Original Communications.

ALARMING HEAD SYMPTOMS, AFTER VIOLENT EXERCISE IN HOT WEATHER, RELIEVED BY QUININE.

By ROBERT L. BOWLES, Esq., Folkstone.

H. W. B., a medical man, stout, strong, and healthy, 28 years of age, and married, was attacked on the evening of July 6th, on his way home from the cricket-field, with most severe headache. He had walked, in the course of the day, about sixteen miles, besides having played for two hours at cricket. The day was hot and sultry. On arriving at home, he went to bed, but the severity of the pain in his head prevented his sleeping. He had also great intolerance of light. During the next two days he continued much in the same state, with the addition of occasional delirium. It was at this time that I was called in, and found my patient complaining of severe splitting pain in the forehead, which was much increased by talking or moving. He earnestly requested me to leech or bleed him, having a conviction that he was suffering from congestion of the brain. The pulse was from 46 to 48 in a minute, soft, and occasionally intermittent; the skin cool and moist; the tongue oedematous and pale, with a soft white fur on its surface; the face, which was occasionally flushed (though without a corresponding heat of skin), wore a singularly indifferent and solemn expression; the ocular conjunctiva was healthy in appearance. He had become restless and irritable, and was constantly throwing himself about in bed. His bowels had been acted upon by a seidlitz draught. A mixture of ammonia, sulphuric ether, and camphor julep, was now prescribed to be taken every four hours, and a full dose of liquor opii at bedtime.

July 9th, 8 A.M. The patient had passed a comfortable night, and appeared much relieved, his countenance wearing a more natural expression. In the afternoon, however, the symptoms returned in all their severity. The opiate was omitted at bedtime. A blister was applied to the neck.

July 10th. In the morning, I found that he had been delirious, and had passed a restless night; the pain and intolerance of light were quite as distressing; and he was unwilling to take nourishment of any kind. The bowels were confined, and the tongue had now a brownish coat on the back part. The blister had risen well. A physician, a friend of my patient, called to see him; and, believing the case to be of the nature of sun-stroke, advised eight leeches to the temples, which were accordingly applied, but with no relief to the symptoms. He was now a good deal depressed.

July 11th. He passed a restless night. The bowels were freely relieved by a pill of calomel and colocynth, but each action of the bowels appeared rather to aggravate the headache. The opiate was given at bedtime, and a mixture of sulphuric ether, valerian, and camphor; with beef-tea *ad libitum*. This treatment afforded considerable relief, and gave him a comfortable night.

July 13th. Severe symptoms again returned, which were partially relieved by repeated doses of the stimulating mixture. Mr. Roscow (who now saw the case with me) advised disulphate of quinine, in three-grain doses, to be taken at intervals of two or three hours; care being taken to give the first dose of quinine when the headache was at its minimum. The effect was magical. The first dose prevented the paroxysmal return of headache, and, with its continuance, a rapid general improvement took place.

July 16th. My patient was convalescent, the pulse having risen to its normal standard.

REMARKS. Twelve months ago my patient was living in the island of Grenada, and for nearly two years he suffered severely from repeated attacks of intermittent fever, for which he had taken large doses of quinine with great advantage.

Some features of this case might lead one to entertain the idea of sun-stroke, or of some disturbance allied to that disorder; and the severe headache, intolerance of light, and delirium, would rather suggest an antiphlogistic plan of treatment; but all the other symptoms evidenced a depressed or exhausted state of the system, which for a time was relieved by sedatives and stimulants. It was not until the quinine was given that a real and permanent improvement took place. The severe

attacks of intermittent fever from which my patient suffered twelve months before, the relief he then obtained from large doses of quinine, and the remittent character of his present indisposition, suggested the use of quinine in the present instance; and we have seen with what happy results.

CASE OF TELEANGIECTASIS, OR ANEURISM BY ANASTOMOSIS, SUCCESSFULLY TREATED.

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THE accompanying drawing, made by a local artist, represents a very interesting case of aneurism by anastomosis, of which I have had the treatment. The first portrait was taken when the girl came under my care, Aug. 30th, 1852; and the other about two years afterwards, some eight months before she left the workhouse hospital to live with the family of a clergyman who had shown much interest in her welfare.

Fig. 1.

It will be perceived that the tumour involved nearly the whole of the left lower eyelid. It was circular in outline, extending from the inner canthus to the external fifth of the ciliary margin, and from the canine fossa and malar protuberance to the centre of the axis of vision, having a depth of five-eighths of an inch (which the delineation fails to convey). Its situation, its magnitude, the amount of hæmorrhage which was likely to follow any operative proceedings, the want of success which had attended the curative efforts of other practitioners ere the tumour had assumed so formidable an aspect, and the injury which the eye might probably sustain, rendered this a more than usually anxious case. Various plans of treatment were tried, with different degrees of success. It will perhaps be best to give a sort of commentary on them.

My patient, Emma Buttery, aged 12 years, stated that she had a seton in the tumour for three weeks, when she was but eight months old. In 1848, she was nine weeks in the Lincoln Hospital, without any perceptible improvement. Since that time, the tumour grew very considerably. My late partner, Mr. F. A. Lowe, having successfully treated a large tumour of this kind in the axilla of a boy by means of acupuncture, I tried the effect of the needles on my patient for a few times; without, however, any apparent benefit. I next introduced the needles made red hot, while the girl was in a state of anæsthesia: a perceptible diminution of the tumour was the result. After having introduced the hot and cold needles forty-one times (the tumour was pierced all over every time), in consequence of the slow progress made, the galvanic canter was applied, the tumour being surrounded by platinum wire, which was passed under the integuments, and then brought to a white heat by means of a powerful battery. The pain caused by the incandescent wire was considerable, notwithstanding what has been asserted to the contrary.