

Observations on the efficacy of turpentine in the venereal and other deep seated inflammation of the eye : with some remarks on the influence of that medicine on the system ; accompanied by cases / by Hugh Carmichael.

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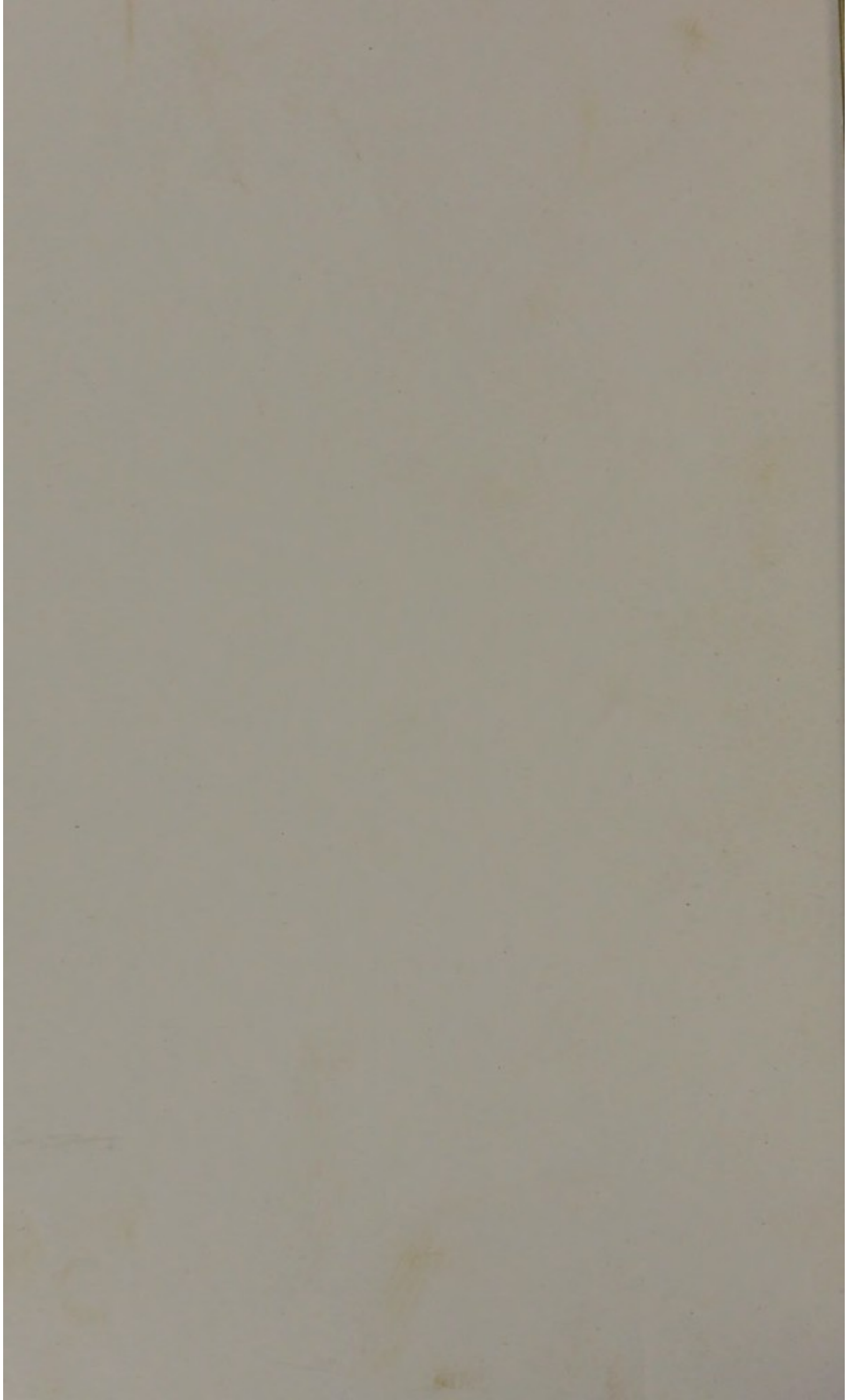
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OBSERVATIONS
ON THE
EFFICACY OF TURPENTINE

IN THE VENEREAL AND OTHER DEEP
SEATED INFLAMMATION

OF
THE EYE;

WITH SOME REMARKS ON THE INFLUENCE OF THAT
MEDICINE ON THE SYSTEM,

ACCOMPANIED BY CASES.

BY HUGH CARMICHAEL, A. B.

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DUBLIN :

HODGES AND SMITH, COLLEGE-GREEN ;
AND T. AND G. UNDERWOOD, LONDON.

1829.

OBSERVATIONS

ON THE

EFFECTS OF TURPENTINE

ON THE VENEREAL AND OTHER DISEASES

OF THE GENITAL SYSTEM

THE EYE

WITH SOME REMARKS ON THE NATURE OF THE

DISEASES OF THE EYE

AS OBSERVED BY CASES

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INTRODUCTION.

My principal object in the following pages, is to lay before the Profession, by a series of Cases, the influence I have ascertained Turpentine to possess in Iritis, when internally administered. The observation was first made by me in the year 1824 ; but, although communicated to some professional friends, I was unwilling to bring it forward in this manner, till an experience sufficiently extensive should enable me to do so with confidence, or without any fear of its proving altogether unfounded upon further trial.

My object, as I have stated, being chiefly the publication of the Cases, the observations by which they are preceded are very few ; they consist in a concise statement of the circumstances which led me to the employment of Turpentine in this disease, the mode in which I

administer it, some reflections equally concise upon the probable virtues of that medicine, and a few concluding remarks.

The suggestions thrown out as to the influence Turpentine may exert on the system, will not, I trust, be looked on as altogether speculative ; they are deduced from the fact which I hope I have proved, that it removes that species of Iritis which is considered Syphilitic in its nature, and, after lymph has been effused on the Iris, restores the membrane to its natural and healthy state. Some of these suggestions are, no doubt, unsupported by examples, at least sufficiently numerous to warrant their being assumed as facts ; they are, however, only stated as matters worthy of investigation :—as far as my opportunities have afforded I have been following up this investigation ; and I consider the results have been hitherto such as to encourage me in their further prosecution.

87, Stephen's-Green, South.

OBSERVATIONS
ON THE
EFFICACY OF TURPENTINE
IN THE

VENEREAL INFLAMMATION OF THE EYE,

&c. &c. &c.

SECTION I.

Acknowledged influence of Turpentine in Peritoneal inflammation—in this disease and Iritis similar textures engaged—the description of inflammation and morbid results also similar in each—application of Turpentine, therefore, as a remedy to both—objection to this arising from the supposed specific nature of Iritis, particularly after Syphilis—its specific character, however, questioned—appearances peculiar to that form of Iritis.

THE attention of the profession has been in so many instances directed to the administration of Turpentine in Peritoneal inflammation, that

the claims of that medicine to our notice, as a valuable remedy in this complaint, may at present be considered fully established. The number of cases recorded in the different periodical journals which have yielded to its exhibition, render it unnecessary here to make any further remark on the subject.

If we observe the nature of the parts which are the seat of Peritonitis, the description of inflammation that engages them, and the subsequent morbid appearances, and compare all these circumstances with those to be met with in Iritis, strong grounds will, I think, appear for presuming that in many points a striking similarity may be traced between them; in both a serous membrane is engaged, and in both the adhesive inflammation is to be seen producing adhesions between surfaces intended by nature to be free. It is true that the two diseases occur in parts of the body very different from each other in many respects; and it is likewise true that this material difference is supposed to exist between them, namely, that while Peritonitis is a simple idiopathic disease, Iritis on the contrary, in its different varieties, but particularly in that which follows Syphilis, is thought to proceed from a peculiar constitutional taint, and consequently to participate in its peculiar nature: but even admitting this difference, their characters never-

theless unquestionably coincide in these essential points, that in each the adhesive inflammation, and its consequences, are the morbid appearances to be observed.

Under this impression I was induced to make trial of Turpentine in Iritis, conceiving that where such similarity of appearances were met with, as those just mentioned, a medicine possessing any control over them in the one situation, might probably be productive of some benefit in the other ; a few cases were therefore submitted to its influence, and the results were such as to confirm the idea I had formed : the first trial was in 1824.

I am aware that, according to the present received opinion on the subject, this mode of reasoning may be considered liable to much objection ; disease, no doubt, assuming quite a different character when a specific action is super-added to it, from what it does in the simple form, though the appearances may be the same ; and that it should not consequently be inferred that a medicine may be equally efficacious in both, regardless of the specific action of one of them.

For example, although Turpentine may have been found serviceable in the adhesive inflammation, as met with in Peritonitis, it ought not,

it may be said, from that circumstance alone to be inferred, that it will be equally successful in Syphilitic Iritis, unless it be also presumed to exercise some influence over the Venereal virus, and which, it must be confessed, there was not any reason at the time to expect. In the Idiopathic, the Rheumatic, or the Iritis following fever, the analogy might be admitted; but in the Syphilitic, it may be argued, it cannot apply, and for the reasons just mentioned.

With reference to this objection, the inference may not have been perhaps satisfactory in such cases, according to the strict rules of pathology, although its application has proved it to be correct; nevertheless we are not without opinions which would bring what is looked on as this species of Iritis also within the scope of a fair analogy. The supposed presence of a Venereal taint is what the objection consists in, and much doubt has been expressed on that very point by an authority of eminence on this subject.

“Under these circumstances,” says Mr. Travers in his treatise on the disease under consideration, and published in the volume of essays by that gentleman and Sir Astley Cooper, “under these circumstances it is not surprising
“that some Surgeons of reputation should be

“ disposed to deny that the inflammation of the
 “ Iris is a Venereal inflammation, and should
 “ consider it as belonging to that class of symp-
 “ toms which resemble, or are engrafted on the
 “ Syphilitic, and that others should regard it as
 “ an inflammation produced by the poison of
 “ mercury.

“ It appears to me at present impossible to
 “ pronounce whether the Iritis, so frequently
 “ present after sores on the genitals, and accom-
 “ panied by eruptions, is the effect of a morbid
 “ poison, or of a mercurial poison ; or thirdly,
 “ the casual effect of an exposure to an exciting
 “ cause, in a state of predisposition from the
 “ mercurial impregnation of the system.”

In making this remark I do not wish it to be
 understood as expressing on my part any opi-
 nion on the nature of the inflammation of the
 Iris here alluded to. There are many emi-
 nent opinions on both sides of the question, and
 that which I believe at present prevails is in fa-
 vour of its Syphilitic nature ; but the declaration
 of such a doubt, and from such an authority,
 should, I consider, render the inference that
 led me to the employment of Turpentine for its
 cure, less liable to objections on the grounds just
 mentioned ; at least it would fairly warrant an

experiment in all other respects promising so well.

Whether, however, the Iritis that follows Syphilis partake of the nature of that complaint, or otherwise, it is marked by appearances which characterise it in particular; and the observations I have here to offer on the influence of Turpentine over this disease, being intended to apply principally to such cases, although also efficacious in its other forms, it may not be irrelevant shortly to notice them, before the manner of exhibiting it is mentioned. Indeed, as far as my experience has gone, I consider the medicine much more decided in the Syphilitic, particularly when characterised by certain inflammatory appearances hereafter to be noticed; a species of it for the cure of which mercury alone has hitherto been relied on.

These appearances consist chiefly in the description of inflammation to be observed in the sclerotic coat, the state of the conjunctiva, and the changes that take place on the face of the Iris or borders of the pupil in the more advanced stages. In describing the complaint a great variety of symptoms no doubt can be mentioned, almost all the tunics of the organ being engaged, the rest however may be looked on as

common to it and Iritis, as it proceeds from other causes.

In Syphylitic Iritis, the inflammation of the sclerotic is described as of a dusky brick colour, the injected vessels being more numerous as they approach the cornea, and terminating at a short distance from it, so as to form a zone round that membrane, but without encroaching on it, becoming less so towards the back part of the eye, so that the sclerotic here presents little inflammation. The conjunctiva is but sparingly engaged, a few scattered vessels shewing themselves here and there, easily distinguished from those of the sclerotic by their loose appearance, and the facility with which they may be made to move over the latter membrane, while those that belong to it remain fixed, or sometimes the conjunctiva is entirely free from inflammation. On the anterior surface of the Iris or borders of the pupil, at more advanced periods, one or more circular globules of lymph, and of a brownish colour, are to be seen, apparently firm in their nature, or they may occur in both these situations. The previous state of the patient's health, and the presence or absence of symptoms admitted to be Venereal, may also be taken into account in determining its nature ; but with regard to the appearances of the eye itself, the foregoing are those which are said to

be peculiar to it after that disease, and which are considered as characterizing that particular species of Iritis, at least such are what we find described in books on the subject.

The discoloration of the Iris, turbid state of the aqueous humour and pupil, with disfiguration of the latter, loss of vision, pain, lachrymation, and sometimes effusion of lymph between the posterior surface of the Iris and lens, being in common with it and the other forms of the disease, varying in some of them as to the intensity with which they exist.

The sclerotic may, however, sometimes be seen acutely inflamed, and throughout its entire visible extent ; and where, from the accompanying symptoms, together with the history of the case, there can be no doubt of its nature. This appears to occur in strong, unbroken constitutions. The low description of inflammation is, however, considered more generally to be observed.

SECTION II.

Mode of administering Turpentine—formula adopted—accompanying treatment and extent to which it may be used in Iritis—most successful in cases attended with low inflammation of the sclerotic coat—some instances in which Turpentine did not appear to remove the disease—symptoms by which these cases were marked—its failure in them however probably attributable to other circumstances than inefficacy in the medicine.

I USE the Turpentine in this complaint in drachm doses, given three times a day. Its disagreeable flavour and nauseating effects I have found best obviated by almond emulsion. This circumstance it is very necessary to attend to, the medicine being so unpleasant, that, if its taste be not in some way disguised, it is difficult to depend on patients taking it with the necessary regularity. In the formation of the emulsion if double the quantity of confection directed in the London Pharmacopoeia be employed, that is, two ounces to the half pint of water, it answers the above objects much better: the residuum may be removed by straining.

With an emulsion so made, the following is the formula I now generally adopt :

℞ Olei Terebenth. Rectificat. ℥ i.
 Vitelli unius ovi
 tere simul et adde gradatim.
 Emulsionis Amygdalarum ℥ iiij.
 Syrupi Corticis Aurantii ℥ ij.
 Spiritus Lavandulæ Compositæ ℥ iiij.
 Olei Cinnamomi guttas tres vel quatuor.
 Misce, sumat cochlearia larga duo ter de die.

In a few cases it has been necessary to increase the quantity of Turpentine to an ounce and a half, or two ounces, in the above mixture, the other ingredients being proportionally diminished, so that a drachm and a half, or two drachms of it may be taken each time ; but in general, when administered to the extent directed in this formula, it has very seldom indeed failed, though extensively tried, and in very urgent cases : the instances of its failure shall be presently noticed.

The strangury, so frequently induced by the internal use of Turpentine, is obviated by the usual means—flaxseed tea and camphor julep : when very urgent, the medicine may be suspended for a time. The tendency to acidity in the stomach, which it sometimes causes, is relieved by the addition of carbonate of soda to the mixture ; ten or fifteen grains to the eight oun-

ces will be sufficient ; some patients have said, the taste was further disguised by this addition.

When the local inflammation is high, and acute pain is present in the eye and side of the head, the abstraction of blood from the temple, by cupping, or the more immediate seat of the disease, by leeching, may be resorted to : the same practice is adopted where mercury is used. Nevertheless I have frequently, when these symptoms were very urgent, relied solely on the Turpentine mixture, and with the most decided and expeditious relief ; indeed in some instances, where the pain and hemicranium existed as acutely as they are perhaps at any time to be met with, patients have declared they were considerably relieved after they had taken it once or twice, and that its subsequent exacerbations were lessened in a very remarkable degree. It is in the former cases I have generally found it necessary to follow up the bleeding by increasing the quantity of the Turpentine.

It is highly necessary to observe, that the condition of the bowels will require attention ; the beneficial effects of the medicine appear to be in certain cases suspended when constipation is present, and are called forth, as it were, when this is removed.

Perfect rest, if not absolutely material, will at least be found most conducive to the complete production of its salutary effects. In a few cases where patients, from their particular situations in life, were obliged to continue in active employment, the same satisfactory results did not follow its exhibition, nor was its influence fully established until this was attended to.

When all the other symptoms of the disease have subsided, except a slight remaining indistinctness of vision, I do not consider it necessary to continue the medicine farther; some time is generally necessary for the complete removal of this; but the powers of the system may be relied on for its accomplishment. Wherever I had an opportunity of examining patients who had been dismissed with this indistinctness of vision, I have always found them to have been quite relieved from it a short time after they were so discharged.—Cases 1, 3, and 9, are examples of this.

In some of the following cases, particularly the first of them, it will be seen that sedatives were employed along with Turpentine, such as Opium, Henbane, and Cicuta; but it is almost needless to add, that they could not have any share in the cures which took place in these cases. The same description of medicine, name-

ly, Opium, is also used, and pretty extensively, when Mercury (Calomel) is the treatment adopted ; but the removal of the disease under it is entirely attributed to the latter, the former being conjoined with it for the purpose of detaining it in the alimentary canal, and thereby promoting its absorption into the system ; or it may also have the effect of allaying severe pain, and with which view they were exhibited in the cases they were here employed in : in this way they may, sometimes, be serviceable.

By these means the administration of Turpentine has very seldom indeed failed in effecting a perfect cure, the amendment being generally quite perceptible the day after it had been commenced with, as may be readily conceived, from the well known quickness with which it pervades the system : I must, however, observe that, in a very few instances it was not attended with such marked success ; and, although in my own opinion, its failure in them may be attributed to other causes than its inefficacy, I consider it right, however, to notice them here.

In the Syphilitic, as already remarked, its effects appear to be most decided ; I mean when accompanied by those symptoms already mentioned, and which are considered as characterizing that species of Iritis, relying very much on

it in those attended with low and partial inflammation of the sclerotic coat.

On the other hand, in a few cases where this inflammation was very acute, of a florid red colour, deeply and extensively engaging that membrane, the conjunctiva also inflamed, so as to form a net work of vessels, obscuring more or less the former tunic from view, and instead of forming the zone, already mentioned, at a short distance from the cornea, encroaching thereon, I did not succeed in completely removing the complaint by its administration, though it certainly arrested its progress.

Again, in that description which occurs after Fever, it sometimes was not satisfactory in its results. However, in making this statement, I must remark, that in many cases attended by the above appearances, it has effected a perfect and decided cure, (Cases 5, 8, 9, 10,) and in several of those following Fever, when Mercury and all other means were unsuccessful, its removal was ultimately accomplished by the use of Turpentine alone.

But in speaking of those few unsuccessful cases, I have to observe on the difficulty so frequently experienced in Dispensary practice, where I principally made my observations on

this subject, in having our directions attended to with that strictness which may enable us to form correct opinions on the effect of any medicine. I have witnessed this negligence even in Hospital practice, and had some doubts of the result for a time, till close attention discovered the medicine was not regularly taken by the patient, and on enforcing its administration in the mode I directed, the usual beneficial consequences followed; I am therefore led to imagine that, in those cases where Turpentine did not succeed, its failure is to be attributed to neglect on the part of the patient, rather than want of efficacy in the medicine; for, without this explanation how can we account for the very same description of cases being attended in others with decided and complete success. If, however, the fact be, that some cases are not quite amenable to its influence, I am at present unable to make a distinction further than I have stated; perhaps future trials may enable me to be more explicit. Can Idiosyncrasy be the cause, rendering the Turpentine in these particular cases less efficacious than what it generally is?

However this may be, in introducing to the profession a description of treatment which is novel in the disease, I think it necessary not

only to give a full account of the manner I have conducted it, but likewise the true results derived from it, according to my experience ; and I have therefore stated, that in some few cases (and these very few) the administration of Turpentine was not attended with the decided success I generally found it to obtain in others, and have also described the appearances which presented themselves in the unsuccessful cases.

The great error generally committed by persons bringing forward any new mode of treatment, or medicine, is a too sanguine description of its supposed powers, the representation of which is sometimes found not to be supported by experience. The consequence of this is, that, if upon trial it does not uphold the exact character for which it has been attempted to be established, it not only falls into disrepute, but may not even be allowed the credit it fairly possesses, whereas, had correct statements been made of its defects as well as of its merits, future investigation would ascertain how far it could be trusted, and thus remedies, though not general in their application, might, with much advantage and benefit, be retained as adjuvants in the cure of certain diseases.

Although, therefore, I have found the administration of Turpentine in cases of Iritis gene-

rally, to have been attended with very extensive success, and far beyond what would entitle it to rank as an assistant in its cure, still, as in some cases which were submitted to it, the same satisfactory results did not follow, I think it but right to mention it here in the manner I have done.

SECTION III.

Queries as to the virtues of Turpentine—as an antisiphilitic—its effects on the absorbents—in the diseases of serous membranes—stimulating properties of Turpentine no objection to its use in Iritis—Mercury likewise stimulant.

FROM the foregoing observations, the truth of which will, I trust, fully appear by the adjoined proofs, the following queries have suggested themselves, both as to the disease under consideration, and the effect of Turpentine generally on the system.

First.—What is the nature of that inflammation of the Iris which follows Syphilis, and is sometimes accompanied by its constitutional symptoms?

Is it to be regarded as a symptom of that disease in the constitutional form, or in other words, is it Syphilitic in its nature?

If so, must we not infer that Turpentine possesses some antisiphilitic virtues, for otherwise it would scarcely remove an action going on in the eye through the agency of that poison?

Connected with this, I beg to state the following circumstance.—In two cases which lately fell under my observation, where infants of a few days or weeks old were affected with eruptions on the face, shoulders, and chest, in distinct patches, and inclining to desquamation, redness of the parts about the anus and on the feet, and the formation of crusts in the nostrils, so as to interfere with the respiration through these passages, I considered such were Venereal symptoms, in which opinion I was strengthened by an examination into the history of the previous health of the parents, and, from the effect I had found Turpentine to produce on what is looked on as that disease in the eye, was induced to try it in them. The manner of using it was by administering it to the nurse, whereby her milk becoming impregnated with it, it was thus introduced into the system of the infant. The result was a rapid improvement in the symptoms, particularly the eruption on the face and superior part of the body. These cases were not attended by any ulceration : the eruption was of a dry scaly nature.

In noticing this, however, it is not for the purpose of generalizing from it as to the antisiphilitic virtues of Turpentine ; though connected with its effects on the cases adjoined, the fact is not altogether divested of interest in that point

of view to some extent. Are there certain tissues of the body which, when the seat of a morbid poison, may be acted on by a particular medicine that would be inert when this morbid poison is situated elsewhere, as in the case of Turpentine in the disease in the eye, and which might not produce similar effects when other parts are contaminated with it? If so, in this way Turpentine may be capable of removing that description of Iritis under consideration, though Syphilitic in its nature, notwithstanding the other symptoms of the disease might not be benefited by it. Or, can the age of the patient influence its powers in certain other parts, and which would not be so in more advanced life, as in the case of the infants just mentioned, and which might be ineffectual in the same symptoms in adult age, supposing me to have been correct in the opinion I had formed of the nature of the symptoms in these cases? Or can Turpentine exert any influence over the Venereal disease; and if so, to what extent? at present I shall only say, the subject merits investigation.

Again;—Independent of this affection of the eye with reference to a syphilitic character, (and which if established would involve rather the question as to whether Turpentine may not possess some influence over that disease,) the

removal which takes place under its use of the morbid effects produced by Iritis, namely, the effused lymph, must lead to further reflections on the qualities of this medicine.

When Mercury is successfully administered for the cure, after lymph has been deposited on the Iris, to what is the removal of this lymph to be attributed, which so quickly takes place when the Mercury affects the system? Is it the result of the antisiphilitic properties of the mineral alone, or the consequence of increased action in the absorbents, induced by a property it contains independent of its antisiphilitic? The latter is, I believe, the received opinion; and this power of Mercury, that of exciting the absorbents, though capable of being established from its effects elsewhere, is considered to be much more satisfactorily so, from the very circumstance of the lymph disappearing from the Iris when the system is under its influence, the changes produced by it, admitting of being there witnessed from the peculiar structure of the parts.

From a parity of reasoning, therefore, are there not grounds to imagine that Turpentine also possesses this virtue, the same changes being produced on the Iris by it (see several of the annexed Cases). Under such an impres-

sion I have used it on many occasions, in Ophthalmic and other complaints, and my experience of it in these instances leads me to conclude that it does so, and in a very remarkable degree. Indeed the capability of Turpentine acting on the absorbents is by no means new to the profession ; its effects as a diuretic in certain cases being well understood, and which, more or less, implies that capability.

As a remedy against the adhesive inflammation, it has been already spoken of in the commencement of these observations, the supposition of its being opposed to this inflammation, and a means whereby its progress might be arrested, being what led to its employment in the affection of the Eye. I think, however, this supposed quality must receive additional confirmation from the control it appears to exercise, not only over the already effused lymph, but likewise the action upon which that process depends, these being the means whereby the adhesive inflammation is carried into effect.

Further, we know that the effusion of lymph, and setting up of the adhesive inflammation, have very much their seat in serous tissues, and are some of the diseased actions of this class of membranes : are we then to limit the powers of Turpentine over their diseases, to these alone,

or can it be capable of going farther, and producing beneficial effects on some of the other unhealthy actions to which they are liable?

The consideration of this might suggest its application to a number of complaints the human frame is subject to, and most important in their nature; but if it can excite the absorbents, and which it must be supposed more or less to do, from what has been said, such may be reasonably presumed to a certain extent to follow. The change it induces in the action upon which the effusion of lymph depends, implies a certain influence over the extreme vessels where this process goes on, and which probably is not confined to them in that instance alone.

These few suggestions are thrown out here as matters which may merit attention in the way of inquiry on the subject, without by any means intending to assume them as facts at once to be admitted. However correct any theory may appear, its establishment and application justly requires the test of experience more or less extensive; but if Turpentine arrest the progress of a disease considered to be Venereal in its nature, but which must be admitted a specimen of the adhesive inflammation, no matter how modified, remove the morbid results arising therefrom, by acting on the absorbents

of the part at least, and is found to be effectual in any of the unhealthy actions of serous membranes, they cannot be considered altogether irrelevant or unfounded in this place ; that such however it does, I hope may be considered already proved from what has been said.

They are no doubt part of the effects Mercury is capable of producing on the system, and I admit I am comparing them in some of the points which render that medicine so valuable. It may certainly be the fact that they are produced in a more decided manner by Mercury ; but, if what I have suggested be the case, the rapidity with which Turpentine pervades the entire frame, and consequently brings disease under its influence, together with the absence of Fever attending these effects on the constitution, must render these qualities in it a matter of interest and utility, though the same thing might be accomplished by other means, and even in a more decided manner.

It is true that Turpentine, in its nature, is a stimulant to a certain extent, and I have heard it remarked, that the administration of such a medicine for the cure of Iritis, in itself highly inflammatory in many instances, and at a time when the inflammation may be present in a high degree, establishes, more or less, a case

against it as a remedy in this disease—for it will be recollected, that although I have stated it to be chiefly efficacious where the accompanying inflammation is of a low, apparently chronic nature, yet, nevertheless, that it is also capable of curing those where it exists in an active form. But is not Mercury stimulant, and very considerably so when the system is brought under its influence? and when is it that it exhibits its almost unerring powers over the inflammation of the Iris, even when in an acute state? when it engages the constitution and not until then, that is, when its stimulating effects are produced, although, therefore, the internal administration of a stimulant, as a cure for inflammatory disease, may at first view be considered at variance with received opinions, the well known influence of Mercury in itself highly so, over the same description of cases, must remove any objection to the use of Turpentine in Iritis on that score.

In the puerperal form of abdominal inflammation, how can we account for the practice so strongly recommended by writers of mercurializing the system, that is, stimulating the entire frame, if this objection be valid? and in acute Ophthalmia, how much have stimulating applications been advised by authors, in the commencement of the treatment?

SECTION IV.

Conclusion—advantage of possessing other remedies than Mercury for the cure of Iritis—Mercury sometimes inadmissible—Cases illustrating this—Mercury hitherto relied on when it follows Syphilis—Remarks on Mr. Thompson's treatment.

IN conclusion, I have to remark, that however efficacious Mercury may be in Iritis, (and it must be admitted, that in the treatment of disease generally, an instance wherein a remedy is more successfully employed cannot perhaps be adduced,) to be possessed however of other means, whereby its removal may be accomplished, cannot but be considered a very desirable circumstance.

This, although a desideratum as regards all complaints, should in the case now before us be particularly so, whether we view it with reference to the importance of the organ engaged, or the nature of the remedy, heretofore the only one we were acquainted with for that purpose.

It is almost unnecessary to remark, that cases

occasionally occur, wherein, from a variety of circumstances, the administration of Mercury for the time being, must be altogether inadmissible ; yet where this destructive inflammation goes on, progressing in its injurious effects on the textures of the eye, so that before the system can be brought round to admit of its action, they may be more or less permanently impaired, if not altogether destroyed.

We are furnished with an instance of this description in the case cited by Doctor Farr in his letter to Mr. Travers, on the effect of Mercury, and published in the volume of Essays already spoken of, and where that distinguished Physician, in consequence of it, was obliged, after the curative process had begun, “ to withdraw “ the influence of the *only means*,” as he states it, “ of saving the eye,”—namely, Mercury.

The result of course was the destruction of vision, after intense and long suffering ; but so much in point is that case, as to the untoward consequences that may sometimes result from depending solely on Mercury in the treatment of Iritis, that although it is well known to every member of the profession, I must request the reader to revert to it, if it be not fully on his mind ; it is, perhaps, as strong an instance as can be brought forward, of the misfortune of a

disease occurring in a constitution opposed to Mercury, yet amenable to it alone.

In addition to it, I beg leave also to refer to one I received from my friend Mr. Gregory, Surgeon to the Coombe Hospital, and which will be found in the annexed proofs. Indeed it is even more satisfactory, inasmuch as it is not only a further example of that state of the system being sometimes met in company with Iritis, in which the employment of Mercury is hazardous, if not inadmissible, and when consequently the organ must be left to the ravages of the disease, and the patient probably to the sufferings detailed in Doctor Farr's Case, but also the efficacy of Turpentine in it, shews the advantage to be derived in such cases from that medicine.

But independent of this advantage in cases where Mercury cannot be administered, circumstances may arise wherein its exhibition might be inconvenient, though the system were capable of bearing its action, and where it could be removed by other means, it would be desirable to have recourse to them; however, if instances alone could be produced of the description of the two just mentioned, such instances, of themselves, would be sufficient to render an alternative in the cure most desirable.

In the foregoing pages I have assumed that Iritis has heretofore been considered capable of being removed by Mercury only; in saying which, that description of it of course is meant which is supposed to be of a Venereal nature. The inflammation of the Iris, no doubt, makes its appearance from a variety of causes, which modify its character so as to influence the cure; thus we have the Idiopathic, Rheumatic, Arthritic, &c. all of which may perhaps be removed by other means than Mercury.

But, with the exception of that medicine, I am not aware of any remedy being hitherto offered to the profession, and authenticated by a series of well marked and published cases, as a means which may be relied on for its removal when it follows Venereal affections.

Mr. Thompson of Edinburgh has mentioned in the Edinburgh Medical and Surgical Journal, of his success in the treatment of Iritis without using Mercury, and from the subject of the paper in which this mention is made,—“On the treatment of Syphilis without Mercury,”—the Venereal of course is meant: but I do not recollect that any cases have been published, setting forth the symptoms by which those so treated were marked, together with the progress of the cure; and which might be considered necessary,

to enable the profession to form their opinion on this treatment.

The circumstance is noticed by Mr. Richard Carmichael of this city, in his Treatise on the Venereal Disease ; and from him we learn, that extensive blood-letting, blistering, and the antiphlogistic plan of treatment generally, is the means Mr. Thompson adopts in those cases.

Admitting, however, that blood-letting, in this way, together with the other branches of the antiphlogistic treatment, were capable of removing Iritis, and which it is not my intention to deny, from the respectable authority it comes from, still it does not detract from the merits of what is here proposed, or rather the advantage to be derived from it in certain cases.

Its value is principally to be appreciated where Mercury is inadmissable, which may occur from its previous extensive use, or some other cause, producing such debility of the constitution as to render the latter remedy incapable of administration, and in which, for the most obvious reasons, blood-letting, particularly to the extent we have been given to understand it has been employed by Mr. Thompson, must be entirely out of the question.

In such cases I may with confidence, I believe, assert, that nothing has at any time been suggested as a substitute for Mercury, with the exception of what I here propose; and as they are occasionally to be met with, the fact I have stated with regard to Turpentine, must be of importance, were its employment limited to them; I think, however, that it will require but a very little experience of its efficacy to establish its claims to much more general use: I therefore beg leave to offer the results of it, according to my experience, to the notice of the profession in this short treatise, in the hope, that from the ability which many of its members are known to possess, what I have submitted may lead to some useful and beneficial observations on the subject.

CASE.

July 7th, 1821.—Lancelotti Duggan, 21st
 182, took Mercury two years back for a Venereal
 complaint; he this day applied at the Dublin
 Eye Infirmary with lute of the right eye.

Sclerotic coat, deeply inflamed round the cor-
 nea, of a brick colour; the inflammation dis-
 tending as it recedes towards the back part of
 the eye; iris discoloured, presenting a dirty
 greenish appearance, a large globule of brownish

APPENDIX.

THE following twelve Cases, in support of what has been advanced in the preceding observations, are but a few of a vast number I have treated in the same manner, and with the like success.

CASE I.

July 7th, 1824.—Launcelott Duggan, ætat. 30, took Mercury two years back for a Venereal complaint; he this day applied at the Dublin Eye Infirmary with Iritis of the right eye.

Sclerotic coat, deeply inflamed round the cornea, of a brick colour; the inflammation diminishing as it recedes towards the back part of the eye; Iris discoloured, presenting a dirty greenish appearance, a large globule of brownish

lymph adhering to it at the lower border of the pupil ; anterior chamber muddy, pupil quite irregular, great intolerance of light, with much lachrymation ; violent pain in the eye and brow at intervals, and particularly during the night, extending round that side of the head ; sight of the eye nearly gone : the disease had existed six days previous to his seeking advice.

To take one drachm of Turpentine and six drops of Tincture of Opium three times a day.

8th.—Pain much relieved ; continue the medicine.

10th.—Bowels confined ; symptoms rather retrograding. Arteriotomy ad $\frac{3}{4}$ x. Sulph. Magnesiae, $\frac{3}{4}$ i. and continue the Turpentine with a drachm of Castor Oil in each dose.

13th.—Decided amendment ; disease evidently disappearing. Continue the medicine in the manner last ordered, together with a liniment of Turpentine and Belladonna to the temple of the affected side.

19th.—Pupil quite circular and clear ; globule of lymph entirely removed from the lower border of it ; a small vestige of the inflammation still remains in the sclerotic coat round the cor-

nea; sight almost restored. Continue the Turpentine in smaller doses, and omit the liniment.

26th.—The appearance of the eye now natural and healthy; the only remnant of the disease is a slight imperfection of vision.—Discharged.

In this Case the exhibition of the Turpentine quickly induced strangury, which at once yielded to Flaxseed Tea drank freely throughout the day.

Feb. 9th, 1825.—This man was seen to day: the eye has been restored to perfect vision, as distinct as at any time of his life, and he has never experienced any inconvenience in it since last seen.

CASE II.

Dec. 12th, 1824.—Anne Malone, ætat. 22, has been taking Corrosive Sublimate and Blue Pill these last six weeks irregularly, which she was ordered at an Hospital for an eruption pronounced to be Venereal: she this day applied at the Dublin Eye Infirmary with Iritis of the right eye.

Sclerotic coat at its junction with the cornea inflamed; the inflammation there presenting a dusky low appearance; at other parts not much altered from its natural colour; Iris discoloured; three protuberances of lymph of a reddish brown colour on the face of that membrane at its outer circle; copious lachrymation; great pain in the eye occasionally; vision gone.—This woman's husband was a patient at the Eye Infirmary three months back for the same disease, which was removed by Mercury.

To take a drachm of Turpentine and one of simple Syrup, *ter de die*, in mucilage and water.

15th.—Considerable improvement; pupil and anterior chamber clear, the former, however, still irregular; pain gone; vision much restored; sclerotic entirely free from inflammatory appearances; globules of lymph almost removed. To continue the medicine.

23d.—This woman cured with the exception of a slight adhesion of the pupil to the lens, and which it is probable time will remove: she shortly after complained of Rheumatic pains in the large joints, for which Calomel, Opium, and Antimony were administered.

CASE III.

Jan. 15th, 1825.—Judith Kelly, *ætat.* 32, two months back was under cure at the Eye Infirmary for an Iritis of the left eye, together with a Venereal eruption and pains in her bones ; for these Mercury was administered, by which she got well, with the exception of a pain in the left humerus, that still affects her : this woman has returned to the Infirmary to-day, with the same complaint in the left eye.

Sclerotic inflamed in the usual low manner round the cornea ; Iris discoloured ; pupil muddy, as likewise anterior chamber ; sight so far gone as to render her incapable of distinguishing objects ; violent pain in the supercili-um shooting round to the back part of the head.

To take Turpentine in manner administered in the last Case, with a pill containing half a grain of Extract of Belladonna *bis in die*.

17th.—Considerable improvement ; inflammation all gone from the sclerotic, no pain whatever remaining ; vision so far restored as to be able to distinguish objects confusedly ; pupil and anterior chamber becoming clear : the Turpentine is beginning to disagree with her stomach ;

let her suspend the use of it for this day and recommence it to-morrow in half drachm doses.

20th.—Still further improvement ; anterior chamber and pupil clear ; sight restored to useful vision. Continue the medicine.

26th.—She has not taken the medicine regularly since the last report ; she is however well, with the exception of the sight of the eye, which still remains a little impaired.—Discharged.

April 21st.—I have seen this woman to-day ; the sight of the eye is as perfect as ever ; she has not experienced any further inconvenience from it.

CASE IV.

April 2d, 1825.—Mary Rourke, ætat. 35, has been taking Mercury these last six months, first for a Venereal complaint, and afterwards for Iritis of the left eye ; this last was by my direction about six weeks since, and by which the complaint was removed ; she now returns with the same disease in the eye.

Low inflammation of the sclerotic coat round

the cornea; conjunctiva also somewhat engaged; pupil and anterior chamber muddy; Iris discoloured; sight gone; violent pain in the brow occasionally.

To take the Turpentine Mixture, *ter de die*, together with one grain of Cicuta and one of Hyoscyamus, night and morning.

4th.—Turbid state of anterior chamber and pupil removed; sight considerably improved; pain in the brow gone; inflammation of sclerotic still present. Continue Turpentine, but omit the pills.

8th.—Sight nearly perfect; inflammation almost gone; has been free from uneasiness since, and says that the pain in the head was at once relieved after she had taken the three first doses of the Turpentine: to continue it.

13th.—All signs of the disease gone except a very slight imperfection of vision.—Discharged.

CASE V.

May 3d, 1825.—George Stinson, ætat. 26, nine months back took Mercury for sores and a

bubo ; he now seeks advice at the Dublin Eye Infirmary for Iritis of the left eye.

The vessels of the conjunctiva are much engaged, and encroach on the cornea a small distance ; sclerotic also acutely inflamed, of a bright purplish colour ; Iris, naturally blue, is here a dirty green ; a large protuberance of lymph adhering to it at the outer side of the pupilar margin, and another on the face of the membrane beneath the pupil, of a brownish red colour ; anterior chamber and pupil turbid ; the latter quite irregular, its entire circle set with red vessels, which give it a thickened appearance ; violent pain in the eye and brow occasionally, shooting round to the back of the head, and at night particularly, so as to prevent sleep ; he is capable only of discerning the difference between light and darkness with this eye ; much intolerance of light with lachrymation. It may also be remarked, that he is of scrofulous habit, the glands of his neck being much enlarged, and in some places in a state of ulceration.

To take the Turpentine mixture three times a day.

4th.—Pain very severe last night, but still he thinks the eye better ; is sure the sight is. Continue the medicine, and take one grain of Ext.

Cicuta, and one of Ext. of Hyoscyam, at bed time.

5th.—Improvement; the tubercles of lymph are somewhat diminished; pain but trifling since last seen; it abated considerably a short time after he was here yesterday:—this ease cannot, therefore, be attributed to the anodyne pill, which was not taken till bed time; it must have arisen from the influence of the Turpentine:—sight much improved. Continue the Turpentine.

9th.—An accession of inflammation to day; —he does not take his medicine regularly, or it would be necessary to renew it before this; appearances however better in other respects; eight ounces of blood taken from the temple by cupping. Continue the Turpentine, with an injunction as to the necessity of taking it regularly.

11th.—Inflammation considerably gone down; sight better; can distinguish objects more accurately; pupil circular; Iris however still discoloured and oppressed with the lymph, which shews a disposition to be removed but slowly. Increase the quantity of Turpentine to two ounces in the eight ounce mixture.

12th.—Much improvement to day ; pain gone ; sight considerably better since yesterday ; inflammation both of conjunctiva and sclerotic coat nearly disappeared ; vascularity of the pupilar margin also nearly removed ; intolerance of light, and lachrymation entirely so ; tubercles of lymph diminishing. Continue medicine.

14th.—Much strangury ; omit the medicine ; no further visible improvement.

17th.—Recommence the Turpentine, two drachms, *ter de die*.

23d.—All external appearances of the disease gone except a very trifling adhesion of the pupil, which shews itself when acted on by the Belladonna ; sight not quite so perfect as in the other eye, but the difference is but trifling.—Discharged, with directions to take a drachm of Bark thrice a day, and use a collyrium of Sulph. Zinc.—he was also desired to return in case the sight was not perfectly restored in a few weeks, but I have not seen him since.

NOTE.—In this Case the Turpentine did not appear to act with the decided effect it did in others, particularly its influence on the tubercles of lymph on the Iris, and the change in

that membrane to its original healthy and natural colour. I must however remark, that the patient was an exceedingly irregular man, who resided in a spirit shop, and on several occasions his intemperance was quite manifest; it was also evident that he was very inattentive to the instructions given as to taking his medicine.

CASE VI.

June 17th, 1825.—Patrick Kean, ætat. 23, applied this day at the Eye Infirmary for advice for Iritis of the left eye: it was impossible to obtain any information from him as to previous infection or use of Mercury, all of which he denied; however, on examination, the remains of sores were to be seen, accompanied with hardness of the part where they existed; his mouth also shewed slight mercurial action, and at no distant period.

Low inflammation of the sclerotic round the cornea without encroaching on it; Iris discoloured, of a dirty greenish appearance; in the healthy eye, blue; anterior chamber and pupil muddy; the latter irregular, adhering to the lens at its lower border; great pain in the eye

at intervals, which is extremely tender to the touch ; sight gone ; copious lachrymation and intolerance of light ; a few red vessels are likewise to be seen in the substance of the Iris.

Two table-spoonsful of the Turpentine mixture to be taken three times a day, and, bowels being confined, to use Aloe pills occasionally.

20th.—Much improvement ; sclerotic inflammation considerably diminished ; all pain and lachrymation gone ; sight much improved, though still bad. Continue the Turpentine.

23d.—No uneasiness whatever in the eye to the touch or otherwise ; pupil circular, and adhesion to the lower border of the lens removed ; can distinguish objects accurately though they appear as through a mist ; a very slight blush of inflammation remains round the cornea. Go on with medicine.

27th.—All external appearance of disease gone. Continue the medicine in smaller doses.

July 2d.—Discharged cured.

CASE VII.

Jan. 24th. 1826.—Mary Brophy, ætat. 38, twelve months back took Mercury for a Venereal complaint : in seven months after, her left eye became ill, attended with pain in the globe and brow, so severe as to prevent her sometimes from sleeping ; from that period it has been getting better and ill again without any thing decided being done for it.

At present the appearances are, low inflammation in the sclerotic coat in the neighbourhood of the cornea ; the vessels of the conjunctiva also slightly engaged ; Iris of a dirty brownish colour ; pupil irregular and lens behind it opaque, presenting the appearance of half boiled white of egg ; the pain in the eye and brow is sometimes violent, shooting back to the occiput ; painful lachrymation with great intolerance of light ; sight entirely gone, as may be imagined, from the state of the pupil above described ; the papular eruption is also present on her neck and shoulders.

To take one table-spoonful of the Turpentine mixture thrice a day.

27th.—Inflammation of the sclerotic disap-

pearing fast; pain in the eye and brow gone; anterior chamber, so turbid in the commencement as to render it difficult to distinguish the parts behind with accuracy, now quite clear, and allows the pupil, together with the lymph effused on the lens, to be distinctly seen; the latter evidently breaking up. Continue the medicine.

29th.—Much further improvement in all the diseased appearances. Continue medicine.

Feb. 1st.—Inflammation of the sclerotic gone; Iris restored to its healthy colour; pupil circular; the only vestage of the disease remaining is a small portion of the lymph on the surface of the lens, but so much reduced, that the sight is now restored to a most useful degree of vision, the pupil being perfectly clear throughout its greatest extent. Continue the medicine.

After this, the patient never returned to the Dispensary; but sufficient is here related to shew the efficacy of the medicine in her Case; indeed she had been perfectly cured at the time of the last report, with the exception of a small portion of lymph remaining behind the pupil, and which, from the quick manner the removal of that surface was taking place, there was little

doubt would speedily disappear: the eruption was not benefitted by the medicine; and I may here remark, that it does not appear to exercise any influence over that description of it which accompanied the Iritis in this patient.

CASE VIII.

July 9th.—Patrick Donnelly, ætat. 40, seven months back had sores on the scrotum that were cured by a wash; in a month afterwards he was attacked with severe pains in his joints and centre of the ulna and tibia, for which he was admitted into one of the Hospitals, and submitted to a course of Mercury, whereby they were removed: within the last month they have returned with great severity, increasing very much at night: his left eye has now become affected with Iritis.

The conjunctiva is here considerably engaged, so as to form a complete network, encroaching on the cornea a little, and obscuring the sclerotic coat very much from view: this latter membrane is also acutely inflamed; of a bright purplish appearance; colour of the Iris, dirty brown; pupil and anterior chamber, turbid; a large globule of lymph attached to the edge

of the former towards its upper part; great pain in the eye and side of the head; lachrymation; sight much impaired. From what has been said in the preceding observations, it will be seen that this Case was in symptoms similar to some of those in which Turpentine did not succeed.

Let him take one table-spoonful of the mixture three times a day.

16th.—Inflammation of the conjunctiva considerably diminished, so as to admit of the sclerotic being seen, which presents a purplish hue throughout its entire extent; all pain and lachrymation gone; the globule of lymph diminishing, its point assuming a cream coloured appearance. Continue medicine and take two table-spoonsful of it.

19th.—Globule of lymph nearly gone; inflammation both of conjunctiva and sclerotic coat almost removed; Iris returning fast to its natural appearance; pupil drawn a little to one side by a small band of lymph which connects it to the lens; in every other respect the eye becoming healthy. Continue the mixture.

24th.—All appearances of the disease gone

except the small band of lymph above spoken of ; vision is not impaired by it.—Discharged.

CASE IX.

Dec. 19th, 1827.—Mary Hinds, ætat. 23, affected with Iritis of the right eye ; violent pain in the globe and brow, which shoots back to the occiput : in this Case the pain was more severe than is usually to be met with, the patient being incapable of holding up her head for a moment ; pupil drawn into an elliptical form ; Iris dirty greenish appearance ; sight very much impaired ; sclerotic acutely inflamed throughout its entire extent, florid in colour ; great intolerance of light, and attended with copious lachrymation : the pain in this Case was so great, that the patient could not stir the sound eye, the simultaneous motion it produced in the diseased one causing such acute suffering.

To take two table-spoonsful of the Turpentine mixture thrice a day, and rub an ointment to the supercilium at bed time, containing fifteen grains of powdered Opium to two drachms of Lard.

20th.—She is quite relieved from the violent pain, and slept comfortably last night, the first

she had for the five preceding ; pupil clearer ; sight improved ; can permit the eye to be touched without suffering any great uneasiness, and can use it and the other without inconvenience. Continue the medicine.

23d.—Inflammation of the sclerotic gone ; Iris resuming its natural hazel colour ; pupil losing its elliptical form and becoming more circular. Continue medicine.

28th.—Pupil circular and clear ; eye in every respect well, except a slight vestige of discolouration of the Iris, and that vision is not perfectly distinct. Continue the medicine.

30th.—All external appearances of the eye now quite natural ; the sight still remains indistinct.—Discharged.

This woman was seen a few months after the last note ; her sight was perfect in that eye, and she had no inconvenience in any respect from it.

CASE X.

Oct. 5th, 1828.—Francis Keely, ætat. 23, affected with Iritis of the right eye ; sclerotic

acutely inflamed, of a purplish tinge, which is deeper as it approaches the cornea; conjunctiva also engaged, but in a moderate degree; Iris dirty brownish colour; sight very considerably impaired; anterior chamber and pupil muddy, the latter much disfigured; great pain in the eye and head at night; intolerance of light, and lachrymation.

No trace of Syphilitic disease or previous use of Mercury could be here discovered; he, however, had an attack of Fever twelve months back. To take the following prescription:

R Sub Muriatis Hydrargyri
Tart. Antimon. ā ā gr. ij.
Misce ft. in pil. tres sumt. unam ter de die.

The accompanying inflammation in this Case being very acute, the above medicines were ordered for the purpose of lessening it, and at the same time administering Mercury.

10th.—Up to this day he has pursued the use of the Calomel and Tartar Emetic; it has caused much nausea and catharsis but without any benefit whatever to the eye; pain, inflammation, and other symptoms as before. Let him now be put on the use of the Turpentine mixture.

11th.—He declares himself much better to day in sight and greatly relieved from pain ; aqueous humour more clear. Go on with the Turpentine.

29th.—After the 11th this man was not seen till this day, when he called on me to consult me about another matter ; he is perfectly well as to his eye, and says he has been so since the 14th, four days after he first took the Turpentine ;—he got but one ounce of it.

NOTE.—It may be objected to this Case, that two grains of Calomel and Tartar Emetic had been taken every day for five days before any Turpentine was given : this might be looked on as rendering the Case less satisfactory than the others ; but it will be recollected, that when he commenced the mixture, there had been no improvement whatever ; the disease, no doubt, had not advanced, probably owing to the lowering effects of the Tartar Emetic ; and the next day after the Turpentine was first taken the improvement commenced, and was complete in a very few days after. Speaking of it himself he says, the first and only thing that served him, was the bottle.

CASE XI.

Oct. 23d, 1828.—John Reilly, ætat. 18, three months back contracted a Venereal complaint, which he describes as Gonorrhæa; his right eye is now the subject of Iritis.

Sclerotic very acutely inflamed; Iris discoloured; anterior chamber so turbid that it is impossible to ascertain distinctly the borders of the pupil, which, however, appears to be drawn from its place, in the centre of the Iris, towards the superior and outer part of that membrane; a large globule of brownish coloured lymph is attached to its upper border, and behind it a layer of whitish lymph gives a coating to the lens; this can with difficulty be seen, in consequence of the muddy state of the aqueous humour; no sight; the eye is extremely tender to the touch; copious lachrymation; pain so severe at night as to render him incapable of sleeping; bowels much confined; let him take some aperient medicine.

24th.—Medicine operated without, however, any change in his complaint. To take two table-spoonsful of the Turpentine mixture thrice a day.

25th.—Anterior chamber sufficiently clear to permit the borders of the pupil to be distinctly seen, which are quite irregular ; the coating of lymph on the surface of the lens is also evident ; pain much abated ; the ball of the eye can be pressed without causing much uneasiness ; general appearance of improvement. To continue the medicine.

29th.—He has been absent from the 25th till this day, though his medicine was out the day after ; appearances are better, the globule of lymph diminishing. Medicine is renewed.

30th.—Anterior chamber perfectly clear ; can discern all objects, but rather indistinctly ; all pain and tenderness of the eye gone ; the lymph behind the pupil considerably diminished. Continue the medicine.

Nov. 2d.—Inflammation of the sclerotic almost gone ; lymph on the lens entirely removed ; that on the face of the Iris disappearing fast ; sight considerably restored ; Iris regaining its natural blue appearance. Continue medicine.

7th.—Iris perfectly restored to its colour ; pupil black and circular, and in the centre of the Iris ; a small dark spot where the globule of lymph was, ; slight blush of inflammation re-

maining in the sclerotic coat ; sight nearly perfect ; he does not take his medicine regularly. To continue it, with a strict injunction as to the necessity of attending to the directions given him.

After this the patient did not return ; he was however seen a short time since : his eye got perfectly well before he had finished the last bottle given him, and has remained so ; no difference whatever existing between it and the left or sound one, either in appearance or otherwise.

CASE XII.

Samuel Maddock, ætat. 21, was admitted into the Coombe Hospital with the following symptoms.

Papular eruption extensively over the body ; sclerotic coat of both eyes tinged with a blush of pink coloured inflammation : he was put on the use of the Turpentine mixture, on the supposition that the affection of the eyes was Venereal, and in two days the improvement was such that it was discontinued ; after this the right eye inflamed, and with a view to give a trial to Turpentine in a more decided manner, the

inflammation was permitted to go on till Iritis fully manifested itself in it. I was requested by the Surgeon of that establishment to take charge of this Case.

Feb. 2d, 1829.—Acute inflammation of the sclerotic ; conjunctiva also engaged, its vessels verging on the cornea ; Iris discoloured ; pupil contracted, irregular and muddy ; sight very much impaired ; pain in the brow at night. Take the Mist. Terebenth. *ter de die*.

5th.—The appearances are worse ; his bowels have been confined. Let him have an aperient bolus, and continue the mixture.

6th.—Disease gaining ground ; Iris very much discoloured ; pupil quite disfigured ; no sight in the eye ; by some means I neglected to give the proper directions yesterday respecting the aperient medicine, being unacquainted with the regulations of the Hospital ; to have it immediately. Continue Terebenth.

7th.—No improvement ; the bolus given yesterday did not produce any effect. Let him have an Enema Terebenth. Statim.

8th.—Bowels well effected ; decided amendment. Continue the Turpentine emulsion, and attend closely to the state of his bowels.

After this the patient grew progressively better, and was considered perfectly well on the 14th.

In addition to these Cases, I beg leave also to relate the following, which have been successfully treated with Turpentine by Medical Gentlemen whose respectability in the Profession is here well known, and who have kindly furnished me with them.

The first is the Case supplied me by Mr. Gregory, already spoken of.

CASE XIII.

IN the month of November, 1827, a young gentleman, about 17 years of age, of an exceedingly delicate appearance and constitution, contracted a Venereal complaint, which first shewed itself, as he informed me, in the shape of a sore at the frænum, extremely painful, and quickly followed by Phymosis and enlargement of one the glands of the right groin.

For these appearances nothing decided was

done, so that the disease was permitted to gain ground ; and at the end of about six weeks or two months from their commencement, when I first saw him, I found him labouring under constitutional symptoms, the primary ones still present, very much aggravated, and his health and strength greatly reduced.

He was put on the use of Sarsaparilla and Mercury ; but, in consequence of his weakened state, and other circumstances, the latter medicine it was deemed judicious to exhibit with much caution.

This plan was pursued for some time, until his mouth became sore, when such debilitating effects ensued, that the further use of Mercury was obliged to be discontinued.

By the use of Sarsaparilla in large quantities, and Nitrous Acid, together with Hyoscyamus and Cicutia, to relieve pain and distressing restlessness, he was in some degree brought round, so as to resume his occupations to a certain extent ; but in the course of a few weeks he again relapsed ; fresh eruptions, particularly of the papular kind, appeared about his forehead, neck, and shoulders ; he suffered to such an extent from nocturnal pains in the bones, depriving him altogether of rest, and his general appear-

ance had so much the character of constitutional Venereal disease, that it was deemed prudent to try Mercury again with him, though with caution, in consequence of its effects on a former occasion, as well as his present state of health, for he had not at any time recovered his natural strength.

He was now directed to rub in one scruple of strong Mercurial Ointment every night, to take five grains of Blue Pill, and continue his Sarsaparilla. At the end of ten days his mouth became sore, and again the debilitating effects of the Mercury were produced to such a degree, that it was at once obliged to be laid aside; Quinine and Sulphuric Acid were then administered, and the attention given entirely to supporting and rallying the system, which was slightly improving, when the glands of the left groin and integuments about them began to inflame, accompanied with a most distressing burning sensation and spasms of the entire limb.

At length suppuration established itself in the part, and burst at the pubis, with a discharge of unhealthy bloody matter. This discharge continued for some time, which, together with an affection of his bowels and sleepless nights, from general pain, reduced him to a state of exhaus-

tion and debility of a most alarming nature. The limb on the affected side was quite contracted, and rendered useless.

In this way he continued for a fortnight, the emaciation and debility extreme, when the symptoms of Iritis shewed themselves in the right eye. I did not see him until a few days after its commencement, when I found it fully established. The appearances of the eye were as follow ; there was very little vascularity of the conjunctiva, indeed scarcely any, but that peculiar brick-coloured dusky zone surrounded the cornea, which is produced by the low kind of inflammation that occurs in the sclerotic coat. The Iris was discoloured ; lymph effused on it near the pupil, which, together with the anterior chamber, had lost its natural clearness. He did not complain of much pain except at night ; vision imperfect : on applying the *Bel-ladonna* the pupil only partially dilated, so that under its influence that circle was thrown into an irregular form, in consequence of attachments between the posterior part of the Iris and lens in certain places.

From the extreme state of debility he was now reduced to, Mercury I considered to be utterly inadmissible, and in this opinion I was strengthened by the effects I had witnessed it

to have produced at a time when he was much better able to bear its action. I communicated my apprehensions to Doctor Strat-
tan, who was present this visit, and who had been in the habit of seeing the patient occasionally from the commencement of his illness, and in its stead recommended the administration of Turpentine in the manner prescribed by Mr. Hugh Carmichael, which was agreed on. He was accordingly put on its use, in drachm doses, given three times a day, combined with Almond emulsion and Syrup : I did not see him till the second day after he had commenced it, when the most decided improvement had taken place, and before he had finished two ounces, given in the above manner, his eye was perfectly cured, with the exception of a slight indistinctness of vision which remained.

After this he went into the country to recruit his health, where he continued five months, and returned quite well ; but when he was about three weeks at home the left eye was attacked by the disease, which was quickly removed by the use of the Turpentine mixture again. Since that, now a period of seven months, he has been in excellent health, his sight perfectly recovered.

I regret I did not note the circumstances of

this Case, so as to enable me to detail them with more precision as to dates ; the foregoing, however, is its true general history.

RICHARD GREGORY.

Doctor Strattan has furnished me with this Case also, from its commencement ; but as that part of it which relates to the affection of the eye is alone necessary to my purpose here, I shall state his observations thereon only. After mentioning the deleterious effects Mercury had on the patient when exhibited for the Venereal symptoms preceding the Iritis, he continues—

Two months afterwards (May 11th, 1828,) I visited this gentleman, and found him labouring under deep seated inflammation of the eye : on a close examination I took the following notes : Pupil contracted, irregular, and puckered ; three tubercular points on its surface ; a black fringe round its border, with blood-vessels ramifying over it ; sclerotic red ; the ulcer on the penis increased in size ; papular eruption very general ; pulse 120 ; hectic perspirations at night ; extreme debility : I concluded that the affection of the eye was Venereal, and that no time should be lost in the exhibition of Mercury.

The extreme emaciation, the extensive and progressive ulceration of the penis, the eruption over the skin, and the circumstance of Mercury disagreeing with him a short time before, induced me to request an interview with Mr. Gregory, who was in attendance. I mentioned to Mr. G. my opinion of the disease, and recommended the cautious use of Mercury. Mr. Gregory mentioned that the Ol. Terebenth. had been successfully used by Mr. Hugh Carmichael in similar affections of the eye, and that the case before us was one in which the Turpentine was indicated.

From the facts stated, I was glad to hear of a substitute for Mercury, at the same time remarking that I was sceptical as to its utility.—Turpentine was administered, and under its use the eye was speedily restored to its natural state.

Jan. 3d, 1829.—The subject of this Case called on me ; the eye affected, perfectly natural in its appearance ; vision perfect ; his general health excellent.

SAMUEL STRATTAN.

Feb. 5th, 1829.

Doctor Strattan has also furnished me with the following Case.

CASE XIV.

Mrs. C. consulted me on the 15th of December, 1828, for the following affection of her eye :

Intolerance of light ; copious secretion of tears ; conjunctiva very red ; vessels passing into the sclerotic coat ; pupil contracted, irregular, and dotted with bloody points ; complains of severe pain in the ball of the eye, extending to the forehead ; vision much impaired : the disease of three days duration ; was attacked suddenly after exposure to cold a few days before.

This person was under my care three years ago labouring under Syphilis, which she contracted from her husband ; at that time, Mercury was prescribed, which disagreed with her so much as to threaten her destruction : I considered the ophthalmia Venereal.

The season of the year, her occupation, which

obliged her to be in the open air, the effect of Mercury upon her when last indisposed induced me to use Turpentine internally; she took three drachms each day for six days, at which time her eye was perfectly restored. I have seen this woman a few days ago in excellent health.

SAMUEL STRATTAN.

Feb. 6th, 1829,
19, WILLIAM-STREET.

I am indebted to Mr. White, many years my colleague at the Dublin Eye Infirmary, for the following Case.

CASE XV.

Margaret Mullalley, labouring under acute Iritis, presented herself at the Dublin Eye Infirmary on the 10th of December, 1827, and was put on drachm doses of Turpentine three times a day, combined with Almond emulsion.

13th.—A sensible improvement has taken place; the vascular appearance and zone of vessels of the sclerotic coat much diminished, and the Iris assuming more of a healthy colour;

pupil more regular, together with the urgent symptoms of pain, intolerance of light, &c. much improved. To continue the medicine.

18th.—A further improvement in all her symptoms. To continue as heretofore the Turpentine.

On the 22d it was discontinued, the symptoms having completely yielded, and vision being perfectly restored.

The foregoing Case I have selected from a number of others, in which I witnessed the successful administration of Turpentine in Iritis at the Dublin Eye Infirmary. When Mr. Hugh Carmichael, my colleague at that establishment, first communicated to me this plan of treatment, I confess I was inclined to entertain very considerable doubts of its efficacy, until actual experience has compelled me to become a convert to his opinion. I have seen Iritis so frequently removed by Turpentine, that I feel myself fully warranted in saying, in my opinion, it possesses powers over the disease which entitle it to the fullest consideration ; in constitutions that are unfriendly to the action of Mercury, or under circumstances where it may be desirable to avoid the exhibition of that medicine, it cer-

tainly appears to me to offer an excellent and highly valuable substitute.

FRANCIS WHITE.

March, 20, 1829,
40, DAWSON-STREET.

Since the foregoing sheets were prepared for press, I witnessed the exhibition of Turpentine in an Hospital, under the following circumstances: chancre at the corona glandis, in size about half that of a sixpence, having a hard callous base, the surface excavated in the centre with rising edges; copper coloured eruption on the shoulders and arms; Iritis of the left eye in an advanced stage: the sclerotic was here acutely and extensively inflamed.

Drachm doses of the medicine were directed three times a day, and a sensible improvement of the eye was observable the morning after it had been commenced with.

At the end of four or five days I saw this man again; the disease, as far as appearances, was stationary, but great pain had been experienced in the globe for the two preceding nights. On inquiry, however, I was informed, that in consequence of strangury, the quantity of the medi-

cine given was diminished, and that for the last few days he had been only taking it morning and evening. Flaxseed Tea with Camphor mixture were prescribed, for the purpose of obviating this symptom, and the Turpentine ordered in the manner first directed.

Five days after, no visible change was observable ; the pain in the eye however had now become so violent at night, that he declared it insupportable, and for this, extensive leeching was several times in vain had recourse to.

I recommended the Turpentine to be increased to drachm and a half doses thrice a day, which was complied with, but stopped the following morning, in consequence, as I was informed, of the urinary organs being so much engaged ; the medicine, however, had now taken its effects on the complaint, though administered but three times in the above proportion ; the pain ceased that night, and the eye was perfectly well in three days after.

The right eye then began slowly to inflame, and the inflammation went on till the Iritis was fully established in it, and, in a few days after its commencement, the same violent pain attacked it that was experienced in the left, although the Turpentine had been continued in

drachm doses, as I was informed : for this, leeching, as before, was had recourse to, but without benefit ; the medicine, in the increased proportion, which so speedily removed that distressing symptom on the former occasion, was obviously the remedy, but, though urged on my part, was not adopted, and the man was put on the use of Mercury.

As Turpentine was administered in this instance for the purpose of giving it a trial in Iritis, and in a very decided Case, I regret my suggestions with regard to increasing the dose in the case of the right eye was not attended to ; had they been I have no doubt what results would have followed.

From the time the patient entered the Hospital up to his commencing with the Mercury, twenty-two days had elapsed, and during that period (in whatever proportion I cannot say) he had been using Turpentine, so that the system may be considered to have been under its influence. Before the exhibition of the Mercury I examined the other symptoms in the presence of some of the pupils ; the eruption was gone, the only vestige of it a few dark spots where it had existed ; the surface of the chancre was level with the surrounding parts, its callosity considerably diminished.

I think it but right to mention, that when I first saw the ulcer, although deep, it was of a red, florid appearance, and might therefore, by some, be considered in a healing state ; the opinion however respecting it and the eruption, was, that they would decidedly require Mercury for their removal, and which should be had recourse to after the eye was well, if it did get well by the use of the Turpentine. I have also to state, I had been assured by the Surgeon under whose care he was, that, with the exception of two grains of Calomel, given on the day of his admission, (the intention first being to submit him to Mercury, but which was given up when I saw him, for the purpose of trying Turpentine,) he had taken no other medicine but the latter, with the occasional use of Camphor mixture and Flaxseed Tea, to guard against strangury : the patient himself also assured me of this.

The Case is not here brought forward for the purpose of further exemplifying the efficacy of Turpentine in the disease in the eye, having, I trust, given abundance of instances of that, both from myself and others ; although, I may observe, that even in this point of view it is an additional proof of it, the cause why the removal of the complaint from the right eye was not the result of its employment, being, as I con-

ceive, at once evident ; indeed it would be difficult to imagine when it cured it in the left, why it would not also be capable of doing the same thing in the right, as happened in Mr. Gregory's Case.—It is the disappearance of the eruption which took place during its employment that induces me to notice it here. If no other medicine were administered with the exception of those stated, I shall only ask, do such eruptions usually decline of themselves ? I leave the improvement in the chancre entirely out of the question, lest what I have stated respecting it when I first saw it might be considered an objection to it.—If they do not, to what is its disappearance in this instance to be attributed ? At least may I not use it here in support of an observation I have already made, and with which I shall conclude :—Does Turpentine exert any influence over the Venereal disease, and if so, to what extent ?—At present I shall only say, the matter merits investigation.

FINIS.

ceive, at once evident; indeed it would be difficult to imagine when it cured it in the last, why it would not also be capable of doing the same thing in the first, as happened in Mr. Gory's Case.—It is the disappearance of the eruption which took place during its employment that induces me to notice it here. If no other medicines were administered with the exception of those stated, I shall only ask, do such eruptions usually decline of themselves? I leave the improvement in the chancre entirely out of the question, lest what I have stated respecting it when I first saw it might be considered an objection to it.—If they do not, to what is its disappearance in this instance to be attributed? At least may I not use it here in support of an observation I have already made, and with which I shall conclude:—Does Turgentine exert any influence over the Venereal disease, and if so, to what extent?—At present I shall only say, the matter merits investigation.

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