Medicines to be continued, and directed five drops of the Liquor Iodini to be taken three times a day, instead of the Tincture.—The patient did not again return to the Hospital, and therefore I know nothing more of the case; but I thought it necessary to point out this case, as one in which the Tincture of Iodine occasioned unpleasant symptoms, in a very small dose, the largest quantity ordered being fourteen drops (equal to seven drops of Dr. Coindet's Tincture), three times a day.—I cannot divest myself of the idea, that the head-ache and dizziness in this case, were owing in a considerable degree to the tardy state of the patient's bowels, notwithstanding the use of Aperient Medicines; but I also am disposed to believe, that there is some peculiarity in this patient's constitution, that precludes the possibility of administering the Tincture of Iodine to the same extent, that, from the Table it will appear, was done in other cases, under *apparently* the same circumstances, not only without inconvenience, but with evident and positive advantage. Even in the small doses exhibited in this case, the Goitre had subsided very considerably, and had become soft (always a favourable symptom), when I last saw this patient, and I am of opinion, that if she had continued her attendance, the cure might have been completed by frictions and small doses of the mildest preparations of Iodine, without her suffering any material inconvenience.

No. 83.—This youth began with fifteen drops of the Tincture of Iodine, three times a day, and in twenty-four days he wheezed very little, although he did so loudly when



he first came under my care.—About this time the Tincture of Iodine made him sick, and occasioned some degree of giddiness, which was not the case when he first began to use it.—He also employed the following Ointment:—

R. Tinct. Iodini, ʒiss. Adipis Præp. ʒi. M. ft. unguentum quo fricetur tumor m. et h. s.

In *some individuals*, after the preparations of Iodine have been given internally for some time, they are apt to occasion head-ache, giddiness, sickness at stomach, with some degree of nausea, languor, and inaptitude for exertion; when these unpleasant sensations and effects occur, the best plan to remove or obviate them is, to suspend for a time, the use of the medicine, or to reduce the dose, as may seem most expedient. A reduction of dose, from fifteen to twelve drops, was the plan adopted by me, on this occasion. The patient afterwards went on to the completion of the cure, without any uncomfortable sensations. An enlarged conglobate Gland in the neck, subsided very considerably during the exhibition of the Iodine, but not so rapidly as the enlarged Thyroid Gland. His general health was greatly improved, and he admitted that he was perfectly well at the time of his discharge. On the 20th of January, 1824, he came to the General Hospital to return thanks, and then remained free from complaint.

No. 99.—This young woman's name will be found at No. 38. She took the Tincture of Iodine for a short time, with benefit, but owing to the expense of the medicine at that time (thirty-six shillings the ounce being the wholesale price), she gave it up, and afterwards became an out-patient of the General Hospital, as will be seen by inspecting the table. The Bronchocele is gradually subsiding, and becoming softer, and there is no doubt that a cure will be accomplished, in time, provided she will persevere in the use of the Iodine. As shewing the influence of some local cause in the production of *Goitre*, I may mention, that this



young woman's mother was born and brought up in Rutlandshire, where she and all her relations were free from Bronchocele, but since her marriage she has resided constantly in this town, and now labours under a very large Goitre.

As I should be considered tedious by offering more remarks on individual cases of Bronchocele, I may now generally observe, that in the other cases, so far as I had an opportunity afforded me of following up the treatment by the internal exhibition of Iodine, they all went on favourably, without any particular *unpleasant effect* from the medicine, and without any *injury* to the *constitution*. On the contrary, the Tincture of Iodine, and other preparations of it, employed by myself, had generally a cordial and tonic effect, unless given in too great a dose; and the patients to whom it was exhibited, with the exception of the persons mentioned in the remarks, generally found themselves in better health and spirits than they had previously been for years. This observation applies, not only to those who laboured under Bronchocele, but also, as will appear from the sequel, to those who laboured under other diseases, in which Iodine was exhibited.

It is a great satisfaction for me to be able to state, that the patient (No. 30), with whom the Iodine *disagreed* the most, and who derived the *least benefit* from it, has *again* put herself under my care (see No. 112), and is taking small doses of the Hydriodate of Potass, and using the Linimentum Iodini externally, not only without inconvenience, but with some advantage. I think it necessary to point to the above circumstance in a particular manner, as it appears from the report of a celebrated author and reviewer, that Dr. Coindet now considers the *internal* exhibition of Iodine *se injurious*, and uses it only externally, in the way of friction. I apprehend, that Dr. Coindet has exhibited this powerful medicine in too large doses for the



generality of patients, otherwise he could have been under no alarm about its internal use.

The rule, to be observed with Iodine, as with all other powerful medicines, is to begin with a small dose at first, and to increase it cautiously, and at proper intervals; in this way we shall avoid doing harm, and shall be able to discover any peculiarity of constitution before the dose of the medicine can amount to a quantity, sufficient to injure the constitution, or even to occasion much inconvenience.

The cases and the table will shew the doses of the different preparations of Iodine employed by me, as well as the ages of the patients, &c. I beg particularly to observe, that it is absolutely necessary to keep the bowels in an *open* and *regular state*, during the exhibition of Iodine.

The power of Iodine over the absorbent system, has been noticed by Dr. Coindet, and others: it early attracted my attention, as will be seen by referring to the Remarks, No. 18; since that time, as will afterwards appear, I have had ample proof of its great power over the lymphatic system; but, I am of opinion, that it exerts no peculiar or specific power over that system of vessels and glands, but that they only participate in its general energetic effects on the whole body.

I cannot suppose, that a temporary excitement given to the absorbents, would remove large Bronchoceles, and prevent their return, unless the state of the system that gives rise to Goitre was corrected, when that is accomplished, the absorbents perform their office with effect, and the swelling disappears; but, in my opinion, it is incorrect to ascribe the *whole* cure to increased absorption.

Before concluding my remarks, and bringing to a conclusion what I have to communicate on the subject of



Iodine, I can without hesitation state, that I have found it a much more convenient and effectual remedy in dissipating goiterous swellings, than burnt sponge, which I had employed very frequently with success for nine years before I knew any thing of the remedial powers of Iodine. Independent of burnt sponge being a bulky and unpleasant article to take, it is very clear, that we never can know the quantity of Iodine contained in any given quantity of this medicine, or even whether it contains any Iodine or not; burnt sponge must, therefore, be considered as a very uncertain remedy, compared with Iodine, and will, I have no doubt, soon give place to it.

In confirmation of the beneficial effects of Iodine in the cure of Bronchocele, I may state, that Mr. Jowett, a highly intelligent young Surgeon, who has for some time performed the duty of resident Medical Surgeon, at Saint Mary's Hospital and Dispensary, of this town, lately informed me, that he has cured two cases of Bronchocele by the internal exhibition of the Tincture of Iodine, without inconvenience to the patients, or any injury to the general health.

Before finishing what I have at present to communicate on the effects of Iodine in Bronchocele, I may remark, that since the above observations were sent to the press, a great many patients, from Derbyshire, and other parts of the country, have applied to me for the cure of Bronchocele, and I find Iodine not only to support its character in the cure of Goitre, but even to exceed what could reasonably have been expected from it as a remedial agent, as the following statement will fully shew:—

Fanny Booth, of Cotmanhay, in Derbyshire, applied to me the 14th of April 1824, afflicted with a very large Bronchocele. I prescribed ten drops of Tincture of Iodine,



to be taken in water three times a day, and directed the tumour to be well rubbed every night with the Iodine Lini-ment.—In fourteen days the neck and Goitre measured nearly two inches less than when she applied to me.

I think it necessary to make this brief notice of Booth's case, because in consequence of the benefit that she experienced in so short a time from the means employed, Millicent Richards, a friend and acquaintance of hers, who laboured under an *enormous* Bronchocele, presented herself to me for cure.—I give the case as it is taken down in my Journal:—

“*Nottingham, 1st May, 1824.*

“Millicent Richards, æt. 67. Married and has a family.—Was born and brought up at Ilkeston, in Derbyshire, and has always resided there. For thirty-five years has laboured under Bronchocele—at first it increased very slowly, but for the last ten or fifteen years it has increased very much, and is now of an enormous size and globular form, slightly flattened.—The surface is smooth and uniform, skin tense, and of nearly the same colour as the adjoining skin.—The Goitre has escaped from its natural situation in the neck, and the most depending part of it now reaches as low as the ensiform cartilage, and the upper part of it is on a level with the upper part of the sternum, it is attached to the neck by a stem about three inches long, which measures twenty-two inches in circumference. The greatest circumference of the Goitre is longitudinally, as to the body, and measures exactly 29 inches; and the shortest circumference, taken at right angles to the former, or in the transverse direction of the body, measures exactly twenty-seven inches and three-quarters, so that the tumour is nearly globular, or within one inch and a quarter of being so, and rests on the breast, suspended to the neck by the stem. To give some idea of the size of the tumour, compared with the head, I measured the latter, in a line hori-



zontal to the upper part of the orbits, and found the head to measure exactly 22 inches and a half in circumference. Her general health is pretty good.

The poor woman is anxious to have the tumour reduced, and being willing to try what Iodine can accomplish in this case, I have prescribed the following medicines:—

Capiat Pil Cambogæ C. gr. x. omni nocte h. s. R̄. Tæ. Iodini ʒss. Capiat gutt. xij. ter in die ex aqua.—Sumat Magnesiæ Sulphatis, ʒii. mane p. r. n.

R̄. Linim. Sapon. C. ʒij. Tincturæ Iodini, ʒij. Misce fiat Linimentum quo fricetur tumor omni nocte hora somni.

May 22. Has employed the medicines exactly as directed. The patient observes, that the swelling must be smaller, as the skin is now quite loose, and she takes it up in folds. On re-measuring the Bronchocele, I find the longest circumference rather less than twenty-eight inches, and the shortest 26 inches and five-eighths, so that the tumour has diminished an inch or upwards, in all directions, in the course of three weeks. Medicines agree very well. Bowels are costive. Makes urine with difficulty, owing, I believe, to the constipated state of the body. The aperient pills do not move her bowels, and she has neglected to take the Epsom Salts.

R̄. Contr. Pilul. Cambogiæ C. Sumat Magnes. Sulphatis, ʒij. vel. iij. mane p. r. n. Capiat Tæ. Iodini gutt. xv. ter in die.—Fricetur tumor Linimento Iodini omni nocte hora somni.

I have directed her to make a bag to lace upon the tumour, so as gently to compress it, supporting the compressing bag and tumour by a kind of waistcoat. If my directions are properly carried into effect, the pressure on the tumour will, I have no doubt, assist in promoting its absorption.



Highly as I estimate the powers of Iodine, in the cure of Bronchocele and of other diseases, I must acknowledge, that in this *prodigious* enlargement of the Thyroid gland, its remedial powers have far exceeded what I could reasonably expect, in the short time it has been employed.

---

NOTE.—In lately looking over the Journals containing the cases of the patients prescribed for by me, at the General Hospital, I find that I have omitted to insert four cases of Bronchocele in the tabular view given above. The patients were females, and had been under treatment for some time, when I learnt the great remedial powers of the Tincture of Iodine in this disease, and I took the earliest opportunity of exhibiting it to them as well as others. Three of the cases were completely cured, and the other nearly so, when the patient was obliged to leave this place. The proportion in which the sexes have applied to me for the cure of Bronchocele (correcting the above omission), is as 15 Males to 105 Females, in 120 cases of this disease, within the period of the above report.



It may be said that the powers of Justice in the case of the President and of other officers, I must not be mistaken in this point, as a statement of the President's powers in the case of the President have far exceeded what I could expect in the case of the President.

It may be said that the powers of Justice in the case of the President and of other officers, I must not be mistaken in this point, as a statement of the President's powers in the case of the President have far exceeded what I could expect in the case of the President.



## MEDICAL RESEARCHES

ON

*The Effects of Iodine in Paralysis or Palsy.*

---

The different species of palsy occur so frequently, and, in the great majority of cases, are so difficult to cure, that any new remedy that can effect so desirable an object, or even relieve a portion of the unfortunate individuals who labour under so severe an affliction, will, I flatter myself, be acceptable to the medical world; for, notwithstanding, the great attention that has of late years been given to the Pathology of Palsy, and although various new remedies have been employed and recommended by ingenious men for its cure, still we must admit the melancholy fact, that Palsy generally proves an obstinate and untractable disease, too often baffling all our plans, and resisting our most potent remedies.

It was want of success with the remedies usually employed, in much slighter cases of palsy than the deplorable one I am about to detail, that led me to try a new method of curing the disease.



The wonderful powers of Iodine, which I had recently witnessed, and a long previous acquaintance with the effects of the same remedy, as it exists in burnt sponge, in reducing morbid enlargements of the Thyroid gland, led me, from analogy, to think, that in cases of Palsy, from tumours, or fluids, pressing on the brain, or spinal cord, or from morbid thickening of the investing membrane of the cord itself, Iodine might prove a useful remedy, not only by stimulating the nervous system, and removing morbid tumefaction and effusion, but also by correcting the strumous state of the constitution that often gives rise to the disease.

As the patient had been under the care of an able physician and experienced surgeon, for several months, without experiencing any benefit from the remedies employed, I conceived that it would be losing valuable time, and of no avail to the patient, to follow the usual routine of practice in so inveterate a case; on the contrary, I conceived myself called upon by every feeling of humanity, to use any means, that afforded a ray of hope, of alleviating the miserable situation of the poor sufferer.

Before proceeding to give a detail of the cases of palsy treated by the exhibition of Iodine, I



think it necessary to state, that it does not come within my plan to enter into the General History, and Cure of that disease,\* but, merely to give a pretty full outline of the cases of Palsy, in which Iodine has been employed by me as the chief remedial agent, with such remarks as the cases may respectively suggest.

Although I have been able to cure only a proportion of the cases of Palsy that have come under my care since April, 1821, when I first began to employ Iodine in it, I am nevertheless quite certain, that I have been much more successful in my practice since that time, than I was previously with the use of all the ordinary means. I have, therefore, taken

---

\* This has lately been done with great ability by an eminent physician, Dr. Cook, of London, to whose work on Palsy I beg leave to refer those who wish for a full history of the disease, and of the different means which have hitherto been employed for its cure.

Dr. Abercrombie, of Edinburgh, has also favoured us with some highly valuable observations on Palsy, in his "Researches on the Pathology of the Brain," (published in the 14th and 15th Vols. of the Edinburgh Medical and Surgical Journal), which will be read with interest and advantage by those who are directing their attention to the subject of Palsy.



the liberty of laying the following cases before my medical brethren, in the hope that Iodine will prove serviceable in their hands in the cure of paralytic affections, should they do me the honour of giving it a fair and unprejudiced trial.

For the sake of clearness and order, I shall arrange the cases of Palsy I have to detail, under the species to which they respectively belong, according to Cullen's division of the Genus Paralysis.

---

*Paralysis Paraplegica, or Paraplegic Palsy.*

---

**CASE I.**

James Watterton, æt. 19. Was admitted an in-patient of the General Hospital, near Nottingham, on the 27th of March, 1821. Has been ailing since October, 1819. Says that he was first attacked with pain in the bowels, and griping. After some time the pain left the bowels, and the lower extremities became swelled and painful. His mother, put his feet and legs in warm water, and after



this, his neck became stiff and painful, and he soon began to be troubled with pains shooting from the neck into the left side of the head (this took place, he thinks, about nine months ago); after the pain had continued for three months, it left him, and has not since returned. Almost immediately on the pain leaving him he lost the power of moving the left arm, and in a short time after the lower extremity of the same side became paralytic. Some time after this, he recovered the use of the left arm in a considerable degree, the lower extremity of the same side remaining paralytic, and the right half of the body, as high as the neck, was seized instantaneously with complete palsy. He has continued ever since in this wretched state, and has been getting worse, he thinks, instead of better, and passes his stools and urine involuntarily. Is pale, and of a slender spare habit. He lies in bed on his back, and is completely palsied on both sides, from the neck downwards, with the exception of the left upper extremity, over which he still has so much power as to be able to raise his hand as high as his chin, but he cannot grasp any thing with that hand. The sense of feeling is very much impaired, but not quite obliterated in the paralytic parts. There is no distortion of the face, and the



patient can articulate very well. Is troubled with twitchings in the lower extremities.

March 28. Complains of head-ache. Bowels not moved for two days. Sumat Mist. Purgantis  $\text{\textit{ziss}}$  quam primum.

March 29. Remains quite helpless. Bowels moved yesterday by the purging mixture, feels better since, and has had a good night. Skin cool. Pulse small and weak. Bowels open. Capiat Mist. Purg.  $\text{\textit{ziss}}$ . cras primo mane. Applicetur Emp. Lyttæ parti cervicis posteriori, h. s.

April 2. Blister acted pretty well: for three days the blistered part has been dressed with an ointment having a proportion of blistering plaster mixed with it, and the discharge is copious. Thinks he has rather more command over the left arm, but the other limbs are not better in any degree. Appetite moderate. It appears that the patient had a bloody purulent discharge from both ears, about two years ago, unattended with pain; the left ear continues to discharge a purulent looking matter; the right has not discharged any thing for some time. Contr. Mist. Purgans.



April 4. Continues nearly in the same state. The incontinence of urine has existed, without any improvement, since both the lower extremities became paralytic. Bowels are kept regular by the purging mixture. Pulse 84, and soft. Skin cool.

Repetatur Mistura Purgans pro re nata Habeat Tincturæ Iodini gutt. x. ter in die ex cyatho vinario aquæ.

April 6. Begins to move the right arm a little, and feels better.

Continuetur Mist. Purg. p. r. n. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.

April 9. Blister almost healed—to be dressed with Issue Ointment. Can raise the right hand nearly to the head. The power of moving the lower limbs has not improved, but the twitchings have nearly ceased, which shews some increase of muscular power. Pulse 80, and of better strength. When placed in the sitting posture in bed, can support himself better than when admitted. Bowels regular.

Repetatur Mist. Purg. p. r. n. Habeat Tincturæ Iodini gutt. xx. ter in die ex aqua.

April 10. The blister has healed, and the Issue Ointment was not re-applied. It may be



omitted. This morning first recovered the use of the lower extremities, so as to be able to move them a little, and can bend the left leg a little upon the thigh. Has more power over the left arm, and moves it about with greater freedom. Feels stronger and better. Can hold his urine now so as not to wet the bed.

Continuentur remedia.

April 14. Continues to improve. On the night of the 10th instant, began to have a considerable degree of pain in the toes of the left foot, shooting towards the heel. The left lower extremity is often spasmodically drawn up towards the body, and the foot is now so exquisitely sensible, that the friction of the toes against the bed clothes is quite insupportable; so that I find him with the foot, and part of the leg, quite uncovered. The pain has broken his rest during the night, since the 10th instant. Can now raise the left hand above his head, and move it about in all directions. Has not made the same degree of improvement on the right side of the body. Takes the purging mixture every second day. Pulse 84, and rather firmer.

Sumat Mist. Purgantis,  $\zeta$ iss. alternis matutinis. Capiat Tæ. Iodini gutt. xxv. ter in die.

April 16. The paralytic symptoms continue



to yield to the powerful influence of the Iodine. When his meat is cut he can feed himself with the left hand. Can raise the right hand to the chin, and can draw the right lower extremity up towards the body, and raise it about two inches from the bed. Says that his limbs are stiff from not being exercised—he is directed to move them as much as he can. He continues to hold his water. The perinæum and nates are raw from the former dribbling of the urine. Bowels were rather tardy—has taken a dose of the purging mixture this morning.

Capiat Tæ. Iodini gutt. xxx. ter in die. Repetatur Mistura Purgans, p. r. n. Fricetur Perinæum Linimento Camphoræ bis indies. Utatur Pediluvio omni nocte, h. s.

April 18. Continues to recover. Has less pain in the left foot. The left ear continues to discharge a little purulent matter. Pulse 84, and rather stronger. Appetite good. Bowels regular.

Continuentur remedia.

April 21. Is not so well. Complains of head-ache; there is a purulent discharge from both ears. Cannot move the right arm so well as he could two days ago. Pulse 96. Ears to be injected daily with tepid water.



Intermittatur Tinctura Iodini. Cras primo mane capiat Mist. Purg.  $\text{ziss}$ .

April 23. The purulent discharge from the ears continues. Head-ache gone. Face flushed. Can move the right arm better than on the 21st of April. Pulse 88, and firmer than on the 18th.

Sumat Tæ. Iodini gutt. xxx. ter in die et Mist. Purg.  $\text{ziss}$ . alternis matutinis.

April 26. Head-ache became more severe yesterday, and it continues. Pulse 100, and firm. Eyes a little inflamed. Bowels open. Less discharge from the ears. Paralytic symptoms, as on the 23d instant.

Intermittatur Tinctura Iodini. Continuatur Linimentum Camphoræ. Capiat Mist. Purg.  $\text{zi}$ . omni mane. Imponatur Emplastrum Lyttæ parti cervicis posteriori.

April 28. Blister rose well. Head-ache is relieved. Less discharge from the ear. Complains of an aching pain in the left eye. Cannot use the right arm so well as he lately could. The other extremities are in the same state they were a week ago. Bowels open by the purging mixture. A little strangury yesterday, from the blister. Pulse 96, and soft.



Capiat Mist. Purg.  $\text{z}\text{i}$ . omni mane et Tinct. Iodini gutt. xv, ter in die ex aqua.

April 30. Can move the right arm better since last report. Blister has discharged freely—it is nearly healed. The left eye is slightly inflamed and painful. Pulse 88, and soft. Bowels open.

Continuentur remedia. Applicentur hirudines quatuor palpebris sinistris.

May 1. The wounds made by the leeches bled profusely. The inflammation is almost gone, and has very little pain in the eye. Can move the right arm better than he has hitherto done. Bowels very open by the purging mixture. Pulse 80, and soft.

Continuentur medicamenta.

May 3. Blister healed yesterday. Better, and can raise the right hand as high as the crown of the head. Gets up from his chair without assistance, and can stand holding by a table. Is free from pain in the eye and headache. Very little discharge from the ears. Bowels open.

Continuentur remedia.

May 5. Has more power over the right arm



and hand, and can bend and extend the right leg on the thigh, better than heretofore. Yesterday, supported by two men, he walked from his bed-room to the day ward. The left ear discharges a little purulent matter. Appetite good. Feels stronger. Bowels open to-day, but costive yesterday, having omitted the purgative. Pulse 76, moderately full, and soft. The left eye is slightly inflamed, but says he has no pain in it. Sleeps well.

Repetatur Mist. Purg. p. r. n. Capiat Tæ. Iodini gutt. xv. ter in die.

May 7. Walks from his bed-room to the day ward, with very little assistance. Moves the right arm much better. Left eye a little inflamed. Some dulness, and specks in the cornea for eight years.

Continuentur remedia. Applicentur hirudines duæ palpebris sinistris.

May 9. Continues to improve. Bowels open. The excoriations have healed. His skin being harsh, and rather dry, he is rubbed with the Linimentum Camphoræ.

Continuetur Mist. Purg. Capiat Tæ. Iodini gutt. xx. ter in die.

May 12. Says he can walk a great deal



better this morning. No discharge from the ears. Bowels only moved when he takes the purging mixture.

Continuentur medicamenta.

May 19. Continues gradually to improve: this morning he walks without any assistance; but a person attends to prevent him from falling, should he lose his balance. He also continues to recover the use of his arms. The left ear discharges a little. Bowels open by art.

Sumat Tincturæ Iodini gutt. xxv. ter in die.

May 21. I find him walking with the assistance of a stick to steady himself. Had four stools yesterday. Opacity of the cornea less, and vision considerably improved. No headache. Left ear discharges very little, and the offensive smell is gone. Pulse 80, and of moderate strength.

Continuentur remedia.

June 2. Continues gradually to recover the use of all the extremities: the arms he can move in all directions; but complains of want of strength in the right one. The right knee is stiff, but he can bend the leg to nearly a right angle with the thigh. The sense of feeling, also,



continues gradually to improve. Bowels not moved, unless by physic.

Capiat Mist. Purg. ʒiiss. omni mane et Tæ. Iodini gutt. xxx. ter in die. Omittatur Lini-  
mentum.

**June 4.** There is a little discharge from the left ear. Is gradually recovering.

Continuentur remedia.

**June 9.** Can walk without a stick, or any one to prevent him from falling. He is gradually recovering the power of motion, and sense of feeling. Drops agree. Appetite good, and is now allowed full diet. A few days ago, I first observed a considerable degree of fulness in the upper and left side of the neck: the part sometimes aches for the space of a minute. Pulse 72, and soft.

Continuentur Mist. Purg. et Tinct. Iodini.

**June 13.** Wrote his name with a pencil on the 11th instant. Had the misfortune to fall yesterday and hurt the right arm so much, that he cannot raise his hand to his head, on account of pain. Some head-ache last night, after the fall. Bowels open by the mixture. To use a sling to support the arm.

Continuentur remedia. Applicentur hirudines tres partibus dolentibus.



June 18. I found him this morning walking before the Hospital. The leeches relieved the pain in the arm. Complains of stiffness and pain in the right shoulder joint, on motion. Does not now use a sling for the arm. Continues to recover.

Continuentur remedia.

June 23. Cannot move the right arm quite so well as before the accident. For the last three days has been purged four or five times each day without taking the Purging Mixture. The medicines were omitted, and he has daily taken fifteen drops of Tincture of Opium to check the diarrhoea.

Cras repetantur remedia ut antea.

June 25. Bowels regular. Can now walk better with the right than the left lower extremity. The right shoulder joint feels weak since the accident. There is still some swelling and stiffness in the upper and left side of the neck. Has very little discharge from the left ear, and his hearing is not impaired.

Capiat T. Iodini gutt. xxx. ter in die et Mist. Purgantem p. r. n.

R. Linim. Saponis Camp. ʒij.

Tinct. Opii.....ʒij.

Ol. Terebnithinae Rect. ʒss.

Misce fiat Linimentum quo fricetur humerus affectus mane et hora somni.



**June 30.** Shoulder better. Continues to recover. Complains of being weak in the loins. Continuentur remedia.

**July 2.** Is gradually recovering flesh and strength. Has the complete use of all his limbs, and the sense of feeling is as perfect as ever. Can walk without a stick, but generally uses one. His right shoulder is nearly recovered from the effects of the contusion. Has written his name with pen and ink this morning, the paper is attached to the cover of the journal kept at the Hospital. There is still a little fulness, and at times aching in the left side of the neck. The left ear continues to discharge a serous fluid with whitish flakes in it; but, it is free from any offensive smell. Bowels regular for the last week, without the use of Purging Medicine. Tongue clean. The speck has nearly disappeared, and he now can see better with the left eye than for the last eight years. He complains chiefly of weakness.

**July 3.** Discharged cured.

---

REMARKS.—This is the case of Palsy I particularly alluded to, and the first in which Iodine was employed by me for its cure; on that account I have given the case at full length, from the journal kept at the General Hospital.



I think it necessary to remark, that after taking thirty drops of Tincture of Iodine thrice a day, for five days, he was attacked with head-ache, and his pulse rose to 96 beats in a minute. The Iodine was omitted—the head-ache went off, and in a few days he was ordered thirty drops of the Tincture of Iodine as before, to ascertain whether the head-ache, and other febrile symptoms, were occasioned by the Iodine, or owing to some other cause. In three days, after resuming the use of the Iodine, the head-ache was as severe as ever, and the pulse up at 100. I was now convinced that the dose of Iodine was too large, and after omitting it for two days, I ordered 15 drops three times a day, and gradually increased the number of drops, so that they did not afterwards disagree with the patient. From the history of the case, the purulent discharge from the ears, the swelling and stiffness in the neck, and the general appearance of the patient, I have no doubt, that the Palsy in this case was owing to scrofulous inflammation, tumefaction, and, perhaps, effusion, by which the spiral cord in the neck was so compressed as to render the parts below it paralytic. But, whatever pathological opinion may be formed of this case, the facts must still remain the same. Having made the above remarks, which I thought necessary, I shall now proceed to give as condensed an account of the remaining cases of Palsy, treated by Iodine, as I am able, taking care at the same time not to preclude useful information and illustration.

---

## CASE II.

William Sills, æt. 49, joiner. Admitted an out-patient of the General Hospital, Nottingham, the 26th February, 1822. Has been afflicted with a certain degree of paralysis in



both the lower extremities, for nearly nine years. He cannot walk without the assistance of a stick, and he is obliged at times to run, to enable him to preserve his balance, particularly when he is going down a declivity. There is a degree of numbness from the pubes and sacrum downwards, as well as a want of the proper power of motion. The paralytic symptoms first appeared in the Spring of 1814, with a sensation of weakness, and want of proper feeling in the knees, and at the end of a week the paralytic affection had extended as high as the hips, and pubes, but has never risen higher. He was under my care as an In and Out-patient of the Hospital, for twelve or fourteen weeks, when he was first seized with the palsy, and derived very great benefit from the means employed, for he informs me, that "he could not step over his walking stick when admitted; and when discharged, could walk tolerably well with a stick to balance him." For the last eight years the paralytic symptoms have remained stationary. Bowels moved once or twice a day. Pulse 72, and soft. This man has become an out-patient of the Hospital at my recommendation, to try if the Iodine can afford him any relief.

Capiat Pilæ. Cambogiæ C. gr. v. vel. x. h. s. si tarda est alvus. Sumat Tæ. Iodini gutt. xx. ter in die ex aquæ cyatho.



March 8. Better to day and yesterday. Has taken the Iodine only twice a day.

Cont<sup>r</sup>. remed.

March 29. Two days ago, the pain was so severe in his legs and thighs, he says, he was like to go mad. Does not walk better.

Capt. Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. Pil. Cambogiæ C.

May 3. Tincture of Iodine diminished to xx. drops thrice a day.

May 17. Says he feels better, and has more feeling in the lower extremities; and last week was even better than he is at present.

Cont<sup>r</sup>. remed.

June 21. More feeling, and has walked better the last week; on the 7th instant drank a pint and a half of ale in the evening, and was worse for it; he works at his trade.

Cont<sup>r</sup>. remed.

He continued to improve in walking till the 16th of August. About the 24th of August he was seized with dysentery, then epidemic, and was attended by another practitioner, as he could not come to the Hospital.

Upon the whole this patient certainly benefit-



ed by the Tincture of Iodine previous to the dysenteric attack, with which Iodine had nothing to do, I believe, as an exciting cause, as the Flux was epidemic at that time.

Discharged relieved.

---

### CASE III.

Sarah Parker, æt. 16, from Mansfield. Was admitted an in-patient of the Hospital the 5th August, 1823. Has been ill since February last, and has gradually been getting worse, and medical treatment has hitherto been of no service. Labours under complete paralysis of the lower extremities, from the loins downwards. There is a very considerable fulness in the region of the sacrum, and over the two last lumbar vertebræ, pressure causes some degree of pain. The rest of the spine appears perfectly sound and natural in appearance. The vessels of the skin, covering the swollen parts, are rather larger than natural. The lower extremities, as high as the knees, are cold and oedematous; at times passes her stools and urine involuntarily. Has not menstruated since she was first taken ill.

A Diuretic Mixture was ordered the first day, which increased the quantity of urine, and after some time nearly removed the oedema of the



extremities which always remained cold, notwithstanding the use of warm bricks, flannel, &c. The day after she was admitted, I began to give her fifteen drops of the Tincture of Iodine three times a day; it was afterwards gradually increased to twenty-eight drops three times a day. The loins and posterior part of the pelvis was rubbed night and morning, with an Ointment composed of one ounce of Hog's Lard, and one drachm and a half of Tincture of Iodine. Blisters were frequently applied in succession to the loins and sacrum. From the middle of August till the first of September she felt better; could retain her stools and urine, and had more feeling in the paralytic parts. After this time she gradually got worse, rather than better; and when she left the Hospital to return home the 11th October, 1823, the oedema extended as high as the nates. She continued gradually to get worse, and died about the 20th of February the following year.

I think it probable that the two last lumbar vertebræ, and the sacrum, or a part of them, were in a carious state in this patient, and rendered the disease incurable.



## CASE IV.

Joseph Thurman, nearly four years of age, from Arnold. Was admitted an out-patient of the General Hospital, the 7th October, 1823. Labours under posterior curvature of the spine, to a considerable extent, between the scapulæ. Has the perfect use of the upper extremities, but the lower limbs have been completely paralytic for twelve weeks out of nine months that he has been ill. Cannot sit without something to lean against. Countenance not unhealthy in appearance; has not lost flesh; appetite pretty good. Belly rather larger than natural, and he is generally costive. Is ordered to lie on his back upon a hair mattress.

Capiat Magnesiae Sulphatis ʒi. omni mane si tarda est alvus. Sumat Tæ. Iodini gutt. iv. ter in die ex aqua.

Oct. 17. In my absence, the following report was entered in the Journal:—Makes water better and not so often. Complains of pain in the belly. Has two stools daily of a brown colour.

Cont. Magnesiae Sulphat. Sumat Tæ. Iodini gutt vi. ter in die.

Oct. 24. His father reports that he is not so well since he has taken six drops thrice a day.



Sometimes he has no stool, at other times three or four. Urine rank.

Sumat Tæ. Iodini gutt. iv. ter in die, Rept<sup>r</sup>.  
Magnesiæ Sulph. pro re nata.

Nov. 7. Belly not so large, but bowels irregular, and stools unnatural; some pain above the spine of the left ilium; urine very turbid. I cannot prevail with his parents to give the Salts so as to keep his bowels regular.

Habeat Magnes. Sulph. omni mane si tarda est alvus. Capiat Tæ. Iodini gutt. iv. ter in die.

The above plan of treatment was continued till the 26th of December, when there is the following report:—Has been more cheerful, and has complained less of pain for the last three weeks. Passes the urine involuntarily, and the stools also, generally. Always lies on his back. The curvature of the spine does not increase, and his father thinks his back is rather stronger. Perspires less when asleep. The Medicines were ordered to be continued, and the spine to be rubbed every night with the Linimentum Iodini.

July 2, 1824. I have learnt to-day that this child is still alive. Owing to his father falling ill and dying, I received no account of him after the last report, and he was discharged



for non-attendance. I think it highly probable that the child would have recovered under the above treatment, if he had been attended to properly.

---

### CASE V.

Jane Everett, æt. 21, servant. Was admitted under my care as an In-patient of the General Hospital, the 10th February, 1824. Ten weeks ago, hurt her loins by falling down a flight of fifteen steps; has had pain in the loins ever since, attended with numbness, and want of proper sense of feeling. Says that she has had hard work to get up to the Hospital, from Chesterfield Street, distant about the eighth part of a mile. Bowels have not been moved for five days. Urine turbid after standing. Catamenia regular. Her hands are subject to be cold, and of a purplish colour, and the lower extremities are swollen, and of a mottled purple colour, as if she had the measles. Coughs and expectorates a great deal of phlegm, generally with some streaks of blood. P. 92, and soft. T. furred. Is directed to use the Vapour Bath at 110 degrees, three times a week.

Capiat Misturæ Purgantis  $\zeta$ ij. omni mane.

Feb. 14. I have examined the spine this morning, and can see nothing amiss. Feels



better since she has used the Vapour Bath. Vomited the Purgine Mixture, and has taken half an ounce of Epsom Salts instead of it. Labours under Bronchocele, but did not mention it to me before.

Cont<sup>r</sup>. remed.

Feb. 16. Still complains of numbness, and impaired sense of feeling in the lower half of the body. P. 84, and soft. Skin cool. B. open by the Salts.

Cont<sup>r</sup>. remed. Sumat Liquoris Iodini gutt. x. ter in die ex aqua.

Feb. 18. Says that the feeling has returned in a considerable degree, and that the lower extremities are now twitched, and have a prickling sensation in them; and when she first gets up in the morning, the soles of her feet feel as if she were treading on the points of needles or pins.

Cont<sup>r</sup>. remed.

Feb. 27. Has recovered the feeling and perfect use of the lower extremities, and has been free from any tingling sensation in them for three days. She wishes to return home, but I have advised her to stay a little longer, lest she should relapse.

Cont<sup>r</sup>. remed.



March 3. Complains of some return of pain in the loins, and numbness in the lower limbs. B. open.

Capiat Liq. Iodini gutt. xij. ter in die. Continuentur alia.

March 6. Pain in the loins almost gone, and has recovered the feeling of the lower extremities, and is without any prickling sensation. Bronchocele softer.

Cap<sup>t</sup>. Liq. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

March 22. Bronchocele smaller and softer. Can use the lower limbs very well now, but complains of some pain above the left hip, which has been troublesome for five or six days.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Emp. Cantharidis parti dolenti h. s.

March 27. Hip easier since blistered; has still a little weakness in the loins, but no numbness in the limbs.

Cont<sup>r</sup>. remed.

April 2. Says she feels quite well now, and has no pain or numbness.

April 17. No return of the paralytic symp-



toms. Bronchocele almost dissipated. Is going home to Rutlandshire, and is supplied with half an ounce of the Liq. Iodini, which she is desired to take as before.

Discharged cured.

---

As connected with Paraplegia, I have subjoined the following particulars of the morbid appearances in two cases of this disease, and hope that they will not prove altogether uninteresting.

### CASE I.

A patient in the prime of life, labouring under paralysis, from the lower part of the back downwards, came under my care as an In-Patient of the Hospital about ten years since. He ascribed the origin of his disease to spraining his back when mowing for a wager. When he came under my care, the inflammatory symptoms from the sprain had entirely disappeared, and he laboured under a considerable degree of debility, as well as paralysis. Caustic Issues were employed, and every means used to arrest the progress of the disease, but to no purpose. A considerable time before his death, ulceration took place in the soft parts about the sacrum and nates, and at last mortification to some extent ensued. On examining the spine, the



last dorsal vertebra was found in a carious state, but with very little loss of substance, and the paralytic symptoms appeared owing to the serous fluid that was found effused within the spinal canal; no doubt occasioned by the irritation of the diseased vertebra.

---

## CASE II.

A man, aged 70, was brought into St. Mary's Hospital, in a dying state, with complete paralysis of the lower extremities, and the second day after his admission, his speech was slightly affected, and his mouth drawn considerably to the right side. The stools and urine were passed involuntarily. He stated, that he had laboured under what he termed asthma for 50 years, and had been ill a considerable time before he was admitted. He died the third day after his admission. I visited the Hospital the same day, and, on Mr. Jowett's relating to me what is stated above, I suggested the strong probability of a serous fluid being effused within the spinal canal, and about the basis of the brain. Mr. Jowett opened the spine, which was accomplished in a very short time, by striking each vertebra with a Plumber's "hacking" knife and a hammer, about midway between the spinous process and transverse process on each side. After the first portion of vertebra is got out it is really sur-



prising with what rapidity the whole canal may be brought into view. I hope, when this easy method of opening the spinal canal shall be more generally known, that inspections of the condition of the spinal column and its contents, will more frequently take place in many diseases than has hitherto been the case. Having made this digression, which I hope will not be without its use, I proceed to detail the morbid appearances which presented themselves to view. There was no fluid between the ligamentous lining of the vertebræ, and the dura mater ; but the cylindrical tube formed by this membrane which envelopes the spinal cord, was nearly full of a thin serous fluid ; the membranes and spinal cord appeared free from disease. About two ounces of a watery fluid escaped from the head, when the dura mater was opened. The surface of the pia mater appeared more vascular than usual, and the medullary substance of the brain exhibited, on being cut, more bleeding points than we usually find in persons at so advanced an age. The lateral ventricles were very much enlarged, and contained nearly three ounces of a clear serous fluid. The substance of the septum lucidum had entirely disappeared, and in its place was found a transparent membrane of great tenuity, that had many holes in it, like fine net, posteriorly and inferiorly, but the other part of the membrane was



entire. The oval hole under the anterior body of the fornix (commonly called Monro's hole), was much larger than natural. There was no softening of the brain, or any morbid hardness of that organ. The fluid within the ventricles I consider as the primary effusion, and think it must have taken place very slowly, otherwise it could not have failed to destroy life long before, the skull being one bone in this old man. The effusion between the dura mater and brain, and spinal cord, I consider of more recent date, and that it occasioned the paralytic symptoms in the present case. The lungs were greatly condensed, and to a considerable extent impervious to air in respiration. In a considerable portion of them the bronchi were unnaturally dilated. Other portions of the lungs contained a good deal of a serous fluid.

---

The immediate good effects that resulted from the employment of Iodine in Watterton's case, made me anxious to try its powers in other forms and modifications of palsy; and the following cases will shew that its remedial powers are not less remarkable in cases of Hemiplegic Palsy.



*Paralysis Hemiplegia, or Paraplegic Palsy.*

---

## CASE I.

John Scothern, æt. 56, a labourer, is a remarkably strong made man, five feet ten inches high, formerly a soldier in the 30th Regiment of Foot. Admitted an Out-Patient of the General Hospital, the 8th of May, 1821. When in the army, about eighteen years ago, had one or two paralytic strokes, which deprived him of the use of the right half of the body, and he was afterwards discharged, from the Royal Hospital, at Kilmainham, as unserviceable.—He informs me, that he long remained in a helpless state, but after the lapse of several years, he recovered so much power in the paralytic side, as to do a little work, as a labourer, ever since. He first applied to me as a pauper patient, the 18th of April, 1821, and I prescribed for him; but not being able to purchase the Tincture of Iodine, he got recommended as an Out-Patient of the General Hospital. He complains of great weakness in the whole of the right side of the body, and particularly in the right arm and hand, and the right knee. The right hand shakes very much. The sense of feeling is also very imperfect in the right side.



He is much troubled with pain in the occiput, and down the back. Swallows and articulates with difficulty, and says that his memory is very bad, and also his hearing. Bowels generally constive, and makes urine with difficulty. Pulse 84.

Capiat Pil. Cambogiæ Comp. gr. x. vel xv. hora somni si tarda est alvus.

Sumat Tinct. Iodini gutt. xx. ter in die ex aqua.

May 18. Has less pain in the back part of the head; walks better, and says his hand does not shake half so much. Pulse 72, and of moderate strength. Bowels are kept open by two pills every night. Has taken no Tincture of Iodine for four days, the quantity he was supplied with having been all used.

Cont<sup>r</sup>. remed.

May 25. Says he has more feeling in the paralytic parts, and less pain in the head, and all down the back. Makes water with less difficulty. Bowels generally open by two pills at bed time, but is sometimes also obliged to take two in the morning. Pulse 72, and soft.

Capiat Tæ. Iodini gutt. xxx. ter in die. Sumat Pilulas, p. r. n.

June 1. Pain has quite left the head and back. Has more feeling in the paralytic side, and the right hand and arm shake much less;



he improves in walking, and he says that his general health is much better.

Cont<sup>r</sup>. Pilulæ. Capiat Tæ. Iodini gutt. xxx. ter in die.

June 8. The case continues to proceed favourably. Pulse 64, and moderately full, but soft. Cont<sup>r</sup>. remed.

June 22. Continues to recover his health, and his hearing is very much improved. Pulse 62, and as at last report.

August 3. Feels much better. Hand shakes less. Memory better, and he articulates with facility. Is subject to the night mare, when he lies on his back. His urine sometimes runs from him when asleep, but not so often as before he began to take the Iodine.

Cont<sup>r</sup>. remed.

Aug. 24. He continues gradually to recover. He complains of pain at the upper part of the loins, and lower part of the back.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Emplast. Thuris Comp. parti dolenti.

September 14. Says that his right arm feels nearly as strong as the left, but still has a little shake in the right hand and arm. Walks very



well. Articulates distinctly, and with facility, and hears nearly as well as ever. Plaster relieved the pain in the loins.

Cont<sup>r</sup>. remed.

November 2. The medicines have been continued up to the present time. Except a little shake in the right hand and arm, he has as perfect use of the extremities of the right side of the body as he has of the left. His hearing and memory are both restored, and he can speak as well as ever.

Discharged cured.

---

REMARKS.—This I consider as a very strong case in favour of the remedial powers of Iodine in Palsy. In most of the recent attacks of Palsy, there is a certain natural tendency towards improvement at first, which makes it difficult for the most acute and experienced physician to say how much of the cure is owing to the powers of nature, and how much to the remedies employed; but, in the case I have just detailed, it appears the disease was of eighteen years standing; and after he had recovered, in a certain degree, the sense of feeling and power of motion, so as to labour for his support, it is necessary to remark, that he applied to me when he had experienced a relapse, which nearly deprived him of his hearing, power of speech, and memory, and rendered him unable to make any useful exertion with the right side of the body. Under the use of Iodine, not only did he recover the perfect power of speech, the faculty of memory, and the sense of hearing, but he also got the better of the *old* paralytic affection



completely (except a slight shake now and then in the right hand), so that he is able to follow the laborious employment of getting in coals, which I have frequently witnessed, with great pleasure, in going my rounds in the town. Under all the circumstances of this case, I think the most sceptical, as to the powers of medicine in the cure of diseases, must allow some share of efficacy to Iodine, in this case, and also in Watterton's, that had resisted all the remedial means previously employed, but readily yielded to the powers of Iodine. I may here observe, that Scothern came to my house about the month of April, 1824, and informed me, that he did not feel very well, and that he was apprehensive that his Palsy was going to return, and he wished me to order some of *the medicine* for him, if I approved of his taking it. I accordingly ordered fifteen drops of the Tincture of Iodine three times a day, and the last time I spoke to him he told me had taken three half ounces of the Tincture, and that he felt perfectly well; and three days ago I saw him walking in the Market Place of this town, apparently in perfect health. I now proceed to detail other cases, which will confirm what has been advanced as to the remedial powers of Iodine in Palsy.

---

## CASE II.

Philip Lees, æt. 59, joiner. Was admitted an Out-Patient of the General Hospital, the 27th of March, 1821. Had an apoplectic attack about 18 months ago, when in London, and continued insensible for a week. When he recovered from the fit, he found the right half of the body in a weak and paralytic state, and it has remained nearly in the same state ever since. He can walk without assistance, and move the arm a



little, but has no use of the right hand. His memory, and other mental faculties, are very much impaired, and he speaks with difficulty. Bowels generally costive. He was ordered ten grains of the *Pil. Cambogiæ Comp.* at bed time, and two ounces of the *Purging Mixture* in the morning, when necessary.

The above medicines only procured one stool daily, and on the 6th of April following, he began to take thirty drops of *Tincture of Colchicum*, three times a day, which was continued with the other medicines till the 11th of May, when his bowels were perfectly regular. He was desired to continue the pills at bed time, to take fifteen drops of the *Tincture of Iodine* three times a day, in water, and to omit the other medicines. In a week he was every way sensibly better, and the *Tincture of Iodine* was increased to twenty drops three times a day. Three weeks after he began the *Iodine*, he could walk much better, and grasp any thing firmly with the right hand; his general health was very much improved, and he continued to recover, so that at the end of six weeks he began to work a little at his trade.

This patient was afterwards very much afflicted with pain in the parts that had formerly been palsied, and was continued a long



time on the list of Out-Patients, on account of the neuralgic affection. He took Extract of Belladonna, Carbonate of Iron, &c. with relief, and was also bled, leeches and blistered with advantage.

He was discharged, very much relieved, the 11th of October, 1822.

---

REMARKS.—This man never took above thirty drops of the Tincture of Iodine for a dose, but it was rather too much for him, and he certainly improved most when he only took fifteen or twenty drops three times a day. The pain and morbid sensibility in the arm prevented him from working at his trade, after the paralytic symptoms were removed.

---

### CASE III.

Jane Varney, æt. 40, lace runner. Admitted an In-Patient of the General Hospital, the 5th of February, 1822. The patient informs me, that about five months ago she had an apoplectic attack, which lasted for two days, during which time she was quite insensible, and lay motionless.

When she recovered her senses she found she had lost the use of the right half of the body, and could not speak. Was first under the care of a Surgeon of this town, for a month, and has since been under one of my colleagues, of this Hospi-



tal, two months as an In, and two months as an Out-Patient; says she has been worse since she has been an Out-Patient. Has been once bled from the arm, three times leeches, and as often blistered on the right side of the neck and shoulder. Has more use of the arm than the leg, but can walk tolerably. The sense of feeling is not so good in the right as in the left side of the body. Bowels generally costive. Complains of pains in both the right extremities. Sleeps ill. Pulse 96, and small. Tongue a little furred. A blister was ordered to be applied to the fore and right side of the neck at bed time, and she was directed to take one drop of Croton Oil, in the form of a pill, every morning, if necessary. The pill not being sufficient, she took a dose of Purging Mixture the following morning, and was rather freely moved by it, and felt low afterwards.

February 9. The Purging Mixture was ordered to be continued, and she was directed to take twenty drops of the Tincture of Iodine three times a day, in a glass of water.

February 16. The third day after taking the Iodine she began to improve, and in course of seven days could both walk and use her arm better. Has taken thirty drops of the Tincture of Iodine three times a day, for the last four days. Pulse 84, and soft. Skin cool.



February 21. Continues to improve.  
 Capiat Tæ. Iodini gutt. xii. ter in die.  
 Repet<sup>r</sup>. Mist. Purg. p. r. n.

February 23. She goes on improving.  
 Cont<sup>r</sup>. remed.

February 26. Yesterday began to complain of a considerable degree of pain in the right upper and lower extremities, and, consequently, cannot move them so well. Pulse small, and soft. Bowels open.

Omitt<sup>r</sup>. Tæ. Iodini. Cont<sup>r</sup>. Mist. Purgans, p. r. n.

R<sup>x</sup> Pulv. Cinchonæ, ʒss. Pulv. Cinnamoni, ʒss. Misce, et divide in Pulv. xii. Capiat i. ter in die ex aqua.

February 28. Feels better. Pain easier, and can move the arm better. Pulse 84, small and soft. Bowels open.

Cont<sup>r</sup>. remed.

March 2. Arm better. Thigh still painful, and cannot move it so well as she did some days back. Pulse 84, small and soft.

Cont<sup>r</sup>. remed.

March 11. Continues to recover, but is a



little low from the Purging Mixture having been taken in too large a dose.

Cont<sup>r</sup>. remed.

March 18. Is not so well as she has been. Arm weak, and has less feeling in it. Has pain in the right lower extremity, and does not improve in walking. Bowels moved three times daily, by the physie.

Omitt<sup>r</sup>. Pulvis Cinchonæ. Cont<sup>r</sup>. Mist. Purg. p. r. n. Sumat Tæ. Iodini gutt. xxx. ter in die ex aqua.

March 21. Feels better since she has taken the Iodine. Complains of pain and weakness in the right knee, which is free from swelling or redness. Bowels open. Tongue clean.

Sumat Tæ. Iodini gutt. xxxv. ter in die. Fricetur genu dextrum Linimento Ammon. fort. m. et h. s.

March 25. Continues to improve in every respect, and can move the paralytic limbs better than she has hitherto done.

Cont<sup>r</sup>. remed.

March 30. Has been in bed four days, owing to a severe attack of Cynanche Tonsillaris, for which the throat has been blistered, and she



has used the Infus. Rosæ, acidulated, as a gargle.

April 8. The attack in the throat has been so severe, that it has been necessary to leech and blister it again, and to give her Purging Enemas, as she could not swallow, but with great pain. The Iodine has been omitted since the 1st of April. Is very weak and low; the swelling of the throat has greatly subsided, and she can now swallow a little food and medicine.

Sumat Infus. Gentinæ Comp. ʒss ter in die.  
Repet<sup>r</sup>. Mist. Purgans, p. r. n.

April 17. Patient recovers strength.

Cont<sup>r</sup>. remed.

April 20. Continues to improve in strength.

Cont<sup>r</sup>. remed.

April 29. She continues to recover.

Cont<sup>r</sup>. remed. Sumat Tæ. Iodini gutt. xv.  
ter in die.

May 7. Has so far recovered that she can use her needle with the right hand, and can walk pretty well.

Discharged cured.



## CASE IV.

Charles Newman, æt. 52, butcher, July 16, 1821. This patient had a paralytic stroke the 20th of September, 1819, which nearly deprived him of the use of the left half of the body, so that he could not walk without a stick; after being two months under my care, he could walk without assistance, but the left arm and hand had made very little improvement when he left off the use of medicines. I met this man a few days ago, walking pretty well, but I found that he had not recovered the use of the left arm and hand, and that the whole of the left side, but particularly the arm, was very much affected by atmospherical changes, particularly during cold moist weather. I told him I had lately employed a medicine that was singularly efficacious in restoring the use of paralytic parts, and recommended him to make trial of it, to which he readily agreed. Pulse 84, and soft. Face rather pale; is giddy when he stoops.

*Capiat Pilæ. Cambogiæ C. gr. x. omni nocte, h. s. Sumat Tæ. Iodini gutt. xv. ter in die ex cyatho vinario aquæ.*

July 24. Is less dizzy when he stoops, and



begins to recover the feeling of the paralytic parts, and can move them better.

Cont<sup>r</sup>. Pilæ. Capiat Tæ. Iodini gutt. xx. ter in die.

September 4. Has been out of town, but has taken the Iodine as directed. Says that his head is much better, and that he can use the left hand, and has more feeling in it.

Cont<sup>r</sup>. remed.

November 29. Says he can walk, eat, and sleep a vast deal better. Can raise the left hand to the back part of the head, and hold a knife, and dress cattle with it now. Has taken no medicines for the last three weeks.

Discharged cured.

---

REMARKS.—I have seen this man lately, and am happy to say, that he has not relapsed. The whole left side is still a little weaker than the right. I may observe, that the reports in this case are at long intervals, owing to the patient not coming to me, which *he* thought unnecessary, as he was going on improving. I consider this a very strong case in proof of the great remedial powers of Iodine in Palsy, as the patient had made no progress in the way of amendment, for at least eighteen months previous to the exhibition of Iodine.



## CASE V.

Anne Parnham, æt. 45, from Lambley Hospital, Nottingham. Was admitted an Out-Patient of the General Hospital, the 3d of September, 1822. Was afflicted with what she calls asthma, for six or seven years, and says, that her mother died of the same disease, at the age of 42. About twelve months ago, had a paralytic stroke, which deprived her of the use of the right side of the body, and of her speech and hearing. In a few days she recovered her hearing and power of speech, and, in a certain degree, the power of moving the right extremities; but not so as to walk or use her hand. In course of two or three weeks she had a second paralytic stroke, which did not affect her hearing or speech, but deprived her of the little power she had recovered of moving the right extremities. Says that she has gradually been recovering the use of the right lower extremity, and can now walk to the market or to the Hospital, but has gained little or no power in the right arm, which hangs useless by her side. The patient informs me, that she has been very little troubled with asthma since she had the first paralytic stroke. Is pale and debilitated. Bowels open. Tongue slightly furred.

Sumat Pil. Cambogiæ Comp. gr. v. vel x. h. s.



si tarda est alvus. Capiat Tæ. Iodine gutt. xv.  
ex aqua ter in die.

September 6. Has pain in the paralytic arm, shooting down to the ends of the fingers; she compares the degree of pain, at times, to cutting her arm off.

Cont<sup>r</sup>. Pil. Cambogiæ C. Sumat Tæ. Iodini gutt xx. ter in die.

September 20. Says she can move the fingers better, but cannot raise the arm yet. Pain in the arm so great she can scarcely endure it, and says, "that any body touching the arm rudely, causes a pain to go to her heart." Arm feels cool. Bowels open by the pills. The Tincture of Iodine makes her sick for a considerable time after she has taken it.

Cont<sup>r</sup>. remed.

October 4. Has more strength in the hand, and power of moving the fingers. Complains of acute pain from the shoulder to the end of the fingers.

Cont<sup>r</sup>. remed. Fricetur brachium dextrum Linimento Camphoræ, m. et h. s.

October 14. Has more feeling in the arm and hand, but complains of violent hot and



gnawing pain in those parts. Drops still make her sick.

Sumat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>.  
Pilulæ and Linimentum.

November 1. Can lift the arm up better, but as yet cannot take hold of any thing with the fingers, but moves them better than on the 14th ultimo. Has more feeling and less pain in the paralytic arm. Bowels open by one pill. Drops make her so sick she can scarcely keep them down.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>.  
alia.

November 15. Says her hand is better, and is, upon the whole, stronger since last report.

Cont<sup>r</sup>. remed.

November 29. Can raise her right hand nearly as high as her chin. Has more feeling in the arm, and can use the fingers much better. Bowels open by taking one pill. Pulse 88, and of moderate strength; before this the pulse has been smaller, and softer than natural. Has only menstruated three times the last two years. Thinks she has been freer from her asthma than usual since she has been under my care. Says that the drops make her terribly



sick now, and that she sometimes vomits them.

Sumat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

December 13. This morning can raise her hand to the top of her bonnet, and can use it better. The present dose of the Tincture of Iodine does not occasion much uneasiness at the stomach.

Cont<sup>r</sup>. remed.

January 10, 1823. Can move her arm freely in all directions, and has recovered the use of her fingers so as to make a few stitches with a needle. Can walk very well now. Pulse 84, and soft. Bowels open by the pills. Has got a catarrh.

Cont<sup>r</sup>. remed.

January 24. Continues to recover, but the cold weather is against her. Takes twenty drops of the Tincture of Iodine, without being sick.

Cont<sup>r</sup>. remed.

February 7. Uses her needle better; but every now and then her fingers are shut involuntarily. Says that she can use the right lower



extremity nearly as well as the left, and that her general health is much better.

Cont<sup>r</sup>. remed.

February 21. Can use the needle better, but complains that her right hand is still weak.

Cont<sup>r</sup>. remed.

March 7. Does not feel so well, having got a fresh catarrh.

Omitt<sup>r</sup>. Ta. Iodini. Cont<sup>r</sup>. alia.

March 21. The catarrhal symptoms have nearly disappeared. Thinks she has more use of her hand, but it is still so weak she cannot hold a needle long.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

April 4. Continues to recover.

Cont<sup>r</sup>. remed.

April 18. For the last fourteen days has had some pain across the forehead. Bowels open. Tongue a little furred. Pulse 80, small and soft.

Omitt<sup>r</sup>. Ta. Iodini. Cont<sup>r</sup>. alia. Capiat Infus. Gentianæ Comp. ʒss. ter in die.

May 2. Is stronger and better. The para-



lytic parts recover faster since the weather has been warmer.

Cont<sup>r</sup>. remed.

May 16. Has recovered the use of the arm and hand so completely, that she thinks she can do without any more medicine. Has the perfect use of the right lower extremity, and says she can handle her needle pretty well.

Discharged cured.

---

## CASE VI.

The following case has been sent to me by Mr. Jowett, resident Medical Surgeon of Saint Mary's Hospital and Dispensary, who conducted the treatment.

### *Case of Paralysis of the left Arm and Leg.*

On Monday, October the 20th, 1823, Joseph Chadwick, aged 23 years, millwright, a stout muscular man, addicted to habits of intemperance, was admitted into St. Mary's Hospital, labouring under paralysis of the left side of the body, with pain in the right side of the head. At a subsequent period he stated, that in the beginning of October he caught cold by sleeping



in a water mill, where he was at work, and three days afterwards began to have pain in his head; this was followed the next day by "a stroke," which "took the use and feeling of the left arm and leg;" his feet were put into hot water, and the following day he was as well as usual, excepting a slight pain in the head, and he went to work. A fortnight afterwards (the day preceding his admission into the Hospital), he had two strokes. He was twice bled largely, without marked benefit—cupped in the neck—leeches on the temples, and blistered; the bowels were extremely difficult to move, and after other means had failed, elaterium had the desired effect. One week after his admission, the sensation and motion of the lower extremity began to return, and in another week he began to move the arm. The remedies employed were Blisters and Tartrate of Antimony Ointment.

December 1. He had been stationary more than a week; in walking he dragged the leg after him; the sensation of the arm was perfect, but the motions were very confined and powerless.

Dr. Manson prescribed fifteen drops of the Tincture of Iodine to be taken three times a day.



December 3. Could raise the arm higher. The dose was increased to twenty drops.

December 7. The general health was improved. He could elevate the arm to the full extent, but could not draw it backwards. He observed, that his limb was stronger, as he could now freely *move* a weight of 20lbs. which he only began to *lift* two days before.

December 10. Complains of soreness of the lower hip.

December 16. He could *swing* the weight freely.

December 25. He could grasp firmly, and pull strongly. His knee failed him a little. His motions were awkward, but not imperfect.

He was discharged January 15, 1824. His arm, he said, "was as strong as ever, and he never was better in his life."

---

## CASE VII.

Elizabeth Spooner, æt. 72, was admitted an In-Patient of the General Hospital, the 20th of January, 1824.



On Friday the 8th instant, was suddenly attacked with giddiness, when sitting, and on attempting to walk, found she had lost the use of the left half of the body, from the neck downwards. Has not entirely lost the sense of feeling on the left side, but it is much less in degree than in the right side of the body. Bowels generally costive. Is rather low and weak. Has lived in a cellar, in Tyler Street, for some years.

Capiat Mist. Purgantis, ʒiiss. omni mane.

January 23. Bowels are kept open by the Purging Mixture, which is ordered to be continued.

Fricentur partes affectæ Linimento Ammon, fort m. et h. s.

January 31. Can move the fingers of the left hand in a slight degree, but not the toes of the left foot. Bowels open.

Cont<sup>r</sup>. remed. Sumat Tæ. Iodini gutt. x. ter in die ex aqua.

February 11. She can move her fingers better, and raise the arm in a slight degree. Can not yet move the toes.

Cont<sup>r</sup>. remed.

February 18. Complains of twitchings on



the paralytic side, and has a sensation as if pins or needles were pricking her all over the same side. The sense of feeling appears nearly restored.

Capiat Tæ. Iodini gutt. xii. ter in die. Cont<sup>r</sup>.  
alia.

February 23. I find that on the 16th instant, she was very much troubled with twitchings and involuntary shaking of the left hand previous to its being in a great measure restored. She can now open and shut the hand freely, and raise it as high as the crown of her head. Has still some degree of a prickling sensation in the left arm and hand. The left inferior extremity is nearly in the same state as when she was admitted.

Capiat Tæ. Iodini gutt. x. ter in die. Cont<sup>r</sup>.  
alia.

March 13. Has had the perfect use of the left arm, for the last fourteen days; but complains of weakness in it, and for the last eight days has been able to raise the left leg a little, but cannot yet move the toes. When supported can walk a little. The paralytic foot is much colder than the sound one. The nurse has regularly applied warm flannels to it, and also to the leg. For about a week has taken



twelve drops of the Tincture of Iodine three times a day.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

March 22. Improves in walking, and gains strength in the arm and hand. Has numbness and a prickling sensation in the left lower extremity. Tincture of Iodine agrees.

Cont<sup>r</sup>. remed.

April 2. Has walked by herself for the last week, with the assistance of a stick.

Cont<sup>r</sup>. remed.

April 10. She improves very much in walking, and the prickling sensation is less troublesome. Complains of the left hand being weak.

Cont<sup>r</sup>. remed.

April 19. Continues gradually to recover the use of the paralytic parts.

Cont<sup>r</sup>. remed.

May 3. She can walk pretty well, and also use the left hand, but is still deficient in strength in the left side of the body. Returns home to-day, but is put on the Out-Patient list to have medicines.



May 14. Has walked to the Hospital from Tyler Street, distant about a mile, without any assistance. Complains of nothing but debility. Occasionally she has a little prickling pain in the extremities of the left side. Sleeps well. Appetite good. Bowels open by the pills.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

May 21. Complains of weakness in the left knee, but says that she improves in walking.

Cont<sup>r</sup>. remed.

June 4. Continues to improve.

Cont<sup>r</sup>. remed.

June 18. Complains of a little pain in the loins. Has walked from her home. Continues to recover.

Cont<sup>r</sup>. remed.

July 9. Complains of weakness in the left side of the body, but can walk very well, and grasp any thing firmly in the left hand; and the sense of feeling is perfectly restored.

Discharged cured.



## CASE VIII.

J. E. æt. 15, March 16, 1824. There are many scars at the upper part of the neck, and of the thyroid cartilage, in consequence of scrofulous ulcers having formerly occupied these parts. About last Whitsuntide, was seized with pain at the upper and back part of the neck, in so great a degree, that she could not stoop, but was obliged to crouch down, keeping the body and head perpendicular, when she wanted to take up any thing from the floor. It appears, that she continued in nearly the same state till about two months ago, when employed in cleaning a window on a cold day, she suddenly lost, in a considerable degree, the feeling and power of moving the extremities of the left side, and has made no progress in the way of improvement since that time, but thinks herself rather worse than better. She informs me, that soon after the sores healed, the pain in the back of the neck began. She still complains of pain in the same part, when the head is thrown backwards with a slight effort. There exists a considerable degree of tumefaction of the soft parts at the upper and back part of the neck, where she complains of pain, and the vertebra dentata appears larger than natural, and the spinous process more prominent than



usual. Can move the head forwards and backwards in a certain degree, but cannot rotate the head and atlas on the second vertebra, in any marked degree, but twists the whole body when she wishes to look to the right or left. Had a prickling and tingling sensation in the paralytic parts, about a month ago. Complains of general debility. Complexion fair. Face pale, but cheeks slightly florid. Muscles feel soft. Has never menstruated. Appetite moderate. Bowels regular. Walks very indifferently, and has so little use of the left hand, that she cannot take up the skirt of her gown with it. Has used no remedies for the paralytic affection.

*Capiat Magnesiae Sulphatis, ʒi. primo mane si tarda est alvus. Sumat Tæ. Iodini gutt. viii. ter in die ex aqua.*

This patient, at the end of a week, found herself sensibly better. The Tincture of Iodine was gradually increased, until the dose amounted, at the end of three weeks, to fifteen drops three times a day. At this time she had recovered considerable power over the paralytic limbs, and, at the end of six weeks, began to menstruate, which she has regularly done ever since.

August 5. Has continued to take fourteen or fifteen drops of the Tincture of Iodine up to



the present time, and can now walk two or three miles with a great deal of pleasure, and use the hand nearly as well as ever; but she says, that the extremities affected with Palsy, are still a little weak, and slightly numb. Her general health is very much improved, and she is a great deal stronger. The swelling at the upper and back part of the neck is nearly gone, and the patient was free from pain at the end of the first fortnight. The *vertebra dentata* is evidently enlarged in volume, and the atlas appears to have no motion upon it. I purpose continuing the Iodine a few weeks longer, as the patient is gradually improving.

---

### CASE IX.

Miss —, æt. 12, May 15, 1824. This patient, when about thirteen months old, had an apoplectic attack, in which she lay in a state of insensibility for nearly four days; and it appears, that she was so ill, that those about her could scarcely tell whether she was alive or not. About the end of the fourth day, she began to revive a little, and in course of three or four days was a good deal better, but it was discovered, that she had lost the use of the *left* side of the body, as high as the neck, and that the *right* eye lids were shut, without her being able to



open them. In about three weeks from the first attack, she could walk a little, when supported, and could make some use of the left arm, and raise the right eye lid pretty well. The left side still continued weak, and, in a certain degree, paralytic, but she became fat, and enjoyed tolerable good health, till she was seized with Scarlet Fever, when about seven years old, which weakened her very much, and particularly the left extremities, which still were, in some degree, paralytic, and did not grow so fast as those of the right side. She afterwards recovered her flesh, and became fat, but the left extremities still remained shorter than natural, and deficient in the sense of feeling and power of voluntary motion. About a month ago, began to have pain in the head and side, attended with some sickness at stomach, for which she was attended by a medical gentleman of this town, and was twice bled, &c. She informs me, that the paralytic affection had gradually been getting worse, for at least six months previous to the above attack, and that the bleedings, &c. have weakened her, and aggravated the paralytic complaint. She walks with difficulty, and has very little feeling or power of motion in the left arm. The left side is colder than the right, and the extremities are about an inch shorter than the corresponding extremities on the opposite side. Complains of pain in the neck in the day-time, and about the



middle of the dorsal spine when in bed. There is a considerable degree of anterior curvature of the spine in the neck, and a greater prominence of the first dorsal vertebra than natural. Neck shorter than usual. There is a slight degree of lateral curvature of the spine of the trunk of the body. She is troubled with twitchings in the muscles, and aching pains in the left side of the body. The mouth is drawn to the right side, in a certain degree. Is generally costive, and subject to pain in the bowels. Appetite very moderate.

Capiat Pilulæ Cambogiæ Comp. gr. x. h. s. et Tæ. Iodini gutt. vi. ter in die ex aqua.

May 16. Pills moved her twice. Twitchings and pains continue.

Cont<sup>r</sup>. remed. Fricetur Cervix Linimento Iodini omni nocte, h. s.

May 25. The left foot and ankle are a little oedematous towards night. Is troubled with griping, and a slight degree of tenesmus.

Sumat Tæ. Iodini gutt. viii. ter in die. Capiat Magnes. Sulph. ʒi. omni mane si tarda est alvus.

R̄ Ol. Juniperi..... ʒss.

Spir. Ætheris Nitrici..... ʒii.

Sacchari Purificati..... ʒii.

Aquæ..... ʒviii.

Misce, Fiat Mistura cujus sumat. ʒss. ter in die. Cont<sup>r</sup>. alia.



The Diuretic Mixture was continued about three weeks ; it increased the quantity of urine, and the oedema of the foot disappeared under its use. The other medicines were continued, without any material change in the dose, till the 26th of July last, when the sense of feeling and power of motion were almost completely restored, and she was sent to a boarding school, in the country, with directions to continue the medicines some time longer, to prevent a relapse.

---

REMARKS.—When this patient was in her best health, the motions of the body were very awkward, owing to the shortness of the extremity, and the paralytic state of the muscles, which obliged her to swing the left leg and foot circularly forward in progression, and to throw the trunk of the body into a very ungraceful posture, owing to the deficient length of the limb. Since she has been under my care, she has recovered the power over the muscles of the lower extremity, and is no longer obliged to swing it, but can walk on her tip-toe, so as to supply the deficiency in the length of the limb, and without any ungraceful motion of the body. This patient was sent, for a considerable length of time, to a dancing school, to be drilled out of her awkward motions, but to no purpose ; and this case shews, that a few grains of Iodine, by restoring muscular power, when that is deficient, is much more effectual in giving grace and ease in the various motions of the body, than all the efforts of the posture master.

I could detail several other cases of Hemiplegic Palsy, in which Iodine was employed with success ; but, I con-



ceive, that those already adduced are sufficient to shew the great efficacy of this new remedial agent in this species of Palsy, and that it will be more useful and instructive, before concluding the subject of Hemiplegic Palsy, briefly to notice two instances in which it was treated unsuccessfully, with the morbid appearances on dissection, than to occupy more space with the detail of too many cases of one species of Palsy, when others, equally interesting, remain to be noticed.

---

### CASE X.

Charles Battersby, æt. 62, frame-work knitter. Was admitted an In-Patient of the General Hospital, the 15th of October, 1822. About ten weeks ago, was seized, while at work in his frame, with violent pain in his head, and dizziness, which affected him so much, that he fell down, and was unable to stir, till he was assisted by some other men in the shop. Upon examination, it was found, that he had totally lost the use of the left superior and inferior extremities. His mouth was drawn to the right side, and he did not complain of pain when the paralytic parts were pricked with a needle; they retained nearly the natural temperature. He was bled both generally and topically, on the first attack, and the same operations have been repeated several times since. Blisters have been applied to the head, nape of the neck, and upper part of the affected arm. His bowels have been kept



open by purgatives, and he has taken a mixture, with *Extractum Elaterii* and *Acetum Colchici*, prescribed by me, on account of oedema of the paralytic extremities. He has generally taken five grains of the *Pil. Saponis cum Opio*, at bedtime, to procure rest. He continues much in the same state as when first attacked, except that his neck and mouth are not so much distorted, and the paralytic limbs are a little more sensible to the prick of a pin, but he cannot move them in the least degree, and they are becoming flabby. His general health is impaired, owing, most probably, to his living intemperately, till within the last two years; but his appetite is pretty good. Pulse 76. Bowels costive, without the use of medicine.

*Capiat Misturæ Purgantis ʒii. omni mane si opus sit. Sumat Tæ. Iodini gutt. xx. ter in die ex aqua, et Pil. Sapon. cum Opio gr. v. omni nocte, h. s.*

October 19. This morning he complains of great pain in the left upper and lower extremities, and has more feeling in them. Pulse 84, and firmer than it has yet been. Tongue slightly furred, and dry. Bowels moved two or three times daily, by the Purging Mixture. Complains of cough, and that he does not rest well.

*Sumat Tæ. Iodini gutt. x. ter in die. Contʳ.*



**Mistura Purgans. Omitt<sup>r</sup>. Pilul. Sapon. cum Opio.**

**October 23.** Still complains of a great deal of pain in the paralytic parts, but has not recovered the power of moving them in any degree.

**Cont<sup>r</sup>. Mist. Purg. Capiat Tæ. Iodini gutt. xv. ter in die.**

**October 31.** For three or four days has been able to move the left lower extremity, and has had less pain in it. The left arm is still paralytic, and the prickling pains continue as before.

**Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Mist. Purgans ut antea.**

**November 2.** Has more twitching and pain in the paralytic parts since the 31st ultimo, than hitherto. Has more feeling in them, and has been able, for the first time, to raise the left thigh to a right angle with the body. Has recovered no power over the left arm. Pulse 64, fuller and firmer than when admitted.

**Cont<sup>r</sup>. remed.**

**November 7.** Has rather more power in the left lower extremity, but the upper remains



in the same torpid state. He can now lie on the right side, and thinks himself better upon the whole.

Cont<sup>r</sup>. remed.

November 11. The left arm remains paralytic—has a good deal of pain in it. Complains of pain in the right side of the head. Pulse 68, and firm. Appetite very good.

Intermittatur Tæ. Iodini. Cont<sup>r</sup>. alia.

November 18. There is less pain in the paralytic limbs; but says that he is still a good deal twitched. Pulse 72, moderately full and firm. Appetite good. A Blister, of an oblong form, directed to be applied to the left side of the neck and left shoulder.

Cont<sup>r</sup>. Mist. Purgans.

November 23. Says he feels better.

Repet<sup>r</sup>. Tæ. Iodini ad gutt. xv. ter in die.  
Cont<sup>r</sup>. alia.

November 30. For two or three days has had more feeling in the left arm, when the skin was pinched. The twitchings are less troublesome. Has not slept well of late, but last night he rested well.

Cont<sup>r</sup>. remed.



December 7. He complains of a considerable degree of pain and twitching in the left arm.

Intermittatur Ta. Iodini. Cont<sup>r</sup>. Mistura Purgans.

December 9. The pain and spasmodic twitchings have been so severe during the night, as to deprive him of sleep. Labours under shortness of breath, and some degree of mucus rattle. Pulse 96, full and firm, inclining to hard.

Mittatur Sanguis e brachio ad  $\text{z}$ xii. Sumat Mist. Antimonialis Comp.  $\text{z}$ ss. ter in die. Cont<sup>r</sup>. Mist. Purgans, p. r. n.

This man died the following day, in the evening, but, by some over-sight, the particular circumstances attending his death have not been inserted in the Journal. Mr. Eddison, one of the Hospital pupils, informs me, that the patient died suddenly when on the close stool, to which he was assisted by one of the men in the same ward.

#### *Sectio Cadaveris.*

The body was examined about twenty-two hours after death. Mr. Beveridge, House Surgeon and Apothecary, opened the body. Mr.



Jowett, Surgeon, Messrs. White and Eddison, Hospital Apprentices, and myself, were present at the dissection. The left arm slightly oedematous. Some serous effusion in both cavities of the chest, and also in the pericardium. The heart was larger than natural; the parietes of the left ventricle were considerably thicker and firmer than usual; the columnæ carneæ of the left ventricle were also larger and denser than natural; the right ventricle of the heart, and its columnæ carneæ, were also thicker and firmer than usual, but not in so great a degree as on the left side of the heart. The valves of the heart were sound.

A small quantity of serous fluid escaped when the dura mater was divided, and after the brain was removed, some serous fluid was discharged from the spinal canal.

The ventricles of the brain were distended with a serous fluid, that in the right lateral ventricle was of a whitish cream colour, owing to the brain being softened down to nearly the consistence of thick cream, a portion of which had blended with the serous fluid effused in the ventricle.

After removing the fluid with a sponge, about two-thirds of the posterior part of the right cor-



pus striatum were found either broken down to the consistence of cream, or in a very soft and pulpy state.

A considerable portion of the middle lobe of the brain on the right side, adjoining to the corpus striatum, was also in a soft and pulpy state, but not broken down. The rest of the brain appeared to be in a sound state.

---

REMARKS.—This case corresponds with what is usually observed, viz. :—Palsy existing on the opposite side of the body to that on which the brain is diseased.

I cannot help thinking, that the hypertrophy of the heart in this case, must have had a principal share in causing disorganization of the brain, and, consequently in inducing Palsy. And it is more than probable, that the stimulating powers of ale, and other inebriating fluids, indulged in to excess by this patient, originally brought on the hypertrophy of the heart, and supported it when formed. The partial return of the power of motion in the left lower extremity, and the twitching and pain in the left arm, with a small degree of improvement in the sense of feeling, which occurred in this case, shew the power of Iodine in stimulating the nervous system ; the patient himself was so sensible of its effects, that he requested me not to give him any more of the drops (meaning the Tincture of Iodine), as they were like to twitch him out of bed ; but, with so extensive a disorganization of the brain, no medicine, however potent, could be expected to accomplish a cure. My opinion, from the first (as expressed to Mr. Beveridge, under whose care he originally came), was, that the disease was incurable ; but, as the patient lived longer than there was any



reason, at first, to expect, I thought it but right to give him the chance of any benefit that might result from the use of Iodine, which, if it has failed in removing an incurable disease, has, nevertheless, shewn great power in exciting the nervous system.

---

### CASE XI.

Hannah Broadhead, æt. 28, married. Lives in Platt Street. Admitted an Out-Patient of the General Hospital, the 11th of March, 1823. Three days ago had a paralytic stroke, which deprived her of the use of the right half of the body, and of the power of speech. She is so helpless, that she cannot turn herself in bed, and passes her stools and urine involuntarily. Has had pain in the forehead for upwards of two years, which her husband considered as the sick head-ache, as she never made any general complaint of illness. Has been bled in the arm, and leeches, but without much benefit. Bowels open by medicine at present, but is subject to costiveness.

Appl<sup>r</sup>. hirudines xii. temporibus. Capiat Pil. Calomel, gr. v. statim et post horas tres habeat Misturæ Purgantis ʒii. tertia quaque hora donec plene soluta est alvus. Repet<sup>r</sup>. Mist. Purg. omni mane si opus sit.

March 14. Her husband reports, that she



can articulate some words. Bowels open, but stools dark, and very offensive. Has no power over the paralytic extremities.

Cont<sup>r</sup>. remed.

March 21. Can speak a little better, but has gained no feeling or power of motion in the right extremities.

Capiat Misturæ Purgantis, ℥ii. omni mane et Tæ. Iodini gutt. xv. ter in die ex aqua.

March 29. Paralytic symptoms as before, except that she improves a little in speaking. Stools of a yellowish colour, and less offensive.

Cont<sup>r</sup>. Mist. Purgans. Sumat Tæ. Iodini gutt. xx. ter in die.

April 3. Was admitted an In-Patient of the Hospital, on the 1st of April. Is better. Sits up, and begins to walk with the assistance of a person to support her. Has two or three motions every day. She improves in speaking.

Cont<sup>r</sup>. remed.

April 7. With the assistance of one person she makes a slow progression by sliding the right foot along the floor, and then stepping forward with the other. She complains of pain in the left brow and temples. Bowels open.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirudines vi. temporibus.



April 12. She can walk without assistance or support of any kind, but still slides the right foot in walking, instead of raising it. I find she has not taken the Tincture of Iodine since she came into the Hospital.

Sumat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>.  
Mist. Purgans.

April 16. Has improved in walking since last report, and can raise the right foot tolerably well. Begins to move the paralytic arm a little. Can speak short sentences now, so as to be understood.

Cont<sup>r</sup>. remed.

April 23. Walks better. Can raise the right fore arm to a right angle with the os humeri. Speaks better.

Capiat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>.  
Mistura Purgans.

April 30. Continues to recover.

Cont<sup>r</sup>. remed.

May 5. She often sheds tears, appears in low spirits, and wishes to return home, but her husband wishes her to remain a little longer in the Hospital.

Cont<sup>r</sup>. remed.



May 10. Much in the same state.

Cont<sup>r</sup>. remed.

May 24. Can raise the paralytic hand nearly as high as her chin. Walks no better for the last fortnight.

Cont<sup>r</sup>. remed.

June 2. The paralytic parts have been twice electrified (by sparking), since last report, and the operation is repeated every second day. Can raise the right hand as high as her chin.

Cont<sup>r</sup>. remed.

June 14. Continues to improve in walking, and articulates better, and with more facility.

Cont<sup>r</sup>. remed.

July 4. Left the Hospital the 24th of June, and was put on the Out-Patient list. Her husband reports, that she is nearly in the same state as when she left the house. Electricity discontinued.

Cont<sup>r</sup>. remed.

July 18. A female friend reports, that she had a fit that lasted nearly three quarters of an hour, on Monday the 14th instant. Was greatly convulsed—lost a good deal of blood by the



mouth—tongue not wounded—stuffed in the chest, and said to be troubled with phlegm. I find that this woman has been subject to epileptic fits for some time.

Omitt<sup>r</sup>. Ta. Iodini. Sumat Mist. Antimonialis Comp.  $\text{ʒss}$ . ter in die; et Magnesiæ Sulphatis  $\text{ʒss}$  primo mane si tarda est alvus.

July 25. Has nearly recovered from the effects of the fit.

Cont<sup>r</sup>. remed.

August 8. Said to have a little more power in the arm. Antimonial Mixture omitted, and begins to take fifteen drops of the Tincture of Iodine, three times a day.

August 22. Reported to have more pain, and rather more feeling, in the paralytic arm. More costive since she has taken the Iodine. Sulphate of Magnesia to be taken when necessary. Iodine continued.

August 29. Had three epileptic fits yesterday. Was bled to  $\text{ʒxii}$ . by my desire. Iodine omitted. Salts continued, and was desired to take thirty drops of the Tincture of Colchicum, thrice a day.

September 19. Her husband reports that



she is better. No return of the fits for a week. Can move the arm a little better. Bowels open. Salts, and the Tincture of Colchicum, continued.

October 10. Has had three fits this week. Bowels open. Tincture of Colchicum omitted. Epsom Salts continued.

November 7. Had a fit on the 1st instant. Was bled from the arm to 3x. with advantage. Was costive for two days previous to the fit. I may observe, that this patient has been badly nursed since she left the Hospital. Epsom Salts continued.

November 21. Can walk better—as a proof of it, she has come from her dwelling, distant nearly a mile, on foot. She can raise the right hand to her chin, but cannot move the fingers. Articulates better. Bowels open by Epsom Salts.

Cont<sup>r</sup>. Magnes. Sulph. p. r. n. Capiat Tæ. Iodini gutt. xv. ter in die.

This patient did not come again to the Hospital, and was discharged for non-attendance. She afterwards fell into the hands of an unfeeling quack, who made her drunk to render her insensible to the brutal pullings and contusions which he made the poor



creature undergo. It is said she remained in a comatose state for three or four days, and was afterwards sent to St. Mary's Hospital, the 28th of March, 1824, when I had an opportunity of seeing her. When admitted, she had no use of the right side of the body—passed her stools and urine in bed—and could only answer questions by yes or no, in a whispering accent. She lingered for two months in the same miserable state, and died on the 24th of May, 1824.

*Sectio Cadaveris.*

The body was examined on the 26th of May, by Mr. Jowett, Surgeon, in the presence of his brother, Mr. Smith (an Artist), and myself.

The lungs sound. The convex surface of the liver adhered very extensively to the under surface of the diaphragm, probably, in consequence of inflammation, induced by the contusions she is said to have received from the quack, in the region of the liver, during his operations.

A little serous fluid, tinged red, escaped from the cranium when that was sawn through. No particular congestion in the vessels of the dura mater, but there was an evident depression and unnatural softness to the touch in the upper



part of the left hemisphere of the brain, opposite the coronal suture. After removing the dura mater, a thin effusion of coagulated lymph, of a pearly colour, was here and there observed deposited on the pia mater, as seen through the arachnoid membrane.

On cutting into the left hemisphere of the brain, where it was depressed and soft, a watery fluid escaped from the brain, which was in a soft spongy state, and communicated with the left lateral ventricle, which was greatly enlarged, and full of a clear serous fluid, as was also the right lateral ventricle. The left hemisphere of the brain, in the middle and upper parts, containing the serous fluid, was of a softer consistence than the sound brain, and of a tawny yellow colour. When this morbid part of the brain was cut with the scalpel, it presented a resistance to the knife like that felt when sponge or a roll of fine tow is attempted to be cut, but in a much less degree. When a slice of this diseased portion of the brain was pulled asunder with the fingers, it felt much tougher than a slice of brain from the opposite and sound hemisphere of the same organ.

On opening the ventricles, the *left* corpus striatum was found greatly wasted and softened, and the brain of the same hemisphere adjoining,



was softer than natural, and approaching to the pulpy state. The right corpus striatum did not appear diseased to the eye, but when scraped with the scalpel, felt rather softer than natural, and afforded a fine opportunity of seeing the white medullary bands that pass through that part of the brain, when the cineritious matter is scraped off.

---

*Paralysis Partialis, or Local Palsy.*

---

Under this head I purpose to report a few cases of Palsy, in which only one limb, or a smaller portion of the body was affected, and in which Iodine was employed as the principal remedy.

**CASE I.**

Wm. Homer, æt. 13, from Kelk's Yard, Barker Gate, Nottingham. Admitted an Out-Patient of the General Hospital, June 11th, 1822. Is of a slender make, and delicate constitution. There is a scrofulous ulcer before the lobe of the right ear. There is also a chain-like series of red, tubercular, and scaly spots in the skin, across the throat, from the lobe of one ear to that of the other, of a scrofulous character. The left eye lids are half closed, in consequence of swelling and in-



inflammation of the left lachrymal sac ; the left cheek is generally moistened with the tears, and a purulent looking matter, that cannot find a passage into the nose, owing to the obstruction of the nasal duct : this affection has been of considerable standing. For the last six weeks, has had no use of the right arm, which hangs powerless by his side, and without feeling. He says that he became pale, and had a fainting fit, which lasted half an hour, before he began to come to himself, and when he recovered he found his right arm as above described. He also informs me, that about twelve months ago, he recovered the use of the lower extremities, which he lost in the following order :—First, he lost the power over the left lower extremity, and two months afterwards he also lost the use of the right lower extremity, and after three months had elapsed, he began to recover the use of both the lower extremities, and can now walk very well.

The paralytic affection of the right arm has taken place since he recovered the use of the inferior extremities. Appetite moderate. Bowels open. Tongue whitish. Hair brown, inclining to red. Iris dark brown. Labours under a slight degree of Ichthyosis Simplex, in the arms, legs, and body.

Capiat Mist. Purg. ʒiss. omni mane et Tæ. Iodini gutt. xii. ter in die ex aquæ cyatho parvo.



June 14. The Tincture of Iodine makes him sick. The leprous-looking eruption under the lower jaw appears better. Is purged two or three times daily. Carries the paralytic arm in a sling. Is desired to leave it off, and to swing the arm about with the other hand by way of exercise.

Instillentur guttæ iv. Vini Opii in oculo sinistro m. et h. s. Curetur ulcus Cerato Cetacei. Cont<sup>r</sup>. Ta. Iodini et Mist. Purgans.

June 21. The ulcer discharges more.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

June 28. On the whole better. Ulcer discharges freely.

Cont<sup>r</sup>. remed.

July 5. Ulcer smaller, and the scales begin to fall off the diseased skin. Can move the fingers of the right hand a little. General health improves, and feels stronger. The lachrymal sac has not yet burst, but a small yellow point is to be seen in the most prominent part of it.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. alia.

July 12. No increase of power or feeling in



the right arm since last report. The ulcer continues to heal, and the skin that was tuberculated and scaly, is become smoother and more healthy in appearance. The lachrymal sac has not burst, and is not increased in size.

Capiat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. alia.

July 17. Has more feeling in the arm, and can move it and the fingers much better than on the 5th instant. The ulcer discharges a little. The lachrymal sac has subsided considerably, without bursting. The morbid skin of the throat is gradually recovering the natural colour.

Capiat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>. alia.

July 26. Can open and close the right hand, and move the whole arm much better. Ulcer nearly healed. The lachrymal sac burst four days ago, and discharged a small quantity of thick yellow matter, the sac is much smaller, and the morbid hardness is going off, the opening through which the abscess was discharged, has healed completely. His general health is much improved.

Cont<sup>r</sup>. remed.

August 2. He continues to recover the use



of the paralytic arm, and to improve in every way. Pulse 96, and of moderate strength. Tongue clean.

Capiat Tæ. Iodini gutt. xxxv. ter in die.  
Cont<sup>r</sup>. alia.

August 9. Arm daily increases in strength; cannot yet write with the right hand, but it improves rapidly.

Cont<sup>r</sup> remed.

August 16. Is much better in every respect. Has written his name with the right hand at the bottom of the twenty-ninth page of the journal containing his case; the letters are remarkably clear, and well formed, and equal to what he used to make in his best health. Pulse 84.

Cont<sup>r</sup>. remed.

August 23. Has as complete power over the right arm and hand as he ever had, and retains the perfect use of the other extremities. There is a slight degree of hardness in the site of the lachrymal sac, the ducts are pervious to the tears, and the cheek is quite dry. The skin of the throat is still rather red, and here and there rough from a few adhering scales. The patient says, that he has not been so well as he is now for the last six years, and he informs me, that



it was a typhus fever that first occasioned his ill health.

Cont<sup>r</sup>. remed.

September 20. The paralytic symptoms have not returned in the least degree, and the arm is strong; the hardness in the site of the lachrymal gland is almost gone, and the nasal duct remains pervious. Ulcer quite healed. There is still some hardness and scaliness of the skin of the throat, but they occasion no uneasiness. Has taken the Iodine up to the present time, without any inconvenience whatever, and with marked benefit in the cure of the paralytic and scrofulous affections, and also in removing the disease of the lachrymal passages. Upon the latter disease, and scrofula, I shall add no more at present, it being my intention to notice them more particularly in a subsequent part of this work.

Discharged cured.

---

This patient has had no return of Palsy up to August 20th, 1824.



## CASE II.

*Paralysis of the Muscles of the Right Side of the Face.*

Sarah Smith, æt. 19, of Ilkeston, February 15th, 1823. Labours under paralysis of the muscles of the right side of the face ; her mouth is considerably drawn towards the left side, and still more so when she smiles ; the right eye is then more contracted than the left. Ascribes the paralytic affection to exposure to cold, after being very much heated by the steam of the wash tub. The paralytic symptoms were observed the morning after she had been washing, and exposed to cold. Bowels are generally tardy. In other respects she is quite well.

This young woman was directed to take Aperient Pills, and the Sulphate of Magnesia, to keep the bowels open ; to foment the right side of the face occasionally, and afterwards to rub it with the strong Volatile Liniment. She was also directed to take fifteen drops of the Tincture of Iodine, three times a day, in a glass of water. For some time she took twenty drops of the Tincture of Iodine, three times a



day. This patient was discharged cured the 6th of September following.

---

REMARKS.—I find, from my Journal, that this patient called on me seven times, and that during the above period, the Tincture of Iodine was omitted for at least two months. From the long continuance of the paralytic affection in this instance, it is impossible to determine with any degree of certainty, the respective share that nature or art may have had in accomplishing a cure; but candour requires me to state, that the Tincture of Iodine did not appear to me to have any *marked* effect in this case, although it perfectly agreed with the patient. If I had the case to treat over again, I would use the Iodine Liniment in preference to that employed.

---

### CASE III.

*Loss of Speech, and general Debility from Paralysis.*

Mary Homer, æt. 7, Kelk's Yard, admitted an Out-Patient of the General Hospital, the 11th of March, 1823. About three weeks ago had an attack of apoplexy, from which she recovered, and after a week had elapsed, she had another fit of apoplexy, which left her in a very weak state, with the entire loss of the powers of speech. She can walk a little when supported, but takes very short steps. Her head is of an unusual figure, but it has been so from her birth.



Points to the right side of the head, as being the site of pain.

I was requested to see her on the 18th of February last, and directed her to be bled from the arm, as her parents could not afford to buy leeches, which I otherwise would have preferred. Three grains of calomel were ordered to be taken at bed-time, and  $\text{ʒii.}$  of the Sulphate of Magnesia in the morning, when necessary, to keep the bowels open. Her father informs me, that she can now articulate some words. Bowels open. Stools not of a dark colour, or particularly offensive. Her feet are generally cold.

R Hydrag. Submur.....gr. xviii.

Pulv. Tragacanthæ C..... ʒi.

Tere simul et divide it pulveres, vi.; habeat, i. omni nocte ex syrupo.

Sumat Misturæ Purgantis, ʒi. mane si tarda est alvus.

Applicentur hirudines, iv. parti capitis dolenti.

Imponatur Emplastrum Cantharidis, nuchæ, h. s.

March 14. Her brother reports that the leech bites bled well, and that the blister rose, but not very well. He also reports, that she is generally best in the morning, but looks very wild in the evening, and puts down her head, and endeavours to stand upon it. Does not yet



speaking. Is moved thrice a day by the Purging Mixture.

Appl<sup>r</sup>. hirud. iv. temporibus. Cont<sup>r</sup>. Mist. Purgans. Sumat Tæ. Iodini gutt. vi. ter in die ex aqua.

March 21. Can walk better, and speak pretty well now, except some words that she articulates indistinctly. Bowels opened twice or thrice a day. Appetite not so voracious as it was some time ago.

Sumat Tæ. Iodini gutt. viii. ter in die. Cont<sup>r</sup>. Mist. Purgans.

March 29. Has so far recovered that she has walked to the Hospital, from her home, distant about a mile. Squints a little at times. Her brother says, that she has done so for three years. Is still weak in the lower extremities. Pulse 96, and small. Face less pale. Countenance more animated.

Cont<sup>r</sup>. remed.

April 4. Her brother reports that she was very dull on Sunday morning last, and sat quite still, at the time she experienced pain in the right side of the head, near the middle of the parietal bone. About one o'clock the same day, the pain left her, and has not since returned. Countenance natural. Pupils of the usual



size, and does not squint this morning. Two stools daily. Walks pretty well, but still makes very short steps. Pulse 120, and of moderate strength.

Appl<sup>r</sup>. hirudines, iv. tempori dextro. Cont<sup>r</sup>. alia.

April 11. Can walk very well, and step out freely. Does not squint at present, but still does so at times. Bowels open, and stools natural. Tongue clean. No head-ache since the leeches were applied last week. Pulse 104, and of moderate strength. No thirst.

Cont<sup>r</sup>. remed.

April 18. Continues to walk very well, and feels nothing amiss, and can eat, drink, and sleep very well. Has perfectly recovered the power of speech.

Cont<sup>r</sup>. Ta. Iodini et Mistura Purgans, p. r. n.

April 25. Feels very well.

Discharged cured.



## CASE IV.

*Paralysis of the Right Arm and Hand.*

John Boam, æt. 78, Shoe-maker, Warser Gate, Nottingham. Was admitted an Out-Patient of the General Hospital, of this town, on Tuesday the 1st of April, 1823. He says, that on Sunday last, in the afternoon, when reading, he suddenly lost the power, in a great degree, of moving the right arm and hand; at present he cannot hold any thing in his hand so as to use it, which is a great loss to the poor man, as he has still to earn a living by mending shoes. The sense of feeling is also very much diminished in the right arm and hand since the paralytic attack. Has the perfect use and sense of feeling in the right lower extremity, and in all the other parts of the body. Has previously enjoyed very good health, and been a very regular steady man. Tongue furred. Pulse 84, and of moderate strength. Appetite not amiss.

Sumat Misturæ Purgantis ʒi. omni mane.  
 Applr. hirudines vi. temporibus. Imponatur  
 Emp. Lyttæ nuchæ, h. s.

April 25. After having had leeches twice applied, and the use of Nitric Acid, very much



diluted, taken internally, and the daily use of the Purging Mixture, so as to keep the bowels open, it is stated in the Hospital Journal, that he had more use of his hand, and could hold a knife so as to cut a little meat and bread with it. On the 2d of May his arm felt heavier, and he had had less power in the hand for three days, although the weather had become warmer. The Nitric Acid was omitted, and he was ordered to take fifteen drops of the Tincture of Iodine, in water, three times a day, and to take the Purging Mixture, so as to keep the body freely open. In course of seven days he experienced a marked improvement from the use of the Iodine. On the 16th of May he reported, that he had more feeling and power of using the arm and hand.

Cont<sup>r</sup>. remed.

May 23. Not so well—arm feels heavier, and cannot use his hand so well. He ascribes his being worse to vicissitudes in the weather. Bowels open.

Cont<sup>r</sup>. remed.

May 30. Much in the same state as at last report.

Capiat Tæ. Iodini gutt. xx. ter in die.

June 6. Is not able to take twenty drops,



says they cause his stomach to burn, and produce flying pains all over him.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>.  
Mist. Purg. p. r. n.

June 13. For a few days past has been able to take twenty drops of the Tincture of Iodine. Is troubled with more twitching and pain in the paralytic parts, but thinks the pain has been aggravated by swinging a weight of seven pounds.

Capiat Tæ. Iodini gutt xx. ter in die.

July 4. Has gradually been improving since last report, but has been better and worse on particular days, according to the state of the weather. Is now so far recovered, that he has been able to work a little at his trade for the last five days. His hand is still weak, and trembles.

Cont<sup>r</sup>. remed.

July 25. Has been in the country by my recommendation, and finds himself much better.

Cont<sup>r</sup>. remed.

August 8th and August 22d. Continues to recover.

Cont<sup>r</sup>. remed.



September 5. Much better, and says he can now follow his trade in moderation. Is very thankful for the benefit he has received.

Cont<sup>r</sup>. remed.

October 3. Has so far recovered, that he can work at his trade from morning to night; but the arm and hand are not yet so strong as they were previous to the paralytic seizure.

Discharged cured.

## CASE V.

*Paralysis of the Muscles of the back of the Neck,  
and upper and back part of the Trunk.*

Joseph Dunk, æt. 41, frame-work knitter, from Blackwell, Derbyshire. Admitted an In-Patient of the General Hospital the 24th of June, 1823. He informs me, that for four months he has laboured under "stiffness and fastness" in the muscles of the posterior part of the body, from the union of the neck with the head, as far down as the middle of the back; and, he further says, that the parts affected have a "numb feel." Has not been able to work for the last four months. Can assign no cause



for his complaint, but exposure to cold, which, on one occasion, made his "teeth chatter in his head." Has had medical assistance in his neighbourhood, and been twice or thrice bled from the arm, once leeches, and twice blistered, &c. but without any benefit. His general health appears pretty good. Bowels tardy at times. Tongue clean. Pulse 96, and soft.

Capiat Mist. Purgantis  $\text{ziss}$ . omni mane. Imponatur Emp. Cantharidis parti posteriori capitis et cervicis, h. s. Sumat Tæ. Iodini gutt xv. ter in die ex aqua.

June 25. The Purging Mixture has only moved him once.

Capiat Misturæ Purgantis  $\text{zii}$ . omni mane. Cont<sup>r</sup>. Ta. Iodini.

July 1. Bowels sufficiently open by the use of the Purging Mixture. Feels better.

Cont<sup>r</sup>. remed.

July 3. Neck not so stiff, and has more feeling in the parts affected.

Cont<sup>r</sup>. remed.

July 10. Has nearly recovered the proper feeling in the parts affected, and they are much less stiff. Says he feels better generally.

Cont<sup>r</sup>. remed.



July 16. Complains chiefly of stiffness in the left side of the neck.

Capiat Tæ. Iodini gutt. xx. ter in die et Mist. Purg. 3ii. m. p. r. n.

July 19. Still complains of some stiffness in the left side of the neck.

Hora somni Appl<sup>r</sup>. Emp. Cantharidis parti cervicis posteriori. Cont<sup>r</sup>. alia.

July 28. Neck is almost free from stiffness. Cont<sup>r</sup>. remed.

August 4. Continues to improve.

Cont<sup>r</sup>. remed. Utatur Balneo ad gradum 96, ter in Septimana.

August 12. Discharged cured.

---

## CASE VI.

*Paralysis of the Muscles of the Left Side of the Face treated successfully without the use of Iodine.*

Mr. —, æt. 37, guard of a coach. Tuesday, October 21st, 1823. Has been troubled with more or less head-ache, for several weeks. Is subject to costiveness. For four or five days



has not been able to blow the horn. On Saturday last, he first observed that his mouth was drawn to the right side, and he can spit only out of the left side of his mouth. The left side of his face is very stiff and numb. Both eyes inflamed, and *particularly the left*, the tunica conjunctiva of which is quite red, from vessels filled with blood; and he cannot shut the left eye-lids. Face flushed. Is a robust corpulent man, five feet six inches high—neck short—pulse 80, full and very firm. I had him bled immediately, to 42 ounces (avoirdupois), which occasioned a slight degree of syncope, paleness of the face, and the total disappearance of the redness in the eyes.

R Infusi Sennæ ..... ʒvii.

Tæ. Jalapæ ..... ʒii.

Magnes. Sulphatis ..... ʒi.

Misce, fiat Mistura cujus capiat ʒii. quartis horis donec quotidie plene soluta est alvus.

Hora viii. P. M. Feels lighter and better—some giddiness. Pulse 84, and much smaller and softer. Purging Mixture has not yet operated.

Pergat in usu Misturæ Purgantis.

October 22. Has had a good night. Was purged at bed-time, once in the middle of the night, and again this morning. There is very



little redness of the eyes. Pulse 88, and of moderate strength.

Cont<sup>r</sup>. Mist. Purgans, p. r. n. mane. Appl<sup>r</sup>. hirud. xii. temporibus hora, iii. P. M.

October 23. The leeches bled well. Took a powder, with Calomel and Jalap, last night, which operated three times in the night. Eye-lids oedematous from the leech bites. Mouth less drawn to the right side—speaks better—says he has “more use of his mouth.” Pulse 84, and firm, but in a much less degree than before the bleeding. Is quite free from pain, and sense of weight in the head. Complains of some stiffness at the back of the neck.

Capiat statim Mist. Purg.  $\text{z}\text{ii}$ . Repet<sup>r</sup>. Pulv. Jalapæ cum Calomelane, h. s.

October 24. Is freely purged. Cannot blow but out of the left angle of the mouth.

Cont<sup>r</sup>. Mist. Purgans omni mane et Pulv. Jalapæ cum Calomelane omni nocte, h. s.

Appl<sup>r</sup>. Emp. Cantharidis parti cervicis posteriori, h. s.

October 25. Blister has risen well. Twice purged by the medicines. Gums begin to be swelled and sore, from taking the Calomel.

Omitt<sup>r</sup>. Pulv. Aper. Sumat Pil. Cambogiæ



C. gr. xv. omni nocte, h. s. et Mist. Purg. ʒii.  
mane si opus sit.

October 30. Continues to improve. His mouth is less drawn to the right side. Complains of some flying pain near the left ear. Bowels open. Pulse 84, fuller and firmer than it was two days ago.

Cont<sup>r</sup>. Pilæ. Cambogiæ C. h. s. et Mist. Purg. mane. Mittatur Sanguis e brachio ad ʒxii.

October 31. Feels much better since he has been bled. Pulse 84, and soft. Bowels freely open. Cont<sup>r</sup>. remed.

November 1. His mouth is very little drawn to the right side. The left eye waters less. Bowels open by the Purging Medicines.

Cont<sup>r</sup>. remed.

November 12. Has been absent a week. Yesterday he began to have a prickling and painful shooting sensation in the left side of the face, and upper part of the neck. Has more use of his mouth and cheek in manducation. Pulse soft.

Cont<sup>r</sup> remed.

In less than a week after the last report, by



continuing the purgative medicines, the paralytic symptoms had nearly disappeared, and the patient returned to his former employment, with an admonition to live more abstemiously and temperately for the future, and to keep his bowels always open.

---

REMARKS.—This case may be thought superfluous, and improperly introduced here, as no Iodine was exhibited in its cure. My reason for publishing it along with the other cases of Local Palsy, treated with Iodine, is to impress on the minds of junior practitioners, into whose hands these Researches may fall, that I do not *indiscriminately* employ and recommend Iodine for the cure of Palsy. In a case like the present, when plethora of the whole system existed in so great a degree, attended with a full strong pulse, morbid determination to the head, and congestion in consequence, to have exhibited a powerful stimulating medicine, such as I know Iodine to be, without previous depletion, would have been sealing the death warrant of the patient, by inducing Apoplexy, or incurable Palsy, which is more to be deprecated than even death itself. If the paralytic symptoms had continued after reducing the fulness and vigour of the system, by bleeding, purging, and low living, &c. I most probably should have exhibited the Tincture of Iodine internally, in small doses at first, watching its effects on the system; and if any considerable degree of excitement appeared to arise in consequence, I either should have discontinued its use for a time, or have employed general or topical bleeding to counteract the stimulant effects of the remedy. I beg to observe, that vigilance is necessary to obviate or remove any inflammatory disposition that may arise during its exhibition, even in the more chronic forms of



Palsy; and, generally speaking, the safer plan will be to suspend the use of the Iodine until the inflammatory disposition shall have been completely removed by such means as the circumstances of the case may require. I may remark, that I have occasionally found Iodine, on its first exhibition, when the dose was too large, to increase the volume of a Bronchocele, owing to the stimulant effects of the medicine on the system being too great; and after topical bleeding by leeches, the free use of saline purgatives, &c. and suspending the use of the Iodine for a few days, that the cure has afterwards proceeded without interruption, on exhibiting a *smaller dose*, which must gradually be increased, *if necessary*, according to its effects.

---

I HAVE now concluded what I had to report respecting the effects of Iodine as a remedy in Local Palsy. With respect to that variety of Palsy called Shaking Palsy, I have treated only about four cases of it with Iodine; and, except in one instance, without any marked advantage.—One of the cases was the most severe I ever witnessed, and no means that I could devise had the least beneficial effect; I shall, therefore, add nothing more, at present, respecting this species of palsy, but reserve it as a subject for future inquiry.

I hasten to finish the detail of cases, by relating the only case of Palsy occasioned by Lead that has occurred in my practice since I have employed Iodine as a remedial agent. I am aware that no accurate conclusion can be drawn respecting the medical powers of any substance, from a solitary instance of its beneficial agency, however marked that may have been; but, taking all the facts that have been already detailed respecting the effects of Iodine in Bronchocele, and in the other species of Palsy already enumerated, as well as the facts that I have still to detail



respecting the medical powers of Iodine in other diseases, I cannot help anticipating the most favourable result from the *judicious* exhibition of this substance, in cases of Paralysis from Lead.

---

*“ Paralysis (venenata), a potentiis sedantibus  
externe vel interne adhibitis.”*

---

*Case of Paralysis of the superior Extremities, from  
Lead, introduced into the Body.*

William Best, æt. 28, house painter, from East Retford. Was admitted an In-Patient of the General Hospital, the 26th of February, 1822. Has nearly lost the feeling and use of his hands and upper extremities. The right hand began to be affected with weakness, impaired feeling, and diminished power of moving it, about twelve months since, and has gradually been getting worse, so that now he cannot dress and undress himself. The left arm and hand began, six months ago, to be affected in a similar manner to the right, and he thinks it is equally paralytic. The lower extremities, he says, are as well as ever. Has been under medical treatment without benefit. He informs me, that he has had several attacks of Colica Pictonum, but that he is pretty well in his bowels,



at present. No pain in the arms. Pulse 80, and soft. Tongue furred.

Capiat Misturæ Purgantis ℥ii. omni mane si tarda est alvus. Sumat Tæ. Iodini gutt. xx. ter in die ex aquæ cyatho.

February 28. He is nearly in the same state. The Purging Mixture moves him twice a day.

Cont<sup>r</sup>. Mistura Purg. Capiat Tæ. Iodini gutt. xxv. ter in die.

March 2. Thinks he can grasp any thing better than he could when admitted. Bowels open by ℥iss. of the Purging Mixture taken every morning.

Cont<sup>r</sup>. Mist. Purg. Sumat Tæ. Iodini gutt. xxx. ter in die.

March 9. Can move his hands better. Bowels open.

Cont<sup>r</sup>. remed.

March 13. Continues to recover the use of his hands. When admitted he could not wash his face with them; now he can assist in dressing himself.

Cont<sup>r</sup>. remed.

March 18. He gradually recovers the feeling,



and improves in moving his hands and arms. Can dress himself now without much difficulty. For two days past has taken thirty-five drops of the Tincture for a dose. Bowels open. Appetite good.

Cont<sup>r</sup>. Mist. Purgans p. r. n. Capiat Tæ. Iodini gutt. xl. ter in die.

March 28. Continues to recover the use of his hands.

March 30. Is better. He begins to rub the great mortar, in the Apothecary's shop, by way of exercising his hands.

Cont<sup>r</sup>. remed.

April 8. The left hand and wrist are stronger. The right wrist is still weak, and does not recover strength so fast as the other parts.

Cont<sup>r</sup>. remed.

April 20. General health very good, and has gained both flesh and strength since he has been in the Hospital.

Cont<sup>r</sup>. remed.

April 27. Much better. Is constantly employed in the shop.

Cont<sup>r</sup>. remed.



May 6. Says he has not been so well, as he is at present, for the last three or four years. Has completely recovered his flesh and strength, except that the right wrist is not quite so strong as the left. He is to take medicines with him sufficient to last fourteen days, by way of preventing a relapse.

May 7. Discharged cured.

---

I have now brought to a conclusion the detail of cases, corroborating what I have advanced respecting Iodine as an active remedial agent in the cure of Palsy. I might have added more cases of Hemiplegic Palsy (which is by far the most common form in which the disease appears), but I consider those already detailed as amply sufficient to shew the great powers of Iodine as a remedial agent in the different forms of Palsy.—When this disease arises from *softening* and *disorganization* of the brain, it would be unreasonable to expect a cure from the exhibition of Iodine, or of any other remedy.

To those who may be disposed to employ Iodine in Palsy, I beg to observe, that the doses of that medicine, prescribed by me in the respective cases, may be considered as full doses; and I would advise those who have had little or no experience in administering Iodine, to begin with a smaller dose than I have done, and to increase it slowly, and at longer intervals, watching the effects of the medicine, that in attempting to do good, we may avoid doing harm.

September 13, 1824.



# MEDICAL RESEARCHES

ON THE

*Effects of Iodine in Chorea, or St. Vitus's Dance.*

---

THE benefit derived from the use of Iodine in Palsy, induced me to try what effect it would have in Chorea, a disease more nearly allied to Palsy than is generally supposed, and of which Shaking Palsy seems to form the connecting link.

To shew that I am not singular in considering Chorea as a species of Palsy, I shall make a few extracts from the most eminent authors, who have written on the disease, with their opinion of its nature.

Dr. J. Mason Good, in his excellent work, entitled, "The Study of Medicine," has favoured us with the opinion of one of the fathers of physic, in the following paragraph:—"In Galen, Chorea seems to be included under a disease which he calls Scelotyrbe, literally, cruris turba, or perturbatio,—commotion of the leg;" and his description, which is as follows, is extremely accurate:—"It is a species



of atony, or paralysis, in which a man is incapable of walking straight on, and is turned round to the left, when the right leg is put forward, or alternately. Sometimes he is incapable of raising the foot, and hence drags it awkwardly, as those that are climbing up steep cliffs." \*

The illustrious Sydenham, considers Chorea as a kind of convulsion; but his description of the disease, which I subjoin, shews, that there is a want of power, otherwise the patient would raise, not drag, the affected foot. He says, "*This disorder is a kind of convulsion, which chiefly attacks children of both sexes, from ten to fourteen years of age. It first shews itself by a certain lameness, or rather unsteadiness of one leg, which the patient draws after him, like an idiot, and afterwards affects the hand of the same side, which being brought to the breast, or any other part, cannot be held in the same posture a moment, but it is distorted or snatched by a kind of convulsion, into a different posture and place, notwithstanding all his efforts to the contrary. If a glass of liquor be put into his hand to drink, he uses a thousand odd gesticulations before he can get it to his mouth; for not being able to carry it in a straight line thereto, because*



his hand is drawn different ways by the convulsion, as soon as it has happily reached his lips, he throws it suddenly into his mouth, and drinks it very hastily, as if he only meant to divert the spectators. As this disorder appears to me to proceed from some humour thrown upon the nerves, which, by its irritation, occasions such preternatural motions, I conceive, that the curative indications are to be directed (<sup>1</sup>) to lessen those humours by bleeding and purging, and (<sup>2</sup>) to strengthen the nervous system." \*

The celebrated Cullen, when treating of Chorea, makes the following observation on the disease:—"It is chiefly marked by convulsive motions, somewhat varied in different persons, but nearly of one kind in all; affecting the leg and arm on the same side, and *generally* on one side only. These convulsive motions commonly first affect the leg and foot. Though the limb be at rest, the foot is often agitated by convulsive motions, turning it alternately outwards and inwards. When walking is attempted, the affected leg is seldom lifted as usual in walking, but is *dragged* along, as if the whole limb were *paralytic*; and, when it is attempted to be lifted, this motion is unsteadily performed,

---

\* Wallis's Translation, vol. ii. p. 327, et seq.



the limb becoming agitated by irregular convulsive motions." \*

Dr. Hamilton, in his excellent work on the utility and administration of Purgative Medicines, † has given the following extended narrative of the symptoms of Chorea, which I copy with the greater pleasure, because it is considered by competent judges as the best account of the disease hitherto published; and also, because it shews that this distinguished practitioner has observed paralytic symptoms attendant on this disease. He proceeds to inform us, that "Chorea Sancti Viti attacks boys and girls *indiscriminately*, and those chiefly who are of a weak constitution, and whose natural good health and vigour have been impaired by confinement, or by the use of scanty or improper nourishment. It appears most commonly, from the eighth to the fourteenth year. I saw it in two young women, who were from sixteen to eighteen years of age.

"The approaches of Chorea are slow. A variable, and often a ravenous appetite, loss of usual vivacity and playfulness, a swelling and hardness of the lower belly, in most cases, in

---

\* Cullen's Pract. of Phys. parag. 1348 and 1349.

† Page 69, et seq.



some a lank and soft belly, and, in general, a constipated state of the bowels, aggravated as the disease advances, and slight irregular involuntary motions of different muscles, particularly of those of the face, which are thought to be the effect of irritation, precede the more violent convulsive motions, which now attract the attention of the friends of the patient.

“ These convulsive motions vary. The muscles of the extremities, and of the face, those moving the lower jaw, the head, and the trunk of the body, are, at different times, and in different instances, affected by it. In this state the patient does not walk steadily ; his gait resembles a jumping or starting ; he sometimes *cannot walk*, and seems *palsied* ; he cannot perform the common and necessary motions with the affected arm.

“ This convulsive motion is more or less violent, and is constant, except during sleep, when, in most instances, it ceases altogether. Although different muscles are sometimes successively convulsed, yet, in general, the muscles affected in the early part of the disease, remain so during the course of it. Articulation is now impeded, and is frequently completely suspended. Deglutition is also occasionally performed with difficulty. The eye loses its lustre and intelligence ;



the countenance is pale and expressive of vacancy and languor. These circumstances give the patient a fatuous appearance; indeed, there is every reason to believe, that, when the complaint has subsided for some time, fatuity, to a certain extent, interrupts the exercise of the mental faculties.

“Fever, such as arises in marasmus, is not a necessary attendant on Chorea; nevertheless, in the advanced periods of the disease, flaccidity and wasting of the muscular flesh take place, the consequence of constant irritation, of abating appetite, and impaired digestion, the common attendants of protracted Chorea; and which, I doubt not, may, in some instances, although contrary to the opinion, that Chorea is not fatal, have been the forerunners of death.

“From this history, Chorea may be considered as consisting of two states or stages: the incipient and the confirmed. The incipient state takes place from the first derangement of health, till the full formation of the involuntary motions; with these the confirmed state commences, and continues to the end of the disease.”

Having shewn, by quotations from the most eminent authors, who have written on Chorea, that they have also observed paralytic symptoms



in this disease, I now beg leave to observe, that since my attention has been more particularly directed to the cure of the disease by the exhibition of Iodine, I have discovered, that there is always a great deficiency in the sense of feeling on the side of the body affected with Chorea; and when both sides of the body are affected, that the sense of feeling is least on that side of the body that is most affected with the involuntary motions. A diminution of the sense of feeling is, I know, by some, considered as not essential to Palsy; but the instances of Palsy without diminished sensation, are so rare, that I think they can be considered as exceptions only to the general law; yet whatever opinion may be held as to this matter, the above fact shews, that Chorea has one striking symptom in common with Palsy. One side of the body being generally affected in Chorea, shews a striking similarity to Hemiplegia; and the loss of speech, and difficulty in swallowing, are symptoms often common to Palsy and Chorea. The imbecility and impaired memory that we frequently meet with in cases of Palsy, bear a striking resemblance to the feeble state of mind, and fatuous expression of countenance, that we often find to accompany severe and protracted Chorea.

An objection may be raised to Chorea being admitted as a species or modification of Palsy, on ac-



count of the involuntary motions which form a prominent feature in the character of the former, contrasted with either the total want of power of motion, or of motion under the direction of the will in the latter. But the same objections that apply to Chorea, would also apply to Shaking Palsy being admitted as a species of Paralysis.

Perhaps it is a matter of very little consequence whether Chorea be considered as a species of Palsy, or stand as an independent Genus; but, I have thought it of some moment to point out the features by which the diseases resemble each other.

In the incipient stage of Chorea, the motions are, in some degree, under the guidance of the will; but, in the progress of the disease, they often become completely involuntary, and we frequently find the patient holding the hand of the affected side with the other hand, to restrain the involuntary movements, and the foot of the sound side laid over the other to restrain its troublesome motions.

The involuntary motions in Chorea are considered as convulsions, by Sydenham and others; to me they have never appeared to resemble convulsions, such, at least, as we observe in



Epilepsy; but seem more like the random action of the muscles, when the power of the will over them has been partially or wholly suspended, so that it has no longer any proper controul over the motions of the parts affected, although it may have sufficient influence to originate them.

This view of the matter receives confirmation from the circumstance of the involuntary motions being suspended during sleep, except in some rare instances, when we may account for them from the exercise of the will in dreaming.

“In our voluntary actions,” Dr. Barclay observes, “there is no reasoning, no selection, as to the necessary branches of nerves, the courses which they take, or the places in which they originate and terminate; no calculation as to the nature or quantity of the energy that is to be communicated; no kind of thought as to the changes that may happen to be necessary in the action of the veins, arteries, absorbents, the quantity, quality, or momentum of their fluids; no reasoning as to the parts that ought to be *steady*, while the others are in motion; no reasoning as to the muscles, or the parts of the muscles, to be principally employed; as to the muscles that must needs co-operate; or as to the force, the velocity, the extent, and the order of succession with which they are to act. We have only to



will, and our purpose is accomplished: accomplished, indeed, in a way that we know not, but accomplished in a way which human intelligence could never have devised, and which human ingenuity could never have directed." \*

Chorea is said to attack boys and girls *indiscriminately*: general recollection of what had occurred in my own practice, led me strongly to doubt the correctness of the above statement. I was, therefore, at the trouble of making out a list of all the persons labouring under Chorea, who have been admitted as In and Out-Patients of the General Hospital of this town, for the last twelve years (during which time I have been Physician to the establishment), and I find that the total number amounts to 76, of which 22 are males, and 54 females, or nearly in the proportion of  $2\frac{1}{2}$  of the latter, to one of the former.

The accurate Dr. Heberden, when treating of Chorea Sancti Viti, remarks, "*Ex ægris quos vidi tantummodo quarta pars fuere mares.*" I am not aware that any tabular view of cases of Chorea has ever been published. I, therefore, purpose constructing a table from the list referred to above, which I hope will not be altogether without interest.

---

\* On Muscular Motions, p. 269.



We are told, that “ the approaches of Chorea are slow :” this, no doubt, is often the case, but we are not told by the same celebrated author, that the disease sometimes appears almost instantaneously, as by a fright, of which I shall have occasion to notice an instance, and many similar cases are on record, which proves that a disordered state of the primæ viæ is not necessary to the production of Chorea. Parents who have brought their children to me labouring under Chorea, have often informed me, that their children were in the habit of letting different objects fall out of their hands, *previous* to the appearance of the involuntary motions, and that they had often punished them for their supposed carelessness and “ clumsiness,” not knowing that they were labouring under disease. I have never seen any of the children in this stage of the disease, nor, indeed, until the involuntary motions were palpably established, so that I cannot speak as to the state of sensation at this period of the disorder ; but, from the fact of the children frequently letting different objects fall out of their hands, it is more than probable that the nerves, both of motion and sensation, are affected at this period of the disease.

The medical profession are certainly very much indebted to Dr. Hamilton for calling their attention to the generally disordered state of the



primæ viæ in Chorea; but when I reflect that the sufferers under this disease are “those chiefly who are of a weak constitution, and whose natural good health and vigour have been impaired by confinement, or by the use of scanty or improper nourishment,” I have generally been deterred from the vigorous exhibition of purgative medicines in this disease, and have confined myself to the exhibition of purgatives, in the first place, to unload the bowels, and afterwards to keep up a regular alvine discharge, avoiding the debility occasioned by full purging, as far as possible. After the bowels are unloaded, and a regular alvine discharge has been established, I have been in the habit of exhibiting some of the bitter vegetable tonics, generally with great advantage, and, aided by purgatives, so as to keep the bowels open, I have seldom failed in curing the disease in a reasonable time.

By the above plan, I have cured about thirty cases of Chorea. But in the severe and protracted form of the disease, we occasionally find the vegetable tonics, from long continued use, to lose their effect; and this is more or less the case with every medicine we employ, so that it is desirable to possess two or three remedies capable of curing a disease, that when one is disliked, or ceases to have a beneficial effect, we may be able to employ another in its stead.



Different remedies are also required to cure the same disease according to age, sex, and peculiarity of constitution ; and even in the same person, in a second or third attack of the same disease.

The symptoms by which Chorea and Palsy resemble each other, and the successful employment of Iodine in the latter disease, impressed me, from analogy, with the idea that Iodine would prove a useful agent in the cure of Chorea. I was also prepossessed with a favourable opinion of this medicine, as a remedy in Chorea, from its stimulating qualities, tonic effects, and the diffusive energy which it exerts on every part of the body.—I now proceed to a detail of the cases, which will shew the great remedial efficacy of Iodine in Chorea.

---

### CASE I.

Anne Harrison, æt. 12, lace-runner, of Nottingham, admitted an Out-Patient of the General Hospital, 11th June, 1822.—For three months has laboured under Chorea in the right side of the body, which is now in a severe degree ; articulates very ill ; bowels generally costive ; tongue a little furred. Was ordered a Powder, with Calomel, at bed-time, and a dose of Purgine Mixture the following morning. After con-



tinuing the above plan for nearly a month, during which time the patient was purged every day, I find that she had greatly improved in walking, but that the involuntary motions of the arm continued, and that she could not speak better than when admitted. Conceiving that I had given the purgative plan a fair trial, on the 15th of June I ordered the same purging medicines to be exhibited, and ten grains of the Sub-Carbonate of Iron to be given in syrup three times a day. Seven days afterwards, her father reported that the Powders had done her a deal of good, by stopping her lax and improving her appetite and strength. At this time she continued to have four or five stools daily. I directed the Sub-Carbonate of Iron to be continued, and the Purging Powder and Mixture to be given in turns only every other day, as it was evident that so much purging weakened the patient, and retarded the cure. Fourteen days after the Carbonate of Iron was exhibited, the involuntary motions had diminished very much, and she could articulate much better. The same medicines continued.

The patient continued gradually to recover, and on the 2d of August was so well, that she could use her needle, and walk very well, and only complained of debility, and that she could not articulate quite so well as before the attack.



At this time she continued to have four or five motions daily, which made me discontinue the Purging Powder. The Carbonate of Iron was ordered to be continued, and the Purging Mixture every morning, when necessary.

August 9. She now labours under involuntary motions in the extremities of the *left* side of the body. The right side is now free from twitching, or involuntary motions of the muscles. Her relations gave her three of the Purging Powders, of their own accord, in the course of last week. Stools black (from the Iron.)

Cont<sup>r</sup>. Pulv. Purg. et Mist. Purg. Omitt<sup>r</sup>. Ferri Sub-Carbonas. Capiat Infusi Gentianæ C. 3ss. bis in die.

August 16. The involuntary motions continue in the left extremities. Articulates better. Bowels open. Stools not so dark.

Cont<sup>r</sup>. remed.

August 23. Rather better.

Cont<sup>r</sup>. remed.

August 30. The involuntary motions in the left arm have been worse since last report, but now have abated again. She was purged all last week.

Intermitt<sup>r</sup>. Pulv. Purg. Cont<sup>r</sup>. alia.



September 6. Rather better. Open in the bowels.

Cont<sup>r</sup>. remed.

September 13. The Purging Mixture moves her very often. The involuntary motions continue.

Cont<sup>r</sup>. Mist. Purgans, p. r. n. Omitt<sup>r</sup>. Infus Gentianæ C. Capiat Oxydi Zinci gr. x. ter in die ex syrupo.

September 20. Vomited the first dose of the Oxyde of Zinc, but retained the subsequent doses, which, she informs me, occasioned an unpleasant heat in the abdomen, with now and then a sensation of heat striking as low down as the knees. She further adds, that the Oxyde of Zinc made her chilly at first, and was succeeded by an intolerable sensation of heat; and that it has taken away her appetite. The involuntary motions have not been so frequent for the last two days.

Capiat Oxydi Zinci gr. v. ter in die. Repet<sup>r</sup>. Mist. Purgans, p. r. n.

September 27. The involuntary motions still continue. Complains of being feverish. Has six or seven stools daily, of a light colour, but very offensive.



Omitt<sup>r</sup>. Oxydum Zinci. Sumat Misturæ Purgantis ʒi. omni mane. Capiat Tæ. Iodini gutt. ex aquæ cyatho, ter in die.

October 4. Feels better. Has more command over the left arm, and the involuntary motions are much less frequent. Bowels are moved two or three times every day, and stools of a brownish yellow colour.

Cont<sup>r</sup>. Mist. Purgans. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.

October 11. Continues to improve.

Cont<sup>r</sup>. remed.

October 18. Says she is only twitched a little at times, and that she can speak very well now. Feels stronger. Appetite better. Bowels open.

Cont<sup>r</sup>. remed.

October 25. Is very little troubled with the involuntary motions or twitchings. Speaks as well as ever. Recovers flesh and strength. Bowels open, without being purged. Iodine agrees very well.

Cont<sup>r</sup>. Mist. Purg. p. r. n. Capiat Tæ. Iodini gutt. xx.

November 1. Is very seldom twitched now.



Feels an improvement in her general health. Articulates very distinctly, and to all appearance is well.

The medicines were continued till the 22d of November, with the view of preventing a relapse, when she was discharged cured.

---

REMARKS.—I consider this as a very instructive case. In the first place, we observe active purging kept up for nearly a month, with very little beneficial effect. In the second place, we notice a marked improvement to take place very soon after the Carbonate of Iron was exhibited, although the aperient medicines were *diminished* in quantity. In the third place, after the disappearance of Chorea in the right side of the body, the left side was attacked by the same disease, during the exhibition of the same medicines, that had proved effectual in the cure of it on the right side, which is rather a curious fact.—Surely a loaded and disordered state of the bowels could have had no share in inducing Chorea in the left side of the body, in this instance.

Ought not the torpid, loaded, and disordered state of the bowels in Chorea, to be considered as a consequence, rather than as the cause of the disease?

I have already mentioned, that Chorea appears sometimes in consequence of a fright. May not other passions, as well as fear, induce the disease?

The Carbonate of Iron having failed to prevent the disease on the left side of the body, I doubted its power to cure, and, therefore, left it off, and gave first small



doses of the Compound Infusion of Gentian, and, afterwards, the Oxyde of Zinc, but not finding any marked benefit from them, I directed her to take the Tincture of Iodine, which soon accomplished a cure, and, at the same time, greatly improved her general health.

---

## CASE II.

Mary Parrott, æt. 10, Old Radford, December 23, 1822. For the last ten days has laboured under Chorea, in the right side of the body. Her father informs me, that her right arm and leg are constantly on motion, day and night, so that she kicks off the bed clothes; and her sister, a girl, 13 years of age, who sleeps with her, complains of her sides being sore from the kicks she receives during the night. The edges of the eye-lids are red and raw, the eye lashes have fallen off, and the eye-lids are generally glued together in the morning. The disease of the eye-lids has existed since she had the measles, when a child two years of age. Flesh soft. Abdomen rather larger than natural.

Capiat Ol. Ricini ʒii. omni mane.

℞ Tæ. Iodini ʒss. Sumat gutt. vi. ter in die ex aqua.

℞ Ung. Hydr. Præcip. Alb. ʒss.

Illinentur tarsi palpebrarum unguento ter in die.



December 28. The involuntary motions continue. Has two stools daily, they are of a dark colour. The Tincture of Iodine agrees, and her father observes, that it enlivens her.

Cont<sup>r</sup>. remed.

January 4, 1823. Moves both the arm and leg less, and has more use of the right hand. Has been purged for the last two or three days, and her stools are more of a yellow colour, and less offensive. Eye-lids not so raw. Her father says, she is more lively than she used to be.

Sumat Olei Ricini ʒii alternis matutinis.  
Cont<sup>r</sup>. remed.

January 11. The involuntary motions have very much diminished in frequency and strength, in both extremities. Eye-lids less red and swollen. Bowels only moved once a day since she has taken the Ol. Ricini every other morning. Her father says, that she continues to experience an enlivening effect from the Tincture of Iodine.

Capiat Ol. Ricini omni mane si opus sit et Tæ. Iodini gutt. viii. ter in die.

January 18. Can use the right hand now to wind cotton for her father, who is a framework knitter. Eye-lids less red and tumefied. Bowels open. The Iodine agrees.

Cont<sup>r</sup>. remed.



January 25. The involuntary motions have entirely ceased, and she can use the extremities of the right side of the body, as well as she ever could. Eye-lids nearly well. The fulness and hardness of the abdomen are quite gone. Has two or three stools daily.

Cont<sup>r</sup>. remed.

February 8. Has had no return of the disease.

Discharged cured.

---

It is noted in my Case Book, that this Patient remained well up to the 2d of June, 1823. Since that time I have heard nothing of her.

---

### CASE III.

Eliza Clark, æt. 4, Finkhill Street, admitted an Out-Patient of the General Hospital, the 18th of February, 1823. This young patient was brought to my house for gratuitous advice, on Tuesday the 11th instant. The child was evidently labouring under Chorea, and her mother gave me the following history of the case:—When the child was at play, before the



door of her father's house, on Tuesday the 4th of February last, a man frightened her by saying he would put her in his pocket. The child ran into the house, and screamed and trembled very much. On the following day, her mother says that she looked queer about the eyes, and was observed, for the first time, to be constantly on motion. The child walks with the greatest difficulty, and the involuntary motions of the extremities are gradually getting worse. The extremities of the left side of the body are most moved at present. Has one stool daily.

R Hydr. Submuriatis ʒi. Pulv. Jalapæ. ʒii.  
Misce et divide in Pulv. vi. habeat i. omni nocte.

February 15. The first powder operated both by vomiting and stool. Feces said to be dark and offensive. The involuntary motions continue to increase in degree. Has seldom more than one motion from a Powder.

Cont<sup>r</sup>. Pulv. h. s. Sumat Magnesiae Sulphatis  
ʒi. omni mane.

February 18. Admitted this day an Out-Patient of the General Hospital, being the 14th day since she was seized with Chorea. Both sides of the body are nearly equally moved. Can scarcely speak intelligibly. Had one dark and two light coloured motions yesterday, said to be



very offensive. Upon the whole, the child is no better, but rather worse.

R Hydr. Submur ..... ʒi.

Pulv. Jalapæ ..... ʒss.

Misce et divide in Pulv. vi. habeat i. omni nocte h. s. et mane sequente, sumat Magnes. Sulph. ʒi. ex aqua tepida.

February 21. Stools dark, but not so offensive as formerly. Is said to be always better towards night.

Cont<sup>r</sup>. remed.

February 28. The involuntary motions continue. Cannot stand. When supported she drags the right foot, and makes a jump or quick step with the left in walking. Can speak very little. Omitted the Powder last night. Stools of a brown colour.

Cont<sup>r</sup>. remed. Habeat Tæ. Iodini gutt. v. ter in die ex aquæ ʒi.

March 7. Her mother reports, that she rests better, and that the involuntary motions are less frequent, when she sits up during the day, than formerly. Speaks better than last week. Has had four or five motions every day, till yesterday, when she had only two. Tongue slightly furred.

Cont<sup>r</sup>. remed.



March 14. She is much less agitated by the involuntary motions than she was. Can now use her hands, and talk better, but cannot stand or walk. Has two or three stools daily, of a natural colour and smell. Her mouth was a little affected by the Calomel, but is now well. The Powder, containing the Sub-Muriate of Mercury, was omitted on the 10th instant.

Capiat Magnes. Sulphatis  $\text{ʒi}$ . omni mane et Tæ. Iodini gutt. vi. ter in die.

March 21. On the 16th instant she could not stand without support, to-day she can walk about without any assistance. The involuntary motions have very nearly ceased, and she can speak pretty well. She is quite brisk and cheerful. Her mother says, "it is quite astonishing the improvement that has taken place in so short a time."

Sumat Tæ. Iodini gutt. viii. ter in die. Cont<sup>r</sup>. Magnes. Sulphas.

March 29. The twitchings and involuntary motions have entirely ceased. She complains of being rather weak in the right side of the body. Bowels open. Stools natural in colour and smell. Tongue clean.

Cont<sup>r</sup>. remed.

April 4. Her mother reports, that she gathers



strength, and that the right side does not fail her as it did last week, in walking. She now runs about and plays. Can speak, and appears as well as ever. To prevent a relapse the medicines were continued till the 11th of April, when she was discharged cured. Her mother called at the Hospital the 25th of April, and informed me, that the child continued in good health.

---

#### CASE IV.

Elizabeth Osborne, æt. 13, Duke's Place, admitted an In-Patient of the General Hospital, the 1st of April, 1823. Three years ago was first attacked with Chorea, which continued eighteen months, before she recovered. Her mother informs me, that she was eleven weeks of that time in the Hospital, under one of my colleagues. After she left the Hospital, her mother says, that she took her to Saint Anne's well (a deep and cold well near this town), and after bathing in it six times, she was able to walk, and the bathing was continued until she was well. She continued free from the disease for six months. For the last twelve months has been afflicted with Chorea, in a severe degree, in both sides of the body. She cannot walk without support, and the limbs are constantly on motion in the day time, when she is up;



but her mother informs me, that she lies very still in the night. Her speech is very much affected, and it occasions great agitation when she attempts to articulate. The saliva is almost constantly running from her mouth, and she has a very fatuous expression of countenance. Bowels open, and stools *natural* for the last two months: before that time they were dark, and more offensive than natural. Appetite good. Pulse 104, very small and weak. Tongue clean. The mother informs me, that after her daughter's second attack of Chorea, she again had recourse to bathing in St. Anne's Well, but without any benefit. She then placed her under the care of a very intelligent medical gentleman (who, I believe, gave purging a fair trial), but without much advantage.

Capiat Pilæ. Cambogiæ Comp. gr. x. h. s. et Tæ. Iodini gutt. xv. ter in die ex aquæ ʒi.

April 3. She articulates better this morning, and does not seem to move so much.

Cont<sup>r</sup>. remed.

April 7. The involuntary motions gradually diminish, and she can walk better, but is weak in the ankle joints, and particularly in the left. As her fingers are shut, and the hands bent inwards, owing to the superior strength of the flexor muscles, I have directed the nurse to



apply a splint and bandage, that the parts affected may be occasionally kept in a state of extension.

Cont<sup>r</sup>. remed.

April 11. Is better. The involuntary motions gradually abate. Improves in walking. Five stools daily.

Cont<sup>r</sup>. remed.

April 14. Complains of head-ache. Bowels open. Stools natural.

Intermittatur Tæ. Iodini. Cont<sup>r</sup>. Pil. Cambogiæ Comp.

April 16. Is free from the head-ache. Walks better, but now and then one of the feet is drawn to one side by the involuntary and irregular action of the muscles, so that she is obliged to stand still for a time, until the antagonist muscles bring the foot into its proper position again, or until some one does it for her. Had three stools, of a natural colour, yesterday.

Capiat Tæ. Iodini gutt. x. ter in die. Cont<sup>r</sup>. Pilæ. Cambogiæ C.

April 21. Nearly in the same state as at last report.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Pilæ. Cambogiæ C.



April 23. Rather better. No head-ache.  
Has three stools daily.

Cont<sup>r</sup>. Pilæ. Aper. Sumat Tæ. Iodini gutt.  
xviii. ter in die.

April 26. Says she is better.

Cont<sup>r</sup>. remed.

April 30. Does not speak so well, but  
appears to improve in walking. Has two  
stools daily.

Intermittatur Ta. Iodini. Cont<sup>r</sup>. Pil. Aper.  
Appl<sup>r</sup>. Emp. Cantharidis parti cervicis poste-  
riori h. s.

May 3. Blister rose well. Feels better.  
Three stools daily.

Cont<sup>r</sup>. Pilæ. Cambogiæ C.

May 7. Yesterday began to take sixteen  
drops of the Tincture of Iodine three times a  
day. Improves in walking. Arms not so much  
moved. Blister well.

Denuo Appl<sup>r</sup>. Emp. Cantharidis parti poste-  
riori cervicis h. s. Cont<sup>r</sup>. Pil. Cambogiæ C. et  
Ta. Iodini.

May 10. Is in bed, owing to the blister.  
The involuntary motions gradually diminish.

Cont<sup>r</sup>. remed.



May 14. Walks better this morning.

Cont<sup>r</sup>. remed.

May 24. Is less twitched. Articulates better, and continues to improve in walking.

Cont<sup>r</sup>. remed.

June 2. Continues gradually to improve.

Cont<sup>r</sup>. remed.

July 3. She left the Hospital the 17th of June, and was put on the Out-Patient list. Her mother reports, that she is stronger, and can walk better. Bowels open. Has taken twelve drops of the Tincture of Iodine three times a day, and Epsom Salts to keep the body open, since she left the Hospital.

Cont<sup>r</sup>. remed.

July 18. Her mother says, that she is better now than she has been for a long time. Can cut her meat, and feed herself, and her hands and arms are seldom drawn up as they used to be. Recovers flesh and strength very fast. Can walk much better, and never falls now. Had an eruption of the nature of Urticaria yesterday. Two stools daily.

Capiat Magnes. Sulph.  $\text{ziii}$ . bis in Septimana.  
Sumat Tæ. Iodini gutt.  $\text{xii}$ . ter in die.



August 1. The involuntary motions have entirely ceased. Walks very well. Articulates distinctly. Fatuous expression of countenance has disappeared. Bowels open.

Cont<sup>r</sup>. Magnes. Sulphas. Capiat Tæ. Iodini gutt. xv. ter in die.

September 5. The medicines have been continued up to the present time, to prevent a recurrence of the disease, and she continues free from every symptom of Chorea.

Discharged cured.

---

### CASE V.

Anne Harrison, æt. 13, lace runner, Sun Hill, admitted an Out-Patient of the General Hospital, on Tuesday the 1st of April, 1823. Her mother informs me, that she continued free from St. Vitus's Dance since she was discharged the 27th of September last, till about a week since, when she observed "that she was clumsy at her needle," and three days ago the right arm and leg began to be twitched and moved involuntarily. Cannot articulate well. Bowels open. Stools not observed.

Capiat Mist. Purg. ʒiss. omni mane. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.



April 4. No change in the symptoms. Has had four or five stools of a light colour, and rather slimy.

Capiat  $\bar{z}$ i. Mist Purg. omni mane. Cont<sup>r</sup>. Tæ. Iodini.

April 11. Can feed herself better than she could a week ago. It is chiefly the right arm and hand that are moved involuntarily. Pulse 84, and of moderate strength.

Capiat Tæ. Iodini gutt. xviii. ter in die. Cont<sup>r</sup>. Mist. Purg.

April 18. Speaks pretty well now. Continues to improve. Has five or six motions of a light brown colour, every day.

Capiat Tæ. Iodini ter in die. Cont<sup>r</sup>. Mist. Purgans.

April 25. Is less troubled with the involuntary motions. Bowels open, and stools natural yesterday; the day before they were dark and offensive.

Cont<sup>r</sup>. remed.

May 2. Articulates very well. The involuntary motions are very slight, and are confined to the right arm and hand. Has been able to work at running lace for the last week. Has five or six stools daily.



The Tincture of Iodine was continued till the 16th of May, and very little of it was given afterwards. The patient remained weak, owing to her being too much purged. A dessert spoonful of the Compound Infusion of Gentian was ordered to be taken three times a day, and the Purging Mixture when necessary. She continued to run lace from five to nine hours daily, and her health and strength were completely restored under the above plan of treatment, on the 12th of September following.

---

#### CASE VI.

James William Gray, aged 13 years and six months, lace runner, Tyler Street, admitted an In-Patient of the General Hospital, the 16th of September, 1823. For two months has been afflicted with involuntary motions in the right half of the body, and particularly in the right arm and hand. His mother informs me, that he is twitched and moved in bed as well as when up. Speech very much affected. Tongue a little white. Stools not observed. Bowels open for the last fourteen days by medicine, taken by my direction. Complains of a little pain at the upper part of the right side of the neck.

Capiat Pulv. Jalapæ Comp. ʒi. omni mane et Tæ. Iodini gutt. xv. ter in die ex aqua.



September 18. Feels better. Has two stools daily.

Cont<sup>r</sup>. remed.

September 22. Says that the involuntary motions have ceased in the arm. Has more use of the right lower extremity, but cannot yet walk so well with it as with the left. Speaks better. Bowels open.

Cont<sup>r</sup>. remed.

September 27. Is much better.

Cont<sup>r</sup>. remed.

October 6. Has had no twitchings or involuntary motions of the extremities for three or four days. Is employed in the Apothecary's shop.

Cont<sup>r</sup>. remed.

October 10. Is very little troubled with the twitchings now.

Cont<sup>r</sup>. Pulv. Jalapæ Comp. p. r. n. Capiat Tæ. Iodini gutt. xviii. ter in die.

October 25. He complains only of a little weakness in the knees.

Cont<sup>r</sup>. remed.

October 28. Discharged cured.



## CASE VII.

Anne Harrison, æt. 13, lace runner, Sun Hill, admitted an Out-Patient of the General Hospital the 18th of November, 1823. Had the misfortune to fracture her left arm about a month ago—the bone has united, but she is very much reduced in flesh and strength, and has experienced a return of her old complaint, Chorea, in the left side of the body. Is pale, and appears debilitated. Bowels costive. Rests ill.

Capiat Mist. Purgantis ʒi. omni mane et 'Tæ. Iodini gutt. vi. ter in die ex aqua.

November 21. Stools dark and slimy. The involuntary motions, particularly in the arm, continue. Walks better.

Sumat Tæ. Iodini gutt. viii. ter in die. Cont<sup>r</sup>. Mist. Purgans.

November 28. Much in the same state. Three stools daily. Colour rather dark.

Cont<sup>r</sup>. remed.

December 5. The involuntary motions are gradually diminishing, and she begins to have the arm more under the power of the will. She has so far recovered, that there is no dif-



ference in the sensibility of the arms when pinched. Bowels open.

Capiat Tæ. Iodini gutt. x. ter in die. Repet'.  
Mist. Purgans, p. r. n.

December 12. Is much improved in health. Begins to recover her colour. The involuntary motions or twitchings in the muscles return only at intervals of from one to two hours. Sleeps well. Bowels open. Four stools daily.

Cont'. remed.

December 26. The involuntary motions trouble her very little now, and she runs lace six hours daily. Bowels three or four times moved every day. Her strength and colour are nearly restored.

Cont'. remed.

January 9, 1824. She is able to work seven hours daily, and is almost free from the involuntary motions. Wishes to continue the medicines a little longer.

Cont'. remed.

January 23. Says that she feels perfectly well.

Discharged cured.



## CASE VIII.

Wm. Scott, æt. 8, school boy, Knob Alley, December 1, 1823. For the last three weeks the extremities of the right side of the body have been very much twitched, or moved involuntarily during the day time, and now his mother says he is constantly on motion during the day, and is rather restless during the night. I find, by pinching the skin on each side of the body, that the sense of feeling is much lower in degree on the right side of the body that is agitated involuntarily, than on the left which is not. The median line appears to form the boundary between the two states of sensation. Stools said to be of a dark brown colour, but not more offensive than natural. The boy has a healthy look, and, till lately, has attended the National School.

R̄ Hydr. Submur..... ʒi.  
Pulv. Jalapæ ..... ʒii.

Misce et divide in Pulveres vi. habeat i. omni mane ex syrupo.

December 4. The Powder moves him two or three times daily. The involuntary motions continue.

Cont<sup>r</sup>. Pulveres. Sumat Tæ. Iodini gutt. vi. ex aqua ter in die.



December 8. His mother says that he is better, and moves the right arm less by day, and also by night. Sleeps better. Stools of a lighter colour since he took the three first Powders. The sense of feeling is still greater on the left side of the body than on the right.

Cont<sup>r</sup>. remed.

December 13. His mother says, that she does not see any thing amiss with him now, and that he has complete power over the limbs on both sides of the body. Stools of a light colour, and natural smell. Appetite very good.

To prevent a relapse, I have advised his mother to continue the medicines a week longer.

December 22. Is quite well.—Discharged cured.

## CASE IX.

Miss Mary Anne M——, aged 11 years and three months. Nottingham, January 2, 1824. Is of a spare habit, and rather delicate constitution. For the last four weeks has been observed to have involuntary motions in the right side of the body, and to move herself without any evident cause, when sitting, and even when in



bed. The patient, I find, was in the habit of letting things fall from the right hand, for want of power, for eight or ten days previous to the involuntary motions manifesting themselves, and the loss of power has gradually increased. When the skin on each side of the body is pinched, she says, that she feels the pinching most on the left, or unaffected side; and when both hands are stroked at the same time, that she also feels best with the left hand. I learn from her mother, who is a very intelligent woman, that she was troubled with head-ache and costiveness, for some time previous to the appearance of Chorea. For the last two or three days, her eyes are said to have looked rather wild, and that her answers to questions have not been given with her usual intelligence. Pulse 84, and soft. Skin warm, and perspires a little. Expression of the countenance natural. Bowels moved once daily.

Capiat Magnesiae Sulphatis ʒss. alternis matutinis. Sumat Liquoris Iodini gutt. viii. ter in die ex aqua.

January 4. The involuntary motions, and the diminished sense of feeling in the right side of the body continue. Had three motions, from the salts, yesterday.

Capiat Magnes. Sulph. ʒii. omni mane. Cont<sup>r</sup>. Ta. Iodini.



January 11. The stools are of a dark brown colour. The involuntary motions seem not so frequent. Sensation in the same state.

Capiat Magnes. Sulph.  $\frac{3}{3}$ . omni mane. Cont<sup>r</sup>.  
Ta. Iodini.

January 16. Is nearly in the same state. Stools still darker than natural.

R Hydr. Submur..... gr. iii.

Pulv. Jalapæ ..... gr. viii.

Misce fiat Pulvis alternis noctibus sumendus.  
Capiat Magnes. Sulph.  $\frac{3}{3}$  alternis matutinis.  
Cont<sup>r</sup>. Ta. Iodini.

January 25. Walks with a firmer step to-day, but it is done in a hurried manner, and approaching to running. Stools are of a dirty brown, in general; after taking the Powder they are of a sea green colour. When both hands are stroked, says that she still feels best with the left one.

Intermittatur Ta. Iodini. Cont<sup>r</sup>. alia remedia.

January 31. During sleep is free from the involuntary motions, and, in general she enjoys sound repose; but when up, the more she wishes to keep the extremities of the right side of the body at rest, the more they are moved about, so that she employs the left hand and foot to



restrain their unruly motions. Sensation as before.

Capiat Tæ. Iodini gutt. vi. ter in die. Cont<sup>r</sup>.  
Pulv. Purg. et Magnes. Sulph. p. r. n.

February 4. Walks rather better. Arm much in the same state.

Cont<sup>r</sup>. remed.

February 5. The extremities of the left side of the body begin to be moved involuntarily. The sense of feeling is still greatest in the left side of the body. Stools of a bottle green colour, after the Powder taken last night. Her mother thinks she was worse after taking the two or three last doses of the Iodine, and, therefore, omitted to give it.

Omitt<sup>r</sup>. Tæ. Iodini. Cont<sup>r</sup>. alia.

R Zinci Oxydi..... 3i.

Pulv. Tragacanth. Comp. .... 3ss.

Tere simul et divide in Pulv. xii. quorum sumat i. ter in die.

February 6. Vomited the Powder last night, half an hour after it was taken. The involuntary motions in the left side of the body increase in degree, Stools of a more natural colour this morning. Pulse 84, and soft. Some degree of giddiness last night. Is directed to take the half



of one of the Powders, with Oxyde of Zinc, three times a day. Three Leeches to be applied to the left temple, and the Purgative Medicines to be continued.

February 6. Vomits the half powder. Seems worse in every respect, and the left extremities are nearly as much moved as the right. Feels weak. Pulse 64. Bowels open by the salts.

Omitt<sup>r</sup>. remed.

R Infusi Calumbæ..... ʒvii.

Tæ. Cinchonæ ..... ʒss.

Spir. Ætheris Nitr. ....

— Ammon. Aromat.....ā ā ʒii.

Misce, fiat Mistura cujus capiat ʒss. ter in die.  
Sumat Magnesiae Sulph. ʒii. mane p. r. n.

February 7. Stools more natural yesterday and to-day, than hitherto. Has had a bad night, and been troubled with the involuntary motions when in bed. Pupils appear more dilated than natural.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Emp. Cantharidis utri-  
que tempori q. p.

Vespere. The involuntary motions are not so frequent as yesterday. Stools natural.

Cont<sup>r</sup>. remed.

February 8. Walks rather better. Blisters



have risen well, and have been removed this morning. Has had a natural stool, without the salts.

Cont<sup>r</sup>. remed.

February 12. Is now at a village in this neighbourhood for the benefit of a purer air. Both sides of the body are now equally affected by the involuntary motions; but she says that she can still feel best with the left hand. Her speech was very much affected yesterday, and she articulates very imperfectly to-day. Upon the whole, she is much worse since she left off the Iodine. Bowels have become rather tardy. The tonic Mixture heats her.

Omitt<sup>r</sup>. remed. Capiat Tæ. Iodini gutt. vi. ter in die ex aqua, et Magnesiæ Sulph. ʒss. omni mane si tarda est alvus.

February 14. Reported better.

Cont<sup>r</sup>. remed.

February 26. I have visited her thrice since last report. About a week ago had some head-ache, and slight epistaxis, for which I ordered six Leeches to the temples, which had the effect of relieving the head-ache, and stopping the epistaxis. I have reason to believe, that she eats too much.

Cont<sup>r</sup>. remed.



February 29. Can walk better, articulates more distinctly, and the involuntary motions are not so frequent as when I last saw her. Says she can still feel best with the left hand. Her mother informs me, that her appetite is not so voracious. Body open by the Salts.

Capiat Tæ. Iodini gutt. viii. ter in die.

March 4. The involuntary motions continue to abate, and she can walk and articulate better. Continues to feel best with the left hand. Bowels regular by three drachms of the Sulphate of Magnesia.

Cont<sup>r</sup>. Ta. Iodini.

March 7. Is so much better, that she has returned home. Continues to recover.

Cont<sup>r</sup>. remed.

March 11. Walks much better, and the involuntary motions in the arms are gradually diminishing. Sensation still best in the left hand.

Cont<sup>r</sup>. remed.

The above plan of cure was continued until the 14th of April following, when the patient was entirely free from every symptom of Chorea, and had recovered the proper sense of feeling in the right side of the body. I recommended



great attention to air and exercise, and to preserve a regular state of the bowels. I met this young lady six months after she was cured, and was happy to find her in high health and spirits, and that she had not experienced the slightest return of the disease.

---

REMARKS.—This was a very severe case of Chorea, and, in my opinion, could not have been cured by brisk purging; as when that happened to take place, there was always an increase of the involuntary motions. This circumstance was noticed by the mother of the young lady, as well as myself. Purgatives given so as to remove a loaded and disordered state of the bowels, and afterwards in such doses as to preserve a regular alvine discharge, are absolutely necessary in a great number of diseases, and when thus managed have a tonic effect on the system, by promoting digestion, and, consequently, the nutrition of the system; but, full purging, day after day, and week after week, cannot but prove injurious, and retard the cure of a disease like Chorea, in which debility is a prominent feature; and we find, that medical practitioners, in addition to aperients, are frequently obliged to have recourse to some tonic—as Oxyde of Zinc, of Iron, or of Arsenic, the Nitrate of Silver, or the bitter Vegetable Infusions, &c. before they can accomplish the cure of severe cases of Chorea.

In support of what I have just stated, many cases might be adduced on highly respectable authority, but I shall only extract the following paragraph from a case of Chorea lately published by Dr. Crampton, an eminent Physician of Dublin, as occurring in the person of Anne M'Kelvey, an unmarried woman, 42 years of age.



The Doctor observes,—“The subject of the foregoing case, previous to her admission into the Whitworth Hospital, had been a resident in the pauper department of the House of Industry, where every attention had been paid to her bowels. She took constantly, under the judicious direction of Dr. Orpen, Laxative Pills, combined with *foetids*, besides other appropriate remedies, to combat a nervous affection (hysteria) of the character described. It is calculated she took above five hundred Aperient Pills, in varied forms, within the last twelve months; so that if steady purgation, aided by a well arranged diet and regular habits, could have subdued her disorder, many advantages for her relief were afforded. The disorder, however, scarcely remitted under any mode of treatment, until her removal to the Hospital, and until the Nitrate of Silver was directed.”\*

Different tonic remedies may be necessary in different cases of Chorea, but, I am convinced, that the Aperient plan combined with the Tonic, is far superior to the Purgative System in the cure of this disease.

---

### CASE X.

Miss Matilda P. *æt.* 12, Nottingham, January 15, 1824. For the last fourteen days has been afflicted with Chorea. The involuntary motions are nearly equal in the upper extremities. Drags the right foot, when she walks. Can raise the left foot very well. Her speech is considerably affected. When both sides of the body are pinch-

---

\* Trans. of the Association of Fellows and Licentiates of the King and Queen's College of Physicians, in Ireland.—Vol. iv. p. 114.



ed, or stroked, at the same time, says that she feels best with the left side of the body. Her mother informs me, that she has always been a healthy sharp child, till attacked with the present disease, for which she cannot assign any cause. Pulse 96, and of natural strength. Face naturally ruddy. Bowels regular. Stools not observed

R̄ Hydr. Submur..... ʒi.

Pulv. Jalapæ ..... ʒii.

Misce et divide in Pulv. vi. habeat i. omni mane ex syrupo.

January 17. Was once purged yesterday by the Powder. Stool of a yellow colour, and natural smell.

Cont<sup>r</sup>. Pulvis.

January 22. Bowels lately moved twice a day by the Powder. Stools of a natural colour Still feels best with the left hand.

Cont<sup>r</sup>. Pulvis omni mane. Sumat Tæ. Iodini gutt. vi. ex aqua ter in die.

January 29th. Can raise the right foot in walking, which she used to drag, and to-day has used her needle a little. Sensation is still more perfect in the left side of the body than the right.

Cont<sup>r</sup>. remed.



The Medicines were continued fourteen days longer, at the end of which time she was perfectly well, and had recovered the proper degree of feeling in the right side of the body. This patient has experienced no relapse, and continues to enjoy good health up to the present time.

---

### CASE XI.

Anne Holmes, aged ten years and six months, Dutch Alley, admitted an Out-Patient of the General Hospital, the 16th of June, 1824. This patient was brought to my house for gratuitous advice, on the 29th of last month, when I was informed, that she had been declining in health and strength for a month, and that the extremities on the right side of the body had been twitched and moved involuntarily for the last week. Walks very badly. Cannot articulate distinctly. The sense of feeling is imperfect in the right side of the body, as the patient declares she can feel best in the left side. Stools said to be natural. I find that the patient laboured under numbness, and want of power in the right hand, in consequence of which she broke several pots, belonging to the mistress with whom she then lived, and, *previous* to the appearance of the involuntary motions.

Capiat Magnesiae Sulphatis  $\text{ziii}$ . omni mane et Tæ. Iodini gutt.  $\text{iv}$ . ter in die ex aqua.



June 1. 'The right arm is constantly on motion, which the patient restrains as much as she can, by holding the right hand with the left. Drags the right foot when she walks. Complains of pain in the right extremities. Speaks better than on the 29th. Had three stools yesterday; to-day she has had two, all of them of a yellow colour, and not particularly offensive. Appetite craving.

Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. v. ter in die.

June 3. Walks worse, and the involuntary motions increase in frequency. Stools very offensive now.

Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. vi. ter in die.

June 10. Articulates worse. Was very much twitched yesterday. Stools dark brown, and more offensive. Has not been able to hold any thing in the right hand for a month. The left extremities begin to be slightly twitched. Drivels much now.

Cont<sup>r</sup>. remed.

June 14. Has made no improvement, and some difficulty in swallowing has occurred. Stools of a brown colour.

Cont<sup>r</sup>. remed.



June 16. Admitted an Out-Patient of the General Hospital to-day. Symptoms as stated above. Is so bad she can scarcely walk from chair to chair, without being supported. Stools dark brown, and very offensive. Appetite variable.

Omitt<sup>r</sup>. remed.

R Infusi Sennæ..... ʒviss.

Magnes Sulphatis..... ʒss.

Decoct. Aloes Comp..... ʒi.

Misce. Capiat ʒi. Misturæ omni mane.

June 18. Her mother reports, that she is much in the same state. Has three or four stools daily, of a light brown colour, by the physic. Cannot walk. The involuntary motions are chiefly confined to the right side. Is also twitched when asleep.

Cont<sup>r</sup>. Mist. Purgans. Sumat Tæ. Iodini gutt. v. ter in die.

June 25. Yesterday morning the patient walked down stairs, and her mother says, that she is better upon the whole. Vomits the Purg-ing Mixture.

Capiat Magnesiae Sulphatis ʒii, omni mane et Tæ. Iodini gutt. vii. ter in die ex aqua. Omitt<sup>r</sup>. Mist. Purg.



July 9. Is reported as improving. Her mother says, that she is better than last week.

Cont<sup>r</sup>. remed.

July 23. Is so much better that she has walked about three quarters of a mile, from her house to the Hospital. The right arm is much more twitched and moved about than the left. The sense of feeling continues to be greatest in the left side of the body. The right arm is sometimes moved about when she is asleep. The Iodine agrees.

Cont<sup>r</sup>. remed.

August 6. Walks better. Still twitched in the arm and hand. Has two dark coloured stools daily.

Cont<sup>r</sup>. remed.

August 20. Much better. Can walk very well. The right hand is not much twitched now, but complains of its being weak. She can still feel best with the left hand. Very little twitched when asleep. Drops agree. Bowels moved twice a day.

Cont<sup>r</sup>. remed.

September 10. Is much stronger. Very little twitched now.

Cont<sup>r</sup>. remed.



September 24. Very much better. Bowels open.

Cont<sup>r</sup>. remed.

October 8. Sometimes has slight involuntary motions in the right arm.

Cont<sup>r</sup>. Magnes. Sulph. p. r. n. Sumat Tæ. Iodini gutt. v. bis in die.

This patient has not come to the Hospital for nearly a month, but her mother has lately informed me, that she continues free from St. Vitus's Dance.

Discharged cured.

---

REMARKS.—This was a very severe case of Chorea, but yielded at last to Aperients and Iodine. The cases of Chorea above detailed are nearly all that I have hitherto treated by the exhibition of Iodine; except one very severe case, of five years standing, that occurred in a female, about thirty-five years of age, which was treated for a few weeks by the exhibition of Aperients, and the Tincture of Iodine. The patient, when I first saw her, could not walk without assistance, but after taking the Tincture for three weeks, she could walk without support. The patient did not afterwards make such rapid progress as she had anticipated, and, therefore, abandoned the plan of cure altogether. It is, I think, unnecessary to detail any more particulars respecting incomplete trials of the remedy, as the above cases are amply sufficient to shew the great remedial powers of Iodine in Chorea.



A Tabular View of the Cases of Chorea, treated at the General Hospital, near Nottingham, between the 6th of October, 1812, and the 5th of October, 1824; with an Outline of the Treatment employed in the Cases that came under my own care, marked in the second column with the letter M. The letters A. B. and C. in the same column, refer to the Cases treated by my Colleagues in the same period of time.

No.	By whom adm.	Name and Age.	How long Ill.	When admitted.	Treatment, &c.	When and how discharged.
1	A	William Extall, æt. 9	2 weeks	1812. Nov. 3, O.P.	-	Cured February 16, 1813
2	A	Elizabeth Henstock, æt. 12	3 weeks	1813. Jan. 26, O.P.	-	Cured March 30, ditto
3	M	Sarah Ashby, æt. 25	3 months	August 10, I.P.	Pul. Jalapæ. Comp. (Ph. Ed.) 3ss. Pulv. Calumbæ C. 3ss. ter in die.	Cured August 24, ditto
4	A	William Extall, æt. 10	3 weeks	Sept. 14, O.P. 1814.	-	Cured January 11, 1814
5	A	William Tacey, æt. 12	3 weeks	June 14, O.P.	-	Cured September 6, ditto
6	A	Samuel Ashby, æt. 27	2 weeks	July 26, I.P. 1815.	-	Cured November 1, ditto
7	A	Catherine Rayner, æt. 8	not stated	January 31, O.P.	-	Cured February 21, 1815
8	A	Hannah Goddard, æt. 16	7 weeks	February 21, O.P.	-	Cured June 13, ditto
9	M	Thomas Wagstaff, æt. 8	3 weeks	February 28, O.P.	Hydr. Submur gr. ii. Pulv. Jalapæ gr. x. M. omn. m. Sumend. R. Tæ. Valer. 3iss. Tæ. Hyoscy. 3ii. aqu. Cinnam f. 3vss. Syrup 3i. M. coch. i. medium 4 <sup>er</sup> . in die. Pil. Aloes cum Myrrha gr. x. h. s. vice Pulv. sub finem morbi.	Cured July 18, ditto
10	B	Elizabeth Brown, æt. 49	4 weeks	March 28, O.P.	-	Cured September 26, ditto



11	M	Sarah Ashby, æt. 29	8 days	April 11, I.&O.P.	Pil. Aloes cum Myrrha gr. v. om. nocte. Pulv. Calumbæ C. 3ss. ter in die. Emp. Canthar. reg. lumborum bis.	Cured July 25,	1815
12	A	Isabella Hemsley, æt. 12	2 months	May 16, I.P. 1816.	-	Cured June 20,	ditto
13	A	Sarah Saxton, æt. 12	4 weeks	March 5, I.P.	-	Cured June 11,	1816
14	M	Isabella Hemsley, æt. 12	8 days	April 9, I.P.	Pul. Jalapæ C. ℥ii. om. m. R. Dec. Cinchon 3vii. Tæ. Cinch. et T. Cardam aa. 3ss. Sodæ Carbon. 3ii. M. 3ss. ter in die.	Cured May 14,	ditto
15	A	Sarah Watson, æt. 10	6 weeks	May 7, I.P.	-	Cured July 16,	ditto
16	C	Mary Martin, æt. 12	2 months	Sept. 17, O.P. 1817.	-	Cured January 28,	1817
17	C	William Hind, æt. 5	2 weeks	January 21, O.P.	-	Cured June 10,	ditto
18	C	Mary A. Coleman, æt. 16	Some months	{ January 21, } { O.&I.&O.P. }	-	Cured August 19,	ditto
19	A	Samuel Johnson, æt. 50	4 months	April 29, I.P.	-	Cured August 26,	ditto
20	C	John Truswell, æt. 2½	6 weeks	March 25, O.P.	-	Cured July 15,	ditto
21	C	Hannah Butler, æt. 26	4 months	April 15, O.P.	-	Cured July 1,	ditto
22	A	Hannah Leavesley, æt. 14	2 weeks	April 23, O.P.	-	Cured December 23,	ditto
23	M	Mary Palmer, æt. 22	2 months	June 3, I.P.	R Mag. Sulph. 3iii. Pulv. Jalap. gr. x. M. ft. Pulv. omni m. sumendus Pil. Rhei C. gr. x. om. n. Pulv. Calumbæ C. ℥i. bis in die. Frict. brach. affect. Linim. Ammon. fort m. et h. s.	Cured July 22,	ditto
24	A	Andrew Battle, æt. 17	4 weeks	Sept. 2, I.P.	-	Cured September 30,	ditto
25	C	Elizabeth Brown, æt. 54	2 years	Sept. 30, O.P.	-	Cured December 2,	ditto
26	C	Mary Farnsworth, æt. 7	3 weeks	Nov. 11, O.P.	-	Cured December 9,	ditto



No.	By whom admi.	Name and Age.	How long ill.	When admitted.	Treatment, &c.	When and how discharged.
27	M	John Towle, æt. 14	5 weeks	1818. March 3, I.P.	Mist. Purg. ʒii. om. m. R. Extr. Bellad. gr. x. Extr. Glycy. ʒss. Pil. x. capt. i. omni nocte Mist. Purg. bis in septimana sub finem morbi.	Cured April 21, 1818
28	C	Hannah Mitchell, æt. 15	11 months	March 17, O. & I.P.	-	Ditto ditto
29	C	Martha Musson, æt. 18	Several yrs.	April 7, I.P.	-	Cured April 28, ditto
30	C	Susan Stapleton, æt. 19	Some mos.	April 28, I.P.	-	Cured May 19, ditto
31	M	John Hemsley, æt. 6	4 weeks	June 16, O.P.	Magns. Sulph. ʒiss. omni m. Pil. Galb. C. gr. v. ter in die. By the Apothecary—Pulv. Jalap. c. Calo- mel. gr. x. omni mane.	Disch <sup>d</sup> . for non-attendance
32	M	Mary Oldham, æt. 11	3 months	July 7, O.P.	Pulv. Jalap. C. ʒii. om. m.	Disch <sup>d</sup> . for non-attendance
33	M	Jane Hayes, æt. 11	4 weeks	August 18, O.P.	The Journal containing this case lost.	Cured September 29, ditto
34	M	Frederick Cockayne, æt. 4	3 years	Sept. 29, O.P.	Ditto ditto	Relieved March 2, 1819
35	A	Mary Wells, æt. 15	3 months	Dec. 22, I.P.	-	O. P. April 20, ditto
36	M	Henry Flinders, æt. 10	2 weeks	1819. January 19, O.P.	The Journal containing this case lost.	Disch <sup>d</sup> . for non-attendance
37	M	Mary Roe, æt. 12	9 weeks	June 15, O.P.	Ditto ditto	Cured November 2, 1819
38	A	Henry Peet, æt. 15	Some mos.	July 20, I.P.	-	Cured August 17, ditto
39	M	Adelaide Robinson, æt. 11	6 weeks	August 17, I.P.	Mist. Purg. ʒiss. omni mane vel p. r. n. Pulv. Ipecac. C. gr. v. omni nocte h. s. Emp. Canth. no. ii. humero sinistro.	Cured September 28, ditto
40	A	Margaret Martin, æt. 13	4 weeks	November 2, O.P.	-	Cured February 15, 1820
41	C	Elizabeth Osborne, æt. 10	4 weeks	Nov. 9, O. & I.P.	-	Cured February 29, ditto
42	C	Sarah Ash, æt. 10	1 week	Nov. 16, O.P.	-	Cured May 23, ditto



43	A	Catherine Raynor, æt. 13	2 months	Dec. 14, O.P. 1820.	-	-	-	Cured February 29, 1820.
44	C	William Extall, æt. 16	4 weeks	January 18, O.P.	-	-	-	Cured April 11, ditto
45	C	Richard Carter, æt. 8	3 weeks	February 29, O.P.	-	-	-	Cured May 9, ditto
46	C	Elizabeth Osborne, æt. 10	Some mos.	May 2, O.P.	-	-	-	Cured July 11, ditto
47	C	Elizabeth Osborne, æt. 10	Some yrs.	August 15, O.P.	-	-	-	Disch <sup>d</sup> . for non-attendance
48	A	Joseph Buck, æt. 16	9 months	Oct. 24, I. & O.P. 1821.	-	-	-	Cured May 22, 1821
49	A	Catherine Raynor, æt. 14	2 weeks	February 6, O.P.	-	-	-	Cured June 26, ditto
50	M	Charlotte Wright, æt. 20	21 months	Sept. 11, O.P.	-	-	-	Disch <sup>d</sup> . for non-attendance
51	M	Sarah Watson, æt. 14	2 months	November 13, I.P.	-	-	-	Cured December 11, 1821
52	M	Orra Clarke, æt. 19	5 weeks	December 4, I.P.	-	-	-	Cured January 8, 1822
53	M	Mary Green, æt. 15	3 weeks	February 5, I.P. 1822.	-	-	-	Cured April 23, ditto
54	A	Eliza Birch, æt. 12	2 months	March 12, O.P.	-	-	-	Cured June 11, ditto
55	M	Anne Harrison, æt. 12	3 months	June 11, O.P. 1823.	-	-	-	Cured September 24, ditto
56	A	Hannah Coleman, æt. 9	3 months	February 11, O.P.	-	-	-	Cured July 8, 1823

Pilæ. Cambogiæ C. gr. x. h. s. s.  
Tæ. Iodini gutt. xv. ad gutt. xxv.  
ter in die. No benefit was derived  
from the means employed in this case.  
Pil. Aloes C. gr. x. h. s. Pulv.  
Rhei C. ʒii. omni mane.  
Pulv. Purg. mane. Enema. Purg.  
p. r. n. Infus. Gentianæ C. ʒss.  
ter in die.

Ol. Crot. Tiglii. Mist. Purg.  
p. r. n. Calomel. et Pulv. Rhei  
h. s. Infus. Cascariillæ ʒviii. Acidi  
Hydrocy gutt. xvi. M. coch. i. lar-  
gun ter in die. Occasioned head-  
ache, ordered Liquor. Arsenicalis  
gutt. vi. ad viii. ter in die. Emp.  
Cantharidis capiti raso.

See Case I.



No.	By whom adm.	Name and Age.	How long ill.	When admitted.	Treatment, &c.	When and how discharged.
57	M	Eliza Clark, æt. 4	12 days	February 18, O.P.	See Case III.	Cured April 15, 1823
58	A	Jane Simms, æt. 16	7 months	March 25, O.P.	-	Cured June 10, ditto
59	M	Elizabeth Osborne, æt. 13	12 months	April 1, I. & O.P.	See Case IV.	Cured September 9, ditto
60	M	Anne Harrison, æt. 13	4 months	April 1, O.P.	See Case V.	Cured September 16, ditto
61	C	Catherine Raynor, æt. 16	2 weeks	April 29, O.P.	-	Cured October 14, ditto
62	C	Sarah Mellors, æt. 16	4 weeks	May 16, I.P.	-	Cured July 15, ditto
63	M	James Wm. Gray, æt. 14	2 months	Sept. 16, I.P.	See Case VI.	Cured October 28, ditto
64	M	Anne Harrison, æt. 13	2 weeks	Nov. 18, O.P.	See Case VII.	Cured January 27, 1824
65	A	Hannah Coleman, æt. 10	Some time	December 2, O.P. 1824.	-	Under treatment
66	C	Mary Ball, æt. 9	8 weeks	February 17, O.P.	-	Cured July 13, ditto
67	A	Mary Paulson, æt. 28	4 weeks	March 6, I.P.	-	Cured May 18, ditto
68	C	Anne Hoffen, æt. 3½	2 years	April 20, O.P.	-	Under treatment
69	M	Elizabeth Osborne, æt. 14	3 weeks	June 15, O.P.	-	Ditto
A slight attack of Chorea. Ta. Iodini gutt. x. ter in die. Aperients p. r. n. Dysentery epidemic, she was attacked by it, Chorea aggravated in consequence.						
70	M	Anne Holmes, æt. 11	4 weeks	June 16, O.P.	See Case XI.	Cured September 5, ditto
71	C	Samuel Jackson, æt. 9	3 weeks	July 13, O.P.	-	Cured September 14, ditto
72	A	Isabella Hemsley, æt. 21	4 weeks	Sept. 21, O. & I.P.	-	Cured October 19, ditto
Total Men.....				19	} Being in the proportion of 1 Male to upwards of 2¾ Females.	
Total Women.....				53		
Total Cases.....				72		

NOTE.—In drawing up the above Table, I discovered a few errors in the statement at page 184, respecting the number and proportion of the Males and Females affected with Chorea, that were treated at the General Hospital of this town, within the time specified; and I beg leave to substitute the above as the correct number and proportion.



# MEDICAL RESEARCHES,

ON THE

*Effects of Iodine in Scrophula, or Struma.*

---

SCROPHULA is a disease of debility, and the disposition to be affected by it is hereditary, as is shewn by every day's experience. Occasionally, however, we meet with it as a primary affection, that is, without our being able to trace it to any ancestor.

The disease generally begins with indolent swellings of the Lymphatic glands: at first, little or no pain, or inconvenience, is experienced from them; but, they continue very slowly and gradually to increase in size, and, at last, become painful when pressed; the skin covering them about this time puts on a reddish purple colour, and they proceed, in a slow and tedious way, one after the other, to suppuration. When the abscesses are opened, or burst of themselves, a *kind* of purulent matter, mixed with little white masses, resembling coagulated albumen, and some viscid matter, are discharged. The abscesses, after being opened, or bursting spontaneously, terminate in ulcers, of an indolent character, without much tendency to spread, but with little or no disposition to heal.



The ulcers, when formed, frequently remain open for many months, and even for years, getting better during the warm Summer weather, and becoming worse during the Winter and Spring. When these sores at last dry up, they always leave unseemly and irregular cicatrices, of a purplish red colour. Other Conglobate glands follow the same course for an indefinite length of time.

The Conglobate glands in the neck, at the angles of the lower jaw, and under the chin, are more frequently affected in this disease, than the same glands in the arm-pits, groins, and hams; indeed, I have rarely found them affected in the latter situation.

Persons of weak and delicate constitutions, whose muscles are soft and flaccid, skin smooth and soft, complexion unusually pale, or florid, inclining to purple, with a shining polished smoothness of the face, tumid upper lip, often chapped, and tenderness or rawness of the edges of the eyelids, are more liable to Scrophula, than others of firm and robust constitutions. It is said, that persons with fair hair, and blue eyes, are more subject to Struma, than those who have black hair and dark eyes. So far as I have had an opportunity of observing, the latter are not more exempt from the disease, than the former,



but it would require very extensive observations, in different countries, to decide this point with certainty.

The disease is certainly not contagious; it cannot even be communicated by inoculation, and seems to depend chiefly upon a peculiar constitution of the system.

The exciting causes of Scrophula in the pre-disposed, are want of proper exercise, living in impure air, inhabiting cold damp houses, using unwholesome food, or having too scanty a supply of what is proper, disorder of the bowels, of considerable duration, atmospherical vicissitudes, particularly a long continuance of cold moist weather, commonly called raw, after fine and warm weather, especially when the person is deficient in warm comfortable clothing.

It is unnecessary to notice the different remedies that have been employed for the cure of this disease, as I am convinced, that the practitioners of the present day will allow, with the late Dr. Cullen, that, "For the cure of Scrophula, we have not yet learned any practice that is certainly, or even generally, successful." \*

---

\* Pract. of Physic, Sec. 1753.



I am very sensible, that the above account of Scrophula is brief and imperfect, and, therefore, beg leave to refer those who may wish for a minute history of this disease, to the numerous treatises on this subject already before the public, and particularly to Professor Russell's excellent work on Scrophula; my principal object being to give an account of the effects of Iodine as a remedy in this disease.

I beg leave to observe, in this place, that I consider Scrophula, or Struma, as only one of a numerous family of diseases, all depending upon the same state of the constitution, but presenting different symptoms, according to the texture of the body in which they occur. Some of these diseases will afterwards be noticed, and the success of the treatment employed will go a considerable way in proving the relationship that exists between them.

As I find these researches growing into a volume faster than I expected, I shall endeavour, as far as I am able, to condense the cases, so that no important fact, or circumstance, may be lost or omitted; and when the cases are too numerous to be detailed, I shall avail myself of tables to give an outline of the practice employed, and to shew the result.



*On the Effects of Iodine in Scrophulous enlargement of the Conglobate Glands.*

---

CASE I.

Sarah Carlin, æt. 17. Admitted an Out-Patient of the General Hospital, the 17th of April, 1821. This patient was evidently of a Scrophulous constitution, and had many of the Conglobate glands in the neck, considerably enlarged, and one above the right elbow joint, with the skin somewhat inflamed. Had had a discharge of matter, sometimes tinged with blood, from the right ear, for ten years, and the sense of hearing, in that ear, was lost. She also laboured under violent inflammation of the right eye, of three weeks standing. This patient also laboured under a certain degree of Bronchocele.\* She was purged, and the eye-lids were leeches freely, several times. The inflammation was so far subdued on the 28th of April, that she had a solution of the Nitrate of Silver dropped into the affected eye, on account of a small hollow ulcer in the cornea; on the 30th, she began to take fifteen drops of the Tincture of Iodine, three times a day, and the following day she swallowed about an ounce of

---

\* See Tabular View, and Notes, N<sup>o</sup>. 18.



the Tincture, which was rejected by vomiting, without any bad effects resulting from the mistake, as has been already mentioned.

On the 9th of May she was ordered twenty drops of the Tincture, three times a day; and on the 12th, the Bronchocele was dissipated, the Conglobate glands were very much reduced in size, the *discharge* from the ear had very much diminished, and she had *recovered* a certain degree of hearing. The eye was free from inflammation, the ulcer in the cornea had healed, her general health was greatly improved, and she was discharged with a supply of medicines to last for fourteen days, which was judged sufficient to complete the cure.

---

REMARKS.—The Iodine was prescribed, in this case, with a view to cure the Bronchocele, but the case afforded me an opportunity, at the same time, of witnessing the effects of Iodine in reducing the swelling of the Conglobate glands, from Scrophula; and also of observing the good effects of Iodine in diminishing a morbid discharge from the ear, and restoring hearing, in a certain degree. Although the leeches had, no doubt, a very considerable share in diminishing the inflammation of the right eye, in this instance, I have no doubt, that the Iodine had a highly beneficial effect in removing the ophthalmia, and curing the ulcer in the cornea, as will more fully appear when I have brought forward the facts I have observed respecting the exhibition of Iodine in Scrophulous Ophthalmia. From this time I began to exhibit the Tincture



of Iodine in Scrophulous enlargement of the Glands, in Scrophulous Ophthalmia, and in Deafness, being at that time unacquainted with the employment of Iodine in Scrophula, which has since being announced by the ingenious Dr. Coindet, of Geneva. \*

---

## CASE II.

Joseph C——, æt. 40, frame-work knitter, Hucknall Torkard, May 19, 1821. One of the Conglobate glands, near the angle of the left jaw, is enlarged to about the size of a walnut, and is sore when pressed. The corneæ of the eyes are dim from specks, in consequence of Scrophulous Ophthalmia of seven years duration. The upper lip is very thick, prominent, and chapped. Bowels regular. Pulse natural.

Sumat Pilulæ Cambogiæ Comp. gr. x. h. s. nisi nimis fusa est alvus.

R. Tæ. Iodini ʒss. Capiat gutt. xv. ter in die ex aqua.

June 2. The gland is nearly reduced one half, and is free from soreness. Eyes less inflamed. The upper lip is not so much swollen. Bowels open by the pills. Appetite better, and his general health is improved.

Cont<sup>r</sup>. remed.

---

\* Coindet's 3 Mem. on Iodine Trans. by Johnson.



June 16. The left eye is more inflamed. Gland about the size of an olive, and is free from pain or soreness, except when pressure is made upon it. Bowels tardy.

Cont<sup>r</sup>. Pilul. Capiat Tæ. Iodini gutt. xx. ter in die, et Magnes. Sulphatis ʒii. primo mane si tarda est alvus.

July 7. The gland is smaller and softer. Left eye still dim, but his vision is considerably improved, and objects do not appear red now, but nearly of the natural colour. Feels better, and stronger.

Capiat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. alia.

July 21. Some return of inflammation in the left eye, he says from a fresh cold. The gland is very small, and feels soft and skinny.

Cont<sup>r</sup>. remed.

August 11. The gland is so small, it is not to be observed. The left cornea is still dim.

Cont<sup>r</sup>. remed.

R Argenti Nitratis .....gr. ii.

Aquæ Distillatæ ..... ʒi.

Solve. Instillentur gutt. iv. solutionis in oculo sinistro mane et hora somni. Cont<sup>r</sup>. alia.

September 8. The remains of the gland are



scarcely perceptible. Says his eyes are much better, and clearer than they have been for two years past.

Omitt<sup>r</sup>. Ta. Iodini. Cont<sup>r</sup>. alia.

October 26. Patient says, that the gland has almost disappeared. Left eye much clearer and stronger.—Discharged cured.

### CASE III.

Frances Huntington, æt. 18, lace runner, was admitted an Out-Patient of the General Hospital, the 8th of May, 1821, for the cure of Bronchocele.\* She at the same time laboured under a swelling of considerable size, near the angle of the left jaw, which, to the touch, felt very much like the Bronchocele, but when it was somewhat reduced, I could distinguish that it was made up of a group of enlarged Conglobate glands, connected together by cellular substance, with, perhaps, some serous fluid effused. The patient had never menstruated; but when about fifteen years of age, used to bleed much at the nose. Pulse small and weak. Skin cool. Face pale. Appetite bad.

---

\* See Table, N<sup>o</sup>. 20.



Was directed to take five grains of the Pil. Cambogiæ C. every night, and ten drops of the Tincture of Iodine three times a day, in water.

The Tincture of Iodine was gradually increased to twenty drops for a dose, and on the 15th of June, I find it stated in the Journal, that the Bronchocele and tumour at the angle of the left jaw, had both diminished considerably in size. General health improved. Bowels open.

The tumours continued gradually to subside under the use of the Iodine, which was at this time increased to twenty-five, and afterwards to thirty drops for a dose. When she began to take twenty-five drops, they made her sick, the dose was diminished for a time, and as she became accustomed to the medicine, the number of drops were increased.

On the 14th of September she menstruated for the first time, and continued to do so regularly. The bunch of glands subsided faster than the Bronchocele in this instance. The patient's health improved, and she gained strength under the use of the Iodine, although closely confined at the sedentary employment of lace running, during the whole time she was under my care.—December 28. Discharged cured.



## CASE IV.

Mary Wride, æt. 23, lace mender. Admitted an Out-Patient of the General Hospital the 1st of April, 1823. For eleven years has laboured under swelling of the Conglobate glands in the neck, at the angle of the jaw, and before the ear, on the left side. The glands have now attained a large size, and occasion a considerable degree of deformity. Some of the tumours begin to be painful. The patient informs me, that she has been under the care of different practitioners, and that the late celebrated Mr. Hay, of Leeds, was consulted about ten years ago, respecting her case, but that she derived no benefit from any of the means employed. Her bowels are generally tardy. Hair and eyes dark, complexion swarthy, upper lip thick, and chapped.

Sumat ægra Pil. Cambogiæ Comp. gr. x. vel. xv. omni nocte h. s. Capiat Tæ. Iodini gutt. xx. ter in die ex aqua.

April 18. It requires two pills to keep the body open. She began to take twenty-four drops of the Tincture for a dose, on the 4th inst. The glands are rather smaller and softer. The Tincture warms her throat and stomach, but does not make her sick. Tongue a little furred.

Cont<sup>r</sup>. remed.



R Adipis præparatæ..... ʒi.

Tæ. Iodini ..... ʒi.

M. fiat Unguentum ; fricentur partes affectæ  
ʒi unguenti omni nocte h. s.

May 9. Has lately had a slight sore throat, from cold, but is now well. All the glands are very much reduced in size, and are less painful. General health better.

Cont<sup>r</sup>. remed.

May 23. There is less general swelling, and the glands are more detached and distinct since the tumour has subsided so much. Catamenia regular. Omitted the medicines for three days during the period.

Cont<sup>r</sup>. remed.

June 6. The glands are very much reduced in size. The Iodine agrees very well. Says that many persons have told her of her improved looks. Upper lip not so much tumified.

Cont<sup>r</sup>. remed.

June 20. Is very much confined to the house, and works late. The tumour continues gradually to subside. The upper lip is very much reduced in thickness. Bowels open by the Pills and Sulphate of Magnesia.

Cont<sup>r</sup>. alia.



July 4. The glands have diminished considerably since last report, and her general health continues to improve.

Cont<sup>r</sup>. remed.

July 18. Has been in the country for fourteen days. The glands have subsided very considerably since last report, although she has taken no medicines.

Cont<sup>r</sup>. remed.

September 19. The swellings are so nearly dissipated, that no deformity is occasioned by the tumefaction that remains. Feels in very good health, and menstruates more copiously than she did when admitted. As the patient attends irregularly, now that she is nearly well, I have ordered her a supply of the Medicines to last a fortnight, and have discharged her.—Cured.

---

*On the Effects of Iodine in Scrophulous Ulcers.*

---

**CASE I.**

Miss Angelina S——, æt. 14, June 6, 1821. Has laboured under Scrophulous enlargement of the Conglobate glands, in both sides of the neck, for two years. A bunch of glands in the left



side of the neck, suppurated and burst in March 1820, the ulcer healed up the following October, and broke out again in March last, and still continues to discharge. About the 1st of May, one gland, near the right angle of the jaw, and another near the clavicle of the same side, in a state of suppuration, were opened with a lancet, and a considerable quantity of a curdy purulent matter was discharged; they are now ulcers, and discharge a little. The patient also labours under some degree of enlargement of the Thyroid gland. Her father is full of scars, from Scrophulous Ulcers, that have formerly existed in his neck, and from the chin to the ears. She is of a delicate and weakly constitution. Has taken Pulv. Rhei. gr. x. and Magnes. Sulph.  $\text{z}\text{ii}$ . every third day, and Tinc. Ferri Mur. gutt. x. three times a day, in water, for the last five weeks. The ulcers look better upon the whole, but as they have made no progress in healing for the last fourteen days, I have entered the case in my Journal, and have directed her to take ten drops of the Tincture of Iodine, three times a day, in a glass of water, instead of the Muriated Tincture of Iron, and to continue the Ceratum Resinæ dressings as before. On the 13th of June, all the glands were sensibly diminished in size, and the ulcers had greatly improved in appearance, with a considerable diminution of the purplish redness of the skin



surrounding the ulcer. The Tincture of Iodine made her slightly sick at first, but does not occasion any inconvenience at present. Bowels regular, but stools not black as when she took the Muriated Tincture of Iron.

Capiat Tæ. Iodini gutt. xii. ter in die. Cont<sup>r</sup>. alia.

June 27. The Conglobate glands continue to subside, and the ulcers to heal, two of them have nearly closed. General health improved, and her food agrees now.

Cont<sup>r</sup>. remed.

July 4. The old ulcer, and the one near the clavicle, have cicatrized. The ulcer behind the angle of the jaw, and below the ear, continues open, and discharges; the skin around is of a reddish purple colour. On the 30th ultimo, she began to menstruate for the first time, and the discharge has not yet entirely ceased. The Conglobate glands continue to subside, and her general health to improve.

Cont<sup>r</sup>. remed.

July 18. The ulcer seems more disposed to heal, but the skin around is still of a deep brownish red colour. Says her appetite never was so good before. The Thyroid gland is still hard, and larger than natural.

Capiat Tæ. Iodini gutt. xx. ter in die.



August 8. Has been out of town for fourteen days. She has taken only eighteen drops of the Tincture for a dose, as she found twenty to disagree. The ulcer continues to improve in appearance, and discharges less.

Cont<sup>r</sup>. remed.

September 5. The ulcer is not larger than the diameter of a crow's quill. The edges of the sore have been touched with Lunar Caustic, about once a week. Glands continue to subside. Menstruates regularly. Has taken twenty-three drops of the Tincture for a dose, for fourteen days past; says they feel hot in her throat when taken in a cup full of water.

Capiat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>. alia.

Sept. 26. The Tincture has been gradually increased to forty drops for a dose, since last report. The ulcer to be washed with a weak solution of the Sulphate of Copper, and to be dressed with the Ceratum Cetacei.

Sumat Tæ. Iodini gutt. xl. ter in die.

October 17. Appetite good. Catamenia regular. Bowels open. Tincture agrees. The ulcer is larger, from a portion of the purplish red skin having sloughed from loss of vitality.

Cont<sup>r</sup>. remed.



November 7. Has not been able to procure any Iodine for fourteen days. The ulcer continues to enlarge by the purplish red skin running into ulceration. Catamenia adsunt. Five days ago began to take twenty-five drops for a dose. There is still a good deal of hardness and enlargement of the glands, in the right side of the neck.

Capiat gutt. xl. Tæ. Iodini ter in die. Cont<sup>r</sup>. alia.

January 30, 1822. For the last week omitted the Tincture of Iodine, by my desire ; and as no progress has been made in healing the ulcer, for the last month, the Iodine is ordered to be discontinued.

R. Tæ. Cinchonæ ʒii. Capiat ægra Cochlearia ii. minima (tea-spoonsfull) ter in die ex aqua. Cont<sup>r</sup>. alia.

February 13. Ulcer looks better. Glands rather smaller. Bowels open. Appetite better of late.

Capiat Coch. iii. minima Tæ. Cinchonæ ter in die. Cont<sup>r</sup>. Ceratum Cetacei et Pulv. Aperiens p. r. n.

February 20. The ulcer, and skin around, which is a little excoriated, are to be washed



daily with a dilute solution of the Sulphate of Zinc.

Cont<sup>r</sup>. remed.

March 13. The Zinc lotion has removed the rawness of the skin. A Conglobate gland near the left clavicle, suppurated, and was opened about eight days ago.

Omitt<sup>r</sup>. Tæ. Cinchonæ. Cont<sup>r</sup>. alia. Sumat Tæ. Iodini gutt. xxx. ter in die.

April 3. She feels better since she has resumed the use of the Iodine.

Cont<sup>r</sup>. remed.

May 1. Two glands have ended in suppuration, and been opened. As no benefit appears *now* to arise from the internal exhibition of the Iodine, it is ordered to be discontinued, and the patient is desired to take ten drops of the Muriated Tincture of Iron, three times a day.

May 15. Another abscess was opened on the 8th instant. The ulcers look better.

Cont<sup>r</sup>. Tinct. Ferri Mur. Pulv. Aperiens, p. r. n. et Cerat. Cetacei.

May 29. Glands in the neck smaller and softer, and the ulcers seem disposed to heal.

Cont<sup>r</sup>. remed.



**June 12.** The hardness in the site of the ulcers is very much gone, and there is that white appearance at the edges of the ulcers, which attends cicatrization when it is going on quickly. Countenance wears the appearance of health, and the eyes are brilliant.

Cont<sup>r</sup>. remed.

**June 26.** The ulcers continue to heal. Appetite good. Menstruates regularly.

Cont<sup>r</sup>. remed.

**July 3.** During the last fourteen days the ulcers have healed rapidly. The Conglobate glands that have not suppurated, have subsided to nearly the natural size. Is directed to wash the ulcers with equal parts of brandy and water, instead of the Sulphate of Zinc lotion.

Cont<sup>r</sup>. remed.

The ulcers continued to heal, and were all cicatrized about the latter end of July, and the patient was in good health and spirits. I recommended her to wear warm clothing during the Winter, and to take a dose or two of the Muriated Tincture of Iron daily, during the continuance of the cold weather, with the view of preventing a relapse.



REMARKS.—I frequently see this patient, and am happy to be able to state, that she has remained free from the disease ever since, and has enjoyed excellent health. The Tincture of Iodine had very good effects in this case, and the last ulcer was almost closed when, unexpectedly, it became worse, and some of the glands also began to swell, and afterwards went on to suppuration, which shewed, that the Iodine had lost its salutary influence. I, therefore, directed her to take Tincture of Bark, and not finding that to be of much service, I resumed the use of the Murriated Tincture of Iron, which had a much better effect the second time it was exhibited, than it had the first. I am of opinion, that had I given the Iodine in doses of from ten to fifteen drops, three times a day, it would have had a better effect than the doses of forty drops, that were latterly given, and still better, *perhaps*, if the Tinctures of Iron and Iodine had been exhibited, each for a month in turns, as the most powerful medicines often lose their effect when long continued.

---

## CASE II.

Charlotte Blighton, æt. 39, married, from Mansfield. Admitted an In-Patient of the General Hospital, the 2d of July, 1822. Has been ill for nineteen months. There is an abscess between the right mamma and the sternum, and another in the left side below, and posterious to the axilla. Coughs a little. Flesh much reduced. Skin sallow. Bowels too open. Much troubled with flatulence. Pulse 96, small and soft.



Capiat ægra Pilulæ Cambogiæ Comp. gr. v.  
omni nocte h. s. et Tæ. Iodini gutt. xx. ter in  
die ex aqua.

A Linseed Meal Poultice was ordered to be applied to the tumour, or rather abscess, in the left side of the chest, on the 6th of July. On the 14th, the abscess in the right side of the chest was opened by my excellent colleague, Mr. W. Wright, Surgeon, and six ounces of purulent matter were discharged.

July 22. The abscess that was opened has nearly healed, and the patient has agreed to have the other opened, to which she objected on the 14th instant. Has continued to take the medicines prescribed on her admission.

July 29. The abscess was opened on the 24th instant, and about an ounce and a half of purulent matter was discharged. Medicines continued.

August 3. The abscess that was first opened has been healed for some days, and the other has ceased to discharge, and is almost cicatrized. Her general health has improved very much during the time she has resided in the Hospital, and on leaving it this day, she was furnished with a supply of the Medicines to last her for ten days.



## CASE III.

Thomas Straw, æt. 24, frame-work knitter, of Tibshelf. Was admitted an In-Patient of the General Hospital, the 2d of October, 1821. This patient, when admitted, had been ill nine months, and from the beginning of his illness, had laboured under pain in the loins. He also laboured under five Scrophulous Ulcers in different parts of the body. When admitted, his face was thin and pale, his sleep unsound, and he was troubled with night sweats. I prescribed for him xv. drops of the Tincture of Iodine, three times a day, and directed the body to be kept open by Aperient Medicines.

The Tincture of Iodine was increased to twenty drops on the 4th, and to twenty-five on the 8th instant, at which time the ulcers had improved in appearance.

On the 12th, an ulcer in the scalp had healed, leaving a considerable pit, or depression, and all the others were in a healing state. Medicines continued. The ulcers continued to heal, and to assume a more florid and healthy appearance; but it is remarked on the 18th of October, that his countenance was pale and thin, as in consumptive cases, and that he was troubled with some cough.



Nov. 3. Several of the ulcers were healed, and the others were nearly so, when on the 10th of November, I found a considerable enlargement, with distinct fluctuation in the right hip. Tincture of Iodine increased to thirty drops, three times a day.

November 12. My colleague, Mr. Wm. Wright, saw the patient this day, and recommended Poultices to be applied to the right hip, which was accordingly done, and the patient found them to relieve the pain.

His health continued to improve till the 22d of November, and the ulcers were nearly healed, but he would not agree to have the matter that had collected at the posteriour part of the pelvis, and in the right hip, drawn off. He was directed to take thirty-five drops of the Tincture of Iodine, and the Sulphate of Magnesia, p. r. n.

He was discharged at his own request, on the 4th of December, 1821, after the ulcers had all healed under the use of the Tincture of Iodine.

---

NOTE.—It is impossible that any medicine could have had a more favourable effect in healing Scrophulous Ulcers than the Iodine in this instance. As the patient would not allow the matter to be evacuated, he was discharged at his own request, and I have not since heard any thing of him.



## CASE IV.

Mary Anne S. æt. 5, Nottingham, February 4, 1822. Was under my care for Scrophulous Ulcers in the right middle finger, and in the inside of the right arm, above the elbow joint, in the Winter of 1818 and 1819, and was cured by the Tinct. Ferri Mur.

She had the natural Small Pox about nine weeks ago, and since that time the old cicatrices have given way, and ended in ulceration, and the skin around the ulcers is of a reddish purple colour. The child also labours under general debility. Bowels regular.

Capiat Tæ. Iodini gutt. vi. ter in die ex aquæ cyatho. Curentur Ulcera Cerato Cetacei.

Feb. 7. The ulcers begin to heal. Bowels open without physic.

Sumat Tæ. Iodini gutt. viii. ter in die, et Magnes. Sulphat. ʒi. mane, p. r. n.

Feb. 18. Continues to recover. Appetite good.

Capiat Tæ. Iodini gutt. x. ter in die. Cont<sup>r</sup>. Magnesiae Sulphas, p. r. n.

February 28. Ulcers better, and more superficial. Bowels tardy.

Capiat Infus. Sennæ ʒss. mane, p. r. n. Cont<sup>r</sup>. Ta. Iodini.



March 7. The ulcer in the arm is nearly healed, and also in the finger. I find that she has three Scrophulous sores, viz.: two in the left side of the face, near the ear, and one under the chin, which I knew nothing of before.

Cont<sup>r</sup>. remed.

March 14. I find the ulcer in the arm covered with a small scab; the other sores are better.

Cont<sup>r</sup>. remed.

March 27. Has lately had a catarrhal affection. The ulcers continue to heal.

Cont<sup>r</sup>. remed.

May 13. Has been in the country for some time. One gland below the jaw on the right side has suppurated, and is in a state of ulceration. Another Conglobate gland below the lobe of the right ear, is running on to suppuration. The original ulcers are healed.

Cont<sup>r</sup>. remed.

May 20. Was not so well last week, and the Tincture was omitted for a few days. There is a chain of swollen glands across the throat.

Cont<sup>r</sup>. remed.

June 10. Three of the glands last mentioned



are in a state of suppuration. The Iodine agrees. Bowels open.

Cont<sup>r</sup>. remed.

June 17. Two of the abscesses have burst since last report. The other ulcers continue to heal.

Cont<sup>r</sup>. remed.

July 8. The ulcers have nearly all healed. One abscess still contains a little matter.

Cont<sup>r</sup>. remed.

July 22. Her general health is very much improved. The ulcers have nearly all healed.

Cont<sup>r</sup>. remed.

August 19. Is in very good health, and all the ulcers have been healed for the last three weeks.—Cured.

---

NOTE.—The grandmother of this child called on me about the beginning of December, 1824, and from her I learnt that the child has continued in good health ever since.

---

The above cases are, I conceive, sufficient to shew the great efficacy of Iodine exhibited internally, as a remedy in Scrophula, and that it possesses the wonderful powers, when cautiously exhibited, of correcting and improving strumous



constitutions. This, I believe, is partly owing to its stimulant and tonic powers, but the whole of my experience with this potent medicine, leads me to believe, that it also possesses the remarkable power of correcting morbid action in many diseases with which the human body is assailed, analogous to that of Mercury in Syphilis; and I have no doubt, that the great success I have had in the treatment of Palsy and Chorea, by this new remedy, has been, in a great measure, owing to its correcting morbid action in the brain and spinal marrow, at the same time that its other qualities come in aid of this highly valuable property.

I shall next proceed to detail a few cases, shewing the highly beneficial influence of Iodine in the cure of a species of disease, that has been properly enough denominated Scrophulous Ophthalmia, which will further illustrate what has been advanced above.

---

*On the Medical Effects of Iodine in Scrophulous Ophthalmia.*

---

This species of Ophthalmia is invariably connected with a strumous state of the constitution, and is often attended with some well-marked symptom of Scrophula.



This disease generally begins with swelling, and purplish redness of the edges of the eye-lids, sometimes there is ulceration, with the loss of the eye-lashes, and the eye-lids are generally glued together in the morning. The tunica conjunctiva of the eye-lids is generally very vascular, and slight causes will often excite inflammation in the conjunctiva, covering the eye itself in persons of a strumous habit. In many cases we meet with blood vessels extending across the eye, giving rise to specks in the cornea, in every degree from a slight cloudiness to confirmed opacity. Sometimes small pustules form in the edges of the eye-lids, and even in the cornea. Very often there is intolerance of light, with profuse lachrymation, so that the patient dares not open his eyes, but peers through his eye-lids when the light is obscure.

This species of Ophthalmia is generally difficult to cure, and when this is nearly accomplished, we often find slight causes to occasion a relapse, to our great sorrow and mortification. Since I have employed Iodine internally as the principal remedy in this disease, I have found the complaint to yield much more readily, and, what is of very great importance, that it is much less liable to return.

I shall take no notice of the remedies usually



employed, but proceed at once to detail the treatment by Iodine, which I consider superiour to every other mode, because it corrects the state of the constitution, on which the disease depends.

---

### CASE I.

Anne Moore, æt. 52, from Stapleford. Admitted an Out-Patient of the General Hospital the 29th of May, 1821. The eyes are very much inflamed with intolerance of light. The edges of the eye-lids, and tunica conjunctiva, lining the eye-lids, are also inflamed. Has been subject to inflammation of the eyes for many years, and has nearly lost all useful vision. Bowels generally costive. She was directed to take two ounces of Purging Mixture every morning, when necessary; to apply twelve leeches to the eye-lids, and to encourage the discharge of blood by warm emollient poultices, and the following day to apply pieces of soft old linen, wet with a solution of Superacetate of Lead, to the eye-lids. On the 8th of June, when she returned to the Hospital, the inflammation was very much gone, and the intolerance of light very much diminished, so that I could examine the eyes minutely, and found great opacity of the cornea of each eye, and vision very bad. She was directed to continue the



Purging Mixture, and Saturnine Lotion to the eye-lids, and to drop six drops of the following solution into each eye at bed-time.

R Argenti Nitratis.....gr. iv.  
 Vini Opii..... 3ss.  
 Aquæ Distillatæ..... 3iss.

June 22. Eyes much clearer, and the inflammation is nearly gone.

Cont<sup>r</sup>. remed.

July 6. The eye-lids are always glued together in the morning. Eyes clearer. The edges of the eye-lids to be anointed with the Unguentum Zinci, every night. Medicines to be continued.

July 20. The specks gradually waste away, and her vision improves by slow degrees. The patient labours under a certain degree of Bronchocele, of six or seven years standing.

Sumat ægra Tæ. Iodini gutt. xv. ter in die.  
 Cont<sup>r</sup>. alia.

August 10. The left eye is better, the right cornea is still very dim.

Aug<sup>r</sup>. Nitras Argenti ad gr. vi. Cont<sup>r</sup>. alia.

August 21. Eyes much clearer. Broncho-



cele reduced in size. (This case has been overlooked in my report.)

Cont<sup>r</sup>. remed.

September 21. Says that her eyes are clearer, and freer from inflammation than they have been for years. Can read print of the ordinary size, and when admitted could not distinguish a letter. Her general health is much improved.

Oct. 19. The inflammation is quite removed, and she says, that her eyes have not been so well for the last fourteen years, as they are at present. Can read print of the ordinary size, with the assistance of spectacles. Says, that at one time she could not see her child at the breast. Vision is more perfect in the left than in the right eye.—Cured.

---

NOTE.—The Iodine certainly promoted the cure in this case very materially, and the patient, although formerly subject to repeated attacks of Ophthalmia, has remained free from it since this medicine was exhibited, which is now upwards of three years.

---

## CASE II.

Anne James, æt. 25, of Southwell, chevener.  
Admitted an Out-Patient of the General Hos-



pital, the 4th of December, 1821. For two years has laboured under Ophthalmia Tarsi, inflammation of the eyes, opacity of the corneæ, and dimness of sight. She complains of intolerance of light, and sheds a profusion of tears when it is admitted. Complains of a degree of dizziness. Eye-lids glued together in the morning. She has also laboured under some degree of enlargement of the Thyroid gland for the last seven years. \* Bowels generally tardy.

R Pulv. Rhei Comp. .... ʒi.

Magnes. Carbon. .... ʒi.

Misce, fiat Pulvis omni mane, si tarda est alvus, sumendus. Illin<sup>r</sup>. tarsi palpebrarum Ung. Hydr. Præcip. Alb. omni nocte h. s. Sumat ægra Tæ. Iodini gutt. xx. ter in die ex aquæ cyatho.

December 14. The dizziness has left her, and she can now bear the light without shedding tears. Rawness of the eye-lids very much gone. Bowels open.

Cont<sup>r</sup>. remed.

R Argenti Nitratis.....gr. ii.

Aquæ Distillatæ..... ʒi.—Solve.

Instill<sup>r</sup>. gutt. vi. solutionis in oculo singulo m. et h. s.

December 28. Eyes much better. Has had

---

\* See Case 31.



violent head-ache for a week, with sickness at stomach, and a disagreeable taste in her mouth in the morning. Bowels tardy.

Cont<sup>r</sup>. remed. Sumat Pilæ. Cambogiæ Comp. gr. x, omni nocte h. s.

January 11, 1822. Her eyes continue to improve.

Sumat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>. alia.

January 25. Eyes much better, but at present there is some disposition to a return of the inflammation.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirudines vi. palpebris q. p.

February 22. Bronchocele is nearly dissipated. Leech bites bleed well. Dimness of the eyes nearly removed. Edges of the eye-lids still a good deal tumefied, and of a purplish red colour.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirud. vi. palpebris.

March 8. Eyes better and stronger. Bronchocele smaller and softer. For the last week she has been troubled with pain in the stomach, after taking the Tincture of Iodine. She is desired to drink a cup of tepid water after taking the Iodine.

Cont<sup>r</sup>. remed.



March 22. Continues to improve.

Appl<sup>r</sup>. hirud. vi. palpebris. Cont<sup>r</sup>. alia remed.

April 6. Her eyes are much better, the inflammation is removed, and her vision is greatly improved. The goitre is quite dissipated. Menstruates for three days, and she thinks in a greater quantity than usual, and afterwards has some leucorrhœa, which she never had before. Pulse 72, and soft. Tongue clean. Body open by medicine.

Omitt<sup>r</sup>. Ta. Iodini. Cont<sup>r</sup>. alia remed.

R Infus Rosæ.....O. i.

Tæ. Cinchonæ .....

—— Cardamomi..... āā. f. 3i.

Acidi Sulph. dilut..... f. 3iss.

Misce, ft. Mistura cujus capiat ægra 3ss. quater in die.

April 19. The patient reports herself better. Eye-lids still disposed to be glued together in the morning, when she omits the ointment.

Cont<sup>r</sup>. remed.

May 17. Has been troubled with piles, and some discharge of blood, for the last fourteen days. Menstruates now in the usual quantity. Eye-lids still tender.

Omitt<sup>r</sup>. Infus. Rosæ. Cont<sup>r</sup>. alia. Sumat Tæ. Iodini gutt. xx. ter in die.



June 14. The left eye is inflamed, and there is a small speck in the cornea.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirud. vi. palpebris sinistris. Instill<sup>r</sup>. Vini Opii guttæ vi. in oculo sinistro m. et h. s. vice Solut. Arg. Nitr. Imponatur Emp. Cantharidis nuchæ, h. s.

June 28. Cont<sup>r</sup>. remed.

July 23. Her eyes are quite well and clear. Vision perfect. Says that she never felt better, or so well, in her life.—Cured.

---

### CASE III.

Anne Brittle, æt. 24, of Carlton. Was admitted an In-Patient of the General Hospital, the 15th of October, 1822. For the last fourteen days has laboured under inflammation of the left eye, which has terminated in opacity, and ulceration of the cornea. She informs me, that she had a similar attack in the right eye, ten months since, which has left a speck in the right cornea. The eye-lids are tumefied, and the edges red. Is of a strumous constitution, which is indelibly marked by a number of cicatrices in the neck, and under the chin, where scrophulous ulcers formerly existed. Complains of weakness. Appetite bad. Bowels regular. The eye-lids have been leeches.



Capiat Pilæ, Cambogiæ Comp. gr. x. vel. xv.  
h. s. si tarda est alvus. Sumat Tæ. Iodini gutt.  
xx. ter in die ex cyatho aquæ.

R Argenti Nitratis..... gr. ii.  
Aquæ Distillatæ ʒi. solve. Instill<sup>r</sup>. gutt.  
vi. solutionis in oculo sinistro m. et h. s.

October 18. Eye less inflamed. Feels better  
in herself. Bowels moved three or four times  
by the pills. The drops make her a little sick,  
owing, perhaps, to her having taken them in  
only a spoonful of water. Is desired to take  
them in a wine glassful of water in future.

Cont<sup>r</sup>. remed,

October 23. She came into the Hospital  
yesterday. The cornea is much clearer, and  
she is every way better. Bowels open.

Cont<sup>r</sup>. remed.

October 31. There is a small deep scar on  
the site of the ulcer, in the cornea. The opacity  
goes off very fast, and there is much less red-  
ness and tumefaction of the eye-lids. Feels  
better in her general health. Body regular.  
The drops have not made her sick since she has  
taken them in a greater quantity of water.

Sumat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>,  
Pilæ, Cambogiæ C. p. r. n. Omitt<sup>r</sup>. alia.



November 2. She is much better, the specks in both eyes continue to fade very fast, and the inflammation is nearly gone.

Cont<sup>r</sup>. remed.

November 4. Can see better with the left than with the right eye. The cicatrix in the former is very small, and the opacity disappears very fast.

Cont<sup>r</sup>. remed.

November 11. The speck in the left cornea continues to fade, and the cicatrix is very small and translucent. The old speck in the right eye has not faded in the same degree as that in the left.

Cont<sup>r</sup>. remed.

November 18. There is no redness or swelling of the eye-lids remaining, and the inflammation is quite gone. The specks continue to fade.

Cont<sup>r</sup>. remed.

Nov. 28. The specks continue to disappear.

Cont<sup>r</sup>. remed.

December 10. She can now see very well with the left eye, and the specks in the right continue to fade. Has got Medicines to last fourteen days.—Discharged cured.



## CASE IV.

Amy Watson, æt. 18, of Calverton, April 24, 1824. This young woman has laboured under Scrophulous Ophthalmia for five years. The eyes are inflamed, and there is so great a degree of opacity of the right cornea, that all useful vision is lost. The cornea of the left eye is also dim. The eye-lids are swollen, and the edges of a purplish red colour. The left eye is very watery with intolerance of light. Complexion florid. Lips rather thick. Menstruates at the end of every third week. Has lately been under the care of a medical gentleman for six weeks, without any benefit. Her mother informs me, that she has been under the care of different medical men, during the last five years, without any relief; on the contrary, she states, that her daughter has been getting worse and worse. I thought this a favourable opportunity to try the powers of Iodine, as I was convinced, from the talents of the medical gentlemen to whom this unfortunate young woman had applied for relief, that it would be to no purpose to recur to the means usually employed in similar cases.

Appl<sup>r</sup>. hirud. vi. palpebris, q. p. Capiat Pilæ. Cambogiæ Comp. gr. x. omni nocte h. s. et Tinct. Iodini gutt. x. ter in die ex aquæ cyatho vinoso.



May 1. Only three leeches would bite, but the wounds bled freely. The eyes and eye-lids are much less inflamed. Less intolerance of light, and the patient says she feels much better.

Denuo appl<sup>r</sup>. hirudines vi. palpebris. Capiat Tæ. Iodini gutt. xii. ter in die. Cont<sup>r</sup>. Pil. Cambogiæ C.

May 15. Says that her health is improved. Three weeks ago she could not see any object with the right eye, now she can discern a pin with it. The left eye is much clearer. Has sometimes taken fifteen drops to a dose.

Cont<sup>r</sup>. Pilæ. Cambogiæ C. Sumat Tæ. Iodini gutt. xv. ter in die.

May 29. The eyes are quite free from inflammation, and the eye-lids from redness and tumefaction. Still wears a green shade. There is a thin speck in the cornea, opposite the pupil of the right eye, but the patient can see to a considerable distance with that eye, and read print of the usual size. General health is very much improved. Her mother remarks, that nothing ever did her daughter good till she took the medicines prescribed above.

Cont<sup>r</sup>. remed.

June 19. Much better, and can see so well that she wishes to begin to work.

Cont<sup>r</sup>. remed.



July 3. There is a very thin speck in the right cornea, which scarcely affects her vision. In other respects she is quite well.

Cont<sup>r</sup>. remed.

R Argenti Nitratis ..... gr. ii.  
Aquæ Distillatæ ..... ʒi.

Solve. Instill<sup>r</sup>. guttæ vi. solutionis in oculo dextro omni nocte h. s.

October 16. Continues in perfect health. and the speck in the right cornea has almost disappeared, and scarcely affects her vision.

I recommended the patient to continue the Iodine about fourteen days longer. I have not seen or heard of her since. It is quite unnecessary for me to make any remarks on this case, those who read it cannot fail to be convinced of the great powers of Iodine in the cure of Scrophulous Ophthalmia; and, so far as my experience goes, relapses are much less frequent after Iodine, than when the usual means have been employed.

---

I have now detailed as many cases of Scrophula and Scrophulous Ophthalmia, as I think are necessary to shew the great remedial powers of Iodine in curing these stubborn and untractable diseases.



It was my intention to have given a table of the other cases treated by me since April, 1821, but on mature consideration, I think the space it would occupy may be more usefully employed, and particularly, as two eminent physicians, Dr. Coindet, and Sir Andrew Halliday, have already announced the benefit they have derived from the employment of Iodine, as a remedy in Scrophula. I may, however, briefly observe, that since the date mentioned above, I have treated upwards of eighty cases of Scrophula, and Scrophulous Ophthalmia, by the internal exhibition of Iodine, sometimes combined with its external employment in the form of friction; and, in a very large proportion of the cases, when the medicine was persevered in, the disease was either cured, or the general health and local disease very much ameliorated. Several of the patients, after calling upon me two or three times in course of the first month, and finding themselves better, never returned, so that I do not know the final issue of these cases, but from time to time I learn, by accident, that a cure has been accomplished in some of the cases alluded to.

I beg leave, however, to observe, that any man who expects to cure every case of Scrophula, by Iodine, or by any other remedy, will find himself very much disappointed, as the



external symptoms of Struma are very often complicated with tubercles in the lungs, which I fear are beyond the power of Iodine, or of any medicine we possess, to dissipate, when once *fully* formed. At the same time I must say, that I am not without hope, that in Iodine we possess a remedy that bids fairer than any other to *prevent* the formation of tubercles, or to dissipate them in their *incipient* state. I have had occasion to exhibit Iodine to many persons of consumptive families, and I have been watching the result with attention for the last two or three years; but it will require many years, and extensive observation, to come to an accurate conclusion on this highly important subject. But, with respect to the efficacy of Iodine in Scrophula and Scrophulous Ophthalmia, I think my experience warrants me in pronouncing it to be, by far, the most powerful and energetic medicine that I have employed in the cure of these diseases.

Of the importance of pure air, wholesome food, warm clothing, comfortable lodgings, and a due proportion of exercise, as contributing to the cure of Scrophula, every well instructed practitioner is sufficiently aware, so that it would amount to arrogance in me to add one syllable more upon the subject.



## MEDICAL RESEARCHES,

ON THE

*Effects of Iodine in Fistula Lachrymalis.*

---

WHEN the lachrymal passages are in a sound state, the tears that are secreted to moisten the eye, pass off without any inconvenience; but sometimes in consequence of a strumous state of the constitution, sometimes from the bones of the nose being in a diseased state from Syphilis, and sometimes from repeated inflammation of the internal membrane of the nostrils from exposure to cold, the nasal ducts become inflamed and thickened, so as completely to obstruct the passage of the tears into the nostrils. In consequence of this interruption, the sacculus lachrymalis is filled by the tears that continue to be absorbed by the puncta lachrymalia, and also in part by its natural mucous, which often assumes a purulent appearance, until the sacculus becomes so distended, as to form a small tumour near the internal canthus of the eye, and its contents regurgitate through the puncta into the eye, and afterwards flow down the cheek, to the great inconvenience of the patient, both as to vision and comfort. In this stage of the complaint, it is generally called *Fistula Lachry-*



malis, as well as when it reaches its last stage, about to be described, and from which its name was originally derived.

Many cases of *Fistula Lachrymalis* go on for years, as above described; but, in other cases, the skin covering the sac becomes red, inflamed, and sloughy, and after the contents of the sac, or tumour, are discharged, generally by a small opening, the swelling, redness, and inflammation go off, the opening heals, and every thing appears going on very well, until a second swelling of the lachrymal sac takes place, generally with less inflammation and swelling than in the first instance, the recently cicatrized parts give way, and the contents of the sac are again discharged, and in this way the disease will often go on for an indefinite length of time. In severe cases of this disease, the inflammation is not confined to the skin covering the sac, but extends to the eye-lids, nose, and cheek.

The *os unguis* is often rendered carious, and portions of it are discharged through the preternatural opening, of which I shall have to notice an example. The nostril of the affected side is always dry, owing to its being deprived of the tears and mucous with which it would be moistened, but for the obstruction in the nasal duct.



Having briefly mentioned the symptoms of *Fistula Lachrymalis*, I must refer those who wish for a minute history of the complaint, and the operations that have been practised for its cure, to the different Surgical writers who have treated of this disease, as the method of cure that I have to recommend is entirely constitutional.

My attention was first directed to the employment of Iodine as a remedy for *Fistula Lachrymalis*, owing to the circumstance of a patient, who was taking Tincture of Iodine for the cure of Paralysis,\* happening also to labour under *Scrophula* and *Fistula Lachrymalis* at the same time. The improvement, in every respect, was of so marked a character in this instance, that I have availed myself of every case of *Fistula Lachrymalis* that has since come under my management, to ascertain the curative powers of Iodine in this disease; and every additional case confirms me more and more in the firm belief of the great remedial powers of Iodine in this untractable and vexatious disease.

The original case having been pointed out, I now proceed to a detail of the other cases, in the order in which they occurred.

---

\* See Case I. page 149.



## CASE II.

Miss Anne P. æt. 19. December 23, 1822. This young woman is afflicted with Bronchocele, of moderate size,\* and for the last eight years has laboured under obstruction of the left lachrymal duct, for which I find she was operated on by the late Mr. Stanley, Snrgeon, of this town. The lachrymal sac is considerably swelled, and when it is pressed with the finger, a copious flow of thin mucous, and some purulent looking matter, is discharged through the puncta lachrymalia into the left eye. The lachrymal sac has inflamed, swelled, and burst nine or ten times; it is about two months since this last occurred. The opening has healed up, and she says that she is obliged to squeeze the contents of the sac out twelve or fourteen times a day, to prevent the inconvenience of its swelling and bursting. The left eye is almost constantly filled with tears, which affect the vision, and often flow down the cheek in great quantity, and she says, that the complaint makes her altogether very uncomfortable. Complexion fresh. Eyes and hair black. Bowels, in general, regular. General health not to be complained of. Catamenia regular.

Sumat Tæ. Iodini gutt. xii. ter in die ex cyatho

---

\* See Table, N<sup>o</sup>. 54.



parvo aquæ. Instill<sup>r</sup>. guttæ vi. Vini opii in oculo sinistro m. et h. s.

January 1, 1823. Her eye is not so full of tears, and thinks that since yesterday, some of the tears have passed by the nose, and she can squeeze but little mucous from the lachrymal sac into the eye, compared to the quantity that was poured through the puncta lachrymalia when I first saw her. Medicines agree very well.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

January 19. I have visited this patient about twice a week since last report. The eye waters much less, although the weather is colder than it was when she became my patient. The discharge through the lachrymal duct into the nose increases, and she says, that she seldom has occasion now to press on the lachrymal sac to discharge its contents, which still partly pass into the eye. The Tincture of Iodine sometimes makes her sick, but she never rejects it by vomiting. The Bronchocele is nearly dissipated.

Cont<sup>r</sup>. remed.

February 18. Her eye waters very little, the swelling of the lachrymal sac has subsided, and the nasal duct is pervious to the lachrymal dis-



charge. Says that she feels an improvement in her general health.

Cont<sup>r</sup>. remed.

March 7. The left eye scarcely waters at all, and there is very little discharge into the eye when pressure is made on the sac. The nasal duct remains pervious. She looks and feels better.

Cont<sup>r</sup>. remed.

March 15. Eye waters very little, there is no return of swelling in the sac, and it has not burst since she began to take the Tincture of Iodine. The nasal duct remains pervious to the lachrymal discharge. She is desired to employ the medicines a few weeks longer, by way of confirming the cure.

---

REMARKS.—From the chronic and stubborn nature of *Fistula Lachrymalis*, it is impossible for the most sceptical, on any fair grounds, to question the medical agency of the Tincture of Iodine in this instance, as the cure was not only soon accomplished, but the patient has remained well ever since, without any tumefaction or bursting of the sac; and her eye seldom waters, unless she accidentally takes cold.

It deserves notice, that she has lost one sister of Consumption, another is afflicted with *Lepra Vulgaris*, and a third, who is married, and resides at Derby, labours like my patient, under *Fistula Lachrymalis*.



## CASE III.

Mary Edwards, æt. 13, lace runner, Pipe Street. Admitted an Out-Patient of the General Hospital, the 28th of January, 1823. Has been afflicted with *Fistula Lachrymalis*, on the right side, for some time. There is a very narrow opening, through which the contents of the lachrymal sac are discharged, when it acquires a certain size. The opening appears to be closed at present, but its funnel-like termination in the skin is quite distinct. The right eye-lids are swollen, and the edges of a purplish red colour, at present. The patient has laboured under a considerable degree of deafness, for some time; the right ear is most affected, and she has a vacant expression of countenance. Her mother informs me, that she was a very ailing, sickly child, and afflicted with lumps under her chin, which gathered and burst till she was three years of age. She has applied for relief at present chiefly on account of enlarged scrophulous glands under the lower jaw, and one above the inner condyle of the right humerus; the glands vary in size from a hazel nut to that of a nutmeg. She is pale, and appears out of health, which is partly owing to her sedentary employment.

Capiat Tæ. Iodini gutt. viii. ter in die ex aqua.  
Sumat ægra Mist. Purg. ʒi. primo mane si tarda



est alvus. Instill<sup>r</sup>. Vini opii guttæ vi. in oculo dextro m. et h. s.

February 7. There is a small opening, of the diameter of a bristle, through which a mucous substance escapes when pressure is made on the right lachrymal sac, which is now much reduced in size. The enlarged Conglobate glands are smaller, and do not hurt her now. The drops agree. Bowels open by the Mixture.

Capiat Tæ. Iodini gutt. x. ter in die, Cont<sup>r</sup>. Mist. Purg. p. r. n.

February 21. Says some blood has been discharged through the slender fistulous opening. In other respects she feels better.

Cont<sup>r</sup>. remed.

March 7. Is much better.

Cont<sup>r</sup>. remed.

April 4. The glands that were enlarged beneath the lower jaw cannot now be felt. The fistulous opening in the lachrymal sac has closed, the orifice can scarcely to be seen, and the right eye waters very little. The right arm is swelled, and a little inflamed at the elbow-joint, and pressure causes pain.

Appl<sup>r</sup>. hirud. vi. partibus dolentibus. Sumat Tæ. Iodini gutt. xii. ter in die.



April 18. The fistulous opening remains closed, and the tears do not trickle down the cheek now. Arm almost well—pain and swelling gone. Says that she hears much better with the right ear.

It is unnecessary to detail this case any further, as the patient has remained free from the disease of the lachrymal passages ever since. It appears from the following remark in the Journal, the 6th of February, 1824, that she also completely recovered the sense of hearing:—"She can now hear very readily: before she came under my care, her mother says it was with great difficulty she could make her hear."

The scrophulous affections, strictly so called, were not so readily cured: it was the 9th of April, 1824, before a white swelling in the right elbow-joint, and a slight attack of the same affection in the left shoulder-joint could be effectually subdued, and before the ulcers that took place from the suppuration of glands, could be completely healed by the Iodine internally exhibited, and externally applied in the form of Liniment.

The mother of this young woman came to me for advice in December, 1824, and I was happy to learn from her, that her daughter has continued in good health, and has experienced no relapse, since she was discharged.



REMARKS.—This case is interesting, as I had an opportunity of witnessing the efficacy of Iodine in curing Fistula Lachrymalis, Deafness, Scrophulous Enlargement, and Ulceration of the Conglobate Glands, and White Swelling of the Joints, in the same person. I do not wish to conceal the fact, but to make it known, that it was fourteen months before this patient was completely cured of all her complaints.

---

#### CASE IV.

Anne Gamble, æt. 26, lace runner, Broad Marsh. Admitted an Out-Patient of the General Hospital, the 22d of April, 1822. This young woman was so ill that she could not come to the Hospital. Her sister attended for her, and stated, that she had not been well for three months, and that she was always troubled with head-ache, and generally costive in her bowels. Tongue furred. Face flushed. I directed her to be bled to ten ounces, to take two Calomel Pills every night, and two ounces of Purging Mixture the following morning, and to have a Blister applied to the nape of the neck.

April 25. The bleeding relieved the pain in her head, and in my absence she was ordered one drachm of the Pulv. Acaciæ Comp. three times a day, and the Medicines to be continued.

May 16. An abscess has formed in the left lachrymal sac, and has burst since she last visited



the Hospital. All the parts in the vicinity of the ulcer are swelled, red, and painful. Much less head-ache. The patient is very weak. Medicines omitted. Is directed to apply three leeches to the inflamed skin, and afterwards a linseed meal poultice, and to take two drachms of the Sulphate of Magnesia in the morning, when necessary, and a table spoonful of the Compound Infus. of Gentian, twice a day.

May 30. The leeches relieved the inflammation and swelling, and four leeches were applied the following week, with advantage. The abscess continues to discharge a little. Has had some degree of pain in the vertex since she was struck by a piece of tile that fell from a house upon her head, six or seven years ago. Bowels open. Appetite better.

Omitt<sup>r</sup>. Infus. Gentian. C. Cont<sup>r</sup>. alia. Sumat ægra Tæ. Iodini gutt. xv. ter in die ex aqua. Curetur ulcus Cerato Cetacei.

June 6. The swelling and redness are very much gone, the sore is very much contracted, and the discharge but trifling. Says that the Tincture of Iodine warms her stomach, even when taken in nearly half a pint of water. Also says, that she feels much better. Bowels moved two or three times daily.

Cont<sup>r</sup>. remed.



June 13. The ulcer has healed. When pressure is made on the lachrymal sac, some purulent looking matter and mucous are discharged through the puncta lachrymalia into the eye.

Cont<sup>r</sup>. remed.

June 27. Continues to improve.

Cont<sup>r</sup>. remed.

July 18. When pressure is made at the inner angle of the left eye, a purulent looking matter is still poured into the eye through the puncta lachrymalia. The swelling and redness are nearly gone, and the ulcer in the site of the sac remains cicatrized. General health improved. Bowels open. Has taken only twelve drops for a dose, the last fourteen days, as fifteen were too hot for her.

Sumat Tæ. Iodini gutt. xii. ter in die. Cont<sup>r</sup>. alia. Instill<sup>r</sup>. guttæ vi. Vini opii in oculo affecto m. et h. s.

July 25. She informs me that this is the third time that the lachrymal sac has gathered and burst; it has now subsided, and remains cicatrized, without any apparent disposition to a return of the complaint. Her vision is improved, and there is less discharge from the lachrymal passages.

Capiat Tæ. Iodini gutt. xv. ter in die ex aqua.



August 8. There is still a purulent looking discharge into the eye, when pressure is made on the sac, which continues free from swelling.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. alia.

August 22. The nasal duct is still obstructed, and a purulent-like matter is still poured into the eye, on pressing the sac.

Cont<sup>r</sup>. remed.

September 12. Received a blow in the left eye, in consequence of which the eye-lids are swollen and discoloured.

Appl<sup>r</sup>. hirudines iv. palpebris affectis. Cont<sup>r</sup>. remed.

October 3. The leech bites bled well, and the tumefaction of the eye-lids disappeared in a few days. The tears pass off by the nasal duct, and there is no pain or swelling in the lachrymal sac.—Cured.

---

### CASE V.

Jane Siddall, æt. 35, frame-work knitter, of Nottingham. Was admitted an Out-Patient of the General Hospital, the 7th of October, 1823, for the cure of Dyspepsia, and general debility



under which she laboured. Catamenia regular. Bowels generally costive. The following powders were ordered to be taken:—

R Pulv. Rad. Rhei..... ʒi.  
 Magnes. Sulphatis..... ʒii.  
 ——— Carbonatis..... ʒiss.  
 Pulv. Zingiberis..... ʒi.

Tere simul et divide in pulveres vi. Ægra capiat i. omni mane ex aqua tepida.

October 17. Says she is better in every respect, and free from head-ache. The powders are ordered to be continued in the morning, and she is directed to take a table spoonful of the Compound Infusion of Gentian, three times a day.

March 19. The above plan was continued till the present time, except that the purgative was changed, as the powders made her sick after taking them for some time. To-day the right eye-lids are inflamed, and there is a tumour at the inner canthus of the eye, in the site of the lachrymal sac. Perspires much in bed. Medicines agree.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirud. iii. palpebris.

March 26. Eye-lids, and other parts, less painful. The sac has burst.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Cataplasma. Emollient. ulceri.



April 17. I did not see the patient again till this day ; but the same plan of treatment was followed, and four leeches were applied to the right temple, on the 9th instant. There is still a considerable degree of redness and swelling in the site of the lachrymal sac ; the opening in the abscess has closed, and when pressure is made upon the sac, there is a purulent looking matter discharged through the puncta into the eye, without any passing by the lachrymal duct into the nose.

Omitt<sup>r</sup>. remed. Sumat *Ægra Liquoris Iodini* gutt. x. ter in die ex cyatho parvo aquæ. Capiat *Magnesiae Sulphatis* ʒii. mane p. r. n.

April 23. The redness and swelling are much gone. Says that the *drops* have done her a great deal of good. Bowels open by the Salts. The cicatrix has burst open again, and there is some purulent discharge from the sac.

Curetur ulcus *Cerato Cetacei*. Capiat *Liq. Iodini* gutt. xii. ter in die. Cont<sup>r</sup>. *Magnesiae Sulphas*. p. r. n.

April 30. Parts less swelled. No pain. Drops agree. Bowels open.

Cont<sup>r</sup>. remed.

May 7. There is less purulent discharge into



the eye when the sac is pressed ; the ulcer has healed, and the skin is less red.

Cont<sup>r</sup>. remed.

May 21. The cicatrix has not again given way, skin slightly red, but the swelling is entirely gone. When the sac is pressed there is a little purulent looking matter discharged into the eye, but the greater part of the tears and secretions from the lachrymal passages are now discharged into the right nostril. A Saturnine Lotion is directed to be applied to the parts lately swelled and inflamed.

Cont<sup>r</sup>. remed.

June 4. Continues to improve.

Cont<sup>r</sup>. remed.

July 9. The patient has attended irregularly since she has been nearly well. The edges of the eye-lids are a little raw, but the lachrymal passages are quite clear.—Discharged cured.

## CASE VI.

Martha S——, æt. 39, married. Applied to me for medical assistance the 31st of January, 1824. She first had a small tumour, it appears,



in the site of the right lachrymal sac, for four or five years. Informs me, that it began to gather a week before last Christmas, and broke, and that it has continued to heal, and then to gather and break ever since. When the sac is pressed, there is a discharge of purulent looking matter into the eye. The skin at the inner corner of the right eye is red, and the parts tumefied.

Capiat Liquoris Iodini gutt. x. ter in die ex aqua; et Pilæ. Cambogiæ Comp. gr. v. vel. x. h. s. si tarda est alvus.

February 14. The sac has burst only once since she applied to me. There is less discharge into the eyes, and the tears are now chiefly discharged into the nostril. Says she is better, and that her appetite is improved. One pill is sufficient to keep the bowels open.

Sumat Liq. Iodini gutt. xii. ter in die. Cont<sup>r</sup>. Pilulæ p. r. n.

March 6. The swelling and redness of the parts are almost gone. The sac has not burst since last report. The tears are discharged into the nostril.

Capiat Liq. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Pilulæ Cambogiæ C.

March 23. Very little purulent matter is



discharged into the eye, even when the sac is pressed. The tears continue to be discharged into the nostril.

Cont<sup>r</sup>. remed.

April 3. The lachrymal sac gathered, and burst again yesterday, and discharged a considerable quantity of purulent matter, some of it into the right nostril. Health better. Drops agree.

Cont<sup>r</sup>. remed.

This patient did not afterwards call on me, but I have no doubt, that the cure was soon completed, the ductus lachrymalis being open, otherwise I should have had another visit from her.

---

## CASE VII.

Eliza Bird, aged 15 months. Was brought to my house for advice the 18th of February, 1824. The right lower eye-lid, and parts in the site of the lachrymal sac are very much swelled and inflamed; there is a discharge of purulent looking matter into the eye, through the upper punctum lachrymale, when the sac is pressed; the lower punctum is not pervious, at present, to matter or tears, perhaps owing to the swelling and inflammation in the lower eye-lid.



There is no discharge into the nose by the lachrymal duct; the sac has not yet burst, and the right eye is watery with a constant flow of tears down the cheek. Bowels costive. The child's mother informs me, that the above affection commenced six or seven days after she was born, and has gradually been getting worse.

℞ Hydrarg. Submur..... ʒss.

Pulv. Rhei..... ʒss.

Misce et divide in Pulv. vi. Capiat i. omni mane, ex syrupo, si tarda est alvus.

℞ Solutionis Iodini..... ʒss.

Habeat gutt, iv. ter in die ex aqua saccharata.

February 25. Is feverish. Bowels tardy. Less discharge from the lachrymal sac. It is with great difficulty that the patient is made to take the Powder.

Omitt<sup>r</sup>. Pulv. Cont<sup>r</sup>. Solutio Iodini.

℞ Hydrarg. Submur..... gr. xii.

Pulv. Tragacanthæ Comp..... ʒi.

Tere simul et divide in Pulv. vi. habeat i. omni mane ex syrupo.

March 3. Her mother says, that she is a great deal better. The swelling has very much subsided, and the redness is considerably abated, without the tumour having burst. She further adds, that no matter is discharged into the eye,



and that the tears have ceased to run down the cheek.

Cont<sup>r</sup>. remed.

March 10. The lachrymal sac is swelled and inflamed, along with the contiguous parts, and forms a tumour upwards of an inch in diameter, near the inner canthus of the right eye.

Cont<sup>r</sup>. remed.

March 17. The abscess has burst, and discharges some yellow matter. The swelling has subsided considerably, and the redness is very much diminished. The eye-lids are also much less tumefied.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Cataplas. Emollient. tumori.

March 24. Parts less red and swollen. There is a good deal of yellowish discharge from the abscess.

Cont<sup>r</sup>. remed.

April 14. The abscess still discharges some matter. Two pieces of carious bone have been discharged through the fistulous opening, this morning. From the thinness of the bones, I have no doubt that they are portions of the os unguis. There is some swelling of the Conglo-



bate glands, below the right jaw, and between the clavicle and ear.

Cont<sup>r</sup>. remed.

This child was not afterwards brought to me; but in a short time, under the use of the medicines, the opening healed up, the redness and swelling entirely disappeared, and the tears were discharged through the lachrymal duct into the nose. I called the 15th of January, 1825, to see the child, and found her in perfect health, without the least obstruction to the tears in the eye that had been affected, and the cicatrix so small, and so little below the level of the sound skin, that an ordinary observer would not notice it. The carious state of the bones, in this case, very much protracted the cure; but, I am happy to say, that it is as complete as possible.

---

### CASE VIII.

Mrs. Elizabeth W. æt. 30. March 15, 1824. Is rather of a full habit, and suckles a child twelve months old, that appears to have weakened her, as there is a degree of langour in her countenance, and the eye-lids are of a more dusky brown colour than usual; but she has come to put herself under my care, on account of a tumour about the size of a small walnut,



that has appeared in the right cheek, about an inch before the ear, and a little below the zygomatic process. The skin covering the tumour is of a purplish red colour ; there is no pain, but some degree of soreness when the parts affected are pressed. This woman has also a tumour a little below the inner canthus of the right eye, about the size of a hazel nut ; it is very hard to the touch. The right eye is very watery, and the tears flow down the right cheek. It is only a month since she first noticed the swelling near the eye. I find that her mother died of consumption when 43 years of age, after being ill three years. Her father is a robust man, and enjoys good health in general, but now and then has an attack of gout in the extremities. Her face is pale. Tongue dry and furred, and she complains of inward fever. Pulse 100. Bowels, in general, costive.

Sumat Pilæ. Cambogiæ Comp. gr. x. vel. xv. omni nocte h. s.

March 18. Her bowels have been freely opened by the Pills. Stools were dark at first. Less fever.

Cont<sup>r</sup>. Pilæ. Cambogiæ C. p. r. n. Capiat Liquoris Iodini gutt. x. ter in die ex aquæ cyatho.

March 25. Says that her head is less stuffed. The Conglobate gland in the cheek is smaller



and softer, and the redness of the skin is almost gone. The tumour in the site of the lachrymal sac is a little smaller and softer.

Capiat Liq. Iodini gutt. xii. ter in die. Cont<sup>r</sup>.  
Pilæ. Cambogiæ C. p. r. n.

April 1. Tumour in the cheek rather smaller; that near the eye is not sensibly smaller since last report. Drops agree, and her general health improves.

Capiat Liq. Iodini gutt. xiv. ter in die. Fri-  
centur partes affectæ Linimento Iodini omni  
nocte h. s.

April 22. The gland in the cheek is reduced to a very small size, and the tumour near the eye has almost disappeared. The tears now pass freely into the nose from the lachrymal sac. Her general health continues to improve. Bowels open by the Pills.

Cont<sup>r</sup>. remed.

May 6. There is only a very slight fulness in the site of the lachrymal sac, but no hardness, and I can merely feel a very slight degree of fulness and circumscribed hardness in the cheek. Her general health is very much improved.

Cont<sup>r</sup>. remed.

June 17. The patient informs me, that she



has employed the medicines as directed, but that she has occasionally omitted them for two or three days at a time, since last report. She is now very well, the tumours are completely dissipated, and the tears pass freely from the eye into the nose.

### CASE IX.

Frances Stevenson, æt. 22, lace runner, Nottingham. Applied to me the 13th of March, 1824, on account of swelling and redness of the edges of the eye-lids, with some degree of inflammation of the eyes, and specks in the corneæ, which affect her vision. This state of vision is aggravated in the right eye by a purulent discharge from the lachrymal sac, owing to the obstructed state of the duct, which now and then admits the passage of some portion of the tears into the nose. The lachrymal passages have been obstructed, I find, for the last twelve months. Eye-lids are generally gummed together in the morning. Is of a sanguine complexion, with reddish brown hair. Bowels generally costive. Catamenia regular, but scanty.—One of her sisters labours under Phthisis Pulmonalis.

Sumat Tæ. Iodini gutt. xii. ter in die ex aqua et Pilul. Cambogiæ Comp. gr. x. h. s. Illin<sup>r</sup>. tarsi palpebrarum Ung<sup>o</sup>. Hyr. Præcip. Alb. omni nocte h. s.



April 1. Last week the tears began to pass by the lachrymal duct into the nostrils, and now seldom run down the cheek. The redness and swelling of the eye-lids are very much gone, and the specks begin to fade. Has generally two or three motions daily, but complains that the Pills occasion some straining. Menstruated last week. Says that the drops occasion some heat in the throat, but feels no other inconvenience.

Cont<sup>r</sup>. remed.

April 6. Says that she feels much better. The tears continue to be discharged into the nostril.

Cont<sup>r</sup>. remed.

April 22. The redness and swelling of the eye-lids are almost gone, the inflammation of the eyes is removed, and the specks are fading very fast. There is now very little discharge into the eye, at any time, owing to the lachrymal duct remaining pervious. Pills still occasion some straining.

Omitt<sup>r</sup>. Pilul. Cambogiæ C. Cont<sup>r</sup>. Tinct. Iodini. Sumat Magnesiae Sulphat. zii. omni mane.

This patient has not called on me since the date of the last report, nor have I heard any



thing of her. From the progress made in the cure, I have no doubt that she recovered completely; but the case is satisfactory, as far as it goes, in shewing the great remedial powers of Iodine, both in Scrophulous Ophthalmia, and Fistula Lachrymalis.

---

### CASE X.

Mary Woods, æt. 46, Bellar Gate, Nottingham. Applied to me the 5th of July, 1824, on account of a hard tumour, about the size of a small horse bean, in the site of the lachrymal sac, attended with some degree of inflammation of the eye-lids, and a watery state of the eye, with a discharge of tears down the right cheek very frequently. This affection has been present four months. The patient informs me, that the left eye has been watery, with an occasional discharge of tears down the same cheek, especially when she has taken cold, for the last twenty-four years. About ten years ago she applied to me to cure the latter affection, and derived some benefit from the Vinum Opii being dropped into the eye every night at bed-time, and it was from a previous knowledge of its beneficial effects, that I have occasionally prescribed it, along with the preparations of Iodine, in cases of Fistula Lachrymalis. Bowels generally open. Health moderate. Face pale.



Sumat Tæ. Iodini gutt. x. ter in die ex cyatho parvo aquæ.

July 15. Says that her eyes are a great deal better.

Cont<sup>r</sup>. remed.

August 3. The tumour is quite gone, and the tears pass freely into the nose. The left eye still waters a little. Bowels open without the purging salts, which she has taken only once.

Cont<sup>r</sup>. remed.

August 23. The right eye-lids are free from inflammation, there is no tumefaction of the lachrymal sac, and the tears have a free passage into the nose. The left eye is still a little watery, but in a much less degree than before she took the Iodine.

Cont<sup>r</sup>. remed.

Owing to a severe accident which happened to me the beginning of September following, this patient did not call again at my house ; but I have since met her, and she informed me, that she continued the drops about three weeks after I last saw her, that her right eye was perfectly well, and her left eye less watery and troublesome to her than it has been since the commencement of her complaint.



## CASE XI.

Mary Hunt, æt. 31, servant in Mr. M.'s family, January 5, 1825. Is of a spare habit, and free from any symptom of Scrophula. For nearly three years the left eye has watered very much, and the tears run down the cheek, particularly when she is exposed to a stream of cold air. There is a tumour about the size of a hazel nut, a little below the inner canthus of the left eye-lids, of the same duration as the watery eye. The tumour has increased considerably within the last two months, and is a little sore, and attended with a slight degree of inflammation of the skin covering it. The tears excoriate the cheek in the cold. The left nostril is always dry. Moderate pressure on the tumour does not force its contents back through the puncta into the eye, nor through the lachrymal duct into the nose. The patient ascribes her complaint to sleeping on a plaster floor, with only a carpet upon it, the window of the room being at the same time open, in consequence of which she got a very bad cold in the head, which terminated in the above affection. General health moderate. Bowels always open. Catamenia regular.

Capiat Solutionis Iodini gutt. xii. ter in die ex aquæ cyatho.



January 10. Has caught a slight cold. Did not begin to take the medicine till the 7th inst.; she has always experienced a slight degree of sickness for a short time after taking it, till this morning. Has taken two drachms of Epsom Salts once, since I have attended her.

Cont<sup>r</sup>. Solutio Iodini.

January 12. The tumour is not so hard. This morning she informs me, that she has *recovered the sense of smelling* in the left nostril, which she now tells me she lost when she caught the violent cold, about three years ago, but forgot to mention the circumstance to me before. Drops agree very well now.

Capiat Solutionis Iodini gutt. xv. ter in die ex aqua, et zii. Magnesiae Sulphatis mane si tarda est alvus.

January 16. Yesterday the tears began to flow into the left nostril. The tumour is much softer, and has subsided very much. The patient informs me, that since she has taken the Solution of Iodine, she has experienced a strange sensation, as if something were running all over her body for a few minutes after taking the medicine; but that it does not disagree with her in the least; on the contrary, she says, that her health and spirits are much better.

Cont<sup>r</sup>. remed.



January 18. The tears continue to be discharged through the lachrymal duct; and the sense of smelling, she says, is nearly as perfect as in the other nostril. The lachrymal sac is very little elevated above the proper level of the skin. Now that she is better she begins to take the drops irregularly.

Cont<sup>r</sup>. remed.

January 21. There is still a slight fulness of the lachrymal sac, but when pressure is made upon it with the finger, the contents of the sac are discharged into the nostril, and the tumefaction of the sac entirely disappears. Is desired to apply pressure with the finger on the site of the sac, two or three times a day, to prevent any morbid distention of the part, by the accumulation of tears or mucous.

Cont<sup>r</sup>. remed.

January 23. The swelling at the inner corner of the left eye has entirely disappeared, and the tears have a free passage into the nose. Says that fifteen drops make her rather sick and poorly. Is desired to take only ten drops for a dose, three times a day, for a fortnight longer, by way of confirming the cure, and preventing a relapse. The sense of smelling is now as perfect in the left as in the right nostril; but, is rather imperfect in both at present, owing to her having lately caught a fresh cold.—Cured.



REMARKS.—This case of *Fistula Lachrymalis* appears to have originated in inflammation, and consequent tumefaction of the schneiderian membrane lining the nose and the lachrymal duct and sac. The tumefaction of the membrane continued, in this instance, nearly three years, and all the symptoms were becoming worse, instead of better. A *remarkable* circumstance in the above case is the recovery of the sense of smelling, after it had been lost for nearly three years. This is the first instance of the kind that has occurred to me, but it shews, that Iodine may also be employed with advantage in cases when the loss of the sense of smelling arises from the compression of the delicate olfactory nerves, by the tumefied schneiderian membrane. The sense of smelling is diminished in almost every cold affecting the head; and when we learn, from the history of the case, that loss of smelling has followed a severe cold affecting the nostrils, there will be room to conclude, that the olfactory nerves are compressed by the swelled and condensed membrane lining the nostrils, as well where the nerves penetrate it on leaving the cribriform plate of the ethmoid bone, as in their course.

The recovery of the sense of smelling, by the detumefaction of the schneiderian membrane, in this example, also illustrates and confirms what I have advanced as to the power of Iodine in reducing the morbid tumefaction of the lachrymal sac and duct. A certain degree of moisture is, no doubt, necessary to the full faculty of smelling; and some may think, that the restoration of the sense of smelling, in the above case, was owing to the left nostril being again supplied with humidity through the nasal duct. In answer to this, it will be seen from the case, that the patient recovered the sense of smelling on the 12th of January, and was not sensible of any moisture escaping into the left nostril till three days afterwards.



Having given a sufficient number of cases, in which I had ocular demonstration of the powers of Iodine in the cure of *Fistula Lachrymalis*, whether arising from a strumous state of the constitution, or from inflammation of the internal membrane of the nostrils, from exposure to cold; it only remains for me to observe, that Mercury is the appropriate remedy for the cure of *Fistula Lachrymalis*, arising from a syphilitic taint of the constitution; but, should there likewise be a scrophulous taint, I would recommend small doses of Iodine also to be exhibited; not that I have treated a case of *Fistula Lachrymalis* so complicated, but because I know, from considerable experience, that Iodine may be exhibited, along with Mercury, in Syphilitic cases, complicated with *Struma*, with the happiest effects.



## MEDICAL RESEARCHES,

ON THE

### *Effects of Iodine in Deafness.*

---

NEXT to the loss of sight, no deprivation can equal that of hearing, and as it is a matter of common observation, that blind people are much more cheerful than those who are entirely deaf, perhaps, the loss of hearing may be considered as the greater misfortune.

The small progress that has hitherto been made in curing Deafness, induces me to lay before the public the following cases, in which the effects of Iodine, as a remedy for this obstinate malady, were very conspicuous; and I hope it will prove equally useful in the hands of other practitioners.

When we consider the complex structure of the ear, we cannot be surprised that the causes of the imperfection, or abolition, of hearing, should be numerous. The varieties of Deafness are usually arranged under separate heads, according to the part of the organ affected: as in



the *meatus externus*, or external passage to the ear; the eustachian tube, or passage to the internal ear; and the internal ear itself.

Deafness, from obstruction in the external passage, is generally owing to the accumulation and induration of the wax of the ear; sometimes from excrescences within the passage, but rarely from inflammation and tumefaction of the soft parts of the passage to the ear, which is occasionally ulcerated. Deafness is sometimes occasioned by the presence of an extraneous body in the passage to the ear. When the above conditions of the external passage exist, besides the general defect of hearing, the patient complains of noises of various kinds, which are extremely annoying to him, and which he is more anxious to get rid of than even the deafness itself.

When the disease proceeds from the accumulation and induration of the wax of the ear, it is most readily cured by repeatedly syringing the ear with warm water. Excrescences are most conveniently removed by the knife, or they may be destroyed with caustic. Ulceration of the passage, and the discharge connected with it, can generally be cured by injecting a weak Solution of the Sulphate of Zinc, the Sulphate of Copper, or the Nitrate of Silver. Extraneous bodies are to be removed by mechanical means.



When a considerable degree of tumefaction of the soft parts of the external passage occasions deafness, and leeching and blistering have been of no avail, I think it probable that Iodine administered internally, and applied externally, in the form of liniment, or ointment, before and behind the ear, in the vicinity of the passage, would be found useful in reducing the morbid tumefaction of the parts, and in contributing to the improvement or restoration of hearing.

Deafness, from obstruction of the eustachian tube, is a very common occurrence. It is generally occasioned by Scarlet Fever, when the throat is very much affected in that disease; but, inflammation, from any cause, occasioning permanent tumefaction of the soft parts, where the eustachian tube terminates in the throat, may give origin to the disease, by closing up the passage to the ear. This disease also occurs from syphilitic ulceration of the throat. A large nasal polypus descending into the pharynx, may also occasion deafness, by obstructing the passage of air to the internal ear. When the eustachian tube is obstructed, the patient, when he blows with his nose and mouth stopped, does not experience that crackling sensation that is felt by persons in health, when they make a similar experiment; and, in general, we can trace the commencement of the deafness to in-



inflammation of the throat, as connected with Scarlet Fever, Cynanche Tonsillaris, or Measles, so as to leave no doubt as to the nature of the affection.

Medical writers, so far as I know, have not recommended any method of cure for removing deafness arising from obstruction of the eustachian tube, except puncturing the tympanum,\* which was proposed and practised some years ago by that most eminent Surgeon, Sir Astley Cooper, with considerable success; but the patient is subject to the inconvenience of a return of deafness, after the lapse of some time, owing to the closing of the aperture, which detracts very much from the value of this method of treating the disease; though it will occasionally be resorted to for the cure of this variety of deafness, when other means fail. I first discovered the remedial powers of Iodine in the cure of deafness, when treating a patient who laboured under Bronchocele, and whose case has already been detailed.† The unequivocal benefit resulting from the internal use of Iodine in this case, and in another instance when the disease was complicated with Scrophula,‡ induced me to ex-

---

\* See Philosophical Trans. for 1801.

† See Case IV. page 23.

‡ See Case III. page 279.



tend the use of this remedy to other cases of deafness, that were unattended with any other disorder. The remarkable powers of this medicine, in arresting morbid action, and in reducing the unnatural enlargements of the soft parts of the body, point it out as the appropriate remedy to remove the tumefaction of the soft parts at the termination of the eustachian tube, in consequence of which the function of the organ is suspended. The cases about to be detailed will shew that Iodine possesses very great remedial powers in curing deafness, arising from obstruction to the passage of air to the internal ear, and I hope it will, in a great measure, supersede the necessity of puncturing the tympanum, in this variety of the disease.

When deafness arises from disorder of the internal ear, it is not only difficult, but almost impossible to form more than a probable conjecture respecting the morbid state of the parts in this deep seated organ. In cases of deafness, with partial or complete destruction of the tympanum, loss of the small bones of the ear, and purulent discharge, the nature of the affection is evident; but disorganization has then proceeded too far for any medical treatment to be of much service.

Deafness in the internal ear, may be owing



to want of sensibility in the nerve; to some morbid alteration in the state of the membranes on which the nerves are expanded, which may happen from simple or scrophulous inflammation; or to a change in the properties of the fluid contained in the membranes, which may be in too great, or too small a quantity for perfect hearing. The bones of the internal ear may also become diseased in persons of a scrophulous constitution, so as to occasion deafness; and the well known fact, that Syphilis commits its ravages in the hardest parts of bones, ought, in every case of deafness, when the cause is obscure, to engage our attention, to ascertain whether or not the constitution may be tainted with this disease.

The obvious advantage derived from the exhibition of Iodine in the cases of deafness which I am about to detail, strengthened by the analogy in its favour, from the benefit obtained by its exhibition in Bronchocele, Palsy, Scrofula, Fistula Lachrymalis, and its power of restoring the sense of smelling, \* as well as the evidence in its favour from the facts I have still to record, fully justify me, I conceive, in recommending a cautious trial of the internal use of Iodine in deafness, arising from disorder of the internal ear, and particu-

---

\* See Case XI. page 300.



larly as it does not preclude the employment of leeching, blistering, and syringing the ear, which some may judge necessary. As it does not come within my plan to treat more at large upon the disease of deafness, I must refer those who wish for further information on this interesting subject to the different works on the ear, and its diseases, and particularly to Sir A. Cooper's "Observations on the Destruction of the Membrana Tympani," inserted in the Philosophical Transactions for 1800 and 1801, and to the late Mr. Saunders's work "On the Anatomy and Diseases of the Ear."

I shall now proceed to detail the cases in the order in which they occurred.

---

### CASE I.

See Case IV. page 23.

---

### CASE II.

David Young, æt. 18, a dyer, Saint James' Street, Nottingham. Was admitted an Out-Patient of the General Hospital, the 5th of November, 1822. Lost the sense of hearing in the right ear when a child, about a year old. A sanious discharge preceded the loss of hearing, and still continues. For the last three months has laboured under a very considerable degree



of deafness in the left ear, which discharges a very offensive thin matter. Countenance vacant, and he looks pale, and out of health. The patient also labours under a slight degree of Bronchocele, and is of a strumous constitution. The pupil of the left eye is considerably more dilated than the right; at times he experiences a pain darting from the left ear into the head. His bowels are open by Salts, at present, but, in general, they are costive.

Capiat Magnesiae Sulphatis  $\text{z}\text{ii}$ . primo mane si tarda est alvus. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.

November 22. Says that he hears "a deal better." The darting pain left him about a week since; syringes the left ear with warm water, by my direction. The left pupil is now very nearly of the same size as the right. The discharge from the right ear has entirely stopped, that from the left is diminished in quantity, and the smell is less offensive. The goitre is both smaller and softer.

Cont<sup>r</sup>. Magnes. Sulph. Capiat Tæ. Iodini gutt. xx. ter in die.

November 29. The discharge from the left ear has stopped. He is not sensible of any improvement in his hearing since the last report. Bowels open.

Cont<sup>r</sup>. remed.



December 13. Says that he now hears as well with the left ear as he has done for the last five or six years; but is entirely deaf in the right ear. There is no discharge of matter from the ears. His general health is much improved, and he has got a more clear and fresh complexion; this is remarked by his mother, as well as his having lost a dull vacant expression of countenance. Has three or four stools daily. Drops agree very well.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Magnes. Sulph. p. r. n.

December 20. Has experienced no return of the discharge from either ear. He has recovered the perfect sense of hearing in the left ear, but is completely deaf in the right.—Discharged cured.

---

REMARKS.—This case shews the benefit that may be derived from Iodine in deafness, if early employed, and *before* disorganization of the apparatus of hearing has taken place, and how fruitless it is *afterwards*; but it is worthy of notice, that the Iodine had the effect of removing morbid action in the right ear, as is proved by the discharge ceasing after it had continued about seventeen years. The case also affords an example of the Iodine removing morbid action in the brain and nerves, shewn by its restoring the left pupil to the natural size, and by its removing the pain darting from the ear into the brain. The improvement in the patient's general health was rapid and striking in this, as in many other cases.



## CASE III.

Hannah Elliott, æt. 26. Applied to me the 18th of December, 1822, for the cure of Bronchocele.\* She also laboured under a considerable degree of deafness, of several years standing, but I have neglected to note down the length of time, as well as the cause of her deafness, my attention having been principally directed to the cure of the Bronchocele, for which she applied to me, and of which I have a particular account; but I am well acquainted with the degree of deafness under which this patient laboured, as she had lately lived for six months with me as a domestic servant, and I was obliged to part with her owing to the mistakes she daily made from her defect of hearing. Her health was rather delicate, and for the last four or five weeks she had been troubled with acidity at the stomach, and other dyspeptic symptoms. Catamenia regular. Bowels seldom costive. She was directed to take fifteen drops of the Tincture of Iodine, in water, three times a day, and ten grains of the Pilæ. Cambogiæ Comp. at bed-time, when the bowels were tardy.

The Tincture of Iodine was gradually increased to thirty-five drops, three times a day,

---

\* See N<sup>o</sup>. 52, page 51.



by the 17th of February, 1823; and on the 26th of March following, she had recovered her hearing in a perfect degree, and her countenance was much more expressive than it used to be. At this time the neck and goitre measured an inch and a half less than when she applied to me. The Tincture of Iodine was afterwards gradually increased to forty-three drops for a dose, but as they made her sick, and took away her appetite, she took thirty-five drops for a dose, which perfectly agreed with her, and she was completely cured of the Bronchocele, on the 24th of April following, and her general health was also greatly improved.

---

#### CASE IV.

See Case III. page 279.

---

#### CASE V.

On the 15th of May, 1823, I was required to attend Mr. S. æt. 38. He is a stout made, and rather corpulent man. Has been deaf in the right ear for six or seven years; and the hearing has been so imperfect in the left ear for nearly two months, that it is necessary to shout very loud to make him understand what is said, and he cannot hear the bells of the church, close to which he resides. Coughs a good deal,



and complains of an oppression of breathing. Is very much disposed to sleep. Two months ago he weighed seventeen stones and upwards, now his weight does not exceed sixteen stones. Has been twice bled within the last five weeks. Bowels open. Pulse 72, not full nor hard. Tongue furred. Has been in the habit of drinking ale freely, till the above affection appeared. Face not flushed. Ascribes the deafness to a cold. Has had no medical advice.

Capiat Pilæ. Cambogiæ C. gr. x. omni nocte,  
et Sodæ Tartar. ʒvi. omni mane, ex aqua tepida.

℞ Liq. Ammon. Acet..... ʒi.  
—— Antim. Tartar..... ʒss.  
Tæ. Digitalis..... ʒii.  
Syr. Aurantii..... ʒii.  
Aquæ Distillatæ..... ʒvi.  
Fiant Mistura cujus sumat ʒss. ter in die.

May 18. Coughs less. Breathes with more ease. Bowels moved two or three times daily. Tongue less furred.

Cont<sup>r</sup>. remed.

May 21. Breathing very much improved, his cough gradually abates, and the expectoration diminishes daily. Deafness continues. Bowels open.

Cont<sup>r</sup>. remed.



May 25. Yesterday the left side of his face was very much swelled and painful, owing to the irritation occasioned by the stump of a tooth, which I directed to be extracted. Some purulent matter was discharged after the stump was removed, and the pain almost instantly ceased. The tumefaction has nearly subsided.

Cont<sup>r</sup>. remed.

May 29. The swelling and pain in the face are entirely gone. Is free from cough and stuffing in the chest. 'Thinks he can hear a little better, but complains of different kind of noises in the left ear, and that he feels heavy in the head. Pulse 72, and soft. Bowels open by medicine.

Omitt<sup>r</sup>. *Mistura et Soda Tartarizata*. *Capiat Pilæ Cambogiæ Comp. gr. xv. h. s. et gr. x. mane sequente si opus sit. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.*

This plan of cure was continued for about a month, when the hearing of the left ear was completely restored, after he had taken three half ounces of the Tincture; but no improvement whatever took place in the right ear, of which he is completely deaf.—Cured.

---

REMARKS.—This appears to me to have been a similar attack to that which deprived the patient of the sense of



hearing in the right ear, and the case shews what Iodine can accomplish when it is exhibited early, and how ineffectual it is in cases of long standing. I have the pleasure to add, that this patient continued to enjoy good health, and the perfect sense of hearing in the left ear, up to the middle of January, 1825, when I last saw him, but no degree of hearing had returned in the right ear.

---

### CASE VI.

Mary Wood, æt. 16, a servant, from North Wingfield, Derbyshire. Applied to me the 8th of October, 1823, on account of a considerable degree of deafness under which she has laboured since she had the Scarlet Fever, about eleven years ago. Has had a purulent discharge from the right ear for the same period, and the left ear also discharged matter, till about a year since. Says that she had gatherings under the lower jaw, when a child, and she has some scars in the same situation, that mark the place where Conglobate glands have suppurated and burst, at some former period. Complexion florid, hair light brown. Her general health is pretty good now, and she has menstruated regularly for the last six months. Bowels, in general, regular. Her hearing is always worse after taking cold.

Capiat Tæ. Iodini guttas x. ter in die ex aquæ cyatho, et zii. Magnesiae Sulphatis alternis matutinis.



October 11. Thinks she can hear a little better already.

Cont<sup>r</sup>. remed.

October 18. Her hearing is evidently better, as appears by her knowing what is said in a lower tone than when I first saw her, and the patient herself is sensible of the improvement. Bowels open by the Salts.

Capiat Tæ. Iodini gutt. xv. ter in die.

November 8. Continues gradually to recover her hearing. Medicines agree.

Cont<sup>r</sup>. remed.

This patient continued the use of the Tincture of Iodine till she had taken three half ounces of it in doses of fifteen drops, three times a day, and did not take any more of it, her hearing being perfectly restored.—Cured.

---

REMARKS.—I find that I have neglected to note down the time, in my case book, when the cure was completed, but it was after she had taken the medicine in the quantity stated above. I called to see this young woman the 4th of February, 1825, and I have the satisfaction to add, that she has grown both taller and stouter, and that her hearing continues perfect.



## CASE VII.

Joseph Mellows, æt. 4, from Linby. Was admitted an Out-Patient of the General Hospital, the 20th of January, 1824. For the last five months has laboured under a slight degree of Bronchocele, \* and both tonsils are very much enlarged, and occasion some difficulty in swallowing. His hearing is also impaired, owing to the enlarged tonsils obstructing the free admission of air into the eustachian tubes. Rattles much in his breathing when asleep, and wheezes a little after he has walked about a quarter of a mile. Bowels, in general, tardy. In other respects he appears to be in good health. His mother labours under Bronchocele.

Capiat Magnesiae Sulphatis ʒi. ex aqua tepida mane si tarda est alvus. Sumat Liquoris Iodini gutt. iv. ter in die ex aqua.

February 6. Goitre considerably softer; tonsils also smaller, and his father is certain he can hear better. Bowels open. Drops agree. Cont<sup>r</sup>. remed.

February 19. An Out-Patient of the Hos-

---

\* See N<sup>o</sup>. 105, page 55.



pital, from Linby, reports, that the child is much in the same state.

Cont<sup>r</sup>. remed.

April 9. Bronchocele smaller, the tonsils continue to subside, and he can swallow better; hearing quite perfect. Has taken his medicine regularly, and for the last month has taken five drops of the Liquor Iodini three times a day. His father thinks, that his general health is much improved.

Capiat Liq. Iodini gutt. vi. ter in die. Cont<sup>r</sup>.  
Magnesiæ Sulph. p. r. n.

April 23. The goitre is quite dissipated. Hears very well now. The tonsils are still larger than natural.

Cont<sup>r</sup>. remed.

June 4. Is reported very much better in every respect.—Discharged cured.

REMARKS.—The Iodine was continued, in this case, after the Bronchocele and Deafness were cured, with the intention of reducing the still rather enlarged tonsils, lest inflammation, from an incidental exposure to cold, should cause their re-tumefaction, and a recurrence of deafness.



## CASE VIII.

Mrs. C. æt. 38, applied to me on the 20th of May, 1824, on account of deafness, and different kind of noises in the left ear, with which she had been previously troubled for three months, but never experienced any pain. Is nervous, owing to her confining herself too much to the house. I can observe no tumefaction in the throat, and she informs me, that the left ear has been syringed without any benefit, and a blister, that she applied behind it, had no better effect. Pulse natural.

Capiat Tæ. Iodini gutt. x. ter in die ex cyatho vinario aquæ.

R Liniment. Sapon. Comp..... 3ii.

Tæ. Iodini..... 3ii.

Misce, ft. linimentum quo fricentur partes prope aurem sinistram omni nocte. Capiat Pilæ. Cambogiæ Comp. gr. x. h. s. pro re nata.

June 1. For four or five days after employing the medicines above prescribed, she could hear much better, and does so now, but her hearing is not so good as it was, owing to a cold which she caught a few days since. Has a humming noise in the left ear, when she is warm. The liniment made the skin a little raw at first. Pulse natural. Bowels open by the Pills.

Cont<sup>d</sup>. remed.



The patient called at my house about three weeks or a month after the last report, to inform me, that she had recovered her hearing, but being from home I received the above intelligence from her husband, some time afterwards; from him I have recently learnt, that Mrs. C. continues to enjoy the perfect sense of hearing.

---

### CASE IX.

Thomas Simpson, æt. 10. November 10, 1824. Has laboured under a great degree of deafness since he had a very severe attack of Scarlet Fever and sore throat, when I attended him, about five years ago. The right ear discharges a purulent looking matter, which is at times very offensive. There is no discharge from the left ear. The tonsils are very much enlarged, and I have no doubt that the deafness is owing to their great tumefaction obstructing the eustachian tube in the throat. He is so deaf as not to hear ordinary discourse, and when children of his own age speak to him, which he knows by their looks, and the motion of their lips, he places his ear close to their mouths, that he may hear more distinctly what they say. His mother informs me, that his deafness is always aggravated by his taking cold. Bowels sometimes tardy, in other respects he enjoys very good health.

Capiat Tæ. Iodini gutt. v. ter in die ex aqua.  
Sumat Magnes. Sulphat. ʒi. alternis matutinis.



I have seen this patient only once since I prescribed for him ; but his mother has occasionally reported how he was going on, and on the 9th of January last, she informed me, that his hearing was very considerably better, but that an accidental cold always caused it to be worse for a time. She also remarked, that his general health and appearance were improved since he began the use of the Medicines, which he still continues to take as at first directed.

These are all the cases of Deafness that have been under my care, in which a fair trial has been given to Iodine as a remedy in this disease. I have prescribed it in a few other cases, but I am either unacquainted with the result, or the patients continued the medicine for too short a time to enable me to draw any accurate conclusion from them, as to its effects. I have four very interesting cases of deafness under my care at present, which I am treating by the internal exhibition of Iodine ; but the medicine has been taken for too short a time to make any report respecting them at present ; I trust that the successful employment of Iodine in the cases of Deafness, I have detailed above, will induce those, who have more frequent, and more favourable opportunities, than myself, of treating the disease, to give this remedy a fair and unprejudiced trial.



## MEDICAL RESEARCHES,

ON THE

### *Effects of Iodine in Dysphagia.*

---

DIFFICULTY of swallowing may arise from different causes; but the observations I have to make, and the cases of this disease that I am about to detail, relate to difficulty of swallowing from a permanently contracted state of the oesophagus, preventing the free passage of the food into the stomach.

Stricture may take place in any part of the oesophagus; but it is found to occur most frequently at the beginning of this tube, or where the pharynx ends; and the next situation, in point of frequency, is the cardia, or termination of the oesophagus in the stomach.

Sir Everard Home informs us, that “the area of the oesophagus may be diminished by a transverse fold of the mucous membrane lining this organ, and projecting into its cavity,” and that it will occasion difficulty in swallowing in different instances, according to the degree of



stricture. The same celebrated author acquaints us, that “ the oesophagus is liable to two other diseases which produce nearly the same symptoms, and, therefore, when the cases are not accurately examined, may be mistaken for stricture. One of these is a thickening of the coats of the oesophagus, which extends to the surrounding parts, and, in the end, generally becomes cancerous, or, in other words, an incurable disease ; the other is an ulcer on the lining of the oesophagus: this last is commonly a little below the seat of stricture, and is upon the posterior part which lies on the vertebræ of the neck. Both of these produce a difficulty in swallowing, and in their early stages are only to be distinguished from stricture, by an examination with the bougie. Strictures,” he remarks, “ appear to be a disease belonging to the earlier periods of life, while the other two are more commonly met with at an advanced age.” \*

The late eminent Dr. Baillie, in his work on Morbid Anatomy, mentions his having seen a very unusual stricture of the oesophagus: “ It consisted in its inner membrane being puckered together, so as to form a narrowness of the canal at a particular part, which would hardly allow

---

\* Vid. Sir E. Home on Strictures in the Urethra and the Oesophagus.



a common garden pea to pass. There was no appearance, however, of diseased structure in the inner membrane which was so contracted, and the muscular part of the oesophagus surrounding it, was perfectly sound." He adds, " I know that this disease was very slow in its progress, for the person in whom it took place had been for many years affected with a difficulty of swallowing, and could only swallow substances of an extremely small size." The same celebrated author goes on to observe, that " the most common appearance of disease in the oesophagus, is that of an ulcer in its cavity. Ulcers of the oesophagus are sometimes of a common nature, but most frequently they are attended with a scirrhus affection. When they arise from common inflammation, the structure of the oesophagus, immediately surrounding the ulcer, is but little thickened, and there is the appearance of the usual erosion in ulcers. When the ulcer is of a scirrhus nature, the oesophagus in the neighbourhood is very much *thickened*, and is very hard in its texture. When this texture is examined, it either consists of a hard uniformly fleshy substance, or this is a little intersected by membranes, or it is gristly. Under such circumstances, the canal of the oesophagus is always more or less narrowed, and in some cases is almost wholly obliterated.—" It is worthy of remark," he observes, " that these ulcers happen



most frequently, either immediately under the pharynx, or near the cardia."—Under the head of "Œsophagus cartilaginous," he goes on to observe, "A portion of the oesophagus has been observed by some anatomists to be converted into cartilage, and to have its diameter at that part very much diminished in size. \* This was probably only a strong example of the gristly texture above described." †

The celebrated Morgagni has the following observations respecting the oesophagus: "This tube," he remarks, "has been *constricted* from *tumefaction* of its coats, and also from their being scirrhus, and filled with vomicae." He goes on to observe, that "An impediment to deglutition may arise from the oesophagus being compressed by the contiguous parts. This has been effected by enlarged glands, as the thymus, the glandulae dorsales, glands near the termination of the gullet, and others. Dilated arteries, likewise, have often produced this effect." ‡ Dysphagia sometimes occurs from weakness, or paralysis of the muscular fibres of the oesophagus; sometimes from a conversion of some portion of the gullet into cartilage, or bone,

---

\* Vid. Bonet tom. ii. p. 32.

† Vid. Morb. Anat. p. 98, 90, et seq.

‡ Vid. Cooke's Morgagni, p. 6.



and sometimes from a fleshy or milt-like tumour filling the tube and interrupting its functions. It appears from the authority of the eminent authors above quoted, that dysphagia is generally owing to a thickened, hard, and contracted state of the gullet.

When “the area of the oesophagus is diminished by a tranverse fold of the mucous membrane lining this organ, and projecting into its cavity,” Sir E. Home recommends simple, or caustic bougies to be employed, with the use of which, it appears he has had considerable success: but the two other forms of the disease noticed by this very eminent Surgeon, namely, thickening of the coats of the oesophagus, which extends to the surrounding parts; and an ulcer on the lining of the oesophagus, commonly a little below the seat of stricture; he appears to consider as incurable forms of the disease.

I hope it will appear from the cases I am about to detail, that Iodine, when *early* employed, is capable of curing the forms of dysphagia hitherto considered as incurable.

Before proceeding to a detail of the cases, I may premise, that I was first induced to exhibit Iodine in this disease, from having witnessed its great powers in reducing swellings of the thyroid



gland, and which I could not account for, as some have done, from mere increased absorption, but was convinced that it possessed in an eminent degree, the power of suspending and removing the morbid action on which the disease depended, otherwise it would soon have returned. Under the influence of this reasoning from analogy, I ventured to prescribe the Tincture of Iodine in the following case of dysphagia, and with the most complete success. The successful employment of Iodine since that time in removing obstructions in the lachrymal passages, and in the eustachian tube, affords a still more direct analogy in favour of the powers of this medicine in reducing the morbid swelling, and contraction of the oesophagus.

Without indulging further in theory, I shall proceed to a detail of the cases, in the order in which they came under my notice.

---

### CASE I.

Mrs. —, æt. 45, tall and stout made, eyes and hair black, complexion dark. Was on a visit to a family near this town, where I was in attendance, the latter end of April, 1821, and consulted me respecting a difficulty in swallowing, attended with some pain at the top of the gullet, with which she had been troubled



for three years preceding. She informed me, that she had had the assistance of the Family Surgeon (an excellent practitioner, and many years an Hospital Surgeon), who passed a bougie, about the size of her ring finger, four times into the gullet. The first time it occasioned a good deal of pain, in passing the strait part, and the last time occasioned some discharge of blood, but gave less pain than the first time it was introduced into the oesophagus. The patient swallowed a little better, for a time, after each introduction of the bougie; but when she applied to me, she thought the complaint upon the whole gradually becoming worse, and could only swallow fluid, or very soft food, as mashed potatoes, with a little gravy, when she requested my assistance. She also laboured under a slight degree of Bronchocele, but that tumour had no share in producing the dysphagia, which, I am of opinion, was occasioned by a thickening of the coats of the oesophagus, and the surrounding parts, which Sir E. Home says, "in the end generally becomes cancerous; or, in other words, an incurable disease." The time of life of the patient also corroborates the view I took of the case, as the catamenial discharge had become irregular. In revolving all the circumstances in my mind, I could think of no medicine, in ordinary employment, that was likely to be of any lasting



service ; but it occurred to me, from analogy, that Iodine was more likely to be of service in this formidable case, than any article of the *Materia Medica*, from its singular and highly valuable property of subduing morbid action, and removing tumefaction at the same time. I therefore conceived myself not only justified, but called upon to give the patient the chance of the benefit that might result from a cautious employment of this active substance. I may observe, that the patient's general health at the time, was but indifferent, and she was usually troubled with a costive state of the bowels. The following medicines were prescribed :—

℞ Pilæ. Cambogiæ Comp. zii. forma in pilulas xxiv. quarum sumat ii. vel. iii. omni nocte si adstricta est alvus.

℞ Tæ. Iodini ʒss., capiat ægra guttas x. ter in die ex cyatho vinario aquæ, et post septimanam sumat gutt. xv. ter in die.

About a fortnight afterwards I called upon the patient at the house of a relation, in this town, and found that she could swallow with more ease, and that the medicine agreed very well with her. Bowels kept open by two or three pills.

As the patient was obliged to go into Leicestershire, and intended remaining there for some



time, I gave her general directions how to take the Iodine and the Aperient Pills. I learnt from mutual friends that she had perfectly recovered, before I had the pleasure of meeting her in January, 1825, at the same house where I first prescribed for her; when I learnt from herself, that the medicine had been of the greatest service to her; that she had gradually increased the dose of the drops, till they amounted to twenty-five, three times a day; and at the end of five months she was perfectly free from any difficulty in swallowing, and found her general health greatly improved. She informs me, that she has continued to enjoy excellent health ever since, and can swallow liquids and solids as well as she ever could in any former period of her life. I find she took about two ounces and a half of the Tincture of Iodine, before finally leaving it off, but she has continued the Aperient Pills, occasionally, ever since.

---

REMARKS.—The leading facts of this case are well known to several highly respectable individuals in this town and neighbourhood, and the lady herself, who now resides about thirteen miles off, will, I trust, long remain a living witness of the utility of Iodine in the cure of Dysphagia.



## CASE II.

Catherine Wylde, æt. 31, lace runner, married. Admitted an Out-Patient of the General Hospital, the 8th of May, 1821. Complains of having been ill for the last seven weeks, during which time she has laboured under a considerable difficulty in swallowing solid food. She also labours under a considerable degree of Bronchocele, \* and when it is pressed, she complains of pain deeper in the neck, which she says was brought on by swallowing a pin, seven years ago, and that she still has a sensation as if the pin lay across the oesophagus, immediately behind the middle of the tumour. Is very thin of flesh. Suckles a child. Bowels generally costive. Cannot swallow pills. Has been under medical treatment without any benefit.

Sumat Misturæ Purgantis ʒii. mane p. r. n.  
Capiat Tæ. Iodini gutt. xv. ex aqua ter in die.

May 11. The goitre is smaller and softer. Has lost the sensation of what she called the pin across the oesophagus, and can swallow both solids and fluids better than when admitted. Bowels open.

Cont<sup>r</sup>. remed.

---

\* Vide N<sup>o</sup>. 21, p. 48.



May 18. The tumour is very much reduced in size. Can swallow liquids with ease, but solid food gives her pain. Bowels open.

Cont<sup>r</sup>. remed.

May 25. The pain and difficulty in swallowing are very slight, compared to what they were when she was admitted. The Bronchocele is nearly dissipated. Appetite better. General health improved. Pulse 84, and soft. Bowels open. Skin cool.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>.  
Mist. Purgans, p. r. n.

June 1. Complains of some return of pain in the gullet, about two-thirds down the neck and posteriour, to the trachoea. The Bronchocele is almost dissipated. Wears a piece of flannel round the neck. Suckles a child seven months old.

Cont<sup>r</sup>. remed.

June 8. Still complains of pain, where the sense of straitness is, when the parts are pressed. Goitre nearly dissipated.

Cont<sup>r</sup>. remed.

June 22. Swallows much better than she did, and can bear pressure with much less inconvenience. Complains of heat in the stomach and oesophagus.



Cont<sup>r</sup>. remed. Sumat ægra Magnes. Carbonatis 3ss. ex aqua horis intermediis guttarum urgentê acorê.

July 6. The thyroid gland is not larger than natural. Swallows worse for the last week, and with more pain. The heat continues. Pulse 72, and soft. Face pale.

Cont<sup>r</sup>. remed.

July 13. For the last week has had a sensation as if something were across the oesophagus, but improves in swallowing.

Cont<sup>r</sup>. remed.

July 20. The patient complains of heat from the termination of the pharynx to the cardia. Is always thirsty. Rather loses flesh. Does not cough, except a little in the morning. No return of the Bronchocele. Swallows better.

Omitt<sup>r</sup>. remed. Sumat Magnesiae (ustae) cochleare i. minimum (tea spoonful), ex aqua tertia quaque hora de die.

August 3. Feels and looks better. Continues to swallow pretty well. Bowels kept open by the Magnesia.

Cont<sup>r</sup>. Magnes. usta.

September 14. Has taken no Iodine since the



20th of July last. Complains of pain in the oesophagus, and says, that there is a place where food and drink stop. Complains of heat in the stomach. Has taken no Magnesia for three days.

Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.  
Cont<sup>r</sup>. Magnesia. Capiat Infus. Gent. Comp.  
3ss. ter in die.

October 5. Is free from pain in the gullet, and swallows with more ease. For the last week she has been free from heat in the stomach.

Cont<sup>r</sup>. remed.

October 10. Continues nearly as at last report. Has taken no Iodine for a week.

Cont<sup>r</sup>. remed.

November 1. When she swallows any thing dry, the morsel still sticks at the narrow part of the oesophagus.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Magnesia.

November 16. Thinks she does not swallow so well. Complains of pain under the sternum. Bowels open.

Cont<sup>r</sup>. Ta. Iodini et Magnesia. Sumat Magnesiae Sulphatis 3ii. alternis matutinis.

December 7. Feels better for the last four-



teen days, than she has hitherto been, and has improved in health and strength.

Cont<sup>r</sup>. remed.

January 11, 1822. Has not taken the Iodine for some time. The difficulty of swallowing has returned.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Magnesia et Sulphas Magnesiae.

January 18. No improvement since last report. Every thing stops, when she swallows, about two inches above the top of the sternum. For the last week she has taken twenty drops of the Iodine, three times a day.

Capiat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>. alia.

January 25. Can swallow better, but pressure still hurts her very much.

Capiat Tæ. Iodini gutt. xxxv. ter in die. Cont<sup>r</sup>. alia.

February 8. Is free from pain in the neck, and improves in swallowing.

Cont<sup>r</sup>. remed.

February 22. Can swallow with ease, and is free from pain, even on pressure being made.—Discharged cured.



NOTE.—I have seen this patient within the last six months, and am happy to add, that she has had no return of the Dysphagia since she was discharged.

---

### CASE III.

Dorothy Trueman, æt. 49, of Hucknall Torkard, July 28, 1821. Complains of pain in the oesophagus, and difficulty in swallowing, for the last five or six years. Says she can get down the soft part of new bread, along with supping, but if the bread be hard it will not pass, and she is obliged to strain and retch till she can get the morsel up again. In these efforts she sometimes brings up a little blood. Says she is obliged to divide a pill into three or four parts, before she can get it down. She can swallow small portions of potted meat, by taking some fluid along with it. Says she is easily flurried and fluttered, and that she has been troubled with lowness for several years. Has ceased to menstruate. Skin sallow. Eyes free from any yellow tinge. Bowels generally tardy.

Capiat Magnes. Sulphatis ʒii. omni mane si tarda est alvus. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua cyatho.

---

NOTE.—This woman never called upon me again, but having learnt that she was alive and well, I was anxious to know the issue of the case, and after a great deal



of trouble, I found her in a carrier's cart, returning home from market, on Saturday the 26th of February, 1825. She informed me, that she derived great benefit from the drops soon after she began to take them; she could not recollect the total quantity taken, but said that she had still half a bottle of the Medicine by her. I found her full of flesh, with ruddy cheeks, and every appearance of good health.

---

#### CASE IV.

Anne Taylor, æt. 49, washer-woman, Silverwood's Place, April 21, 1822. Has applied to me on account of great difficulty in swallowing, and attended with so much pain as to bring tears into her eyes when she makes the effort. The part that is pained is situated midway between the top of the thyroid cartilage, and the top of the sternum; and when she swallows, or imitates the action of swallowing, there is a preter-natural mass, that moves up and down for a limited space, behind the trachoea. There is a slight swelling of the thyroid gland, but the chief enlargement seems to be in the oesophagus. Bowels regular. For the last two years has been losing flesh, and is now of rather a spare habit. In the month of June last she applied to a respectable Surgeon of this town, who recommended leeches to be applied to her throat. The first and second time they were applied, she experienced some relief, but none the third time.



Sumat Pilæ. Cambogiæ Comp. gr. x. Omni nocte h. s. et Tæ. Iodini gutt. xx. ter in die ex cyatho vinario aquæ.

April 25. Thinks she can swallow better. There is less soreness when pressure is made on the parts. Is too open in the bowels.

Capiat Pilæ. Cambogiæ Comp. gr. v. h. s. et Tæ. Iodini gutt. xxv. ter in die.

May 1. Can swallow better, but any solid food still hurts her, though in a less degree. There is less fulness and hardness in the oesophagus. Bowels open from one pill.

Capiat Tæ. Iodini gutt. xxx. ter in die.

May 16. Bronchocele smaller and softer. Within the last three days the swelling in the oesophagus has been more painful, and deglutition has been more difficult. Says that she is like to be choaked when she attempts swallowing, and that the passage feels as if made up. Has three or four stools daily.

Cont<sup>r</sup>. remed.

May 27. Swallows better, but still has a considerable degree of pain. Has lately menstruated for six days, and in greater quantity than for the last three years and a half; feels weak from the discharge.



Omitt<sup>r</sup>. Ta. Iodini. Contr. Pil. Cambogiæ  
Comp.

June 3. She improves in swallowing, but still complains of some pain when deglutition is performed. Says that her throat feels raw, and that any thing warm or solid occasions the greatest degree of pain. Complains of a fluttering sensation at her stomach. Has had four motions from two pills.

Capiat Pilæ. Cambogiæ Comp. gr. v. p. r. n.  
Sumat Tæ. Iodini gutt. xxx. ter in die.

This patient did not afterwards call at my house, and being anxious to know the issue of the case, I called at Silverwood's Place, the 8th of April, 1823, and was informed, by a man of the name of Spurr, an opposite neighbour of Taylor's, that she had left this country about a month before, to go to settle in France with her daughter and son-in-law. Spurr said, that he knew that Taylor had applied to me on account of a difficulty in swallowing, and that he understood that she was cured, or had little or no inconvenience in swallowing, when she left this town.



## CASE V.

Mary Rayner, æt. 45, married, from Sandiacre, Derbyshire. Admitted an Out-Patient of the General Hospital, the 3d of September, 1822. At that time she complained of pain in the throat and tongue, and was directed to take a tea spoonful of the Carbonate of Magnesia, four times a day, and two drachms of the Sulphate of Magnesia, every morning, and to rub the throat with the Linim. Ammon. fort. night and morning.

September 13. Is reported nearly in the same state, except that she received a severe hurt in one of her legs, which has terminated in an ulcer.

Cont<sup>r</sup>. remed. Curet<sup>r</sup>. ulcus cerato Cetacei.

September 24. The skin is inflamed and painful around the ulcer.

Appl<sup>r</sup>. hirud. vi. partibus inflammatis. Curet<sup>r</sup>. ulcus ut antea. Cont<sup>r</sup>. alia.

October 4. Leg much easier. There is still some redness of the parts around the ulcer.

Denuo appl<sup>r</sup>. hirudines vi. partibus inflammatis. Omitt<sup>r</sup>. Magnesiae Carbonas. Cont<sup>r</sup>. alia.

R̄ Spir. Ætheris Nitr. ʒss. Acidi Nitrici dilut. ʒi. Misce, capiat gutt. xxx. ter in die ex aqua.



October 11. Reported better, and that the ulcer is nearly healed.

Cont<sup>r</sup>. remed.

October 18. Complains of pain in the throat, but I can see no redness or swelling on inspecting the *fauces*.

Cont<sup>r</sup>. remed.

November 1. Still complains of her throat, and of some difficulty in swallowing, with a sense of fulness in the oesophagus.

Omitt<sup>r</sup>. remed. Sumat Pilæ. Cambogiæ Comp. gr. x. h. s. et Tæ. Iodini gutt. xv. ter in die ex aqua.

November 8. Throat easier, and not so much swelled. The drops make her sick.

Cont<sup>r</sup>. remed.

November 22. There is a small abscess in the right side of the soft palate, about the size of a pea.

Cont<sup>r</sup>. remed.

December 6. Said to be much the same.

Cont<sup>r</sup>. remed.

December 13. Can swallow very well now, and has no sensation of fulness in the oesopha-



gus. The small abscess in the palate continues in the same state.

Cont<sup>r</sup>. remed.

Dec. 27. Her leg is well. Very little pain when she swallows, but has still a little tingling after taking the drops.

Cont<sup>r</sup>. remed.

January 10, 1823. Can swallow with ease. Throat feels very well.—Discharged cured.

---

REMARKS.—This appears to have been an incipient case of Dysphagia, from a fulness of the oesophagus near the top. When the patient came under my care she did not complain of difficulty of swallowing; I, therefore, considered the case as arising from heat and disorder of the primæ viæ; but when she complained of difficulty in swallowing, and a sense of fulness in the oesophagus, my attention was awakened to the true nature of the disease, and her recovery was very rapid after she began to take the Iodine.

---

## CASE VI.

William Warren, æt. 39, tailor, Blidworth, applied to me for medical assistance the 25th of July, 1823. I find that he has had the sensation of a lump behind the cricoid, and lower part of the thyroid cartilage, for the last three months, attended with pain and difficulty in swallowing, particularly of solids. At times



he can scarcely speak, and cannot sing, which he used to do in the parish church of Blidworth. Is subject to gastrodynia, and does not enjoy good health. Bowels regular.

Capiat Magnes. Sulph.  $\text{ziii}$ . alternis, matutinis et Tæ. Iodini gutt.  $\text{xv}$ . ter in die ex aqua; post septimanam sumat guttas  $\text{xx}$ . tincturæ ter in die.

August 9. The patient states, that in about a week the pain left him, and that he swallowed with more ease. At the present time he says, that deglutition is much less difficult than it was. Bowels tardy. Has taken only one ounce of Salts, and for the first week he took only ten drops of the Tincture of Iodine for a dose, three times a day; and for the second week, sometimes ten, sometimes twenty drops for a dose.

Capiat Tæ. Iodini gutt.  $\text{xx}$ . ter in die, et Magnes. Sulphatis  $\text{ziii}$ . ex aqua tepida alternis matutinis.

This patient never afterwards called upon me, but from the great benefit derived from the use of the Iodine in so short a time, I have no doubt as to the favourable termination of the case, provided the patient has gone on with the medicine as directed. I shall endeavour to obtain information respecting the final issue of this case, and purpose to communicate it.



## CASE VII.

Anne Taylor, æt. 26, frame-work knitter, Arnold, May 8, 1824. Complains of a straitness in the oesophagus, opposite to the cricoid cartilage, and says that her throat feels to be growing up very fast. Is obliged to pull her meat in shreds, and to chew her bread very small before she can swallow them. There is a very slight enlargement of the thyroid gland, but it has nothing to do with the difficulty of swallowing. Face pale, inclined to sallow. Hair of a light brownish red colour. Eyes blue. Tongue a little furred. Appetite bad. Bowels regular.

Capiat Liquoris Iodini gutt. x. ter in die, et Magnes. Sulph. ʒii. mane p. r. n.

May 22. Has been troubled with head-ache since she has taken the Tincture of Iodine. Salts move her twice every other day, and she has one motion on the intermediate day. Says that her gullet feels less hot and painful in the night than it used to do, but does not think that she can swallow any better. Has taken the Salts only twice.

Capiat Magnes. Sulphatis alternis matutinis. Cont<sup>r</sup>. Liquor Iodini.



**June 5.** Has a sensation as if there were little bones in the oesophagus, at the place where it is contracted. Swallows no better.

Cont<sup>r</sup>. Magnes. Sulphat. Sumat Liq. Iodini gutt. xiv. ter in die.

**June 19.** Says that her throat was more "made up" last week, and that she had a return of the sensation of heat. Catamenia regular, but scanty. The drops make her sick for about two minutes after taking them. Takes the Salts every second morning.

Capiat Liq. Iodini gutt. xvi. ter in die, et Magnes. Sulph. alter. matutinis.

**June 26.** Swallows very little better. Bowels open.

Cont<sup>r</sup>. remed.

**July 3.** The three first days of this week she could not swallow a bit of meat. Her throat is now easier, and she can swallow better. Bowels open by the Salts.

Cont<sup>r</sup>. Magnesiae Sulph. Sumat Liq. Iodini gutt. xviii. ter in die.

**July 17.** Her throat has been easier, and she has swallowed better for the last fourteen days. Says that her health is a great deal



better than when she first applied, and that she takes her food with a better appetite.

Cont<sup>r</sup>. remed.

July 31. Says that she can swallow a great deal better, and that her health and appetite continue to improve. Drops agree. Catamenia regular, and not in any way affected by the medicines.

Cont<sup>r</sup>. remed.

August 28. Was not so well last week, but has been better for the last five or six days.

Cont<sup>r</sup>. remed.

October 9. Continues to improve in swallowing.

Capiat Liq. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Magnes. Sulph.

October 23. Has swallowed better for the last fourteen days since the dose of the drops has been increased. Looks better, has got some colour in her cheeks, and gains flesh. Bowels open by the Salts.

Cont<sup>r</sup>. Magnes. Sulphas. Capiat gutt. xxii. Liq. Iodini ter in die.

November 22. Did not swallow so well all last week, and says that she felt as if the sides



of the throat touched each other. She now informs me, that deglutition is always worse before and during the menstrual period. Skin cool. Tongue clean. Bowels regular.

Sumat Liq. Iodini gutt. xxiv. ter in die. Cont<sup>r</sup>.  
Magnesiæ Sulphas.

January 3, 1825. Felt much better, and swallowed with much greater ease, till last week, when she became worse again. Her neck is quite bare. I directed her to wear a piece of flannel round the neck. The drops agree.

Cont<sup>r</sup>. remed.

January 26. Her sister, who has been under my care, at the same time, on account of Scrophulous enlargement of several glands in the neck, of which she has been cured, informs me, that the patient labours under a bad cold, otherwise she would have attended personally, but the sister brings the agreeable news, that the patient began to improve rapidly after the last visit, and that she now can swallow without any difficulty. Is recommended to keep the bowels open by the Sulphate of Magnesia, and to discontinue the use of the Liquor Iodini.—Discharged cured.

---

REMARKS.—I have little or no doubt that the Dysphagia, in this case, was owing to a strumous thickening and contraction of the oesophagus at the upper part of



this tube. This view of the case receives confirmation from her sister being under my care at the same time, for the cure of scrophulous enlargement of the conglobate glands in the neck; she was also cured by Iodine. These are all the cases of Dysphagia, so far as I recollect, in which Iodine has been prescribed by me for the cure of this disease, except two cases: with the first of these I am ignorant of the issue, owing to the patient, who lives at a considerable distance, having neglected to send me word. The other is still under my care as an Out-Patient of the General Hospital. The disease is of sixteen years standing. The patient is pale and emaciated, and she cannot swallow any solid food of greater bulk than a large pin's head. She subsists chiefly on milk. When admitted, I tried to introduce a full sized urethra bougie into the oesophagus, but did not succeed; and a few days back, or 12 months after she had been under my care, I again tried to pass the bougie, but with no better success. Although the patient cannot swallow substances of a larger size than when she was admitted, her general health has been improved, and a stop has been put to the progress of the disease, which was going on increasing before she began to take the Tincture of Iodine. I may observe, that Iodine is probably also of some service in cases of Dysphagia, as a topical application to the parts affected, which it washes in the act of swallowing; but it is chiefly to its effects upon the constitution, in removing morbid action and tumefaction, that we are to look for the cure of this disease.



# MEDICAL RESEARCHES,

ON THE

*Effects of Iodine in White Swelling.*

---

THERE are very few diseases of a more formidable nature than White Swelling of the joints, which, I believe, is almost always connected with a strumous state of the constitution. This disease is generally very slow and insidious in its attacks, which are chiefly confined to the larger articulations: of these the knee, the elbow, and the ankle joints, suffer most frequently. The Morbus Coxarius, or disease of the hip joint, I consider as belonging to the same family as White Swelling.

As my object is only to detail the effects I have found to result from the exhibition of Iodine in White Swelling, I must refer those who wish for full information respecting the symptoms, history, and morbid appearances, on dissection, in this disease, to the excellent works of Mr. Crowther, Professor Russell, and Mr. Brodie, on diseases of the joints.



Before entering upon a detail of the cases, I wish briefly to observe, that I was first induced to exhibit the Tincture of Iodine, internally, as a remedy in White Swelling, from the analogy afforded by the disappearance of the morbid tumefaction, in Miss N.'s foot \*, which had remained for three years after the ulcer was completely healed.

The viscid effusion into the cellular membrane, which constitutes the chief increase of bulk in joints affected with White Swelling, from the analogy which it bears to the glairy fluid contained in bronchocelous tumours, also further prompted me to make trial of Iodine in the cure of White Swelling. The benefit which I have derived from the internal exhibition of Iodine in this disease, justify the most sanguine expectations from its powers as a constitutional remedy, if early exhibited, and steadily persevered in, at the same time I may observe, that we are not precluded, by the use of this medicine, from employing any topical means that may be thought proper and necessary, as auxiliaries in this obstinate and untractable disease.

I proceed to detail the cases in the order in which they occurred.

---

\* Vid. Case IV. p. 23.



## CASE I.

Anne Kidd, æt. 28, married, and suckles a child, six months old. Lived in Little Guilford Street, London. Applied to me for gratuitous advice, the 12th of September, 1821. She informed me, that she had laboured under a disease in the left knee for the last twelve months; that she had been under the care of Mr. G. Surgeon, of Great Surrey Street, who recommended her to go into the country for the benefit of fresh air. Before she came into the country she was very much reduced in her flesh and strength, and had lost her appetite. Since she has been in the country, she informs me, that she has, in a great measure, recovered her flesh and strength, and says that her appetite is very good.

The knee is uniformly swollen, and firm when pressed, without any fluctuation in the cavity of the joint, or any external redness of the skin, but the veins are much larger, and more numerous than natural, and the temperature is higher. An ulcer formed in consequence of the bite of a leech, the 3d May last, and has not since healed. Informs me, that she has had 28 leeches, in the whole, applied to the knee, since it has been bad. The knee measures two inches more in circumference than the sound one, and she says that the complaint began with aching in



the bone, and that the knee is sore all over when she is warm in bed. She complains of much stiffness, weakness. and pain, when she walks, and the leg is bent, in a certain degree, on the thigh. I find the following observations in my journal: the case is decidedly White Swelling, and as a collateral proof that it is of a strumous character, I have learnt, by interrogating the patient, that her father and a brother have lately died of consumption. Her bowels are inclined to be costive. Tongue a little furred.

Sumat Magnesiæ Sulphatis  $\text{ʒii}$ . omni mane si tarda est alvus.

R̄ Tæ. Iodini  $\text{ʒss}$ . Capiat guttas  $\text{xx}$ . ter in die ex cyatho vinario aquæ et post septimanam ægra sumat guttas  $\text{xxx}$ . ter in die. Curetur ulcus Cerato Catacei.

---

NOTE.—This woman was desired to call upon me occasionally, but she never did so; I learnt, however, from the Druggist who furnished the medicine, that she had called several times for a supply of it, and told him, that she was a great deal better, but that was all he knew respecting the effects of the medicine. As I was anxious to know the issue of this case, I wrote to the patient's husband, requesting him to inform me respecting the benefit his wife had derived from the Medicines prescribed for her by me, but no answer was returned. I was determined, if possible, to find out how the case had terminated, and am indebted to the kindness of two of my friends for finding her out in London! but all the satisfaction or information that she would give them was, that her knee was perfectly well.



## CASE II.

Henry Richardson, æt. 7, Exchange Court, Mount Street, November 3, 1821. His left knee has been swollen between four and five months. The skin is of the natural colour, but the knee is painful when pressed, or when he walks or stretches out the leg in bed. The left knee measures about an inch more than the sound one. I have no doubt of the disease being **White Swelling**: as a collateral proof I may observe, that his maternal aunt once laboured under White Swelling in the knee, which terminated in a stiff joint, so that she is now obliged to walk on her tip-toe. I directed a blister to be applied to each side of the patella, and desired his father to give him a quarter of an ounce of Epsom Salts every morning, and to bring him to me in the course of a few days.

November 6. Thinks the knee rather easier since the blisters were applied. The Salts move him two or three times daily. Appetite moderate.

Capiat Magnesiae Sulphatis ʒii. omni mane et Tæ. Iodini gutt. xii. ter in die ex cyatho vinario aquæ.

November 10. Blisters nearly healed. The knee is no smaller, but says that it is not so



painful. Has two motions daily. Pulse 84, small and soft. Sleeps better.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>.  
Magnesiæ Sulphas.

November 17. Has less pain in the knee, but it is no smaller. Bowels opened two or three times daily by the Salts.

Capiat Tæ. Iodini gutt. xxv. ter in die.

December 1. Except one night, has been free from pain in the knee since last report. The knee measures half an inch less than when he came under my care. Bowels open.

Capiat Tæ. Iodini gutt. xxx. ter in die. Cont<sup>r</sup>.  
Magnes. Sulph.

December 12. Last week had some slight return of pain in the knee, but it is quite easy now. There is still a little fulness of the knee, which a blister perhaps may assist in dissipating.

Capiat Tæ. Iodini gutt. xxxv. ter in die.  
Cont<sup>r</sup>. Magnes. Sulphas. Appl<sup>r</sup>. Emp. Cantharidis genu.

---

NOTE.—This boy was not again brought to me, which I thought very strange. On the 6th of October, 1823, I happened to be in the court where his father lives, and called to enquire after the boy, and to ask the reason why they did not continue to bring him to me. The mother of the boy, with a very sorrowful countenance, informed



me, that an old woman persuaded her husband and herself to rub the knee with a mixture of oils, which she warranted to cure the disease, but after rubbing the knee with the oils for some time, it became much worse, and the plan was abandoned. Another old woman undertook to cure the disease by poultices of figs, which she extolled as an infallible remedy in White Swelling. Under this treatment the knee enlarged, suppurated, and burst, in three or four places; now there are six openings, discharging more or less matter, and the boy is greatly emaciated, but he is still able to sit and run lace. After being nearly exhausted by the discharge, he was admitted an In-Patient of the General Hospital, under the care of Mr. Attenburrow, and his life was saved by this able and experienced Surgeon performing amputation of the thigh, the 3d of March, 1824. From the progress made towards a cure during the time that the patient continued under my prescription, I have no doubt whatever, that the Iodine would have accomplished a complete cure in this case, if the credulity of the parents had not been imposed upon by the impudent pretensions of the old women.

---

### CASE III.

Mrs. E. æt. 33, March 9, 1822. Is of a scrophulous constitution, and had an abscess in the left hip, which was opened about two years since, and still continues to discharge a little thin, and at times, curdy looking matter. She informs me, that the right elbow joint has ached for the last two years; there is a general fulness, swelling, and stiffness of the joint, so that the arm is always bent in a certain degree,



and cannot be extended. The skin covering the affected joint is of the natural colour. Says that she has great pain in the elbow when she attempts to lift a heavy body with the right hand. When her arm is suspended in a sling, says that she experiences rather an aching sensation than pain. Bowels sometimes tardy.

Capiat Pil. Cambogiæ Comp. gr. x. h. s, pro re nata. Sumat Tæ. Iodini gutt. xx. ter in die ex aqua. Appl<sup>r</sup>. Emp. Cantharidis cubito dextro h. s.

March 14. Blister rose well; the joint is less swelled, and is free from pain. The ulcer in the hip discharges less. Bowels open by the Pills.

Capiat Tæ. Iodini guttas xxv. ter in die. Cont<sup>r</sup>. Pilæ. Cambogiæ Comp.

June 12. She informs me, that she has taken thirty-five drops of the Tincture, three times a day, since last report, with advantage. The object of her present visit to me is to know what she is to do with a suppurating gland, about the size of a pullet's egg, on the inner part of the right arm, a little above the brachial extremity of the ulna. The joint is less swelled and stiff. The left hip feels almost well, but still discharges a little. Has been in the country the last ten days for change of air.



**Capiat Tæ. Iodini gutt. xxxv. ter in die.  
Cont<sup>r</sup>. Pil. Cambogiæ Comp.**

---

This patient did not call upon me again for six months. She derived so much benefit from the Iodine, that after the bursting of the abscess, she could use her arm as well as ever, the joint continues somewhat stiff, and the arm a little bent.

---

#### CASE IV.

James Brown, æt. 15, Broad Marsh, September 10, 1822. Has been ill for nearly seven years, of a White Swelling of the left ankle. At the commencement of the complaint, he was under the care of a very able Surgeon, and afterwards had the assistance of another very able and experienced Surgeon, but without any material or permanent benefit. Has applied to me for gratuitous assistance. He is certainly an object of commiseration, for his parents are poor, and he cannot walk without a stick in one hand, and the support of a person on the opposite side. In walking he only allows the left heel to touch the ground, the left toes are pointed outwards, and the inside of the foot moved forward in progression, instead of the toes, owing to the stiffness and pain in the ankle joint. This joint, and a portion of the instep adjoining, are considerably swollen,



and painful when he walks, or even rests the weight of the body upon the left foot. The skin covering the affected parts is not discoloured, and the vessels are not sensibly dilated. Complexion pale, with some freckles. Hair of a light sandy colour. Eyes bluish grey. Face and lips swollen, which he ascribes to a carious front tooth. Tongue red and smoother than natural. Flesh soft and flabby, particularly the left leg. Pulse 84, and of moderate strength. Bowels in general regular.

Capiat Magnesiae Sulphatis zi omni mane et Tæ. Iodini gutt. xv. ter in die ex aqua.

September 12. The swelling of the face is almost gone. Ankle in the same state. Stools of a light yellow colour. Drops agree.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Magnes. Sulphas.

September 19. He improves in his looks; the parts affected continue as before. Pulse 84, and of better strength. Tongue clean. Bowels open.

Sumat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. Magnesiae Sulphas. p. r. n.

September 26. Continues to improve in health, and his appetite is better. Bowels moved once or twice daily.

Cont<sup>r</sup>. remed.



October 15. His mother reports, that the ankle joint is less swelled; that her son's general health is better, and that his appetite is very keen. Bowels moved twice a day.

Cont<sup>r</sup>. remed.

October 31. The swelling is very much reduced, indeed, has nearly disappeared, except at the outer ankle, and a very slight degree of swelling at the inner ankle. When he walks, he still experiences some pain across the instep, near to the affected joint. His general health continues to improve: he gains flesh and strength, and begins to have a little colour in his cheeks. Pulse 76, and firm. Tongue clean. Bowels regular by the Salts. Lips are now of the natural size, and the tooth does not give him pain.

Cont<sup>r</sup>. remed.

November 5. His parents being unable to purchase the Medicines, he has been this day admitted an Out-Patient of the General Hospital. The following report is entered in my Journal, at the Hospital:—On the 10th of last September, he applied to me on account of considerable pain, swelling, and stiffness in the left ankle joint and instep, of seven years standing. He is much better, but is not yet well. General health greatly improved. Bowels regular by Salts.



**Sumat Tæ. Iodini gutt. xxx. ter in die ex aqua, et Magnes. Sulphatis ʒi. alternis matutinis. Utatur Pediluvio alternis noctibus.**

**November 15.** Is rather better. Swelling in the ankle continues to subside.

**Cont<sup>r</sup>. remed.**

**November 29.** General health better. Ankle much less swelled, but the joint is still stiff. Drops agree. Bowels open.

**Cont<sup>r</sup>. remed. Fric<sup>r</sup>. partes affectæ Lini-mento Ammon. fort. bis in die.**

**December 13.** His left foot and leg feel cold this severe weather. In other respects he is nearly as at last report.

**Cont<sup>r</sup>. remed.**

**December 27.** His mother reports, that he has more use of the ankle joint, and that the swelling continues slowly to subside. Drops agree. Health very good, and takes his food with an appetite.

**Cont<sup>r</sup>. remed.**

**January 10, 1823.** Can walk better, and has less pain in the instep. Swelling much gone down.

**Cont<sup>r</sup>. remed.**



February 14. His mother reports, that he can walk better, and lately has been able to skate, and thinks he improves by the exercise.

Cont<sup>r</sup>. remed.

February 28. The swelling is very nearly gone. Still complains of some pain in the instep. Labours, at present, under a catarrhal affection and cough.

Intermit<sup>r</sup>. Tæ. Iodini. Capiat Mist. Antim. Comp. coch. i. medium ter in die. Bibat Infusum Lini ad libitum. Cont<sup>r</sup>. Magnes. S. p. r. n.

March 14. His mother reports, that he has entirely left off his stick, and that he is a great deal better. Appetite good. Catarrhal affection and the cough are nearly gone.

Omitt<sup>r</sup>. Mist. Antim. C. Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. alia.

April 4. There is very little swelling, and he gradually recovers the use of the ankle joint. No cough.

Capiat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. alia.

April 18. Continues to improve in walking, and gains more power in the joint every day. He can now walk about and carry a load as heavy as his father can.

Cont<sup>r</sup>. remed.



May 2. His mother reports, that he improves very much in walking. General health good. Appetite excellent.

Cont<sup>r</sup>. remed.

May 16. Continues to recover.

Cont<sup>r</sup>. remed.

May 30. The patient was in the habit of wearing laced boots; and the last time I saw him, I desired him to wear shoes. He now informs me, that he has gained greater extent of motion since he has substituted the shoe for the boot. The drops do not disagree in the least.

Omitt<sup>r</sup>. Linim. Amm. fort. Fricentur partes affectæ Linim. Iodini mane et h. s. Cont<sup>r</sup>. alia.

June 13. Continues gradually to improve, but there is still a little pain in the fore part of the joint, when he walks.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Linim. Iodini et Magnes. Sulphas.

July 4. There is scarcely any swelling in the ankle joint; is free from pain, and can walk almost as well as he ever could. His general health is greatly improved, and he has gained flesh ever since he began the use of the Iodine.

Cont<sup>r</sup>. remed.



July 18. Has nearly the perfect use of the left ankle joint. Is grown much taller and stouter since he has been under treatment. Complains of a good deal of hardness and pain in the right axilla, and edge of the right pectoral muscle, in consequence of a hurt.

Appl<sup>r</sup>. hirud. vi. partibus affectis, et Catap. Emol. h. s. Cont<sup>r</sup>. alia.

July 25. Still complains of some pain, and hardness in the right axilla. Several conglomerate glands are swelled, and painful to the touch.

Appl<sup>r</sup>. hirudines iv. tumoribus. Cont<sup>r</sup>. Catap. Emol. Cont<sup>r</sup>. alia.

August 8. The leeches and poultices removed the pain and swelling, and he has been at work for the last ten days. Has recovered the complete use of the ankle joint, and his health is very good.

Cont<sup>r</sup>. remed.

August 22. His mother has come to the Hospital to return thanks. She reports, that her son is perfectly well, and that the use of his ankle joint is completely restored.—Discharged cured.



REMARKS.—This patient might have been discharged cured on the 18th of April last, as it appears from the Hospital Journal, that at that time he could walk about, and carry a load as heavy as his father could ; but if I had withdrawn the Iodine at that time, there would have been great risk of a relapse, whereas by continuing the medicine for a longer period, the constitutional disposition to the disease was completely subdued, and the young man has remained in perfect health ever since he was discharged. The above case so clearly shews the remedial efficacy of Iodine in White Swelling, that it would be quite superfluous to make any remarks upon it.

---

#### CASE V.

Charles Thornton, æt. 33, frame-work knitter, Rookery. Was admitted an In-Patient of the General Hospital, the 17th of December, 1822. This man came under my notice and prescription, as a patient of St. Mary's Dispensary, about six weeks since, when he laboured under pain, swelling, and stiffness, with some crepitus, in both the elbow joints, and in the left wrist. Skin not discoloured. He cannot use the left hand to do the lightest work, owing to the stiffness and contraction of the left elbow joint, the stiffness of the wrist, and emaciated state of the whole arm. The right elbow joint is stiff and contracted, but in a much less degree. Is of a thin, spare habit, and complains that he cannot keep the left arm warm. Except the above affection of the elbows and wrist, he enjoys a tolerable state of health. I prescribed the Tincture of



Iodine for him, and directed the parts affected to be blistered, when he was a patient of St. Mary's Dispensary, and he has been free from pain for three or four weeks, but when he attempts to make any considerable exertion with his arms, or even to straighten them, there is still some return of the pain. For the last five days has employed a liniment to rub the parts affected. Has been ill for two years. Pulse 84, and firm. Face pale.

Capiat Tæ. Iodini gutt. xv. ter in die ex aqua. Sumat Mist. Purg. ʒiiss. omni mane si tarda est alvus. Fric<sup>r</sup>. partes affectæ Linim. Ammon. fort. mane et h. s.

December 21. Is nearly in the same state as when admitted.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. vapor aquæ bullientis partibus affectis alternis matutinis.

December 23. The steam of boiling water was applied for the first time this morning. I do not feel any crepitus now, on trying to move the stiff joints. The swelling continues, and he has some pain in the elbow joints, when he makes an effort to straighten the arms. Pulse 84, and of moderate strength. Bowels moved twice every day.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont. alia.



January 6, 1823. The swelling is nearly removed, and he can move the elbow joints better, but the rotation of the left arm, at the wrist, is very limited, and when force is employed, it gives him pain. No crepitus is now to be felt. His general health is better, and his cheeks, from being pale, have recovered a little colour.

Cont<sup>r</sup>. remed.

January 11. Is better, and feels less pain when he moves the affected joints.

Cont<sup>r</sup>. remed.

January 18. The swelling in the elbow joints is quite gone. The left wrist is now but very slightly tumefied. There is still a considerable degree of stiffness in the joints, and he feels some pain in them when they are moved by external force. His arms are very weak.

Cont<sup>r</sup>. remed.

January 28. Discharged the Hospital much relieved.

---

REMARKS.—This man derived very considerable benefit from the means employed; and had they been employed in an earlier stage of the disease, it is probable, that the success would have been more complete. I called upon him the 31st of March, 1825, to enquire after the state of his health, but he was from home. I had the



pleasure, however, to learn, from an inmate of his house, that he continued gradually to improve for some time after he left the Hospital, and that he has been able to earn a living by working gloves in a frame, for a considerable time past.

---

## CASE VI.

Thomas Goodson, a twin, aged two years and four months. His father brought him to me for advice, the 28th of December, 1822. His right knee was considerably enlarged at this time, and his father informed me, that it had been so for twelve months previously. The child complained some time since of greater pain in the knee than at present, but he still limps when he walks, and keeps the leg bent on the thigh, so that in walking he only puts the point of his shoe to the ground. The right leg and thigh are wasted, the right knee measures one inch more than the left, the skin is of the natural colour, except that the veins are larger than in the sound limb. His knee has been four or five times bled with leeches, by the direction of an intelligent Surgeon, in this neighbourhood, and his parents have been in the habit of rubbing it with Neat's Feet Oil and Vinegar. There is a large speck in the right cornea, opposite the pupil, and a thinner opacity in the left eye. There is an offensive discharge from the left ear. This child is of a



strumous constitution : in corroboration of this I may mention, that his younger brother was brought to me with the sides of the chest compressed to about the diameter of two inches and a half, and the sternum proportionally projecting forwards. As was to be expected, he soon died. Is generally costive, and his stools dark, and more offensive than natural.

R Pulv. Jalapæ.....gr. xxvi.

Hydr. Submur.....gr. xii.

Misce et divide in Pulv. vi. Habeat i. omni nocte ex syrupo.

December 31. His bowels have been freely moved by the powders. Knee in the same state.

Repet<sup>r</sup>. Pulvis. mane si tarda est alvus. Sumat Tæ. Iodini gutt. v. ter in die ex aqua.

January 9, 1823. Eyes brighter and stronger, and can bear the light of a candle now, which he could not do when I first saw him. Speck on the left cornea nearly gone, and that on the right is thinner, and continues to fade. The right knee measures about a quarter of an inch less. Bowels open by the powders.

Cont<sup>r</sup>. remed.

January 16. His knee is nearly in the same state. Bowels open.



Capiat Tæ. Iodini gutt. vi. ter in die. Appl.  
Emp. Cantharidis genu h. s.

January 23. The blistered part inflamed,  
and a poultice was applied last night. Bowels  
regular.

Cont<sup>r</sup>. remed.

January 30. Blister healed. Knee smaller.  
Bowels open. Vomits the powders when given  
in the morning. Has taken only five drops of  
the Tincture for a dose.

Capiat Pulv. Aper. h. s. si tarda est alvus.  
Sumat Tæ. Iodini gutt. v. ter in die.

April 23. His mother, without my know-  
ledge, left off the drops till within the last week,  
when she began to give them again. Bowels  
open. The right knee measures exactly half an  
inch more than the left.

R. Adipis præparatæ..... ʒi.

Tæ. Iodini..... ʒi.

Misce ft. Ung. quo fricetur genu affectum  
mane et h. s. Capiat Tæ. Iodini gutt. v. ter  
in die.

May 15. General health better, and looks  
more ruddy. The speck in the right cornea is  
no smaller or thinner.

Cont<sup>r</sup>. remed.



℞ Argenti Nitratis.....gr. i.  
 Aquæ Distillatæ..... ʒi.—Solve.  
 Instill<sup>r</sup>. gutt. vi. solutionis in oculo dextro omni  
 nocte h. s.

May 22. Knee not sensibly smaller since it was last measured. The speck appears to be thinner.

Cont<sup>r</sup>. remed.

June 12. Walks better, and does not keep the leg so much bent on the thigh; when I first saw him, he could only put the point of the shoe to the ground; now he can tread almost flat. Speck thinner.

Cont<sup>r</sup>. remed.

July 25. Can now walk pretty well. Knee smaller, but still stiff, and contracted, in a certain degree. Speck thinner. The left cornea is quite clear. Has grown fast of late. Complexion ruddy.

Cont<sup>r</sup>. remed.

---

NOTE —This child was not again brought to my house, but he was admitted, under my care, as an Out-Patient of the General Hospital, December, 30th 1823, on account of Scrophulous Ophthalmia and specks in the cornea. His knee continues very stiff, and contracted in a certain degree, but it is not much larger than the sound one. There



is a strong strumous disposition in the children of this family; and I am firmly persuaded, that if the disease in this case had not been overcome by Iodine, my young patient must long since have lost either his limb or his life. I have seen this boy since the case was sent to press, he is in perfect health, the specks are removed, but he will have a stiff and contracted knee as long as he lives.

---

### CASE VII.

Benjamin Shepherd, æt. 26, frame-work knitter, Lenton. Was admitted an Out-Patient of the General Hospital, the 7th of January, 1823, at which time he had been ill for nearly twelve months, with pain, swelling, and stiffness in the right elbow-joint. Said that the pain came on suddenly at first, and, with the other symptoms had gradually been getting worse, so that when admitted he had no use of the elbow joint, and could not raise the right arm to his head. There was an enlarged lymphatic gland on the inside of the right arm. Skin of the elbow of the natural colour. The right knee was slightly swollen, stiff, and painful. Is of a strumous habit. He had used some remedies, with the nature of which I am unacquainted, before coming under my care, but it did not appear that he derived any benefit from them, and on that account he became a patient of this establishment. Pulse 86, and hard. Bowels costive. Tongue dry.



Capiat Pil. Cambogiæ Comp. gr. x. omni nocte h. s. Sumat Vini Ipecac. C. gutt. xxx. ter in die. Fric<sup>r</sup>. partes affectæ Linimento Ammon. fort. m. et h. s.

January 10. Is much in the same state, except that his bowels are open. Pulse 84, small and soft.

Omitt<sup>r</sup>. Vinum Ipecac. Comp. Cont<sup>r</sup>. alia. Sumat Tæ. Iodini gutt. xv. ter in die ex aqua.

January 24. Has less pain in the elbow joint when he moves the arm, and the swelling has subsided considerably. Gland smaller. Pain of the right knee and soft parts of the leg much easier. His general health is improved.

Capiat Tæ. Iodini gutt. xx. Cont<sup>r</sup>. Pil. Cambogiæ Comp.

February 14. Says that his knee is well, and the arm much better. Appetite not so good. Gland about half the size it was when he was admitted. Bowels open by the Pills. Drops make him sick.

Cont<sup>r</sup>. Pilul. Cambogiæ Comp. Sumat Tæ. Iodini gutt. x. ter in die.

February 28. The right arm is now so strong and free from pain, that he can work in the frame. The swelling of the elbow joint is



greatly reduced. Gland very small. Appetite bad. Is often troubled with a sense of chilliness down the back, and generally perspires freely about two or three o'clock in the morning. Coughs a good deal, and expectorates what he describes as an "almost black phlegm." Bowels tardy, even when he takes three Pills. Stools of a light colour, but very offensive. Says he is very subject to fever.

Omitt<sup>r</sup>. T<sup>a</sup>. Iodini. Cont<sup>r</sup>. Pil. Cambogiæ Comp.

R Sodæ Tartarizatæ ʒii. Aquæ O. I. Solve ft. Mistura cujus capiat ʒi. tertia quaque hora de die.

March 14. A neighbour reports, that his appetite is quite gone since he left off the drops, that the pains in the joints have returned, and that he is confined to his bed.

Omitt<sup>r</sup>. Mistura cum Soda Tartar. Cont<sup>r</sup>. Pil. Cambogiæ Comp. p. r. n. Sumat Tæ. Iodini gutt. xv. ter in die.

March 21. Is reported rather better.  
Cont<sup>r</sup>. remed.

March 29. Has walked a mile and a half to the Hospital. Appetite is much better. There is some tumefaction of the outside of the right knee, and pressure occasions pain. The elbow



is so well he can work again in the frame, but there is still a good deal of swelling and stiffness of the joint. Appetite better since he has resumed the use of the Tincture of Iodine, of which he has taken seventeen drops three times a day, for the last week.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>.  
Pilæ. Cambogiæ Comp. h. s. p. r. n.

May 2. The right elbow is less stiff. About fourteen days since, the swelling of the right knee began to subside, and it is now nearly gone.

R. Adipis Præp..... ʒii.

Tæ. Iodini..... ʒii.

Misce ft. Unguentum quo fric<sup>r</sup>. partes affectæ  
mane et h. s.

May 30. Says that he feels much better in every respect. Has taken twenty-three drops of the Tincture of Iodine, three times a day, for the last fortnight. The right knee measures very little more than the left. The elbow joint is so far recovered, that he can work at his trade as well as ever, but cannot yet completely straighten the arm. Thinks that the frictions with the ointment have done him good.

Sumat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>.  
Unguentum Iodini et Pil. Aper.

June 13. There is now a considerable swell-



ing in the outer part of the ham, and lower and outer part of the right thigh, that gives a distinct sense of fluctuation when pressed. The right knee joint is not affected, but by the locality of the swelling, and two-thirds of the knee are entirely free from it.

Cont<sup>r</sup>. remed.

---

NOTE.—This man did not again return to the Hospital, but I have learnt from different persons of the same village, that he is in good health, and gains a livelihood by exercising his trade of a frame-work knitter.

---

### CASE VIII.

See Mary Edwards' Case, page 279, et seq.

---

### CASE IX.

Mrs. R. W. æt. 20. March 19, 1823. Is of a strumous constitution, hair red, complexion fair. The right wrist is stiff and deformed, and hand weak in consequence of a scrophulous affection, for which she was under my care six years ago. She now complains of swelling, stiffness and pain in the left ankle joint and instep, of three months standing. The pain is aggravated by walking, but she has also been troubled with it for the last three nights, when in bed. The skin, covering the parts affected,



is not discoloured. Has been married only four months. Menstruated last week. For the last six months has been troubled with pain in the sacrum and region of the pubes, attended with frequent desire to make urine, which is scanty, and becomes thick on standing. Bowels regular. Pulse small and soft. Skin cool.

Capiat Pil. Cambogiæ Comp. gr. x. h. s. et Tæ. Iodini gutt. xv. ter in die ex aqua.

March 26. Is nearly in the same state. Bowels open.

Capiat Tæ. Iodini gutt. xx. ter in die. Cont<sup>r</sup>. Pilulæ.

April 12. The ankle and instep are much less swelled, but she complains of weakness in the joint when she walks. Is troubled with pains in both shoulders, particularly in the right. The frequent desire to make water has ceased, and also the pain in the sacrum and pubes. Pulse firmer than when she first applied, but still below the natural strength, and her hands and feet are generally colder than natural, owing, it appears, to a languid state of the circulation.

Capiat Tæ. Iodini gutt. xxv. ter in die. Cont<sup>r</sup>. Pilulæ.

April 17. The swelling of the ankle continues



to subside, the joint feels stronger, and is free from pain, even when she walks. The pain in both shoulders is troublesome, particularly when she is warm in bed.

Cont<sup>r</sup>. Pil. Sumat Tæ. Iodini gutt. xxx. ter in die.

April 23. The ankle and instep are only slightly swelled now, and are free from pain. The pain continues in both shoulders.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. hirudines iv. utrique humero.

April 24. The leech bites bled well, and she had a better night, but she does not feel much easier to-day. Bowels open.

Appl<sup>r</sup>. Catap. Emol. humero singulo h. s. Cont<sup>r</sup>. alia.

May 3. The leech bites bled for half an hour the morning after the application of the poultices, on their being removed. The pains in the shoulders continued easier till last night, when they became worse, which the patient ascribes to her taking a little ale to supper. The ankle is still slightly swollen, but continues free from pain.

Vespere Appl<sup>r</sup>. hirudines vi. humeris. Cont<sup>r</sup>. alia.



May 24. When she walks about a great deal, the left ankle sometimes swells, in a slight degree, but it is free from pain and weakness. The pains in the shoulders have entirely left her, and she says that she now feels perfectly well.—Cured.

---

REMARKS.—The pains in the shoulders, in this case, were, I believe, of the rheumatic kind, as the patient experienced no relief from the pain in them by the Iodine, but decided relief from the leeches, at the same time that the Iodine was accomplishing a cure of the White Swelling in the ankle and instep. The patient, I believe, has experienced no relapse. As corroborating the correctness of the opinion I have given respecting this young woman being of a strumous constitution, I may mention, that I was requested to visit her mother about six months since, who I found in the last stage of Phthisis Pulmonalis; and some years ago I attended her brother, who laboured under a severe attack of Scrophulous Ophthalmia.

---

## CASE X.

Julia Bamford, æt. 26, lace mender. March 22, 1823. The left knee has been swelled, in a certain degree, for eleven years, and especially in the Spring and fall; lately the pain in the knee has been more severe than usual, particularly at the upper and inner side of the patella. Says that she is often troubled with pain all over the knee, and that it burns and looks red after she has stood for three or four hours, to



wash or iron clothes. The skin of the knee is colourless to-day. The left knee measures fifteen inches, the right fourteen inches in circumference, and there is one spot of the diseased knee that feels hotter than the neighbouring parts. Bowels tardy. Hair brown. Eyes light blue.

Capiat ægra Pil. Cambogiæ Comp. gr. x. vel. xv. hora somni pro re nata, et Tæ. Iodini gutt. xv. ter in die ex aqua.

March 26. Yesterday struck her left foot accidentally against a stone, and her knee has been more uneasy since.

Cout<sup>r</sup>. Pilæ. Cambogiæ Comp. Sumat Tæ. Iodini gutt. xx. ter in die.

---

NOTE.—This patient continued the medicines as above prescribed, until she had taken four half ounce bottles of the Tincture, without coming to me, at the end of which time, the pain and swelling of the left knee were completely removed, and she remained perfectly well up to the 11th of April, 1825, when she called upon me respecting the health of a younger sister.

---

## CASE XI.

Mr. —, æt. 47, a master stone mason. August 1, 1823. There is an uniform swelling of the left knee, which gives him pain when he walks; and when he is seated, and attempts



raising the leg into a horizontal posture, the pain darting through the affected joint is so great, that he is instantly obliged to desist. The skin of the knee is not in the least discoloured, but the veins are swollen, and appear, from that circumstance, to be more numerous than natural. The patella is not to be discovered by the eye, the ham is fuller than natural, the left leg and thigh are wasted, in a certain degree, and the knee measures an inch more than the right. The right ankle has been swelled and stiff for the last three months, and when he walks it gives him pain. The affection appears to be of a similar nature to that of the knee. About four or five years ago, I find he was under a quack for the cure of bubo; the gland did not suppurate, it still remains larger and harder than natural, but is free from soreness. Is subject to gravel, and has at times passed small calculi, about the size of common shot, for the last ten or twelve years. Pulse 96, and of moderate strength. Tongue a little furred. Appetite moderate. Was under the prescription of two eminent Physicians, of this town, in succession, for a considerable time, but without any benefit. He next applied to the late Dr. W. of Ripon, in Yorkshire, but without relief. He afterwards put himself under the care of Mr. J. whom he represents as an eminent Surgeon, in Yorkshire, and he thinks that this gentleman was of more service to him



than any other practitioner ; but as he failed in doing more than affording temporary relief, he afterwards applied to different irregular practitioners, some of whom, he informs me, made use of severe applications to the knee, but without any permanent benefit, and others of the same fraternity would not meddle with the case, as being beyond their skill. I know nothing of the means made use of by the different parties in this case ; and if I did, it would be of no use to enumerate them, as it does not appear, from the patient's statement, that he derived any lasting benefit from any of them.

Capiat Pil. Hydrarg. gr. x. m. et h. s. Sumat  
Tæ. Iodini gutt. xv. ter in die ex aquæ cyatho.

R Adipis Præp..... 3i.

Tæ. Iodini..... 3iss.

Misce, ft. Ung. cum quo optimè inungatur  
genu affectum mane et hora somni. Utat<sup>r</sup>.  
Balneo ad gradum 96<sup>um</sup>. bis in septimana.

August 6. Feels much better. The left knee measures nearly the same as the right. The patient remarks, that the swelling is so much gone, that he now can see the knee pan. Says that the pain is very much abated, and that he can walk better.

Cont<sup>r</sup>. remed.

August 22. I have visited the patient about



twice a week, since last report. After the pain and swelling in the knee abated, he began to complain of pain in the long bones; and the left testis began to swell about the same time, but the tumefaction was not attended with acute pain. The same treatment has been continued, except that he has taken twenty drops of the Tincture of Iodine for a dose. To-day he can raise the left leg, and support it in the horizontal posture, without any inconvenience, which he says he could not have done for the world when he came to me. The right ankle joint is also much easier, and the swelling greatly reduced. The pains in the middle of the long bones are easier, and he is altogether so much better and easier, that he has lately attended to business, and even has done some light work himself. He has used an alum gargle to prevent his mouth from becoming sore. The right ankle has been rubbed with the Iodine Liniment for the last fortnight.

Cont<sup>r</sup>. remed.

August 29. Continues to improve, and complains of very little pain. The left testis is still swelled, but not painful. Mouth not sore.

Cont<sup>r</sup>. remed.

September 4. He complains of very little pain in the knee, even when he walks, and



when at rest is perfectly free from it. When he stands or walks, he still feels a little pain in the right ankle joint, which is scarcely more swelled than the left. Was purged five or six times yesterday, and he has had three motions, with some tenesmus, to-day.

Contr. remed. Sumat Tæ. Opii gutt. xv. h. s. et gutt. x. bis de die perstantê diarrhoeâ.

September 10. The patient continues to improve in health, and to recover flesh and strength. He works all day. Left knee no larger than the right, and it is free from stiffness, but feels a little weak. He says that the right ankle is nearly well. Left testis still a good deal swelled, but it is free from pain. The purging was soon stopped by the Tincture of Opium.

Contr. remed.

October 4. Is greatly improved; indeed, he says that he feels nothing the matter with him.

Contr. remed.

No more notes of the case were taken after the 4th of October. The patient continued to take the medicines with great regularity till Christmas, 1823, with the exception of fourteen days, during which time they were omitted by



my direction. When he left off the medicines at Christmas, he felt very well, and has enjoyed excellent health and spirits ever since.

---

REMARKS.—I find that my journal has no note of my opinion respecting the nature of this case ; but from what I recollect to have passed in my mind at the time, as well as from the plan of cure, I considered the disease as White Swelling, complicated with Syphilis. Others may entertain a different opinion as to the nature of this disease ; but for my own part, I am always satisfied, when the opinion I form of the nature of a disease, conducts me to a successful mode of treating it.

---

Besides the cases of White Swelling detailed above, I have treated successfully, by the exhibition of Iodine, another case of White Swelling of the ankle joint ; one case of Dropsical Effusion within the knee joint, occurring in a female of a strumous constitution ; and a case of enlargement, pain, and stiffness of the ankle joint, of twelve months standing, originating in a sprain. The two last of the cases to which I have referred, I do not mention as examples of White Swelling, but as diseases nearly allied to it, that were cured chiefly by the internal exhibition of Iodine. It is necessary to observe, that a blister was also applied to the knee of the patient labouring under the Dropsical Effusion within the joint. As it does not appear to me that any advantage would result from detailing the above cases, and that the space may be better employed, I proceed to notice a few cases of disease of the hip joint, with the treatment employed.



*Cases of the Morbus Coxarius, or Disease of the Hip Joint, in which Iodine was employed as the chief remedy.*

---

**CASE I.**

Henry Houghton, aged two years and a half. New Radford, March 19, 1823. The right lower extremity is very much wasted, and is longer than the other. The right hip is considerably larger than the sound one, and he cannot walk a step. Bowels irregular.

℞ Hydr. Submur.....gr. ii.

Pulv. Jalapæ.....gr. v.

Misce ft. Pulvis alternis matutinis sumendus.  
Imponatur Emp. Cantharidis Coxæ affectæ.

April 23. His bowels are now open. Hip still painful.

Denuo Imponatur Emp. Cantharidis Coxæ.  
Capiat Magnes. Sulphatis zi. mane. Omitt<sup>r</sup>.  
Pulvis. Aper. Sumat Tæ. Iodini gutt. v. ter in die.

August 9. He has not taken the drops regularly, and has not been brought to me for a month. The child's general health is improved, and he can walk when he has something to balance or support him, as a wall.



Cont<sup>r</sup>. remed.

R Adipis Præp. ʒi. Tæ. Iodini ʒiss. Misce  
ft. Unguentum quo fricentur partes affectæ  
mane et hora somni. Repet<sup>r</sup>. Sulphas Magne-  
siæ p. r. n.

August 21. Is better, according to his mother's report, and improves in walking. Has not taken the Tincture of Iodine regularly. Friction with the Iodine Ointment has been regularly employed.

Sumat Tæ. Iodini gutt. v. ter in die. Cont<sup>r</sup>.  
Ung. Iodini et alia.

September 6. Continues to improve. Has more power and feeling in the affected limb. Is desired to walk with crutches.

Cont<sup>r</sup>. remed.

September 9. Can walk pretty well with crutches; when he attempts walking without them, he places the right hand on the right thigh of the same side, but he walks very badly. The right extremity is a little longer than the other. He has taken no Iodine for fourteen days. It appears that the child spits out the medicine in spite of his mother. Appetite good.

Cont<sup>r</sup>. remed.



REMARKS.—This child improved more than could have been expected, considering the irregular way in which he was brought to me, and in which the medicine was taken. It does not appear, from my journal, that the child was afterwards brought to me; but the case is interesting, as it shews, that a decided improvement was accomplished, even under the irregular use of the medicine.

---

## CASE II.

Elizabeth Richards, aged eight years and a half, from Poplar Place. General Hospital, May 13, 1823. Her mother says, that she has been ill for two months, and that she has always been weak in the loins. The left hip is very much larger than the right, and is so painful, that she cannot walk, or even lie upon it. The skin of the hip is of the natural colour. The spine and pelvis are so distorted in a lateral direction, that the left inferiour extremity appears to be longer than the right. She is very much reduced in flesh and strength. Bowels generally costive. Stools more offensive than natural.

Sumat Misturæ Purgantis ʒi. omni mane nisi nimis fusa est alvus. Appl<sup>r</sup>. Emp. Cantharidis Coxæ affectæ h. s.

May 14. Blister has risen, and remains on. Bowels have been opened by the physic.

Cont<sup>r</sup>. Mist. Purgans.



May 15. Complains of having a bad taste in her mouth. Stools said to be of a light colour.

Cont<sup>r</sup>. Mist. Purgans.

May 19. Feels easier. Blistered part has healed. Is kept in bed. Appetite moderate.

Cont<sup>r</sup>. Mist. Purg. alternis matutinis. Sumat Tæ. Iodini gutt. viii. ter in die ex aqua.

May 24. Now that she is quiet in bed, she feels very little pain in the left hip. She complains of some pain and swelling in the left knee. The Iodine agrees very well.

Cont<sup>r</sup>. remed. Appl<sup>r</sup>. Emplast. Cantharidis genu sinistro h. s.

May 26. The blister has removed the pain in the knee. Is free from pain in the hip.

Cont<sup>r</sup>. remed.

May 28. Feels better. Pain and swelling of the knee is gone, and the blister nearly healed. She is tired of being in bed. Let her sit up a little every day. Bowels open.

Cont<sup>r</sup>. remed.

June 2. Her general health continues to improve. She cannot use the left lower extremity.

Imponatur Emp. Cantharidis coxæ sinistrae h. s. Cont<sup>r</sup>. alia.



June 12. The blister has healed. She complains of pain in the hip when she puts the limb in motion. The hip is not much reduced in size.

Cont<sup>r</sup>. remed.

R. Adipis Præp. ʒi. Tæ. Iodini ʒi. M. ft.  
Ung. quo fricetur coxa sinistra m. et h. s.

June 19. She still labours under a considerable degree of pain in the hip, and the swelling is not much reduced.

Appl<sup>r</sup>. Emp. Cantharidis coxæ affectæ. Fricentur genu et femur Unguento. Cont<sup>r</sup>. alia.

June 23, 1823. Complains of so much pain in the left inferiour extremity, that she can scarcely allow her stocking to be drawn on; the parts are free from swelling or redness. Is a little sick at stomach. Bowels open.

Omitt<sup>r</sup>. T<sup>a</sup>. Iodini. Cont<sup>r</sup>. alia.

July 1. The hip is less swelled, and she is freer from pain.

Cont<sup>r</sup>. remed.

July 3. Hip much easier. No head-ache. Bowels open.

Capiat Tæ. Iodini gutt. vi. ter in die. Fric<sup>r</sup>. Coxa sinistra Unguento. Cont<sup>r</sup>. Mist. Purg. p. r. n.



July 10. No pain whatever in the hip. Walks with crutches. Tumefaction of the hip continues to subside.

Cont<sup>r</sup>. remed.

July 16. Improves in walking, and says that she feels better.

Cont<sup>r</sup>. remed.

July 19. Experiences no pain when she walks. The hip continues to subside.

Cont<sup>r</sup>. remed.

July 28. Walks better. No pain. Swelling continues to diminish.

Cont<sup>r</sup>. remed.

August 4. Is free from pain, but complains of weakness, and some numbness and coldness in the left lower extremity, from the hip downwards, so that she cannot walk without a pair of crutches. Her general health is not amiss now.

Cont<sup>r</sup>. remed.

August 6. When I make firm pressure upon the left hip, it occasions some degree of pain. The left hip is very little larger than the right.

Appl<sup>r</sup>. Emp. Cantharidis coxæ sinistræ h. s. Intermittatur Ung. cum T<sup>a</sup>. Iodini. Cont<sup>r</sup>. alia.



August 9. Feels easier since the blister was applied, and walks better.

Cont<sup>r</sup>. remed.

August 16. Blister has healed. Hip better.

Cont<sup>r</sup>. remed.

R Adipis Præp. ʒi. Tæ. Iodini ʒiss. misce ft.  
Ung. quo fricetur coxa sinistra m. et h. s.

August 26. She is so far recovered, that she has this day been made an Out-Patient of the Hospital.

Cont<sup>r</sup>. remed.

September 12. Her mother reports, that she is freer from pain, and when she walks, can put her heel to the ground better than she used to do. Says that her daughter's hip "is more in its place, and smaller."

Cont<sup>r</sup>. remed.

October 17. Is better. Drops occasion some head-ache.

Omitt<sup>r</sup>. T<sup>a</sup>. Iodini. Cont<sup>r</sup>. alia.

In my absence, I find her discharged cured in the journal, but without any date.



REMARKS.—This girl and her mother called upon me, April 23d, 1825, by my request. I found the left hip considerably larger than the right, and the left extremity longer, owing to the pelvis not being level. The lumbar vertebræ are curved laterally, the convex side being to the left hand, and the concave to the right. Her health has been very good since she left the Hospital, and she walks about the house without any support; but when she goes to her work, about half a mile from her father's house, she takes the assistance of a crutch.

---

### CASE III.

Robert Stevenson, æt. 4, St. John's Row. Admitted an Out-Patient of the General Hospital, April 22, 1823. His mother informs me, that he first had fever from a cold, next hooping cough and measles, in succession, and three weeks after the latter disease, he fell ill of the small pox, so that in course of one year he had to sustain the shock of all these diseases. Is very much emaciated. Coughs a great deal, and expectorates, but swallows what he brings up by coughing. The scalp is raw, with specks of purulent matter here and there under the cuticle. Stools black, and at times offensive. Urine white, like milk.

R. Hydr. Submur..... gr. x.

Pulv. Rhei..... ʒss.

Misce et divide in pulv. v. habeat i. omni nocte  
h. s. Capiat coch. i. minimum Mist. Antim. C.



quater in die. Fricentur partes capitis affectæ  
Ungento Hydr. Præcip. Alb. mane et vespere  
post lavationem aquâ tepidâ.

April 25. Is better.

Cont<sup>r</sup>. remed.

May 2. His head is better. Coughs as much  
as ever. Stools still offensive, and has three or  
four daily.

Abradatur capillitium. Cont<sup>r</sup>. remed.

May 9. His mother reports, that he is much  
better.

Cont<sup>r</sup>. remed.

May 23. The rawness of the scalp is quite  
cured, but the temperature is greater than  
natural. His general health is improved.

Cont<sup>r</sup>. remed.

May 30. The scalp continues well, and his  
general health is improved. Walks rather lame  
on the right leg.

Cont<sup>r</sup>. remed.

June 13. Reported more feverish for the  
last week. Stools of a bad colour, and lumpy.

Habeat Pulv. Aper. omni nocte et zi. Ol.  
Ricini omni mane.



June 4. Is better, and to appearance is very well, but he still halts when he puts the right foot to the floor, and complains of pain in the hip, which I find, on examination, is considerably fuller than the left hip, and without any discolouration of the skin. Eats well. Abdomen larger than natural.

Cont<sup>r</sup>. Pulv. Aper. h. s. et Ol. Ricini mane. Habeat Tæ. Iodini gutt. iv. ter in die ex aqua saccharata. Appl<sup>r</sup>. Emp<sup>m</sup>. Cantharidis coxæ dextræ h. s.

July 18. Blister rose well. He still halts when he walks, and complains of pain in the hip.

Cont<sup>r</sup>. remed.

August 15. The swelling in the hip is quite gone, and he now runs briskly about the room. His general health is good, and he eats well. Abdomen still tumid. His mother has omitted giving the Tincture of Iodine for the last ten days, conceiving the child to be perfectly well.

Habeat Pulv. Aper. h. s. p. r. n. et Tæ. Iodini gutt. iii. ter in die ex aqua saccharata.

August 29. Continues to walk very well. Belly still larger than it ought to be. Stools lumpy, and offensive. Tongue clean. His mother is desired to give him the Aperient



Powder more frequently, attending to the state of the alvine discharges.

Cont<sup>r</sup>. remed.

September 19. The abdomen is much smaller and softer. He walks very well. The right hip is not perceptibly larger than the other. His general health is good.

Cont<sup>r</sup>. remed.

October 17. Discharged cured.

---

NOTE.—I have not seen this child since he was discharged, but his aunt, who has lately been under my care for a paralytic affection, of which I may observe she has been cured by the exhibition of Iodine, informed me on the 22d of April, 1825, that he has continued to enjoy good health since he was cured of the disease in the hip.

---

#### CASE IV.

Mr. P.'s son, aged seven years and seven months. December 23, 1823. The left hip is very much swollen, stiff, and painful; the skin is of the natural colour. The left extremity below the hip is greatly wasted, and he cannot extend the left leg properly, owing to his having kept it bent upon the thigh, for about twelve months, and thrown across the right lower extremity, which he finds to be the posture



in which he is most at ease. Had a scrophulous sore in the right leg last Winter, and when that healed up, the left hip became affected. He formerly suffered from Scrophulous Ophthalmia, and has specks in the eyes in consequence of it. Is a pale and sickly looking boy. He has been under the care of both regular practitioners and quacks, for nearly twelve months, but has gradually been getting worse. There is one pea issue in the hip, at present, and the greater portion of the affected parts is covered with a plaster. Bowels open.

Capiat Tæ. Iodini gutt. vii. ter in die ex aqua saccharata, et Magnes. Sulph. ʒii. ex aqua tepida alter. matutinis.

January 1, 1824. Says that he has less pain in the hip. Has caught a cold. The plaster is to be removed, and the following liniment to be used.

℞ Linim. Sapon. Comp..... ʒii.

Tæ. Iodini..... ʒii.

Misce ft. Linimentum quo fricentur partes affectæ mane et h. s. Cont<sup>r</sup>. alia.

January 3. Plaster was removed last night; the liniment has not yet been employed. Says that he is now much freer from pain in the hip, and he keeps the left thigh nearly parallel to the right, instead of having it thrown across the thigh



for ease, which was the posture he employed when I first saw him. The boy is also improved in his looks, although he has caught a cold.

Cont<sup>r</sup>. remed.

January 7. The pain in the hip gradually abates, and his general health seems to improve.

Cont<sup>r</sup>. remed.

January 24. He is much better, and is free from pain in the hip. His looks improve, and his flesh is firmer. He now walks on crutches, with the left thigh supported by a handkerchief round his neck.

Cont<sup>r</sup>. remed.

I find no more notes respecting this case after the 24th of January, but the boy went on improving, and at one time he could put the point of the left toe to the ground when he walked with crutches. After he was so much better, his parents gave him the Iodine very irregularly, and in the Spring of 1824, they left this town for about six months, during which time his parents told me, that they entirely omitted the medicines I had recommended. I have had nothing to do with the case since he left the town in the Spring, but I know that some abscesses formed in the left hip, that one of them was opened by a Surgeon of this place, and that



one or two burst and discharged their contents, and all the openings continue to discharge more or less matter.

---

REMARKS.—The marked benefit so soon obtained from the exhibition of Iodine, in this severe case of hip disease, leaves no doubt on my mind as to the success that would have attended its employment at an earlier stage of the complaint; and I think it probable, that the formation of matter might have been prevented, even in the advanced stage of the disease in which I was called in, had the use of the Iodine been steadily persevered in.

I have seen this little patient to-day (April 23, 1825.) He walks about upon crutches, with the left thigh suspended by a leather strap. His parents inform me, that he has seven openings in the left hip, that discharge a little; they also inform me, that he has taken eight drops of the Tincture of Iodine, two or three times a day since last Christmas, that the hip is very much reduced in size, and is much freer from pain, but that the growth of the diseased limb does not keep progress with the sound one.

Having finished what I had to communicate respecting the effects of Iodine in the hip disease, I proceed to report the effects which I have observed to result from the exhibition of Iodine in Distortions of the Spine.



## MEDICAL RESEARCHES,

ON THE

### *Effects of Iodine in Distortions of the Spine:*

---

THE diseases of the spine are certainly of great importance, and, accordingly, we find that they have been fully treated of by several authors of acknowledged industry and talent, but the discordant opinions, which are too evident in their writings, sufficiently shew, that we have not yet arrived at any fixed principles in the pathology and treatment of Distortions of the Spine.

It is not my intention to notice any of the theories or speculations of the writers above alluded to, respecting the cause of this disease; but briefly to state my own opinion respecting its nature, and afterwards to detail some cases, shewing the benefit derived from the employment of Iodine as a remedy in this obstinate complaint.

In all the cases of Distortion of the Spine that have come under my notice, I have generally found it to be accompanied with a weak



and delicate state of the constitution, such as occurs in persons of a strumous habit. The disposition to the disease is sometimes hereditary: in proof of this I may mention, that I have, at present, under my care, a mother and two of her daughters, all afflicted with Distortion of the Spine. The mother has laboured under posterior curvature of three of the lumbar vertebræ, for upwards of five years, and during that time, has generally reclined upon a sofa in the day time, being unable to sit long in the erect posture. She ascribes the disease to her being weakened by having had a numerous family, and several miscarriages in succession. The daughters labour under *lateral* curvature of the spine; one of them, seventeen years of age, also labours under considerable deformity of the chest, and she has a hump, near the site of the right scapula; the other daughter, thirteen years old, besides the lateral curvature in the loins is beginning to be deformed in the chest, nearly in a similar manner to her sister.

The disease in the daughters, in the above instances, appears to be owing to the constitution, which they have derived from their mother, as no evident exciting cause has occurred to occasion the disease in them, and they have been brought up in the same way as the other children, who are exempt from the complaint.



The cases I have mentioned also shew, that the same morbid cause may occasion lateral or posterior curvature of the spine, according to the part of the column that is affected. I shall have occasion to notice a case of posterior curvature in the loins and lower part of the back, and of anterior curvature of the spine in the upper part of the back, occurring in the same person. The hump in the chest, which I have noticed, could not have taken place without the ribs being softer and more yielding than natural, and illustrates what I have long thought, that Rachitis is very much allied to Distortion of the Spine, with respect to the constitution in which it occurs. At page 370, I have noticed the existence of White Swelling and Scrophulous Ophthalmia in one child, and of rickets, in a high degree, in another child of the same family; which affords strong presumptive proof, that these diseases originate in similar states of the constitution. It is also a matter of daily observation, that White Swelling of the Joints, Rickets, Distortion of the Spine, Phthisis Pulmonalis, &c. occur much more frequently in the children of those parents who inherit the Scrophulous Diathesis, than in others who are untainted by it.

It is, however, matter of observation, that some children, after their health has been



broken by previous attacks of disease, or by living in impure air, or using unwholesome food, are subject to Rickets, and Distortion of the Spine, &c. when their parents, to all appearance, are quite healthy. But, even in these cases, we are not certain that the disease is not owing to a *latent* state of Struma, which the apparent exciting causes might serve to develop only, but not to produce. The disappearance and re-appearance, after a considerable time, of particular features in families, illustrates the fact, that diseases disappear and re-appear, but often at too remote a period for us to trace them up to the last evident source. If a history of the diseases to which families are subject, were drawn up, and preserved with the same attention that is often bestowed in committing their lineaments to canvass, and preserving them with care, much curious and useful information would, I conceive, be obtained respecting the hereditary disposition to different diseases.

When we examine persons who are beginning to be affected with Distortion of the Spine, they all complain of more or less weakness, soreness or pain in the part of the spine chiefly affected when they sit, stand, or walk, and often when pressure is made upon the part; and they are relieved by rest and the horizontal posture, which shews that a certain degree of



chronic inflammation is present, and from the whole progress of the complaint, and the diseased appearances which we find after death, there can be no doubt, that morbid action in the cartilages, bones, or ligaments of the spine, forms the essence of the disease, which, in its progress, often leads to the disorganization and destruction of the parts that are the site of the morbid action.

When some of the intervertebral cartilages are disorganized and absorbed on the fore part, the vertebræ must sink down from the superincumbent weight of the body, and cause a corresponding arching and projection of the spine behind; and when the intervertebral cartilages are disorganized and absorbed on one side only, the bones of the spine must approximate on that side, or form a curve, and, consequently, a degree of convexity on the opposite side of the spine, constituting that form of the disease called lateral curvature of the spine. In all these cases, a loss of substance in the articulating surface of the bones forming the bodies of the vertebræ, and corresponding with the loss of substance in the cartilages, will increase the effect. It is easy to see from what has been said, that destruction of the bones and cartilages, so as to give a degree of obliquity to the articulating surfaces of the bones of the spine, will have the effect of giving a



twisted figure to the spine, called by a late writer, "Rotated, or Contorted Spine." Of this deformity of the spine I have at present an example under my care: it is not a simple twisted spine, but complicated with posterior curvature, and abrupt projection of the spine.

When a curvature has once formed in any considerable degree, smaller curvatures very often form in succession, in the course of the spine, as if by the effort of the muscles to restore the equilibrium, or perpendicularity of the body, which was lost by the primary curvature of the spine; but it is to be recollected, that the effort of the muscles, in this case, is made in a body predisposed to the disease, and, therefore, ought not to be referred to their mere mechanical agency.

Having stated my opinion, that the local affection in Distortion of the Spine arises from the state of the constitution, I shall not tire my readers with any further observations on Distortion of the Spine, but refer them to the numerous works already before the public on the subject, as my chief object is to make known the effects which I have found to result from the exhibition of Iodine in this disease. But, before proceeding to detail the cases of Distortion of the Spine, in which Iodine was employed,



by me as the chief remedy, I may observe, that I was led to employ it in this complaint, from my opinion of the nature of the disease, as above stated ; and from having found, by previous experience, that Iodine, when carefully and judiciously exhibited, possessed the highly desirable property of correcting the constitutional disposition to disease, and of checking and removing local morbid action in complaints, which I considered analagous to that now under consideration. Under that impression, I conceived myself not only justified, but called upon to give a fair, but cautious, trial to Iodine in this distressing and untractable disease, over which, I believe, we possess no remedy having any direct and positive influence. It now affords me the most lively satisfaction to be able to state, that the trials I have made with Iodine in Distortion of the Spine, have afforded me the most convincing proofs of the great powers of this remedy over this obstinate and often fatal disease ; indeed, they have greatly exceeded my most sanguine expectations, and I think I can safely recommend Iodine to my medical brethren as a powerful remedy in Distortion of the Spine, provided it be cautiously and seasonably employed ; but I wish every reader to judge for himself, from the facts contained in the following cases.



## CASE I.

Miss Anne D. æt. 11. Nottingham, September 20, 1821. Is very tall for her age, and of a spare habit. Countenance pale and sickly. She complains of weakness and pain in the spine, particularly where there is a degree of posterior curvature of two or three of the vertebræ. She labours under great disorder of the stomach and bowels, and I find that her stools are very offensive. She has picked her nose until blood is discharged, and coagulated so as nearly to obstruct the passage of air into the nostrils. The patient is in bed, where she is desired to remain. Her mother is a tall woman, of a spare habit, and delicate constitution, and an elder sister died from Distortion of the Spine some years since.

℞ Hydrag. Submur..... ʒi.

Pulv. Rhei..... ʒii.

Misce et divide in pulveres vi. Capiat i. ex syrupo alternis noctibus.

September 27. Has taken the powder with some improvement in the colour and smell of the stools. Pulse 96, and of moderate strength.

Cont<sup>r</sup>. Pulveres. alter. noct.

℞ Tæ. Iodini ʒss. Capiat gutt. vi. ex aquæ cyatho ter in die.



September 29. She is nearly in the same state as to the spine. Her bowels are in a more regular and settled state.

Cont<sup>r</sup>. remed.

October 1. The external nares have nearly healed, and she feels herself much better and stronger.

Cont<sup>r</sup>. remed.

October 4. She is so much better, that I find her down stairs this morning. Appetite improved.

Cont<sup>r</sup>. remed.

The patient continued the medicines, but did not keep her bed, till the 19th of November following, when she had recovered more than her usual health, and made no complaint of pain or weakness in the spine. I believe she afterwards took only what medicines then remained.

---

REMARKS.—I called at her father's the 6th of May, 1825, to enquire after her, that I might report her present state of health. I found her from home; but her mother informed me, that she has continued in good health ever since, and that the back bone has not shewn any disposition to grow out since I attended her; she added, that her daughter was soon fatigued with walking, or any considerable exertion.



## CASE II.

Miss Mary C. æt. 14. April 10, 1822. Is very tall and slender. Complains of weakness in her back, and of some pain when she sits up long, or walks. She points to a small tumour in the lower part of the back, as the site of the pain. I find that the swelling is occasioned by one of the spinous processes in the lower part of the back, projecting beyond the level of the rest; the integuments are a little swollen and puffy, where they cover the tumour. Complains of some pain in the left side of the abdomen. No appetite. Tongue furred and pale. Has a motion only every other day. Has menstruated four or five times in course of the last twelve months. Face very pale.

R Pilæ. Aloes Comp. ʒi. forma in pilulas xii. quarum sumat ii. omni nocte h. s.

R Tæ. Iodini ʒss. Capiat ægra gutt. xx. bis in die ex aqua.

April 13. Pain in the left side of the abdomen is easier since her bowels have been more open. Vomited her food yesterday. Still complains of pain and weakness in the back. The pills procure two motions daily. Pulse 64, small and soft.

Contr. Pilul. Aper. Sumat Tæ. Iodini gutt.



xx. ter in die. Appl<sup>r</sup>. Emp. Thuris. Comp. dorso.

April 17. She feels better in every respect.  
Cont<sup>r</sup>. remed.

April 20. Had pain in her shoulders and elbows yesterday, but it is less severe to-day. Had a long walk on the 18th instant, from which she felt much fatigued. She lies down occasionally, as her back aches when she sits up long.

Cont<sup>r</sup>. remed.

May 5. Feels stronger, and is free from pain in the back, except when she sits up too long. She thinks that the tumour is smaller.

Cont<sup>r</sup>. Pilulæ. Capiat Tæ. Iodini gutt. xxx, ter in die.

May 13. On removing the plaster, I find the tumour has nearly disappeared, and there is no redness of the skin. Says that she feels stronger and better, and that her appetite improves. Tongue slightly furred. Body open by the pills.

Cont<sup>r</sup>. remed. Denuo Appl<sup>r</sup>. Emp. Thuris. Comp. dorso.

May 19. Continues to improve, and her



back is stronger. Pulse 84. Bowels open by the pills. Menstruates regularly. Is going to a boarding school in the country. I have desired her to take the drops a week longer, and to keep her bowels open by the pills, when necessary.

---

NOTE.—This young woman did not again experience any return of the affection of the spine; but some time afterwards she was attacked with symptoms of Phthisis Pulmonalis, and died of that disease.

---

### CASE III.

John Waplington, æt. 17, lace runner. Was sent by the Overseer of Bilborough parish to the General Hospital, near Nottingham, the 24th of September, 1822. He informs me, that his health has been bad for the last six months. Had an abscess at the back part of the right thigh, a little above the ham, for which he was treated and discharged cured (by Mr. Oldknow, an eminent Surgeon, of this establishment), after he had remained eight weeks in the Hospital. I had an opportunity of seeing the abscess before his admission into the Hospital, and I am of opinion, that it was of a scrophulous nature. He complains of great weakness, and that he can scarcely walk, owing to want of power in the lower limbs. The



lumbar vertebræ are convex on the right side, and concave on the left, forming what is called a lateral curvature, in a considerable degree. The spinous process of the lowest dorsal vertebra projects more than the others. He labours under so much stiffness and pain across the loins, that he cannot support the body long in an erect posture. Is of a spare habit of body. Face pale. Tongue a little furred in the middle. Pulse 108, small and soft. Bowels tardy.

Sumat Pil. Cambogiæ C. gr. v. omni nocte.

R̄ Tæ. Iodini ʒss. Capiat gutt. xv. ter in die ex cyatho vinario aquæ.

September 28. Has been in bed the last three days. His back is not so stiff and painful as when admitted. Bowels open by the pills.

Cont<sup>r</sup>. Pil. Sumat Tæ. Iodini gutt. xx. ter in die.

October 2. Complains of being troubled at times with giddiness. Pulse 88, and soft. Bowels open.

Intermitt<sup>r</sup>. T<sup>a</sup>. Iodini. Pergat in usu Pil.

October 5. Feels better. Is free from giddiness.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. Pilulæ.



October 7. Says that he feels stronger, and has less pain in his back. Appetite good. Sleeps well.

Cont<sup>r</sup>. remed.

October 14. Continues to recover strength in his back. Appetite good, although he has caught a cold.

Cont<sup>r</sup>. remed.

October 19. The catarrhal symptoms have nearly left him. Feels better in every respect.

Cont<sup>r</sup>. remed.

October 23. His general health is better, he gains flesh, and says that he feels much stronger in the loins. Appetite good. Medicines agree.

Cont<sup>r</sup>. remed.

October 31. Feels better in every way.

Cont<sup>r</sup>. remed.

November 2. He is now almost free from pain in the loins.

Cont<sup>r</sup>. remed.

November 4. Is better, and has scarcely any pain.

Cont<sup>r</sup>. remed.



November 19. The patient has continued gradually to recover flesh and strength, and he makes no complaint of weakness in the loins, or of want of power in the lower limbs.—Discharged cured.

---

REMARKS.—The rapid improvement that took place under the use of the Iodine in this case, shews, not only that it possesses very great power in curing disease of the spine, but it serves to illustrate what has already been advanced as to its remedial powers in paralytic affections. With respect to the dose of the medicine, it deserves notice, that twenty drops induced giddiness, and disordered the patient; but, by omitting the medicine for a few days, he afterwards took fifteen drops for a dose, three times a day, not only without inconvenience, but with the happiest effect. The patient has continued to enjoy excellent health ever since, and now follows his original trade of carpenter, which he was obliged to relinquish for a time, to earn a living as a lace runner, owing to the weakness of his loins.

---

#### CASE IV.

Anne Dance, aged three years and a half, Curtis's Yard, Parliament Street, Nottingham, October 8, 1822. Her mother informs me, that she has had ill health since she had a fall from a height of twelve feet, when about fifteen months old. The spine between the scapulæ is curved, and projects backwards, and there is another curvature in the loins and lower part



of the back, about four inches in length, that also projects posteriorly. Her head is sunk down, and rests on the shoulders. The child can walk very little, and the least jolt, her mother says, occasions great pain in the back, stops her breathing, and her face becomes black. She labours under shortness of breath, at present, and always complains of pain in the belly. This child was brought to me the 18th of July last, at which time she was very ill, and laboured under Scrophulous Ophthalmia. The Ophthalmia was cured, and the child was otherwise so much relieved by the means employed, that her mother has brought her again to me, and anxiously wishes for something to be done to mitigate her sufferings, adding at the same time. that she knows that the child cannot be cured.

R Hydrarg. Submur..... ʒi.

Pulv. Jalapæ..... ʒss.

Misce et divide in Pulv. vi. habeat i. ex syrupo alternis matutinis. Habeat etiam Tæ. Iodini gutt. v. ter in die ex aqua saccharata.

October 17. The powder purges her twelve or fourteen times. Stools very offensive. Her mother informs me, that for two years previous to her taking the above medicines she could not lie on her back, but that she can do so now, and that her health is very much improved. Her breathing is still short, and she has a severe



cough, which her mother thinks is the whooping cough, as several children in the same yard labour under the disease.

Capiat dimidiam partem pulveris alternis matutinis. Cont<sup>r</sup>. T<sup>a</sup>. Iodini.

October 24. Is better, and her back is stronger, and freer from pain. Her bowels are sufficiently opened by the half of the powder. Coughs a good deal in the evening, and is said to bring up a great quantity of phlegm.

Cont<sup>r</sup>. remed.

October 31. Her mother says, that she can walk better, and seems stronger; indeed, she says that she cannot get her to remain long in the horizontal posture. Has a good appetite, and begins to get a little colour in her cheeks. Can move her head better, and does not rest it so much upon her shoulders. Her mother remarks, that the medicines have done her more good than any thing she has ever taken.

Habeat Tæ. Iodini gutt. vii. ter in die. Cont<sup>r</sup>. dimidiam partem pulveris alternis auroris.

Was not brought to me afterwards.

---

REMARKS.—This child was in a most deplorable state when she was brought to me, and it was only at the earnest solicitation of the mother that I prescribed for her.



The Iodine had certainly a very good effect in this case, and relieved her very much, as in eight days after taking it she could lie upon her back, which she had not been able to do for two years before, and that it was the Iodine, and not the Powder, that produced that effect, is almost a matter of certainty ; for, when she was under my care in July, she took exactly the same kind of Powders, but no Iodine ; and as the improvement followed the exhibition of Iodine, I think we may fairly ascribe the benefit received to its influence.

---

### CASE V.

Elizabeth Sewell, æt. 11, from Mapperley Hills. February 15, 1823. Her mother informs me, that she has always been an ailing child, and that she could not walk till she was two years of age. When three years old, her spine, near the middle of the back, began to grow outwards and backwards, and now forms a very large curvature, of an angular form in the centre of the curve. Her stature is low, in consequence of the deformity of the spine, and her mother informs me, that the disease is going on increasing, and that her daughter's back is so weak and painful, that she cannot walk, or even sit up long at one time. A jolt in walking causes great pain in the back, and she complains very much of the fatigue and pain, occasioned by riding two miles upon an ass, in coming to me. She complains of pain in her legs, at times, but is not sensible



of any numbness in them. Stools dark, and she is generally tardy in the bowels.

R Pulv. Rhei..... 3i.

Magnes. Sulphatis..... 3vi.

Misce et divide it Pulv. vi. quorum capiat i. omni mane.

R Tæ. Iodini..... 3ss.

Capiat gutt. x. tincturæ ter in die ex aquæ cyatho.

Is desired to lie on a hair mattress during the day-time.

March 1. Feels better, and her back is easier. Stools yellow now, and has occasion for the Powder only every second or third day. The Tincture agrees with her, and she says that she slept better last night than she has done for a length of time previously.

Repet<sup>r</sup>. Pulv. p. r. n. Capiat Tæ. Iodini gutt. xv. ter in die.

March 17. She is much freer from pain. Complains of weakness in her back when she sits up, and, therefore, remains in the horizontal posture the greater part of the day.

Cont<sup>r</sup>. remed.

March 31. I find she very often has no stool, except on the day she takes the Powder.



She continues to recover. Pulse 96. Tongue furred.

Sumat Pulv. Aper. omni mane nisi nimis fusa est alvus.

April 12. Her back is as much curved as when admitted, but it feels stronger, and she now has very little pain in it. Bowels open. Appetite moderate.

Cont<sup>r</sup>. remed.

April 30. Is free from pain in the spine, but complains of a little in the left side. Has omitted the purging Powders for four days; her bowels are tardy, and tongue furred.

Cont<sup>r</sup>. remed.

May 22. Feels much better, and has greatly improved in her looks. At times she feels a little pain in the back. Her mother informs me, that she has taken her medicines regularly of late.

Cont<sup>r</sup>. remed.

June 21. Is very little troubled with pain in the back, but feels a little in the right hip and thigh. Her general health is very much improved, her countenance animated, and her complexion clear. Tongue furred at the back part. Abdomen rather hard and large.

Cont<sup>r</sup>. remed.



July 7. For the last fourteen days has been entirely free from pain in the back. Looks quite healthy in the face, and she recovers flesh and strength very rapidly. She stands much more upright than she used to do. Lies seven or eight hours every day on a mattress, with a hollow to receive the hump in the back. Appetite good.

Cont<sup>r</sup>. remed.

July 19. She continues free from pain, and can walk half a mile with ease. Tongue clean. Appetite good. Bowels regular.

Cont<sup>r</sup>. remed.

August 2. Has walked two miles this morning. Her back never aches now. Bowels regular by the Powder taken every other morning.

Cont<sup>r</sup>. remed.

August 30. She continues free from pain, and says that she is much stronger than she has ever been before. Can run as fast as her mother. Appetite good. She sleeps well, and her bowels are open by the Powder taken three times a week.

---

NOTE.—The patient continued the Powders occasionally, and took one or two doses of the Tincture of Iodine daily, till the 13th of November, 1823, when I considered her perfectly cured, and all risk of a relapse



obviated by continuing the medicine for two months and a half, after she was apparently cured. I have great pleasure in adding, that the patient has continued to enjoy good health up to the present time.

---

### CASE VI.

Mary Anne Upton, æt. 2. Cotgrave, June 25, 1823. This child is out of health, is feverish, and without appetite. There is a considerable posterior curvature of the spine, in the site of the lower dorsal and upper lumbar vertebræ; and the child is so weak, that she can walk very little. I directed her mother to make her a pair of bodice, with whalebone, to wear when up; but, in the mean time, to let the child lie on her back as much as possible, and ordered the following medicines:—

℞ Ol. Ricini ʒi. habeat infans coch. i. minimum olei mane si tarda est alvus; habeat etiam Tæ Iodini gutt. iii. ter in die ex aqua saccharata.

July 29. About three weeks since, the child began to improve, and to eat and walk, and to sleep better. She is quite lively, and walks now as if nothing were amiss. Appetite very good. Has taken a tea spoonful, or upwards, of oil, every day.

Cont<sup>r</sup>. remed.



August 12. The curvature of the spine is nearly as great as at first. The child recovers flesh and strength, and walks very well. She cannot be kept in the horizontal posture. She wears the bodice ordered. Has of late passed several lumbrici.

Cont<sup>r</sup>. Ol. Ricini. Habeat Tæ. Iodini gutt. iv. ter in die.

September 10. Her appetite is very good. The curvature does not increase. For some time past has only taken three drops of the Tincture of Iodine for a dose, as her parents thought that four drops did not agree so well as the former quantity.

Habeat Tæ. Iodini gutt. iii. ter in die. Cont<sup>r</sup>. Ol<sup>m</sup>. Ricini p. r. n.

October 8. Her parents cannot get her to lie upon her back, she is so active a child. Her belly is larger than natural. The curvature of the spine continues.

R Hydr. Submur. gr. x. Pulv. Rhei. 3ss. misce et divide in Pulveres vi. habeat i. ex syrupo alternis matutinis nisi nimis fusa est alvus. Cont<sup>r</sup>. T<sup>a</sup>. Iodini.

December 10. The child has not been brought to me since last report. The curvature of the spine is greater, and she does not



walk so well. The parents have not kept her in the horizontal posture as directed.

Cont<sup>r</sup>. remed.

---

REMARKS.—This child certainly derived very great benefit from the Iodine when it was first exhibited.—Whether the loss of beneficial effect latterly, arose from the long use of the medicine, or from its exhibition having been neglected, I have no means of ascertaining with certainty. The long intervals at which the child was brought to me precluded me from treating the case as I could have wished ; but the marked improvement which at first took place in the child's health, shews clearly the benefit to be derived from Iodine, and what may be expected from its exhibition, when we have a fair opportunity of witnessing its effects at short intervals, and of continuing or suspending its use, according to circumstances. I have lately heard that the little patient's spine continues deformed, but that her general health is now very good.

---

## CASE VII.

William Smith, æt. 15. New Radford, December 21, 1823. This youth is brought to me for advice, by his father, who informs me, that his son has been ailing for ten or eleven years. His spine is very much deformed, owing to a posterior curvature in the loins,  $5\frac{1}{2}$  inches in length; and an anterior curvature, about  $6\frac{1}{2}$  inches long, in the back, or towards the sternum, which projects considerably forward, and is accompanied with a considerable degree of flattening



of the ribs. The posterior costæ of the scapulæ nearly meet. He labours under so great a degree of weakness and dull pain in the back, that he has walked about a mile with great uneasiness to himself. In course of the last nine or ten years he has been under the care of several very able Physicians and Surgeons, but without any benefit, according to his father's statement, as his spine has gradually become weaker, and more deformed. The father also informs me, that his son had "very bad eyes," some years ago, for which he was under the care of one of the Physicians alluded to. I believe the disease to have been Scrophulous Ophthalmia, and notice the circumstance, as shewing him to be of a strumous constitution. I may further observe, that his sister, not quite four years of age, was brought to to me at the same time, on account of a Bronchocele, to which persons of a strumous constitution are more subject than others. The father further informs me, that his son was lately under the care of a quack, who undertook to make him as straight as an arrow, and in attempting to do so, by pulling him, and pressing upon his breast bone with his knees, he almost killed him. I represented the absurdity of attempting to remove so great a degree of deformity, and told the father that he ought to be satisfied if the further progress of the disease could be stopped, in furtherance of which I desired him to remain



very much in the horizontal posture, and directed him to take ten drops of the Tincture of Iodine three times a day, in a glass of water.

December 28. Ten drops of the Tincture made him giddy and poorly, and his father, by my direction, reduced the dose to eight drops, which agreed with him very well. He employs a belt to support his loins, which he has worn for some time. Bowels open.

Sumat Tæ. Iodini gutt. viii. ter in die ex aqua.

January 18, 1824. He is now so strong, that his father says he could walk ten or twelve miles. The young man himself informs me, that his back is much stronger, and that he feels better in every respect. He lies a good deal in the horizontal posture. Bowels open.

Cont<sup>r</sup>. T<sup>a</sup>. Iodini.

February 1. Says that his back is stronger, and that he feels altogether better. Bowels regular. Has been able of late to take ten drops of the medicine for a dose, without inconvenience.

Capiat Tæ. Iodini gutt. x. ter in die ex aqua.

February 22. He makes no complaint of weakness or pain in the back, and says, that he



“ feels a deal better since he has taken the drops, than he did before.” His father remarks, that his son’s general health is altogether better, and that he hears better with the left ear (from which I find there has been a discharge for several years), than he has done since the discharge commenced. His eyes are also stronger, and the eye-lids less disposed to be inflamed and glued together, than they used to be.

Cont<sup>r</sup>. remed.

March 7. Says that he is perfectly free from weakness or pain in the back, and that he now feels very well.—Discharged cured.

---

REMARKS.—I consider this as an interesting case, inasmuch as it shews the power of Iodine in arresting the progress of spinal curvature, that had been going on increasing for nine or ten years. The speedy amendment in the patient’s general health, the removal of pain in the spine, and rapid acquisition of strength in the back, in so short a time, cannot be ascribed to the sanative powers of nature, after he had been so long ill, without a cure being accomplished, but must be ascribed to the salutary influence of Iodine upon the system, and its powers of changing morbid into healthy action, analogous to what takes place on the exhibition of Mercury in those labouring under a syphilitic taint. The patient’s spine, as I expected, was nearly as crooked as ever when he was discharged. He has remained twelve months free from a relapse, and I trust will long continue so.



## CASE VIII.

John Wright, æt. 16. New Radford, May 10, 1824. For the last five years the greater number of the dorsal vertebræ have been gradually bending outwards and backwards, so that they now form a hump, that measures about a span, longitudinally, as to the spine. He complains of pain all over the back, and of general debility. He also complains of a hot burning sensation in the stomach. Countenance pale. Walks with the assistance of crutches. He has applied to me in consequence of the benefit obtained by the last patient, Smith.

Capiat Tæ. Iodini gutt. x. ter in die ex aqua. Sumat Magnesiæ Sulphatis zii. ex aqua tepida alternis matutinis.

May 20. Feels stronger, and can walk better, without being fatigued. His appetite improves, and he has been free from the hot burning sensation in the stomach, since he has taken the Iodine, which agrees very well with him. Bowels open.

Sumat Tæ. Iodini gutt. xii. ter in die. Repet<sup>r</sup>. Magnesiæ Sulphas p. r. n.

May 27. He continues to recover strength, and the pain in the back is gradually abating. The Iodine agrees very well.

Cont<sup>r</sup>. remed.



June 10. Says that his back is much stronger, and entirely free from pain, unless he walk too fast, or too far. Bowels regular.

Cont<sup>r</sup>. remed.

July 7, Has had some increase of pain in the back since last report, but I cannot ascertain the cause. He is now much freer from pain. Bowels regular. Appetite good.

Cont<sup>r</sup>. remed.

July 14. Much better, pain in the back abates, and he feels much stronger.

Cont<sup>r</sup>. remed.

July 26. Continues to improve, and feels stronger.

Cont<sup>r</sup>. remed.

August 30. He feels much stronger in the back, and his general health is greatly improved. Appetite very good. He has taken no Tincture for the last fourteen days.

Capiat Tæ. Iodini gutt. x. ter in die. Repet<sup>r</sup>.  
Magnes. Sulphas p. r. n.

November 17. Has called to thank me for the benefit he has received, and he says, that he is quite well, and free from pain and weakness.



REMARKS.—The *deformity* of the spine continues in the same state as when he first applied to me, but the progress of the disease has been stopped, and he has been restored to health by the use of the Iodine.

### CASE IX.

Edward K. aged 14 months. Was brought to me the 26th of June, 1824, by his mother, who requested my advice on account of the child having lost flesh and strength, and shewing no disposition to stand, or to use his feet. She also informed me, that when the child was heighted, or was even placed in the sitting posture, that he cried and shewed symptoms of uneasiness. In the horizontal posture he could move the lower extremities, a proof that they were not paralytic. On examining the child's back, I found a marked degree of posterior curvature of the spine, in the situation of the lower dorsal vertebræ, but the mother could not inform me how long it had existed. Bowels irregular, and stools unnatural. I directed the child to be laid on his back, upon a hair mattress, and in the same posture to be drawn occasionally in a child's carriage, in the open air, and ordered the following medicines :—

R̄ Ol. Ricini ʒi. Sumat coch. i. minimum (tea spoonful), mane p. r. n.

R̄ Solut. Iodini ʒss. Habeat infans gutt. iii. solutionis ter in die ex aqua saccharata.



August 12. The child's health is greatly improved, but he cannot yet stand, and his flesh is still thin and soft.

R Hydrarg. Submuriatis.....gr. vi.

Pulv. Tragacanthæ C..... ʒss.

Misce et divide in pulveres vi. quorum habeat i. bis in septimana. Cont<sup>r</sup>. Ol. Ricini diebus intermediis pulverum p. r. n. Cont<sup>r</sup>. Solutio Iodini.

R Linim. Sapon. Comp..... ʒii.

Tæ. Iodini..... ʒii.

Misce ft. Linimentum quo fricetur spina dorsi omni mane.

October 16. For the last five weeks has taken four doses of the Solution of Iodine daily, and has been kept chiefly in the horizontal posture. The child recovers flesh and strength, but cannot yet stand.

Cont<sup>r</sup>. remed.

December 6. The child is greatly improved, and can sit up better. Has taken none of the Iodine internally for two months.

Sumat gutt. iv. Solutionis Iodini 4<sup>ter</sup>. in die. Cont<sup>r</sup>. Ol. Ricini p. r. n. et Linim. Iodini.

January 22, 1825. He is very full of flesh, which is firm to the touch, and he has every appearance of being a stout child. The spine



is almost straight, but he is still somewhat weak in the back. The means recommended have been employed very regularly of late. His mother remarks, that he is in much better health.

Cont<sup>r</sup>. remed.

---

REMARKS.—This child was recovering so very fast at the time of the last report, that his parents did not think it necessary to bring him to me again. I called at his father's the 20th of May following, and found that the child could stand, but that he could not walk without support. His spine is only very slightly curved. He is still weak in the back, although sufficiently in flesh. As he had taken no Iodine for three months, I recommended it to be given again, as he derived great advantage from it, when formerly exhibited.

---

### CASE X.

Catherine Belshaw, æt. 15. Was admitted an Out-Patient of the General Hospital, the 9th of November, 1824, by Mr. Beveridge (the very attentive and intelligent House Surgeon and Apothecary of the establishment), in my absence. The patient had been ill nearly a year, and had lately been discharged, after deriving some little benefit from Caustic Issues near the spine, prescribed for her, along with other treatment, by one of my colleagues, a very able and experienced Physician of the



establishment, under whose care she had been for several months. When she came under my care she had experienced a relapse, and laboured under incontinence of urine, and could scarcely walk, owing to weakness and numbness in the lower limbs. She had previously laboured under Enuresis, but was relieved from it, for a time, after the Caustic Issues were formed. The spine, when examined, was found curved laterally, and the three uppermost vertebræ of the loins twisted so, that their right transverse processes were nearly on a level, and as prominent as the spinous processes of the same bones, but their left transverse processes were not to be felt. The last vertebra of the back, and the three uppermost vertebræ of the loins, also formed a very considerable curvature of the spine backwards, the third vertebra of the loins making a very abrupt projection over the vertebra below it, which did not seem to project much backwards, and was not twisted in any degree. Appetite good. Bowels confined. Had not menstruated for some time. Did not use the recumbent posture, which she was directed to assume upon a mattress, and the following medicines were ordered:—

R Mist. Purgantis..... ʒviii,  
Sumat ægra ʒi. misturæ omni mane.

R Liquoris Iodini ..... ʒss,  
Capiat guttas vi. liquoris ter in die ex aqua.



November 19. The Purging Mixture keeps the bowels open. Drops agree. No perceptible change in the symptoms.

Capiat Liquoris Iodini gutt. viii. ter in die.  
Cont<sup>r</sup>. Mistura Purgans p. r. n.

December 10. Her mother reports, that she is rather better. Medicines agree.

Cont<sup>r</sup>. remed.

December 31. Her mother says, that she has less pain in the legs and thighs, and that the numbness goes off by degrees. She complains chiefly of weakness in the back. It appears, from her mother's account, that she has had a slight catamenial shew every week, for the last three months. Bowels open.

Capiat Liquoris Iodini gutt. x. ter in die.  
Cont<sup>r</sup>. Mist. Purgans p. r. n. Appl<sup>r</sup>. Emp.  
Thuris Comp. dorso.

January 21, 1825. Health said to be better; legs nearly free from numbness, and has less pain in them. Sill complains of weakness in the back. Walks a little about the house, but lies a good deal upon a mattress during the day-time. Continues to have a slight catamenial shew every week. Appetite very much improved. Is very thirsty, and drinks freely of toast and water. The mother says, that the



drops have done her daughter a great deal of good.

Cont<sup>r</sup>. remed.

February 25. Her mother reports, that she continues to improve in health. The numbness goes off, and she can walk better. The patient thinks that her spine is not so much curved, and finding herself so much better, she has not taken the drops for the last ten days.

Cont<sup>r</sup>. remed.

March 25. Patient's general health said to be better. Is free from pain in the back, and is able to stand and walk better. Bowels open.

Cont<sup>r</sup>. remed.

May 6. Is so much better, that she has employed herself in mending lace for the last seven or eight weeks. Walks out a little occasionally. Her general health is greatly improved, and she is free from pain in the spine, but feels a little weak in it. The drops agree very well.

Cont<sup>r</sup>. remed.

May 21. I called to see her this day, and to examine the state of the spine. The lateral curvature is not very evident now, but the twist in the spine, and also the posterior curvature,



are likely to remain as long as she lives. She can walk about very well, and makes scarcely any complaint. The incontinence of urine disappeared in about three weeks after she began to take the Iodine; and the catamenia have been regular, for at least three months. I find that the muscles of the right hip are a little wasted, and she thinks that the right extremity is a little longer than the left. Her appetite is very good, and she may be considered as cured, but I purpose keeping her on the sick list a few weeks longer, by way of preventing a relapse.

---

REMARKS.—This case is interesting, as it shews not only the effects of Iodine in curing Distortion of the Spine, but that the different species of deformity to which the spine is subject, arise from the same cause, and may be remedied by the same means, and completely refutes some late speculations, that ascribe the different species of curvature, that have been noticed by authors, to different causes. The case also further illustrates what has been advanced with respect to Iodine, in curing paralytic affections, by its curing the incontinence of urine, and restoring the sense of feeling and power of motion in the lower extremities, after Caustic Issues, and other means, had been employed by a very able and experienced practitioner, without any permanent benefit.



## CASE XI.

Mary J. aged two years, daughter of Mr. J. of Arnold. February 11, 1825. Had been ailing for six weeks before I saw her. Her parents informed me, that she was first seized with a purging, which reduced her so low in course of fourteen days, that they "were preparing to lay her out, as she appeared to be gone." She afterwards began gradually to recover, and to gain a little strength, and the purging was stopped, as the parents suppose by some preparation of the pomegranate that they gave her. During the time that she was purged, they inform me, that she remained perfectly still, and never moved hand nor foot, and never cried, or shewed any symptom, indicating that she suffered pain. For the last two weeks, since the purging stopped, she has been fretful, peevish, and has often cried, particularly when she is placed in a sitting posture, and she appears most at ease in a horizontal position. The spine in the loins, for the length of three inches, forms a posterior curvature; the child cannot stand, or use her limbs. Has had no stool for the last two days, and for the last fourteen days the bowels have been very tardy. Her appetite is not bad now; but before the attack it is said to have been voracious.



The little patient is frequently troubled, at intervals, with a convulsive shaking of the head, and the left fore-arm is often involuntarily jerked inwards, towards the body, but never outwards. The following medicines were ordered by me :—

℞ Hydr. Submur.....gr. xii.

Pulv. Rhei..... 3ss.

Misce et divide in Pulv. vi. habeat i. ex syrupo alternis matutinis.

℞ Ol. Ricini..... 3i.

Habeat 3i. olei mane quando non sumendus est pulvis.

℞ Tæ. Iodini..... 3ii.

Habeat infans gutt. ii. ter in die ex aqua saccharata.

February 16. Her father reports, that the shaking has nearly left the head, and the spasmodic jerk the left arm; and that she is so much stronger, that she can sit an hour and a half at one time, without complaining, or seeming much fatigued. Her appetite is keen. The first Powder purged her very much.

Cont<sup>r</sup>. remed.

February 24. Is so much better, her father reports, that she sat up in a chair this morning at breakfast, without any assistance, but cannot



walk without being supported; he adds, that she will not remain in the horizontal posture. Bowels moved once or twice a day by the physic.

Cont<sup>r</sup>. remed.

---

REMARKS.—The father of the child did not afterwards call upon me, but I learnt from some of his friends, who interested themselves respecting her, that she had completely recovered, by following up the plan that I had recommended. Being anxious to see her, she was brought to my house on the 14th of May last, at my request, when I found her flesh and strength perfectly restored, and scarcely any projection of the spine beyond its natural level.

---

As connected with the above researches, I subjoin the following case of Paraplegia, that terminated in Curvature of the Spine, and Phthisis Pulmonalis; with a report of the morbid appearances observed after death.

Christopher Murphy, æt. 26, a labourer. Was admitted an In-Patient of St. Mary's Hospital, the 9th of December, 1823, when he complained of great weakness, numbness, and want of power in the lower half of the body. His spine was carefully examined, but no deformity could, at that time, be detected. He could not assign any cause for his complaint, except exposure to cold and wet; occasionally he had



chilliness and shivering, succeeded by heat and perspiration, similar, to paroxysms of the ague, but slighter in degree. His flesh and strength were very much reduced. I directed small doses of the Tincture of Iodine to be given, and after employing it for three or four weeks, without any benefit, I prescribed the Nux Vomica, in powder, but with no better success. The patient being very low and weak, a tonic medicine was ordered, but it proved of very little service. He began to be troubled with cough, and to expectorate purulent matter, and on the chest being examined with the stethoscope, pectoriloquism was distinctly to be heard. No further attempt was made to cure the paralytic affection, and the spine was not afterwards examined during the life-time of the patient, as it was evident that he was sinking under the disease of the lungs. The numbness of the lower extremities disappeared several months before death, and after lingering for a considerable time, he died on the 18th of August, 1824. His body was examined by Mr. Jowett, the resident medical officer of the establishment, in the presence of Dr. Howitt (now of Leicester), and myself.

The whole body was greatly emaciated and pale, except near the nates, where the blood had settled, and produced a purplish tint; and



a superficial degree of ulceration was observed in the skin covering the sacrum, as often happens in cases of consumption. The loins appeared as plump as natural, but this was owing to the cellular substance of the part being filled with a gelatinous fluid. A curvature of the spine, to the length of five inches, was very distinctly to be seen between the scapulæ, although the patient had been very little out of bed since his back was first examined. When the spinal canal was opened, and the spinal marrow removed, the third, fourth, and fifth dorsal vertebræ were found in a carious state, and fractured in irregular shaped pieces by the knife and hammer employed to open the spine. The anterior part of the bodies of the diseased vertebræ were in a honey-comb like state, and more carious than the other parts of the vertebræ, but all the diseased vertebræ were more brittle, and more readily fractured than usual. The inter-vertebral cartilages, between the diseased bones, were almost completely absorbed, and what little remained, was quite in a pulpy state. Near the middle of the curvature, where the vertebræ were most carious, the dura mater, or sheath of the spinal marrow, for about an inch and a half, was externally coated with a whitish granular substance, that varied greatly in thickness, and appeared to be coagulated lymph. The carious and fractured vertebræ separated from



the periostium and ligaments covering the bodies of the vertebræ, as if they had never been attached. The theca vertebrarum was entirely free from effused fluid. The lungs were found adhering, in many places, to the pleura costalis, and were full of tubercles; at the upper part, nearly opposite the clavicle on each side, several cavities were found, of the size of a garden plum. Many small ulcers were found in the descending colon, which accounts for a purging under which he laboured during the latter stage of his disease. The pericardium contained rather more serous fluid than natural, and the veins of the heart were unusually distended. The spleen and kidneys were rather firmer than usual. In opening the chest, we observed a supernumerary cartilage to the fourth rib, on the left side, which led to the ribs being counted, and he was found to have only eleven ribs on each side.

The female I have already noticed, as dissected by Dr. Alison and myself, had only eleven ribs on each side. The skeleton of the chest, in this instance, was given into the hands of my late worthy friend, Mr. Fyff, who said that he had not met with such a *lusus naturæ* before.

I have a patient at present under my care,



who has six fingers to each hand. Why should not a rib be wanting occasionally? Still, I believe, a deficiency in the number of the ribs to be a rare occurrence, which has induced me to notice what has come under my own observation, as to this aberration of nature.



## APPENDIX, N<sup>o</sup>. I.

---

When the Tabular View of the Cases of Bronchocele, treated by the exhibition of Iodine, was printed, several cases were still under treatment, I now purpose reporting the final issue of these cases, with such remarks as may appear necessary.

Case XV. p. 45.—Bronchocele much reduced in size. No impression made on the bony tumour. The Liquor Iodini in doses of fourteen or fifteen drops, three times a day, occasioned so much heaviness and sleepiness, that she left off taking it about the middle of September, 1824, and was discharged relieved on the 19th of November following.

N<sup>o</sup>. 88. Reported cured.

N<sup>o</sup>. 94. I called on this patient, at Cromford, and found the goitre dissipated.

N<sup>o</sup>. 98. The goitre was completely dissipated on the 3d of September, 1824. She suffered no inconvenience from the Iodine, and appeared then in very good health, although she had not menstruated for fourteen weeks. Is now well, and catamenia regular.

N<sup>o</sup>. 99. Was married about the beginning of October, 1824, and left off the use of the Iodine. The tumour



at this time was very much reduced in size, and it continued to subside until it was almost completely dispersed on the 19th of November following, when she was discharged cured.

N°. 100. Goitre was very nearly dissipated when I last saw the patient.

N°. 103. One of her neighbours informed me, that the Bronchocele was gone, or very nearly so.

N°. 104. This woman persevered very steadily in the use of the Iodine, and was rewarded by the tumour being almost completely dissipated, in April, 1825, although it was very large and hard when she was admitted an Out-Patient of the Hospital. A veteran and very intelligent Surgeon of this town, had just been complaining to me of his want of success in the treatment of Bronchocele by Iodine, when I met this woman coming from the General Hospital, where she had been to return thanks for her cure, and I took the opportunity of letting him hear from the patient herself as to the benefit she had received: she stated, that the tumour projected very considerably beyond her chin, and was very hard when she came under my care; and he had the evidence of his senses, that the goitre was reduced to so small a size as to occasion no inconvenience, and scarcely any deformity. The patient also declared, that she had experienced no inconvenience whatever from the internal use of the Iodine, although it had been continued in her case for about fifteen months, without any intermission.

N°. 106. The goitre was almost dispersed the 24th of July, 1824.

N°. 107. The Bronchocele was dissipated on the 10th of December, 1824.



N°. 109. This patient has not returned, and the issue of the case is, at present, unknown to me.

N°. 110. The Bronchocele was very much smaller and softer on the 21st of May, 1824. He did not return to the Hospital, and was discharged for non-attendance.

N°. 112. This woman's case is noticed at N°. 30. From the slowness of the amendment in this case, under the use of the *small* doses of the preparations of Iodine, for moderate doses of it, as has been already remarked, disordered her so much, that she could not proceed with them, the patient became tired, and left off the use of the medicine. When I last saw her, about six months ago, the goitre was much in the same state as when she first applied to me, and her general health was very good.

N°. 113. Patient has not returned.

N°. 114. She has not returned.

N°. 115. Case has been mislaid.

N°. 118. Goitre dissipated the 28th of August, 1824.

N°. 119. Cured of the Bronchocele the 3d of September, 1824.

N°. 120. Goitre completely dissipated the 22d of October, 1824.

Eleven cases may, therefore, be added to the number of those cured since the General Abstract was printed.

---

As some of my readers may be curious to know what further effects were produced upon the Goitre in Millicent Richards' case (p. 69),



I subjoin the remainder of the case, so far as it has proceeded since the former part was printed off.

*Millicent Richards' Case continued.*

June 12, 1824. Her daughter reports, that she got cold in coming to me on the 23d of May last, and that she is troubled with pain all over the body. Has taken very little Iodine since last report.

Repet<sup>r</sup>. Mistura Purgans si tarda est alvus. Intermitatur T<sup>a</sup>. Iodini.

July 31. She only employed the Iodine internally, and in the way of friction, till the 26th of May last, as the journey had fatigued her very much, and she was attacked with a suppression of urine, in addition to the catarrhal affection. Bowels generally costive. The tumour measures  $27\frac{1}{4}$  inches in the greatest circumference, and  $26\frac{3}{8}$  inches in the shortest.

Capiat Tæ. Iodini gutt. x. ter in die. Frier. tumor Linimento Iodini omni nocte. Cont<sup>r</sup>. Pilulæ et Magnesiae Sulphas p. r. n.

November 6. Has employed the medicines as directed, since last report. Tumour measures 27 inches in the longest circumference, and 26 inches in the shortest. The neck of the tumour measures  $19\frac{1}{2}$  inches. She is fuller of flesh, and looks better than when she first visited me. Bowels open by the physic taken occasionally. Employs a laced bag to compress the tumour, but it does not fit properly.

Capiat Tæ. Iodini gutt. xii. ter in die. Cont<sup>r</sup>. alia.

January 1, 1825. Her daughter reports, that she has lately had a cold. The medicines agree very well, it appears, but does not know whether the tumour is reduced or not.

Cont<sup>r</sup>. remed.



March 26. Says she has employed the medicines regularly, as directed. Her complexion is clearer, and more ruddy than it was at first. The goitre measures  $26\frac{1}{2}$  inches in the longest circumference, and the shortest, or transverse, now measures almost as much, so that the tumour is become nearly globular. The neck of the tumour measures  $19\frac{1}{2}$  inches. The laced bag is so ill adapted to the tumour, that it has hitherto been of little or no service as a compress. Bowels are kept open by the Pills.

Capiat Tæ. Iodini gutt. xv. ter in die. Cont<sup>r</sup>. alia.

---

REMARKS.—It appears, from the case, that the neck of the tumour has been reduced two inches and a half, and the goitre itself nearly two inches in circumference, if the excess of reduction in the longest, be allowed to balance the deficiency in the shortest circumference. Whether any further reduction of size will take place in this enormous goitre, it is impossible to speak with any degree of certainty; but the case, so far as it has proceeded, shews the very great powers of Iodine in diminishing morbid tumefaction of the thyroid gland, even when it has reached to the very summit of enlargement.

In conclusion, I may observe, that during the last twelve months, I have treated a great many cases of Bronchocele, chiefly by the internal use of Tincture of Iodine; and, it affords me much satisfaction to be able to state, that the longer I employ this invaluable medicine, the greater reason have I to be satisfied with its powers in curing Bronchocele, as well as the other diseases for which I have recommended it; and, I hope, that the cases above detailed, will convince all unprejudiced practitioners, that Iodine may be exhibited internally, not only with perfect safety, but also with great advantage.



## APPENDIX, N<sup>o</sup>. 2.

---

### ON DYSPHAGIA.

At page 346, I have promised to endeavour to obtain information respecting the final issue of William Warren's case, and to communicate it to my readers.

I sent to the patient to request he would call upon me, as soon as convenient, which he did, April 16, 1825, and informed me, that after taking the Iodine, in the dose I had prescribed, for nearly twelve months, he found his general health very much improved, and he could swallow as well as ever. He has also recovered his vocal powers, but as he still has the sensation of a lump rising behind the cricoid cartilage, when he attempts to sing, he has refrained from doing so, lest it should cause a return of difficulty in swallowing. I desired him again to have recourse to the Tincture of Iodine, should he find any disposition to a return of the disease.



## FORMULÆ.

## TINCTURA IODINI.

R̄ Iodini *	...	...	...	...	...	3i.
Spiritus Rectificati †	...	...	...	...	...	3i℥ss.
Solve, terendo in vase vitrio						

## LIQUOR IODINI.

R̄ Potassæ Hydriodatis	...	...	...	gr. xxxvi.
Iodini	...	...	...	gr. x.
Aquæ Destillatæ	...	...	...	3x.
Solve, terendo in vase vitrio.				

## SOLUTIO IODINI.

R̄ Potassæ Hydriodatis	...	...	...	gr. xxiv.
Aquæ Destillatæ	...	...	...	3i.
Solve, terendo in vase vitrio.				

## LINIMENTUM IODINI.

R̄ Linimenti Saponis Comp.	...	...	...	3i.
Tincturæ Iodini	...	...	...	3i.
Misce.				

\* I have given Iodine a neuter termination, to correspond with aurum, argentum, &c. as I am of opinion, that it is as much a metal as Potassium or Sodium.

† Specific gravity, .916.



# UNGUENTUM IODINI.

R Potassæ Hydriodatis	...	...	...	...	3ss.
Adipis Præparatæ	...	..	...	...	3i.
Misce.					

The above preparations of Iodine have been employed by the names prefixed to them respectively, in my Hospital and private practice, for the sake of brevity, and to prevent mistakes. I again beg to observe, that the Tincture of Iodine employed in the above Researches, is exactly of *half* the strength of that recommended by Dr. Coindet. Should the London College of Physicians think proper to admit Iodine into their Materia Medica, I beg leave to observe, that owing to the difficulty of obtaining rectified spirit of the strength employed by the College, I am of opinion, that it would be attended with less inconvenience to practitioners, and would insure a greater uniformity in the strength of the Tincture, if it were made with proof-spirit, in the proportion of one drachm of the Iodine to five ounces of the spirit. A Tincture so formed would be of one-fourth the strength of that employed by Dr. Coindet, and of half the strength of that employed by myself; and, in my opinion, would be better adapted for general use than the stronger Tinctures that have hitherto been exhibited; and would be more likely to agree with the greater number of patients than if it were stronger, and less liable to be given in an over dose, which I fear has too often been the case in administering this powerful medicine.



## ERRATA AND ADDENDA.



- Page 9, line 6, for 15 males to 101 females, *read* 15 males to 105 females.
- 16, line 8, for 116, *read* 120.
- 22, line 8, for Purganatis, *read* Purgantis.
- 23, bottom line, for sumant, *read* sumat.
- 24, line 11, for Tincturæ, *read* Tinctura.
- 25, line 12, for Tæ. *read* Ta.
- 30, line 5, for resided, *read* resides.
- 34, line 12, for hoarse, *read* is hoarse.
- 56, at bottom, for Women, total, 101, *read* 105.
- 57, line 6 from bottom, for disquammation, *read* desquammation.
- 103, line 1, for Paraplegic Palsy, *read* Hemiplegic Palsy.
- 111, line 11, Omitt<sup>r</sup>. Tæ. Iodini, *read* Omitt<sup>r</sup>. Ta. Iodini.
- 137, line 8 from the bottom, for Repet<sup>r</sup>. Tæ. Iodini, *read* Repet<sup>r</sup>. Ta. Iodini.
- 156, line 15, for general debility from Paralysis, *read* general debility, with Paralysis.
- 180, line 5, for subsided, *read* subsisted.
- 181, line 8 from the bottom, for impaired memory, *read* impaired mental powers.
- 191, line 2, for Tæ. Iodini gutt. ex, &c. *read* Tæ. Iodini gutt. x. ex, &c.
- 201, line 11, for Intermitt<sup>r</sup>. Tæ. Iodini, *read* Intermitt<sup>r</sup>. Ta. Iodini.
- 235, Sarah Carlin's Case I. ought to have been noticed at page 311, before Case IV. page 23.
- 263, line 11 from the bottom, for bleed, *read* bled.
- 269, line 12, for to a dose, *read* for a dose.
- 297, line 2, for the nostrils, *read* the right nostril.



Page 335, line 15, for trachoea, *read* trachea.

— 340, line 11 from the bottom, for trachoea, *read* trachea.

— 355, line 17, for Cerato Catacei, *read* Cerato Cetacei.

— 396, line 2, for Ungento, *read* Unguento.

— 417, line 11 from the bottom, for 3ss. *read* 3ss.

— 441, line 6, for three or four weeks, *read* for nearly two months.

— 443, line 3, after the word attached, the next sentence ought to have been expressed as follows:—  
The bodies of the carious vertebræ were moistened with a sero-purulent matter, and after their removal, about a table spoonful of the same fluid was found upon the periosteum and ligaments belonging to the diseased bones; but the theca vertebrarum was entirely free from effused fluid.

— 443, line 4 from the bottom, for Fyff, *read* Fyfe.



LONDON, FEBRUARY 1837.

# VALUABLE STANDARD WORKS,

ON

MEDICINE,  
SURGERY,

MIDWIFERY,  
CHEMISTRY, &c.

PRINTED FOR

LONGMAN, REES, ORME, BROWN, GREEN, AND LONGMAN,  
Paternoster-Row.

---

## A TREATISE ON OPERATIVE SURGERY.

By W. P. COCKS, Surgeon,

Author of "Illustrations of Mr. Samuel Cooper's Surgical Dictionary," comprised  
in above 400 Plates, with Anatomical Descriptions.

1 vol. 8vo. illustrated by Twelve Plates.—*In a few days.*

\*\*\* This Work will be a Comprehensive Manual of Practical Surgery, embracing illustrated details of all the Operations, Major and Minor, as they are performed on the Living and Dead Subjects by the most eminent Surgeons in this country, on the European Continent, and in America.

---

## LECTURES

ILLUSTRATIVE OF

## CERTAIN LOCAL NERVOUS AFFECTIONS.

By Sir BENJAMIN C. BRODIE, Bart. F.R.S.

Serjeant Surgeon to the King, and Surgeon to St. George's Hospital.

8vo. price 4s.

*By the same Author,*

Lectures on Diseases of the Urinary Organs.

2d Edit. 8s. bds.

Pathological and Surgical Observations on Diseases of the Joints.

3d Edit. 10s. 6d.

---

## TRANSACTIONS

OF THE

## MEDICAL AND CHIRURGICAL SOCIETY OF LONDON;

Comprising a mass of valuable and important Papers on Medicine and Surgery.

8vo. with Engravings.

\*\*\* A new volume will be ready in a few days.



---

*Mr. Abernethy.*

---

SURGICAL AND PHYSIOLOGICAL WORKS  
OF

JOHN ABERNETHY, F.R.S. &c.

4 Vols. 8vo. 2l. 5s. 6d. Consisting of the following Treatises and Lectures,  
which may also be had *separately*:—

<p>On the CONSTITUTIONAL ORIGIN and TREATMENT of LOCAL DISEASES, and ON ANEURISMS, 8s. On DISEASES resembling SYPHILIS, and on DISEASES of the URETHRA, 6s.</p>	<p>On INJURIES of the HEAD, and MISCEL- LANEOUS SUBJECTS, 7s. On LUMBAR ABSCESSSES and TUMORS, 6s. LECTURES ON SURGERY, 8s. PHYSIOLOGICAL LECTURES, 10s. 6d.</p>
---	--

---

*Dr. Ainslie.*

---

MATERIA INDICA;

Or, some Account of those Articles which are employed by the Hindoos, and other  
Eastern Nations, in their Medicine, Arts, &c.

By WHITE LAW AINSLIE, M.D. M.R.A.S. In 2 vols. 8vo. 2l.

---

*Dr. Arnott.*

---

ELEMENTS OF PHYSICS,

Or Natural Philosophy, General and Medical, written in plain or non-technical language.

By NEIL ARNOTT, M.D.

8vo. many Wood Engravings, 5th edit. Vol. I. 21s. and Vol. II. Part I. 10s. 6d.

The concluding Part of Vol. II. of the work is in progress.

---

*Dr. Abercrombie.*

---

PATHOLOGICAL AND PRACTICAL  
RESEARCHES ON DISEASES OF THE BRAIN AND SPINAL CORD.

By JOHN ABERCROMBIE, M.D. Oxon. and Edin. V.P.R.S.E. &c. &c.

12mo. 3d Edit. greatly enlarged, 5s. 6d.

---

*Dr. Addison & Mr. Morgan.*

---

AN ESSAY ON THE  
OPERATION OF POISONOUS AGENTS UPON THE LIVING BODY.

By JOHN MORGAN, F.L.S. Surgeon to Guy's Hospital; and

THOMAS ADDISON, M.D. Assistant Physician to Guy's Hospital.

8vo. 5s.

---

*Mr. Bacot.*

---

TREATISE ON SYPHILIS,

In which the History, Symptoms, and Method of Treating every Form of that Disease,  
are fully considered.

By JOHN BACOT, Surgeon to the St. George's and St. James's Dispensary, &c. 8vo. 9s.

---

*Dr. Baillie.*

---

MORBID ANATOMY

Of some of the most important Parts of the HUMAN BODY.

By MATTHEW BAILLIE, M.D.

With Observations on Diseased Structures, by JAMES WARDROP, Surgeon to the King.

12mo. 7s.

Life and Works of Dr. Baillie. 2 vols. 8vo. with Portrait, 1l. 5s.



*Dr. Bateman.*

# **PRACTICAL SYNOPSIS OF CUTANEOUS DISEASES,**

According to the Arrangement of DR. WILLAN ;

Exhibiting a concise View of the Diagnostic Symptoms, and the Method of Treatment.

By T. BATEMAN, M.D. Seventh Edition, edited by A. TODD THOMSON, M.D. F.L.S.  
Professor of Materia Medica in the University of London. 3vo. 15s.

**Delineations of the Cutaneous Diseases** comprised in the Classification of the late DR. WILLAN. By T. BATEMAN, M.D. &c. 4to. with 72 coloured Plates, 12*l.* 12*s.*

**Atlas of Delineations of Cutaneous Eruptions ;** illustrative of the Descriptions in the above Synopsis. By A. TODD THOMSON, M.D. &c. Royal 8vo. with 128

Graphic Illustrations, carefully coloured on 29 Plates, 3*l.* 3*s.*

The object of this Atlas is, to place in the hands of the Student a substitute for the valuable but expensive Delineations of Dr. Bateman. The editor has endeavoured to render these Plates eminently useful to the Student, by marking the Commencement, Progress, and Termination of each Eruption, as far as can be accomplished in a single representation.

*Sir George Ballingall.*

# **OUTLINES OF THE COURSE OF LECTURES ON MILITARY SURGERY,**

Delivered in the University of Edinburgh.

By Sir GEO. BALLINGALL, M.D. F.R.S.E. &c. &c. 8vo. 18*s.*

*Dr. T. R. Beck & Dr. J. B. Beck.*

# **ELEMENTS OF MEDICAL JURISPRUDENCE.**

By T. R. BECK, M.D.

Professor of the Institutes of Medicine, and Lecturer on Medical Jurisprudence, in the College of Physicians and Surgeons of the Western District of the State of New York, &c. ; and

J. B. BECK, M.D.

Professor of Materia Medica and Medical Jurisprudence in the College of Physicians and Surgeons, New York, one of the Physicians to the New York Hospital, &c. &c.

8vo. 5 h Edit., brought down to the present time, including the Notes of Dr. Munlop and Dr. Darwall. 2*l.* 2*s.*

"Beck's Medical Jurisprudence, in its present enlarged form, has been rendered quite an Encyclopædia on the subject : it is an admirable book of reference, and ought to be in the hands of every member of the profession."—*Med. Gaz.* March 19, 1836.

*Sir Charles Bell,*

K.G.H. F.R.S.S. L. & E., Professor of Surgery in the University of Edinburgh, &c. &c.

# **ANATOMY AND PHYSIOLOGY OF THE HUMAN BODY.**

By JOHN and CHARLES BELL.

7th Edition, systematized by SIR C. BELL.

3 Vols. 8vo. numerous Engravings, 2*l.* 12*s.* 6*d.*

**Engravings of the Arteries ;** illustrative of the above Work.

By SIR C. BELL. Imperial 8vo. 15*s.* ; coloured, 1*l.* 1*s.*

*By the same Author,*

**Illustrations of the Great Operations of Surgery :** Trepan—Hernia—Amputation—Aneurism—Lithotomy. 4to. with 20 Plates, 3*l.* 15*s.* plain ; 5*l.* 5*s.* col'd. The Parts separately, 15*s.* plain ; 21*s.* col'd.

**Nervous System of the Human Body.** 3d Edit. 8vo. with fifteen Engravings, price 24*s.*

**Diseases of the Urethra, Prostate, Rectum, &c.** 8vo. 13*s.* 6*d.*

**Engravings from Specimens of Morbid Parts,** in the Author's Collection ; selected from the divisions Urethra—Vesica—Ren—Morbosa—Læsa, &c. Folio, 36*s.*



---

*Dr. Bennett.*

---

## MANUAL OF ANATOMY;

From the French of BAYLE.

Revised and improved by W. BENNETT, M.D. 18mo. 7s. 6d.

---

*Dr. Blackall.*

---

## OBSERVATIONS ON THE NATURE AND CURE OF DROPSIES.

By JOHN BLACKALL, M.D. 8vo. 4th Edit. 10s. 6d.

---

*Dr. Bright.*

---

## REPORTS OF MEDICAL CASES;

Selected with a view of illustrating the Symptoms and Cure of Diseases by a reference to Morbid Anatomy.

By RICHARD BRIGHT, M.D. F.R.S. one of the Physicians to Guy's Hospital. 4to.

Vol. I. embraces Dropsy, Inflammation of the Lungs, Phthisis, and Fever; with 16 coloured Plates, 4l. 4s.

Vol. II. contains Diseases of the Brain and Nervous System; with 38 Plates, 9l. 9s. col'd.

---

*Drs. Bright & Addison.*

---

## ELEMENTS OF THE PRACTICE OF PHYSIC.

By RICHARD BRIGHT, M.D. F.R.S., and THOMAS ADDISON, M.D., Lecturers on the Practice of Physic at Guy's Hospital.

8vo.

Fasciculus I. containing FEVER, price 4s.

---

*Dr. Burne.*

---

## PRACTICAL TREATISE ON THE TYPHUS OR ADYNAMIC FEVER.

By J. BURNE, M.D. &amp;c.

8vo. 7s. 6d.

---

*Professor Burns.*

---

## PRINCIPLES OF MIDWIFERY;

Including the Diseases of Women and Children.

By JOHN BURNS, M.D. Regius Professor of Surgery, Glasgow.

8vo. 8th Edit. with important Additions, 16s.

*By the same Author,*

## Principles of Surgery,

VOL. I. containing Inflammation, Tumors, Aneurisms, &amp;c. 8vo. 14s.

---

*Dr. Carbutt.*

---

## CLINICAL LECTURES, DELIVERED IN THE MANCHESTER INFIRMARY.

By EDWARD CARBUTT, M.D. 12s.

---

*Mr. Carmichael.*

---

ESSAY ON VENEREAL DISEASES,  
AND THE USES OF MERCURY IN THEIR TREATMENT.

With Drawings of the forms of Venereal Eruptions.

By RICHARD CARMICHAEL, M.R.I.A. 2d Edition, 8vo. 16s.



*Dr. Carswell.*

ILLUSTRATIONS OF THE ELEMENTARY FORMS OF DISEASE.

Imperial 4to. with col'd Figures of the natural size, and Descriptive Letter-press.

By R. CARSWELL, M.D. Prof. of Path. Anat. London University.

Fas. I.	TUBERCLE;	Fas. IV. MELANOMA;	Fas. VIII. PUS;
Fas. II.	} CARCINOMA;	Fas. V. SOFTENING;	Fas. IX. HYPERTROPHY;
&		Fas. VI. HÆMORRHAGE;	Fas. X. ATROPHY;
Fas. III.		Fas. VII. MORTIFICATION;	Fas. XI. ANALOGOUS TISSUES.

15s. each.

*Mr. Chitty.*

PRACTICAL TREATISE ON MEDICAL JURISPRUDENCE;

With all the Laws relating to Medical Practitioners, and Explanatory Notes.

By J. CHITTY, Esq. Barrister at Law.

Royal 8vo. Part I. 21s.

*Dr. Christison.*

TREATISE ON POISONS,

In relation to Medical Jurisprudence, Physiology, and the Practice of Physic.

By R. CHRISTISON, M.D.

8vo. 3d Edition, enlarged, corrected, and improved, 18s. bds.

*Dr. Fleetwood Churchill.*

OUTLINES OF THE PRINCIPAL DISEASES OF FEMALES.

By FLEETWOOD CHURCHILL, M.D.

1 vol. 8vo. Nearly ready.

*Sir C. M. Clarke.*

OBSERVATIONS ON THE DISORDERS OF FEMALES.

Illustrated by Plates.

By SIR CHAS. MANSFIELD CLARKE, Bart. M.D. F.R.S. Physician in Ordinary to the Queen.

3d Edition, 2 Vols. royal 8vo. 17. 16s.

*Mr. Clark.*

A PRACTICAL AND FAMILIAR TREATISE ON THE TEETH AND DENTISM.

By J. PATERSON CLARK, M.A., Dentist.

Price 10s.

*Mr. Le Gros Clark.*

THE PRACTICAL ANATOMY AND ELEMENTARY PHYSIOLOGY OF THE NERVOUS SYSTEM:

Designed for the Use of Students in the Dissecting-Room.

By F. LE GROS CLARK, Demonstrator of Anatomy in St. Thomas's Hospital.

9s. bds.

*Dr. Collins.*

A PRACTICAL TREATISE ON MIDWIFERY;

Containing the Result of SIXTEEN THOUSAND SIX HUNDRED AND FIFTY-FOUR BIRTHS, occurring in the Dublin Lying-in Hospital, during a period of Seven Years, commencing November, 1826.

By ROBERT COLLINS, M.D. late Master of the Institution.

8vo. price 12s. 6d.



*Dr. Conquest.*

## OUTLINES OF MIDWIFERY,

Developing its Principles and Practice.

Intended as a Text-Book for Students. By J. T. CONQUEST, M.D. F.L.S.

5th Edit. with Engravings, 12mo. 7s. 6d.

*Sir Astley Cooper.*

## ANATOMY AND SURGICAL TREATMENT OF ABDOMINAL HERNIA.

In Two Parts.

By SIR ASTLEY COOPER, Bart. F.R.S. &amp;c.

Edited by C. ASTON KEY, Senior Surgeon to Guy's Hospital.

2d Edition, in folio, with Additional Plates, 5l. 5s.

*By the same Author,*

Observations on the Diseases of the Testis. 4to. with Plates, price 3l. 3s. col'd, or 1l. 11s. 6d. plain,	Anatomy of the Thymus Gland. 4to. with 5 Plates, 14s.
---	---

*Mr. Samuel Cooper.*

## FIRST LINES OF THE PRACTICE OF SURGERY;

Explaining and illustrating the Doctrines relative to the Principles, Practice, and Operations of Surgery, as taught

By SAMUEL COOPER,

Surgeon to the North London Hospital, Professor of Surgery and Clinical Surgery in the University of London, &amp;c.

*By the same Author,*

Dictionary of Practical Surgery. 1 thick vol. 8vo. 28s.	Plates, with Anatomical Descriptions. By W. P. COCKS, Surgeon. 2 vols. 8vo. Vol. I. 2l. 2s.; Vol. II. 3l. 7s. 6d.
---	---

Illustrations of Ditto, in above 400

*Dr. Copland.*

## A DICTIONARY OF PRACTICAL MEDICINE.

By J. COPLAND, M.D. F.R.S. &amp;c.

8vo. Parts 1, 2, and 3, price 9s. each.

To form 1 thick volume, uniform with "Cooper's Surgical Dictionary."

\*\* Part 4 will be published on Monday, April 3d.

*By the same Author,*

Pestilential Cholera: its Nature, Prevention, and Cure.

12mo. 5s.

*Dr. Craigie.*

## ELEMENTS OF THE PRACTICE OF PHYSIC,

Presenting a view of the present State of Special Pathology and Therapeutics.

By DAVID CRAIGIE, M.D. F.R.S.E. &amp;c.

Vol. 1, 8vo. 18s.

*By the same Author,*

Elements of General and Pathological Anatomy.

8vo. 16s.

*Dr. Cullen.*

## FIRST LINES OF THE PRACTICE OF PHYSIC.

By W. CULLEN, M.D. With an Appendix, commenced by the Author, and continued and completed by J. C. GREGORY, M.D. F.R.S.E. &amp;c.

2 Vols. 8vo. 1l. 4s.



*Dr. Cummin.*

THE PROOFS OF INFANTICIDE CONSIDERED ;

Being a Popular Summary of the present State of Medico-Legal Knowledge on the subject of CHILD-MURDER.

By WILLIAM CUMMIN, M.D.,  
Lecturer on Forensic Medicine at the Aldersgate School of Medicine.  
Fcap. 8vo. 3s. 6d.

*Mr. Curtis.*

A TREATISE ON THE DISEASES OF THE EAR.

By J. H. CURTIS, Esq., Aurist and Oculist.  
6th Edit., plates, price 7s. 6d. bds.

*By the same Author,*

A Treatise on the Diseases of the Eye.  
2d Edit., plates, price 7s. 6d. bds.

An Essay on the Deaf and Dumb.  
Plates, price 10s. 6d. bds.

A Map of the principal Nerves and  
Blood-Vessels of the Head. Price 5s.  
coloured.

A Map of the Anatomy of the Ear.  
Price 5s. coloured.

A Chart of the Diseases of the Ear.  
Price 2s. 6d. ; small, 1s.

A Map of the Anatomy of the Eye.  
Price 5s. coloured.

A Chart of the Diseases of the Eye.  
Price 2s. 6d.

*Dr. Cutler.*

POPULAR SURGERY :

Being plain Directions offered to the Public at large, for affording Relief in all Cases of  
Accident, and dangerous Disease, Poisoning, &c.,

In the absence of a regular Practitioner.

From the French of M. MAYOR. With Notes and Additions, by  
THOMAS CUTLER, M.D. 4s. bds.

*Dr. Thomas Davies.*

LECTURES ON DISEASES OF THE LUNGS AND HEART,

Delivered at the London Hospital, by THOMAS DAVIES, M.D.  
Mem. Roy. Col. Phys., &c. &c.  
8vo. 12s.

*Dr. Dowson.*

INTRODUCTION TO THE STUDY AND PRACTICE OF MEDICINE.

By JOHN DOWSON, M.D. 12mo. 4s. 6d.

*Mr. H. Earle.*

TWO LECTURES ON THE  
PRIMARY AND SECONDARY TREATMENT OF BURNS.

By HENRY EARLE, F.R.S. Surgeon Extraord. to the King, &c.  
With 2 Plates, 2s. 6d.

*Mr. J. W. Earle.*

NEW EXPOSITION OF THE FUNCTIONS OF THE NERVES.

By JAMES WILLIAM EARLE.  
8vo. Part I. 7s. 6d.

*Edinburgh Medico-Chirurgical Society.*

TRANSACTIONS OF THE MEDICO CHIRURGICAL SOCIETY OF  
EDINBURGH.

8vo. Vol. I. with Plates, 18s. bds. ; Vol. II. 14s. bds. ; Vol. III. Parts I. and II. 12s. each.



---

*Mr. Elkington.*

A PRACTICAL DEMONSTRATION OF THE HUMAN SKELETON.

By GEORGE ELKINGTON, M.R.C.S. Fcap. 8vo. 7s.

---

*Dr. Elliotson.*

HUMAN PHYSIOLOGY.

By JOHN ELLIOTSON, M.D. Cantab. F.R.S.

With which is incorporated, much of the Elementary Part of the INSTITUTIONES  
PHYSIOLOGICÆ of J. F. BLUMENBACH,

Professor in the University of Göttingen.

5th Edit. in 8vo. with numerous Woodcuts. Part I. price 10s. 6d.

\*.\* The remaining Part will appear shortly.

---

*Dr. Farre.*

TREATISE ON SOME

PRACTICAL POINTS RELATING TO THE DISEASES OF THE EYE.

By the late J. C. SAUNDERS. Edited by J. R. FARRE, M.D.

3d Edition, 14s. plain, and 1*l.* 5s. coloured.

Journal of Morbid Anatomy, &c.

Edited by J. R. FARRE, M.D.

8vo. with Plates, Part I. 6s.

*By the same Author,*

Apology for British Anatomy.

4to. with 2 beautiful Lithographic Illustrations, 9s. plain; 12s. coloured.

---

*Mr. D. Fox.*

THE SIGNS, DISORDERS, AND MANAGEMENT OF PREGNANCY ;

The Treatment to be adopted during and after Confinement; and the  
Management and Disorders of Children.

Written expressly for the Use of Females.

By DOUGLAS FOX, M.R.C.S. and one of the Surgeons to the Derbyshire General Infirmary.

8vo. 6s.

---

*Dr. Fyfe.*

ELEMENTS OF CHEMISTRY.

By ANDREW FYFE, M.D. F.R.S.E.

2d Edition, comprising all the recent Discoveries. 8vo. 24s.

*By the same Author,*

Manual of Chemistry. 18mo. 7s.

---

*Dr. Gooch.*

PRACTICAL COMPENDIUM OF MIDWIFERY.

By the late ROBERT GOOCH, M.D.

Prepared for publication by GEORGE SKINNER, M.R.C.S.L.

12mo. 7s.

---

*Dr. Mason Good.*

THE STUDY OF MEDICINE.

By JOHN MASON GOOD, M.D. F.R.S. &c.

4th Edit. improved from the Author's MSS. and by reference to the latest advances in  
Physiology, Pathology, and Practice.

By SAMUEL COOPER, Professor of Surgery in the London University.

4 thick Vols. 8vo. 3*l.* 3s.



*Dr. Hamilton.*

**PRACTICAL OBSERVATIONS ON VARIOUS SUBJECTS RELATING TO MIDWIFERY.**

By JAMES HAMILTON, M.D. F.R.S.E., Prof. of Medicine, &c. in the Univ. of Edinburgh.  
8vo. Part II. 7s 6d.; Part I. 7s. 6d.

*Sir S. L. Hammick.*

**PRACTICAL REMARKS ON AMPUTATIONS, FRACTURES, AND STRICTURES OF THE URETHRA.**

By SIR S. LOVE HAMMICK, Surgeon Extraordinary to the King, &c.  
8vo. 9s.

*Dr. Harrison.*

**THE DUBLIN DISSECTOR; OR, MANUAL OF ANATOMY.**

Comprising a Description of the Bones, Muscles, Vessels, Nerves, and Viscera; also the relative Anatomy of the different Regions of the Human Body; together with the Elements of Pathology.

By ROBERT HARRISON, A.M. M.B. T.C.D. &c. &c.  
12mo. price 9s. in boards, the Fourth Edition, considerably enlarged and improved.

*Dr. Hooper.*

**MEDICAL DICTIONARY;**

Containing an Explanation of the Terms in Anatomy, Botany, Chemistry, Materia Medica, Midwifery, Mineralogy, Pharmacy, Physiology, Practice of Physic, Surgery, &c.

By ROBERT HOOPER, M.D. F.L.S.  
Physician to St. Marylebone Infirmary, &c.  
1 large vol. 6th Edition, 28s.

*By the same Author,*

Morbid Anatomy of the Human Brain. Illustrated by col'd Engravings; imp. 4to. 2l. 12s. 6d.	Morbid Anatomy of the Human Uterus and its Appendages. Imp. 4to. with 21 col'd Plates, 3l. 3s.
--	--

*Mr. Ingleby.*

**FACTS AND CASES IN OBSTETRIC MEDICINE;**

With Observations on some of the most important Diseases incidental to Females.

By JOHN INGLEBY, M.R.C.S. Lecturer on Midwifery, Birmingham.  
8vo. 9s.

*By the same Author,*

Practical Treatise on Uterine Hæmorrhage, in connexion with Parturition.  
8vo.

*Injuries of the Head.*

**A PRACTICAL TREATISE ON INJURIES OF THE HEAD.**

12mo. 3s. 6d.

*Dr. Jewel.*

**LONDON PRACTICE OF MIDWIFERY:**

Including the most important Diseases of Women and Children.

Chiefly designed for the Use of Students and early Practitioners.

With Alterations and Additions, by G. JEWEL, M.D.  
Senior Physician-Accoucheur to the St. George's and St. James's Dispensary; Lecturer on Midwifery, &c.  
12mo. 6th edit. 6s. 6d.

*Dr. Kay.*

**THE PHYSIOLOGY, PATHOLOGY, AND TREATMENT OF ASPHYXIA;**

Including Suspended Animation in New-born Children, and from Hanging, Drowning, Wounds of the Chest, &c.

By J. P. KAY, M.D. formerly President of the Royal Med. Soc. Edinb.  
8vo. 10s. 6d.



---

*Mr. C. Aston Key.*

MEMOIR ON THE  
ADVANTAGES AND PRACTICABILITY OF DIVIDING THE STRICTURE  
IN STRANGULATED HERNIA ON THE OUTSIDE OF THE SAC.

By C. ASTON KEY, Surgeon to Guy's Hospital, Lecturer on Surgery, &c.  
With Cases, and 3 col'd Drawings. 7s. 6d.

---

*Mr. Knox.*

THE ANATOMIST'S INSTRUCTOR AND MUSEUM COMPANION :  
Being Practical Directions for the Formation and subsequent Management  
of Anatomical Museums.

By FREDERICK JOHN KNOX. 4s. 6d.

---

*Dr. Latham.*

LECTURES ON SUBJECTS CONNECTED WITH CLINICAL MEDICINE,  
Delivered at St. Bartholomew's Hospital, by Dr. LATHAM.

1 vol. 12mo. 6s. 6d.

---

*Mr. Lee.*

AN ACCOUNT OF THE  
MOST FREQUENTED WATERING PLACES ON THE CONTINENT,  
And of the Medicinal Application of their Mineral Springs :  
With Tables of Analysis, and an Appendix, on the principal Mineral Waters of England.

By EDWIN LEE, M.R.C.S.,  
Author of Observations on the Continental Medical Institutions.  
1 vol. post 8vo. price 7s. 6d.

---

*Mr. Liston.*

ELEMENTS OF SURGERY.

By ROBERT LISTON, Surgeon to the North London Hospital.  
One thick volume, 8vo. 21s.

---

*Mr. Lucas.*

A CONCISE  
ANATOMICAL DESCRIPTION OF THE ARTERIES OF THE HUMAN BODY :  
Together with full Directions for cutting down upon and securing the  
several Arterial Trunks.

For the Use of Students in Anatomy.  
By P. BENNETT LUCAS, Member of the Royal College of Surgeons, London.  
4s. 6d. bds.

---

*Dr. Macaulay.*

DICTIONARY OF MEDICINE,  
Designed for Popular Use.

By ALEXANDER MACAULAY, M.D. 8vo. 2d Edition, 14s.

---

*Dr. Macbraire.*

A SYSTEM OF MEDICAL NOSOLOGY.

By J. MACBRAIRE, M.D. L.E., &c. &c. 5s.



---

*Dr. Mackenzie.*

**A PRACTICAL TREATISE ON DISEASES OF THE EYE.**

By WM. MACKENZIE, M.D.

Lecturer on the Eye in the University of Glasgow.

2d Edit. in a thick volume 8vo. with Copper-plates and above 100 Woodcuts, 25s.

*By the same Author,*

Description of the Human Muscles; with a Table of their combined Actions, &c. 3s.

---

*Dr. Mackintosh.*

**ELEMENTS OF PATHOLOGY AND PRACTICE OF PHYSIC.**

By J. MACKINTOSH, M.D. Acting Surgeon to the Ordnance in North Britain, &c.

2 vols. 8vo. 3d Edit. 31s. 6d.

---

*Mr. Maclean.*

**ILLUSTRATIONS OF TEETHING;**

Or, a Treatise on the Progress and Shedding of the Human Teeth, to the completion of the permanent set.

By R. MACLEAN, Dentist.

Royal 8vo. with Plates, 10s. plain, and 12s. col'd.

---

*M. Magendie.*

**ELEMENTARY COMPENDIUM OF PHYSIOLOGY,**

For the Use of Students.

By F. MAGENDIE, M.D. &c.

From the French, with Notes, Tables, &c. by E. MILLIGAN, M.D. &c.

4th Edit. greatly enlarged, 8vo. 21s.

---

*Dr. Maunsell.*

**THE DUBLIN PRACTICE OF MIDWIFERY.**

By HENRY MAUNSELL, M.D. Lecturer on Midwifery, &c. at the Medical School, Park Street, Dublin. 12mo. 5s.

---

*Dr. Maunsell and Dr. Evanson.*

**A PRACTICAL TREATISE ON THE MANAGEMENT AND DISEASES OF CHILDREN.**

By HENRY MAUNSELL, M.D., and R. T. EVANSON, M.D., Professor of Medicine in the Royal College of Surgeons in Ireland.

12mo. 7s. 6d.

---

*Dr. M'Cormac.*

**AN EXPOSITION OF THE NATURE, TREATMENT, AND PREVENTION OF CONTINUED FEVER.**

By HENRY M'CORMAC, M.D. M.R.C.S.E.

In 1 vol. 8vo. 6s.

---

*Medical Vocabulary.*

**A MEDICAL VOCABULARY;**

Or, Explanation of all Names, Synonymes, Terms and Phrases, used in Medicine, Surgery, and the relative Branches of Medical Science;

Giving the direct Derivation, and Directions for the proper Pronunciation of each.

Intended chiefly as a Book of Reference for the Student, but also adapted for general use.

By a MEDICAL PRACTITIONER. 18mo. 4s. 6d.



---

*Mr. Middlemore.*

---

A TREATISE ON THE  
DISEASES OF THE EYE AND ITS APPENDAGES.By RICHARD MIDDLEMORE, M.R.C.S. Surgeon to the Birmingham Eye Infirmary, &c.  
In 2 thick vols. 8vo. price 1*l.* 15*s.*

---

*Dr. Murray.*

---

## A DISSERTATION ON THE INFLUENCE OF HEAT AND HUMIDITY;

With practical Observations on the Inhalation of Iodine and various Vapours,  
in Consumption, Catarrh, Croup, Asthma, and other Diseases.By JAMES MURRAY, M.D., &c.  
1 Vol. 10*s.* 6*d.* cloth.

---

*Dr. Oke.*

---

PRACTICAL OBSERVATIONS ON THE  
IMMEDIATE TREATMENT OF THE PRINCIPAL EMERGENCIES  
THAT OCCUR IN SURGERY AND MIDWIFERY,

Systematically arranged.

By W. S. OKE, M.D.  
Part I. 8vo. 8*s.* Part II. 6*s.*

---

*Dr. Palmer.*

---

## A DICTIONARY OF TERMS EMPLOYED BY THE FRENCH,

In Anatomy, Physiology, Pathology, Practical Medicine, Surgery, Midwifery,  
Pharmacy, Medical Zoology, Botany, and Chemistry;

With their Derivations from the Greek and Latin; &amp;c. &amp;c. &amp;c.

By SHIRLEY PALMER, M.D. formerly of Tamworth.  
Parts I. and II. 6*s.* each. To be completed in 3 Parts.

---

*Mr. Parkes.*

---

## THE CHEMICAL CATECHISM.

By the late SAMUEL PARKES, F.L.G. and W.S. &c.  
Author of "Chemical Essays," "Rudiments of Chemistry," &c.Adapted to the present state of Chemical Science, by E. W. BRAYLEY, JUN. A.L.S.,  
of the London Institution.  
8vo. 13th Edit. 15*s.*

---

*Mr. Percivall.*

---

## ANATOMY OF THE HORSE,

Embracing the Structure of the Foot.

By WILLIAM PERCIVALL, M.R.C.S. Veterinary Surgeon in the 1st Life Guards.  
8vo. 20*s.*

By the same Author,

Hippopathology: a Systematic Treatise on the Disorders and Lameness  
of the Horse.With Woodcuts. 8vo. Vol. I. 10*s.* 6*d.*

---

*Dr. Wilson Philip.*

---

TREATISE ON THE MEANS OF PRESERVING HEALTH,  
And particularly the prevention of Organic Diseases.By A. P. WILSON PHILIP, M.D. F.R.S.L. and E. 8vo. 12*s.*

---

*Mr. B. Phillips.*

---

## TREATISE ON THE URETHRA:

Its DISEASES, especially STRICTURE, and their CURE.

By B. PHILLIPS. 8vo. with 2 Plates, 8*s.*



*Mr. Rees.*

A TREATISE ON THE ANALYSIS OF BLOOD AND URINE,  
In Health and Disease:

With Directions for the Analysis of Urinary Calculi.

By G. O. REES.

Intended as an Introduction to Animal Analysis, for the use of the Medical Profession.  
1 vol. 8vo. 5s. 6d.

By the same Author, translated from the French,

The Analysis of Inorganic Bodies. By J. J. BERZELIUS. 12mo. 5s.

*M. Richerand.*

ELEMENTS OF PHYSIOLOGY.

By A. RICHERAND.

Fifth Edition. Translated from the French, and supplied with Notes and a copious  
Appendix, by JAMES COPLAND, M.D.  
8vo. 2d Edit. 18s.

*Mr. Russell.*

OBSERVATIONS ON THE TESTICLES.

By JAMES RUSSELL, M.R.C.S. 4s.

*Mr. Sandwith.*

INTRODUCTION TO ANATOMY AND PHYSIOLOGY:

For General Readers, Young Persons, and Junior Medical Students.

By T. SANDWITH, Surgeon. Plates. 7s. 6d.

*Mr. Scott.*

SURGICAL OBSERVATIONS ON THE  
TREATMENT OF CHRONIC INFLAMMATION

In various Structures;

Particularly as exemplified in the Diseases of the Joints.

By JOHN SCOTT, Surgeon to the London Hospital, &c. 8vo. 7s. 6d.

By the same Author,

Cases of Tic Douloureux, and other Forms of Neuralgia.

8vo. 2s. 6d.

*Sir Charles Scudamore.*

TREATISE ON THE NATURE AND CURE OF GOUT AND GRAVEL.

By Sir C. SCUDAMORE, M.D. F.R.S.

Large 8vo. 4th Edit. 20s. bds.

By the same Author,

Treatise on the Nature and Cure of  
Rheumatism. 15s.

Cases illustrating and confirming the  
Remedial Power of the Inhalation of  
Iodine and Conium, in Tubercular Phthisis  
and various Disorders of the Lungs. 8vo.  
2d edit. 7s. 6d.

Treatise on the Mineral Waters of  
Buxton, Tunbridge Wells, Bath, Chelten-  
ham, the Beulah Spa (Norwood), &c.  
2d Edition, 8s.

Observations on Laennec's Method  
of forming a Diagnosis of the Diseases of  
the Chest by means of the Stethoscope. 5s.

Further Examination of the Princi-  
ples of the Treatment of Gout; with Ob-  
servations on Colchicum. 8vo. 2d edit. 6s.

Essay on the Blood. 8vo. 6s.

Principles of the Treatment of Gout;  
with a further Examination of the Effects  
of Colchicum as a Remedy; and some  
Observations on the Use of Veratria in that  
Disease. 8vo. 2s. 6d.



*Dr. Seymour,*

Physician to St. George's Hospital; Consulting Physician to the Seaman's Hospital;  
and one of the Physicians in Ordinary to H.R.H. the Duke of Sussex.

**THE NATURE AND TREATMENT OF DROPSY;**

Considered especially in reference to the Diseases of the Internal Organs of the Body which most commonly produce it.

Parts 1 and 2, Anasarca and Ascites.

To which is added, an Appendix, containing a Translation of the Work of  
Dr. Geromini on Dropsy, from the original Italian.

By EDWARD J. SEYMOUR, M. D.

1 vol. 8vo. price 6s. in bds.

*By the same Author,*

Illustrations of some of the principal  
Diseases of the Ovaria, their Treatment,  
&c. 8vo. with an Atlas of 14 Engravings  
in folio, 21s.; India Paper, 31s. 6d.

Observations on the Medical Treat-  
ment of Insanity. 8vo. 5s.

*Mr. Shaw.*

**NATURE AND TREATMENT OF THE VARIOUS DISTORTIONS**

TO WHICH THE SPINE AND BONES OF THE CHEST ARE SUBJECT.

By JOHN SHAW. 8vo. 10s. 6d.

*Dr. Southwood Smith.*

**SYSTEMATIC TREATISE ON FEVER.**

By SOUTHWOOD SMITH, M.D. Physician to the London Fever Hospital.  
8vo. 14s.

*Mr. Solly.*

**THE HUMAN BRAIN:**

Its Configuration, Structure, Development, and Physiology,

Illustrated by references to the Nervous System in the lower orders of Animals.

By SAMUEL SOLLY,

Lecturer on Anatomy and Physiology at St. Thomas's Hospital.

With 12 Plates, price 12s. 6d. in cloth.

*Mr. Spender.*

**OBSERVATIONS ON THE**

**CAUSES AND TREATMENT OF ULCEROUS DISEASES OF THE LEG.**

By J. C. SPENDER, M.R.C.S.L.

1 vol. 8vo. 7s. 6d.

*Mr. Stafford.*

**ON PERFORATION AND DIVISION OF**

**PERMANENT STRICTURE OF THE URETHRA**

BY THE LANCETTED STILETTES;

With Observations on the Nature and Treatment of Spasmodic and Inflammatory Stricture,  
and on various other Urethral Affections.

By R. A. STAFFORD,

Surgeon to the St. Marylebone Infirmary, Member of the Royal College of Surgeons, &c.

8vo. Third Edition, greatly enlarged and improved, 9s.

*Mr. Stanley.*

**ACCOUNT OF THE**

**MODE OF PERFORMING THE LATERAL OPERATION OF LITHOTOMY.**

By EDWARD STANLEY,

Lecturer on Anatomy and Physiology at St. Bartholomew's Hospital.

Royal 4to. Plates, 15s.



*Mr. Swan.*

ILLUSTRATIONS OF THE  
COMPARATIVE ANATOMY OF THE NERVOUS SYSTEM.

By JOSEPH SWAN.

In 4to. Parts I. and II. price 10s. 6d. each.

*By the same Author,*

Demonstration of the Nerves of the Human Body. Imp. folio, with 50 Engravings, half-bd. russia, 14*l*.

Demonstration of the Nerves of the Human Body. Being the whole of the

foregoing work, on 25 Steel Plates, by FINDEN. In 4to. price 1*l*. 11s. 6d.

Treatise on Diseases and Injuries of the Nerves. 8vo. 14s.

*Dr. Thomas.*

MODERN PRACTICE OF PHYSIC,

Exhibiting the Character, Causes, Symptoms, Prognostics, Morbid Appearance, and improved Method of treating the Diseases of all Climates.

By ROBERT THOMAS, M.D.

In 1 thick Vol. 8vo. 9th Edition, revised, 18s.

*Dr. A. Todd Thomson.*

ELEMENTS OF MATERIA MEDICA AND THERAPEUTICS;

Including the recent Discoveries and Analyses of Medicines.

By A. TODD THOMSON, M.D. F.L.S. &c. Professor of Mat. Med. and Therapeutics, and of Medical Jurisprudence, in the University of London.

1 Vol. 8vo. 21s.

*By the same Author,*

London Dispensatory; containing Translations of the Pharmacopœias, &c. &c.: forming a Practical Synopsis of Materia Medica, Pharmacy, and Therapeutics. 1 large Vol. 8vo. 8th Edition, with important Additions, 18s.

Atlas of Delineations of Cutaneous Eruptions; illustrative of the Descriptions in Dr. BATEMAN'S Practical Synop-

sis of Cutaneous Diseases. Royal 8vo. 29 col'd Plates, 3*l*. 3s.

Conspectus of the Pharmacopœias. A New Edition, to correspond with the new Pharmacopœia, is in preparation.

Some Observations on the Preparation and Medicinal Employment of Ioduret and Hydriodate of Iron. 8vo. 2s. 6d. sewed.

*Dr. Thorburn.*

ELEMENTS OF BEDSIDE MEDICINE AND GENERAL PATHOLOGY,  
&c. &c.

By J. STEWART THORBURN, M.D. 8vo. 14s.

*Mr. Travers.*

A FURTHER INQUIRY CONCERNING  
CONSTITUTIONAL IRRITATION, AND THE PATHOLOGY OF THE  
NERVOUS SYSTEM.

By BENJ. TRAVERS, F.R.S. Senior Surgeon to St. Thomas's Hospital, &c. &c.  
8vo. 14s.

*By the same Author,*

Observations on the Pathology of Venereal Affections. 8vo. 3s.  
Inquiry into the Process of Nature in Repairing Injuries of the Intestines. 8vo. with Plates, 15s.

An Inquiry concerning that Disturbed State of the Vital Functions, usually denominated Constitutional Irritation. 2d Edition, revised, 8vo. 14s.



*Dr. Turnbull.*

ON THE MEDICINAL PROPERTIES OF THE NATURAL ORDER  
RANUNCULACEÆ;

And more particularly on the Uses of *Sabadilla* Seeds, *Delphinium Staphysagria*, and  
*Aconitum Napellus*: and their Alcaloids—*Veratria*, *Sabadilline*, *Delphinia*, and *Aconitine*.

By A. TURNBULL, M.D. 8vo. 6s.

*By the same Author,*

An Investigation into the Remarkable Medicinal Effects resulting from the External Application of *Veratria*. 2d Edit. 8vo. 5s.

On the Preparation and Medicinal Employment of *Aconitine*, in the Treatment of *Tic Douloureux*, &c. 8vo. 3s. 6d.

*Mr. Waite.*

THE GUMS:

With late Discoveries on their Structure, Growth, Connexions, Diseases, and Sympathies.

By MR. GEORGE WAITE, Surgeon-Dentist, M.R.C.S.

1 vol. 12mo. 6s.

*By the same Author,*

The Surgeon-Dentist's Manual.

12mo. 5s. 6d. bds.

*Mr. Wardrop.*

ANEURISM, AND ITS CURE BY A NEW OPERATION.

By JAMES WARDROP, Surgeon to his Majesty.

Royal 8vo. 10s. 6d.

*Mr. White.*

COMPENDIUM OF THE VETERINARY ART;

Containing Rules for the Treatment of all the Disorders and Accidents to which the Horse is liable; &c.

By J. WHITE, late Vet. Surgeon of the 1st, or Royal Dragoons.

15th Edit. 8s.

*By the same Author,*

Treatise on Veterinary Medicine; Vol. II. containing the *Materia Dietetica*, the *Materia Medica*, and the *Pharmacopœia*. 12mo. 6th Edit. considerably improved, 6s.

Treatise on Veterinary Medicine; Vol. III. containing Practical Observa-

tions on the Structure, Diseases, &c. of the Digestive Organs of the Horse, &c. 8th Edit. 6s.

Compendium of Cattle Medicine, or Practical Observations on the Disorders of Cattle and the other Domestic Animals, except the Horse. 12mo. 5th Edition, 6s.

THE LONDON MEDICAL GAZETTE:

CONSTITUTING A

COMPLETE AND AUTHENTIC RECORD OF MEDICAL LITERATURE.

Published every Saturday Morning: it is also issued (with the Magazines) in MONTHLY PARTS, with a full and arranged Table of Contents.

WILSON AND SON, Printers, 57, Skinner Street, London.







