

shuts it off from its perilous neighbours: the ossicula may be discharged, and even the cochlea and labyrinth, without any bad symptoms supervening. I trust I have shown by these remarks the importance of investigating otorrhoea in connection with assurance; and I would suggest that no life should be certified as first-class, or even second-class, in whom examination indicates a suspicion of caries, or the existence or recent occurrence of anything like an inflammatory process. I shall be glad if the subject elicit opinions from members of the profession engaged in life-examinations.

### CASE OF ACUTE RHEUMATISM TREATED WITH SALICYLATE OF SODA: RAPID RECOVERY.

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MR. WILLIAM PRICE, aged 46, innkeeper, got out of his bed on Saturday morning, May 20th, 1876, at five o'clock, in order to drive away a dog that was barking. He went into the street and stood in the cold with nothing on but his night-dress, not even his stockings. On Monday, May 22nd, he felt cold, chilly, and poorly. On the 23rd, he could not get out of bed, because of pain and swelling in his ankles, insteps, and wrists. On May 24th, I visited him for the first time, and found him in bed, on his back, in much pain; pulse 92; temperature 101.2 deg. Fahr. The tongue was furred; the skin only slightly moist. He had thirst and anorexia. The ankles, insteps, wrists, and parts of the hands were very red, swollen, tender, hot, and painful. The patient was unable to move them. He had no sleep the previous night because of severe pain. The bowels were opened after medicine. The urine was high-coloured, scanty, with much lithates. He had slight cough. There was no cardiac murmur. He was ordered to have the inflamed joints packed in wadding, and to take thirty grains of salicylate of soda, dissolved in an ounce and a half of water, every three hours. At 10 P.M., he had taken four doses. Pulse 80; temperature 100 deg. Fahr. The skin was much moister. The patient said he felt very much better. He had no pain in the ankles or in the left hand, and only a slight pain in the right wrist and hand. He could now use the left hand freely. The bowels had acted once since the morning visit. He complained of soreness and heaviness of the eyelids, and of a slight frontal headache, which had come on since he began the medicine; and he seemed to be somewhat deaf. He was ordered to take a dose of salicylate of soda at 12 P.M., and another at 6 A.M. to-morrow, and afterwards every three hours.

May 25th, 11 A.M. Pulse 78; temperature 99.8 deg. Fahr. The skin was moister, and the tongue cleaner. He had had a comfortable night. The pain in the right hand left him in the night, and since then he had been absolutely free from pain. There were now no local signs about the joints, save a little swelling of the left instep. There was a little soreness about the eyelids. The patient said that he had received great benefit from the medicine, and that it caused no soreness about the throat, nor did it give rise to any unpleasant sensations in the mouth or throat either during or after the act of swallowing. He had now taken since noon yesterday—*i.e.*, in twenty-three hours—seven doses of the salt. After the eighth dose, he was ordered to take twenty grains every three hours, in an ounce of water.—9.20 P.M. Pulse 78; temperature 99 deg. Fahr. The skin was moist, and the tongue cleaner. He had continued free from pain. He had had one natural stool. The urine was turbid, with lithates. He had taken three of the twenty-grain doses: he was ordered to take the rest at twelve noon, and none afterwards, until 9 A.M. to-morrow. There was no soreness about the eyelids; no headache. There was slight deafness. The patient had taken light food in good quantity to-day, and he now suggested that he might be allowed to get up to-morrow.

May 26th, 12.15 P.M. Pulse 70; temperature 98 deg. Fahr. The skin was moist; and the tongue still cleaner. He was somewhat restless during the early part of the night, but very sleepy all the morning. The deafness had left him; the fever was gone; there was neither pain nor any local signs about the joints; only a little stiffness about the ankles. He could use his hands freely, and could kick his legs about. The medicine was ordered to be continued, but in less frequent doses; the next dose to be given at 6 P.M. After this he continued to improve. On the 27th, he ate roast beef for his dinner; and on the next day walked down stairs.

REMARKS.—In the first twenty-four hours of treatment—*i.e.*, from noon on May 24th till noon on the 25th—he took eight doses of thirty grains, in all two hundred and forty grains. In the succeeding period of twenty-four hours, he had six doses of twenty grains—total, one hundred and twenty grains. In the third period, he had three doses of

twenty grains—total, sixty grains. During the fourth period, he had two doses of twenty grains—total, forty grains. Altogether, in four days he had four hundred and sixty grains. On the second day of treatment, after taking the seventh dose, the patient was absolutely free from pain; nor was there any tenderness about the joints, even under rough handling. The temperature fell within twenty-four hours from 101.2 to 99.8 deg.; in the next period to 98 deg.; and on the third day to 97.4 deg. The pulse fell at the end of the first twenty-four hours from 92 to 80, thence to 70 on the third day. The patient was getting worse when he was first seen by me; and although the pyrexia was not very marked then, I am sure it would have been more pronounced that night had it not been for the medicine, the pyretic effects of which were soon manifested. Twenty years ago, the patient had an attack of rheumatic fever, which confined him to his bed for thirteen weeks. In November 1870, I attended him for an attack which lasted sixteen days. He was then treated with bicarbonate and nitrate of potash and opium, with chloral and morphia at bed-time. In this last attack, I gave salicylate of soda in preference to salicylic acid, because the latter has been said to cause more or less soreness of the throat. The soda-salt dissolves instantly in water, and twenty grains in an ounce make quite a pleasant draught. The salt was procured from Messrs. Battley and Watts.

About a month ago, Dr. Clouston of Hay told me of two cases of rheumatic fever which he had most successfully treated with salicine.

## THERAPEUTIC MEMORANDA.

### ENDOCARDITIS TREATED BY SALICINE.

WHEN in the neighbourhood of his residence, on May 14th, I was called to visit J. H., aged 45. He stated that he had been ill two or three days, after exposure to the east wind, with general pain in the joints, cough, and uneasiness in the chest. He now complained of a sense of weight and oppression all over the chest. He had cough, with some viscid expectoration. The skin was hot, bedewed with perspiration; pulse 124; urine scanty, high coloured, with intense acid reaction. On the 15th, the symptoms were aggravated. He had pain under the sternum, going through to the left shoulder, with occasional palpitation, general pain in the joints, but no articular swelling visible. He had been entirely unable to lie down during the night. Perspiration was profuse, the countenance expressive of anxiety. Cough was frequent; pulse 124; temperature 102 deg. There was no abnormal cardiac dulness or friction-sound. A strong blowing murmur was heard with the first sound, heard most distinctly at the apex; the second sound was undistinguishable. There were moist bronchial *râles*, especially on the right side of the chest. Salicine in scruple-doses was given every four hours, in a mixture of glycerine and water. On the 16th, he said he felt better, and that he found relief from the first dose of the medicine. The anxiety of countenance was less apparent. He had been able to sleep a little, with his head and shoulders much elevated. The endocardial murmur was less pronounced; pulse 106; temperature 100 deg. The perspiration was less; the cough was still troublesome; the bowels were regular. He was ordered to continue the salicine. On the 17th, he had been able to lie down a short time, and had obtained a little sleep. The dyspnoea was much less; pulse 90, regular, and compressible; no palpitation; temperature 99 deg. There was a blowing murmur with the first sound, distinct over the apex, but not so harsh; it was gradually lost towards the base. Salicine was given every six hours. On the 19th, he was in every respect better. From this date his improvement was progressive and uninterrupted; and on the 24th he was able to walk a few steps in his garden.

This patient had a severe attack of acute rheumatism about four years ago, since which he had been subject to occasional rheumatic pains, but insufficient to interfere with his occupation. The salicine gave rise to no irritation of the mucous lining of the throat, which is frequently the result of the administration of salicylic acid.

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### ERYTHROXYLON COCA.

I HAVE read with much interest the extremely interesting articles in regard to this drug which have appeared, from time to time, in the BRITISH MEDICAL JOURNAL; and, having devoted some time to the investigation of its properties, I think the readers of the JOURNAL might be interested in knowing the result of my labours.

In the fall of 1874, I received a pound of the dried leaves, the odour of which resembled somewhat that of tea. I gave them to Messrs. Hazard, Caswell, and Co., chemists, of New York, who presented me