

stance is answered in a very curious manner. On questioning the mother of the boy, I elicited that he had been in the habit of buying and eating the very coarse plum-pudding which is sold in the neighbourhood of this hospital. I sent a little boy of his own class to purchase some of a similar kind, and bring it to me. On examination by the microscope, I found it to contain hairs having identically the same appearance as those which formed the bulk of the concretion. I have since examined many specimens of coarse farinaceous food, but none have shown similar adulteration, nor do I find any record thereof in Dr. Hassall's great work.

Original Communications.

SCROFULOUS DISEASES OF THE EXTERNAL LYMPHATIC GLANDS:

THEIR NATURE, VARIETY, AND TREATMENT.

By P. C. PRICE, Esq., Surgeon to the Great Northern Hospital; the Metropolitan Infirmary for Scrofulous Children at Margate; etc.

I.—INFLAMMATORY CONDITIONS OF THE EXTERNAL LYMPHATIC GLANDS IN SCROFULOUS SUBJECTS.

[Concluded from page 647.]

General Treatment. Two main objects are to be aimed at in resorting to the general treatment of subacute and chronic inflammatory swellings of the external lymphatic glands—temporary improvement and permanent cure, with the amelioration and eradication of any special diathesis that may exercise a decisive effect in the production of the glandular mischief. Before, however, adverting to the therapeutical treatment, it may be well to premise that the greatest reliance may oftentimes be placed on the effects of good diet, and fresh, if not sea, at least, pure air. Many cases of simply enlarged glands in scrofulous and delicate children, who are yearly sent to the Metropolitan Infirmary at Margate, are speedily benefited by the improved and liberal diet they receive, and the fresh air they breathe; for not only indifferent and scanty food, but deprivation of light, and unwholesome airs, have long been acknowledged, if not the sole, at least strong contributing causes to lymphatic and scrofulous diseases.

It has already been stated that low and tardy inflammatory lesions of the absorbent glands may originate as primary or secondary affections, and occur at any period of life; but that childhood is *par excellence* the age during which they present. If unassociated with any pre- or co-existing affection, but occurring in a more or less well marked scrofulous constitution, the indications are to procure resolution, and improve a condition of constitution which has admitted such specific lymphatic disturbance. When several glands—a complete chain on either side of the neck, for instance—are involved, and the patient is in indifferent health, the pulse low and feeble, the appetite meagre, the bowels costive and irregular, with a disposition more or less influenced by the specific temperament under which the system labours, then the first indication is to correct any functional irregularity of the viscera. The liver, in all lymphatic derangements, will generally be found at fault; the kidneys act inefficiently; the stomach loses its tone; and the bowels consequently sympathise with the general disturbance. Under such circumstances, it is advisable at once to direct attention to the improvement of the functions of the disordered organs. With this view, I am in the habit of commencing the treatment of all lymphatic derangements by the exhibition of certain alterative and slightly purgative medicines, whether in the infant or young person. When such a course is expedient, I very generally prefer a mild preparation of mercury in combination with rhubarb and magnesia, and combine the two in the following form:—

℞ Pulv. hydrarg. cum creta, gr. j ad gr. viii; pulv. rhei co., gr. vi ad ℞j.

The dose is, however, of necessity in proportion to the age, temperament, and requirements of individual cases; and the frequency of its repetition regulated by circumstances.

When the use of the above formula is prevented, various other medicines may be used, to the fancy of the patient or practitioner, the end to be attained being the chief object of importance. To amend the appetite, the use of mild tonics,

associated with alkalies or the mineral acids, according to circumstances, is highly advantageous. If such means be insufficient, after being duly persisted in for some time, and the glandular swellings assume larger dimensions or remain in a truly chronic state, then it will be advisable to resort to such medicinal agents as are known to exert a direct and beneficial effect on the absorptive system. Among the most ordinary in use are the various salts of mercury, iodine, and bromine, etc. Although I have recommended the alterative use of mercurial preparations, yet I am, as a rule, decidedly opposed to their administration in any way to induce absorption of the material forming the increased size of the involved gland in scrofulous patients. I am confident, after repeated trials of various mercurial preparations, that their exhibition is in very many instances not only unadvisable, but harmful. Debilitated and cachectic constitutions will not allow of their being pushed to the extent that is often needed ere the absorptive effect can be traced. Notwithstanding these observations, I am willing to admit that sometimes mercury is a most valuable agent, when properly employed, in the reduction of that form of gland-swelling now under consideration, especially when combined with iodine or bromine, in the *Pharmacopœia* forms of the iodide, biniodide, and bromide of mercury. Should evidence exist that a personally contracted or an hereditarily transmitted syphilitic taint complicates the otherwise simple character of the chronic inflammatory swelling, I know of no medicinal combinations of greater value. In such instances, the bichloride of mercury, combined with the oxy-sulphuret of antimony, is likewise of much advantage.

Far in advance of any mercurial preparations stands iodine, either in its pure form, or combined with alkalies and minerals, such as potassium, iron, etc. For obtaining rapid effects of the drug, I am in the habit of administering it in combination with some alkali; as I believe, with many former writers, that its virtue, especially when the scrofulous type is well developed, is more marked. The preparation of greatest utility I have found to be the iodide of potassium, in frequent, but small doses. In this country, the tendency with most practitioners is to administer comparatively large doses of the salt; but my own experience points to the belief that small and repeated exhibitions are of much greater value. I am in the habit, when treating infants and children, of commencing with half a grain to a grain twice or three times a day, dissolved in distilled water, or a mild tonic. For adults, the dose may be increased to two or even three grains; but I seldom augment the quantity, although I often advise its more frequent exhibition when circumstances demand a rapid effect from the drug. Should an additional quantity of free iodine be considered advantageous, it will be well to substitute the form known as Lugol's solution, and prescribed in this country under the *Pharmacopœia* name of liquor potassii iodidi compositus. Care, however, must be taken that the dose is small, so that the increased activity of the salt may not cause any disagreeable effects.

Within the last few years, iodide of ammonium has been reintroduced to the notice of the profession by that well known physician and physiologist, Dr. B. W. Richardson. Dr. Richardson states that he has found it, after considerable experience, superior to the combinations of iodine with potassium and sodium. Its rapidity of action appears greater; for experiments have shown that its effects, though analogous to those of iodide of potassium, are more quickly produced. Mr. Hunt, of the Skin Hospital, is also of the same opinion. My own individual acquaintance with the drug, although not large, is sufficient to allow me to corroborate in a measure its highly extolled virtues. The dose is the same as that of the iodide of potassium, and a very strong analogy exists between the two salts.

The combination of iodine with iron has long been a most favourite preparation, and is usually prescribed in the form of a syrup—syrupus ferri iodidi (*Pharm. Lond.*); but the good effects of iodine are not so immediate as when the metal is administered in one or other of the previously named forms. From twenty drops to a drachm is the usual dose, repeated, according to circumstances, twice or thrice during the day.

In the exhibition of iodine in any one of the above mentioned or other forms, not only great care, but considerable aptitude, is required. The advantages to be derived from iodine are most precarious; and, while the practitioner is often delighted with the valuable and rapid effects of the drug, he is as constantly compelled to confess disappointment. It has been advised by those practitioners whose experience enables a mature judgment, that, provided the use of the medicine is, after a fair persistence, unattended with the wished for results, its exhibition should be

discontinued for a time, and the system, which is, perchance, incapacitated from appreciating its virtue, corrected, and so improved or modified that a recontinuance may be attended with more favourable success.

The length of time for which it is necessary to administer iodine in cases of enlarged glands, before its effects become permanent and of advantage, is very uncertain. I have frequently succeeded in affecting the constitution in a week, or a few weeks; at other times, months have elapsed ere the medicine has found a permanent footing in the system. I have under my care at this present time, at the Great Northern Hospital, a young woman with two large chronic inflammatory glandular swellings under the lower jaw on the right side. She has been under the influence of iodide of potassium for some time; and, although five months have elapsed, it is only at this period that the iodine, which is also locally applied, has so affected the system, as gradually to remove the very hard and indurated swellings.

The quantity of iodine that can be administered without causing inconvenience, or perhaps advantage, in cases of glandular affections of all kinds, greatly varies, in accordance with the age and constitutional diathesis, etc., of individuals. While in some patients comparatively small and slight doses rapidly cause disagreeable symptoms, in others the drug may be given with apparent impunity in large and accumulative quantities, without occasioning any irritating and obnoxious results. For further remarks on the use of iodine in this and other forms of scrofulous affections of the absorbent glands, I must refer the reader to that portion of this essay which will treat of the therapeutical management of glandular tuberculosis.

Of the use of the bromine salts I have had little personal experience; but I find that they are much used on the Continent, and are highly extolled.

How far the administration of cod-liver oil is directly successful in inducing the removal of chronic inflammatory swellings, is uncertain; but there is little doubt that, by improving the constitution and elevating the tone of the various organs, it promotes the accomplishment of healthy actions. Indeed, so important is it to maintain the strict integrity of the functions of various organs, that it is, perhaps, as a rule, advisable to prolong the general treatment even when all mischief has been apparently quite removed.

When more or less chronic inflammatory enlargements of the lymphatic glands coexist with marked scrofulous affections, or are the direct result of certain diseased conditions of neighbouring structures, resolution is more difficult to obtain, and demands a modified plan of treatment. In young children, enlarged cervical glands constantly occur, as the accompaniment or direct result of the various forms of scalp and skin affections; but, as soon as the local cause is removed, they gradually subside. The various eruptive skin-diseases, so peculiar to infancy and childhood, are not, however, always attended with glandular sympathy; and I have noticed, and constantly referred to the fact, that it is only such children as present a truly scrofulous and delicate constitution that exhibit well marked coincident implication of the glands. Doubtless the mere irritation produced by the tegumentary disease is amply sufficient to cause simple irritative sympathy of proximate glands; but, I believe, it requires the development of a peculiar temperament to admit any definite inclusion of the lymphatic system. Besides affections of the skin, any diseased condition of other organs in scrofulous subjects is amply sufficient to give rise to glandular implication.

With regard to the general treatment, such means must be used to procure resolution of the glandular mischief as is compatible with the management of the accompanying tegumentary and other diseases that may exist. As a rule, however, the exhibition of iodine and other so-called specifics will in general be advantageous, although, from the complication of maladies, a different plan of treatment may be advisable. Whatever course of remedies may be used, it is all important to bear in mind that, in the great majority of cases that are presented, the lymphatic derangement is not merely an accompanying, but a dependent complication.

Local Treatment. In concert with the general therapeutical management of enlarged glands arising from a slow and limited form of vascular derangement, local treatment will oftentimes prove advantageous. It consists of two kinds.

Firstly. The topical application of what ancient writers termed *medicaments*, for the purpose of inducing absorption of the material which has more or less permanently caused enlargement of the organ.

Secondly. Removal of the enlarged glands, by means

of caustics and other more direct surgical means, as the knife, etc.

The topical remedies, and their mode of use to promote the more rapid dispersion of these chronic gland-swelling, will be discussed with greater advantage when considering their application to truly tuberculous conditions of the external lymphatic ganglia. It may, however, be briefly stated that those agents which prove of most service are the various solutions and ointments of iodine and mercury; while frictions with cod-liver oil, ordinary stimulating liniments, blistering tissues, etc., have likewise their value. The readiness with which such enlargements disperse, especially when unassociated with any well marked scrofulous complications, and in no way involved with tubercle, under the topical use of iodine, is often surprising; and the question has frequently arisen in my own mind, whether resolution is dependent on the absorptive powers of iodine, or simply on a stimulating action common to other applications. I have frequently submitted this query to a practical test, and feel assured that other topical applications have not, at least in scrofulous subjects, the same value.

Sometimes, however, notwithstanding both general and local treatment, the lymphatic glands remain permanently thus enlarged, and give rise to certain inconveniences, if not to actual pain and discomfort; so that it becomes expedient to consider the propriety of adopting more definite measures.

When the enlargement is confined to one or two glands superficially situated, as in the neck, or at the base of the lower jaw, for instance, and the morbid condition has been inaccessible to repeated treatment, the surgeon, for various reasons, may deem it expedient to suggest the removal of the unsightly and perhaps dangerous growths. This may be accomplished in a diversity of ways.

The insertion of caustics of various kinds is with some surgeons a favourite method. With others, acupuncture with a fine needle or small knife is preferred. Some practitioners, especially those of France, make heroic use of the actual cautery and heated platinum wire; while the majority prefer, when feasible, the use of the knife. Whatever means is employed, one sole object is sought for, although in very different ways—the removal of the enlarged structures.

To the insertion of caustics into chronically inflamed and subsequently indurated glands, I very decidedly object. I have seen this plan followed in some of the Parisian hospitals; and, while there is much to be said against it, I cannot advance one single favourable point to enable even a trial of it. I have seen a hole dug with a knife in glands in this condition, and stuffed with sticks of caustic composed of chloride of zinc and paste of flour and gum; and, in carefully watching cases in which such a plan had been adopted, I have, I am sure, not too readily arrived at an adverse opinion of its decided disadvantages. Besides caustic of the above description, others, such as the caustic potash, nitrate of silver, etc., are much in favour with some surgeons. A gland thus invaded with caustic sooner or later suppurates, and is by degrees disintegrated. The effect of such action on the covering integument and neighbouring parts will be fully considered, when adverting to the destruction of tuberculous glands by the same means.

Simple punctures by fine needles have found ready advocates as a method of inducing a certain amount of extra-inflammatory action in the enlarged gland or glands, which shall either promote absorption, or cause suppurative destruction of the increased and altered organ. I have resorted to this plan with success in a few instances; but must confess that, while occasionally it is advantageously employed, it is sometimes injudiciously put in practice. I have only to-day heard of an instance in which a resort to this means was followed with grave constitutional and local symptoms, although the patient ultimately did well.

The heated platinum wire, and even the actual cautery, have occasionally been used not only as discutients, but as destructive agents, in this form of advanced chronic glandular disturbance; but I cannot think that any material advantage is to be gained by their adoption. I have used the platinum wire; but it has been when I knew the gland operated on was involved with tuberculous deposit. In France, I have seen obstinate chronically enlarged glands treated by dotting over the investing integument with the actual cautery, and have, in two or three instances, resorted to similar practice; but I can in no way advise its adoption, while much is to be said against it. When permanently enlarged glands are so situated that they do not involve important vascular and nervous structures, give rise to great inconvenience and deformity, and are limited in number, they may be successively and prudently removed by

means of the knife. Superficial absorbent glands, situated about the base of the lower jaw and along the sides of the neck, when enlarged and indurated, can be thus well removed. In such cases, I have frequently resorted to the use of the scalpel with good results, and have assisted my colleagues, Mr. Gay and Mr. Lawson, at the Great Northern Hospital, in similar examples. There is a gland situated close to the under surface of the base of the lower jaw, in near proximity to the facial artery, which often becomes indurated, and needs removal. In performing the operation, care is required that the artery be not cut. I have seen it divided twice lately, in effecting removal of the gland, a complicated wound being produced. Caution must also be observed, when glands of this indurated character are removed, that no great nervous tracts lie in danger of the knife, and that the tumours be not too numerous or deeply seated. In the museum of St. Bartholomew's Hospital is a preparation showing a very extensive mass of indurated cervical glands of fifteen months growth, which was removed by Mr. Vincent from a child six years of age. The case was one badly selected for an operation; for in the mass of glandular tumours are to be recognised branches of the cervical and spinal accessory nerves. The child died shortly after the operation, of debility, with disease of the lungs. The operation, when adopted under advantageous circumstances, is generally easy of execution, and the result all that could be wished for. The scar that remains is usually slight, especially if union of the lips of the wound have taken place by adhesion; and, from all I have seen regarding this mode of permanent riddance of isolated indurated glands, I feel fully justified in advocating its adoption when feasible.

THE ALCOHOLIC TREATMENT IN EXHAUSTING DISEASES.

By JOHN PURSELL, M.D., F.R.C.S., Brighton.

FROM time to time, I have observed various articles in the JOURNAL referring to the administration of what are usually termed *stimulants* (but which I should submit might with greater propriety be classed as "cordials") in the successful treatment of acute and chronic disease, and which the late eminent Dr. Todd sanctioned by his long continued observation and experience as the only means calculated to restore the exhausted nervous energy of a suffering patient. I am therefore induced to give in brief detail a few of the many cases I have restored by the free administration of brandy, when each and every one of the patients' cases appeared hopeless under any other treatment.

CASE I. I shall commence with the last case under treatment, that of a young female of 16, nursemaid in a family, a patient of the eastern district of the Brighton Dispensary, to which I am the medical officer. At the present time she is progressing towards convalescence from bed-sores. This patient was the subject of acute rheumatism three months since, with the frequent concomitant of acute pericarditis. She was treated on the alkaline plan with morphia and opium, and counterirritation on the spine, and in about ten days was convalescent. Chorea of the right upper and lower extremity gradually supervened, which continued to increase; and the jactitation of the upper extremity was so severe, that the limb was obliged to be held down and confined by attendants; while at the same time the patient, who had all along been ordered weak brandy and water, continued to experience great exhaustion and physical depression, which increased to such an extent that it was apparent death from exhaustion must speedily occur unless the nervous system could be rallied. At half-past 11 A.M. I administered with my own hand, by means of a tablespoon, about a pint of brandy diluted with one-third of cold water. At half-past 4 I revisited the patient, and found her slightly improved, and gave her rather more than a pint similarly diluted. From this time a marked change for the better took place, and she gradually recovered; her convalescence being only retarded by bed-sores. But for the exhibition of this cordial, certain death was imminent, and that in a few hours.

CASE II. I had for many years attended an elderly lady, who was frequently the subject of gastric disturbance arising from indulgence at the table in indigestible articles of diet, inducing diarrhoea, etc., and occasionally immediate or remote cerebral congestion. Twice or thrice she had been in *articulo mortis*; and once she appeared to have expired, when brandy diluted as above was exhibited, in the quantity of a pint or a pint and a half, with the result of restoring sensibility in a few hours.

This lady continued to live several subsequent years, in the enjoyment of excellent health. The usual treatment by counterirritation and laxatives had been previously pursued.

CASE III. I was called up at 4 one morning, about six years ago, to visit a youth of 13, who had been under treatment for arachnitis, and became convalescent. Feeling greatly exhausted a few days subsequently, from having been imprudently driven too long a distance into the country, he experienced a relapse, when my attendance was urgently requested. I adopted the usual remedies, with counterirritation on the spine, etc. On being summoned early in the morning, I found my patient fast sinking, evidently from exhaustion, and not from inflammation or its consequences. I called for some brandy, which, having been mixed with one-third of water, I succeeded in getting down quickly; but, while thus engaged, our young patient appeared to be expiring. The attendants, being all paralysed at the emergency of the case, left me to make the best of it. I continued the administration of the brandy until I had fairly given upwards of a pint, when the patient began to make long and deep inspirations. He quite recovered, and is now a fine grown youth in excellent health. The late Dr. Borland, of Newington Place, saw this case at 7 A.M., when the sensibility of the patient was restored, and expressed his great surprise and approbation of the success of this remedial agent.

CASE IV. I was called to attend a respectable middle-aged married female, about five years since, the subject of an attack of profuse menorrhagia. As I was from home in the country, my assistant attended and took charge of the patient. On my return and visiting this patient, I found her still flooding, and in a sinking condition. Having bandaged her, and applied cold to the uterine region, I immediately gave brandy diluted to the extent of a pint, and ordered opium in one grain doses with quinine every six hours. In about five days this patient was convalescent, having taken the contents of two bottles of brandy, besides the opium and quinine. She is at this time, and has been ever since, in the enjoyment of excellent health. I should have stated that this patient was scarcely or but partially sensible when I saw her on my first visit, so completely drained had been the circulatory system—a proof that alcohol, in all these cases, possesses the essential properties of a nutritive aliment of the nervous system.

Such had long been my opinion before Dr. Todd's views appeared in print. I can safely add that I have been more successful in the treatment and cure of acute and chronic disease by the timely and judicious exhibition of what are termed "stimulants"—by which I mean cordials, as brandy more or less diluted, and wine and beer—than by any other class of dietetics. Many have been the cases of supposed "heart-disease", indicated by frequent palpitations, sensations of fluttering, inordinate action, etc., which have yielded to a moderate allowance of beer, wine, etc., twice or thrice daily, in conjunction with a generous diet of meat, bread, and avoiding indigestible articles, such as cheese, pastry, etc.

In conclusion, to withdraw from a patient suffering from acute or chronic disease his accustomed aliment, and to keep him on what is termed "a low diet", must aggravate his malady, and is diametrically opposed to common sense, and will indefinitely protract his disease and counteract the direct exercise of the *vis medicatrix naturæ* in restoring the healthy and reparative processes of nature.

For the last twenty years I have been in the habit, from long and continuous observation in public and private practice, of recommending the moderate use of wine or beer in the treatment of most acute, subacute, and chronic diseases with the greatest success; and I am convinced it is the only plan calculated to counteract the varied and manifold effects of disorder and disease, and to restore the inestimable blessing of health. There is of course "no rule without an exception." The state of the pulse, skin, and tongue, the marked presence or absence of physical prostration, constitute the chief indications to determine the employment of the above auxiliaries in the treatment of disease.

I should here remark, that I have never observed any apparent inebriating effects to follow the administration of large doses of diluted alcohol; with a fuller and more regulated pulse, calm and refreshing sleep usually succeeds, terminating in the rapid recovery of the patient. Almost all the cases in which I have succeeded in restoring the vital energy of a patient where immediate death appeared to be the inevitable result, were those of individuals, with two or three exceptions, who usually drank water as a beverage.

I propose in a future JOURNAL to submit some further re-