

only, two medical men have died—Dr. McNab, sen., of Epping, and Mr. Francis Cooper of Southampton. Not ten days before his fatal attack, Mr. Cooper said to me, "I feel a young man;" and though I saw what he did not feel—the marks of the wear and tear of life—yet he was a man of unusual vigour, and of that kind of organisation most fitted for strength and endurance. The next time I saw him was twelve hours after his attack, when he lay prostrate, leaden, sunk-eyed, nearly pulseless, hopeless, except so far as there is hope in cholera where there is life. He had had disordered bowels for a week; but he continued his official work as officer of health, together with his private practice. He worked from morning to night, and for the last day or two without appetite. Then came the suddenly violent purging and vomiting, and he never had reaction. He might have taken medicines for the premonitory diarrhoea, and I believe he did; but he went on with his work, and this made the mischief fatal. Had he, when his bowels were loose and his appetite failing, gone to bed, kept himself warm and quiet, and in the recumbent posture, so essential to the treatment of diarrhoea of an urgent kind, taking any suitable medicines he knew would suit him, there seems no reason why, with his fine organisation, he might not have lived. And I would most strongly urge those of us who, whilst attending cholera cases, may have any diarrhoea or griping pain in the bowels, to do themselves what they would advise others to do—not to take astringents and go on with their work, but to go to bed, to apply a hot bag to their bowels, to keep quiet in the recumbent position until they are well; and, if they find this warmth and rest, and such remedies as they are in the habit of using for diarrhoea, do not remove it, and wish to get to work again soon, to sit in a hot water hip-bath at 90°, to raise it gradually to 110°, having mixed half a pound of mustard in it; and remain in it half an hour. I have seen a patient, who has had diarrhoea for nine days, get out of such a bath free from pain, and with no return afterwards of either the nine days' sickness or the purging. If a man has any doubt as to whether he should act on the safe side, let him think of the change in a prosperous household when the hard worker is gone.

### CASE OF SENILE GANGRENE: RECOVERY.

By J. BIRCHENALL, Esq., Macclesfield.

HANNAH ADAMSON, aged 72, of swarthy complexion and bilious-nervous temperament, had been for many years the subject of a chronic bronchial affection, together with periodic asthmatic paroxysms in cold and changeable weather. She had also suffered much at times from acute rheumatic pains of the costal and intercostal muscles, from occasional gastrodynia, and other forms of muscular rheumatism. Her appetite had been failing for some time, and her strength declining (though formerly very robust); her flesh was wasted and flabby; and there was extreme arcus senilis, owing to the semi-erect and prone posture she had been obliged to maintain when in bed. On June 29th, 1864, she complained that, during the two previous nights, she had experienced agonising pain in the left foot, which, on examination, I found to be gangrenous, a dusky sub-inflammatory blush occupying the entire metatarsal surface; the little toe black and insensible, with a patch of vesication stretching onwards from its root towards the cuboid bone. A spirit lotion was ordered to be applied with lint, under a covering of oil-silk; and a pill, containing half a grain of opium with a

grain of camphor, to be taken every three hours; the strength to be supported with beef-tea and soups; and, as the pulse was small and feeble, with milk and brandy in the intervals.

On the following day, I found the patient more free from suffering, though the slightest motion of the toes caused intense pain. The pills were continued; and camphorated spirit and laudanum, in the proportion of one of the latter to two of the former, substituted for the spirit lotion. This treatment was persisted in for three or four days; but, at the expiration of this period, as the erysipelatous blush was becoming more dusky, and the cutis under the vesicated portion of the integument was assuming a greenish orange tinge, it occurred to me to brush over the parts with tincture of iodine, in the proportion of forty-eight grains to the ounce.

On the following day, I was pleased to find that the duskiness of the skin, as well as its sensitiveness, was diminished; and that the serous exudation of the vesicle was getting absorbed; although, in the interval, the second toe had put on a dark livid hue on its under surface. The iodine application was now repeated at each visit, for six successive days, to the toes affected, as well as to the foot (the embrocation with lint being still continued). At this period, the latter had assumed a comparatively healthy appearance, the inflammatory blush and pain having entirely disappeared. The second toe had regained its natural state. Sensibility had returned in the little toe; it had lost its shrivelled character; and the upper surface was changed from a purplish to a brownish hue. To this warm poultices were now applied, under the use of which the cutis on the under surface slowly sloughed away, leaving a clean sore, which gradually cicatrised under the use of the unguentum cere.

Though there was no obvious indication of disease in the blood-vessels of the limb, as the remote cause of the gangrenous condition, I had reason to suspect organic disease of the heart and its large vessels; but its precise nature was not determined; as, at the time of her death, which occurred in January last (from general debility), I was again laid aside by my bronchitic affection.

### IS ALCOHOL FOOD OR PHYSIC?

By PATHFINDER.

I NOTICE in a contemporary three laboured columns of writing, purporting to be a reply to a leader in this JOURNAL on the question, Is Alcohol Food? May I be permitted to appraise this criticism very briefly? for to me it seems,

"Like a tale of little meaning, though the words are strong."

For any misapprehension which anybody may have of the nature of the French experiments, the eminent men who performed them are not responsible; but no misrepresentation can be greater than that which insinuates that only "a very minute portion" of the alcohol is accounted for. M. Perrin, in his crushing reply to M. Baudot, shows that nearly one-third was re-collected in some of his experiments; and a litre of French wine is not a quantity which, on a Frenchman especially, will produce "profound intoxication."

The charge of "inexact research" is itself an illustration of inexactness. The experimenters either did, or did not, make and record examples of the non-absorption of liquid chloroform and ether. If they did, I shall certainly trust to their record; without impeaching the differently circumstanced (because differently) resultant of Dr. Anstie. If both be true, then

the error of the Frenchmen is an error of inference; generalising too soon. If they did not themselves experiment, then, again, they were simply illogical and credulous; but, in either case, the exactness of their actual researches on alcohol remains unaffected. If not, how can Dr. Anstie call them "contributions" of "great value"? The question is, did their experiments prove that alcohol is not decomposed in the body? Certainly they did. If ever anything was proved, they proved, first, that the living system, from within a few minutes of receiving alcohol and for long hours afterwards, persistently eliminates the poison; and, second, that the derivatives of alcohol (alcohol in the act of transition to aldehyde and acetic acid, as alleged by Todd) were never present. Talk about any other point than this, is simply impertinent and sophistical. I say to Dr. Anstie: If the eggs were eaten, produce the shells; if the wood were burnt, show me the ashes. Neither M. Baudot, nor he, I venture to say, can do this; but, until they do, the proof of the prooflessness of Dr. Todd's theory of alcohol being food remains irrefragable.

As to the question of alcohol as medicine, if Dr. Anstie could prove anything here, it would not in the least weaken the assertions made in the JOURNAL concerning food. But what Dr. Anstie does, is to concede "that a certain reaction has taken place since Dr. Todd's death against his practice in regard to the administration of alcohol"; and to "hope that a new and very delicate indication of the propriety, or otherwise, of commencing or continuing the use of alcohol in febrile states may hereafter be available!"

It is amusing to note the dogmatic tone with which this young author speaks of those who ignore his pet and proofless statement of the difference of action between the first and second, or second and third, spoonfuls of wine! Why, the most experienced and enlightened physicians who yet use alcohol—such as Dr. King Chambers—expressly use it for its sole virtue of narcotising, and as expressly repudiate the small dose system as an inefficient deadening of the system!

Dr. Chapman, another "working physiologist", as Dr. Anstie calls himself, in his little work on *Cholera* (pp. 34-7), while admitting some of the phenomena stated, gives a very different interpretation to them. But his cases show that, what Dr. Anstie alleges of minute doses of alcohol is equally true of "an extraordinary quantity"; which cuts away entirely the ground of Dr. Anstie's inference, that the difference of physiological condition resulting depends upon an *altered action of the alcohol*. After minutely detailing his cases in relation to alcohol and opium, Dr. Chapman arrives at a conclusion which seems to me much more reasonable and logical than the inference that where qualities of No. 1 (alcohol) and No. 2 (body) are joint causes, and when No. 2 is altered, the joint effect (3) is altered—therefore *à la* Anstie, it is because the quality of No. 1 is fundamentally different, in different doses. Dr. Chapman does not conclude that the nature of the drug is transformed, because it may "apparently" produce no narcotic symptoms (which are joint results). He says: "The drug is not inoperative; its influence on the brain is counter-balanced, and so far the exertion of narcotic power is masked (only); but its influence on the sympathetic (nerve) and on the spinal cord is in no degree opposed (or changed). On them it expends its full force, and, hidden from physical vision by co-operating with and intensifying the disease, hastens the death of the patient."

Dr. Anstie had need, on this weak point, to bring in the dead weight of Mr. J. S. Mill's logical authority. But, in doing so, he only falls out of the frying-pan into the fire. Mr. Mill, if examined by any com-

petent person—such, for example, as Mr. Stirling, the author of the *Secret of Hegel*, and the critic upon Sir William Hamilton—would have enough to do to defend himself. I could point out a hundred fallacies in Mr. Mill; and I am not disposed to accept the responsibility of his judgments. I observe, for example, that he has the theory that intoxication arises from the vapour of alcohol ascending from the stomach! But what is the pith of the remarks quoted from him? Why, that *quantities* are important elements in certain effects. Of course they are; who ever disputed it? Is it not equally patent, that *qualities* are quite as important? But the astounding blunder (I will not say "unpardonable") is this: that the whole essence and meaning of the extract from Mill, has reference to the chemical law of equivalents and proportion. Now, is that law in any way involved in passing from the use of the first to the second glass of wine? Pray let Dr. Anstie explain himself.

The quantity, of course, has to do with the fact whether the action of alcohol be gentle or violent—i.e., of a small or a larger degree; but how it affects the question of the kind of action, I am at a loss to perceive.

Mr. Mill, however, affords an excellent example of Dr. Anstie's cardinal fallacy that, because the physiological symptoms are different in different circumstances or with different doses of a drug, therefore the force and character of the drug is different. "If gravity retards the upward motion of a projectile and deflects it into a parabolic trajectory, it produces, in so doing, the very same kind of effect, and even the same quantity of effect, as it does in its ordinary operation of causing the perpendicular fall of bodies when simply deprived of their support."

I cannot believe that "gravity" is a different kind of force when seen in the curve and when seen in the right line—that impetus is a "stimulant" in the one and a "narcotic" in the other—as Dr. Anstie asserts of alcohol; possessing a different kind of property, or changing its qualities with the accident of dose or application.

Lastly, I observe that the "liberal" use of wine in puerperal cases is commended; and immediately followed by the assertion that it is a libel to affirm that medical prescription of intoxicants often creates drinking habits. Well, all I can say is, I know many such examples—deplorable examples; but, of course, Dr. Anstie will be ready with his reply. "So much the worse for the facts!"

**MEDICAL SERVICES AND THEIR REWARD.** The death of Dr. Francis Cooper of Southampton, brings into strong relief the burden which is often imposed on a conscientious officer of health. Dr. Cooper had held this post in Southampton for fifteen years, during which he calculated that he had paid sixty visits a week, ten for every working day, to local slaughter-houses, lodging-houses, and nuisances of every description. For all this labour—performed, as his townsmen believe, most thoroughly—he received at first nothing, then £150 a year, and at last £200; the highest reward being in fact equal to the wages of a first-class artisan. The task, moreover, is one which scarcely allows of private practice, and certainly brings no business; the well-to-do dreading the visits of a man always in contact with typhus and cholera, and stench, and other unpleasant things. After the outburst of cholera in the town, Dr. Cooper worked "double tides," and though sixty-four years old and troubled with diarrhoea, still over-exerted himself to suppress a noxious effluvia arising from some cement works, and died of a virulent attack of cholera. He fell fighting as much as any soldier who ever died in the field. (*Pall Mall Gazette*.)