

the cervical vertebræ and pharynx, extending some way down behind the œsophagus. The cyst was about the size of pullet's egg, capable of containing at least an ounce of pus, and seemed only prevented from forcing its way into the pharynx by a thin partition wall.

In the example I have given, if a diagnosis of abscess could have been made during life, it might readily have been opened at that portion which extended behind the sterno-cleido-mastoideus, or, in Mr. Worthington's, through the pharynx; but the question arises, how is a diagnosis, under such circumstances, to be formed? In the generality of cases I should presume it to be impossible, especially if the cyst proved, as in the present example, thick, firm, and cartilaginous. In some, however, if peculiar symptoms of spasm were referable to the glottis with permanent dysphagia, it would be the duty of the practitioner to pass his finger back into the pharynx, and feel if there were any fluctuation or swelling, and if detectable, an abscess might be surmised, and an instrument passed through the posterior wall of this bag. The occurrence of such cases should be generally known, that if practitioners met with similar cases they might be alive to the possibility of the symptoms depending on deep-seated and concealed accumulations of pus, and it is in the hope of such an use, should any of my readers be so unfortunate as to meet with similar cases, that I now commit this history to paper.

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ON
MILD MERCURIAL FRICTION
IN
CERTAIN STATES OF VENEREAL DISEASE.

By JONATHAN TOOGOOD, Esq.,
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It is a common practice with persons in a certain class of life to apply to quacks and irregular practitioners for the cure of venereal disease, which often subjects them to a complicated set of symptoms, extremely difficult to eradicate. If the patient has been quickly salivated, and is of a scrofulous habit, the difficulty is much increased. In these cases I have found the slow and cautious introduction of mercury by friction a more effectual mode of removing the train of distressing symptoms which follow a mistreated case, than any other plan of treatment. The following cases will be found worth attention:—

CASE I.—Peter F. contracted a chancre, for which he was very quickly salivated; the sore healed, but after a short time secondary symptoms appeared. He still pursued an irregular course of life, and after the lapse of a year and a half he consulted me. At that time he had nodes in various parts of the body, and was extremely weak and emaciated. A medical friend of great experience, who had for many years been attached to a large hospital, being on a visit at that time, saw him with me, and agreed that a regular mercurial course would afford him the best chance of relief. He did not, however, regularly pursue the plan, and afterwards he took the muriate of lime with some good effect. I then lost sight of him for several years, when I was again desired to visit him. His

state had become deplorable; exfoliations of bone had taken place in various parts of the skull, arms, and legs. He was lying in bed with his knees permanently bent to an acute angle; the abdomen was greatly distended, partly with fluid, and partly tympanitic. All hopes of cure had long since been abandoned, and he sought some mitigation of his sufferings from large doses of opium. Ten grains of mercurial ointment were carefully and slowly rubbed into the thighs every night, and five drops of Fowler's arsenical solution given three times a-day. The good effects of this treatment were soon apparent; in ten days the abdomen was reduced in size five inches by measurement, and by a steady perseverance in this plan for six weeks, with a milk diet, all the wounds healed, the swelling of the abdomen completely subsided, the legs became straight, and he so perfectly recovered that he shortly afterwards married, and never had any return of his former symptoms.

CASE II.—A medical man was attacked with sore throat, which had resisted all the ordinary methods of cure, and affected his constitution considerably. It had continued many weeks when I was consulted, and he was suffering much pain, with loss of appetite and sleep. He fancied he had swallowed a pin, which was still sticking in his throat, and keeping up the irritation. A careful inspection of the parts convinced me that the sore had all the characteristics of a venereal ulcer; but he was equally positive that it could not have arisen from such a cause, not having had the slightest symptom of the disease for fifteen years, since which time he had been married, and had several healthy children. He was, however, prevailed on to take small doses of oxymuriate of mercury in sarsaparilla, which at first appeared to do good, but after a short time the disease became worse. He consulted many friends, whose opinions were as various as the treatment recommended. As he got worse and worse every week, he undertook a journey to London, which he accomplished with difficulty by easy stages, his strength had become so much impaired. He consulted several surgeons of great eminence and experience, all of whom agreed in opinion as to the nature of the disease, although they differed in their mode of treatment. One ordered a regular course of mercury in the usual way; another, the daily application of lunar caustic to the sore and surrounding parts, with the use of tonics; a third, the fumigation of the throat with cinnamon; and a fourth, who stood deservedly at the head of the profession, assured him that his cure would be effected by Velno's vegetable syrup. All these remedies successively failed, and at length he abandoned himself to despair, and resolved to return home and die. I earnestly entreated him to try the plan of rubbing in very small quantities of mercurial ointment, which at length he reluctantly consented to, and in one week he derived such sensible benefit from its use that he was encouraged to persevere. The pains gradually abated, and he got sleep; the sore healed, his appetite and strength returned, and in less than six weeks he was able to resume his practice. His recovery was delayed by the exfoliation of the bones of the nose, but ultimately the cure was so perfect that he has been enabled to follow his profession as a country surgeon, and been in the enjoyment of good health.

CASE III.—I was consulted by a gentleman who had been suffering for some time from a sore throat of undefined character, but whose health in other respects did not appear to be much impaired; but having lost two brothers, in both of whom an affection of the throat was one of the earliest symptoms of disease, which ultimately terminated in consumption, his friends became greatly alarmed for the event. I did not see either of the former cases, but I understood that although they commenced with sore throat the disease did not differ from ordinary consumption. An accurate investigation of all the circumstances induced a suspicion in my mind that there existed some venereal taint, which was strengthened by observing a hard tuberculated swelling about the size of a small pea on the penis. On questioning my patient closely on this point, he assured me that he never had any venereal sore in his life, but admitted that four years before he had contracted a slight complaint which was pronounced not to be venereal, which, speedily got well under simple treatment, and that he had never had the slightest symptom of disease since. I recommended the same plan of very mild mercurial friction, which had been so successful in other cases, as the only probable means of cure. To this, however, both the patient and his friends objected, partly on account of his being of a scrofulous habit, but chiefly in consequence of the deliberate opinions of two deservedly eminent surgeons, who had stated that such a course would in all probability be fatal. So confidently, however, did I anticipate a different result, that I urged him to adopt the plan, and by steadily persevering in it for six weeks he was completely restored to health, and several years have since elapsed, during which he has never experienced the slightest return of his former complaint.

I have witnessed several similar cases in which the practice has been adopted with the same success.

Bridgwater, Oct. 1842.

EPILEPSY FROM PROTRACTED LACTATION.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—If you think the subjoined case of epilepsy, resulting from protracted suckling, of sufficient importance, I shall feel obliged by your insertion of it in your Journal. It is by far the most protracted instance which I have witnessed, and, so far as I remember, I have never seen any case recorded where lactation was continued for such an unwarrantable length of time.

Your obedient servant,

JAMES ORWIN,

Surgeon to the Worcester Ophthalmic Institution.

Worcester, Sept. 29, 1842.

Mrs. W., aged twenty-seven, was confined in September, 1838, of a daughter; her health had been previously good, and she recovered favorably after her confinement. She continued to suckle the child for a period of about three years and a quarter, when I was requested to see her, and found her suffering from the following symptoms:—extreme debility with loss of appetite, so that she had not the least inclina-

tion for food; tongue coated; bowels rather relaxed; pulse quick and feeble, with severe and frequent pain in the head; for the last four or five months she had had an almost constant sanguineous secretion from the uterus, and before this appeared she had had a copious leucorrhœal discharge. About a fortnight before I saw her she had an attack of epilepsy, and experienced several returns of the fits.

As I considered the protracted lactation to be the principal if not the sole cause of the symptoms under which she was suffering, I desired that the child might be immediately weaned; but I experienced considerable difficulty in inducing the mother to consent to this. However, after much persuasion, she at length yielded. I ordered six leeches to be applied to the head, and prescribed small doses of blue pill with extract of hyosciamus, to be taken twice a-day. She had two or three attacks of epilepsy after she came under my care, but they were not so violent as before she discontinued suckling.

The pain in the head having subsided, I prescribed the following mixture:—

Citrate of iron, one drachm;

Water, six ounces. Two tablespoonfuls to be taken thrice a-day.

She began to improve under this treatment, in conjunction with a nutritious diet, and her appetite and strength slowly returned. She subsequently went into the country, where she remained a few weeks; she returned quite well, and has continued so up to the present time.

DIAGNOSIS OF CHOLERA.

TO THE EDITORS OF THE PROVINCIAL MEDICAL JOURNAL.

GENTLEMEN,—In the observations “On the Diagnosis of Indian and English Cholera,” which Mr. Salter, of Poole, has so ably addressed to you, I perceive that he refers to two cases of the malignant form related by me in some late numbers of the “Provincial Medical Journal,” and appears to entertain some little doubt as to the correctness of the diagnosis, merely, I presume, from the reason, that cases of a similar nature had not occurred in this town, or fallen under his observation during the prevalence of the late epidemic. Now I am not at all anxious to enter into a controversy on the characteristic symptoms of Indian and English cholera, but beg to say, from all I have ever read, heard, or seen, of English cholera, that it is seldom or ever attended with such violent and distressing symptoms as occurred in the two cases I thought proper to relate, and which did not leave the least shadow of doubt in my own mind as to the true nature of the disease. In conversation with a highly respectable and talented practitioner of a neighbouring town only a few days ago, I learned from him that he had met with two or three cases of cholera, one of which had terminated fatally during the consecutive fever and another in the state of collapse before he could arrive at the house. I also observed in the “Lancet,” of September 10, three other cases, by Mr. Edwards, of Lansaintffrais, Montgomeryshire, who says, “Having noticed in the ‘Provincial Medical Journal’ the report of a case of malignant cholera, attended by Mr. West, of Poole,