

effects of the cause which had been in operation to determine the attack, with the very compressible and intermittent pulse, the case was treated by stimulating enemata, diffusible stimulants, antispasmodics, and nourishing diet. In fact, it was treated on the same principle as any other nervous affection of depressing nature would have been. The utility of the cold douche was very doubtful in this instance; it is a remedy I should not use in another. From what I observed of the effects of the galvanism, I conceive this agent to be of great use in these cases; if it did not shorten the attack, it would certainly have the effect of diminishing the rigid state of the muscles

Original Communications.

DEATH AFTER EATING RAW RICE.

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INDEPENDENTLY of its interest as a narrative of a rather unusual form of disease, I think the following is worthy of record and of the attention of the profession, as disclosing a widely spread and dangerous habit, originating in the promptings of female vanity.

On March 21st, I was requested to attend E. T., aged 15, a nursemaid, a fine, handsome, well grown girl, who had been seized, while walking with the children, with severe pain in the stomach and left shoulder, shooting through to her back. The attack was so severe that she reached a cottage with difficulty; and thence she was carried home. She vomited some brandy that was given to her, and continued to do so occasionally till I saw her, six hours after the attack of pain. The vomited matter was thrown away, except the last, which consisted of bile, with mucus and a white grain or two. Her face was rather pale, skin warm, though at first she had had rigors, and her feet had been very cold. The tongue was whitish, but clean; pulse moderate in fulness and frequency. She had great thirst and restlessness, with quick breathing, apparently from the severe pain; which, however, was not much increased by pressure over the stomach. Upon inquiring the cause of the attack, I was told she had been eating some grains of raw rice in the morning; and that, though usually very healthy, she had had a somewhat similar attack on the 12th, after her return from festivities at Cowbridge on the 10th. As the stomach seemed empty, with much flatulence, and as her bowels had acted that morning, I gave her some tincture of opium with chloric ether, and aromatic spirits of ammonia, which I repeated every hour. After two doses, the pain and vomiting ceased, and I returned home.

March 22nd. I was called at an early hour to visit her, the vomiting having returned soon after I left, and having continued all night at intervals. I now found her with flushed face, quick pulse, furred tongue, which was not dry, nor was her skin. She was very thirsty, but vomited all she took, as well as quantities of green bile. The pain had now removed to the right side and shoulder, though it still remained in the stomach. She had passed urine once, but no stool since the attack. I now learnt that she had bought half a pound of rice the day before the attack, most of which she had eaten—indeed, she was eating it just before she was taken ill; and that her former illness was caused by eating a pound of raw rice she had bought on the 10th. She had acquired this habit from a former servant, who practised it for the purpose of improving her complexion; and she continued it from choice, her natural tint being very fair. Conceiving the case to be one of obstruction, I gave a dose of calomel and croton oil, and an enema of castor oil and turpentine, which emptied the rectum of

a few scybala. A second enema, after an interval of two hours, returned unchanged; but the vomiting seemed allayed by this and mustard poultices to the stomach.

March 23rd. I found her much the same; but there was some tympanitis with pain and tenderness in the left flank, which felt full, but soft. She had passed urine, but no fæces; so I continued the enemata at intervals, with saline effervescing draughts and mercurial frictions over the abdomen, and two five-grain doses of calomel, to allay the vomiting and arrest the impending inflammatory action in the abdomen.

March 24th. I was called to see her at 1 A.M., as she was thought to be sinking. The vomiting had continued till she was quite exhausted. Everything she took by the mouth, except in very minute quantities, was immediately rejected; and the pain and tympanitis were much increased. As the castor oil and turpentine injections had had no effect, except to produce irritation of the rectum, I determined to try tobacco enemata, after having revived her a little with minute quantities of brandy and water and yolk of egg. The enemata were given every three hours; after the third application, she passed a quantity of flatus; and there was a slight appearance of fæces, followed in an hour by a spontaneous evacuation, which gave considerable relief, and enabled me to return home.

March 26th. The bowels had acted several times; but, as the fæces had been thrown away, I could not examine them. The pain and tympanitis were less, but the thirst continued intense; and the tongue was very dry, red, and sore; but the gums were unaffected, though she had taken several doses of calomel. The vomiting continued on taking liquids, which she persisted in drinking in large quantities whenever she could procure them; so that it was necessary to restrict her allowance. She had some honey and borax for the mouth, and the salines were continued.

March 30th. Menstruation had occurred before its time, and she had been better the last four days, the sickness having abated, though still brought on by large quantities of liquids. The tongue, red and sore, was scattered over with a thick aphthous coating. The thirst continued urgent. The abdomen was less painful. The bowels were rather relaxed, not distended. The fever had abated. The medicines were continued.

April 1st. She had taken cold from getting out of bed and going into the next room undressed, and she had a cough. The treatment was continued.

April 18th. From the time she took cold there was no further improvement in her general state, though the vomiting and purging were less urgent. The fever and thirst continued, with profuse perspirations and hectic flushes. The pulse became extremely rapid, and the cough very severe and frequent, with mucous expectoration, but with no pain in the chest, or any physical signs of tubercular deposit. On the 11th, the mouth was quite well, the mucous membrane being of its natural pale pink colour; but, three days before her death, the aphthæ returned as bad as ever, attended with diarrhœa and pain and tenderness of the bowels. She died on the 17th, presenting every symptom of acute phthisis.

On further inquiry, I find that the habit of eating raw rice and wheat is widely diffused and extensively practised, not only in this part of the kingdom, but even in London, for the purpose of improving the complexion by giving it a more delicate tint. That it has any such power, except indirectly by producing indigestion, I very much doubt; and that it had this effect in the present instance, I ascertained from the girl's mistress, who informed me she was continually making ginger-tea to correct the flatulence from which she suffered. Though new to myself, probably some of the readers of the JOURNAL may have met with instances of the prevalence of this practice, and may be willing to give their experience of its results.