state, you would have affirmed you saw the devil, unless you could (with the Æthiopians) persuade yourself the devil is white; which opinion Sir Thomas Brown . . . seems to favour, contrary to the testimony of the holy scripture, which saith 'the dwelling of Satan is a lake of fire burning with brimstone'; but the smoke of brimstone burnt, as our above recited author philosophiseth, is known by frequent experience to whiten woollen garments, as stockings and other things; and hence he concludes, that whatsoever is found in hell must needs be white." The author goes on to say how he applied to the burn "onions with honey, that (with their abounding volatile salt) they might open the constricted and stopped pores of the cuticle, temperate the acid humors, and restore to them their usual circulation."

He also relates a case of "very great torment of the abdomen." "A maid, aged 40 years, had now for six weeks past complained of a most vehement dolor, yet not far extended, but exercising its tyranny in a very small part of the belly, and day and night most cruelly tormenting the patient, who had used very many remedies, both internal and external. She was purged and had a vein opened, but in vain; so that (after the use of these) she almost despaired of recovering her pristine sanity; in the meanwhile the external cutis in this pained part could not be distinguished from the sound parts of the belly. I being called, with my knife cut a small wound, which is vulgarly called an issue, and kept that open by a pea put in and daily renewed.

"The next day after the cutting that issue, the patient had ease of her pain, which from day to day did more and more lessen, so that it was wholly removed quickly after. . . . Some acido-corrosive particles in the affected part, were perhaps separated from the other particles of the sanguiferous mass with which so long as they lay involved they could not exercise their sharpness. . . . These acido-corrosive particles freed from their cells in which they before lay included and collected in a very small part of the abdomen, did with their sharpness in a wonderful manner, continually agitate the fibrils, and so inferred that almost intolerable torment which must necessarily cease when these corrosive particles were driven out with the pus through the issue."

But that we may sup full of absurdities we must turn to the old book I referred to before, published in 1580, and containing a translation of the *Secretes of the Reverende Master Alexis of Piemont*. The following is one of his remedies for the pleurisy. "Take a tooth of a wild boar, and if the pain hold him in the right side, ye must take the tooth of the right jaw; if otherwise, ye must take the left tooth; yet notwithstanding it hath been found by experience to be all one of which jaw so-ever it were." The scrapings of this are to be given with a little barley-water. "This hath always been found very good and true."

For a bad leg you are to "take the skin of a dog if you may get it, or if not a white lamb's, or the skin of a kid, and cut a piece of it as broad as the palm of your hand." This is to be smeared with an ointment composed of pine resin, galbanum, mastics, musk, amber, and civet, and applied.

The following is against the "disease or grief of the flanks and the colyke passyon, experimented and proved diverse times." "Take the dung of a black ass if you can get it, if not let it be of a white ass; and the dung must be fresh and new, the which you shall see the and boil in white wine, putting to it a handful of annis, a little oil of chamomile, a little oil of capers, with a handful of bran." These are to be boiled for the space of a "miserere," and administered as an enema. Mice-dung is his remedy for

spitting of blood, swallows baked and powdered and mixed with honey for the squinancie or quinsy. Perhaps I cannot conclude my paper better than with the following "very good and present remedy for to heal the pestilence, in drawing out the venom from the botch or sore or other like accident." "Take a quick hen, and pluck the feathers from her a—" (the word here used has gone out of fashion), "and from the place whereat she layeth her eggs, and set her so that the said place may be upon the grief, and that she may sit upon the botch or sore, or the place of the plague, and hold her so a good while. Then you shall see that the said hen shall have drawn out all (or at least some) of the poison and infection, and that shortly after she will die. It shall be good to do this with two or three or more hens, immediately one after the other, the which will draw all the venom out of the sore."

This is not from the works of a Swift, lashing with almost obscene satire the weaknesses of the learned of his day, nor is it from the works of some obscure quack, but is the solemn teaching of a most famous doctor of Padua, which was then the most famous school of medicine. The work had been already translated into French and Dutch, and was dedicated to the Duke of Savoy, a noble prince, to whom, as the translator William Ward, says, "trifles or fables are not to be presented, not being a man under whose name or protection lies or vain inventions ought to be set forth." So here we have a lively picture of the sad estate of our art towards the close of the middle and indeed dark ages.

FAMILIAR PAPERS ON CHLOROFORM.

By THOMAS SKINNER, M.D., Liverpool.

I.—THE VALUE AND FRUITS OF "GOOD WORDS."

I PRESUME that there are very few of us unacquainted with the popular monthly serial called *Good Words*. I also presume that, however short of the mark the work may be to the expectations and attainments of some, we must nevertheless give the work and its distinguished editor all credit for the very best intentions, and wish *Good Words* God-speed, but not without some passing criticism.

About a year ago, a tale was published in *Good Words* called "Oswald Cray," written by the popular authoress of East Lynne, Mrs. Henry Wood. In the number for March 1864, there is introduced a long sensation article on pain where no pain exists, but where some surgical operation is to be performed. The gist of the tale, having reference to chloroform, is as follows. One of the leading characters, Lady Oswald, meets with a railway accident, regarding the nature of which, the reader is left in total darkness. Her medical men meet in consultation over her case; namely, a Dr. Davenal and Mr. Mark Cray. They conclude that some surgical procedure is necessary, but they differ as to the necessity of inducing anæsthesia by chloroform. It so happened that Lady Oswald preferred Mr. Cray to Dr. Davenal as the operator on the occasion, and when Dr. Davenal was assisting or rather carrying the nurse (who had fainted) out of the room, Mr. Cray on his own responsibility put Lady Oswald under chloroform. Dr. Davenal returns; the operation, whatever it was, is performed successfully; but the patient never rallies, and within "one poor hour" Lady Oswald is dead. The interval between the dangerous symptoms and actual death is pretty considerable; but it is well filled up by some very nonsensical talk between the doctors.

A more unlikely scene it is hardly possible to conceive; in fact, it is only necessary to place the facts before professional men, and they cannot but condemn the whole narrative as *sensational* in the extreme, and contrary to medical custom and etiquette in all civilized nations.

I fancy I hear the reader exclaim *cui bono*? Why allude to such nonsense? I reply, simply because *Good Words* is a most popular and influential magazine; it is extensively read, and to a very great extent it moulds the popular opinions of the day on a great variety of subjects—chloroform not excepted. It behoves us then to look alive and counteract this morbid influence, by each of us in his own sphere informing his friends and patients, as opportunity offers, that the whole tale told in it about chloroform is downright nonsense!

Will it be believed, that I have been informed in more quarters than one that *Good Words* is pledged to allow nothing into its pages that favours chloroform? I trust, for the sake of its excellent editor, that this report is false. In a conversation which I had with Professor Simpson the other day while in Edinburgh, we came upon the subject of the *chloroform sensation scene* in *Good Words*; and he said he had a good mind to ask Dr. Macleod to give him permission to write an article on chloroform for his magazine. If Dr. Simpson does so, we shall soon know "which way the wind blows."

Now for the "fruits of *Good Words*." I was lately consulted by a lady who had been suffering from *fistula in ano* for eight years or more. On being informed of the nature of the case, and that there was nothing for it but a cutting operation, she trembled all over; but I found that the trembling was not caused by the thoughts of the operation; it was at the thoughts of having to take chloroform, from the effects of which, like "Lady Oswald," she might never recover. On making further inquiry as to the origin of her fears, she told me that she had "read a tale called 'Oswald Cray' in *Good Words*; that the very name of the work and of the editor were sufficient guarantees of the truth, or at least of the correctness of the story; and that it had so deeply impressed her of the dangers of taking chloroform, particularly from those who boasted of having great confidence in the agent, that she would rather postpone the operation until she could make up her mind." After a lapse of six weeks, and by dint of occasional reasoning with her and her friends, I prevailed on her at last to consent to be operated upon under chloroform. On January 10th last, I put her under chloroform and incised the fistula, without the assistance of any one but her nurse (my patient objecting to the presence of a stranger). The patient made a rapid and most satisfactory recovery, and is now as great an advocate for chloroform as she was previously the reverse.

Add to the above the following scene, also the fruits of *Good Words*. Shortly before I entered the house of my patient, her clergyman, a believer in *Good Words*, made his exit; and, immediately before inhaling the dreaded chloroform, she begged that her step-child might be brought to her bedside, "that she might kiss her, probably for the last time." I do not make these remarks in derision of the beautiful motives which dictated the actions, but merely to show the state of mind produced in my patient by the perusal of that nonsensical and far fetched scene described in *Good Words*.

I have only to add, that centuries may elapse before *Good Words* produces as much real temporal good to humanity, as chloroform has already accomplished in sixteen or seventeen years.

ILLUSTRATIONS OF THE DIFFERENT FORMS OF INSANITY.

By W. H. O. SANKEY, M.D.Lond., Proprietor of Sandywell Park Private Asylum; Lecturer on Mental Disease in University College, London; late Medical Superintendent of the Female Department, Hanwell Asylum.

[Continued from page 137.]

THE next illustrations will be of cases of General Paresis. This term has been proposed in the place of "general paralysis", to which there is this fundamental objection, that, in the ordinary acceptation of that term, such a state would be equivalent to death. To avoid this absurdity, it was proposed to insert the word "incomplete". The name then becomes long, and is still inexact; and, moreover, does not separate those diseases with from those without insanity.

By "general paresis of the insane" is meant a peculiar form of mental disease, very common in asylums, having peculiar and well marked characters, and attended with mental unsoundness. And it must be distinguished from a general paralysis met with from spinal disease, and from the state produced by spirit-poisoning or alcoholism.

The scope of these papers does not admit of a discussion on abstract questions of pathology. It may be, however, stated that the French specialists consider that general paresis is a peculiar form or a distinct species of cerebral disease. To this opinion my own experience also leads; though I consider that those writers who view the paralysis as a mere phenomenon engrafted upon a case of insanity, or a mere complication or mode of termination of the disease, form a large majority of pathologists generally. I consider one cause of this difference of opinion to arise in a want of clear definition of the cases which are included in the term. There are examples of motor paralysis, undoubtedly, as from spinal disease, or even from cerebral disease, in various kinds of cases of insanity; and these are, as it were, accidents, not attributes, of this affection; and such accidents occur as one of the sequels of cerebral mischief, resulting from disorganisation of the nervous tissues. Such paralysis occurs in the asylums in all forms; as local—circumscribed; as hemiplegia, or paraplegia. Necessarily, these grave complications occur towards the end of the disease; for they contribute to the termination of life. But they occur also after various periods of the attack—sometimes in cases of very long standing, and in conjunction with various other symptoms, as in epileptic mania, in melancholy, or mania; or when the patient has passed into a state of dementia.

The disease meant by the writers on general paresis is different. It has its peculiar mode of attack, its peculiar progress and duration. The phenomena occur in a given order; though of course, as in all disease, the individual cases present certain variations.

The following cases are selected as typical examples of general paresis.

The first case is condensed from the reports, which extend over a period of two years and five months, with comments interspersed. The duration of this case is a fair average of the disease.

E. E. was admitted on November 17th, 1859, during my absence from the asylum. The history was gathered from her husband by my assistant. She was 33 years of age, married; the wife of a policeman; of plain education. She never had any children. The present was the first attack. There was