far to secure the fluid reaching the back of the throat; the stopcock is turned, and the irrigation continued as long as may be necessary; the fluid flowing into the basin as it leaves the mouth.

The diseases of the *uterus* in which I have found the *douche* of most service are, leucorrhœa, menorrhagia, dysmenorrhœa, congestion, inflammation, erosion, and ulceration of the *os uteri*. The diseases of the *throat* in which it has proved of most value are, acute and chronic inflammation, relaxation, and simple and syphilitic ulceration.

In the treatment of these affections, according to the mode of application, the *douche* may be used as a tonic, sedative, or astringent. We obtain a *tonic* action when cold water is used; but its employment must be continued for a few minutes only. The *douche* in the first instance lowers the vascular activity and nervous sensibility of the part; but, on its cessation, this is followed by reaction and exalted textural and functional energy. By successive applications of the water at proper intervals, the *os uteri* finally becomes firmer in substance and healthier in function, or, in other words, its tone is improved. On the other hand, we obtain a *sedative* action (1) by the *continuous and prolonged* use of cold or iced water, which directly lowers the heat and depresses the nervous and circulating systems of the parts exposed to its operation; and (2) by the employment of warm water, which directly relaxes the structures and enfeebles their vital energy. Lastly, the *douche* is made *astringent* by the addition of one or other of the astringent drugs formerly mentioned.

CASE OF DEATH FROM SHOCK.

By I. HARRISON, F.R.C.S., Reading.

UNDER the above title, a paper (a summary of which will be found in the *BRITISH MEDICAL JOURNAL* for Dec. 12th, 1863, p. 633) was read by me at the Pathological Society of Reading on November 5th, 1862. As the case was in many respects a very interesting one, I will now give its conclusion.

An inquest was held; and the finding of the jury was, "Death from the effects of the accident."

In due course, a claim was presented to the assurance office in which the deceased had been insured. They objected. There was no alternative but to get up the case as completely as possible, and submit to trial. This was very ably done by Messrs. Whatley and Dryland, solicitors, of Reading.

Mr. Jonathan Hutchinson was applied to for more extended information on the various points of the case. Mr. Luke was also consulted. After various conferences, Mr. Hutchinson drew up the following conclusions.

"1. A compound dislocation, with fracture, of the thumb, is not a trivial accident, but a severe, and occasionally very serious one.

"2. It is especially likely to be followed by serious consequences in an elderly and rather feeble man.

"3. The occurrence of severe nervous shock at the time of the accident would very greatly increase the risk attending the local injury.

"4. In this instance, mortification of the thumb occurred, and was spreading to the forearm at the time of the man's death.

"5. The process of mortification doubtless commenced very soon after the injury, as it was complete (the thumb being cold and black) on the day before death (the third after the accident).

"6. Mortification of this character is quite sufficient to account for the symptoms presented, and for the fatal issue.

"7. The occurrence of a scarlet rash is not at all unusual after accidents and after operations, especially in cases of blood-poisoning.

"8. It is improbable in the highest degree that Mr. T. had scarlet-fever: a. His age. b. The rash was not general over the whole surface. c. There was no sore-throat. d. The tongue was not like scarlet-fever. e. He was quite well at date of accident. f. He would not have died at so early a stage, if it had been scarlet-fever. g. All the medical men who saw the rash considered that it was not scarlet fever.

"The probable causes of death were, the fall; the injury to the thumb; the shock to the system (bodily and mental); gangrene of the thumb; the shock of the gangrene and toxicæmic absorption from the gangrenous part."

It may be added, that no scarlatina followed in the house, though there were children who had not had it.

We were prepared to go to trial at the Kingston Assizes. Mr. Holt and Mr. Paget were retained by the office; and they, I believe, would have supported the view that death arose from scarlatina. A few days, however, before the assizes, the money was paid; viz., £1,000.

A clinical lecture by Mr. Paget, on "Scarlatina after Operations", in the *BRITISH MEDICAL JOURNAL* of August 27th, has determined me to publish this case; and I should be much obliged if any gentleman would have the kindness to give, through the *JOURNAL*, any information he may possess as to the frequency of *rashes like scarlet-fever* after operations, accidents, etc.

UTERINE HYDATIDS IN THREE SUCCESSIVE GESTATIONS.

By ASHBY G. OSBORN, Esq., Dover.

MRS. J. P., when a single woman, aged 17, supposed herself pregnant at the beginning of 1862. She suffered most severely with sickness and retching, and was often obliged to lie in bed all day. She cannot remember having had any fall, blow, or fright, during this gestation; but on April 26th, she went to see a man who had hung himself. She did not consider that this sight had affected her, but flooding commenced a week afterwards; it soon ceased, but frequently returned, sometimes as much as half a teacupful being lost at a time till June 12th, when profuse hæmorrhage with labour-pains having come on, she was delivered by Mr. John Walter of Dover, and the late Mr. J. E. Parratt of Charlton, of a mass of hydatids—as much as would fill three parts of a hand-basin. The principal loss of blood occurred before the bulk of the diseased growth was removed. There was scarcely any loss afterwards; but on the following day, something which her mother described like a "pig's night-cap," came away; this, I suppose, was the decidua. She was much weakened by the flooding, but in the following spring, again considered herself pregnant by the same young man.

She was more sick and incapable than is usual in early pregnancy; but she had not the bilious vomiting which had been so distressing the previous time. Flooding commenced about the third month. It ceased repeatedly, and returned without warning. The principal hæmorrhage occurred when labour-pains came on June 13th, 1863, one day over the twelvemonth since the previous delivery. The hydatids were less in quantity; and the decidua passed the second day following.

Her friends supposing that these hydatids were dependent in some manner on the young man with