

Medical papers communicated to the Massachusetts Medical Society : To which are subjoined, extracts from various authors, containing some of the improvements, which have lately been made in physic and surgery.

Contributors

Massachusetts Medical Society.

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29
MEDICAL PAPERS,

COMMUNICATED TO THE

35
MASSACHUSETTS MEDICAL SOCIETY.

TO WHICH ARE SUBJOINED,

EXTRACTS from various AUTHORS, containing
some of the IMPROVEMENTS, which have
lately been made in PHYSIC and SUR-
GERY.

Published by the SOCIETY.

NUMBER I.

PRINTED AT BOSTON, Massachusetts,
BY THOMAS AND ANDREWS.
At FAUST'S STATUE, No. 45, Newbury Street.

MDCCXC.

MEDICAL PAPERS
OF THE
AMERICAN MEDICAL SOCIETY

AMERICAN MEDICAL SOCIETY

EXTRACTS FROM THE

PROCEEDINGS OF THE

ANNUAL MEETING

HELD AT

ST. LOUIS, MO.

1882

PUBLISHED BY

THE SOCIETY

OF

PHYSICIANS

AND

SURGEONS

OF THE

UNITED STATES

P R E F A C E.

THE experience of more than a century has fully evinced the great utility of literary societies, in promoting the improvement of science; the establishment of them has therefore been adopted with success, wherever such improvement has been considered as an important object. The progress of numbers when connected in society, and earnestly engaged in the same pursuit, must be far more rapid and more sure, than among an equal number of detached individuals; as the ardor and emulation which the state of society excites, and the mutual communication and correction of ideas for which it gives opportunity among the former, are entirely wanting with the latter.

IT is therefore to be hoped that the *Massachusetts Medical Society* may produce happy effects, in promoting among ourselves, the improvement of medicine, a science of the greatest importance to the public, but which unhappily, in this country, has hitherto been too little cultivated.

HAVING this improvement in view, the Society early called upon its members and others, to communicate such medical observations of every kind, as might occur in the course of their studies or practice; and still requests not only members, but gen-

tlemen of the faculty and of observation every where, to contribute their friendly assistance in advancing that art, which is the grand object of this institution.

WITH a view to encourage the communication of all extraordinary and important cases that might occur in the practice of the medical profession, Committees of Correspondence were established in the several counties of the State, in 1785, whose duty it is “to meet, correspond and communicate with
“any individuals, or any associations of physicians,
“that have been or may be formed in their respective counties, and *make report* of their doings from
“time to time, *to the Society*, as occasion may require.” Several associations have already been formed, from which it is presumed essential advantages will be derived.

THE *Censors*, in conformity to the duty required of them by the act of incorporation and the laws of the Society, have examined a considerable number of candidates for the practice of physic and surgery, many of whom were found duly qualified, and have received the approbation of the Censors, in letters testimonial thereof, and under the seal of the Society.

IN 1787, several of the fellows presented a number of valuable books; since that time, partly by further donations, and partly by purchases, a libra-

ry has been instituted, consisting of useful and important books in the various branches of the profession; they are now ready to be loaned to the members of the Society, under certain regulations: This establishment, it is not doubted, will greatly serve to diffuse medical knowledge through the Commonwealth.

FACTS and practical observations, made with accuracy and fidelity, are the ground work upon which all theory and practice can safely and securely be founded: Therefore, all accounts of the appearances of new or unusual diseases, or new and unusual appearances and variations attending such as are already known; of diseases peculiar to particular situations; of epidemics, as they appear from year to year; of new methods of treatment, whether successful or unsuccessful; of new medicines, especially of any simples, whether vegetable, animal or mineral, of our own growth; all improvements or discoveries in pharmacy, medical chymistry, or botany; morbid appearances, found in dissecting dead bodies, especially when accompanied, as they always ought to be, with as exact a description of the symptoms and appearances of the previous disease as can be obtained: In short, all new and just observations, connected with medicine or surgery, candidly, clearly and plainly related, will be gratefully received.

AS the society is new, and our country but of modern date, it cannot be expected, that communications should be so numerous, as if it were more advanced, and had a larger and more extensive correspondence.

FROM such communications as have been received, the Society has selected several articles, which are now presented to the public; most of them are such as have an immediate connexion with practice, and have a direct tendency to improve it; and from all of them it is presumed the practitioner may derive some useful information,

SEVERAL of the papers in this number propose new methods of cure, in particular cases, or recommend some new medicine to the attention of physicians: The Society does not undertake to recommend any method of cure pointed out in any of them, or to warrant any of the facts they contain; they are laid before the practitioner, upon the reputation of the writer, and left to the fate they may merit.

THOSE gentlemen who have favored the Society with their communications, will be pleased to accept the thanks due to their exertions for the promotion of the healing art; and may be assured that their future correspondence will be duly noticed.

As it is proposed to continue the publication at no very distant periods, several papers now on hand may soon be expected in a future number.

THE Society's principal aim, in this publication, is to make it as useful as possible.

MANY practitioners, may, from their local situation or other causes, be precluded the advantages of an early access to European publications, in the several branches of their profession: It has therefore been thought expedient to subjoin, as an Appendix, a number of extracts from such books as have made their appearance here; which, as they may answer the purpose of communicating a variety of useful improvements and interesting observations in the healing art, it is hoped will not be wholly unacceptable to those who may have already perused them.

ACT OF INCORPORATION.

COMMONWEALTH of MASSACHUSETTS.

In the Year of our LORD, 1781.

An ACT to incorporate certain PHYSICIANS, by
the Name of *The MASSACHUSETTS MEDICAL
SOCIETY.*

AS health is essentially necessary to the happiness of society ; and
as its preservation or recovery is closely connected with the knowledge of
the animal economy, and of the properties and effects of medicines ; and as
the benefit of medical institutions, formed on liberal principles, and encour-
aged by the patronage of the law, is universally acknowledged :

Be it therefore enacted by the Senate and House of Representatives in
General Court assembled, and by the authority of the same, That Nathaniel
Walker Appleton, William Baylies, Benjamin Curtis, Samuel Danforth,
Aaron Dexter, Shirley Erving, John Frink, Joseph Gardner, Samuel Hol-
zen, Edward Augustus Holyoke, Ebenezer Hunt, Charles Jarvis, Thomas
Kast, Giles Crouch Kellogg, John Lynn, James Lloyd, Joseph Orne, James
Pecker, Oliver Prescott, Charles Pynchon, Isaac Rand, Isaac Rand, jun.
Micajah Sawyer, John Sprague, Charles Stockbridge, John Barnard
Swett, Cotton Tufts, John Warren, Thomas Welsh, Joseph Whipple, Will-
iam Whiting, be, and they hereby are formed into, constituted and
made a body politic and corporate, by the name of *The Massachusetts
Medical Society* ; and that they and their successors, and such other
persons as shall be elected in the manner hereafter mentioned, shall
be and continue a body politic and corporate by the same name for-
ever.

And be it enacted by the authority aforesaid, That the fellows of said
society may from time to time elect a president, vice president and
secretary, with other officers as they shall judge necessary and conve-
nient ; and they the fellows of said society, shall have full power and
authority, from time to time, to determine and establish the names,
number and duty of their several officers, and the tenure or estate
they shall respectively have in their offices ; and also to authorize and
empower

empower their president or some other officer to administer such oaths to such officers, as they, the fellows of said society, shall appoint and determine for the well ordering and good government of said society, provided the same be not repugnant to the laws of this commonwealth.

And be it enacted by the authority aforesaid, That the fellows of said society shall have one common seal, and power to break, change and renew the same at their pleasure.

And be it enacted by the authority aforesaid, That they, the fellows of said society, may sue and be sued in all actions, real, personal or mixed, and prosecute and defend the same unto final judgment and execution, by the name of *The Massachusetts Medical Society.*

And be it enacted by the authority aforesaid, That the fellows of said society may from time to time elect such persons to be fellows thereof, as they shall judge proper; and that they, the fellows of said society, shall have power to suspend, expel or disfranchise any fellows of said society,

And be it enacted by the authority aforesaid, That the fellows of said society shall have full power and authority to make and enact such rules and bye laws for the better government of said society, as are not repugnant to the laws of this commonwealth; and to annex reasonable fines and penalties to the breach of them, not exceeding the sum of *twenty pounds*, to be sued for and recovered by said society, and to their own use, in any court of record within this commonwealth proper to try the same; and also to establish the time and manner of convening the fellows of said society; and also to determine the number of fellows that shall be present to constitute a meeting of said society; and also, that the number of said society, who are inhabitants of this commonwealth, shall not at any one time be more than seventy, nor less than ten; and that their meetings shall be held in the town of *Boston*, or such other place within this commonwealth, as a majority of the members present in a legal meeting, shall judge most fit and convenient.

And whereas it is clearly of importance, that a just discrimination should be made between such as are duly educated and properly qualified for the
duties

duties of their profession, and those who may ignorantly and wickedly administer Medicine, whereby the health and lives of many valuable individuals may be endangered, or perhaps lost to the community :

Be it therefore enacted by the authority aforesaid, That the president and fellows of said society, or other such of their officers or fellows as they shall appoint, shall have full power and authority to examine all candidates for the practice of physick and surgery, (who shall offer themselves for examination, respecting their skill in their profession) and if upon such examination, the said candidates shall be found skilled in their profession, and fitted for the practice of it, they shall receive the approbation of the society in letters testimonial of such examination, under the seal of the said society, signed by the president, or such other person or persons as shall be appointed for that purpose.

*And be it further enacted by the authority aforesaid, That if the said president, and such other person or persons, so elected and appointed for the purpose of examining candidates as aforesaid, shall obstinately refuse to examine any candidate so offering himself for examination as aforesaid, each and every such person so elected and appointed as aforesaid, shall be subject to a fine of *one hundred pounds*, to be recovered by the said candidate, and to his own use, in any court within this commonwealth proper to try the same.*

*And be it further enacted by the authority aforesaid, That the fellows of said society may, and shall forever be deemed capable in law, of having, holding and taking in fee simple or any less estate by gift, grant or devise or otherwise, any land, tenement or other estate, real or personal ; provided that the annual income of the whole real estate that may be given, granted or devised to, or purchased by the said society, shall not exceed the sum of *two hundred pounds*, and the annual income or interest of said personal estate, shall not exceed the sum of *six hundred pounds* ; all the sums mentioned in this act to be valued in silver at *six shillings and eight pence* per ounce : And the annual income or interest of the said real and personal estate, together with the fines and penalties paid to said society, or recovered by them, shall be appropriated to such purposes as are consistent with the end and design of the institution of said society, and as the fellows thereof shall determine.*

And

ACT OF INCORPORATION.

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And be it further enacted, That the first meeting of the said Medical Society shall be held in some convenient place in the town of *Boston*; and that *Edward Augustus Holyoke, Esq;* be, and he hereby is authorized and directed to fix the time for holding the said meeting, and to notify the same to the fellows of said Medical Society.

In the House of REPRESENTATIVES, October 30, 1781.

This bill having had three several readings, passed to be enacted.

NATHANIEL GORHAM, Speaker.

In SENATE, November 1, 1781.

This bill having had two several readings, passed to be enacted.

SAMUEL ADAMS, President.

Approved, JOHN HANCOCK.

A true copy.

Attest, JOHN AVERY, jun. Secretary.

A LIST

A LIST of the FELLOWS of the MASSACHUSETTS MEDICAL SOCIETY,
and their Places of Residence.

- * SAMUEL Adams, *Boston.* Samuel Mather, *Westfield.*
 Nathaniel Ames, *Dedham.* * Joseph Orne, *Salem.*
 Nathaniel W. Appleton, *Boston.* Joseph Osgood, *Andover.*
 Israel Atherton, *Lancaster.* Oliver Partridge, *Stockbridge.*
 Joshua Barker, *Hingham.* James Pecker, *Boston.*
 Josiah Bartlett, *Charlestown.* Oliver Prescott, *Groton.*
 William Baylies, *Dighton.* * Charles Pynchon, *Springfield.*
 Chauncy Brewer, *Springfield.* Isaac Rand, *Cambridge.*
 James Brickett, *Haverhill.* Isaac Rand, jun. *Boston.*
 John Brooks, *Medford.* Thomas Rice, *Pownalborough.*
 David Cobb, *Taunton.* Nathaniel Saltonstall, *Haverhill.*
 Nathaniel Coffin, *Portland.* Samuel Savage, *Barnstable.*
 * John Cuming, *Concord.* Erastus Sargent, *Stockbridge.*
 * Benjamin Curtis, *Boston.* Micajah Sawyer, *Newbury Port.*
 Samuel Danforth, *Boston.* * John Sprague, *Newbury Port.*
 Aaron Dexter, *Boston.* John Sprague, *Dedham.*
 Shirley Erving, *Portland.* Marshall Spring, *Watertown.*
 William Euffis, *Boston.* Charles Stockbridge, *Scituate.*
 Joshua Fisher, *Beverly.* John B. Swett, *Newbury Port.*
 John Flagg, *Lynn.* John Swett, *York.*
 John Frink, *Rutland.* David Townsend, *Boston.*
 * Joseph Gardner, *Boston.* * Simon Tufts, *Medford.*
 Lemuel Hayward, *Boston.* Cotton Tufts, *Weymouth.*
 * Abner Hersey, *Hingham.* John Vanhorne, *West Springfield.*
 Samuel Holten, *Danvers.* John Warren, *Boston.*
 Gad Hitchcock, jun. *Pembroke.* Benjamin Waterhouse, *Cambridge.*
 Edward A. Holyoke, *Salem.* Henry Wells, *Montague.*
 Ebenezer Hunt, *Northampton.* Thomas Welsh, *Boston.*
 Joseph Hunt, *Concord.* Joseph Whipple, *Boston.*
 Charles Jarvis, *Boston.* Thomas Williams, *Roxbury.*
 Thomas Kast, *Boston.* William Whiting, *G. Barrington.*
 * William Kneeland, *Cambridge.* Samuel Willard, *Uxbridge.*
 James Lloyd, *Boston.* * Edward Wyer, *Cambridge.*
 Thaddeus Maccarty, *Worcester.*

N. B. Those with this mark (*) are deceased.

HONORARY

HONORARY MEMBERS *of the* MASSACHUSETTS MEDICAL SOCIETY.

JOSHUA Brackett, Esq. Physician,	<i>Portsmouth.</i>
Ammi Ruhamah Cutter, Esq. Physician,	<i>Portsmouth.</i>
Hall Jackson, Esq. Physician,	<i>Portsmouth.</i>
M. John Feron, A. A. S.	<i>Paris.</i>
Rev. Manasseh Cutler. A. A. S.	<i>Ipswich.</i>
* John Morgan, M. D.	<i>Philadelphia.</i>
Benjamin Rush, M. D. Professor of Chymistry at the Univerfity of Pennsylvania,	<i>Philadelphia.</i>
William Shippen, Professor of Anatomy, Surgery and Midwifery at the Univerfity of Pennsylvania,	<i>Philadelphia.</i>
Adam Kuhn, Professor of Materia Medica and Practice of Phyfic at the Univerfity of Pennsylvania,	<i>Philadelphia.</i>
John Jones, M. D.	<i>New York.</i>
Dr. Charles M ^c Knight,	<i>New York.</i>
* Dr. Ebenezer Crosby,	<i>New York.</i>

N. B. Those with this mark (*) are deceased.

OFFICERS *of the* MASSACHUSETTS MEDICAL SOCIETY, *elected in June, 1789.*

HON. Cotton Tufts, M. D. *President.*

Isaac Rand, Esq. *Vice President.*

Isaac Rand, Esq. Edward A. Holyoke, M. D. Dr. Samuel Danforth, Hon. John Brooks, Esq. John Warren, M. D. Dr. Thomas Welsh, and Dr. Nathaniel W. Appleton, *Counsellors.*

John Warren, M. D. *Corresponding Secretary.*

Dr. Nathaniel Walker Appleton, *Recording Secretary.*

Dr. Thomas Welsh, *Treasurer.*

Aaron Dexter, M. D. *Vice Treasurer, Librarian, and Cabinet Keeper.*

Hon. Oliver Prescott, Esq. Dr. Samuel Danforth, Dr. Isaac Rand, jun. Charles Jarvis, Esq. and Dr. Lemuel Hayward, *Censors.*

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MEDICAL PAPERS.

A R T I C L E I.

An Account of the WEATHER and of the EPIDEMICS, at SALEM, in the County of Essex, for the Year 1786. To which is added, a BILL of MORTALITY, for the same Year. Communicated by EDWARD AUGUSTUS HOLYOKE, M. D. A. A. S. and Fellow of the Massachusetts Medical Society.

SALEM, JUNE, 1787.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

VERY soon after its institution, the Massachusetts Medical Society called upon its members, to communicate their observations on the diseases, especially the epidemics, which fell under their notice.

IN compliance with this call, I have continued my observations,* and now forward to you such, as another year has furnished me with ; together with a pretty full account of the weather, and the variations of the seasons, the thermometer and barometer, &c. for each month.

THIS account takes up perhaps a larger proportion of this paper than many may think useful : Yet as it is not to be expected that every physician who has it in his power to give you an account of diseases, should be at the trouble of making meteorological observations ; and as those made in one spot, may probably answer for a considerable tract of country round, I thought it best to be so particular : For if diseases, especially epidemics, depend in a great measure upon the state of the atmosphere, as it is commonly supposed they do ; and if others of the faculty in the vicinity should, agreeably to the desire of the society, communicate observations made at the same time with these, I think a particular account of the weather must be useful, as being applicable to all such communications.

AND it were much to be wished that practitioners would more generally than they do, commit to paper their thoughts and remarks upon diseases as they arise, and communicate them to the Society ;

* Doctor Holyoke has communicated similar observations for the years 1782, 1783, 1784, 1785, 1787, and 1788.

ciety; which, though doubtless it would be attended with some labor, yet this labor would be amply rewarded by the benefit which would accrue to themselves, their patients, and the art they profess. The observations of many, made at the same time, and in different parts of the country, and continued for a course of years, must, when collected and compared together, throw a great deal of light upon many points, which are now involved in much obscurity, and would doubtless be the readiest and most effectual method of furnishing materials for a history of those diseases which are either epidemical or endemical in our country. Indeed the joint efforts of many engaged in the same design, may accomplish, in a few years, what would be impracticable to a few individuals, though employed for ages.

I HAVE only now to add, that in enumerating the diseases which occurred in each month, I have recited them in the order of their frequency; and that all such are left out of this account, as happened less than three times in the month, unless here and there a single instance of a disease is noted, on account of its singularity. So that this is not to be looked upon as an enumeration of all the diseases which appeared among us in the course of the year, (perhaps not above the half or two thirds of them) but only an account of those which did most commonly occur.

M, DCC, LXXXVI.

JANUARY.

ON the 2d day, a small earthquake in this vicinity; and on the 3d, a storm at N. with much snow, and another on the 30th, at S. with much rain; snow also on the 5th and 15th, and a little on three or four days beside. Prevailing winds between the N. W. and S. W. not one third of the month in a more easterly direction; eight or nine days of clear, dry and dephlogisticated air; three foggy days; not very cold in general, but the 17th, 18th, and 19th, intensely cold; the \varnothing in my thermometer (Fahrenheit's) sunk to -11° , and in another thermometer in town to -20° , and was never, at any time during these three days, higher (abroad in the shade) than 10° . The greatest change in the thermometer, in any one day, was on the 31st, from 44° in the morning, to 16° at 10h. P. M. $=28^{\circ}$ abroad.

	Abroad.	In house.	
Thermometer highest on 29th,	46°	44°	}
lowest on 18th,	$5^{\circ} 5$	12°	
			at noon.

MEAN heat of the month abroad, $24^{\circ} 8$.

THE \varnothing in the barometer but moderately variable until the 18th, after which more unsteady: The greatest change in 24 hours from 30th to 31st, 0 inches, 65 decimals, lower.

BAROMETER highest on 20th, 30in. 30dec.—lowest on 23d, 28in. 95dec.

THE most common disorders this month, which was a healthy one, were bad coughs, fevers, chiefly ephemeræ, and those of a mild moderate kind; abscesses, scrophulæ fugaces, odontalgia, dyspepsia, rheumatisms, dolores secundaria; besides a few instances of cynanchæ malignæ, colic, suppressed menses, hysteria, diarrhæa, and cutaneous eruptions.

FEBRUARY.

SNOW storms on the 5th, 6th, and 14th, at N. E. and on the 20th at S. E. in which very large quantities of snow fell, and another on the 24th at N. E. Two appearances of aurora borealis. Winds about two thirds of the month between N. W. and S. W. none remarkably high. About seven or eight days clear, fair, dry, dephlogisticated air; a good proportion of agreeable weather; no rain, except a little on the 5th. No very cold weather through the month. The greatest variation of the thermometer was on the 15th, viz. 15° warmer abroad in nine hours,

	Abroad.	In house.	
Thermom. highest on 10th,	47°	45°	} at noon,
lowest on 1st,	22°	12th 27°	

MEAN heat of the month, (at three observations) 28° 6, abroad.

NO remarkable variations in the barometer; the greatest on the 20th, from 29in. 95dec. to 29in. 47dec.

22 MEDICAL COMMUNICATIONS.

BAROMETER highest on 2d, 30in. 10dec.—lowest on 20th, 29in. 47dec.

THIS month was very healthy ; we had some mild febrile disorders, cynanchæ malignæ, colics, and coughs ; after pains in puerperal women ; several hectic cases ; scrophulæ fugaces ; pleurifies ; a few asthmatic, and worm cases ; and, which was remarkable, two instances of fatal ileus.

MARCH.

A SNOW storm on 2d, at N. E. another which began on the 4th, at S. E. and ended on 5th, at N. E. very violent ; besides which, very little snow. Rain fell on the 2d, 16th, 27th, 29th, and 31st. Foggy on four days ; six auroræ boreales, and an uncommonly beautiful one on the 22d. Winds from the western board rather more than half the month ; five or six days they were peculiarly penetrating, sharp, and raw ; such as prevail in no other season of the year ; frequently very high, as usual in this month. Weather variable ; sometimes cold, raw, and windy ; at other times, exceedingly pleasant : No very cold weather during the month ; but the 25th and 26th remarkably warm, and the air smoky and hazy. The greatest change in the thermometer on the 26th, from 3h. to 10h. P. M. 28° colder.

Thermom,

	Abroad.	In house,	
Thermom. highest on 26th,	78°	64°	} at noon.
lowest on 11th,	31°	33°	

MEAN heat of the month (at three observations)
39° 7, abroad.

THE changes in the barometer were not remarkable ; the greatest on 16th, from 29in. 90dec. to 29in. 45dec. from morning to night.

BAROMETER highest on 14th, 30in. 15dec.—lowest on 3d, 29in. 05dec.

DYSPEPSIÆ, coughs, odontalgia, and worms very frequent ; next in frequency were febrile disorders, chiefly pleuritic, pleurodynæ, colics, and rheumatic complaints ; then scrophulæ, mild cynanchæ malignæ, cephalalgia, diarrhææ, convulsions and gastrodynæ ; several hæmoptoses, hysteria and cutaneous eruptions. About the middle of this month, the chin cough made its appearance ; one instance of nyctalopia, in a lad of 16. The month rather sickly.

A P R I L.

ON the 1st and 2d a most violent storm at N. E. in which twelve or fourteen inches of snow fell ; another of rain on the 18th and 19th, from the same quarter ; beside which, rain on six other days. Aurora borealis on five evenings ; fog on two days ; very few tolerably pleasant days : From the 17th
to

to 26th a tedious series of cold, damp, raw, rainy weather; prevailing winds from the eastward; a shower, with thunder and lightning, on the 24th: Temperature of the air in general equable and very disagreeable. The temperature of April is commonly more equable than any other month of the year, as I have frequently observed. The greatest variation of the thermometer on the 10th, 23° in seven hours abroad, from cold to warm.

	Abroad.	In house.	
Thermom. highest on 28th,	63°	56°	} at noon,
lowest 2d,	30°	33°	

MEAN heat of the month (at three observations)
 $47^{\circ} 2$, abroad.

THE \varnothing in the barometer remarkably stationary; the greatest variation in one day, from the 2d to 3d, 0in. 78dec.

BAROMETER highest on 3d, 30in. 03dec.—lowest on 25th, 29in. 10dec.

PERTUSSIS was now epidemical amongst children; nor did adults escape, for several suffered severely by it; some fevers of no great consequence among children; bad coughs, brought on by the long continuance of damp, raw weather; a number of which terminated in phthisis, and several others escaped with difficulty; many dyspepsiæ, cephalalgia, and oppressions at the breast; a few colics, abscesses, and rheumatic cases.

M A Y.

ON the 6th and 7th a storm at N. E. with much rain, and showers on four days beside; two days foggy; two auroræ boreales; very few pleasant days, but much raw, cold, cloudy, disagreeable easterly weather; almost constantly easterly winds; spring rather backward; greatest variation of heat on 26th, 17° colder from noon to night.

	Abroad.	In house.	
Thermom. highest on 27th,	71°	31ft 63°	} at noon.
lowest 6th,	48°	52°	

MEAN heat of the month abroad (by three observations) 57° 2.

SMALL variations in the barometer; the greatest in 24 hours, from 6th to 7th, 0in. 40dec.

BAROMETER highest on 30th, 29in. 99dec.—lowest 7th, 29in. 30dec;

THE chin cough, which first appeared in March, was now highly epidemical; several of the younger patients were seized with convulsions, and a few carried off by them; the method which I found most successful, after trying several, was to exhibit first an emetic of turp. mineral. (when the patient was able to bear the operation) joined with a few grs. of pulv. ipecac. and soon after small doses of kermes min. with a small addition of flor. benzoin, every six or eight hours; and in the intervals one, two or three tea spoonfuls of a moderately strong solution

solution of gum. ammoniac. Many were relieved by this method, who appeared to be in the greatest danger; though it must be confessed that some received but little, and others no benefit from it: Fevers of various forms, chiefly pneumonic and rheumatic, were common; bad coughs were frequent, as also dyspepsiæ; then diarrhæas, cephalagiæ, and worms; catarrhal disorders and defluxions on the breast; then abscesses, odontalgia, scrophulæ, and mild dysenteric disorders; a few menorrhagiæ, abortions, and hysteriæ; and several epilepsies.

JUNE.

NO considerable rains, but showers on six several days; none great; a little thunder on four days; Fogs on five days; three appearances of aurora borealis; moderate winds, chiefly between N. W. and S. W. about a third of the month was fine agreeable weather, and pretty hot; about three or four days the air much phlogisticated, damp and sultry; the rest of the month rather cool, damp and disagreeable: The greatest variation of the thermometer, the ☿ sunk from 3h. to 10h, P. M. 30°.

	Abroad.	In house.	
Thermom. highest on 4th,	93°	85°	} at noon,
lowest 15th,	71°	65°	

MEAN heat abroad, (by a mean of three observations) 71° 8.

THE \varnothing in barometer very stationary ; greatest change in 24h. 0in. 28dec.

BAROMETER highest on 16th, 29in. 90dec.—lowest on 12th, 29in. 33dec.

CHIN cough still continues to be the prevailing disorder ; dyspepsia was more frequent than I ever recollect it to have been. After the exhibition of such evacuants as were thought proper, I found the columbo root given in substance, to be extremely beneficial in numerous instances. Various species of pyrexia, among which were a few synochi, some slow fevers, several pleurifies and rheumatic fevers ; Diarrhæas, vomitings and purgings, and colicky complaints, common : Hectical cases and bad coughs, numerous : Then abscesses, menorrhagiæ, ophthalmiæ, and hæmoptoses ; next scrophulæ vulgares and amenorrhœæ. One instance of hydrophobia in a boy of three years old, who had been bit in the right cheek about five months before, by a dog, who in a few days after died with all the marks of rabies ; this child died in great distress about twenty six or twenty eight hours after its aversion to water was discovered.

JULY.

RAIN on 18th and 27th. Several showers beside, attended with a little thunder and lightning on four other days ; fogs on two days ; aurora borealis on seven evenings ; most prevalent winds from the west,

west, though frequent easterly turns ; two or three sultry dog days, and three or four dry, dephlogisticated ones. About a third of the month, the air was damp, and the winds blew gently from the eastward ; a great deal of cool weather for this season ; but about five days that might be called very hot ; the season rather dry the former part of the month, but towards the latter part, vegetation very good ; but few grasshoppers this month. Two remarkable changes from hot to cold, one on the 12th, thermometer at four o'clock, P. M. at 82° , and at 7h. the same evening, at 59° , and on the 27th, at noon, 89° , and at 10h. P. M. down to 64° .

	Abroad.	In house.	
Thermometer highest on 16th,	$91^{\circ} 5$	85°	}
lowest 18th,	60°	64°	
			at noon.

MEAN heat of the month (by a mean of three observations) $71^{\circ} 3$.

BUT small variations in the gravity of the atmosphere ; the greatest change in barometer, in 24h. 0in. 19dec.

BAROMETER highest on 31st, 29in. 93dec.—lowest on 16th, 29in. 45dec.

PERTUSSIS which still continued epidemical, was in many instances attended with fever, which though sometimes threatening, seldom proved mortal ; several children who had had the disease a long time,
and

and appeared to be almost recovered, had the cough return upon them again with great violence ; but these relapses seldom proved very lengthy, commonly continuing bad, but about a week or ten days. Disorders of the alimentary tube, viz. diarrhæa, dyspepsia, and gastrodynæ were very rife ; some dysentericæ, cholerae dysentericæ, nausæ, and vomitings ; pleurodynæ, bad coughs and hectical complaints. Abscesses, ulcusculæ oris in children, vertigos, scrophulæ and odontalgicæ. Rather sickly.

AUGUST.

RAIN on five days, and a few slight showers beside ; two days foggy ; four appearances of aurora borealis ; many easterly winds, though more frequently from the western quarter, and none high, nor any storm through the month ; much damp weather, and scarcely one third of the month pleasant, although we had but four or five dog days ; no very hot weather, and on the whole a very cool August ; a little thunder and lightning on 23d. The greatest change in the thermometer on the 6th, 17° in 10h. from warm to cool, in the open air.

	Abroad.	In house.	
Thermom. highest on 6th,	88°	84°	} at noon.
lowest 31st,	62°	60°	

MEAN heat of the month (by a mean of three observations) 69°.

THE \varnothing in the barometer pretty steady ; the greatest change in 24h. 0in. 31dec.

BAROMETER highest on 28th, 30in. 01dec.—lowest on 12th, 29in. 33dec.

PERTUSSIS much the same as in the last month ; cholera dysenterica, (as in a former communication I took the liberty to denominate this disease) now epidemical amongst teething children, and like that of the last season, was not attended with such a degree of vomiting as formerly, and gave way very kindly to the vitr. antim. cerat. in small doses, as last year : Pyrexiaë numerous, such as a short mild fever, slow fever, synochus, pleuritis, febricula pustulata and ophthalmia : Dyspepsia and diarrhæa common ; a number of abscesses, tormina, worm cases, arthrodyniaë, epilepsies, asthma, mania, &c.

ONE instance of the true scurvy in a lad returned from a fishing voyage, in which he had been employed about twelve weeks : This is a singular occurrence with us, as I do not remember to have seen for near forty years, any one person concerned in the cod fishery come home with this disease till now. This patient had a foul stinking breath, swelled bleeding gums, loose teeth, bloated pale fallow countenance, purple spots upon the lower limbs, swelled legs, great weakness and indisposition to action, &c. &c. He soon recovered by the help of a vegetable and fruit diet, a few mild purges, &c.

SEPTEMBER.

NO storms this month ; on 12th a good deal of rain, and on 18th and 19th a little ; a small thunder shower on 5th ; fog on 19th ; two auroræ boreales ; winds most commonly from the western board, though frequently interrupted by easterly breezes, but no brisk gales ; much dry agreeable weather ; but two or three dog days, and a very few hot, and not a third of the time damp ; the greatest change from cool to warm on the 30th, 18° in 7 hours.

	Abroad.	In house.	
Ther. highest on 2d & 30th,	80°	30th, 74°	} at noon.
lowest	24th, 59°	59°	

MEAN heat of the month, (at three observations)
61° 5.

THE variations of the barometer, for six months past, but small ; the greatest in any 24 hours this month, 0in. 48dec.

BAROMETER highest on 8th, 30in. 06dec.—lowest on 11th, 29in. 18dec.

FEVERS, for the most part, of a mild low kind, very numerous ; none of which however, ended fatally ; a few pleurifies ; cholerae dysentericæ rife ; diarrhæas, abscesses, and dyfentericæ frequent ; pertussis still continues, and very frequent relapses into it ; when this disease proved mortal, the child was commonly carried off with convulsions : Of all the patients

patients who had this distressing cough this season, few or none became tabid : Colics, gastrodynæ, and worms, common ; a number of scrophulæ, cutaneous eruptions, dyspepsiæ, abortions, hæmoptyses, convulsions, epilepsies, little ulcers of the mouth, and hecical cases : Two sailors imported the Guinea worm from Africa ; one case of catalepsy. Rather sickly.

OCTOBER.

A SHORT and not violent storm of rain at S. E. on the 6th, and a very little rain on two or three other days ; two or three inches of snow fell on 30th : Fog on one day ; four very smoky days ; four auroræ boreales, and two dog days : Winds chiefly from S. W. W. and N. W. seldom high ; some weather unseasonably hot about the middle of the month, which in general was pleasant.

Thermom.	highest	on 1ft,	Abroad. 83°	In house. 76°	} at noon.
	lowest	31ft,	40°	43°	

MEAN heat of the month, (by a mean of three observations) 55° 2.

CHANGES in the barometer but moderate, greatest in 24 hours, 0in. 50dec.

BAROMETER highest on 25th, 30in. 13dec.—lowest on 6th, 29in. 04dec.

PYREXIÆ were numerous, some of which were very mild, and ran a course of one or two weeks only; some were synochi, many others began with a pleuritic type, but degenerated into a long, tedious slow fever, of three, four or five weeks continuance; the event, however, was very favourable: Dysenteries were common and happy in their termination; cholerae dysentericæ still frequent, and much more fatal this month than the last; worms in children, vomitings, dyspepsiæ, diarrhææ, abscesses, and gastrodynæ were next in frequency; then odontalgia, head aches, cutaneous eruptions, ulcuscula oris, and fore throats; a very few cynanchæ malignæ, and tonsillares; one patient with nyctalopia; pertussis disappeared, after a continuance of seven or eight months.

NOVEMBER.

NO storms or high winds, which is remarkable, as there are generally more in this month than in any other; rain on five days, but the springs were remarkably low, and there was great complaint for want of water in wells and ponds. Some snow on four days; four auroræ boreales: Winds from S W. W. and N W. above two thirds of the month: Weather very variable, though more than a third was fair and dry; no hot weather, but some uncommonly cold, and the winter set in early: The greatest variation in the thermometer was on the 28th, from 34° to 6° in 7 hours, abroad.

34 MEDICAL COMMUNICATIONS.

	Abroad.	In house.	
Thermom. highest on 7th,	59°	55°	} at noon.
lowest 28th,	10°	29th 19°	

MEAN heat of the month, (by three observations)
33° 4.

VARIATIONS of the barometer but small; the greatest in 24 hours, 0in. 52dec.

BAROMETER highest on 26th, 30in. 09dec.—lowest on 10th, 29in. 19dec.

FEVERS of various types frequent, as long low flow fevers, a mild moderate fever of a much shorter period, synochus, pleuritis; abscesses numerous; scrophulæ, diarrhææ and odontalgia; next hysteria, worms, cynanchæ malignæ of favourable event, gripes, and agues in face; several sore throats and cutaneous eruptions; a few cholera dysentericæ, which is remarkable so late in the year. A man of seventy years, carried off suddenly by angina pectoris.

DECEMBER.

TWO very violent storms at E. and N E. in which an immense quantity of snow fell, viz. on the 4th and 5th, and on 9th and 10th, and the air being cold, prodigious damage was done by them, both at sea and on shore; during the first there was a remarkable high tide; another storm of rain and snow on the 23d and 24th; a little snow also fell on the
8th

8th and 13th, and a little rain on four other days ; one foggy day ; two auroræ boreales ; winds from the westward much the greatest part of the month, and not very high ; about ten days of clear dry weather, though but about five or six pleasant days ; much severe cold, and two or three stormy turns ; prodigious quantities of snow on the ground, which made travelling difficult, the roads being almost impassable ; the greatest variation of thermometer from 12th to 13th, 31° warmer in 24 hours.

		Abroad.	In house.	
Thermom.	highest on 31st,	45°	43°	} at noon.
	lowest 12th,	17°	20°	

MEAN heat of the month, (by a mean of three observations) 26° 7.

BAROMETER more variable than for several months past ; greatest change in one day, 0° 61.

BAROMETER highest on 10th, 30in. 34dec.—lowest on 24th, 29in. 36dec.

THIS month remarkably healthy ; few, or no febrile disorders ; the most common complaints were abscesses, coughs and cutaneous eruptions ; then vomitings and purgings, and scrophulæ amongst children ; a few ophthalmiæ, pleurodynæ, cephalalgæ, and ulcusculæ oris : Also, several lenteries brought from the West Indies.

THE winter was not remarkably cold, but the ground was covered very deep with snow ; the spring cold, damp, and backward ; the summer remarkably cool, and rather dry ; the autumn in the former part warm, the latter part cold.

THE mean heat of the year, in the open air, $48^{\circ} 87$.

TO an account of the diseases to which we are incident in this place at the present day, it may not be improper to subjoin a few words respecting such as seldom or never do happen, and of such as were frequent formerly, but seldom or never make their appearance here at present.

THE first I shall mention is the *ricketts*. This disease was formerly (about thirty five or forty years ago) pretty common here, and more especially among negro children, as I very well remember ; but is now become so rare that I have not seen it, more than three or four times, these eight or ten years, according to the best of my remembrance. Dr. Gliffon, and others, the first writers upon ricketts, inform us, that it first made its appearance about thirty years before they wrote, i. e. about the year 1620, in the counties of Dorset and Somerset, in Great Britain ; which, if true, shows it to be of very modern date : And from *a chart of the fatal diseases, &c. in London*, collected and published by Dr. William Black, it appears that it has been gradually declining in that city, these seventy or eighty

ty years past, particularly from 1702 to 1717, (a period of fifteen years) there died of the rickets 3916; and that from 1762 to 1777, (another period of the same length) there died only 104. All these observations seem to indicate an utter extinction of this scourge of infants.

ANOTHER is the *colica pictonum*, or dry belly ach, as it was commonly called. This painful and distressing complaint, till about twenty four or twenty six years ago, was so frequent, that it was no uncommon thing to have six or eight, or more patients, ill of it in the course of a winter; (the season in which it mostly prevailed, though it was not confined to cold weather:) But now for these twelve or fifteen years back, I imagine there has not been five persons ill of it in this town, if we except a very few who dealt in lead, and who it was evident, derived their disease from that source, such as painters, &c. This species of colic was formerly attributed to hard drinking; and it is certain that persons addicted to spirituous liquors were generally the subjects of it; but its present scarcity cannot be owing to an increase of temperance; for it is a melancholy truth I fear, that intemperance is as prevalent at this period, as it has been these forty years. Query—Can this difference be accounted for, from the very general difuse of pewter? Pewter is a factitious compound metal, containing a large proportion of lead, and lead is universally allowed to be one very com-
mon

mon cause of this kind of colic : Now formerly the most usual drinking vessel in the houses of the poor was a pewter quart pot, and those made use of in eating, such as plates, dishes, basons and porringers, were almost wholly of the same material, and these not always kept in the nicest order, but were often, at least the pot, covered on the inside, with a thin coating of rust, or a sort of cerufs. But the use of pewter is now very much laid aside, and in the revolution of fashion, has given way to the more modish stone, or (as it is commonly called) Queen's ware.—The matter seems worth inquiring into.

BOTH the last mentioned diseases, I am informed, are as much rarer in some of the neighbouring towns, as they are in this ; as to others I have no information ; nor how the case is in the more distant parts of the country. Perhaps it would be interesting to inquire, what diseases have become extinct, or very rare among us, and what new ones have succeeded in their room.

INTERMITTING FEVERS of our own growth we see none of here, though thirty five or forty years ago, they sometimes occurred.

TYPHUS, both *mitior* and *gravior*, of Dr. Cullen, were frequent with us, especially in the autumn, from twenty five to thirty five years ago, and proved fatal to many in the vigour and prime of life ; it is now, comparatively, very rare.

SCURVY is a disease we very seldom meet with : Sailors sometimes return from sea with it, and for the most part recover very soon ; but I have never met with more than a very few instances of it generated here at home, in the course of my practice.

PUERPERAL FEVER very seldom occurs here ; it has not shown itself perhaps more than twice or three times these ten years past.

I SHALL conclude with observing, what I suppose must have been observed by all the elder practitioners among us, that acute diseases are much less frequent as well as less fatal than formerly ; and that chronic diseases, particularly *Phthisis pulmonalis*, have taken their place ; and that although our species descend to the grave by paths, a little different from the old ones, yet they arrive at it no faster than formerly, as our bills of mortality, in proportion to our numbers, are by no means increased.

BILL of MORTALITY, for the Town of
SALEM, for the year 1786.

DEATHS.

January,	7	August,	12
February,	12	September,	12
March,	13	October,	10
April,	13	November,	6
May,	17	December,	13
June,	12		—
July,	12		139

DISEASES.

DISEASES.

Inflammatory fever,	2	Convulsion,	3
Slow nervous fever,	4	Palsy,	2
Mixed fever,	5	Insanity,	1
Hydrocephalic fever,	1	Asthma,	2
Fevers, (species unknown)	5	Hooping Cough,	13
Inflammatory quinsy,	1	Dropsy, viz.	
Putrid quinsy,	3	Anasarca,	2
Inflammation in the		Ascites,	2
thorax,	4	Pulmonary Consump-	
Angina pectoris,	1	tion,	20
Inflammation in the		Hectical Decay,	7
abdomen,	1	Atrophy,	6
Abscess in the thorax,		Cancer,	1
(vomica)	1	Worms,	2
Alvine fluxes, viz.		Canker, (Apthæ)	2
Cholera morbus,	2	Still born,	6
Cholera dysenterica,	9	Casualties, viz.	
Dysenteria,	3	Murdered,	1
Diarrhæa,	2	Executed,	1
Lientery,	2	Drowned,	1
Colic, viz.		Diseases unknown, 16;	
Ileus,	2	of which 10 were of	
Spasmodic,	1	infants within the	
Calculi,	1	month,	16
Trismus infantum,	1		<hr/>
			139

A R T I C L E II.

An Account of the ULCERATED SORE THROAT, as it appeared in the Town of DIGHTON, in the Years 1785 and 1786. Communicated by Hon. WILLIAM BAYLIES, A. A. S. and Fellow of the Massachusetts Medical Society.*

D I G H T O N, J U N E, 1 7 8 7.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

TH E ulcerated sore throat came amongst us in the month of August, 1785, and continued through the ensuing winter till the autumn of 1786. It did not spread with rapidity, but commonly seized three or four families in a neighbourhood, and then leaped over into a very different one, returning back again perhaps in the space of two or three months. It usually invaded children, but adults did not wholly escape. Women were more subject to it than men. The seizure was, for the most part, very sudden: The patient, from a complete state of health, would be reduced in a few minutes to an inability of sitting up. A pain in the head, back, and joints, faintness, nausea, vomiting, foreness of throat, and rigors, would often make their assault at the same instant. The pulse soon becomes accelerated,

* County of Bristol.

ated, and very precipitate, though not full or hard. The eyes grow red and watery, similar to those in the measles. In twenty four hours, or less, the tonsils are much swelled, having been very red from the beginning, with their tops corroded, and specked with white; the fauces, also, are much inflamed, with here and there a spot of white, which finally turn out eating ulcers; the uvula is, sometimes, in the same condition; and the tongue is covered with a white or yellow mucus. The glands under the ears become largely tumified, and are very hard to the touch. The quickness of the pulse still increases, with great heat, some degree of restlessness, a short, panting, laborious breathing with a peculiar kind of noise, and a greater heaviness of the eyes, which are followed, towards the close of the second day, with an universal eruption of red, fiery, itching pimples, which are very close together, and the small spaces between them much inflamed. More than half of the adults, and a very few children, were free from this eruption. Upon its taking place, the restlessness is diminished, and respiration becomes more easy; but there is no abatement of the other symptoms. The heat with thirst increases; deglutition is rendered more difficult; the tumors enlarge; and a delirium attends, commonly in the night only, till about the latter end of the fourth, or on the fifth day, when a copious sweat arises, which in a few hours terminates the disorder. The eruption

tion turns pale, the cuticle falls off in scales, and, not seldom, that of the hands and feet cohering : The pulse regains its ease and slowness, though slightly embarrassed towards night for a day or two : The swellings of the glands gradually subside, but may not entirely disappear in a fortnight : Respiration is performed without labour : The tongue is clean and moist ; expectoration of a thick matter ensues ; the ulcers in the throat cast off their sloughs, and appear almost healed ; the appetite returns, and the patient, by the seventh or eighth day from the first attack, recovers his usual health. Sometimes a looseness, instead of the sweat, forms the crisis, and a few instances occurred, where they jointly contributed to the solution of the fever.

AS to the cure, I always found an emetic given as soon as possible, to be of great service. The disease ran its course with more ease, regularity, and fewer alarming symptoms than when omitted. In one instance of a youth of fourteen, a vomit of tart. emet. put an entire end to the fever, the eruption, notwithstanding, succeeding at the usual time. Ipecac was the emetic generally exhibited, assisted by a free use of warm water.

AN emollient clyster, sharpened at times with sea salt, was daily administered. A cathartic was seldom given, unless an urgent diarrhæa made a dose or two of rhubarb necessary.

A HOT room, or a current of air, were equally to be avoided. The patients were allowed a free use of all kinds of vegetable acids. Vinegar whey, a little warmed, they were enjoined to drink, especially through the night. They also drank an infusion of flaxseed and hyfop, sweetened with honey, whenever a cough attended, which was not uncommon.

A POWDER of crem. tart. and camphor, and the saline draught, made with vinegar, were given through the whole complaint, without variation, unless the symptoms were highly inflammatory; in which case, nitre was substituted for the cream of tartar. They generally required a quieting draught at night. If the pulse flagged towards the acmé, an addition was made of sal succin. tinct. myrrh. and an infusion of the wild valerian, or the spirits of mindeneri. Pediluvia were constantly used in the evening, and, at times, sinapisms.

BLISTERS were never used, except in a retrocession of the eruption; at which time, success always attended their application.

THE marine acid, so far diluted with water, and dulcified with honey as to make it palatable, served for the gargarism. The sick, by its allaying the tormenting heat and dryness of the throat, and bringing on an agreeable cool sensation, expressed the highest approbation of the medicine.

WHEN this disease was amongst us, about fourteen years ago, mercurials and antimonials were given with a success truly astonishing: But at this time, the quick, weak and hurried pulse, the rapid progress of the complaint, and the great irritability of the nervous system, deterred me from the use of them, especially mercurials. And finding the above method answer extremely well, I confined myself to it.

ON the third or fourth day of the disease, should the pulse grow weaker and softer, the face and neck put on a very bloated appearance, respiration grow more laborious, with a peculiar kind of catching the breath or double breathing; and an anxiety of five or six minutes continuance, come on three or four times in an hour, such as induces the patient to bite his hands and arms, death may be expected on the fifth day. This alteration in the disorder is sudden, and not to be foreseen, and, when taken place, I was never so fortunate as to find a medicine that would prevent, or even retard the fatal catastrophe. The skin, after death, would immediately turn very black, and sometimes, previous thereto, would be spotted in many places with green.

IF on the fifth day the crisis is not complete, and the fever and quickness of pulse, though moderated, still keep on to a certain degree, we may then expect a suppuration of the tumid glands under the ears.

ears. This often happened when there was no eruption. These tumors must now be ripened as fast as possible : A poultice of white bread, milk, and castile soap, or Indian meal with milk and water, answers this purpose. Before this time, I never directed any external application to the throat. During this period they drink a decoction of the woods, and are indulged with a little wine. In a week or ten days, the tumors are sufficiently matured to be opened ; after which they may be dressed with any digestive. The bark can now be given with effect. I knew of but one who died of these ulcers ; which happened about six weeks after the seizure. The ulcerations were large, the absorption of matter great, and his knees and ankles greatly inflamed, and about suppurating, when the child was obliged to submit to fate. In a few cases at first, I attempted to carry off these swellings by attenuants, blisters, and purges ; but the consequences rather confirmed the maxim—*It is sometimes very dangerous for art, to undertake to defeat a suppuration which nature is preparing.*

IN a day or two after the crisis, even when complete, many were seized with swelled wrists and ankles, accompanied with redness and great pain, in every respect similar to an acute rheumatism. This was commonly brought on by exposing themselves to wet rooms or a damp air. A decoction of sarsaparilla, the bark of the root of saffras, garden
scurvy

ſcurvy grafs, and the branches of fever wood, would often rout this enemy in twenty four hours. It operated by ſweat.

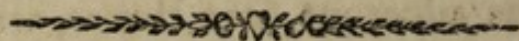
MANY of the ſick were alſo ſubject, in a day or two after the criſis, to an univerſal tumefaction: From head to foot the cellular membrane would be puffed up like a bladder. At this time they made but little water. Thoſe who had been ſlightly affected with the ulcerous fore throat, were as liable to this complaint, as thoſe who had been ever ſo roughly treated by it. Neither could I perceive that any irregularity in their conduct could be aſſigned as the cauſe. Though its appearance was alarming, it never proved fatal. A powder of crude ſal ammoniac and ſquills exterminated it in fourteen days.

THIS diſeaſe, within the compaſs of my obſervation, never attacked the ſame perſon twice. Although it was evidently contagious, yet many were ſeized who had not been in the way of infection. I could not determine, though particularly attentive to that matter, the length of time the infection required to manifeſt its effect.

AMONG the many medicines in high eſtimation with the common people, and uſed by them without the advice of the phyſician, I know of none worth the leaſt conſideration, excepting the marſh roſemary, or, as it is commonly called, marſh root.

This

This, in a large dose, operates as a vomit ; in a smaller, proves a powerful expectorant ; and, from its sensible qualities, one would suppose it to possess considerable antiseptic powers. I am well assured it was the basis of a medicine used by a physician in Providence, with very great success, in this complaint. It is undoubtedly of great efficacy, and deserves a more thorough investigation.



A R T I C L E III.

EXPERIMENTS *made with the common Cow Parsnip, (spondylium vulgare hirsutum, Park. C. B.) in cases of EPILEPSY. Communicated by the late JOSEPH ORNE, A. M. A. A. S. Fellow of the Massachusetts Medical Society, and Physician at Salem.*

S A L E M, OCTOBER, 1783.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

SO many medicines having been lately pointed out for the cure of epilepsy, all of which we presume to be in some instances ineffectual, I hope no apology need be offered for recommending to farther trials a plant of the growth of our own country, which I believe has produced very essential relief

rief in this disease. I shall therefore take the liberty to communicate a detail of those cases in which it has been prescribed, with the event of the exhibition in each.

THE plant referred to is the *common Cow Parsnip*, *Sphondylium vulgare hirsutum*, Park. C. B. It grows in hedges; the stalk is large and tubular, invested with a down, which also covers the leaves, that are large and jagged, five on each stalk, and of the colour of wormwood; it is umbelliferous, and flowers in June; the root is divided into several long fibrous branches, resembling a large parsley root; and the height of the plant in its maturity, may be from two to four feet: The root has a rank strong smell, and a pungent and almost caustic taste; it should be carefully distinguished from the common parsnip, that grows wild in gardens, and hedges, and indeed, it has a very different appearance.

C A S E I.—1772.

G. S. a laborer, aged 30 years, of a slender habit, but healthy, coming out of a deep well (in which he had continued an hour to clear it) felt himself chilly, sick at the stomach, and vomited copiously. The nausea, with a disinclination to exercise, and a great degree of weakness, continued about five weeks, and then in the evening, after a day of labor, he was seized with a severe fit of epilepsy. I saw him just as it was going off, and as I knew nothing of the

preceding circumstances, finding his pulse full, I bled him; he presently recovered his understanding, and as he made no great complaint, but seemed sleepy and declined taking any medicine, I left him. The next day he followed his labor, and felt as well as before. In a few weeks he had a second, and after a short interval, another paroxysm; and perceiving his memory, or rather his faculty of recollection greatly impaired, he was much alarmed, and applied for advice. As he still complained of nausea, and was costive, I directed a vomit, and afterwards some aloetic medicines, with soap, &c. Soon after, however, his disease returned, and by advice of an eminent physician, he took large doses of camphire in tinct. sac. besides a liberal use of valerian, volatile alkali, &c. The progress of the complaint seemed rather accelerated, till wearied with the disease, and distrusting the efficacy of medicine, he began to despair; when one of his neighbours confidently urged him to try *Cow Parsnip*, alledging that it had lately cured his wife of a similar complaint (though in fact it was only an hysterical indisposition) and encouraged him to expect a cure of it also: He forthwith began the use of it, and apparently with great and immediate advantage: He first felt himself relieved of flatulence, which had constantly attended him; from confused vertiginous symptoms, which had greatly increased since the latter paroxysms, and when very violent

always

always announced a fit at hand, though he was sometimes seized without a moment of warning: His strength and spirits returned; his faculties became brighter; and, unless after great fatigue, or long fasting, (as he works hard, and is not of the firmest habit) he has never suffered a single return. For five or six years he has been perfectly free, excepting that he is liable to giddiness and trembling; but by returning to his medicine, finds infallible relief. I saw him only a few days since; he complained then of "*the fits working in him,*" to use his own phrase; said he must take his medicine soon, and seemed to depend on its efficacy with the securest and most implicit confidence.

C A S E II.—1773.

W. R. aged eighteen years, of that habit which has been denominated phlegmatic; pale, and of lax fibres, after labor in the field in a hot day, and drinking immoderately of small beer, was suddenly struck down with a fit, which, from the description, I believed to be of the epileptic kind. I saw him afterwards in several paroxysms, and they were truly such. I bled this patient, and vomited him repeatedly; gave him quinquina, eleutherium, stomachics of every kind, steel in various forms, directed the cold bath, and inoculated him with the small pox, which produced a long pause; I therefore cut two issues soon after, and to close the whole, he took

the *Cow Parsnip* very liberally, and with great confidence; yet his epileptic shocks still recur, and he is now by turns an idiot or a maniac.

C A S E III.—1774.

J. P. a lad of twelve years, of delicate irritable fibres, and liable to incontinence of urine during his sleep, had been for two years afflicted with epilepsy. Besides all the applications enumerated above, among which the *Cow Parsnip* had a very fair trial, the good women gave him a whole human placenta, dried and pulverized, which they declared would do wonders, but in vain; the disease continued obstinate, and the lad was cured at length by a voyage to sea. This patient was one of those who are invaded with the fits only during sleep. From some late conversation with Dr. Holyoke, who has succeeded in three or four cases of this kind with a very different medicine, I suppose it is another species of the disease.

C A S E IV.—December, 1782.

J. D. about forty years of age, suddenly fell down in a state of insensibility. I was called instantly, and found him under a complete and severe paroxysm of epilepsy: In two or three weeks he had a second attack; and by the last of March he had eight fits, so that they had become habitual. I gave him only a vomit at each return, as his stomach was liable to be disordered; for he was not only intemperate,

perate, but very irregular in his manner of living, eating voraciously at some times, and starving at others, as opportunity or necessity determined him ; and constantly chewing great quantities of tobacco. Having heard that the flowers of zinc had lost reputation among the medical gentlemen at Boston, and knowing nothing then of the cuprum ammoniac. of the success of which, in this disease, some cases are related in the last volumes of the Edinburgh Medical Commentaries, I determined to wait till the season for gathering the *Cow Parsnip*, and try it fairly ; because I had once known it to succeed, which I could not say of any other medicine that I had ever given to an adult epileptic subject. About the 10th of April, 1783, till which time the accessions grew more frequent, he began the use of it : He was then much debilitated in body ; his mental faculties were perceptibly impaired, and his aspect and manners indicated a most pitiable declension of the general constitution. From the time he used the *Cow Parsnip* he has never had a single return of his complaint ; he feels none of that confusion and vertigo, which he always considered as the signs of an approaching paroxysm ; his general health is good ; his faculties perhaps as vigorous as before, and the whole appearance of the man essentially improved. Once after long fasting, and great fatigue, being surpris'd in a small fishing boat by a storm, he felt himself extremely disorder'd, and confidently

confidently predicted a new accession of his disease, of which he has the severest terrors; but a warm supper, and a more liberal potation of his medicine, restored him to his wonted calmness. I ought not to omit that excepting the disuse of tobacco, he never changed his habits of living.

C A S E V.

IN May, 1783, I directed the *Cow Parsnip* to a girl, eighteen or twenty years old, said to have suffered several attacks of epilepsy. I questioned the person who applied to me, and believed that to be her disease; since then I have conversed with the patient, and those who have seen her in the fit, and they very exactly describe the epilepsy. She was always in ill health, from the first invasion, till she used this medicine; complained of loss of appetite, anxiety, distress, and trembling in the region of the stomach, &c. Since then she has been entirely free from every complaint: But it is remarkable, that having expended her first supply, and being obliged to remit the use of it for eight or ten days, her unfavorable symptoms returned; but were removed as soon as she could have recourse to the medicine. I saw her a few weeks since; she was then in good health.

I HAVE commonly prescribed two or three drachms of the pulverized roots to be taken every day

day for a great length of time, and a strong infusion of the leaves and tops to be drank at bed time. The patient in the fourth case chewed it, instead of tobacco, constantly.

ON reading this plain narrative of five epileptic patients, three of whom seem to have derived essential relief from the medicine here recommended, while two others received not the smallest advantage, it is obvious to remark, that in different subjects the disease may be specifically different. But although it has been in my way to have seen the trial of the cow parsnip oftener than any physician of my acquaintance; and as matter of novelty, and curiosity, I have minutely attended to its effects in all these cases, yet I cannot point out any of those pathological distinctions which are to determine when it may be most expedient to advise it; unless we may be guided in the prescription, by this circumstance, which I well remember, that in the three fortunate cases the patients were remarkably liable to flatulence, with symptoms of morbid sensibility of the stomach; and date their first relief from the sensation of a more firm and healthful tone of that organ, and the camianative effects of the medicine. If what is here related shall induce any gentleman to make trial of it, I shall be happy to be confirmed in the opinion that it is a medicine of great efficacy, and will perhaps not unfrequently be found to produce very agreeable effects.

A R T I C L E IV.

An Account of the successful Treatment of a PARALYSIS of the LOWER LIMBS, occasioned by a curvature of the SPINE. Communicated by NATHANIEL W. APPLETON, A. M. A. A. S. Fellow of the Massachusetts Medical Society, and Physician at Boston.

BOSTON, OCTOBER, 1786.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

IN the course of the present year, a case of paralysis of the lower limbs has occurred to my practice. I now take the liberty to communicate it, for your inspection; probably the success attending the treatment, may induce others to try the like method in similar cases.

JOHN ———, a negro boy, born in this town; at the age of ten months could go alone, and appeared in every respect a well formed and healthy child, until he was about twenty two months old, at which time he was observed to falter in his steps and to trip up, without any evident cause, when walking across the floor. Upon endeavoring to stand upright, his ancles and knees grew stiff, and

he

he would pitch forward. When held up by the arms he would point his toes forward, throw his body back, and in that position allow himself to be moved onward, but without touching his heels to the ground. At this time, viz. about 15th last March, I was sent for to visit him, and upon finding his complaints as mentioned above, immediately suspected his disorder to arise from, or be accompanied with, a curvature of the spine; a disease particularly treated of by *Pott*, in some of the late editions of his chirurgical works, and called a paralysis of the lower limbs. Upon viewing the child's back, there was evidently a curvature of the dorsal vertebræ; also an oblong swelling nearly the size of an hen's egg, situated between the base of the right scapula, the lower vertebræ of the neck and upper of the back, which gave him some pain when handled. In addition to most of the symptoms mentioned by that author, there was an almost constant and very painful erection of the penis, especially when put upon his feet; he was not able to turn himself in bed, and when sitting in a chair, would bend his head forward almost to meet his knees. Several medical gentlemen of my acquaintance visited the child with me; we all agreed that this was a proper subject for a trial of *Pott's* method of treatment.* Accordingly on 25th March, I applied two caustics, each of the size of a nine penny

* *Vide* the chirurgical works of Percivall Pott, F. R. S. Vol. III. page 393. Lond. 1783.

ny piece, one on each side of the middle of the dorsal vertebræ, about two inches apart. In a few days the eschars threw off. After some time and trouble the issues began to discharge, and the patient remained much the same, until about three months after the running commenced; at which time all the bad symptoms began to lessen; he could turn himself in bed, and could walk a little by holding of the chairs, &c. exactly similar to a young child's first learning to go alone. He has now entirely recovered the use of his limbs, and is apparently as well as ever, or as any other child of his age. One of the issues healed up in a few weeks, the other remains open; the tumor mentioned above has almost disappeared, and gives no pain when handled.*

* The issue remained open twelve months; the tumor has disappeared, and the patient been well ever since.—*March, 1790.*

A R T I C L E V.

Remarks upon the superior advantages of covering with the skin, parts recently exposed. Communicated by the late Dr. EDWARD WYER, Fellow of the Massachusetts Medical Society, and Physician at Halifax, Nova Scotia.

HALIFAX, DECEMBER, 1784.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

AMIDST the many improvements that are daily made in the different branches of our profession, the great success which has been found to follow attempts to cover large denuded surfaces (after capital operations) with the natural skin, instead of lint and other substances, appears to demand particular attention.

A PAMPHLET* lately published in England upon an improved method of amputating, and treating the stump, was sent me shortly after it made its first appearance. The plan proposed, appeared to me so rational, that I determined to try it whenever a proper

* Practical observations upon amputation and the after treatment. By Edward Alanson, surgeon to the Liverpool infirmary. Lond. 1779.

proper case should occur. Shortly after, I had occasion to amputate a leg, and an arm ; I proceeded as the author (Mr. Alanfon) directs : The very favourable event surprifed feveral of my medical friends, who were fpectators of the whole procefs. The ftump of the leg was completely healed in fixteen days, the arm in three weeks. I am confident there was not fecreted, upon both ftumps together, fo much as four ounces of pus ; the patients never complained of the leaft pain in removing the dreffings, or did a fingle unpleafant fymptom occur from the amputation of either.

AS I prefume the pamphlet I have mentioned has been feen by the faculty in New England, I think it needlefs to repeat the particulars of my procedure in the above cafes, when I affirm that I followed in every particular, the method therein recommended.

IN a child of four years of age, I lately cut for the ftone, the cure was completed by the firft intention in the courfe of thirty days, without the leaft inflammation or formation of matter.

A FRIEND of mine in London, has lately fent me a cafe in which it was neceffary to apply the trepan. The bone was firft laid bare, by dividing the fcalp with a crucial incifion, and then diffefting back the four corners ; care was taken to leave the pericranium on every part, but juft where the bone

was to be taken out. After removing the extravasated blood from the dura mater, the parts were carefully cleansed by a soft sponge, and warm water; then the four flaps of skin, with the adhering cellular membrane which had been turned back, were brought into their proper places, and secured by strips of sticking plaister; they soon united with the pericranium, and the cure was completed in less than half the time, which is generally found necessary in the usual way of proceeding in similar instances.

THE case I have now taken the liberty of laying before your society, appears to me a most convincing proof of the great propriety of endeavoring in every case, which will admit it, to cover with the skin, such parts as have been laid bare in any kind of injury, or operation.

ON the 15th of November, 1784, M. Reed, aged 45, desired my opinion, of a large swelling situated upon the back side of the middle of the left thigh. She informed me it had been gradually forming seven years; that its increase lately had been very rapid; it was free from pain, but was very inconvenient when she either sat or walked.

I FOUND the swelling in the place mentioned; its size was about that of two fists, the figure conical; it measured about seven inches in circumference at the basis; was about five inches high, and terminated

terminated in a point like the dug of a cow : The colour of the body of it was white ; towards the end it was of a deep red ; it had the usual feel of a steatomatous tumor, and seemed to originate below the surface of the thigh.

FROM a consideration of its situation, which was at some distance from any large vessels ; of its increase, which lately had been rapid ; and of her general health, which was good, I advised an immediate removal of it. She consented, and on the following day I did it ; first making a longitudinal incision, and then dissecting it out, in doing which, I had occasion to lay bare a portion of the pectineus, and part of the two lesser heads, of the triceps femoris muscles. As my patient was possessed of great fortitude, I took my own time, and dissected out the cyst complete ; two small arteries were divided, which were easily stopt by the fingers of an assistant. I was very careful to save as much skin as possible, a precaution I have often experienced the utility of, in different operations. Upon cleansing the cavity with a sponge and warm water, it appeared very large, and gave me good reason to expect considerable time would be necessary to complete the cure.

INSTEAD of cramming the wound with lint, &c. as is the custom after most large operations, I made an attempt to bring the opposite edges of the skin
into

into contact; I found it might easily be done. I now thought this a good case, in which to try what might be effected, in attempting to cover so large a cavity with the skin, and effect a reunion by the first intention, without the interposition of any foreign body whatever. I accordingly retained the opposite sides of the skin, and cellular membrane, by several stitches at about an inch distance from each other, the edges fortunately fitted very exactly; I left the most depending corner open as a drain; the wound was then covered with dry lint, over that a compress, and the whole secured by the common spiral bandage.

THE next day I found my patient walking in the yard, without the least pain. I immediately ordered her to bed, and enjoined perfect rest, fearing the stitches might be broke out by motion. As the dressings remained as I left them the day before, I made no attempt to remove them. On the day following, I found the dressings moistened with a discharge; I now removed them, and found the edges of the wound in perfect contact; not the least swelling or inflammation; no fever, nor any one unpleasant symptom. I applied a small pledgit of wax and oil, and left her in bed, but was told at my visit the next day, that she was too well to be confined. I dressed her as before: Judge what must have been the satisfaction I felt, upon handling the part, to find that the cavity seemed in

a manner obliterated ; that the corner I had left open, was the only appearance of a wound ; that the matter discharged was good, though rather copious ; that a complete reunion had taken place ; in a word, that there was not the least drawing or stretching upon moving the leg ; that she could eat, drink, and sleep, and was in good spirits, thinking herself almost well.

I GAVE her the bark, to obviate the consequences of a too free discharge, and still enjoined rest.

I CONTINUED to dress her as above, for ten days longer, at which time the lower corner was closed, not the least deformity remained, and she was discharged in perfect health, in twelve days from the operation.

UPON opening the tumor after it was removed, a fatty substance was found, contained in a complete cyst.

THAT parts possessing the principle of life, when deprived of their natural covering, and kept in contact, will readily unite, is proved not only by many experiments made to ascertain the fact, but also by daily experience in practice.

THAT to a muscle, nerve, tendon, or blood vessel, laid bare by any means, a softer and less irritating substance cannot be applied than that of the skin and cellular membrane, is determined beyond dispute.

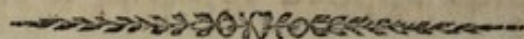
THAT granulation proceeds most rapidly where there is least irritation, is a fact generally admitted.

THAT the quantity of pus depends upon that particular configuration of vessels, which inflammation produces, all allow.

AND, that the inflammation will depend upon the degree of irritability of the parts, and the degree of stimulus applied to them, is extremely obvious.

THE conclusions I would draw from the above particulars, are, that in every instance where the skin can any way be brought to cover parts lately exposed, the consequences will be, the saving the patient much pain and inflammation; and if the part is extremely irritable, perhaps frequent spasms, and considerable fever. The granulation by which the loss of substance will be restored, will be much more rapid, and all or most of the disagreeable consequences of large discharges, sloughing of the neighbouring parts, &c. will by this method of dressing be in a great measure prevented. To support these conclusions, I think the case I have related might with propriety be quoted; but every gentleman who has been in the habit of seeing much business, must be convinced of the superior advantages of the method I followed in this case to those commonly used in similar instances.

IT affords a pleasant reflection that our art, like the art of war, is humanized in a degree not known in former ages ; and that the freedom of inquiry so generally admitted at this day, joined to the liberal manner in which each individual appears disposed to communicate his discoveries to his brethren, are the sources from which we have derived, and may still continue to derive, the most useful information.



A R T I C L E VI.

A Case of EMPYEMA, successfully treated by the Operation. Communicated by ISAAC RAND, Esq. Vice President of the Massachusetts Medical Society, and Physician at Cambridge.

CAMBRIDGE, MAY, 1783.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

IN May, 1756, James Monro, an apprentice to a blacksmith, in Cambridge, was seized with a pleuro peripneumony. The third day of the disease I saw him, bled him that and the next day, and with the usual treatment, the complaints partially terminated the seventh, by expectoration. I saw him occasionally from time to time, until the 8th of
June :

June: He then went to his parents at Lexington, and continued there about fourteen days, in which time he grew much worse. June 27th, late in the evening, I was desired to visit him, and was informed that two days before, when his brother was helping him from his horse, something had broken within him, but had no discharge by the mouth; I was much surprised to find his thorax so largely distended, and attended with vast difficulty of respiration, which threatened suffocation; upon pressure from side to side, or from the back to the breast, there was an evident fluctuation of a great quantity of fluid, and no expectoration. I proposed, as the only method of relief (the operation for the empyema) which I could suggest. He was very averse to it; but after a little reflection, as he was conscious that he was in extreme danger, he consented. Being called so late in the evening, and not being provided for the operation, as I was then three miles from home, deferred it until the next morning. I saw him early, and nothing having occurred to prohibit the evacuation of the fluid, I made an opening of three quarters of an inch, at the usual place on the left side, as his complaints had been most severe there, (no one part being more prominent than the other) and discharged about five pints of thick pus. As he began to faint, I stopped the orifice, and secured the dressings with proper bandage. On the second morning the discharge was about the same quantity; on the third

morning about two quarts, and at each time flowed with great violence. On the fourth morning I found him very faint; a great quantity of pus had been discharged; had wet through the feather and straw bed, and near a quart of pus ran on the floor. Upon removing the dressings, I was much surprised to find a part of the lungs (as big as a nutmeg) protruding through the orifice in the side, in a mortified state; and as in desperate cases, doubtful and bold methods may be pursued, I extracted the part of the lungs, until I discovered the termination of the diseased part, and cut it off close to the uninfected part, and then replaced it in the thorax, and secured the dressings in such a manner, as to prevent the like accident again. On the fifth day from the opening his side, he received the fumes of pulv. G. thuris, mastich. myrrh. et oliban. through an inverted funnel into his lungs by his mouth, and in nine days the fumes past through his lungs and came out at the orifice in his side; during which time he took no medicine but a decoction of cort. peruv. the abscess and the external opening healed in sixteen days, and he recovered his usual state of health. In the month of October following he went as a soldier to garrison fort Cumberland, in Nova Scotia; was there eighteen months; returned in good health, and has followed his business of a blacksmith ever since. He is subject to the asthma, but it is a family disorder.

A R T I C L E VII.

Observations on the HYDROCEPHALUS INTERNUS.

Communicated by ISAAC RAND, jun. A. M.

Fellow of the Massachusetts Medical Society, and

Physician at Boston.

BOSTON, APRIL, 1789.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

THE hydrocephalus internus is a disease, so insidious in its attack, often rapid in its progress, and fatal in its termination, that any hints arising from the inspection of the parts diseased, that may tend to point it out in its access, and contribute to a more successful mode of practice than the present, I doubt not will be candidly received by physicians.

I HOPE to throw some light upon the disease, in the following observations, upon the appearances of the internal parts of the head of S. W. who died of an acute hydrocephalus internus, the 20th of January, 1789, whom I first saw in the second stage of the disease, the 10th of the month. The 21st I inspected the head in presence of Dr. Kest.

AFTER

AFTER the integuments of the cranium were removed, the bones, instead of a blueish white, appeared rather of a florid color; and when separated from the dura mater, the vessels of the internal parts of the cranium were turgid with blood: But there was no effusion of blood or water between the dura mater and the cranium, or between the membranes and brain. The dura and pia mater were inflamed; the vessels to their remotest series in the convolutions and plicatures of the cerebrum and cerebellum were very much distended with blood; and upon removing the hemispheres of the cerebrum, we found, under the corpus callosum, in the lateral ventricles, between two and three ounces of a pellucid lymph, which gushed out with great force; and upon gently moving the head from side to side, a fluid, tinged with blood, flowed out to the amount of almost an ounce. The other parts were in a natural state.

THE hydrocephalus internus has been esteemed by most physicians, except the late Dr. Fothergill, a chronic disease. In this child it was evidently an acute one. I had never before seen this disease in so young a child,* although I have attended seven with it: One adult, a miss of ten years, and five, all females, between five and three years of age; in all of whom it was an acute disease, except the adult.

FROM

* Eighteen months.

FROM the rather florid appearance of the external and internal parts of the bones of the cranium, the plethoric state of the vessels of the meninges of the brain, is it not probable that the effusion of water into the ventricles of the brain, was the effect of inflammation or plethora of the vessels of the brain; than that the pressure of the water in the ventricles was the cause of inflammation of the meninges? In support of this opinion, I would observe* the plexus choroides is a vascular web, consisting of a great number of arterial and venal ramifications, partly collected in two loose fasciculi, which lie one in each lateral ventricle, and partly expanded over the neighbouring parts; and continued in part into the third ventricle; from which structure any inflammation or plethora of the vessels of the brain in young subjects, or adults of a lax irritable habit, will more probably produce an effusion of water into the ventricles, than any other parts of the brain: For by the great distension of the sanguiferous arteries, the lymph will be exhaled in too great quantities for the lymphatics to absorb; the consequence of which will be a dropsy of the ventricles of the brain. May we not thence infer that the hydrocephalus internus is a consequence of, and not an idiopathic disease? † Wepferi historię apoplecticorum furnish instances of the ventricles being partly filled with lymph, and
the

* Winslow's Anatomy of the Brain.

† Historię apoplec. hist. secunda, tertia et quarta.

the plexus choroides being turgid with blood, and otherwise diseased. Morgagni* de causis et sedibus morborum per anatomen indagatis, in epistola de apoplexia serosa, mentions the plexus choroides being turgid with vesicles of water; and subjoins, at No. 33, "sed tu fortassis cum iis facis qui aquæ effusionem malunt nunquam apoplexiæ causam esse sed effectum ejusdem causæ, quæ apoplexiam facit, ut puta sanguinis in vasis quæ in cerebro et circa cerebrum sunt restitantis."†

THE proximate causes of the inflammation and plethora of the vessels of the meninges of the brain, are

* Morgagni de causis et sedib. morb. in epistola duodecima de hydroceph. interno.

† "The parts of the body are successively evolved; the head, which for several purposes of the animal economy, is first evolved, and comes first to its full size. This certainly happens from the vessels of the head, being in respect of capacity and density, suited to that end; and consequently in the first part of life, the blood is determined, in a proportionally greater quantity, into the vessels of the head, than into other parts of the system; and it is sufficiently probable, that this proportion is greater as the animal is nearer to its origin, and continues greater till the body attains its full growth."* After the bones of the cranium are so far ossified as to prevent any further enlargement of its contents, the chylopoetic system still generates such a quantity of fluids, as not only to repair the waste of the body by exercise, &c. but to contribute to its increase, till it has attained its acmé. In infancy, therefore, there is a greater disposition to a plethora of the vessels of the brain, which renders that age more subject to disease, terminating in hydrocephalus internus, than perhaps any other stage of existence.

* Cullen's Materia Medica. Distribution of the Fluids, Art. III,

are an increased action of the vessels in the system in general ; an inflammatory diathesis ; suppressed excretions ; violent exercise ; unnatural positions of the body and head ; a spasm upon the superficial vessels ; the exposure of the naked head to the sun, and whatever may directly stimulate the membranes of the brain.

THE diagnostic is of the utmost importance, especially in the first stage ; as we may infer from the many histories of unsuccessful cases, although attended by the most eminent of the profession in Europe and America ; and I fear ever will be, unless we can discover the disease before it arrives at the second stage, when the pulse begins to be slower than natural, and irregular : Then every effort will prove abortive, as the effusion of the lymph then begins to take place in the ventricles of the brain.

CHILDREN, and some adults of irritable habits, are the subjects of it.

IN the first stage the pulse is quick, sometimes hard and feverish ; the head is always hot from the first access, as are the præcordia.

THE fever is irregular in its accessions and remissions ; of no certain type, but increasing towards evening. Most complain of a pain in some part below the head ; most commonly about the nape of the neck and shoulders.

THE head and stomach are disordered more or less from the beginning; some have violent headaches, and sickness at the stomach alternately, and often complain of a most acute pain, deep seated in the head, and extending across the forehead, and through the temples; often crying out in the most affecting manner—*Oh, my head! Oh, I am sick!*—are restless in the night; screaming, as if something had hurt them, and squeeze the sides of their head with great violence.

THEY are averse to light,* and shun it as much as possible: The pupils are a little contracted; they vomit once or twice in a day: Some bleed at the nose, which affords a temporary relief. One circumstance, almost peculiar to this disease, all without exception are so costive, as to require the most active cathartics, assisted with stimulating glysters to procure stools, which are of a very dark greenish color, with an oiliness, or glassy bile, rather than the natural slime that accompanies worms; and singularly offensive.

THEY are averse to motion; lose their appetite; are thirsty, and swallow with great greediness. Most of the complaints arising from irritation of the
brain,

* The contraction of the pupils, and the aversion to light, in the first and beginning of the second stage of the disease, depend upon the inflamed state of the meninges of the brain, which increase the sensibility of the iris.

brain, accompany this disease.* In the second stage the pulse is slow ; very irregular ; often not exceeding forty in a minute ; the pupils are dilated ; sometimes there is an extreme vigilance ; oftener a somnolency.

DR. Cullen defines it in his nosology, *apoplexia hydrocephalica paulatim adoriens ; infantes et impubes, primum lassitudine, febricula et dolore capitis, dein pulsu tardiore, pupillæ dilatatione ; et somnolentia afficiens* : And subjoins in a note, in opere nosologico, *morbos qui sub suo decursu, variam induant formam, rite collocare, ideoque apoplexiæ hydrocephalicæ locum maxime idoneum assignare, difficile est. Hunc morbum autem sub apoplexiæ potius quam hydrocephali titulo ponere vellem ; Primo, quia hydrocephalus, qui hic subest, nequaquam sensibus evidens est ; dein quia hic morbus symptomatis ab hydrocephalo evidente plurimum differt. Denique, quia causa proxima et tandem symptomaticis, apoplexiæ quam maxime affinis est.*

METHOD of CURE.

IN the first stage the most active remedies are to be used, such as venæsection at the arm or jugular vein.

* *Vide*, Whytt on hydroceph. intern. Fothergill and Watson, in London Medical Observations and Inquiries, vol. 4th. Motherby's Medical Dictionary, voce, hydroceph. int. Ree's edition of Chambers' Cyclopædia, voce, hydroceph. intern. Percival, and Dawson, in Duncan's Medical Commentaries ; and Symmons, in ditto.

vein. Apply leeches to the temples, and behind the ears ; scarify and cup the temples ; excite an hemorrhage at the nose ; scarify and cup the nape of the neck ;* give gentle cathartics, as they operate by revulsion, cool the body, and remove any difficulty in the circulation through the lower belly ; assist their action with stimulating glysters ; keep the body in an erect position, as it lessens the impulse of the blood upon the head, and facilitates the return of the refluent blood ; shave the head, bathe it with æther, as evaporation generates cold by absorbing the heat from the contiguous parts, and will have a tendency to lessen the inflammation of the internal parts ; blister the whole head, and keep up the discharge with the vesicating ointment ; blister the nape of the neck, the temples, and behind the ears ; use warm pediluvia ; give saline draughts and saline diuretics. May not nauseating doses, by lessening the spasm upon the vessels of the brain, easing pain, and diffusing the circulations, be advantageous ?

PERHAPS

* Morgagni venarum occipitalium incisionem eximie collaudat ; quia hæ venæ intra cranium cum utroque laterali sinu communicant, eaque propter instituta ipsarum sectione sanguis quem in sinus convectoræ erant, avertitur, atque hinc reliqui sanguinis, qui per eosdem sinus progreditur, copia minuitur aliquantulum, motus autem non sine emolumento augetur. Quia vero harum venarum trunci profundius siti, et non nunquam in plures minores que ramos divisi reperiuntur, *cucurbitulas et crebas, altasque incisiones* ante ferendas putat."—*Hofmanni Medic. ratio, System ; Tom, IV de hæmorrhagia cerebri.*

PERHAPS some from timidity may be restrained from bleeding such young subjects, to whom this disease is most incident. The great Sydenham* long since has combated this prejudice, and proved the great utility of venæsection in many diseases of infants.

IN the second stage, nothing has been proposed that I know of, that is adequate to the cure or relief. There is therefore every stimulus to induce physicians to mark with precision the symptoms denoting the disease in the first or inflammatory stage.

MERCURY has been proposed by the very ingenious Percival and Dawson, "and much has been said in favour of exciting a salivation by mercury, at least of using it so as to restore the necessary absorption of the fluids in the ventricles of the brain; but it is objected that when mercury has been useful, the disease has been mistaken, and that it was not the hydrocephalus internus."†

TO this observation it may be added, that the disease would probably be increased by mercury, when used to excite a salivation in the first stage, as it would

* Sydenham *Histor. Morbil. epid. Anno. 1674,* et Mead de *Morbillis.*

† *London Medical Transactions, Vol. II. Edinburgh Medical Comment. Vols. V. VII. VIII. Motherby's Medical Dictionary, voce, hydroceph. int. and Medical Observations and Inquiries, Vol. VI.*

would, by its irritation, accelerate the fluids in the carotids and vertebral arteries, and therefore increase the inflammation; and is problematical in the second.

IN one case of an adult, in whom the disease was rather chronic, a perpetual blister to the head, and a seton in the nape of the neck, afforded a temporary relief, and protracted life.

IN the year 1783, a gentleman of the faculty observed to me, that he had inspected the head of a child, who died with all the symptoms of the hydrocephalus internus; and that he and another physician were surpris'd that there was no water in the ventricles of the brain, but that the meninges of the brain were very much inflamed.

THIS observation led me to pay particular attention to this disease; and the next child I saw with it, which was in 1784, I propos'd, in a consultation with Dr. Danforth, venæsection; and notwithstanding the disease was in the beginning of the second stage, it afforded great relief from pain, and a truce to the disease; however, the child died.

IN the year 1785, the sister of the last patient was seiz'd with violent pain in the head, deep seated, and extending through the temples, with an impatience of light, sickness at stomach, extreme costiveness, no appetite. Her mother early consulted me,
and

and observed that this child's complaints were so similar to those of the other daughter, who had died the year before, that she was much alarmed; and therefore asked my advice.

I THOUGHT it was an incipient hydrocephalus internus. I bled her largely at the arm, gave her cooling saline cathartics; haustus salinus; used warm pediluvia, and a strictly antiphlogistic course of medicines and diet, by which she was restored to health.

SINCE I wrote the above, I have seen an inaugural thesis in the thesaurus medicus novus Edenfis, by Dr. Quin, de hydrocephalo interno, published 1786. When I read it, I was surpris'd that Dr. Quin, so long since as 1779, should have hinted, and brought some dissections of subjects who had died of this disease in proof of the hydrocephalus internus, being a consequence of inflammation of the meninges of the brain; and propos'd a method of cure, so very different from every author I have seen upon the subject before him: And that no author who had since written upon the subject, that I know of, should have mention'd it.*

THE

* The following detached Essays on this disease have been published since 1779:—Manning's improvements in the modern practice of physic, last edition.—Lee Perkins, vol. I, of second decad Med. Commentaries, 1786.—Motherby's Medical Dictionary, second edition, 1785.—Doct'or Ree's edition of Chambers' Cyclopædia, 1786.—Hooper and Lettsom in memoirs of the London Medical Society, vol. I, 1786. None of which take any notice of Quin's thesis.

THE monthly review, for November, 1785, observes, that Dr. Withering, on the digitalis, conjectured that the disease arose from inflammation. I have not seen the essay on the digitalis.

A P P E N D I X.—*March, 1790.*

J. H. a miss between four and five years old, of a light complexion, a delicate, irritable habit; was seized 22d January, 1790, with violent pain in the fore part of the head; an incessant vomiting of bile and phlegm. She had been costive some days, and had at times complained of pain in the head and neck, previous to this seizure.

AFTER she had been indisposed three days, as her mother thought she had the symptoms of the measles, she gave her a vomit, which operated kindly; notwithstanding, the sickness, pain in the head, and costiveness continued. The 28th, I first saw her, late in the evening; she was in great distress; incessantly screaming; the muscles of the lower limbs and abdomen were spasmodically affected, and the legs and thighs contracted towards the abdomen: She vomited often, and was delirious; the pulse small, hard, and irregular. Three stimulating glysters were given, which procured large faecal discharges: An antiemetic anodyne draught, suppressed the vomiting, and relieved her of the spasms of the muscles of the abdomen and lower limbs; and
procured

procured ease, and a better night than she had had for a week. As soon as the sickness was suppressed, she took an ounce of soda phosphorica, and an ounce of manna, dissolved in two tea cups of water, at three doses.

THE 29th, she was sensible, the pulse slow, hard, and irregular, the tongue a little furred in the middle; she said her head ached; pressed the sides of it, and often moaned, *Oh, my head!* through the day. The light was not offensive to her eyes, and the pupils contracted in the usual light of the chamber, and immediately dilated upon excluding it.

AS she had been long costive, and the soda phosphorica, &c. had not operated, she took a second dose, and was directed to receive glysters until she had discharges from the bowels. The cathartic gave her two stools, and she vomited once; she seemed to be refreshed by the sleep of last night; she took liquid nourishment greedily. I now suspected there might be a tendency to hydrocephalus internus: Her cheeks were flushed, but the upper lip had that swelling which Dr. Home, in his clinical observations says, constantly accompanies worms in the bowels; but the alæ nasi were in a natural state. I was dubious until I had thoroughly cleansed the primæ viæ, whether the slowness and irregularity of the pulse depended upon the affection of the primæ viæ, worms, or an inflammation of the meninges of

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the brain ; but as the bowels were now discharging good fæces, of rather a lax nature, I now attributed the pains and moanings to the inflammation of the meninges of the brain. I therefore bled her in the arm ; and although the evacuation by the vein was but small, and the complaint in the second stage, it gave her relief. I would have bled her again, but it was impossible to obtain any more blood by venæsection. Unfortunately we have no leeches, at least I never could procure any. She was sensible, and complained much less of the pain in the head than before the bleeding. I would have cupped and scarified the nape of the neck, but was prevented : It was with difficulty I blistered the head, nape of the neck, temples and forehead.

THE 30th, she seemed rather better, took haustus salinus, received a glyster, and had two discharges from the bowels ; but she lay senseless 31st : With difficulty took either nourishment or medicine. The eyes not sensible of the light, and the pupils dilated. The pulse increased in velocity ; was weaker, and more regular.

DR. Danforth saw her with me this day ; and although we had never seen any medicine so efficacious as to afford any permanent relief, in the second stage, nevertheless, as two very eminent physicians in England had recommended mercury so as to affect the system in general, we agreed to give her mercurius dulcis, one gr. every two hours, and

to rub into the thighs twenty four grs. ung. merc. fort. every night and morning, till the breath and gums should be affected with this medicine, interposing glysters to keep the primæ viæ lax. I had tried this method in two cases before, but never perceived any advantage; I rather supposed it accelerated the fatal catastrophe.

I HAVE before given my opinion upon the use of this mineral in hydrocephalus internus; but as Celsus says, "fatius est enim anceps remedium experiri quam nullum;" we persisted in its use till the 3d of February, when the glands of the mouth were inflamed, the gums turgid, and the saliva drivelled and wet the pillow on which she lay. She had taken thirty two grains of calomel; but I discovered they had rubbed into the legs and thighs but forty eight grains of the ointment, one third mercury. She discharged a large number of ascariæ with the fæces, which were now very green and fœtid. Notwithstanding the mercury had evidently affected the system, every fatal symptom increased, till death closed the scene early on the morning of the 11th of February.

THE 12th, the head was inspected by Dr. William Jackson, in presence of a young medical gentleman and myself. I shall give the relation in the Doctor's words, as his description agreed with mine. "Upon removing a sufficient portion of

the bones of the cranium, the brain appeared unusually distended; the dura mater was of a darker colour than natural. Upon opening the longitudinal sinus, its internal surface appeared in an inflamed state. The pia mater was in a state of high inflammation; the blood vessels dispersed in it were double their natural diameters, and surcharged with blood. The falciform and transverse processes were also much inflamed. The corpus callosum was of a greyish colour, and its substance firmer than usual. In the lateral ventricles there were three ounces of a fluid lightly tinged with blood, which did not coagulate in the heat of boiling water; only a small pellicle was formed on its surface. The plexus choroides was of a deep crimson color, much enlarged, and overloaded with blood. The investing membrane of the cerebellum was in the same state of inflammation with that of the cerebrum." To me the plexus choroides appeared a congeries of innumerable blood vessels, very much distended with blood; and in some parts of it nothing but an assemblage of sanguineous vessels totally obliterating the membrane. No comment is necessary upon this appearance of inflammation, as I have in the paper upon the hydrocephalus internus, given my ideas of its cause, &c.*

ARTICLE

* Dr. Danforth would have been present, but a necessary avocation prevented.

ARTICLE VIII.

An Account of a preternatural OBSTRUCTION in the VAGINA. Communicated by Dr. JOSEPH OSGOOD, Fellow of the Massachusetts Medical Society, and Physician at Andover, in the County of Essex.

ANDOVER, MAY, 1786.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

I TAKE the liberty of transmitting to you, a case which happened nine years since.

A. B. being twenty eight years old, became pregnant, and during the time of gestation had no uncommon complaints; at the expiration of nine months, labor came on, the pains were severe, and after continuing forty eight hours, by examination there appeared a membrane at the entrance of the vagina, which extended to the urethra, and when pressed downward by the pains, was three inches in diameter, and impeded the discharge of urine, and occasioned the necessity of the catheter. As this membrane appeared manifestly different from the common membranes, and of an unnatural growth, I made particular inquiry, and was informed, that
the

the parts had been accidentally injured when at the age of eleven years. Having acquired this information, and the difficulty being of a singular nature, I called upon Dr. Brickett, of Haverhill, to visit her with me, and from examination he was convinced that the delivery was prevented by this preternatural membrane: Accordingly we divided it, beginning the incision near the perinæum, and extending it to the urethra. The division of the membrane was not attended with any hæmorrhage, though of considerable thickness in the centre, but thinner towards the circumference. The pains continuing after the division of the membrane, she was in a little time delivered of twins, who lived but a short time. After delivery was completed, soft and easy dressings were applied, carefully preventing the membrane from uniting, and in a short time she was entirely well; and has since had four children, without any difficulty.

A R T I C L E IX.

*Curious Facts respecting WORMS. Communicated by
THOMAS WELSH, A. M. Fellow of the
Massachusetts Medical Society, and Physician at
Boston.*

BOSTON, APRIL, 1789.

To the MASSACHUSETTS MEDICAL SO-
CIETY.

GENTLEMEN,

I NOW transmit you certain facts respect-
ing worms, which have occurred to my observa-
tion.

IN the month of October, 1775, I was called to
H. C. a lad of about twelve years of age, who had
previously enjoyed good health; but his appetite
was now impaired: He was costive; his pulse were
quick, and irregular, attended with uncertain re-
turns of fever, and his skin was dry: His eyes were
constantly open; the pupils dilated, with strabis-
mus, and he was *entirely blind*.

THIS last fact I ascertained, by several experi-
ments. I placed various objects in succession be-
fore his eyes, and inquired of him, whether he
could see either of them? to which he answered in
the negative. I held a dollar up, and told him he
should

should have it, if he could discover it; but he felt for it without success. I darkened the room, and had a lighted candle introduced, which he knew nothing of: I held it near his eyes; this produced no contraction of the pupils, and he declared that he saw nothing. I then took one of his hands, and told him I would lay it upon something, which he allowed me to do; I put it into the blaze of the candle; he instantly twitched it from my hand and the candle, crying out that he was burnt.

EVERY time I approached the house to visit him, I heard him at a distance exclaiming, in the accents of extreme distress—"Oh, mother! Oh, my head!" This he reiterated frequently, during my visits; and she told me it had been the case for two or three days before I saw him, with very little intermission.

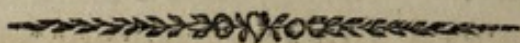
I USED various means to procure a discharge from his bowels, and persisted in them for near three days; but notwithstanding I effected a plentiful evacuation, no abatement of the tormenting pains of his head, or of the other complaints, was obtained. At length I gave him an emetic, of tart. emet. and attended the operation, which was effected in the usual time; and upon the first attempt to puke, he brought a large worm out of his stomach: Instantly his sight returned, as perfectly as he had ever enjoyed it; his headach vanished, and every other symptom of disease immediately disappeared,

IT is well known that worms often exist in the human body ; and that they remain, for a length of time, harmless inhabitants : But is it not probable, that many of the diseases, which we find difficult to account for, owe their causes to worms ? And is it not to be apprehended, that physicians have taken that to be the *hydrocephalus internus*, which was in fact to be ascribed to *worms* ? especially as calomel, a well known vermifuge, has had the credit of curing that disease.

AND does not the history of the preceding case further confirm the doctrine (which seems, however, to be well established) of the intimate connexion which subsists between the stomach, the first great organ of digestion, and the common sensory ?

UPON opening the thorax of a healthy, full grown cat, I found the lungs in a sound state : And on examining the contents of the chest, I perceived (before any incision had been made into the lungs) a live worm, crawling between the convex surface of the lungs and the pleura. This membrane was likewise entire and healthy : The worm measured near nine inches. I then examined the surface of the lungs and pleura more accurately, but could not discover any aperture by which it could have insinuated.

I HAVE often reflected upon this curious appearance of a worm in so singular a situation ; and cannot account for it in any other way, than by supposing that the egg was drawn into the bronchial vessels by the act of inspiration, and transmitted to the extremity of one of them, near the surface of the lungs, and, gradually enlarging, at length burst into the cavity of the chest, where it found sufficient pabulum for its nourishment and increase.



A R T I C L E X.

A Case of a CALCULUS in the URETER, together with another of the sudden Growth of the STONE, consequent upon the Introduction of a foreign Body into the BLADDER. Communicated by the Hon. WILLIAM BAYLIES, A. M. A. A. S. Fellow of the Massachusetts Medical Society, and Physician at Dighton.

DIGHTON, JUNE, 1787.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

CAPTAIN A. of N. on a total suppression of urine, sent for me to use the catheter. Upon examining his abdomen, I found it soft, and not at all distended ;

distended ; and told him there was no need of having recourse to the instrument, as I was confident his bladder was destitute of water. He was in extreme pain, which could be traced from the right kidney along the ureter, until it entered the coats of the bladder. This plainly pointed out, that a calculus impeded the flow of urine through that ureter ; but as he did not complain of his left side, it was still a question, what prevented his bladder being filled with urine from his left kidney ? As many physicians had advanced, that an irritation of one kidney would often produce such a convulsive contraction in the other as to render it unable to separate any urine, I knew not but an opportunity now presented of confirming what I had hitherto doubted. I therefore requested his friends, that, in case of death, they would permit his body to be opened : His death happened in a few days, and his friends consented. His bladder was in a very collapsed state, and not containing a drop of water ; a calculus, about as big as an hazle nut, was wedged into the right ureter at its termination, one third of it being projected into the cavity of the bladder, and the other part being so closely embraced that it required considerable force to disengage it. This ureter, between the bladder and kidney, was dilated sufficient to admit one's little finger. The kidney to which it belonged, was also greatly enlarged. Upon pressing it, the bladder was immediately filled
with

with urine. Its pelvis contained thirteen small calculi of different sizes. The left kidney was very large, and its surface covered with hydatids of a yellowish color. A foul, urinous, purulent fluid was lodged in the pelvis. I could not find the ureter, though I thought the shrivelled remains of it were discernible; neither could I discover this kidney to have any connexion with the kidney or ureter on the right side. This person had, for eighteen months or two years, labored under a compound *fistula in ano*, and, long before that, been subject to difficulties in the urinary parts. Is it not probable, the urine might escape through the diseased kidney or ureter into the cavity of the abdomen, and make a lodgement about the lower part of the rectum, which finally occasioned the fistula, though warded off for a while by the power of absorption. A discharge of urine by the anus, after the appearance of the fistula, whenever he attempted a stool, rather confirms it. Had I been more conversant in dissections, this might perhaps have been clearly determined.

C A S E II.

MR. ———, more than fifty years of age, by accident, had two or three inches of the smooth stalk of a plant broken off in his bladder. In a month, he complained of those pains and difficulties commonly attendant on the stone; in five months he was obliged to submit to the operation, when there

was

was taken from him a stone which weighed nine drams. The stalk formed the basis, round which the concrescible matter cohered with considerable force. The parts of the stone, contiguous to the stalk, were very hard; the other parts brittle and sandy.

A R T I C L E XI.

An EXPERIMENT for determining the Expediency of the SIGAULTIAN OPERATION. Communicated by the late JOSEPH ORNE, A. M. A. A. S. Fellow of the Massachusetts Medical Society, and Physician at Salem.

S A L E M, OCTOBER, 1783.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

THE utility of the operation of dividing the symphysis pubis in a certain species of difficult labors, being still a subject of question, I conceived that every opportunity of determining it by experiment, might be worthy of attention, especially as this operation if brought to the perfection of which some have supposed it susceptible, may be a comparatively gentle substitute to a terrible process, that could be suggested only by the prospect of immediate

ciate death, and never practised but in circumstances bordering on absolute despair.

FORTUNATELY for the most delicate part of our species, the necessity of practising it on the living subject, very rarely occurs; making the experiment on any dead subject, excepting such as were recently delivered, or in the last stages of pregnancy, can do but little to determine the point; and we very rarely I suppose have an opportunity of dissecting subjects of this description: In this view of the matter the following history is communicated.

A WOMAN, aged about twenty five, at the end of the 8th month of her second pregnancy, was suddenly seized with convulsions, which in about forty eight or sixty hours, put an end to her life. Just before she died, there were symptoms of labor, and on examination, the os internum was found considerably dilated, the membranes protruded, and the feet presenting. The gentleman who attended her during her illness, having a curiosity to inspect the condition of the gravid uterus, and perhaps suspecting that some local cause of the disease might possibly be discovered, obtained leave to open the body. Dr. Holyoke, with myself, attended him on this occasion. On laying open the abdomen, and making as large a wound as was necessary in the uterus, nothing preternatural was discovered, excepting the posture of the fœtus just mentioned; the parts were therefore presently closed, and as the opportunity
of

of a few moments presented, it was proposed to cut the symphysis pubis, as the patient died nearly at that time, when we suppose the ossa pubis, if divided, will admit the greatest separation from each other. I accordingly performed the operation with a bistoury, and without any difficulty, as the thighs were previously separated to some distance from each other, and consequently the connecting ligaments of the symphysis in a state of violence. The instant the division was effected, the parts flew asunder nearly two inches, with the violence of a bow suddenly cut in two, when very forcibly bent. By separating the thighs still further, the ends of the bones were made to recede at least $2\frac{3}{4}$ inches; and I think, if necessary, another $\frac{1}{4}$ inch might have been obtained, which I presume would have been quite sufficient to remove any such difficulty as might make this operation on a living subject eligible. A small vessel was divided, which might have demanded a ligature; this however could have been easily used. On bringing the knees together, the ends of the bones were again brought into perfect contact. The caution inculcated by Mr. Sigault, not to separate the thighs too far, previous to the operation, seems very necessary, as from the sudden separation of the bones while the knife is pressed down, in the act of dividing it, might forcibly slip through, and do mischief in the vagina.

A R T I C L E XII.

An Account of an ANEURISM in the THIGH, perfectly cured by the Operation, and the Use of the Limb preserved. Communicated by THOMAS KAST, A. M. Fellow of the Massachusetts Medical Society, and Physician at Boston.

BOSTON, FEBRUARY, 1790.

To the MASSACHUSETTS MEDICAL SOCIETY.

GENTLEMEN,

ON the 25th of May, 1786, I was called upon to visit I. T. a lad aged sixteen years, who, while he was cutting with a shoemaker's sharp pointed knife a piece of leather which he held on his thigh, the knife suddenly cut through it, plunged into his thigh, and wounded the artery. I found him fainting under the loss of blood, there being at least two pounds discharged upon the floor. Upon taking off his clothes, and the pressure of a man's hand, which was fortunately made upon the wound from its being first inflicted, I discovered a wound about one inch in length, on the inside of the thigh, seven inches below the groin, out of which the blood was then discharging *per saltum*. I immediately placed him in a horizontal position, stretched out the limb, dressed up the wound with flour
and

and lint, and applied a tight bandage, which stopped the hæmorrhage. He was then carefully put to bed, kept very still, and put on a low diet. Soon after it was dressed, he complained of the tightness of the bandage, which was loosened a little the next day.

THREE days after, the thigh began to swell, attended with great pain. On the 29th, a pulsation being now plainly to be both seen and felt through the dressings, I concluded it was an aneurism, and requested a consultation; and in one held upon the case, it was determined that the operation for the aneurism was necessary, which was performed in the following manner:

AFTER having secured the crural artery above by the tourniquet, I made an incision upon the tumor, about eight inches in length, down to the artery: Upon removing the coagulated blood, and slackening the tourniquet, the blood immediately gushed out, and discovered the wound in the crural artery. The tourniquet being instantly made tight, I passed a ligature above, and another below the orifice of the wound in the artery, and secured them. Then loosening the tourniquet, and seeing no hæmorrhage, I dressed up the wound in the usual manner, placed him in bed, with the limb upon a pillow, in a relaxed position, and gave him an anodyne.

UPON examining the artery at the ankle, immediately after the operation, with very close attention, a very small pulsation could be felt, which afterwards gradually increased.

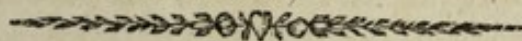
SOON after the operation, he complained of great coldness and numbness in the leg and foot, which were removed in eight or ten days, by the repeated application of warm spirituous embrocations, frictions, and covering the limb with soft flannel.

NOT the least hæmorrhage appeared from the artery after the operation: The wound digested well; the ligatures were taken away in due time, and the whole was completely healed up in ten weeks, without any material occurrence.

I HAVE the satisfaction of seeing him enjoy the free use of the limb, and able to take any exercise.



A P P E N D I X.



EXTRACTS *from an* ESSAY *on the* UTERINE
HÆMORRHAGE, *which precedes the* DELIV-
ERY *of the* FULL GROWN FŒTUS. *Illus-*
trated with CASES. *By* EDWARD RIGBY,
Member of the Corporation of Surgeons in London.

NO circumstance that attends parturition, exposes women to so much danger, as profuse hæmorrhages from the uterus, towards the latter end of pregnancy, and in the time of labor; the art of midwifery is likewise, in no instance, more at a loss in the use of means for the relief of the patient; an inquiry into the causes of them, and an attempt to improve the practice in such cases, cannot, therefore, be useless.

THE treatment of floodings, that come on before the uterus has acquired any considerable size, must be very obvious; and the consequences of them, at that early period of pregnancy, are seldom to be dreaded, as, if the patient lose blood from the arm, be kept cool, and in an horizontal posture, and such mild, astringent, and anodyne medicines be administered to her, as have been found, by experience, to restrain discharges of blood, they will very frequently stop entirely, and the woman go on to her full time; and if this should not be the case, but the hæmorrhage should still increase, it will sel-

dom increase to a degree that will endanger the life of the mother; without the small foetus and secundines being separated, and thrown off by it, after which the uterus will soon contract, and thereby closing the mouths of the bleeding vessels, the discharge will gradually diminish, until it be entirely stopped.

BUT floodings that precede the delivery of the full grown foetus, when the uterus is arrived at its greatest stretch, and the vessels have acquired their utmost magnitude, must be ever highly dangerous, being more profuse, and more difficult to suppress, in proportion to the increased size of the vessels; insomuch, that the number of instances in which they have unhappily proved fatal, is very considerable.

TO remove the uncertainty and embarrassment, which have hitherto attended the practice in these cases, and determine on more fixed and rational principles, when it is safe to wait for nature's endeavors to expel the child, and when it is absolutely necessary to bring it away by art, would, therefore, certainly be an important improvement in midwifery.

THE separation of the placenta from the uterus, before the delivery of the child, and the consequent opening of its vessels, must be looked upon as the proximate cause of every considerable discharge of blood from the womb at that time: But this premature separation of it, may be produced by very different causes, and it is a knowledge of this difference that will, in my opinion, remove the difficulty of ascertaining the reason, why the same apparent complaint should, very often, so widely differ in its termination, and at the same time remove also the uncertainty of treating it.

THERE is no particular part of the uterus, to which nature seems constantly and uniformly to fix the placenta, it is, nevertheless, for the most part, so situated, that if the woman be healthy, and no accident befall her, it does not separate until the full term of pregnancy, nor then before the entire expulsion of the child, after which it becomes disengaged from the uterus, and is thrown off, making room for its entire contraction, which shutting up the mouths of the vessels, effectually prevents any considerable loss of blood; for which purpose, it is plain, it must be fixed to some part of the womb, which does not dilate during labor, namely, to the fundus or sides of it.

IN this case, then, when a flooding comes on before the delivery of the child, it is obvious, that the separation of the placenta must be owing to some *accidental* circumstance, to violence done to the uterus by blows or falls, to some peculiar laxity of the uterine vessels from badness of habit or fever, or to the influence of the passions of the mind suddenly excited, such as fear, anger, &c.

BUT from the uncertainty, with which (as before observed) nature fixes the placenta to the uterus, it may happen to be so situated, that when the full term of pregnancy is arrived, and labor begins, a flooding *necessarily* accompanies it, and without the intervention of any of the above *accidental* circumstances; that is, when it is fixed to that part of the womb which always dilates as labor advances, namely, the collum and os uteri, in which case, it is very certain that the placenta cannot, as before described, remain secure until the expulsion of the child, but must, of necessity, be separated from it, in proportion as the uterus opens, and, by that means, an hæmorrhage must *unavoidably* be produced.

THAT floodings, which arise from these two different causes, which I will distinguish by the names of *accidental* and *unavoidable*, though they may appear exactly similar in their first symptoms, should terminate very differently, if left to nature, assisted only by the palliating means, cannot seem strange; nor can it be a doubt that of these two kinds of floodings, only one of them, namely, that which is produced by an *accidental* separation of the placenta, can be relieved by the use of these palliatives; and that the other, in which the placenta is fixed to the os uteri, and the flooding is therefore *unavoidable*, cannot possibly be suppressed by any other method whatever, than the timely removal of the contents of the womb.

THAT this attachment of the placenta to the os uteri, is much oftener a cause of floodings than authors and practitioners are aware of, I am from experience fully satisfied; and so far am I convinced of its frequent occurrence, that I am ready to believe that most, if not all, of those cases which require turning the child, are produced by this unfortunate original situation of it; and, moreover, (which is perhaps of as much practical importance to know) when the placenta is not so situated, the events of the annexed cases authorize me to say, that if the patient be properly managed, nature will, for the

most

most part, terminate the labor safely, without any manual assistance of the surgeon.

IT may appear extraordinary, that a circumstance, attended with so much danger, and which seems to be so frequent a cause of the uterine hæmorrhage should have hitherto been so little noticed, for though, in the cases which have been mentioned by authors, the placenta was found at the os uteri, yet it was, in very few of them, supposed to have been *originally* fixed there; and I make no doubt but it has often happened when it has not been known at all to the surgeon, as I am induced to believe that in the greatest number of those instances, in which the women have died undelivered, the floodings have been produced by this attachment of it.

ADMITTING, then, that floodings are produced by these two different causes, and that they require a treatment so widely different, we cannot be at a loss when such occur to us, and we have discovered the particular cause from which they arise, how to act; as, in the one case, we shall be encouraged to wait, and make use of such means to restrain the discharge, as will be more particularly mentioned hereafter, and in the other, we shall not hesitate to have recourse to delivery by art.

THE success of turning depending entirely upon its being done before the patient has lost too much blood, it is a matter of the utmost importance to obtain an early knowledge of the necessity there is of doing it, or in other words, to know at the beginning of the discharge, whether it be produced by the placenta being situated on the os uteri or not.

THERE is, perhaps, some difference to be observed in the time and manner that floodings, produced by these different causes, come on; probably, that which is occasioned by the placenta being fixed to the os uteri, will, for the most part, not come on till the full term of parturition, when the uterus begins to dilate from the approach of labor; the other, which is owing to some accidental separation of the placenta, may, on the other hand, come on before labor begins, and indeed at any time during pregnancy. The only certain knowledge respecting the situation of the placenta, is to be derived from an examination of the uterus by the touch.

FOR this purpose, however, the usual method with one finger will not always suffice, but the hand must be introduced into the vagina, and one finger insinuated into the uterus. If the placenta be at the mouth of the uterus, it will be immediately felt by the finger, and may be distinguished from the membranes, by its greater thickness, and from coagula of blood, by the irregularity and roughness of its interior surface, which will then present to the finger.

SUPPOSING, then, that the placenta should, from this inquiry, be found at the mouth of the womb, the surgeon will be at once convinced of the danger that must unavoidably attend delay, from the impossibility there will be of affording the woman relief by any other means than the timely removal of the child, and will, on that account, not hesitate to deliver before too great a loss has been sustained.

IN recommending early delivery, I think it right, however, to express a caution against the premature introduction of the hand, and the too forcible dilation of the os uteri, before it is sufficiently relaxed by pain or discharge; for it is, undoubtedly, very certain, that the turning may be performed too soon as well as too late, and that the consequences of the one may be as destructive to the patient as the other. I am particularly led to observe this, as I have lately been informed, from very good authority, (namely, a gentleman to whom one of the cases occurred) of three unhappy instances of an error of this sort, which happened, some years ago, to three surgeons of established reputation, who, from the success they had met with in delivering several who were reduced to the last extremity, were encouraged to attempt it where but very little blood had been lost, in hopes that their patient's constitutions would suffer less injury, and their recovery be more speedy; which, till the experiment was made, was a very reasonable supposition; the women died, and they seemed convinced that their deaths were owing to the violence of being delivered too soon, and not to the loss of blood, or any other cause.

IT becomes, then, necessary to endeavor to ascertain, with a degree of accuracy, the precise time when we may proceed to deliver, without fear of incurring the ill effects either of precipitancy or delay.

TO steer safely between the two dangerous extremes, it appears necessary that, on the one hand, we should never deliver till the dilatation of the womb can be effected by easy means, and, on the other hand, when it has been sufficiently relaxed by discharge, if the woman have suffered much by it, that we should no longer defer it, notwithstanding, from the absence or inefficacy of pain, the os uteri should remain unopened: Yet, after all, as turning seems to be only necessary when the placenta is fixed to the mouth of the womb, and that circumstance can seldom be known till the hand be introduced into the vagina, and one finger be insinuated into the uterus, I should imagine it not very likely that we should often be in danger of injuring the patient by premature delivery, as when the hand passes easily into the vagina, I should suppose there will be seldom much difficulty in its admission into the uterus.

IN introducing the hand for the purpose of turning, when the os uteri has been carefully dilated, if the separated part of the placenta be immediately presenting, it is best to endeavor to pass the finger through the substance of it, and by degrees with other fingers to enlarge the opening, till the hand can get through it into the cavity of the uterus: The obvious reason for this is, that by this means not more of the placenta may be separated, than is necessary for the introduction of the hand, and consequently that as little increase of bleeding as possible may be produced by the operation; but if it be impracticable, as I have more than once found it, and it must ever be when the middle of the placenta presents to the hand, from the thickness of it near the funis, it must be carefully separated from the uterus on one side, and the hand passed till it gets to the membranes, which being easily broken, it is admitted into the bag, the floating foetus is turned, and the delivery finished, as in preternatural positions of the child; except, that in this case the extraction should be more slow, that the uterus may not be unable to contract, by being too suddenly emptied: A moderate pressure from the hand of an assistant, upon the abdomen, as the child is coming away, will likewise be of use to assist the contraction. The placenta being at the os uteri, and being usually separated more by the introduction of the hand, commonly comes away immediately, but if a part of it should remain adhering, and the discharge continue, it should be carefully removed, and as it is so near, it may very easily be done.

IF, on the contrary, it be clear from this careful examination of the uterus, that the placenta is not at the mouth of it, and that the coming on, or increase of labor, will not of necessity increase the discharge, provided it be not very profuse, (for let it be remembered, that I am supposing the examination to be made early, and before any considerable quantity of blood has been lost) it certainly will be proper to wait for the natural pains, and, in the mean time, to use such methods as are likely to restrain the flooding, which are, the admitting a free circulation of cool air into the room, keeping the patient in an horizontal posture, giving her anodyne, with tinctur. rosar. &c. and supplying her frequently with such cool and simple nutritious drinks as will support her without quickening the circulation; from pursuing this method, it will often happen, that the discharge goes off entirely, and if the woman be not arrived at her full term, and she be kept very still and calm, that it does not return before labor comes on. But if it should still continue, or return frequently, it will be right, if possible, to bring the uterus into a state of contraction, by exciting some pain, which may often be done by gently irritating the os uteri with the finger; if this succeed, and the mouth of the uterus be thereby so far dilated, that the distended membranes may be felt, they must be immediately pierced by passing a probe along the finger, as upon the discharge of water thus produced, the womb necessarily contracts to a certain degree, and the flooding proportionably abates; this is, for the most part, soon succeeded by slight pains, which if the child present fair, have very soon an effect upon it, and push it down.

BUT if, notwithstanding, this mode of treatment, the discharge should not lessen, if the evacuating the waters should not abate it, and if, moreover, labor pains, sufficient for expelling the child, should not succeed, and the flooding should still increase, so as to endanger the life of the patient, I should imagine it hardly necessary to say, that even in this case, as well as when the placenta is fixed to the os uteri, the only certain method of stopping it should be used, namely, the delivery of the child by turning; for though I have never yet met with a case that under such circumstances has required it, and believe such very rarely happens, yet I would not be supposed to say such an one cannot occur, as the separation of the placenta may, for instance, be produced by such violence done to the abdomen,

abdomen, and the hæmorrhage may be so profuse, that nothing but a speedy delivery by art will put a stop to it.

TO many practitioners, the introduction of the hand to turn the child, is a very disagreeable operation, and if they have not been much used to it in cases where the uterus is but little open, it appears a very difficult and formidable one: It were to be wished, that even this circumstance had never an improper influence upon surgeons, especially those who are young in practice, and that they were never induced to omit, or too long delay this operation, because they feel unwilling to do it.

BUT it is not so difficult as many imagine, for even in preternatural cases, where the uterus is strong and rigid, and gives way reluctantly, if the hand be slowly and gradually introduced, it will seldom be found impracticable, provided the pelvis be not badly formed; and in floodings it is effected with peculiar ease, which should be a further encouragement to attempt it in such cases; for as the uterus necessarily becomes so relaxed after a considerable loss of blood, it very readily gives way to the admission of the hand, that tight contraction of its neck, which in other cases is such an impediment to the introduction of it, being here seldom to be met with; and it may be added, that in proportion as nature, from the loss she has sustained, is less able to bear violence, happily, a proportionable less force is requisite.

THUS, I have ventured to place one of the most important subjects in midwifery in a new light, and have endeavored to establish a hitherto uncertain practice upon principles that are more fixed and constant, by ascertaining when we may, with propriety, leave nature to do her own work, and when it will be requisite to proceed to immediate delivery, by turning the foetus: I have also endeavored to fix the precise time, when it may, with most safety, be done; and, in order to promote the practice of turning, when such becomes necessary for the woman's safety, have attempted to obviate the objections which have been made to this operation, from a supposition of its being either difficult, dangerous, or useless. And, from what has been said, it appears, that the placenta is fixed to the os uteri much more frequently than has hitherto been supposed; that when it is so situated, nothing but turning the child will put a stop to the flood

ing;

ing ; that when it is not so situated, nature will, for the most part, expel it safely herself ; that an early knowledge of this circumstance is of the utmost importance ; that it may be obtained with ease and safety ; and that therefore it should, in every case, be inquired into before much blood has been lost ; that the information, procured by making such an inquiry, should govern our management of the case ; if we find the placenta at the mouth of the womb, that we should proceed to delivery ; that, if it be not so situated, if the discharge be not very profuse, and a very large quantity of blood have not been already lost, we should endeavor to restrain it by the means commonly directed for that purpose, and wait for nature's assistance in the expulsion of the child : And it is thence evident, that this practice will have an advantage over the uncertain one hitherto adopted, because our determination about what we do, will ever be more safe and satisfactory ; for if, on the one hand, we wait, we shall have the satisfaction of knowing that, in all probability, nature will be able to expel the foetus ; and if, on the other hand, we immediately turn the child, we shall, also, have the satisfaction of knowing that nothing but turning can relieve the woman, and that, therefore, we do not give her unnecessary pain : And finally, that our doing it before the patient has sustained too great a loss of blood, will make the chance of success more probable, and thereby be the means of preventing, in some measure, the fatality which has hitherto so frequently attended these cases, and which has, perhaps, been more owing to a rational method of treatment not being known, than is commonly imagined.

C A S E I.

DECEMBER 29, 1769, I was sent for, in the afternoon, to the wife of ——— *Balls*. She was at the latter end of the eighth month of pregnancy, and had been seized the preceding evening, with a discharge of blood from the uterus ; it began without pain, and in small quantity, but increased by degrees, and was considerable when I saw her ; she had now, however, small pains, by which the os uteri was already somewhat dilated. I admitted as much cold air as I could into the room, supplied her frequently with cool and nourishing drinks, and as the pains still continued, waited until the membranes were so far distended and pushed down, that I could scratch
 them

them with my nail, by which means I broke them, and let the water escape; the discharge immediately lessened, the pains increased, and, in a little while, I felt one foot of the foetus presenting; I brought it down, and with great ease, drew forth a small dead child. The placenta came away in about a quarter of an hour, the flooding became less and less, and the poor woman, though much reduced by the loss she had sustained, recovered in the usual time.

C A S E II.

FEBRUARY 6, 1770, — *Stannard*. She was a small delicate woman, of a sickly relaxed habit, and had born several children. About the end of the eighth month, a flooding came on, without any previous pain, or symptoms of labor. I saw her in the evening, after the discharge had been several hours, though as yet it had not been very profuse; she was, however, very faint and languid: By keeping her upon the bed with but few clothes upon it, and admitting cool air into the room, it evidently lessened: I found the os tincae relaxed, and a little opened; after examining several times, (and, probably by the slight irritation, occasioned by the frequent touch) it opened somewhat more, and the membranes protruded so far, as to be felt by my finger: I immediately broke them, the discharge abated still more, and some slight pains succeeding, she was, in about half an hour after the breaking of them, delivered, with remarkable ease, of a small living child; the placenta was removed without trouble, the discharge was moderate, stopped at its proper time, and the woman perfectly recovered.

C A S E IV.

IN the evening of August 12, 1772, I was sent for to the wife of — *Leman*, a pauper, belonging to the town; she had a midwife with her, who informed me her patient had been flooding in some degree during the day, and that it had, in the last hour, very much increased. I examined, found the discharge considerable, the uterus was scarce at all open, and she was without pain; she was, moreover, extremely faint, and seemed to have suffered much more than any of the former patients: Admitting cool air into the room, &c. as in the other cases, for a while abated the discharge; but as it returned very soon, and the woman seemed in the most immediate danger,

danger, I was very desirous of attempting to relieve her by turning the child ; but judging it right to have the opinion of another surgeon, I sent for one who has had considerable practice in this city. He seemed to think my patient too far gone to receive relief from any attempt whatever to stop the flooding ; and as he added, that it was his opinion, she would sink during the operation, as one or two had before done on whom he had made the like attempt, he advised me not to turn the child. His advice prevented my doing it immediately, though before his arrival it was my design to attempt it, if he justified it : I was determined, however, not to leave the bed side, that if there came on the least degree of pain, so as to allow me to feel the membranes, I might, as I had before done, pierce them with a probe, or if the flooding increased, and I found it practicable to introduce my hand, I still resolved to attempt the removal of the child.

BY carefully attending to keep the room very cool, by preventing my patient from being the least stirred, and being myself her nurse, in giving here very few minutes small quantities of the coolest drinks, I prevented the discharge from increasing, and at the same time supplied, as far as I could, the waste of what she did lose, by the drinks she took, being as nutritious as I could venture to give them, without their being irritating : After attending her in this manner about two hours, frequently examining and gently stimulating the os internum, there came on at length a slight pain, and soon after, I could just feel the membranes with the end of my finger ; I immediately introduced a probe, in the manner I had before done, and broke them ; it had the same good effect as before, for the discharge immediately stopped, and pain coming on, the uterus opened, the head of the child was pushed down, and, notwithstanding the very alarming state she had, but just before been in, she was soon easily, and safely delivered, by the natural pains, of a dead child.

C A S E VI.

DECEMBER 1, 1772, about midnight, I was sent for to ——— *Welden*, another pauper. She had a midwife with her, who informed me, the woman had been flooding a considerable time, and had lost a large quantity of blood, which seemed to be true, from the
state

state the poor creature was in ; for her faintness was extreme, and she had every symptom of the most immediate danger.

UPON examination, I found the os uteri more dilated than in any of the former cases, and the placenta evidently presenting : As no possible relief could, in this case, be expected from waiting, I at once resolved to give her the chance of an immediate delivery ; which I effected by introducing my hand into the uterus, turning and bringing away the foetus ; and this I did with much greater ease than I could have imagined, as the resistance from the uterus was very trifling ; I endeavored to pass my hand through the substance of the placenta, but not being able to do it, I separated it on one side, until there was room for my hand to pass.

THE woman remained very faint and weak a long time after delivery, but being carefully nursed, she recovered by degrees, and was able to go out before the end of the month. This was likewise a dead child.

C A S E VII.

DECEMBER 29, 1772, about six o'clock in the morning, I was called to ——— *Freeman*, a poor woman, who was under the care of a midwife ; she had been flooding many hours, and had lost an immoderate quantity of blood, was greatly sunk, and appeared to be almost dying. On examination, I found the mouth of the uterus as open as in the last case, and the placenta situated in like manner, which determined me to pursue the same method I had so successfully used in that.

THE pelvis was narrow and distorted, but I introduced my hand into the uterus, and turned the child with all desirable ease ; the feet, body, and arms of the foetus I brought down in the usual manner, and with no more than usual difficulty ; but when I came to the head, it remained so fast betwixt the bones of the pelvis, that though I got one of my fingers into the mouth, (the face being towards the sacrum) and pulled the body, at the same time, with considerable force, I could not move it in the least degree, insomuch that the vertebræ of the neck began to give way ; which made me desist from pulling so forcibly, and induced me to send for the assistance of another surgeon.

HE made several similar but unsuccessful attempts; we therefore concluded, that nothing but lessening the size of the head, by evacuating the brain, would allow it to pass; but to effect this was no easy matter; he thought it possible to pass the scissars through the os palati into the head, and attempted it; when the scissars had pierced the bones, I endeavored to enlarge the opening, but could not do it; in tracing with my finger round the head, as far as I was able, I thought there was a possibility of pushing in some curved instrument behind the ear, at the lower end of the temporal bone; but the scissars being strait, I could not use them; however, from the looseness of the scalp, (for it ought to be observed, that the child was dead, and almost putrid, which was certainly the reason why the vertebrae of the neck separated so easily, when I attempted to pull the head) I thought I could push in the curved end of a blunt hook, which, with a good deal of difficulty, I effected, and by degrees insinuated it under the temporal bone; the opening I easily enlarged by my finger, and with one blade of the forceps, so that at length some of the brain came away, the head was thereby compressed into a smaller compass, and she was delivered: But the extreme fatigue she had undergone by this unlucky difficulty, joined to the immoderate loss of blood she had previously sustained, was more than she was able to support, and she died the following morning.

SINCE the above case happened, I have procured a pair of scissars curved at the points, (somewhat like tonsil scissars) which may easily be used where it is found necessary to open the head, after delivering the rest of the child.

C A S E X.

FEBRUARY 12, 1773, I was sent for to — *Marshall*, a poor woman in the workhouse, who was in her last month of pregnancy, and had been flooding about two hours; she had, in that time, lost a very great quantity of blood, and was so much sunk by it, that she died soon after I came into the room.

I HAD an opportunity of opening the body, the following morning: The membranes adhered universally to the uterus, by the spongy chorion; I carefully measured the water contained in the bag, and there were three pints of it: The child laid, with the head
obliquely

obliquely to the right side of the fundus uteri, and the face towards the spine; the hands were turned upon the face, holding each one of the feet, so that the podex would have presented; the placenta was situated upon the os uteri, and a partial separation of it, not bigger than a crown piece, was the cause of this fatal hæmorrhage. Before she died, I examined with my finger, found the uterus very little open, and did not feel the placenta.

R E M A R K.

THIS case proves, that the os uteri sometimes does not at all dilate to the size that has been usually thought necessary for safe delivery, and that it is not, therefore, always right to defer turning the child, in expectation of it: Had I been with the woman sooner, I certainly should have attempted it; and as from the first, there had been a considerable discharge, in all probability the uterus was so relaxed, that it might have been easily and safely effected.

C A S E XIII.

JUNE 27, 1773, — *Playford*. She was attended by a midwife, at the time I was sent for, and had been flooding very much several hours; the discharge was still profuse, the os uteri quite shut, and from the faintness she was in, she was altogether without pain, though the complaint came on with labor pains: She had the most threatening appearance, and I very much feared I could be of no service to her, and intimated it to the midwife and the assistants, but added, that if there were any possible chance, it must be from immediately delivering her.

As they were desirous of another surgeon's opinion, I sent for a gentleman, who confirmed what I had said respecting the danger the woman was in, and agreed with me, that the only chance she could have must be from a speedy delivery; the practicability of which, however, he rather doubted, as the os tincæ was so little open: I apprehended great difficulty in doing it, and feared likewise, that if I succeeded in bringing away the child, the woman would hardly survive the loss she had sustained; but having succeeded before, much beyond my expectation, I thought it right to attempt it: I introduced my hand into the vagina, for this purpose, and first one, then more fingers, into the uterus, when (and not before) I found
the

the placenta fixed to the os uteri; I endeavored to pass my finger through the substance of it, but was not able, though I tried some time; I therefore separated it on one side, and got my hand completely into the uterus; the head of the child presented, but I soon got hold of the feet, brought them down, and delivered with the same ease as in the last case of turning: The woman remained very languid a long while, and seemed hardly alive for many hours; but by supplying her frequently with cool and nutritious drinks, and carefully managing her in other respects, she recovered entirely.

R E M A R K.

THIS case appears much to have resembled that of *Marshall*, who died undelivered; as the discharge was very profuse, and the uterus very little open, the difference in the event being produced merely by my being fortunately called sooner to this woman. The ease with which the turning was effected, and the success which attended it, confirm the remark made to that case, that it is *sometimes* justifiable to deliver where the os uteri is not dilated to the size of a shilling, or a half crown.

C A S E XXII.

DECEMBER 16, 1774, ——— *Smith*, a healthy, strong young woman, in the last month of pregnancy, sent for me in the evening, having had, for several hours, a discharge of blood from the uterus. I immediately introduced my hand into the vagina, and with one finger in the os uteri, which was soft and yielding, I imagined I found the placenta; but, upon further examination, was satisfied that it was nothing more than a coagulum of blood, as I very evidently felt the membranes, with the head of the child behind them. The dilatation produced by this examination, was sufficient to have rendered the introduction of the hand into the uterus, to turn the fœtus, if it had been necessary, very practicable; but being confident of the great probability, not to say certainty, there was of nature's being able to expel the child in due time, I thought it right to endeavor to restrain the present discharge, and wait for pain. This was soon effected, by the usual means, and there seemed a probability of her going to her full time, if kept still and cool, for it stopped entirely for two days.

IT returned, however, on the third day from the first attack, when it was probably occasioned by some imprudent exercise in the woman, as she had not yet gone her full time; but being now accompanied with pains, the uterus opened, the child was pushed down and expelled with remarkable ease. The hæmorrhage, in this case, rather increased after the delivery of the child, and did not abate until the placenta was removed, which did not descend so soon as it usually does.

C A S E XXIV.

JUNE 19, 1775, I was sent for to ——— *Hoble*, a poor woman, under the care of a midwife: She had been flooding several hours, and, in the last half hour, the discharge had considerably increased. I immediately examined *with my hand in the vagina* (for with the finger only I could but just touch the outside of the os uteri) and found, by introducing one finger into the uterus, that the placenta was at the mouth of it: She had lost a considerable quantity of blood, and was very faint, but did not appear to have suffered so much as to have induced me, had the placenta not been there, or had I made no inquiry to find it, to have turned the child; but being convinced of the danger of delay, I determined to deliver; and previous to my doing it, sent for a surgeon who had been before with me in some of the foregoing cases.

WHEN he came, I told him the woman's situation, and desired him to examine in the common way, with one finger only, which he did, but could find nothing unusual at the mouth of the womb; I then desired him to introduce his hand, as I had done; he did this, and immediately discovered the placenta; he, therefore, agreed with me in the propriety of immediate delivery.

I INTRODUCED my hand into the uterus, and found the child lying in the natural posture; I passed the head, and with tolerable ease got hold of the feet, brought them down, and extracted a dead child.

THE woman remained extremely languid for some time after delivery; but, notwithstanding this, and that she labored under every disadvantage produced by extreme poverty, and a remarkable ignorance in her assistants, having neither pure air, clean linen, and hardly common nutriment for several hours, yet she perfectly recovered.

[WE are indebted for the three following Extracts* to our ingenious countryman, the celebrated Dr. BENJAMIN RUSH, Professor of Chymistry at the University of Pennsylvania, and Honorary Member of the Massachusetts Medical Society.]

An Account of the DISORDER occasioned by drinking COLD WATER in warm Weather, and the Method of curing it.

FEW summers elapse in Philadelphia, in which there are not instances of many persons being affected by drinking cold water. In some seasons four or five persons have died suddenly from this cause in one day.

THIS mortality falls chiefly upon the laboring part of the community, who seek to allay their thirst by drinking the water from the pumps in the streets, and who are too impatient or too ignorant to use the necessary precautions for preventing its morbid or deadly effects upon them. These accidents seldom happen, except when the \varnothing rises above 85° in Fahrenheit's thermometer.

THREE circumstances generally concur to produce disease or death from drinking cold water.—1. The patient is extremely warm.—2. The water is extremely cold.—And 3. A large quantity of it is suddenly taken into the body. The danger from drinking the cold water is always in proportion to the degrees of combination which occur in the three circumstances that have been mentioned.

THE following symptoms generally follow, where cold water has been taken, under the above circumstances, into the body.

IN a few minutes after the patient has swallowed the water, he is affected by a dimness of sight; he staggers in attempting to walk, and unless supported, falls to the ground; he breathes with difficulty; a rattling is heard in his throat; his nostrils and cheeks expand and contract in every act of respiration; his face appears suffused with blood, and of a livid color; his extremities become cold,
and

* *Vide* Medical Inquiries and Observations. By Benjamin Rush, M. D. Professor of Chymistry in the University of Pennsylvania. 8vo.—*Lond.* 1789.

and his pulse imperceptible ; and unless relief is speedily obtained, the disorder terminates in death in four or five minutes.

THIS description includes only the less common cases of the effects of drinking a *large* quantity of *cold* water, when the body is *preternaturally* heated. More frequently, patients are seized with acute spasm in the breast and stomach. These spasms are so painful as to produce syncope, and even asphyxia. They are sometimes of the tonic but more frequently of the clonic kind. In the intervals of the spasms the patient appears to be perfectly well. The intervals between each spasm become longer or shorter, according as the disease tends to life or death.

IT may not be improper to take notice that punch, beer, and even toddy, when drank under the same circumstances as cold water, have all been known to produce the same morbid and fatal effects.

I KNOW of but one certain remedy for this disease, and that is *liquid laudanum*. The doses of it as in other cases of spasm, should be proportioned to the violence of the disease. From a tea spoonful to near a table spoonful have been given in some instances, before relief has been obtained. Where the powers of life appear to be suddenly suspended, the same remedies should be used, which have been so successfully employed in recovering persons supposed to be dead from drowning.

CARE should be taken in every case of disease, or apparent death, from drinking cold water, to prevent the patient's suffering from being surrounded, or even attended by too many people.

PERSONS who have been recovered from the immediate danger which attends this disease, are sometimes affected after it, by inflammations and obstructions in the breast or liver. These generally yield to the usual remedies which are administered in those complaints, when they arise from other causes.

IF neither the voice of reason, nor the fatal examples of those who have perished from this cause, are sufficient to produce restraint in drinking a large quantity of *cold* liquors, when the body is *preternaturally* heated, then let me advise to

1. GRASP the vessel out of which you are about to drink, for a minute or longer with both your hands. This will abstract a portion of heat from the body, and impart it at the same time to the cold liquor, provided the vessel is made of metal, glass, or earth; for heat follows the same laws in many instances, in passing through bodies with regard to its relative velocity, which we observe to take place in electricity.

2. IF you are not furnished with a cup, and are obliged to drink by bringing your mouth in contact with the stream which issues from a pump or a spring, always wash your hands and face previously to your drinking, with a little of the cold water. By receiving the shock of the water first upon those parts of the body, a portion of its heat is conveyed away, and the vital parts are thereby defended from the action of the cold.

*An Account of the external Use of ARSENIC in the
Cure of CANCERS.*

A FEW years ago a certain Dr. Hugh Martin, a surgeon of one of the Pennsylvania regiments stationed at Pittsburg, during the latter part of the late war, came to this city, and advertised to cure cancers with a medicine which he said he had discovered in the woods, in the neighbourhood of the garrison. As Dr. Martin had once been my pupil, I took the liberty of waiting upon him, and asked him some questions respecting his discovery. His answers were calculated to make me believe, that his medicine was of a vegetable nature, and that it was originally an Indian remedy. He shewed me some of the medicine, which appeared to be the powder of a well dried root of some kind. Anxious to see the success of this medicine in cancerous sores, I prevailed upon the doctor to admit me to see him apply it in two or three cases. I observed in some instances, he applied a powder to the parts affected, and in others only touched them with a feather dipped in a liquid which had a white sediment, and which he made me believe was the vegetable root diffused in water. It gave me great pleasure to witness the efficacy of the doctor's applications. In several cancerous ulcers
the

the cures he performed were complete. Where the cancers were much connected with the lymphatic system, or accompanied with a scrophulous habit of body, his medicine always failed, and, in some instances, did evident mischief.

ANXIOUS to discover a medicine that promised relief in even a few cases of cancers, and supposing that all the caustic vegetables were nearly alike, I applied the phytolacca or poke root, the framonium, the arum, and one or two others, to foul ulcers, in hopes of seeing the same effects from them which I had seen from Dr. Martin's powder; but in these I was disappointed. They gave some pain, but performed no cures. At length I was furnished by a gentleman from Pittsburg with a powder which I had no doubt, from a variety of circumstances, was of the same kind as that used by Dr. Martin. I applied it to a fungous ulcer, but without producing the degrees of pain, inflammation, or discharge, which I had been accustomed to see from the application of Dr. Martin's powder. After this, I should have suspected that the powder was not a *simple* root, had not the doctor continued upon all occasions to assure me, that it was wholly a vegetable preparation.

IN the beginning of the year 1784, the doctor died, and it was generally believed that his medicine had died with him. A few weeks after his death I procured, from one of his administrators, a few ounces of the doctor's powder, partly with a view of applying it to a cancerous sore which then offered, and partly with a view of examining it more minutely than I had been able to do during the doctor's life. Upon throwing the powder, which was of a brown color, upon a piece of white paper, I perceived distinctly a number of white particles scattered through it. I suspected at first that they were corrosive sublimate, but the usual tests of that metallic salt soon convinced me that I was mistaken. Recollecting that arsenic was the basis of most of the celebrated cancer powders that have been used in the world, I had recourse to the tests for detecting it. Upon sprinkling a small quantity of the powder upon some coals of fire, it emitted the garlic smell so perceptibly as to be known by several persons whom I called into the room where I made the experiment, and who knew nothing of the object of my inquiries. After this, with some difficulty, I picked out about three or four
grains

grains of the white powder, and bound them between two pieces of copper, which I threw into the fire. After the copper pieces became red hot, I took them out of the fire, and when they had cooled, discovered an evident whiteness imparted to both of them. One of the pieces afterwards looked like dull silver. These two tests have generally been thought sufficient to distinguish the presence of arsenic in any bodies; but I made use of a third, which has lately been communicated to the world by Mr. Bergman, and which is supposed to be in *all cases* infallible.

I INFUSED a small quantity of the powder in a solution of a vegetable alkali in water for a few hours, and then poured it upon a solution of blue vitriol in water. The color of the vitriol was immediately changed to a beautiful green, and afterwards precipitated.

I SHALL close this paper with a few remarks upon this powder, and upon the cure of cancers and foul ulcers of all kinds.

1. THE use of caustics in cancers and foul ulcers is very ancient, and universal. But I believe *arsenic* to be the most efficacious of any that has ever been used. It is the basis of Plunket's and probably of Guy's well known cancer powders. The great art of applying it successfully, is to dilute and mix it in such a manner as to mitigate the violence of its action. Dr. Martin's composition was happily calculated for this purpose. It gave less pain than the common or lunar caustic. It excited a moderate inflammation, which separated the morbid from the sound parts, and promoted a plentiful afflux of humors to the fore during its application. It seldom produced an eschar; hence it insinuated itself into the deepest recesses of the cancers, and frequently separated those fibres in an unbroken state which are generally called the roots of the cancer. Upon this account, I think, in an ulcerated cancer it is to be preferred to the knife. It has no action upon the sound skin. This Dr. Hall proved by confining a small quantity of it upon his arm for many hours. In those cases where Dr. Martin used it to extract cancerous or schirrhous tumors that were not ulcerated, I have reason to believe that he always broke the skin with Spanish flies.

2. THE arsenic used by the doctor was the pure white arsenic. I should suppose from the examination I made of the powder with the
eye,

eye, that the proportion of arsenic to the vegetable powder, could not be more than $\frac{1}{40}$ part of the whole compound. I have reason to think that the doctor employed different vegetable substances at different times. The vegetable matter with which the arsenic was combined in the powder which I used in my experiments, was probably nothing more than the powder of the root and berries of the solanum lethale, or deadly nightshade. As the principal, and perhaps the only design of the vegetable addition was to blunt the activity of the arsenic, I should suppose that the same proportion of common wheat flour as the doctor used of his caustic vegetables, would answer nearly the same purpose. In those cases where the doctor applied a feather dipped in a liquid to the sore of his patient, I have no doubt but his vial contained nothing but a weak solution of arsenic in water. This is no new method of applying arsenic to foul ulcers. Dr. Way, of Wilmington, has spoken in the highest terms to me of a wash for foulnesses on the skin, as well as old ulcers, prepared by boiling an ounce of white arsenic in two quarts of water to three pints, and applying it once or twice a day.

3. I MENTIONED, formerly, that Dr. Martin was often unsuccessful in the application of his powder. This was occasioned by his using it indiscriminately in *all* cases. In schirrous and cancerous tumors, the knife should always be preferred to the caustic. In cancerous ulcers attended with a scrophulous or a bad habit of body, such particularly as have their seat in the neck, in the breasts of females, and in the axillary glands, it can only protract the patient's misery. Most of the cancerous sores cured by Dr. Martin were seated on the nose, or cheeks, or upon the surface or extremities of the body. It remains yet to discover a cure for cancers that taint the fluids, or infect the whole lymphatic system. This cure I apprehend must be sought for in diet, or in the long use of some internal medicine.

TO pronounce a disease incurable, is often to render it so. The intermitting fever, if left to itself, would probably prove frequently, and perhaps more speedily fatal than cancers. And as cancerous tumors and sores are often neglected, or treated improperly by injudicious people, from an apprehension that they are incurable, (to which the frequent advice of physicians "to let them alone," has

no doubt contributed) perhaps the introduction of arsenic into regular practice as a remedy for cancers, may invite to a more early application to physicians, and thereby prevent the deplorable cases that have been mentioned, which are often rendered so by delay or unskilful management.

4. IT is not in cancerous sores only that Dr. Martin's powder has been found to do service. In sores of all kinds, and from a variety of causes, where they have been attended with fungous flesh or callous edges, I have used the doctor's powder with advantage.

I FLATTER myself that I shall be excused in giving this detail of a *quack* medicine, when we reflect that it was from the inventions and temerity of quacks, that physicians have derived some of their most active and most useful medicines.

An Account of the Efficacy of common SALT, in the cure of HÆMOPTYSIS.

FROM the present established opinions and practice respecting the cause and cure of *hæmoptysis*, the last medicine that would recur to a regular bred physician for the cure of it, is *common salt*; and yet I have seen and heard of a great number of cases, in which it has been administered with success.

THE mode of giving it, is to pour down from a tea, to a table spoonful of clean fine salt as soon as possible after the hæmorrhage begins from the lungs. This quantity generally stops it; but the dose must be repeated daily for three or four days, to prevent a return of the disorder. If the bleeding continues, the salt must be continued until it is checked, but in larger doses. I have heard of several instances in which two table spoonfuls were taken at one time for several days.

IT sometimes excites a sickness at the stomach, and never fails to produce a burning sensation in the throat in its passage into the stomach, and considerable thirst afterwards. I have found this remedy to succeed equally well in hæmorrhages, whether they were active or passive, or whether they occurred in young or in old people.

I HAD prescribed it for several years before I could satisfy myself with a theory, to account for its extraordinary action upon the human body. My inquiries led me to attend more particularly to the following facts :

1. THOSE persons who have been early instructed in vocal music, and who use their vocal organs moderately through life, are seldom affected by an hæmorrhage from the lungs.

2. LAWYERS, players, public cryers, and city watchmen, all of whom exercise their lungs either by long or loud speaking, are less affected by this disorder, than persons of other occupations.

I ACKNOWLEDGE I cannot extend this observation to the public teachers of religion. I have known several instances of their being affected by hæmoptysis ; but never but one in which the disorder came on in the pulpit, and that was in a person who had been recently cured of it. The causes which I have seen, have generally been brought on by catarrhs.

TO this disorder, the practice of some of our American preachers disposes them in a peculiar manner ; for it is very common with this class of them, to expose themselves to the cold or evening air immediately after taking what a celebrated and eloquent preacher used to call a *pulpit sweat*.

3. THIS hæmorrhage chiefly occurs in debilitated habits, or in persons afflicted by such a disposition to consumption, as indicates a weak and relaxed state of the lungs.

4. IT generally occurs when the lungs are in a passive state, as in sitting, walking, and more frequently in lying. Many of the cases that I have known, have occurred during sleep in the middle of the night.

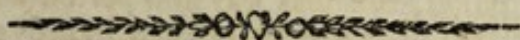
FROM these facts, is it not probable that the common salt, by acting primarily, and with great force upon the throat, extends its stimulus to the bleeding vessel, and by giving it a tone, checks the further effusion of blood ?

I SHALL only add to this conjecture the following observations :

1. I HAVE never known the common salt perform a cure, where the hæmorrhage from the lungs has been a symptom of a consumption. But even in this case it gives a certain temporary relief.

2. THE exhibition of common salt in the hæmoptysis, should by no means supercede the use of occasional bleeding when indicated by plethora, nor of that diet which the state of the pulse or of the stomach, may require.

3. I HAVE given the common salt in one case with success, in an hæmorrhage from the stomach, accompanied by a vomiting; and have heard of several cases in which it has been supposed to have checked a discharge of blood from the nose and uterus, but I can say nothing further in its favor in these last hæmorrhages, from my own experience.



*A Case of HÆMOPTYSIS, related in a Letter from Mr. WILLIAM JONES, Surgeon at BIRMINGHAM, G. B. to Dr. DUNCAN at Edinburgh, dated September, 1786.**

“MRS. S. of this town, had had a violent cough, during the greatest part of last winter, attended, when I first saw her, with an alarming degree of *hæmoptysis*, plethora, the usual symptoms of fever, and frequent profuse cold sweats. She was thus circumstanced on the evening of May 26, 1786, when I took away some blood; and as she was costive, prescribed an opening mixture to be taken at stated intervals, until her bowels were opened. The next day, I directed a grain of the fox glove (*digitalis purpurea. Linnæi*) in pills, to be taken every morning and night. Four doses were sufficient to remove the *hæmoptysis*. And she recovered in a few days, to the degree of health she had before its appearance. Other instances of similar success, have occurred, both to my friend Mr. Mynors, and myself, and that without the use of venæsection, in certain reduced, scrophulous, and leucophlegmatic habits.

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* *Vide* Duncan's Medical Commentaries. Decad. II. Vol. I.—*Edinb. and Lond.* 1787.

IN the attendant symptoms of hæmoptysis, such as quick circulation and fever, venæsection being premised in plethoric cases, the *fox glove* occasionally administered, may be readily managed, so as soon to bring down the most rapid pulse to its natural standard, without occasioning any violent symptom whatever. In consequence of these properties, it will be found capable of preventing the necessity for repetitions of bleeding, which has frequently occurred in this complaint when urgent."

INCONTINENCE of URINE.*

ASTRINGENT and corroborating medicines were formerly the remedies generally prescribed in this disease; but the method of cure has within these few years been improved by Dr. Dickson, physician to the London hospital. Having observed in a variety of cases, that blisters covering the *vertebræ* of the neck, and going obliquely to the shoulder, were remarkably more useful in palsies of the upper extremities, than when applied to these parts, he formed the resolution to try the effects of them in palsies of the lower extremities, by laying them upon the region of the *os sacrum*. This experiment he repeated several times, with as much success as convinced him that vesicatories proved infinitely more advantageous thus used, than when applied either to the thighs or legs.

FROM the observations which Dr. Dickson had already made, he was induced to try the effects of a blister laid on the region of the *os sacrum* in an incontinence of urine; knowing that most of the nerves, which go to the bladder, pass through the *foramina* of that bone. The first person on whom he made the trial, was a girl about thirteen years of age, who had labored under an incontinence of urine during four years. She had taken bark and elixir of vitriol in no small quantities, and afterwards valerian, with the volatile julep, for a considerable time. A large blister being applied to the *os sacrum*, the incontinence of urine was totally removed within twenty four hours.

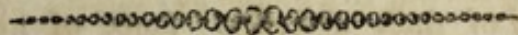
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* *Vide* Modern Improvements in the Practice of Physic, by Henry Manning, M. D.—*Lond.* 1780.

THE next case of an incontinence of urine, in which he tried this remedy, was accompanied with a palsy of the lower extremities, and its good effects were remarkable in respect of both these diseases. The patient, who was thirty two years of age, had been seized with the palsy about a year before his admission into the London hospital; and at this time he was attacked with a suppression of urine, which notwithstanding the use of various medicines, lasted four days, attended with great distention of the belly, and excessive pain. His urine then came away involuntarily, and he had so obstinate a costiveness, that he never went to stool without taking some purging medicine.

AT first the patient was ordered two ounces of *tinctura sacra* to be taken immediately, and a Spoonful every night and morning, or occasionally, to keep his belly open; besides half a drachm of bark, with the same quantity of valerian, to be taken three times a day. Four days afterwards a large blister was applied to the region of the *os sacrum*; the effect of which was so great, that in less than twenty four hours he could retain his water above an hour at a time, and in a week for two hours; the incontinence of urine gradually diminishing, until the disease entirely disappeared.

THE efficacy of blisters thus applied in incontinence of urine, Dr. Dickson has repeatedly ascertained in several cases; and the fact derives additional confirmation from other experiments communicated by Dr. Fothergill, of Northampton.



*Extract of a Letter from Dr. ROBERT HAMILTON, Physician at Lynn Regis, to Dr. DUNCAN, giving an Account of a successful Method of treating INFLAMMATORY DISEASES, by MERCURY and OPIUM.**

I HAVE taken the liberty to send you the following summary account of a successful method of treating inflammatory diseases with mercury and opium, which has been practised here almost
eighteen

* *Vide Medical Commentaries, by Andrew Duncan, M. D. F. R. S. &c. Vol. IX.—Lond. 1785.*

eighteen years, and I believe is scarcely known any where else in the kingdom ; and therefore, I flatter myself you will think, may, with propriety, be inserted in your valuable Commentaries, that it may be communicated to the world.

THE following circumstance first led me to this method of treating inflammatory distempers.

AT the close of the year 1764, the fleet which returned from the East Indies, brought a worthy surgeon of the navy to England, who had served in that country eight years. By this gentleman I was informed, that the established method of curing the hepatitis, or endemial inflammation of the liver, incident more particularly to Europeans than the natives in that country, was by mercury : That mercury was, in general, esteemed a specific in that disease : That the method was, after the patient had lost some blood, and taken some gentle purgative, to have a strong mercurial ointment rubbed in on the region of the liver, and to give either calomel, mercurius alkalifatus, or the mercurial pill, until the salivary glands were affected by the mercury, or the inflammation removed : That the sooner a gentle spitting was raised by these means, the sooner the patient got well : That this method of cure was generally successful, if employed early in the distemper ; but if it was neglected, the liver, which was commonly so turgid as to be perceived externally to be enlarged, soon suppurated : That he had had a number of patients with suppurations in the liver, from this disease, under his care, and had opened many of those abscesses. Some of his patients thus treated had recovered, but more became tabid, and sunk under the profuse discharge.

OUR diseases are nearly the same with those of similar situations in India ; particularly the bilious autumnal remittent and intermittent fevers, an allowance being made for their difference in violence and malignity, from the greater exaltation of the subtle poisonous miasmata, by the intense heat of the climate in India. We have sometimes a most dangerous hepatitis. Some patients in that disorder falling under my care, soon after my friend's arrival from India, I gave the method of cure with mercury a trial, and found it successful. I used the ointment in very few instances, and gave no preparation internally but calomel ; to which I soon, however, found it necessary

necessary to add opium, in order to relieve that distressing concomitant of inflammation, the pain, which happily answered that purpose most effectually.

I CONSIDERED, that the general cause (be what it may) of an inflammatory diathesis, must be the same, whether the inflammation is seated in the meninges, pleura, lungs, liver, diaphragm, or any other internal membranous part; and therefore, the circumstance of locality could make little or no alteration in the general intention of cure. From these premises, the following deduction naturally arose.

AS mercury had proved so successful an agent in removing inflammation in the several instances above mentioned, it was reasonable, from analogy, to conclude, that it would prove equally so in every kind of inflammatory disease. Wherefore I was determined to give it a fair trial in every one, as opportunities offered for that purpose, and flattered myself, from the data before me, that my experiments would be attended with success.

THE peripneumony was the first disease that fell under my care, after this resolution was taken. The success attending the administration of calomel and opium here, filled me with astonishment. I was successful in a great number of cases, and under a variety of circumstances. I have had the satisfaction to see women far advanced in pregnancy, in a manner rescued from death, in the last stage of the peripneumony, by calomel and opium, after every other means, which had been tried, had failed in relieving the patients. I had the pleasure afterwards of seeing them go their full time, be safely delivered of living children, and enjoy the happiness of bearing several others since that period. I have known many a life saved in the symptomatic, variolous and morbillous peripneumony, by these medicines; and I never saw any remedies afford so certain and speedy relief in obstinate dry catarrhus coughs, as those, particularly when continued until the mouth became affected by the mercury. The same means have proved equally efficacious in pleurisies. But the most extraordinary and early relief I ever saw calomel and opium give, was in the phrenitis and paraphrenitis, which has been repeatedly experienced in a great number of cases. Inflammations of the intestines, and other parts within the abdomen, have most readily yielded to this treatment. I have, in the 66th volume of the Philosophical

sophical Transactions, in the account of a puncture made into the bladder through the anus, for the cure of a suppression of urine, mentioned the use of calomel and opium in that disorder. I have known the greatest benefit arise from those medicines, in child bed fevers, with highly inflammatory symptoms. In the inflammatory angina, calomel mixed with thebaic tincture and honey, laid upon the root of the tongue, and swallowed gradually, has frequently given great relief.

HAVING succeeded in the most unequivocal manner, in curing local inflammatory diseases by this practice, my experiments were next directed to that formidable malady of general inflammation, the acute rheumatism; and I had the satisfaction to see this also give way most readily to it.

OUR mode of practice, in this town, in all inflammatory diseases, arising either from an internal or external cause, is as follows:

BLOOD is to be taken away in the beginning of the disease, according to the violence of the symptoms, and the age and constitution of the patient. The bowels are then to be opened, either by glyster or an eccoprotic purgative. After which a bolus is administered every six, eight, or twelve hours, as the degree of inflammation requires; consisting of from 5 to one gr. of calomel, and from 1 to $\frac{1}{4}$ gr. of opium, with any conserve: Plentiful dilution is strictly enjoined. The distemper commonly gives way in forty eight hours, and soon terminates.

IF the fever is violent, accompanied with a dry contracted arid skin; emetic tartar, and sometimes camphor, are added. And I beg leave here to observe, that I never found any medicine, either in a simple or aggregate state, produce so certainly a relaxation of the skin, and a plentiful discharge from its pores, as a composition of calomel, opium, emetic tartar, and camphor, which has also the advantage of increasing the evacuations by stool and urine: From which it would appear, that the glandular secretions, in general, are most essentially promoted by this composition.