

and family in comparative comfort—with ease to herself, and without suspicion on the part of her various mistresses.

On the other hand, the choice of other means was so curtailed as to extort this remedy or none.

### INFLAMMATION OF THE LUNGS CAUSED BY A FOREIGN BODY IN THE BRONCHUS.

By CHARLES A. BARRETT, Esq., Surgeon, Wallingford.

SOPHIA WESTON, aged 13 years, came with her mother to my surgery on August 10th, 1857, complaining that she had swallowed a piece of glass. On inquiry, I found that the girl had the end of one of those glass pistols, used for fastening the coat together across the chest, in her mouth. Whilst running she made a false step, and the glass went down her throat. I found her suffering slightly from dyspnoea, but not more than I attributed to fright. There was no cough, nor any congested appearance of the countenance, and the pulse was quiet. I ordered her an emetic directly, and told the mother to watch for the glass. The emetic acted well, but no glass appeared. I ordered her castor oil, and after that had failed, a large dose of alum. That operated; but still no glass was found. The child was kept in and quiet during this time, and was to all appearance quite well, excepting that a slight dyspnoea continued. I examined the chest, but found no abnormal sound. I felt at a loss to account for this, and thought that the glass must have fallen out of her mouth instead of going down her throat. I did not see her again for some time.

About the last week in August, the mother brought her again to me, saying, that the breathing was still difficult, that she had a cough, and that she had been out and about ever since the accident happened. I again examined the chest, but found nothing but the sounds of a slight bronchitis. I ordered a mustard poultice and a simple cough mixture, and did not see her again for a week. I heard that she was about the same.

In the beginning of September, the mother sent to me, saying, that the little girl was worse, and wishing me to see her. I found her suffering from an acute attack of bronchopneumonia on the right side. I ordered her leeches on the chest, and a pill containing calomel, antimony, and opium, every four hours. The next day I found her better; and, as the skin was inclined to be moist, I ordered her a blister. She improved; and I continued the pills till the mouth was slightly affected, supporting her on good beef tea. When the blister was healed, the liniment of turpentine and acetic acid was used twice a-day, with simple treatment of the cough that still remained. She got better, and was ordered wine, etc., and I left off attending her.

About six weeks ago she was seized with inflammation of the left lung. I examined the chest; could find nothing of the glass, but felt pretty sure that it must be the cause of all the mischief. The inflammation was, this time, of rather a low type. I ordered her nitric acid and tincture of conium; also a large blister to be put on the chest and kept on till symptoms of vesication showed themselves, then to be removed and a common poultice applied. The wine was discontinued and the beef tea continued. Next day she was better; and she continued to improve. Wine was again ordered, and infusion of serpentry was added to the mixture. Night-sweats had showed themselves during this last attack. The fingers were very much enlarged at the tips, and the nails very much incurved. On November 25th, the child was taken with a very violent fit of coughing, and brought up the glass, after which she slept for twelve hours, breathing quite comfortably.

The glass measured in length one inch and one-tenth. Its diameter, at the broad part, was three-tenths, and at the middle one-tenth of an inch. It weighed forty-seven grains.

REMARKS. One great point of interest in this case was the total absence of all physical signs of a foreign body in the tubes. Though the weight and shape of the glass would prevent it from being moved with every inspiration or expiration, yet silence might have been expected over some part of the lung. Then there was no cough when the glass went into the wind-pipe, rendering it difficult to say which passage it took, whether into the stomach or the bronchus. Its non-ejection might be thought to point out the seat of the mischief; but, even if it had passed into the stomach, it might have traversed the small intestines, and been lodged in the *caput cæci*. Then again it might have fallen from the mouth, and have not entered the throat at all. The long time before the inflammation showed itself, and the entire absence of the slightest uncomfortable feeling in the chest, were extraordinary. Just before the glass

was expectorated she complained to her mother that she felt something moving in the chest, like the moving of worms. I did not see her during this time. The lung is very seriously damaged; and I fear that the patient, who belongs to a phthisical family, will become consumptive.

## British Medical Journal.

SATURDAY, DECEMBER 13TH, 1857.

### THE COSHAM CASE OF MALPRAXIS.

WE very much regret to have to record the conviction of a medical man, who appears to have practised honourably for years, of an act of gross neglect, resulting in the death of his patient. Some few weeks since, it will be remembered, we referred to a charge having been brought against a Mr. Frederick Deane, of Cosham, in Hampshire, of having allowed a patient to die undelivered; and that in a manner to excite our wonder, and almost to lead us to disbelieve in the version of the matter then offered. On Wednesday, however, the prisoner was put upon his trial; and facts came out which evince a stubbornness and an ignorance on his part which is altogether inconceivable, when we remember that he has practised his profession for the last fifteen years. The young woman, Mrs. George, was taken in labour with her first child on Friday, October 23rd. Mr. Deane was immediately sent for, and saw the patient: he also visited her again on Saturday. Early on Sunday morning he was again called in, and remained there the whole of that day, and until seven o'clock on Monday morning; indeed, he appears to have been in attendance until Wednesday evening following; the labour making but slow progress, and he effectively taking no measures to bring it on. We all know that nothing can be worse than "a meddling midwifery", and that bystanders often imagine there is more urgency in a first labour than the facts warrant; and we are not inclined to blame Mr. Deane for his inactivity up to this point quite so much as the husband appears to have done; but the protracted nature of the case, even taken in its most favourable light, ought to have determined him either to have acted himself or to have called in assistance. This the husband begged him to do, but he said there was no occasion. He remained that night; and, about six o'clock on Thursday morning, he announced that "the head was born, and the presentation was a natural one."

Here begins the unaccountable neglect of the prisoner. After a labour, more or less severe, of nearly a week's duration, one would have thought that he would have completed the case at once, especially as the poor woman was so much exhausted that the pains no longer came to expel the body; but, no, he still contented himself with looking on, and, as it would appear, actually prevented the husband from obtaining other assistance. "I entreated him", said the husband in his evidence, "to have a second opinion;" but he thought it unnecessary. After some time, he agreed to call himself upon Dr. Engledue.

"Dr. Engledue lived four miles off. Mr. Deane returned alone about two o'clock. I said, 'Where's the doctor?' He said he could not come. I said, 'Good God! not come?' He said he had stated the whole of the case to him, and that would do as well. He said the Doctor had asked him why he did not remove the child, and he had told him he could do it himself, and he should do it directly. Dr. Engledue had told him that