

were especially due, and without whose energy and philanthropic exertions they would not have been called together that day. He wished the duty of proposing the resolution had devolved upon abler hands, but he could not deny himself the pleasure of moving the thanks and warmest acknowledgments of the meeting to Mr. Wm. Sands Cox, for his eminent services to the institution—services without which it would never have been originated at all.

Joseph Webster, Esq., in seconding the vote of thanks to Mr. Cox, said that the town owed a deep debt of gratitude to that gentleman, who had by his noble exertions raised a monument which would be remembered as long as Birmingham existed.

The resolution (which was proposed during the absence of Mr. Sands Cox) was passed in the most cordial and enthusiastic manner, after which the meeting separated.

It was understood that the arrangements for the reception of "free out-patients," and of those visited at home, will take little more than a week to complete; very shortly after which, the midwifery department will be proceeded with, in conformity with the fundamental regulations, "for the benefit of poor lying-in married women, who shall be attended at their own homes."—*Aris Gazette*.

FOREIGN MEDICAL LITERATURE.

PUERPERAL FEVER.

DURING the year 1840 a great number of cases of puerperal fever occurred at the Hôtel-Dieu, in the words of M. Recamier; a detailed account of the principal cases has been furnished by his *interne*, M. Bourdon, in the *Revue Médicale*. M. Bourdon observes, as one of the most remarkable points in the history of the disease, that although its progress and symptoms were the same in all cases, yet the lesions discovered after death were very various. When, in addition to this circumstance, we reflect on the fluid state of the blood, and the softening of nearly all the organs, without trace of inflammation, we are authorised (says M. Bourdon) to regard this disease as a general affection, connected with some alteration of the blood, which gives rise to the same train of symptoms, although the material lesions resulting from it may be very diversified.

The following is the train of symptoms noted by M. Bourdon; the only variation of any consequence which they presented, was one of intensity. The general appearance of the patient was very peculiar and striking; at first the countenance was sunken and expressive of pain or anxiety; towards the end, it was insensible and expressive of prostration, especially if the disease were about to terminate fatally. The eyes became more or less hollow, and surrounded by a dark circle; the skin of the face was pale, dull, and earthy looking; presenting, in fact, a tint altogether peculiar to this complaint. General weakness and prostration of strength constantly existed, though at various degrees.

On questioning the patient about the origin of the disease, it was always said to have commenced with more or less shivering; and this symptom,

with a feeling of general uneasiness, sometimes recurred during the following days, and was proportionate to the subsequent violence of the fever; whenever the shivering was intense at first, prolonged, and recurred several times, the disease terminated fatally. The shivering was soon succeeded by heat of skin, which sometimes alternated with it; the skin was hot and dry, covered, at certain periods, with perspiration; the latter was a favourable symptom, when the general state of the patient improved at the same time; but when cold and viscid, it announced the near approach of death. The pulse was always frequent; in two cases a little hard and full at the commencement; but in all the others it was constantly small, compressible, and undulatory.

Several of the patients complained of headache; a more constant symptom, especially towards the end of the disease, was a low, loquacious delirium, which was commonly a bad sign.

Pain of the abdomen was a constant symptom; but it varied in seat and intensity. Generally speaking, it was severe, and occupied the hypogastric region; in some cases it disappeared suddenly, without any diminution of the tympanitis or improvement of the symptoms. This sudden alteration of sensibility was always a fatal sign. The abdomen was in all cases more or less tympanitic, but not more so in one form of the disease than in another. Some symptoms of disorder of the intestinal canal were, also, usually observed; these were dryness of the tongue, thirst, vomiting, diarrhoea; liquid brown stools, of a foetid smell, always announced a fatal termination. Hiccup occurred in three cases out of ten, and was absent in several where we had reason to suspect inflammation of the peritoneum. Involuntary discharge of the fæces and urine was always a bad sign.

The lochial discharge was either arrested or diminished in every case, the former occurrence being the more dangerous; the breasts were always more or less flaccid. In dangerous cases, and particularly towards the end of the disease, the respiration became so quick and difficult that it was astonishing no other lesion was found after death, except some congestion at the back of the lungs. In concluding his remarks on the symptoms, M. Bourdon observes, that it was impossible, from any particular symptoms, to determine what peculiar form of the disease was under treatment; and he believes that in the present state of our knowledge this diagnosis is excessively difficult, if not impossible.

As to the prognosis; when the pulse became frequent, soft, and recovered its strength a little, while the skin, at the same time, got moist, the abdomen less painful, and the countenance better, then a favourable termination generally occurred; but when the pulse, without losing any of its frequency, became small, depressed, and undulatory, the tongue dry, the vomiting and diarrhoea obstinate, the abdomen highly tympanitic, the danger was great; and death was certain whenever the pulse continued to become more and more feeble, with cold viscid sweats and involuntary evacuations.

The alterations found after death were various, although, as we have before observed, the progress and symptoms of the disease were the same in all cases. In one case the only morbid appearance that could be discovered was a slight effusion of

turbid reddish serum, containing some flocci, into the cavity of the peritoneum. Many pathologists regard this as sufficient evidence of the existence of peritonitis; but, even granting the presence of the latter, how could it explain the highly dangerous symptoms and rapid death of the patient.

In a second case, all the signs of uterine phlebitis were found, but on the most minute examination no trace of pus or metastatic abscess could be discovered in any of the vessels or tissues of the body.

In a third case were found all the degrees of softening of the uterus which constitute the form described by MM. Danyau and Duplay, under the name of gangrenous metritis, and by Boër under that of *putrescentia uteri*; the whole of the internal surface of the uterus was softened, and the walls perforated by gangrene: the peritoneum was inflamed, with effusion of dark, fetid pus; the subperitoneal tissue and the adjacent muscles were also infiltrated with the same kind of pus. Finally, most of the organs were in a state of softening, and the small intestines contained several ulcers without surrounding inflammation.

In a fourth case were observed most of the anatomical characters of the pyogenic fever of M. Voillemier; pus was found in the subperitoneal tissue of the uterus, and in the cellular tissue of the limbs, without any trace of peritonitis, inflammation of the uterine veins or lymphatics, or metastatic abscess, in any of the organs. Lastly, in a fifth autopsy were discovered collections of pus in the cellular tissue of the pelvis, with softening of the organs, and particularly of the right lung.

In addition to the morbid appearances above noticed, some others were constantly observed: a layer of dark-coloured fetid detritus covered the internal surface of the uterus; the quantity and fetidity of this matter was proportionate to the volume of the uterus, and it probably depended on some modification of the lochial secretion. In all the cases the blood contained in the heart and vessels was remarkably fluid, and this condition of the vital fluid does not seem to have sufficiently attracted the notice of pathologists. A third lesion, also constantly found, was softening of the parenchymatous organs, and even of the heart itself; in two cases the mucous membrane of the intestinal canal was softened, and it is probable that the ulcers observed in one of the cases depended on the same cause.

As to the treatment, M. Bourdon observes that no remedy was found beneficial in dangerous and severe cases, or when employed for patients admitted into hospital in a desperate state. In one of these cases much relief was obtained by the use of a bandage and compresses over the uterus, which was very voluminous. A few hours afterwards, the size of the organ was reduced by one-half, and the expulsion of the fetid secretion contained in it was much facilitated. Blood-letting had no good effect in the few cases in which it was tried. In a certain number of cases, complicated with bilious symptoms, the use of ipecacuanha was highly beneficial, always mitigating the symptoms and exciting perspiration.—*Revue Med.*, June, 1841.

VEGETABLE EXTRACTS.

MR. EDWARD BENTLEY describes his method of obtaining the most powerful vegetable preparations in the following terms:—

“In the preparation of extracts, the main point to be attended to is equality of temperature.

“My observation on this point has been extensive; and I am fully persuaded that a temperature above 120 deg. F. is sufficient to volatilize the principle upon which their efficacy depends.

“The manner in which the leaves are dried equally affects the strength of the tincture. The plan which I have adopted and am about to detail, and which has elicited such valuable opinions from those best acquainted with the subject, induces me to believe it worthy of the particular attention of the profession. It is by preserving the expressed juices of the plants in the following manner:—

“The plant being carefully selected from its healthy character and full maturity, the leaves, stem, and, when advisable, the root, are well bruised in a marble mortar, then placed in a powerful wooden press.

“The juice thus collected is allowed to stand, in order that a deposition of fæculent matter may take place, which usually does in very large quantities in the course of twenty-four hours. Alcohol, 56 deg. overproof, is then added in the proportion of four fluid ounces to every sixteen fluid ounces of the juice, which is quite sufficient to render the preparation complete, and throw down any mucilage which may be mechanically suspended.

“After standing for twenty-four hours, the juice filtered through bibulous paper, (that made from wool is the best,) will be found to retain the whole virtues of the plant for any length of time.

“It may be as well to state that the best time for gathering the plant is just as it is coming into flower.”

The juices which Mr. Bentley has thus prepared, and which have been put to the test of experience, are those of Conium, Digitalis, Belladonna, Hyoscyamus, Taraxacum, and Artemisia Vulgaris.

NOTE FROM DR. MAUNSELL.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—In your paper of the 21st inst. I find an anonymous letter, containing a medley of very hard words, designed (if I rightly understand the objects of the writer) first, to signify disapprobation of my conduct, in having, as editor of the Medical Press, presumed to explain the cause of the failure of the dinner of the Provincial Medical Association, at the late meeting at York; and secondly, to inform the world of medicine that Dr. Hastings was not, on the occasion referred to, ‘intemperate and vulgar;’ and that his attempt then to stifle discussion should not be characterised as ‘bawling and bombast.’

The basis of the anonymous writer’s argument appears to be the fact, which he accuses me of mistaking, that “the dinner company was not two-thirds less than it was last year at Southampton.