

**On the efficacy of the secale cornutum in haemorrhage and leucorrhoea,
and on its effects in gonorrhoea / by G. Negri.**

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to his kind friend Mr. Reid
the author.

ON THE
EFFICACY OF THE SECALE CORNUTUM

IN

HÆMORRHAGE AND LEUCORRHŒA, AND ON ITS EFFECTS IN GONORRHŒA.

BY G. NEGRI, M.D.,

Read before the Medical Society of London, Monday, Nov. 25, 1833.

GENTLEMEN,—Since the action of secale cornutum on the uterine system attracted the particular attention of obstetric practitioners, and has been successfully employed in cases of long protracted labours, Dr. Atlee, of Philadelphia, Professor Bigieschi, and Dr. Ballardini in Italy, as well as Dr. Guillemont in France, have recommended it as the most efficient remedy to arrest menorrhagia, when occasioned by want of uterine contraction after labour. Dr. Shallcross recommended it also in those uterine hæmorrhages, which originate from a partial detachment of the placenta; whilst Professor Dewees expressed his belief, that it might be efficacious in hæmorrhages in general. In the *London Medical and Physical Journal for May, 1829*, a case of menorrhagia, cured by that remedy, after three months' trial, was related by Dr. Marshall Hall, who found it also beneficial in leucorrhœa.

From all these facts Dr. Spajrani, who had already successfully employed the ergot of rye in several instances of leucorrhœa, was induced to try its efficacy in other uterine hæmorrhages, not immediately connected with parturition. After the favourable result of his first experiments, he extended the use of the ergot of rye to any other hæmorrhages proceeding from different mucous textures, both in male and female.

The result of Dr. Spajrani's observations on this subject was published in the fasciculus for March, 1830, of Omodei's *Annali Universali di Medicina e Chirurgia*. In that interesting publication are related eight cases of menorrhagia; four cases of what he calls uterine congestion; two of epistaxis; five of hæmoptysis; and two of hæmaturia. (A correct account of this essay was published in *The Lancet* for February, 1831).

Another publication, on the same subject, appeared in the following number for May and June, 1830, by Dr. Pignacca. It contains two cases of menorrhagia and two of hæmoptysis, successfully treated with the secale cornutum; and in the fasciculus for February and

March, 1831, of the same Italian periodical, two other papers were published, one by Dr. Gabini and the other by Dr. Bazzoni. The first contains three cases of menorrhagia; one of hæmatemesis; one of pneumorrhagia; and two of epistaxis, one of which occurred in a woman affected with acute scurvy, and accompanied with all the other symptoms of what has been called purpura hæmorrhagica. Dr. Bazzoni's publication contains an account of eight cases of leucorrhœa, treated with the ergot of rye, in which it afforded great benefit in arresting the white discharge, even in instances considered of an incurable nature from organic malignant disease of the womb.

We have read since, in *The Lancet* for March 10, 1833, an account of an "admirable essay" on the use of ergot of rye in menorrhagia, published in the *Bulletin Général de Thérapeutique*, by MM. Trousseau et Maisonneuve.

A case of hæmoptoe in a man, cured by the same medicine by Dr. Lanyon, was published in *The Lancet*, April 13, 1833; and another of menorrhagia in a woman, aged 60, by Dr. Bright, was lately published in *The Lancet* for June 15th, together with an article by Mr. H. A. O'Slea, "on the anti-hæmorrhagic effects of the ergot of rye on the male," in which he states, "that, in corroboration of what was published by Dr. Lanyon, he (Mr. O'Slea) employed that medicine with the same view for the last two years, with *invariable success*," and concludes, that "the adoption of this practice arose from reading an article on the same subject, published in a number of *The Lancet*, some time in the year 1831."

In all this time we had ourselves a favourable opportunity of trying the efficacy of the secale cornutum in different instances of menorrhagia and leucorrhœa; and with the view of ascertaining its *modus operandi*; we tried it also, we think for the first time, in gonorrhœa, both in female and male. In bringing before this Society the result of our experience on this subject, it is not to believe we intend to proclaim the secale cornutum as an *infallible*

remedy, or as a *certain* specific against those diseases, and that nothing else may be required but to exhibit *indiscriminately* large and frequently repeated doses of it to obtain a speedy cure. It would then happen of the ergot of rye, given for those complaints, what did happen before of it, when administered in cases of protracted labour; in the hands of some practitioners it will succeed, while in the hands of others it will fail, or be even injurious.

About the method of administering the secale cornutum, Dr. Spajrani laid down the following remarks:—"To obtain a speedy and favourable effect from this remedy it must be of the best quality, otherwise it will fail. (This fact was evidently proved in one of the cases related in his paper.) The dose of the remedy must be generous, often, and regularly repeated. If the hæmorrhage be very violent it must be given from vi. to x. grains, even every ten minutes, till the hæmorrhage ceases; if not so violent, every two hours, or at longer intervals." He ordered it generally in powder, but he used it also in pills and in decoction.

When we began to employ the ergot of rye, having no personal experience of its therapeutical properties, we used it in smaller doses than those recommended by Dr. Spajrani, and we are perfectly convinced, that in some instances it failed, or its efficacy was retarded for this very reason.

The effects on the general system, which followed the exhibition of the secale cornutum, have not been constant, or the same in the different individuals who took it, but *never of an alarming character*. The greater number of patients were complaining of giddiness and headach, which followed in general only the first doses of the remedy, and did not last long. Few were complaining of sickness, and others of a general sense of prostration, *all over from the head to the top of the fingers and toes*. Some women, who had both menorrhagia and leucorrhœa, complained of pains round the hypogastric region and loins, and some even expressed it "as a sense of bearing down of the womb." A woman, who had a chronic ulcer on her right foot, complained of excessive pain in it since she began to take the secale, and others complained of pains along the thighs and legs. But others, on the contrary, felt no inconvenience at all from larger and long-continued doses of the remedy, although the drug was the same, and manifested its beneficial efficacy on the disease for which it was used. In two or three cases of menorrhagia only, the loss of blood, and the pains round the hypogastric region and loins, were remarkably increased by the action of the remedy on the uterine system. Therefore, in instances of this kind, we bled our patients first, and then gave the secale with the best success. On this point of practice we followed the suggestion of Dr. Bazzoni, who stated in his paper, that "in hæmorrhages the secale cornutum may be useful, whether they are active, or passive, primary or secondary, but *its proper indication*

is in their passive state; although, says he, it may be of some service in the opposite state, *still it will be more prudent to have it preceded by blood-letting.*" For the same reason, if the strength of the patient would not allow any further loss of blood, we employed moderate doses of tart. ant. when it was necessary to allay the over-excited action of the heart, or arterial system, or we used mild opening medicines where an habitual state of costiveness might have been considered as the principal cause of irritation, and local congestion of the uterine system; these simple means succeeded sometimes in arresting the hæmorrhage without any want of other therapeutical agents.

Of its peculiar *modus operandi* we shall speak after having exposed the facts which enabled us to draw some conclusions, as far as it is possible on that subject. We shall now proceed to relate the most important cases of hæmorrhage which were treated with the secale cornutum.

CASE I.—*Menorrhagia*.—Ann Beteux, age 35, married, was admitted to St. John's Dispensary, 19th of January, 1832. She had been ill for a long time with menorrhagia, and had been under different treatment till the 9th of April, but without any permanent relief.

On the 16th of April the hæmorrhage having appeared again, we thought proper to try, for the first time, the effect of the secale cornutum in this case, and five grains of the powder were ordered to be taken three times a day. The hæmorrhage from this time gradually diminished, till the 10th of the following May, when it entirely ceased.

May 14th. She feels a great deal better, and has no more pain in the loins and groins. The powders were continued twice a day till the 24th of May, and she was afterwards discharged cured.

CASE II.—*Menorrhagia*.—Ann Marshall, age 30, married; was admitted on the 14th of May, 1833, labouring under a very profuse menorrhagia. Her pulse was quick and sharp; had great pains round the loins and hypogastric region, which was very tender. She was ordered to be bled to xiv. oz., and saline aperient powders were prescribed.

17th. The pains round the loins and groins are better; her pulse is softer, but the hæmorrhage is still going on with great violence. Five grains of the secale to be taken three times a day.

21st. She feels a great deal better; had no hæmorrhage since the 19th, viz. two days after she began to take the secale. The same powder was repeated, to be taken twice a day, and was discharged the following day of attendance.

CASE III.—*Hæmorrhage from the rectum following suppression of the catamenia*.—Hannah Paton, age 21, single, was admitted on the 12th of July, 1832. Eight months ago

felt quite well. Has not been regular the preceding month, but had some pain in the groins and loins, with great general debility. These symptoms were followed by hæmorrhage from the rectum, which continued at intervals up to this day. Had previously taken some opening medicine without any relief. Five grains of the *secale* to be taken every four hours.

16th. Since she has began to take the powders, finds the hæmorrhage much abated. Pergat.

23rd. Has had no hæmorrhage since the 20th. The menses returned on the 21st, and she feels now quite comfortable. The powders were repeated, to be taken occasionally, and she was afterwards discharged.

CASE IV.—*Excessive Menstruation*.—Mary Forest, age 40, married, was admitted on the 19th of July, 1832.

She has had for the last eighteen months a very profuse bloody discharge at the menstrual periods, which never, till lately, continued longer than five days. She was regular about three weeks ago, when the hæmorrhage reappeared with great violence, and continued unabated for the last seventeen days. Has pain in her back and groins, and complains of general debility. Her pulse was very quick and empty. Five grains of the *secale* to be taken every three or four hours.

23rd. She feels much better. After taking three powders she had violent headach and giddiness, which kept on increasing as she took them, and felt a kind of contraction, or, as she expressed it, "a sense of bearing down of the womb." She continued the powders up to the night of the 20th. The hæmorrhage entirely ceased on the morning of the same day. After omitting the powders her head got better. The *secale* was ordered in pills, and in smaller doses, only to be taken twice a day. As she was complaining of great general debility, a little camphor mixture, with small dose of the sulphate of quinine, was ordered to be taken occasionally in the course of the day.

30th. She is going on better; had no more hæmorrhage. Her bowels being costive opening pills were ordered, and wished to have a blister behind her neck to relieve her head. She was discharged the following day of attendance.

CASE V.—*Menorrhagia following Leucorrhœa*.—Sarah Scantbury, age 47, married, was admitted on the 26th of July, 1832. Has had leucorrhœa as long as she can recollect; has miscarried nine times; her last pregnancy was about three years ago; a month since was unwell, and the menstrual discharge was unusually profuse; it returned again in a fortnight, and it has reappeared this morning, July 26th, this being the third time within five weeks. She feels weak, and has pains in her groins and back; no medicine has been

previously taken. Five grains of the *secale* to be taken every four hours.

30th. The bloody discharge continued from Thursday, the 26th, till Saturday, the 28th, when it entirely ceased. It has not returned, and she feels now much better. The *secale* was suspended, and only some cremor tartar. ordered to be taken as an imperial drink.

2nd. She is going on very well. The same saline aperient was ordered to be taken taken occasionally, and was discharged the following day of attendance.

CASE VI.—*Hæmatemesis*.—Elizabeth Pilcher, aged 10, in June, 1832, was in good health. Her illness was caused through having been violently pressed round the waist by a man, who frightened her very much. This produced pain in the right hypochondrium, extending towards the epigastric region, and was followed by a sense of sickness at first, then vomiting of the contents of the stomach, and afterwards of pure blood. She had continued in that state up to the day of her admission, the 30th of July, 1832. If pressure is made over the right hypochondrium, which has been very tender since the commencement of her illness, the hæmorrhage ensues immediately. She was not under our care till the 10th of the following month of September, but had not found any relief from the usual means which were employed from the time of her admission. I thought this a good case to try the effect of the *secale*; therefore, after having used some mild opening medicine, on the 13th of September, three grains of the *secale* were ordered to be taken three times a-day.

This remedy was repeated the 17th and 20th of the same month, but without producing any effect in arresting the hæmorrhage. It was then discontinued, and other means were adopted. The greatest benefit was obtained by the sulphate of iron mixed with kino. On the 28th of February, 1833, she was discharged, having been more than a month quite free from any hæmorrhage.

She remained well for about ten days, when having accidentally struck with violence her right side against a chair, the pain in the right hypochondrium and vomiting of blood returned. She came back in consequence to St. John's Dispensary on the 7th of March, 1833, and was admitted under our care. Different remedies were employed, which were found beneficial on the former occasion, but without obtaining any good effect on the disease. We then thought proper to have recourse again to the *secale cornutum*, but administered in larger and more frequent doses. Therefore on the 28th of March we ordered six grains of the *secale* to be given every third or second hour. After having taken six powders, the sickness, the vomiting of blood, and the pain in the right hypochondrium left her. She continued taking them at longer intervals for several days, without giddiness or any other unpleasant symptoms arising from the medicine.

Her pulse appeared stronger, and her countenance more animated and florid than before. She omitted once taking her powders for a short time, and the sensation of sickness and the pain in her side returned, but was very soon relieved by having recourse to the same remedy. The powders were continued, but only night and morning, from the 1st to the 14th of April. On the 15th they were entirely omitted, as our patient felt herself quite well. April 29th she was discharged cured, and has not yet returned.

CASE VII.—As another instance of hæmatemesis, we shall relate, with Dr. Macmichael's permission, one which occurred in the Middlesex hospital.

Lucy Haselton, ætat. 21, single, was admitted into the Middlesex Hospital on the 21st of September, 1830, under Dr. Macmichael's care, King's Ward.

She was complaining principally of great tenderness over the right hypochondrium, extending towards the epigastrium; she had sickness, with vomiting of a dark fluid mixed with blood, partly coagulated. Local bleeding, and different astringent remedies were employed without success. On the 27th of November, Dr. Macmichael was kind enough to prescribe for her, at our suggestion, the following powder.

R. Pulv. secalis cornuti gr. vi. ter die sumend.

29th. The patient was better, and the same remedy was continued.

30th. The hæmorrhage having ceased, and the pain over her right side greatly diminished, she was discharged, and only kept as an out-patient. The powder was ordered to be taken only twice a day.

December 2nd. She stated she had not seen any more blood, and was going on well.

CASE VIII.—*Hæmatemesis with enlarged spleen.*—Eliza McCulloch, ætat. 10, admitted on the 3rd of October, 1833. About four years ago she had hæmorrhage, which was considered to come from the lungs, and has continued at intervals ever since. The blood is generally of a red colour, and is never mixed with food. The hæmorrhage is usually preceded by pain and uneasiness at the scrobiculus cordis, and nausea; the blood comes up in a way different from expectoration, by an effort similar to vomiting; she has afterwards a very unpleasant taste in her mouth. The fluid brought up in this way has been repeatedly brought to us. Being collected in a glass vessel, had more the appearance of a bloody lymph than of pure blood. It remained quite fluid, and had a peculiar disagreeable odour. The quantity emitted at each time has never been very considerable. She has pain on pressure being made at the scrobiculus cordis, and if on the right extremity of the stomach, the pain runs across

to the left. At the left hypochondriac region there is great prominence, and she complains of frequent pain there. She has often rigors at night, and afterwards perspires very much. She never had a cough or expectoration for any length of time; she is subject to violent fits of passion. Her illness has not weakened her much; her appetite is good, and she sleeps well; her complexion is flushed.

Although she had been admitted on the 3rd of October, it was only on the 17th we ordered about three grains of the secale cornutum to be taken every second hour.

21st. The vomiting of blood is diminished, and did not suffer any inconvenience from the regular use of her medicine.—Pergat.

24th. The vomiting of blood still continues as much as before.

R. Pulv. secalis cornuti gr. vi., tertia quaque hora sumend.

November 4th. She has not brought up any blood for the last three days. The powders were then repeated, to be taken only night and morning.

November 11th. She has had no more hæmorrhage, although she has not taken any more of the powders for the last few days. She feels quite well; and having carefully examined the left hypochondrium, under her dress, no more prominence could be felt or seen on that side. She was then discharged cured.

CASE IX.—*Hæmorrhage from the rectum.*—Mary Smith, æt. 30, was admitted on the 29th of April, 1833. Had then a chronic diarrhœa, and afterwards hæmorrhage from the rectum took place after each motion; this has continued for a fortnight, and she thinks she has passed more than a tablespoonful of clear blood after each stool. The diarrhœa was very much reduced, principally under the use of small doses of hydrargyrum cum creta and pulv. ipecacuanhæ.

On the 17th of June, having for the first time complained of this hæmorrhage, and being on this day more copious than usually, we thought proper to try in this case the effect of the ergot of rye. Six grains of the powder were ordered to be taken every three hours.

June 18th. The patient was a great deal better. She told us that from the time she began to take the medicine, she had no more hæmorrhage, although she had two motions this morning. The medicine was continued, but at longer intervals. On the 27th of June she was discharged cured.

CASE X.—*Epistaxis.*—Sarah Hodges, æt. 62, of a leuco-phlegmatic habit, was admitted on the 19th of August, 1833. She was seized with epistaxis on Thursday evening, three days previous to her admission. On the following evening (Friday), at about eight o'clock A. M., the hæmorrhage returned, and con-

tinued for half an hour, when she applied to a surgeon, who put plugs into the anterior nares, but the bleeding continued through the posterior the whole of the night, more or less. On the following morning (Saturday) she was bled from the arm to about a pint, and took some opening medicine. The hæmorrhage, however, continued at intervals all that day and throughout the night, but not so violently as before.

On Sunday morning the hæmorrhage, after having ceased for a little while, returned about the same hour as on the preceding day, and continued more or less all the day, and in the evening it was very much increased, and went on bleeding at intervals almost all the night.

On Monday morning (August 19th), about noon, the bleeding came on very freely; she thinks she lost about half a pint of blood in a quarter of an hour.

When we saw her it was about one o'clock p. m., at which time the hæmorrhage was very active. She was very pale and weak, her pulse quick and small. Six grains of the *secale cornutum* were ordered to be given immediately (one o'clock p. m.), and to be repeated every quarter of an hour. She was directed to sit down in the apothecary's room, with the view of ascertaining the result.

At a quarter past one the hæmorrhage was very much abated; she was then complaining of being very faint; a second dose was given, and five minutes after, namely, twenty minutes from the first exhibition of the remedy, the hæmorrhage had entirely ceased. Another powder was given at half-past one, and a fourth at two o'clock. She was then sent home, and directed to take one powder only every hour till six o'clock in the evening, and if no hæmorrhage re-appeared to take one of them every three hours.

August 20th. We visited the patient at her own house, and found her lying down comfortably. She stated that she had been free from hæmorrhage since she took the second dose at the Dispensary, and now feels only very weak. The powders were continued at longer intervals.

22nd. She was well, and had seen only a few drops of blood the same day I visited her, after having pinched her nose, but ceased directly after taking one of the powders. No remedy was ordered. She returned on the 19th of September, when, being quite well, was discharged cured.

This case was witnessed by our colleagues, Dr. Ryan, Mr. Jenkins, and Mr. Nettlefold, the surgeon-apothecary of our Institution, who gave the medicine himself to the patient, and watched over the case.

CASE XI.—*Hæmoptoe*.—Jeremiah Sams, æt. 20, a cabinet-maker. Four months previously he had a cough, with a slight expectoration in the morning, which was generally of a greenish colour. Six weeks ago he observed the expectoration to be tinged with

blood; this continued for a week; then he began to bring up about a teaspoonful of blood every morning, and continued so for the last two weeks. The hæmorrhage was neither preceded nor attended by any considerable aggravation of his cough, and only occurred in the morning. He had also some difficulty of breathing when making some exertion. His complexion is very pale. He was admitted on the 3rd of October last, and as there was not present any symptoms indicating the existence of an inflammatory action, requiring more active means, six grains of the *secale cornutum* were prescribed, to be taken three times a-day,

Oct. 7th. After having taken his powders for two days the hæmorrhage diminished, as well as the cough. Has had no giddiness or any other extraordinary symptom from taking his powders. The remedy was repeated, and shortly afterwards the hæmorrhage ceased.

17th. Had a slight return of the hæmorrhage for two or three days, but only once in the morning.—Pergat.

24th. The hæmorrhage ceased entirely from the 21st. The cough and the difficulty of breathing is a great deal less.—Pergat.

28th. On the 26th he saw again a very little tinge of blood in his spittle. Cough a great deal better.—Pergat.

Nov. 1st. Has had no more hæmorrhage; his cough is now very slight. No remedy.

For the two following cases we are particularly indebted to our friend, Mr. E. Nettlefold, the surgeon apothecary of our Dispensary, who had also the kindness to write down the history of almost all the former cases.

CASE XII.—*Hæmoptysis*.—"Mrs. Clarkson, æt. 33, married, a private patient. Had not been in good health for the last five years, in consequence of rupturing a vessel in her chest. Since this accident she had a cough, which, together with the hæmorrhage from the chest, and sometimes from the nose, has continued up to the present time (April 4th, 1833,) with but slight intermission; indeed, for the last fortnight she has had hæmorrhage from the chest every day. Thinks she might have lost this morning about half a teacupful of blood. Her cough is very troublesome; has great palpitation of the heart, and giddiness.

"April 4th. Six grains of the ergot of rye were ordered to be taken every second hour.

"5th. Rested well last night. This morning her pulse is quick, but soft; the cough less, and she expectorates freely. Has had no hæmorrhage since taking the above powders, of which she has taken sixteen. The giddiness is less, and she feels much relieved.

"6th. No hæmorrhage has occurred; her cough is better; pulse full, quick, and rather sharp; tongue white. She is feverish, with pain in her side, and this is usually followed by the bleeding, which she thinks will soon come on.—Continue the powders every hour.

"7th. The pain in the side left her in the

night, after which she slept well. Has had no hæmorrhage; feels very weak; pulse soft, and moderately quick; is not giddy. The hæmorrhage has never left her so long before for a considerable time. Her cough, she thinks, is certainly better, and has experienced much relief from the medicine.—Continue the powders every second hour.

“11th. The hæmorrhage has not returned; her pulse is soft, and much less frequent than before she took the secale; the palpitation of the heart was also less troublesome, and her cough is much easier now than before.—Twelve grains of the secale cornutum to be taken every second hour.

“22nd. Has had no hæmorrhage since taking the secale, and its increased dose has produced no unpleasant symptoms. She finds it relieves her cough considerably; but, as it is accompanied with hectic fever, there appears to be but little hope of her being cured of it. The secale has certainly abated the hæmorrhage, which is all that, in such a case as this, could be expected, and at the patient's desire it is continued.

“No return of the hæmorrhage up to the present day (April 29th). She died some time afterwards from consumption, but had never any return of the hæmorrhage.”

CASE XIII.—*Hæmoptysis with Leucorrhœa*.—“Mary Smith, æt. 39, widow; has not been in good health for the last three or four years. The catamenia have not appeared for the last ten months, and has had leucorrhœa ever since, with pains in the loins and over the abdomen, and frequently the globus hystericus. She had a cough last winter, which soon left her, and does not remember having had any before.

“From this time has been free from any complaint in her chest till the last five weeks, when she has had a cough ever since, which at times distressed her very much. Three weeks ago, after coughing violently, she spit blood, and continued to do so for two days. When the hæmorrhage ceased she had pain and giddiness in her head. A week afterwards the spitting of blood returned, and went on for two days. She thinks she lost altogether a good sized teacupful. Did not spit blood again till last Friday, April 26th, namely, at the end of another week, and continued spitting for the whole of that day. Her cough was very violent, her chest painful, her breathing quick and difficult; was very thirsty; she felt hot and feverish; and the leucorrhœa was in the mean time very profuse.

“On the following morning, after having taken some castor oil, six grains of the secale cornutum were ordered to be taken every hour. Two days afterwards she was admitted to St. John's Dispensary.

“29th. After taking six powders her chest became easier, her cough was much relieved, and the spitting of blood ceased, as well as the leucorrhœa. She has now taken sixteen

of the powders, and has had neither hæmorrhage or leucorrhœa since eleven o'clock P.M. of last Saturday (the 27th), after having taken six doses of the secale. Her cough is now very slight; pulse 77, easily compressible; bowels open. Since taking this medicine she has had less giddiness, but feels very weak and faint.—Continue the powders.

“May 2nd. Has had neither spitting of blood nor leucorrhœa. Her chest feels easy, and she coughs but little; pulse 70, soft; tongue clean and moist; bowels open; is not thirsty; skin cool and soft. Has had a little pain in the back and loins, but very slight compared to what she had before. She finds herself much stronger. Her foot is less painful. (She has had an ulcer on the right foot for more than a year, which circumstance she did not mention at first, which has pained her excessively since she began to take the secale.)

“5th. No hæmoptysis or leucorrhœa since April 27th. Her cough is troublesome sometimes, but it is much better than it was; pulse 65, soft and small. She has now taken fifty-four six-grain doses of the secale. Since she has found herself so much better she has taken it only three times a-day. The giddiness has quite left her, and she is now free from pain.—Pergat.

“9th. As she feels so much better, and has been now a considerable time without either hæmorrhage or leucorrhœa, the secale is discontinued, and she was afterwards discharged cured.

Note.—“I have been attending this patient at her own house for a bad leg, and she has had no return of the hæmorrhage.—Nov. 1st. 1833.”

For the two following cases I am indebted to my colleague, Dr. Ryan.

CASE XIV.—*Hæmorrhage from the gum, in consequence of the extraction of a tooth*.—“A delicate looking man, aged 32, a carpenter, had the left canine tooth of the upper jaw extracted, and the operation was followed by profuse hæmorrhage. He applied at one of the large hospitals for relief, and was desired to press a piece of sponge into the socket of the tooth. He did so without any benefit. He then applied to Mr. Packer, surgeon, at Hoxton, who recommended him to me. On examination I found a coagulum, about the size of a large walnut, over the alveolar process, but there was still some oozing of blood.

“I ordered him the secale cornutum, in the manner prescribed at St. John's Dispensary, desired him not to remove the coagulum, and wrote to his surgeon, that in the event of further hæmorrhage, to plug the alveolar process with a piece of cork, but should this fail, to apply Ruspini's styptic, or the actual cautery, and, finally, that the carotid ought to be tied sooner than allow the man to die.

“Mr. Packer called on me next day, to express his astonishment at the success of the

secale, as it had completely arrested the flow of blood; and he since informed me, that no return took place. I was aware that Dr. Spajrani had removed the coagulum in a case of epistaxis, and encouraged hæmorrhage, and stopped bleeding with the *secale cornutum*; but I did not consider myself justified in adopting his practice, as the man had lost a great deal of blood, and was very much debilitated."

CASE XV.—*Menorrhagia followed by metritis*.—"Mrs. Davis, æt. 23, of middle stature, married for two years, has had no family, and was admitted a patient at St. John's Dispensary, Sept. 18, 1833, under the care of Dr. Ryan. She suffered from dysmenorrhœa before her marriage, which was very much aggravated subsequent to her change of life. At present she suffers from menorrhagia, accompanied by excessive pain and a discharge of coagula. She was ordered ℥j. of *secale cornutum*, divided into ten powders, one to be taken three times a-day. In three days the uterine discharge ceased, but well marked *metritis* supervened, and was removed by the ordinary treatment, venesection, leeching, purgation, &c. Mr. Nettleford saw this case also, and attended the patient at her own residence."

These are the most remarkable instances of hæmorrhage successfully arrested by the use of the *secale cornutum*, which we thought proper to communicate to the Society. We had, indeed, several other cases of menorrhagia, but we considered them less interesting than those of hæmorrhage from other mucous textures, entirely unconnected with the uterine system. The above facts appeared to us of such a practical importance to deserve the particular attention of the medical profession. Perhaps they might be found not so numerous as to justify any general deduction from them, but if the facts, published by other practitioners, and in other countries, should be taken into consideration, it will be found that the anti-hæmorrhagic property of the ergot of rye has been sufficiently established, to induce others to repeat the same experiments; and, if judiciously employed, we dare to say, with a similar result.—See report of the Medical Society.

PART II.

Read before the Medical Society of London
Monday, December 2, 1833.

On the Efficacy of the Secale Cornutum in Leucorrhœa.

ON the employment of the *secale cornutum*, and on its efficacy in leucorrhœa we shall limit ourselves to some general remarks, which are the result of our experience on this subject, without entering into any detail of the singular cases which occurred under our observation.

Although the *secale cornutum* will be found one of the most valuable remedies in the simple form of leucorrhœa, even of a very long standing, and which have resisted many other means, still its efficacy on this kind of diseases is not so rapid as in hæmorrhages. This would have been almost expected as a matter of course, from the more chronic character of the former complaint. Therefore we found it more convenient, and we may say even more safe, to give it in small doses, as five or six grains two or three times a-day, rather than in larger and more frequently repeated ones. Thus the remedy may be continued for a long period without any inconvenience, and with regular advantage. In leucorrhœa as well as in menorrhagia, we must remember, that the ergot of rye has also a peculiar power over the fibrous texture of the womb, and that pains and spasmodic contractions of this organ may be induced, and then symptoms of metritis, and even an increased discharge, may eventually take place. Then it is of the utmost importance, in leucorrhœa also, to allay any state of inflammation, or of local irritation, by those therapeutical means, which may be required by the particular symptoms of each case, before we have recourse to the *secale cornutum*.

We find in practising, that some patients could not take at first any dose of this remedy without severe pains being induced in the uterine system, when, after having used other remedies for a certain time, they could take the *secale* again without the least inconvenience, but, on the contrary, with a decided and progressive advantage on their general state of health.

In one of these patients the os uteri was partially open and indurated, and very tender on the left side of its margin: when the finger pressed over this point acute pains were excited, darting from that part to the right iliac region. We used in this case the extract of conium with the sulphate of iron, with great benefit, and, after this morbid sensibility was subdued, we gave again the *secale cornutum* for the remaining leucorrhœa with decided benefit, and without any more inconvenience, although continued for a long time. We have lately seen this patient, and her general state of health has wonderfully improved; she feels a great deal stronger, and the white discharge is almost entirely gone; we confidently expect to see her in a short time cured by the ergot of rye, which now she only takes twice a-day.

Out of ten cases of leucorrhœa, of which we kept regular notes, the ergot of rye has failed in three. But, in all probability, that happened more from want of experience in the judicious employment of the remedy rather than from its inefficacy.

Of these three unsuccessful cases, two were cured afterwards by other remedies; but one had never been permanently well, either by the ergot of rye or by any other means employed for a long time, both by ourselves and

several other practitioners. In this singular case, the *secale cornutum* appeared to have induced once menorrhagia, after which the patient was better from the white discharge for a little while. Amongst the other things we tried repeatedly the injection of nitrate of silver, as recommended by Dr. Jewel, but without any good effect, and as it appeared to this gentleman very extraordinary, we recommended her to the doctor himself, but we do not know the result.

The *secale cornutum* has been successfully employed in leucorrhœa by our colleagues at the St. John's Dispensary, and our friend Dr. Ryan has even used it in private practice with the greatest advantage.

On the Effects of the Secale Cornutum in Gonorrhœa.

About the *modus operandi* of the *secale cornutum* in the above classes of diseases, Dr. Spajrani expressed his opinion in the following way, leaving however this subject for subsequent inquiries. "I am (says he) rather inclined to believe, that this remedy does not act either as an astringent, or as a stimulant, but more as a sedative on the capillary vessels, and for this reason it may be conveniently used in *certain* instances of active hæmorrhage and of vascular congestion, where exists a state *approaching very much to inflammation*; but yet it is *not to be used* in instances where some *acute inflammation is present*, for which stronger means must be employed."

With the view of ascertaining these therapeutical principles, and from the advantage already obtained by the ergot of rye in leucorrhœa, we thought we should not incur any great risk by trying it also in gonorrhœa, at first in females and then, if not injurious, in males. It is true that the preternatural secretion of the mucous membrane of the genital organs in gonorrhœa, is induced by a specific virus, but still we readily believe that its essential pathological character is inflammatory. Therefore no better opportunity could be obtained for ascertaining the supposed *modus operandi* of the *secale cornutum*, than to use it in a disease of acknowledged character, and in which we could actually see the effects which might be induced by it.

The following cases will give an idea of the result of our enquiries on this subject.

CASE I.—Mary C., married, admitted to St. John's Dispensary on the 9th of May, 1833. She has been ill with gonorrhœa for about three weeks; she caught the disease from her husband, and had been under our care some months ago for a similar complaint, induced by the same cause. She complains of shooting pains through her womb and loins, with ardor urinæ. She has been regular three weeks ago, and has never been subject to leucorrhœa. An opening medicine was ordered, and she was directed to take afterwards vi. grains of the *secale* three times a-day.

May 13th. She is a great deal better; has now no discharge; had no giddiness, but only pains in the lower part of the abdomen, and a kind of cramp of the womb; feels still pain in making water. The same powders to be taken only night and morning.

20th. No discharge; complains still of shooting pains in the womb; *secale* suspended, and only some supertartrate of potash to be taken as an imperial drink. On the 29th she was taken unwell, but the catamenial discharge was very scanty and pale, after which, on the 6th of June, had a slight return of the discharge, which was gradually arrested by the *secale* in moderate doses. She was discharged cured on the 25th of July.

CASE II.—Mary Anne C., æt. 26, single, admitted on the 9th of May, 1833.

Has had gonorrhœa for nearly two months; has not been regular for several months, and has been subject to leucorrhœa; bowels regular. Six grains of the ergot of rye were ordered to be taken every four hours.

13th. The discharge ceased after having taken four or five powders, and has not returned since: proved no inconvenience by taking her powders. They were ordered to be taken only night and morning.

30th. She menstruated on the previous day, and was left without medicine.

June 6th. Has no discharge at all, and says she is quite well. Discharged cured.

CASE III.—Harriet R., æt. 27, married, admitted on the 20th of May, 1833.

Has had gonorrhœa four years ago, from which she was perfectly cured. She was taken ill again with the same complaint, caught from her husband about ten weeks ago, for which she has been treated, as an out-patient at St Bartholomew's Hospital, under Mr. Lawrence. Balsamic medicines and mercurial pills were given to her, from which she was much relieved. Now the discharge is thin and white, when before it was yellow and thick. Complains still of some starting pains through the womb, but has less pain in making water; complains of pain in her right leg, where there is inflammation of the periosteum on the shin bone, probably of a syphilitic character; her bowels being costive, a cathartic powder was ordered, and five grains of the *secale cornutum*, to be taken every four hours, beginning the following morning.

23rd. The discharge is less; she feels sick, after having taken her powder, and complains of being very weak.—Pergat.

30th. The discharge is less than on the preceding day of attendance; she has now no pain in making water, but continues to feel sick after taking the powder; has had no giddiness. Continue the powder three times a day.

June 6th. The discharge has ceased. The *secale* was suspended, and the mercurial treat-

ment was adopted for what we thought a syphilitic complaint.

CASE IV.—John F., æt. 40, a baker, admitted on the 21st of June, 1833.

Has had gonorrhœa about six times; it usually resisted every remedy, and once he had it for nine months; now he has had gonorrhœa for about three weeks; has great pain and scalding in making water, and generally some drops of blood follow; has a great deal of discharge, and the orifice of the urethra is reddened and swollen; in the night he has painful erections. Five grains of the *secale cornutum* to be taken every four hours.

22nd. We saw again the patient. He has taken five powders; the discharge is not abated, but he thinks he has less pain in making water.—Pergat.

28th. He has taken about sixteen powders; he has no pain in making water; he has had still painful erection at night, but the orifice of the urethra is a great deal less red, and the discharge considerably abated; he has now no inconvenience, except a very slight feeling of warmth in making water. He continued the medicine in ten grain doses every four hours until the 11th of July, when he was nearly well, and requested to be discharged.

The patient was under Dr. Ryan's care, and was repeatedly seen by ourselves and colleagues.

CASE V. William M., æt. 24, admitted on the 22nd of August, 1833. Has had gonorrhœa about twelve months ago; has now been ill, for the second time, with the same complaint for a fortnight; discharge copious, yellow and thick. Five grains of the *secale cornutum* to be taken every three hours.

26th. Is just the same, but does not feel worse.—Pergat.

September 2nd. He is a great deal better.—Pergat.

12th. Discharge scarcely perceptible. Continue the powders, but only one three times a day.

16th. Discharge almost gone.—Pergat.

He went on taking his powders till the 10th of October, when he asked for another dose of them, to be taken night and morning, having still some little discharge only in the morning. This patient, who was very attentive, and appeared much satisfied with his powders, having not returned, we have good reason to believe he is now doing very well.

CASE VI. William S., æt. 28, admitted on the 4th of September, 1833. Was taken ill with gonorrhœa a week ago; feels great pain in making water; discharge copious, yellow, and thick.

R. Pulv. *secalis cornuti* gr. v, 3a. q. h. s.

16th. Discharge thinner; pain in making water gone.—Pergat.

23rd. Discharge increased; *secale* suspended, and prescribed the *mistura balsamica*.

October 7th. Discharged cured.

CASE VII. Only a few days ago we had in private practice a patient affected by gonorrhœa for the first time. The symptoms were not severe; the discharge moderate. Being an individual of a delicate constitution, and of very regular habit, we expected to do some good in this case with *secale cornutum*. Three grains of Battley's extract were ordered to be taken every three hours. The following day the discharge appeared a great deal less, and the remedy was continued. Two days afterwards the discharge increased, as well as the ardor urinæ, and he had painful nocturnal erections. The remedy was brought to five grains every three hours, but was soon afterwards suspended, and other means adopted. In this case the *secale cornutum* certainly increased the severity of the symptoms; and the discharge, which was moderate at first, and thin, became afterwards copious, thick, and sometimes tinged with blood. The pulse was also feverish and sharp, the skin warmer than naturally. This patient is usually of a very costive habit, but has great aversion to take purgatives; had we used them previously, or simultaneously with the *secale*, we could perhaps have obtained a better result. This was necessarily done after we had resorted to the other usual means generally employed for that complaint.

SHORT NOTES OF CASES BY DR. RYAN.

CASE VIII.—“M. M., æt. 22, married, has contracted gonorrhœa from her husband; became a patient under my care at St. John's Dispensary, Sept. 12th, 1833. Is two months' ill. She was ordered ʒiiss of *secale* in twelve powders, one to be taken three times a-day.

“16th. Discharge nearly gone.—To continue.

“23rd. Discharge has entirely ceased.”

CASE IX.—“Charles C., æt. 22, has suffered from gleet for six months. Commenced the *secale* Sept. 17th, 1833, and on the 23rd was nearly well. He has taken a variety of medicines, but nothing stopped the discharge so rapidly as the powders.”

CASE X.—“G. S., æt. 34, has been six months affected with gleet. Commenced the *secale* Oct. 30th, 1833. Took fourteen powders without any benefit. This was a morning patient, and had the medicine of a druggist, which, perhaps, was bad.”

CASE XI.—“A. B., æt. 34, has suffered from gleet for eight months. He was cured by twelve doses of the *secale cornutum*.”

CASE XII.—“J. A. L., æt. 19, applied to me Nov. 5th, 1833. Has gonorrhœa for the first time; symptoms severe. Ordered the secale.

“8th. Discharge more copious; ardor urinæ severe.—Secale omitted.

“Ordered carbonate of soda in barley-water or linseed tea.

“In this case I did not expect much benefit from the secale, but was resolved to try it. Every medical practitioner is aware, that a first gonorrhœa is much more severe and indomitable than when the patient has had the disease frequently, or when the acute symptoms have ceased. But, as I have known cubebæ repeatedly arrest gonorrhœa in the acute stage, I saw no objection to employ the secale cornutum.”

From the above facts it appears to us quite evident, that the secale cornutum has a peculiar action on the mucous membranes; but if exhibited when there is a state of acute inflammation, their morbid secretion may be considerably increased. On the contrary, when a more chronic form of inflammation exists, the secale cornutum may have a beneficial influence in arresting their preternatural discharge.

These deductions being in perfect accordance with what has been already remarked on

the efficacy of the ergot of rye in hæmorrhages and leucorrhœa, we think Dr. Spajrani's assertions on this point pretty correct. If any sedative or anti-stimulant property on the capillary vessels of the mucous membrane may be ascribed to the secale cornutum, as Dr. Spajrani is inclined to believe, we do not know. It is true, that in Case IV. of gonorrhœa, where did exist redness and swelling round the orifice of the urethra, this appearance subsided under the influence of the secale; and that, in some instances of hæmorrhage, the patients were complaining of great general prostration and faintness; but others, on the contrary, felt stronger, and their pulse appeared to us more excited; when, in Cases VII. and XII. of gonorrhœa, the inflammatory symptoms were considerably increased. Are some of the former symptoms to be ascribed to the narcotic influence on the nervous system, rather than to any real sedative property of this remedy? We are inclined to believe so. We were much pleased in finding out that MM. Trousseau and Maisonneuve are of the same opinion on this point. (See *Lancet*, March 30th, 1833.)

Now, to give a more satisfactory idea of our results on the employment of the secale cornutum in hæmorrhages and leucorrhœa, we put down all the different instances of both in the following

Tabular Form indicating the result of all the Cases of Hæmorrhages and Leucorrhœa which came under our observation, from the 16th of April, 1832, to the 4th of Nov., 1833, and were treated with the Secale Cornutum.

Different Forms of the Disease.	Total number of Cases.	Successful Cases.	Unsuccessful Cases.	Remarks.
Menorrhagia.	12	8	4	
Hæmorrhage from the rectum.	2	2	—	
Hæmatemesis.	4*	3	1†	
Epistaxis.	1	1	—	
Hæmoptoe.	1	1	—	
Leucorrhœa.	10	7	3	
Total.	30	22	8	

Note.—We did not put down in this table the cases of gonorrhœa because they were related merely to show the effects, and not the efficacy, of the secale cornutum on that disease. All we can say, from the limited number of observations on this subject, is, that perhaps the ergot of rye may be found of some service in the more chronic form of that disease.

Of the unsuccessful cases of menorrhagia, the first was a woman who had a copious loss of blood from the vagina, with great tenderness at the lower part of the abdomen, and pains round the groins and loins. Her pulse was such as would have induced us to bleed her, had we not wished to try the secale

cornutum in this case, which was the second that had come under our observation, since we began to employ this remedy. Five grains of the secale were ordered to be taken three times a day. The powders were taken for two days, and the pains and loss of blood were considerably increased. They were suspended;

she was bled from the arm, and astringent medicines were ordered, which cured her very soon. This unfavourable result led us to adopt another method of practice in the following case (the second related to the Society), which succeeded very well, viz. to bleed first, then to give the secale.

The second was a stout woman who at her regular period was taken ill, but the bloody discharge was very profuse, and went on more or less for nine weeks. Had great pain at the lower part of the abdomen, and round her loins. Her pulse appeared weak. Five grains of the secale were ordered to be taken every second hour. Three days afterwards she was not better, and felt an increase of the pains after taking her powders. Her pulse was stronger. She stated having had a miscarriage about three months ago. She was bled, and directed to take the secale only three times a day, from which she felt worse, and was then suspended, and other means adopted.

The third case was that of Sarah Jones, æt. 33, married, admitted September 2nd, 1833.

Has had five children and miscarried twice, the second time five weeks ago, when she lost a great deal of blood. Three weeks afterwards, finding herself better, started for some place in the country, and came home to London, a distance of eighty miles. She was taken ill again on her journey, and lost a great deal of blood. She continued so more or less till August 31st. On the 1st of September the hæmorrhage became very violent, and she came to our dispensary the following day, and was under our care. She does not complain of any great pains but in her left iliac region and loins; her complexion is very pale, and there is great action of the heart and arteries, but her pulse is certainly weak and empty; her head feels heavy; her bowels are costive.

R. Pulv. secalis cornuti, ʒiij;
Divide in pulv. xxiv;
Pulv. i. 3a, q. h. sumend.;

viz. about viij. grains every three hours. A mixture with a drachm of carbonate of magnesia and two scruples of rhubarb in six ounces of water, was also given, a wineglassful of which to be taken every night, or night and morning, if her bowels were not open.

September 5th. She was sick, and vomited twice after taking the first powders, but felt only a sense of sickness afterwards at each time she took her powders. Had some giddiness, but the pains in her loins and side were relieved. The bloody discharge is reduced very much, and she states that it was so soon after having taken a few powders. Bowels regularly open. Soon after having taken a powder she feels "a general sense of weakness all over, from the head to the tips of her fingers and toes, as she could not stand; then she feels sick." Action of the heart and arteries less violent. Pulse more natural and soft. The mixture to be continued, and

the powders to be taken only every five hours.

September 12th. She is better; discharge great deal diminished, and less coloured. The powders continued to make her sick and weak. Continue with the powders.

16th. Feels very sick with her powders. Discharge a great deal increased; but she thinks *her time to be unwell is very near*. The secale was discontinued, and she was gradually doing well under the use of the following pills:

R. Ferri sulphatis, gr. i;
Extract. rhei, gr. iij;
M. f. pil. ter die sumend.

These pills were continued till the 7th of October, when she was discharged cured. Under these remedies the palpitation of the heart, and the excessive arterial action were reduced to their natural standard, and the patient got very soon better from that sense of general prostration, of which she was so much complaining before.

Although we put down this with the *unsuccessful cases*, still we thought that properly speaking, it should not have been considered entirely so, for the hæmorrhage increased in consequence of her having taken the secale when near menstruation. This was the reason which induced us to say in another place, that "only in two or three cases of menorrhagia, the loss of blood, &c., were remarkably increased by the action of the remedy."

The fourth unsuccessful case of menorrhagia is that of Mary Ann May, æt. 22, married, admitted the 4th of November, 1833. She had miscarried a short time ago, and was labouring under profuse menorrhagia for several days; was complaining of pains in the lower part of the abdomen and loins. She is a thin and delicate looking woman; her pulse appeared to us rather weak. Five grains of the secale cornutum were ordered to be taken every two or three hours.

Nov. 7th. She has been a great deal worse. The hæmorrhage increased very much, with spasmodic pains in the hypogastric region, and had giddiness, and pains along her thighs and legs. She took only six powders, and as soon as she left them off, the pains decreased. Her pulse was quick, and sharp, but empty. Her bowels are rather costive. The following mixture was ordered:

R. Magnesiae sulphatis ʒj;
Antimonii tartarisati, gr. ij;
Aque fontis, ʒviiij;
M. Cyath. parvul. i. bis terve die sumend.

21st. After the first glass of her medicine, she vomited several times, after which the hæmorrhage suddenly ceased, and she felt a great deal better; this was the reason she did not attend regularly. Now the hæmorrhage returns a little if she has to exert herself too

much. The secale cornutum was ordered again to be taken only two or three times a day.

25th. The hæmorrhage *entirely ceased* last Thursday evening (Nov. 21st) after having taken one of her powders, which she continued taking till to-day. She felt some pain in the lower part of the abdomen, but a great deal less than at the time she took them.*

In using the secale cornutum we preferred to give it in powder, as Dr. Spajrani did, being

also the most economical and convenient way in dispensary practice.

We seldom ordered it in more than five or six grain doses, more or less frequently repeated according to the violence of the case, or the peculiarity of the concomitant symptoms. We *purposely avoided* giving the secale intermixt with other medicine; but we were obliged sometimes to modify by other means the morbid condition of those parts or organs over which our remedy had to exert its powerful

Tabular Epitome of all the Cases of Hæmorrhage and Leucorrhœa which came to our knowledge, since Dr. Spajrani's publication, cured by the Secale Cornutum by different Practitioners in Italy, France, and England.

Where, and by whom treated.	Total number of cases.	Different kinds of Hæmorrhages.							Leucorrhœa.	Where published or recorded.
		From the Womb.	From the Nose.	From the Chest.	From the Bladder.	From the Stomach.	From the Rectum.	From the Gums.		
<i>In Italy.</i>										
Dr. Spajrani .	17	8	2	5	2	—	—	—	not † stated	{ Ormodei's Annali di Medicina e Chirurgia for Mar. 1830. Lancet, Feb. 5, 1831. { Do. Number for May and June, 1830. Lancet, do. { Do. Number for February and March, 1831. Do. do.
Dr. g nacca .	4	2	—	2	—	—	—	—	—	
Dr. Gabini .	7	3	2	1	—	1	—	—	—	
Dr. Bazzoni .	8	—	—	—	—	—	—	—	8	
<i>In France.</i>										
MM. Trousseau } et Maisonneuve }	13	3	—	—	—	—	—	—	—	{ Bulletin Général de Therapeutique. Lancet, March 30, 1833.
<i>England.</i>										
Dr. Marshall Hall	1	1	—	—	—	—	—	—	not † stated	{ London Medical and Physical Journal for March, 1829. Lancet, for March 13, 1833.
Dr. Lanyon .	1	—	—	1	—	—	—	—	—	
Mr. Bright .	1	1	—	—	—	—	—	—	—	Do. for April 13, 1833.
Mr. H. A. O'Slea }	not † stated	—	—	—	—	—	—	—	—	Do. do.
Dr. Macmichael	1	—	—	—	—	1	—	—	—	{ Dr. Negri's Paper. (See Case vii.)
Dr. Negri .	21	8	1	1	—	2	2	—	7	Do.
Mr. E. Nettlefold	2	—	—	2	—	—	—	—	—	Do. Case xii. xiii.
Dr. Ryan .	2	1	—	—	—	—	—	1	not † stated	Do. Case xiv. xv.
Totals	78	37	5	12	2	4	2	1	15	† We mean those who have used it successfully in this disease, but the number was not stated.
† Employed the Secale in Hæmorrhages for the last two years "with invariable success"										

* This case, which came under our observation some time after we had written the first part of this paper, was not there mentioned. We have put it then amongst the unsuccessful

cases, although it was only from our injudicious employment, and not from inefficacy of the remedy, that the hæmorrhage had not been arrested at first.

action; when at other times it was necessary to get clear of these irritating causes, which would have counteracted its beneficial influence; as, for example, the employment of purgatives when the bowels were costive. This, however, can never be an objection to our practice, as that *must* be always the case with the administration of any other remedies which are given with a peculiar object. Although the criterion of the *post hoc, ergo propter hoc*, be not always correct, still we believe that in our profession, when violent symptoms are present, and we employ remedies of ac-

knowledged activity, with the view of curing them, if we obtain a favourable and constant result for a sufficient number of times, we may begin to believe that criterion sufficiently correct. The weight of such a conclusion is moreover increased by the uniformity of results obtained by different individuals, and in different countries; therefore the following prospective view of the general results of the *secale cornutum* in hæmorrhages and leucorrhœa, will make a striking impression of the real efficacy of that remedy against those classes of diseases.

The first part of the book is devoted to a general history of the British Empire in India, from the early days of the East India Company to the present time. It traces the growth of the empire from a small trading post to a vast empire covering a large part of the Indian subcontinent.

The second part of the book is devoted to a detailed history of the British Empire in India, from the early days of the East India Company to the present time. It traces the growth of the empire from a small trading post to a vast empire covering a large part of the Indian subcontinent.