tained a ruptured Grafian vessel. There was a fibrous tu-
mour of the size of a large pea on the anterior wall of the
uterus, and from it sinuses, large enough to allow a fine
sharpened pen to enter, passed into the lateral ligaments. On
dividing the left lateral ligament, frothy blood escaped, and was traced
thence to the heart; but there was none in the left femoral
vein, nor in the right common iliac. The brain was not ex-

amed.

Remarks. It can scarcely be doubted that the presence of
veins was the cause of death in this case. Violent vomiting
was followed by sudden collapse and speedy death.

Air was traced from the veins of the left lateral ligament to
the heart. It must, therefore, either have been generated in the
uterus, or have been produced in the suddenness of the
attack and the healthy state of that organ; or did violent
vomiting during menstruation cause air to enter through an
unbroken mucous membrane? However improbable this may
appear, it seems the only explanation that can be offered.

Case II. Mr. W., aged 49, was brought into Reading April
20th, 1857, by the county police. He was supposed to be
suffering from intoxication; but as he did not recover in a
few hours, Mr. Walford was sent for, and found him in a very
depressed condition. It was with difficulty that his name and
age could be ascertained from him; and he was quite incapable
of giving any account of his illness. The pulse was very small and
suffused, with some swelling on the great toe, apparently
the effects of travel. The foot shortly afterwards became
swollen; and inflammation extended up the internal saphena
vein, which was also inability to empty the bladder; he
im-
ged till May 6th, and died from asthina.

The difficulty in inducing him to speak, and the peculiar
slow articulation, although without paralysis, led Mr. Walford
to suppose him suffering from softening of the brain, and
he requested my assistance at the post mortem examination,
which was made twelve hours after death.

The body was much emaciated, but not yet cold; the anterior
half of the left foot was much discoulished, and, had the patient
lived, would probably have sloughed; from the great toe a
livid mark extended along the internal saphena vein to
a little above the knee; the whole limb was much swollen, and
inflamed. Both sides of air were observed to exude on
a section of the liver. It seemed so improbable that we
should have met with a fourth case of air in the veins, within
as many years, that we hesitated to believe the fact, and fancied
that compression of the divided liver might have caused air to
enter the open mouths of its vessels, more especially as the
right side of the heart contained fluid blood without air; but
on a more careful examination of the heart, we found air in the
coronary vessels. There was a firm fibrinous clot in the
right ventricle, extending into the pulmonary artery. The
left ventricle was empty, greatly hypertrophied, with much ossi-
c deposit in the aortic valves. We found air in the left internal
saphena, and towards the knee above the foot, and traversed
through the femoral and external iliac veins, and the vena cava
inferior. This last was much distended, and collapsed on
puncture. The left internal iliac and the veins on the right
side were much affected. The left lateral ligament was wrapped
in a dark, frothy, but not putrid exudate, and a marked contrast
to the right, which was much con-
gested, readily breaking down under the finger, but not
heated. The stomatch, intestines, spleen, and kidneys were
healthy. The arm and leg were highly deformed, and the vessels
in the extremities a little distended, but in other respects the brain was healthy.

On opening the thoracic cavity one bubble of air escaped;
but as the lateral sinuses had been previously opened, its
presence during life cannot be insisted on.

Remarks. This case resembles one reported by Maisonneuve
in 1833, and called by him gangrène foudroyante. It differs
remarkably from those in which air enters suddenly. The
duration of the illness, the cerebral condition, with paralysis of
the bladder, indicate a poisoned state of the blood, whilst in
illness dependent on the presence of air the intellect is usually
unaffected. In experiments on animals it has been found that the
injection of air causes inflammation of the lungs.

In the cases now narrated, and those published in the
Journal for June 6th, examples will be found of most of the
effects of air as produced by the injection of air into the
veins of animals.

Dr. Cless, of Stuttgart, has collected the particulars of
eleven cases, and alludes to eight others; and it is remark-
able that six deaths from chloroform air has been found in
the heart. If these facts are correct, we are compelled to
admit that air may enter the veins and cause death—

1. During surgical operations.

2. Through the uterine sinuses, especially during or after
parturition.

3. From local pathological conditions.

4. As a result of the action of poisons.

Case of POISONING BY STRYCHNIA: RECOVERY.

By J. M. BRYAN, M.D., Northampton.

[Read before the South Midland Branch, May 21st, 1857.]

The following case occurred in September 1855; and as
instances of the kind are rare in practice, I have made a few
notes, thinking they might prove interesting. The symptoms
were well marked throughout, and perfect recovery took place;
the little patient being at the present time perfectly well.

Frank Esson, aged 2, son of Richard and Lucy Esson, St.
James's End, Northampton, had been poorly some few days
previously to September 20th, 1855, with bowel complaint;
and, sickness and diarrhoea. In the morning of that day, at
half-past eight o'clock, the mother gave him a powder by mis-
take for another of much the same colour. It was of a light
bluish grey colour, and contained in a blue paper. After giving
it, she went into a neighbour's house, and was fetched back by
her daughter in a few minutes, who said, "Frank could not
stand." On seeing him, she thought he had hurt himself, and
quickly took him up in a chair, rubbed him all over, and went into the yard
for some water. When she returned, he was quite still all
over; the stiffness seemed at first to seize his right leg, and
then proceeded to the body, arms, face, and jaws; his tongue
came out, and was bitten and bloody. She looked very quickly
to my house, he being stiff and stretched out all the way,
and apparently in strong fits. He was so stiff, that it was not
possible to bend him.

As I was present at home, at the time, Mr. Wm. Daniell, of New-
port Pagnell (acting as my assistant), and also some medical
friends, attended him. He arrived at 10 a.m., and was imme-
diately placed in a hot bath in my kitchen, the heat being con-
stantly renewed and kept up until 3 p.m. He had a
dose of sulphate of zinc given him immediately on his arrival;
and, this not producing vomiting, repeated quantities of mu-
tard and water were given, but no sickness took place. Several
doses of castor oil were then given, and two enemas of gruel
with castor oil were administered, whereby some motions were
induced. There was great difficulty in giving the castor oil,
etc., on account of the great and continued trismus, which was
unabated, as was also the tetanus, with arched condition of
the body. The case seemed hopeless; and sal volatile, also brundy
and water, were administered at intervals. He seemed con-
tinually in a state of excitement and looked towards his mother as
she addressed him. About 3 p.m., he was taken out of
the bath, and wrapped in a hot steamed blanket, in which he lay
before the fire till 4 p.m., the spasms seeming to become weaker
when he was in the blanket. Sal volatile was given, and he
had some motions, and passed urine. He was quite sensible
whenever the paroxysms were off; and occasionally, on their
coming on, he said, "mother, it is coming!" He was then
taken home, and had given to him every four hours small
doses of aromatic spirits of ammonia, with spirits of nitrous
ether, liquor ammoniæ acetatæ, and camphor mixture.

September 21st. He was somewhat better. The medicine
was continued, with the addition of small doses of bicharbonate
of potash.

September 22nd. The medicine was continued; and with
each dose was given a grain of hydrargyrum cum cupreæ
and grains sugar.

September 25th. A mild tonic medicine was given; and
the powders were continued.

September 28th. An aperient was given.

The powder was ascertained to be Battle's vermin
killer; the active principle of which is well known to be stry-
chnia. The powder was partially tested by Mr. Harris, chemist,
of Northampton, who had no doubt of the presence of stry-
chnia, and found faint traces of it by his first test.