6. Poisoning from arsenic.

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Jewell

Poisoning from opium.

Kennedy

Nitrous acid as a substitute for blisters.

Killett.

Nitrous acid as a substitute for blisters.

R. Martle

Tænia cured by oleum terebinthinæ.

Remarks on the Use of Nitric Acid as a substitute for Blisters, by Mr Assistant Surgeon Killett.

We hear much of the successful application of firing by the native practitioners; and it is common to hear a farrier say of a horse, "blister him, and if don't do, fire him, which never fails." The cautery is an ancient remedy fallen into disuse, but which nevertheless appeared to possess peculiar virtues.

Though, admitting the fact, that firing was more efficacious than cantharides blisters, I had no defined notions in what this superiority lay, but I could not impute it merely to difference in the *degree* of action, for the blisters used with horses seem often more painful than firing.

The substitution of nitric acid for cantharides blisters in cholera has given me opportunities of making some observations on its mode of action, which appear to me elucidatory of the subject.

Seeing the quickness of action of the acid in cases of cholera, and that it could be applied under any circumstances of frenzy or unruly conduct, I have been led to employ it in those cases of severe disorder in the stomach and bowels, consequent on excessive drinking, where the promptitude is of vital importance, and where common blisters are altogether useless and inapplicable; also in cases of acute and sudden pain from other causes, in hepatitis, and so forth; wherever the disease depends on spasm, or nervous irritation, the relief is *wonderfully sudden;* and when it is connected with inflammation, I think it is fully as certain, and more speedy, than after common blisters.

The pain, upon the whole, is represented as sharper than that caused by blisters, though some patients say not; but the chief point is, that it reaches its acme in two minutes; it continues severe for three hours, and in three more altogether ceases. It is in this *quickness of action* that it resembles the actual cautery, and to this therefore I impute the greater efficacy of both, for, it is reasonable to conclude, that the effect will be as the intensity of the cause; we may compare it to the shock produced by the *sudden* affusion of cold water on the surface, which, under a different management, may be altogether avoided.

But the acid possesses other advantages. Whoever has felt the tedious progressive pain of a blister, the wearisomeness and irritation produced, and the agony of motion; the sickness and disgust of the dressing, and the after sickly smell, itchiness, &c.; will be disposed almost to suffer any pain rather than submit to a repetition; it is also obvious, that all these circumstances must have their bad effects on the patient. But the action of the acid

is essentially different; the application is over in a few seconds; the pain, though severe, is at least soon on the *decrease;* is not aggravated by motion, nor by friction; no dressing is required, and the patient is often free from all the trouble of his disorder before the cuticle is abraded.

I have not seen any occasion for the after use of cantharides. If the acid has been diluted with half its bulk of water, and applied lightly with a feather, the cuticle is stained of a straw or sulphur colour; in three days it begins to pucker, with a little serum underneath; a slight red ring surrounds the parts, and the cuticle comes off on the 4th or 5th day, leaving the surface like a common blistered part, with a few deeper streaks, where the cutis vera has been touched. But if the acid has been used undiluted, or has been longer applied, the cuticle becomes of a deep brown; it does not rise or pucker, as the subjacent vessels necessary for throwing it off, appear to be destroyed; the red ring forming on the 3d day becomes deeper and broader, and a portion of the true skin, of the thickness of sheep's leather, begins to separate in six or seven days. The parts are rather tedious in healing, but this, taking it in all its bearings, is no great disadvantage.

As no serous discharge ensues, the acid cannot be substituted for blisters, in cases where *this* discharge is the motive of their application; neither, of course, can it be admissible when a continued rather than intense counter-irritation is thought to be indicated. But in all urgent and acute cases, and especially where the patient is unruly or restless, the acid appears to me to possess advantages sufficient to recommend its general adoption in practice.

Saint Thomas's Mount, 30th June 1819.

Tænia cured by Ol. Terebinthinæ. By Robert Hartle, Surgeon to the Forces, Member of the Royal College of Surgeons, London.

Having, in the 43d number of this interesting publication, stated the case of a military officer having been cured of tænia by the ol. terebinthinæ, I considered myself bound to substantiate the certainty and speedy effects of this medicine, in the cure of this troublesome disease.

In no way could I more effectually ground my proof, than by employing the turpentine in every case that came under my

care or superintendency, varying the dose according to the age, strength, and habit of living of the patient. The latter, I certainly believe, requires most pointed observation, as will, I trust, be in a great measure elucidated by the two accompanying cases.

I fear this disease is often overlooked in this climate, and the practitioner led into a belief that it is chronic dysentery. The patients are generally, at least those that I have seen, meagre and emaciated, with a voracious canine appetite, never satisfied with any quantity of food, and wearing all the appearance of having been starved. Griping pains of the belly, particularly in the mornings before breakfast, with one or two watery stools, a grumbling noise of wind in the intestines, succeeded by pain, pains in the stomach, and occasionally passing pieces of the worm. I would recommend to every medical gentleman to desire his patients to observe particularly their stools, by which means he will often find out the true disease, and be relieved from that anxiety which must naturally be excited in the mind of every medical man, when he finds that his remedies have failed to give relief.

I have succeeded in curing two patients with two ounces each of the oil undiluted, yet, as in the case of Cockshot, I would increase the dose was my patient, which is too often the case in this climate, an ardent spirit-drinker, and I should not hesitate to give as far as four ounces. I am fully persuaded that a large dose is less likely to affect the urinary organs, than a small one; a large dose acts immediately as a cathartic, and purges itself off before the absorbents have time to play on it. It will be seen in the case of Howell, the ol. terebinth. was six hours in the stomach, yet no inconvenience was experienced in the urinary organs.

Case I.—William Howell, æt. 36, a private soldier in the Royal West India Rangers, was admitted into hospital on the 23d September 1817, punished. On the night of the 28th September he was suddenly attacked with hæmoptysis. The usual remedies were immediately applied, and, although fast recovering from this disease, he appeared to daily decrease in strength. He became very emaciated, and complained of griping pains of his belly, particularly before breakfast, with some purging, and pain in his stomach. His emaciated state particularly attracted my notice on the morning of the 22d October, when his pulse was regular; skin natural; tongue clean; appetite voracious; and, to make use of his own words, "he was never full." I directed him to examine his stools, and see if he could discover any

worms. He immediately said he was in the habit of passing them very frequently. On the 23d October he shewed me three, which, although flat, were not ribbed like the tape-worm; each was about two inches long. Still, however, the appearance of them led me to believe that this was a case of tænia, and I resolved to try the terebinthina. I desired him to abstain as much as possible from food that day, and on no account take his supper. He complied, and on the morning of the 24th October, I gave him two ounces of the ol. terebinth. undiluted. I visited him very frequently during the morning, and finding at twelve o'clock (six hours after he had taken it) that he had had no stool, I ordered him two ounces of the ol. ricini. In half an hour after he had taken it he passed a narrow tape-worm, nine feet one inch long.

Notwithstanding the length of time between his taking the turpentine and that of having a stool, no ill effects were produced, and the only strange sensation he complained of was that of intoxication. On inquiry into the general character of this man, I find he is given to drink freely ardent spirits, which I think in a great measure accounts for the tardiness of the turpentine's effects. His appetite has since become natural, and his general health daily improving.

Detachment General Hospital,
Antigua, 24th December 1817.

Case II.—William Cockshot, æt. 28, private soldier in the Royal West India Rangers, admitted into hospital on the 21st September 1817, with slight ulcer. On the morning of the 25th October 1817, he complained of severe griping pains of his belly, with frequent inclination to stool, which generally continued until he had got his breakfast. His countenance was sallow and dejected; appetite good; pulse regular; skin natural; pain in his stomach, and described as if a very weighty substance was in it. He also remarked that he had frequently passed worms very like those of Howell, but much broader, and ribbed. I considered this a well marked case of tænia, and requested to be informed candidly if he was much in the habit of drinking. He answered in the affirmative, remarking that he never diluted rum, if he could procure it in its genuine state. The latter circumstance appeared to me to indicate the propriety of increasing my dose of the ol. terebinth.; I therefore, on the morning following, (26th October,) at six o'clock, measured three ounces by a graduated glass, which he drank off immediately. I visited him every hour, and at ten o'clock, while questioning him as to his sensations, he was seized with

severe pain in his belly, and a desire to stool; he had scarcely sat on the pot when he passed the worm, eight feet long. About the centre it is nearly half an inch broad, tapering off very small at both ends. This man never complained of any pain or inconvenience, but that of intoxication, which he thus described on the following morning, "I was more drunk yesterday than I was when I drank at one time a bottle of rum."

Letter from Assistant-Surgeon Joseph Aller, Royal West India Rangers, to Staff-Surgeon Hartle.

Dominica, 26th November 1817.

My Dear Sir,—To your valuable suggestions I am indebted for success in the following case of tænia, by the exhibition of a large dose of oleum terebinthinæ.

William Osmotherly, private soldier of the Royal West India Rangers, aged 23, robust habit, landed in perfect health with detachment of his regiment from Guadaloupe, in May 1816. Dysentery soon after became the prevailing disease among the troops. About the 1st of June he became affected with loss of appetite and general depression of spirits; occasional griping, and frequent purging stools, mostly mucus, sometimes mixed with blood. He was induced by remissions of disease to conceal his complaint until the 27th, when he was ordered to hospital, weak and much emaciated. The griping and purging were more continual; the tongue white; heat of skin natural; he said pieces of worm were frequently passing. An ounce and a half of the ol. terebinth. were given immediately; he became slightly intoxicated, but experienced no disagreeable sensation. An hour after he was purged very often, and voided several yards of tape-worm dead. The purging continued about two hours. At night calomel gr. vi. ext. opii gr. i. made into a pill was given; next day thirty grains of rhubarb. No more worm was passed; the griping ceased; the bowels became more regular; stools of a better appearance; but, to obviate any tendency to dysentery, calomel combined with opium was ordered, until the mouth was slightly affected. He improved daily, and when discharged, enjoyed health and spirits equal to his first arrival in this island.

I am, Dear Sir, with the greatest respect,
Your most obedient Servant,
Joseph Aller,
Assistant-Surgeon, Royal West India Rangers.