reduction was discontinued. As the symptoms were not very urgent, and as it was doubtful whether the obstruction was caused by strangulated intestine, we resolved to wait until morning. Two grains of calomel and one and a half of opium were ordered to be given every three hours, and cold applications to be constantly applied during the night.

Oct. 14th. There was no evacuation. The other symptoms were the same, the tumour only being rather more tender. It was then decided to cut down to the ring, and, if necessary, to enlarge it. In a minute, I was enabled to place my finger in the ring, which very tightly embraced an omental protrusion. The stricture was divided; and immediately, from under the omental mass, was heard a gurgling sound, as if intestine was slipping back into the abdominal cavity. Upon examining the sac, it was found to contain nothing but omentum, which had formed extensive and firm adhesion, and could not be returned. The patient expressed himself much relieved; and in the evening, although the bowels had not been moved, all pain and tenderness had disappeared.

Oct. 15th. There had been no evacuation, but still no pain. Calomel and small doses of opium every three hours, and frequent injections, were given.

Oct. 16th. No evacuation of the bowels had occurred; but the vomiting, which had abated after the operation, now returned with great violence. The injections were directed to be continued; and one drop of croton oil with three grains of jalap, in the form of a pill, was given every three or four hours.

Oct. 17th. There was no improvement; everything, both food and medicine, was rejected. Not seeing much advantage in such a case from medicine, and fearing to excite inflammation by persisting in the use of strong purgatives, we determined in some degree to leave the case to nature, and merely ordered an occasional injection, and a drachm of sulphate of magnesia in infusion of roses three times a day.

Oct. 18th. There was no change.

Oct. 19th. At 9 A.M. the bowels were freely moved; and during the day he had several other motions.

Oct. 20th. The patient was improving; but, sickness still continuing, a saline effervescing mixture was given.

From this period to the 29th, he slowly improved; and, on that day, we found our patient down stairs, with a clean tongue, open bowels, and a moderately good appetite.

REMARKS. The above appears to be an interesting case. The result proved the propriety of the operation; but, even if no strictured intestine had been found, I think, under such circumstances, the operation would have been justifiable. The obstruction was no doubt originally caused by a small portion of the intestine becoming strangulated in the sac; but why it continued so long afterwards, I have only probability to offer: therefore I will only further say that the termination gives us a useful lesson not to despair, and also proves that the *vis medicatrix nature* is very powerful, when medical agents have proved powerless.

Bolton, Oct. 30, 1854.

CASE OF INTESTINAL OBSTRUCTION SUCCESSFULLY TREATED BY THE PASSAGE OF AN ELASTIC TUBE.

By H. G. TREND, Esq.

HAVING lately seen reported in the JOURNAL cases of intestinal obstruction, I have been induced to send you the following, thinking it may prove interesting, as showing a different mode of treatment, and a highly satisfactory result.

CASE. On the evening of the 10th of July last, I was requested to see Mr. H. G., aged 65, a gentleman well known in this locality by the performance of the feat of walking a thousand miles in a thousand hours, and for his large collection of curiosities and relics. I found him sitting up in bed, complaining of severe nipping pains in

the bowels. His countenance betokened no great anxiety. The skin was cool and comfortable; the pulse but slightly accelerated, and of good volume. The abdomen was not much distended. On inquiry, I found that he had been subject to frequent attacks of a similar kind, sometimes of a very alarming nature, for some years past. He is of regular and temperate habits. The bowels had not been relieved for forty-eight hours; but that, he informed me, was no unusual occurrence. I ordered him a warm aperient; to be repeated, if necessary.

July 11th. 9 A.M. The bowels had not been relieved. In other respects, he seemed much the same. There was no protrusion of the bowel anywhere. He was ordered to have the aperient repeated.

2 P.M. The bowels had not been moved. He was ordered to take one drop of croton oil with five grains of compound extract of colocynth, every two hours, till the bowels should be relieved.

10 P.M. He had now taken four of the pills, but no effect had been produced. The pain seemed more severe, and the abdomen was decidedly larger. The pain came on in paroxysms, lasting about a quarter of an hour. The pulse seemed unaffected. He was ordered to have a castor oil enema; and to have the abdomen well fomented with flannels wrung out of hot water; and to repeat the pills every three hours.

July 12th. 10 A.M. He had passed a bad night, having had five very severe paroxysms of pain. The enema brought away nothing. The abdomen was very much distended and tympanitic. The skin was cool. The pulse was but slightly quickened. The urine was thick and high coloured. He having taken eight of the pills, I requested my predecessor, Mr. Trowell, to see him. After consultation, the pills were ordered to be repeated every four hours, and an opiate embrocation to be applied to the abdomen.

9 P.M. He was evidently worse. The pains much resembled those of a woman in labour. He lay upon his back, with his knees drawn up towards his abdomen. His countenance was expressive of great anxiety and distress. There had been no action of the bowels.

July 13th. 9 A.M. He had passed a wretched night. The nurse told me that he had several times got out of bed, and clung to the post, in the greatest agony. There was no movement of the bowels. The pain was most distressing. The countenance was anxious; the skin was dry; the pulse but slightly accelerated. The abdomen was large and tympanitic, but not painful on pressure. He had vomited once. There was hiccup, and the feet were cold. I ordered him to have bottles of hot water applied to the feet; to continue the embrocation; and to have some effervescing medicine.

7 P.M. He had been worse all day. The hiccup had considerably increased. He had vomited once since the morning, but retained the medicine. His pain was very violent. He had altogether taken eleven drops of croton oil, besides other strong aperient medicine. I ordered a pill, with two grains of opium.

11 P.M. The pain seemed worse. He was directed to take one grain of opium every three hours, if necessary.

July 14th. He had had another wretched night. Dr. Paley, of Peterborough, saw him with me this morning. He was then much worse. The tongue was furred; the pulse but slightly accelerated; the urine was scanty and high coloured. The pain was excessive; no posture seeming to afford relief. The abdomen was large, and like a drum. He had hiccup every five or ten minutes. He vomited twice during the night. After consultation, it was determined to pass up, if possible, a long elastic tube: that of a stomach-pump was used. After having passed it about fourteen or sixteen inches, large quantities of warm water were injected; but no relief was experienced, the water returning almost as clear as when thrown up. After half an hour's trial to pass it higher up, it was laid aside; and he was ordered one grain of opium every two hours, and to continue the embrocation.

9 P.M. The pain had slightly abated. He had taken

four pills, and was ordered to continue them till morning, if necessary.

July 15th. He had now taken eleven pills. On the whole, he had passed an easier night; but there had been two or three severe paroxysms. He had vomited once. Dr. Paley again saw him; and the tube was reintroduced this time as far as its length would admit. After injecting some warm water, we were both much gratified to find some flatus escape downwards. A large quantity of warm water was then injected; the tube was withdrawn; and, after being seated on the night-stool, a very copious evacuation took place. He expressed himself much relieved. The abdominal distension speedily subsided. He had three or four large motions during the day; and, by the 21st of the month, he was about, without any bad symptom. He continued well up to the 18th of September, when he was again attacked in a similar way. The same line of treatment was adopted; and Dr. Paley and myself had the pleasure of seeing our patient once more about. He is now well; and I have cautioned him not even to go a day without an evacuation.

REMARKS. There are some points of interest about this case. What was the obstruction? Was it a large firm pellet of fecal matter blocking up the bowel? or was it produced by some spasmodic contraction of the bowel itself? I incline to this latter opinion, because the tube could not be passed when first introduced, and because when the contraction (?) was overcome by opium, it yielded to gentle pressure, and allowed the tube to pass. In this case, purgatives had been fully tried. It would have been worse than useless to have continued them further; in which opinion Dr. Paley fully concurred. It may be thought, perhaps, that the opium was the successful remedy in this case: certainly, I think, we should not have succeeded, had not the patient been slightly under its influence; but, still, introduction of the tube seems to me to have been the actual agent in producing the desired result.

Croyland, Lincolnshire, Nov. 6, 1854.

BIBLIOGRAPHICAL NOTICES.

A DISCOURSE ON MEDICAL BOTANY. By EARL STANHOPE. London: 1854.

THIS pamphlet, the substance of unpublished addresses delivered by EARL STANHOPE to the Medico-Botanical Society, of which he was president, is clothed in elegant language, and is marked by the extreme humility of the author. Every opinion is hazarded with the greatest diffidence, while the substance contained in the pages proves that a vast amount of labour and thought has been bestowed upon it. At every step the noble lord presses upon his hearers the necessity of actual experiment carefully conducted; thus, at page 12, he says:—"It cannot be too frequently repeated, it cannot be too forcibly impressed upon your minds, that without such experiments this society cannot be successful, cannot acquire that fame and reputation which would eminently promote its prosperity, and cannot confer upon mankind those benefits which I most anxiously and ardently desire." So again, page 23:—"Here I must again repeat, that actual trials of vegetable substances are indispensably necessary for your designs, in which you would otherwise fail, however laborious might be your theoretical and scientific investigations." He urges specially and most justly the importance of examining the properties of our indigenous plants: "they are the first and most interesting portion of our researches."

The deference paid to our profession generally, the valuable suggestions thrown out, the useful hints which may be practically considered, all tend to render the perusal of this little work a matter of pleasure as well as profit.

A TRANSLATION OF THE NEW LONDON PHARMACOPOEIA; including also the New Dublin and Edinburgh Pharmacopœias, with a full Account of the Chemical and Medicinal Properties of their Contents; forming a complete Materia Medica. By J. BIBBECK NEVINS, M.D. Lond., etc. 2nd Edit. pp. 880. London: 1854.

IN this edition we are pleased to find that Dr. NEVINS has corrected very many of the errors we had marked in the original publication, and which had doubtless been allowed to remain from the evident haste with which the first edition was hurried through the press. In a work involving such an accumulation of data relating to several sciences, errors—and important ones—are almost inevitable, unless the author has more regular and uninterrupted leisure to devote to the tedious and annoying work of recension, than is possible to a man who has the claims of several charitable institutions and medical schools, besides those inevitably made by private practice, constantly pressing upon him; and great as the improvement has been in the present edition, we hope to be able to repeat our congratulations on further advances in this direction on the appearance of a third edition.

A hundred pages or more have been added to the work, and its plan has evidently undergone considerable modification; for, whereas the first edition was on a plan in a manner uniting Neligan's and Phillips' works, the present takes a still wider range, and now manifests a nearer resemblance to Pereira's great work, than to those of the two before named authors. The title on the back of the book is somewhat of a misnomer to our southern apprehensions, and even the title page is open to a similar objection, since a work which bears on its face, or rather back, the words "The New London Pharmacopœia, translated by J. B. Nevins, M.D.," is scarcely one in which we should expect to find detailed accounts of the swarm of novel remedial agents which constantly float to the surface through the pages of the periodical press, swim for a short time, and disappear, without ever becoming, or deserving to become official; and yet in page after page of the book before us, we stumble on drugs, their preparations, and alleged therapeutic powers, which are to be met with in neither of the three Pharmacopœias of the United Kingdom; nor, so far as we are acquainted with them, in any European codex whatever. To some this may appear a merit, and it certainly enhances the value of the work as a book of reference; but gathering as we do from the preface, that this publication is addressed "to the difficulties and wants of students in preparing for their examinations," we would submit to our author whether he does not add to the difficulties of these young gentlemen, and fail in supplying their real wants, when he discourses to them on arnica, bael, phyllerine, sumbul, and many other drugs of the existence even of which, we feel pretty certain, few except the regular readers of the medical periodicals ever heard. To write a history of the world is to attempt a noble work, but the criticism has always been held to be sound, which objected to Dom Alvarez de Guzman's *History of Extremadura*, that it was somewhat too comprehensive when the author thought it requisite to begin with the creation of Adam and Eve.

As manifesting great industry in the compilation and rearrangement of the therapeutic portions, as well as those devoted to materia medica (by the bye, how can a book "form a complete materia medica?"), this publication merits our commendation. It contains a vast amount of information, rendered easily accessible by that *sine quâ non* of all books on scientific subjects, an extensive index; and, as we have already intimated, Dr. Nevins has here collected from the journals connected with medical science, full and detailed accounts of most of the new remedies, the virtues of which have been vaunted of late years. These data will greatly raise the value of the work to men like ourselves, who are frequently compelled to institute a hunt through a series of indexless journals, which is but sorry sport, to gather whatever has been done and whatever