ORIGINAL COMMUNICATIONS.

FOUR CASES OF CONSUMPTION, IN WHICH THE PULMONARY DISEASE WAS ARRESTED OR CURED WITHOUT MARKED OR PERMANENT IMPROVEMENT OF THE GENERAL SYMPTOMS.

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THE following cases are interesting, as they serve as illustrations that a person may die from consumption, notwithstanding the cure of the condition of the lung upon which the disease is by some considered to depend.

CASE I. Hugh Craney, aged 24, was admitted into the Northern Hospital, October 26th, 1853. He was a carter, and had been much exposed to wet and cold. He had had consumptive symptoms for some time, and had been for three months during the previous winter in the infirmary. On admission, he was extremely weak and attenuated, had a severe cough and copious muco-purulent expectoration. Small caverns were detected under the left clavicle, and also under the right. There was evidence, also, of a very large cavity a little above the right mamma.

Shortly after his admission, he was seized with very severe hæmoptysis, and expectorated for two or three days almost a pint of blood in the twenty-four hours. Sulphuric acid, acetate of lead and opium, and blisters to the chest, failed to make any impression upon the hæmoptysis. Five grains of tannin were then ordered to be given three times a day. Under its use, the hæmoptysis steadily abated, and ceased at the end of the fourth week; the quantity having steadily diminished from the first day he had taken the medicine. At this time he was exceedingly weak; the cough was distressing, and the expectoration very copious; he was unable to leave bed, and almost too weak to speak audibly. Steel, inhalation, and cod oil having been tried without any beneficial results, the tannin was continued, with the addition of a grain of quinine. Under its use, the cough abated; the expectoration steadily diminished; and the strength improved.

In January, he was able to sit by the fire, and walk feebly about the wards. His cough left him altogether; and the expectoration did not amount to a tablespoonful in twenty-four hours. Amphoric breathing was heard on the right side, and tubular breathing at the apices of both lungs; no moist râles were heard anywhere.

Towards the latter end of January, the appetite began to flag, and the weakness returned. The cough, however, remained pretty tolerable. Ultimately, the feet and hands became œdematous, and marked by spots of purpura. The urine was densely albuminous. He gradually sank, and died on February 17, 1854.

The *post mortem* examination revealed cicatrices under the left clavicle, and tubercles in a dry cheesy state under the right. The upper lobe of the right lung was adherent everywhere, and contained a very large cavern (the size of a big fist), which was perfectly empty, and was everywhere lined by a smooth distinct membrane, which was very vascular in many places. This membrane seemed, under the microscope, to be composed of simple round cells, in which no nucleus could be seen, or any resemblance traced to epithelium; they were more like colourless corpuscles. The liver was large, solid, and apparently healthy; but on being examined by the microscope, the ordinary cell structure could not be found. The whole seemed to be homogeneous; and no fat globules could be seen anywhere. The gall-bladder was well filled. The kidneys were both enlarged to above a-third more than their natural size, and were white and mottled. Under the microscope, many tubes were found filled with fatty globules; and the epithelium in the others was extremely soft, and easily torn away; most of the tubes were unusually large, but many were small, atrophied,

and deficient in epithelium. The aorta contained many white spots under the inner membrane, which were composed of minute oil globules.

CASE II. Hedson Cheuse, aged 44, a seaman, had been ill for six weeks with cough, expectoration, debility, and loss of flesh. He was also suffering from diarrhœa. On examination of the chest, cavernous respiration was detected under the left clavicle; and moist crepitation was general, posteriorly and inferiorly. Under the use of creasote inhalation, cod oil, and steel, the cough left him; but the diarrhœa seeming to be increased by the oil, it was temporarily suspended, and sulphuric acid given.

In three weeks, the cough and diarrhœa were entirely cured; but the debility remained unaltered, or, if anything, increased. Cod oil, steel, quinine, wine, porter, and as generous diet as the stomach would bear, was given; but still he sank lower and lower. The urine was healthy, the bowels were regular, but the skin was cold, and the legs were somewhat œdematous, and occasionally painful. He gradually sank, and died at the end of six weeks from his admission.

The *post mortem* examination revealed a small cavern under the left clavicle, and a very insignificant amount of general bronchitis. All the other organs, including the whole tract of the intestinal canal, appeared to be perfectly healthy.

CASE III. Henry Simmons, aged 30, a black sailor, had been ill for four months with the usual signs of phthisis. Auscultation revealed caverns under the left clavicle, with some pleuritis. The pulse was 100; the cough severe; and expectoration copious. Under the use of creasote inhalation, cod-liver oil, and steel, he improved very decidedly, as far as the cough and expectoration were concerned. The pulse fell to 90; he seemed to be both stronger and better; the appetite improved; and the sweating diminished.

Diarrhœa came on about ten days after his admission, but was speedily checked by chalk mixture. A few days after this, the improvement so decided before, was arrested. The cough and expectoration continued steadily to diminish; but there was no more increase of strength, nor more appetite or increase of flesh. The pulse gradually became weaker; the appetite failed altogether; and the man died six weeks after his admission.

On *post mortem* examination, numerous large cavities were found in the left lung, some half full, others quite dry, and apparently on the road to becoming covered by a membrane. The other viscera seemed to be perfectly healthy.

CASE IV. Mrs. A., who had lost two sisters with decline, presented herself with well marked symptoms of phthisis—cough, salivary expectoration, night-sweats, emaciation, etc. No distinct auscultatory phenomena could be detected; and it was presumed that the tubercles were in a diffused miliary condition. Under the use of sulphuric acid and digitalis, the pulmonary symptoms gave way; but they were followed by a severe attack of diarrhœa, which lasted for six weeks. This was ultimately cured by astringents and opiate injections. Notwithstanding the cure of the most prominent symptoms, no general improvement took place. There was no appetite, no power to generate heat, nor increase of strength; the pulse continued weak, rapid, and irritable; the hair fell off; the catamenia ceased; the bowels, however, were regular; the urine was healthy; there was no cough whatever, or any complaint referred to any separate organ. She gradually became weaker, and died about six months from the first symptoms of phthisis having appeared. No *post mortem* examination was allowed.

REMARKS. These cases, similar ones to which are doubtless familiar enough to everybody, are not without their interest in the consideration of the pathology of tubercle. By some we are almost led to believe, that when once the deposition of tubercle has taken place, it is to that alone that all succeeding symptoms met with in the course of the disease may be traced. The thing formed is magnified

above that which produced it: the shadow is more thought of than the substance. This danger seems to attach more to the occurrence of tubercles in the lungs than elsewhere; for a cure of the ulceration in their substance, if it can be effected, is looked upon as tantamount to a cure altogether; while no one who simply cures a strumous abscess, a diseased bone, a swelled gland, and the like, thinks he is eradicating struma. The fact that scrofulous manifestations may be arrested, cured, and prevented, while yet the diathesis remains, is sufficiently clear to every one; but there are many who consider that when the manifestations in the lungs are counteracted, a total cure must follow. Patients are supposed to die, not from the disease which produces the ulceration of the lungs, but from the ulceration itself. That this is not the case, the above instances sufficiently prove.

Another case under my care at present illustrates still further the position, that if the disease in the system be strong, the place where it manifests itself is of secondary importance.

CASE. James Fisher, aged 21, a sailor, took much mercury two years ago. Six months ago he was much exposed to cold, and found that the cervical glands on both sides began to swell. Since that time, his health and strength had diminished steadily. He lost flesh, and perspired copiously. On admission, he was suffering from rheumatic pains in the limbs, and general debility. There was an enormous swelling of the cervical glands on both sides, extending from the ears to the upper edge of the scapula. The pulse was feeble, 120. The appetite was bad, and his sleep was disturbed; debility was extreme; the nails were clubbed; and there was considerable emaciation. In fine, he looked like a man far gone in phthisis. A variety of plans were adopted to improve his condition, but none of the ordinary tonics made any impression. The cod oil was rejected by the stomach. He continued gradually to diminish in strength; although under the local use of iodine, a diminution took place in the cervical swellings. For a few days, a cough and mucous râles led us to fear the extension of the disease to the lungs. Liqueur potassæ was at last resorted to; and at the end of ten days a decided improvement was apparent. This was shown first in the general symptoms, the local ones remaining the same. As the man is still under treatment, I cannot give the sequel.* That it may be a favourable one, I may infer from another case in which the manifestation of the disease was equally decided, though located in the lungs.

CASE. Nicolas Salary, aged 37, an interpreter, had just been operated on for fistula in ano, and then transferred to the medical wards. I found that he had had well marked symptoms of phthisis for three months. There was complete solidification of the apex of the left lung. The cough was severe, and the expectoration somewhat scanty. The respirations were 36, and the pulse 120; debility was considerable, and emaciation moderate. Under the use of creasote inhalation, cod oil, and steel, the general symptoms began steadily to improve; and at the end of six weeks he went out, apparently perfectly cured. No alteration, however, was detected in the condition of the lung. The disease being arrested, it is to be expected that time and natural processes will bring about an ultimate cure of the remaining local complaint.

These cases sufficiently indicate that in consumption we have not simply to contend against a particular condition of one organ, but a general disease of the system. They afford corroborative evidence, if such is at this time wanted, that the desideratum required is a medicine or plan of treatment which shall give vigour to the constitution generally,—rather than a specific remedy which shall cure the condition of the lungs.

Liverpool, March 8, 1854.

* The man has, since the above was written, been dismissed from the hospital at his own request, feeling quite well, and with the cervical glands materially diminished in size.

TREATMENT OF HÆMORRHOIDS BY THE GALVANIC CAUTERY.

By RICHARD STEEL, Esq.

HAVING observed that in the recent discussion at the Medical Society on the subject of hæmorrhoids and the several modes of treatment thereof by excision, ligature, nitric acid, etc., no mention was made of the galvanic cautery, I am induced to communicate the fact that the latter method has been most successfully applied by myself and also by a friend at my suggestion. His case is a peculiarly interesting one, having been previously treated by concentrated nitric acid, and subsequently by the galvanic cautery. It exhibits the great superiority of the latter in several important particulars, and in a more striking manner than any number of cases in which one method only has been employed.*

The apparatus which we have used for igniting the coil of platinum wire has been made by myself, and consists of a modification of Wollaston's battery of a dozen pairs, so contrived as to admit of being conveyed from place to place with the certainty of not deranging it; and it is set in action with ease and readiness when required. I had previously used a Grove's battery, which I had by me, but felt it desirable to arrange a battery better suited to be sent to a distance from home, and then found immediately ready for use.

The idea of using this plan of treatment for hæmorrhoids was suggested to my mind on learning the satisfactory results of the galvanic cautery, as used by Mr. Marshall, of University College Hospital, for the destruction of morbid growths, also for producing artificial contraction of mucous membrane, especially of that lining the vagina for the cure of prolapsus uteri. Having repeatedly employed the method so suggested for removing erectile tumours and semi-malignant growths, I was struck with the comparative painlessness of the application, and at once conceived the idea of applying it to the treatment of hæmorrhoids. I was confirmed in the idea on examining a case requiring an operation, and which presented so large a mass of redundant matter, that I was anxious to avoid, if possible, inflicting the severe pain involved in the repeated use of the acid on the one hand, and the danger of hæmorrhage following excision on the other. Here was a diseased mass to be destroyed, and relaxed mucous membrane producing prolapsus to be contracted; the loss of substance caused by the actual destruction of diseased tissue primarily, and subsequently by the separation of sloughs, secured the first indication; the contraction of the cicatrices secured the second. The ignited platinum coil being applied more or less deeply, or over a greater or less surface, will produce any amount of destruction of parts or of contraction that may be necessary. The smaller amount of pain and of danger to the patient is such, that I shall in future use it in the treatment of this disease, in preference to any other method with which I am at present acquainted.

Blaenavon Iron Works, near Abergavenny, Feb. 25th, 1854.

CASE OF HÆMORRHOIDAL TUMOURS TREATED BY THE GALVANIC CAUTERY.

By ELMES Y. STEEL, Esq.

I WAS consulted about three months ago by a gentleman under the following circumstances. For thirteen years he had been suffering from hæmorrhoids with prolapsus, in so severe a degree as to be compelled to leave the army, which he did about seven years ago, when he placed himself under treatment in London, without obtaining relief. The malady subsequently became aggravated to the extent of incapacitating him for physical exertion of any kind, such being

* The case referred to is published by Mr. Elmes Y. Steel, in the present number of the Journal.