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"Je prends le bien où je le trouve."

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PART I.—ORIGINAL COMMUNICATIONS.

ARTICLE XV.

[Note.—We are compelled to omit the Hebrew and Greek employed in this Article. We learn that the talented and indefatigable author studied the former language for the express purpose of comprehending this very subject—The Medicine of the Bible. Edts.]

Notes on the Medicine of Moses. By John M. B. Harden, M. D., of Liberty County, Georgia.

1. Physicians.—The early history of Medicine is necessarily involved in much obscurity, and in regard to its doctrines and practice we shall probably always remain in our present state of ignorance, inasmuch as no writings expressly upon the subject earlier than those of Hippocrates have come down to us. Hence, although it is generally conceded that much is due to the Egyptians for their knowledge in this as in other Sciences, writers upon this subject following the example of Celsus and of Pliny, always regard him as the "Princeps Medicinae" or "Father of Medicine"; and it seems to be the general impression, that previously to this time the art of healing was confined entirely to the Priesthood, and the discovery of remedies the result of accident or random experiment. This sentiment is distinctly avowed by Dr. Parr,* and still more recently by Broussais,† who uses the language of LeClerc,‡ and the former goes on farther to declare that Hippocrates "seems to have been the first to whom

‡ The opinion of LeClerc upon this subject, may be gathered from the following passage: "Si Hippocrate n’ a pas tout-a-fait passé pour le premier inventeur de la Medicine, il a, pour le moins, eu, de l’aveu de toute l’antiquité, la gloire d’être le premier, après Esculape & ses fils qui l’ait restable; ce qui est la même chose que si l’on disoit qu’il l’a inventée, comme on le peut inferer de ce qui l’
the appellation of Physician in its modern acceptation is due."*

Now, we may differ in the use of this term, and if by Physician be meant a true medical philosopher, we cannot question the correctness of the remark, although by it many shall be proscribed in our own day who lay claim to the appellation, but if it mean, as we are disposed to think is its most usual signification, a healer or curer of Diseases, by profession, there can be no doubt to the reader of the Pentateuch, that such a class of men has existed in the earliest times of which we have any knowledge.

My reasons for this belief, are briefly these:

First, That the original word, translated Physician, can mean nothing else than a healer of Diseases;

Secondly, That they are referred to as distinct from the Priests, whose office generally was of a very distinct character; and

Thirdly, That as in all subsequent periods, they were remunerated for services rendered in cases of sickness.

1. The word Physician, occurs for the first time in Genesis, c. 50, v. 2, where it is said that Joseph "sent for his servants the Physicians to embalm his father." From the fact that nothing is said of their having attended him during his sickness, it is inferred that their sole occupation was the embalming of the Dead for burial, and hence the Septuagint, which is certainly high authority in the interpretation of the Hebrew Scriptures, has rendered the word by entaphiastai, literally those who intomb, or prepare the body for being intombed; but the original word (rapha), from which is derived (rophiim), translated Physicians, has no such signification. The leading idea conveyed by the word is that of healing or restoring to health, and the literal translation would be healers or curers, and this is indeed the rendering given to the same word by the Septuagint, in 2d Chronicles, c. xvi. v. 12, where the word iatros, is very properly used as expressive of its meaning. It cannot, however, be denied, that at this time, as for a long time subsequently, an important part of their business was to embalm the dead. But this process was expressed

*Histoire de la Médecine prem. part. page 113. The author, however, cites many examples of the practice of the art long before the time of Hippocrates—Vide the work above referred to—passim.

• Hippocrates himself was disposed to concede more than this to his predecessors—In his book on ancient medicine, he says: We ought not to suppose that the healing art did not exist in former times, nor ought we to think, because we do not everywhere meet with the requisite accuracy, that its laws were investigated without skill. On the contrary, we have reason to be astonished at the
by a very different word, (\textit{hhanat} or \textit{chanat}), and it is to be presumed that if this had been the sole occupation of Physicians, some derivation from the word would have been used to designate them.

2. It is to be supposed that on account of the heavy bondage which the Hebrews endured in Egypt, they were denied the privilege, in a great degree, at least, of studying the *Arts and Sciences* cultivated among them, and that whatever knowledge they had of these subjects was imparted to them by Moses, who, together with the aid of inspiration, is said to have "been learned in all the wisdom of the Egyptians." It is not to be wondered at, therefore, that in the passage through the wilderness the treatment of diseases should have been entrusted to the Priests (\textit{kohanim}) under the direct superintendence of Moses, who laid down certain rules and regulations by which they were to be governed. Very soon, however, after the possession of the Promised Land, we find Physicians again referred to as a distinct class, for it is written in 2d Chron. xvi. 12, that in the sickness of Aash, "he sought not unto the Lord, but unto the Physicians," where the word (\textit{rophim}) is again used.

3. The remuneration of Physicians for services rendered is certainly a satisfactory proof of their having pursued the practice as a distinct profession. That they were thus remunerated may be clearly deduced from the allusion made to it in the following enactment of the Levitical Law. "If men strive together, and one smite another with a stone or with his fist, and he die not, but keepeth his bed, if he rise again and walk abroad upon his staff, then shall he that smote him be quit, only he shall pay for the loss of time and shall cause him to be thoroughly healed." (Exod. xxii. 19). The Septuagint has it, \textit{shall pay the Physicians fees}, which, without doubt, conveys the true sense of the original.

We have no means of ascertaining what may have been the qualifications of Physicians before or at the time when Moses wrote. It is supposed by some\(^\dagger\) that the practice of Circumcision implies some knowledge of Surgery; but when we are told that Zipporah performed the operation upon her son with a sharp stone, (Exod. iv. 25.) we are induced to believe that it was regarded then as now, to be a very simple operation, and one which could be performed by the most important discoveries that were made in times when the greatest ignorance prevailed, and that were made, moreover, not by chance, but as the result of correct and careful investigation.

\(^\dagger\) Jahn's Archeology, p. 115.

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\textbf{Notes on the Medicine of Moses.}
unskillful.* The elaborate treatise upon the Leprosy in the 13th of Leviticus, gives evidence of much accurate knowledge of Cutaneous Diseases, and the ability to recognize the diagnostic signs of these affections must have required a considerable degree of study and close observation.

The process of embalming the dead, which we have said was an important part of the business of Physicians in those days, was so simple that it could not have required any great extent of learning, and it was most probably an hereditary art, descending from father to son.

† Herodotus describes three methods of embalming among the Egyptians, differing chiefly in the amount of care bestowed and the value of the materials used. In the first they removed the Brain through the nostrils by means of a curved metallic instrument, and filled the cavity with various medicaments. They next used a sharp Æthiopan stone in making an opening into the abdomen, through which they drew out the bowels; they then washed the cavity with Palm wine, and filled it with bruised Myrrh and Cassia, and other aromatics, after which they sewed up the opening. The body was then kept salted with Nitre during seventy days, at the end of which time it was well washed and enveloped in Linen which was smeared over with a kind of Gum.

In the second, they used an injection prepared from the aromatic oil of a species of Cedar, which was thrown into the bowels by the rectum. The body was then kept in common salt for the same number of days, (seventy,) after which they removed the injection, which is said to have had the strange property of bringing away with it the contents of the abdomen destroyed by its action.

In the last, and most simple way, they cleansed the Bowels by oblations, and kept the body well salted for the space of seventy days.‡

* The Practice of Surgery is distinctly alluded to by the Prophet Ezzechiel in the following passage—"Son of Man I have broken the arm of Pharaoh, King of Egypt; lo, it shall not be bound up to be healed, to put a roller to bind it, to make it strong to hold the sword." xxx. 21.—See also xxxiv. 4, 16.

† Euterpe, 86, 87, 88.

‡ The Æthiopan had a much more elegant method of treating their dead. After all the moisture is exhausted from the body, by the Egyptian or some other process, they cover it totally with a kind of plaster, which they adorn with various colors, and make it exhibit as near a resemblance as possible to the person of the deceased. They then inclose it in a hollow pillar of crystal, which is dug in great abundance and of a kind that is easily worked. The deceased
These, or some one of them, were probably the methods employed in the time of Moses, and although rude and unscientific in appearance, answered well the purposes for which they were intended. Bodies treated in this way have been preserved for many centuries without having undergone decomposition.*

Leaving for a while the writings of Moses, we may be able to form some estimate of the state of Medical Science at this time, by considering the progress which it must have made some centuries after. About five hundred years before Christ the Egyptians were considered to be the most renowned Physicians in the world, and if a division of labor in any Art or Science may be taken as evidence of the degree of perfection to which it has attained, they were rightly entitled to this distinction; for we are informed by Herodotus that there was a Physician for every disease to which they were subject.†

In the luxation of the foot of King Darius, occasioned by a fall from his horse, he sent immediately for the Egyptian Physicians, and although the cure of the King was attributed by the Greek Historian to his countryman, Democedes, there can be no doubt that it is very conspicuous through the crystal, has no disagreeable smell, nor any thing else that is offensive. The nearest relations keep this pillar, enclosing the deceased, for a twelve-month in their houses, offering before it different kinds of victims, and the first fruits of their lands. These are afterwards removed and set up round the city.—Herodotus Thalia. 24.

Ctesias of Cnidus considers the account of Herodotus as incorrect. His own statement is as follows:

They first embalm the body, but do not, immediately after that, inclose it in the transparent substance (crystal) mentioned by Herodotus; for since this can be done only whilst the substance is in a state of fusion, the action of the heat would destroy the body, so that nothing would remain of its original appearance. They therefore make a hollow statue of gold, into which they place the body, and then pour the transparent substance round it. The golden statue, therefore, which bears a near resemblance to the deceased, and not the body itself, is seen through the crystal. The rich only are disposed of in this way; those that do not leave great treasures obtain silver statues, and the poor, statues of clay.—Diadorus Bibl. Hist. lib. 2.

* The valuable collection of the crania of Egyptian mummies from the Catacombs of Thebes, now in the possession of Dr. Morton, at the Hall of the Academy of Natural Sciences, Philadelphia, confirms in a remarkable manner the account given by Herodotus. Two of these crania present the appearance of having been gilded over, and no doubt belonged to persons of high rank. They must be 3000 years old, and are yet in a good state of preservation.

† Every physician attends to one disease only, and not to any more.
had been reduced before he was called in, for Democede did nothing more than use soothing applications to the part for the violent pain which the King suffered. That Democede was a good Physician, however, is shown in the skill which he afterwards displayed in the treatment and cure of an ulcer of the mamma, under which Atossa, Darius's wife, labored, and which seems to have been of a malignant character.

II. Apothecaries.—Pharmacy, or the art of preparing and compoundings drugs or medicines, was evidently practised in the time of Moses, and under the phrase "Art of the Apothecary." Manseh rokeahh* is referred to by him as a thing well understood long before. The art at this time was confined mostly, perhaps, to the preparation of ointments and perfumes for religious as well as medical purposes. The "anointing oil" and the "pure incense" were commanded to be made according to the formula of this art. The word rokeahh is derived from the root rakahh, which Mr. Parkhurst says means in Kal, to Compound, and is rendered in the Vulgate, by the Latin, Componere. It means also to spice or season, and the marginal readings renders it by the word "Perfumer," and in 1st Samuel, viii. 13., by "Confectioner."

Among the articles of their Materia Medica, or more properly, Pharmacopoeia, may be included their "Spicery" or Perfumes, necoth, called also bosem and sammin, and their healing Medicines, rephuoth, which seem to have consisted for the most part of external applications.

We will briefly enumerate the most conspicuous of these articles, premising that we by no means intend to signify that they all were considered medicinal, or used as medicines.

* Literally "work of the Apothecary."
+ Pliny (Natural History 13. 1.) seems to say that ointments were never used until after the time of Troy, and gives the credit of first preparing them to the Persians. He says that the first notice of them that he had seen was an account of a box of ointment found by Alexander in the Camp of Darius after his defeat among the other articles of the King's baggage. Herodotus, who is the oldest Greek Historian whose writings have come down to us, and who has been styled the "father of History," mentions an oil (Euterpe, 93) called "Kiki," with which the Egyptians anointed the body, and tells us that the Scythean women made use of an ointment prepared by bruising under a stone the wood of the Cypress, Cedar, and frankincense and pouring water upon it until it became of a certain consistency. (Melpomene, 75.) It is very evident too, that a compound ointment is referred to in many places in the Old Testament, as used among the Jews.
Notes on the Medicine of Moses.

Shemen zaeth, Oleum olivarum, Oil of olives.

At the head of the catalogue may be reckoned the olive oil, so generally and so variously used from the remotest antiquity. Besides being used by the Hebrews for domestic purposes in the stead of Butter, and for the burning of Lamps, &c., it entered into and formed indeed the chief ingredient in all their ointments and perfumes. There can be no doubt that the tree from which it was obtained is the same as that from which we now derive it, the Olea Europea of Botanical writers.

Tseri, Balsamum, Balsam or Balm.

This is generally supposed to be the opobalsamum of Pliny, which is the Resin exuding from the tree by incisions made in the Bark. The small twigs which were sometimes used instead of the Resin, in the preparation of ointments, were called by him Xylobalsamum.

The tree from which it was obtained was supposed by Linneus to be the Amyris, to which he gave the trivial name of Gileadensis.

*Pliny describes it as being in habit more like the Vine, and having leaves like the Rue. He mentions three species, the Eutheriston, Trachq, and Eumices. It was an article of commerce with the Gileadites, who exported it in quantities into Egypt. (Gen. 37. 25.)

Mor, Myrrha, Myrrh.

The Myrrh of the ancients was probably the Myrrh of the present day, with which we are well acquainted, but the tree which yields the drug is not known. It has been variously attributed to a species of Acacia, Amyris, and Scandix. It is described by the Roman Naturalist, as growing to the height of 7 to 10 feet, having a harsh, crooked and thorny trunk, larger near the root than higher up.

The Nataph, or Stacte of the Greeks and Romans, is only a purer variety of Myrrh. It was that Gum which exuded spontaneously from the Myrrh tree, and was considered highly valuable. Sudant autem sponte prius quam incidatur stacten leesam, cui nulla præferatur."

Lebonah, or Thus, Frankincense.

This is the Olibanum of the Shops, still used by the Greek and Roman Churches in the burning of incense. It must not be confounded with the common Frankincense or Thus of the London

: Pliny. Dioscorides regarded it to be a certain oil expressed from Myrrh macerated in water. Some suppose it to be oil of cinnamon.
Pharmacopoeia, more generally known as Burgundy Pitch, which is obtained from the Pinus Abies.

There is a contrariety of opinion in regard to the tree yielding this article. Linneus supposed it to be the Mimosa Nilotica, the same tree which produces Gum Arabic. Others suppose it to be the Juniperus Lycia. Dr. Parr considers it most probable that it is the Amyris Kataf of Willdenow.

Herodotus mentions the tree or trees as growing abundantly in Arabia, and says that they are usually so infested with serpents that the Arabs, in order to collect the Frankincense, are obliged first to drive them away by burning under them the wood of a species of Styrax, the smoke of which they cannot endure.*

Lot, or Ladanum or Labdanum.

This word, used only in Genesis xxxvii. 25 and xliii. 11, is rendered in the Septuagint, by the Greek, etakte, and Myrrh in the present authorized English version. The Syriac and Chaldaic versions interpret it Pistachio Nuts, the Arabic Chestnuts.† Mr. Parkinson says "that the most probable interpretation of the word seems to be that of Junius and De Dieu, who take it to mean Ladanum or Labdanum, which is a Balsam or Gum oozing from the leaves of the Cistus tree, which is common in Cyprus and some parts of Arabia."

I was for a time under the impression, from the obvious analogy in the orthography, that it might mean some variety of the Lotus plant, and the impression was strengthened by the fact that the name of this plant is of Egyptian origin.‡ But inasmuch as the Lotus afforded a very substantial kind of bread upon which a whole nation (the Lotophagi) is said to have subsisted, it is not probable that Jacob should have had enough of it to make a present of it to the Governor of Egypt, while at the same time his family was so pressed with the famine as to make it necessary to send under any sacrifice to buy food, that "they might live and not die." The habitat of the plant also seems to militate against such a conclusion.

The more probable inference, therefore, would appear to be that since the Hebrew Letters, Tait and Dawleth, are in many instances convertible; the Greek is derived immediately from Lot quasi Lod or Led, and that it is the same as Ladanum, a name applied by the Arabs to a fragment substance which was found upon the beard of

* Thalia, 107.
† Vide. Gesenius de verbo.
‡ There grows in the water an immense quantity of plants of the lily species, which the Egyptians call the lotus. (Herod. Euter. 92)
Goats, collected there as is supposed whilst eating the leaves of the Cistus Ladaniferous.*

Shebenah or Chelbenah, Galbanum.

This is considered to be the gummy resinous substance, derived from the Bubon Galbanum. The plant grows in Syria, and some parts of Africa. It is an umbelliferous plant allied to the Ferula, from which plant Pliny says it was extracted. It is a medicine of some considerable powers, being allied in its properties to its cognate Gum Asafætida.

Kinnamom, Cinnamomum, Cinnamon.

This Aromatic was probably the same as that now used by us and obtained, as is well known from the Laurus Cinnamomum of Linneus. † Herodotus says the Arabs did not know anything about the tree which yielded it, and tells the following strange story about the manner in which they collected it. It was said to be one of the chief ingredients in the nests of a certain large bird which were built in places inaccessible to man. In order to get the nests, therefore, the birds were fed with dead asses and cows, the flesh of which they would carry up in such large quantities as by its weight to cause the nests to fall.

Kideah, Cassia.

There is some doubt about the plant designated by this name. It is supposed to be the same called in Psalm xlv. 9, Ketsioth, from Kutsa, whence the Greek and Latin Cassia. The Septuagint has it iris, and it would seem correctly if Herodotus may be believed, who speaks of it as an equator plant. (It grows in shallow, stagnant water.) Pliny, however, doubts all that Herodotus says upon the subject, and describes it as growing with the Cinnamon, and even upon mountains; and following him it is generally believed to be the Laurus Cassia of Linneus.

Kenebosom, Calamus odoratus, sweet scented Calamus.

The Hebrew root from whence the name of this plant is derived signifies to hold, contain, and, as Mr. Parkhurst observes, it is probable that the Greek, Kenos, and perhaps the Eng., Cane, may be derived from it. It was no doubt applied to a plant with a hollow stem. The plant designated by it is most probably the Asiatic Calamus Aromaticus, and not the Calamus Aromaticus of the shops,

* Vide. Herod. Thal. 112. Our object in the notice we have given above of this plant, is to shew the distinction between it and Myrrh.
† Thalia, iii.
which is the Acorus Calamus of Linneus. "The names of Calamus Aromaticus and the Acorus differ: the first is a stalk of an Eastern reed which is slender, hollow, white and of a fragrant smell. It is also called Calamus Odoratus and Arundo Syriaca, but is only probably a variety of the Acorus."*

Ahalim, Aloes.

This word is only used once in the Pentateuch that I am aware of, and then it is spoken of in such a manner as to leave no room to conjecture what kind of a plant it was; but in Proverbs vii. 16, where it is again used, we learn that it must have been a fragrant aromatic plant, and although translated, in our Bible, Aloes, does not mean the substance so called at the present day. It is supposed to be "the wood of a tree growing in the East Indies, with red fruit resembling pepper corns, called by Linneus Excecaria Agallocho." It seems to have been used entirely as a Perfume.†

Erez, Cedrus, Cedar.

The term Cedar has been indifferently applied to many species of the Natural Order of the Coniferae, and as originally used may have embraced them all. From the allusion made to it in 1st Kings, it appears that the Cedar of Lebanon was the most noble and majestic of all the trees of the East. It is supposed to be the Pinus Cedrus of Linneus. The Cedar was used in Architecture,‡ in embalming the dead,§ and in Medicine.|| In Leviticus it is spoken of as having been used for the cleansing of the Leper, but how far this, together with the blood of a bird, the Scarlet wool and the Hyssop, was regarded as medicinal, or merely typical, it is difficult to determine. It is certain that the Leprosy was considered as healed before it was used, but still its detersive cleansing qualities are implied in the fact that it was considered as emblematic of the cleansing of the Leper from a disease which was then considered as incurable.

Ezob, Hysapos, Hyssop.

The Greek, Latin and English terms above given, seem evidently derived directly from the Hebrew, but it is evident that our word is applied to a plant which was not designated by the original. It is spoken of in 1st Kings, in contrast with the Cedar of Lebanon, which

* Dr. Parr. de verbo.
† Our object in noticing this plant is simply to shew that it does not mean the Aloes used by us.
§ I. Kings, c. vi.  
|| Lev. xiv. 4. Pliny—Celsus.
would imply that it was regarded then as the humblest of all plants.*
It is said to have grown out of the wall, and in all probability it was
a plant belonging to the Cryptogamia and of the Natural Family of
the Filices or Musci of Linneus. Those who regard it as being the
"Wall Polypody" seem to me to be near the truth. This plant we
have already said was used in the cleansing of the Leper. From its
cleansing purifying qualities arose, no doubt, the ejaculation of the
Psalmist, "Purge me with Hyssop and I shall be clean," (Ps. li. 7.),
but, as in the case of the Cedar wood, we have no means of ascer-
taining how far it was regarded as medicinal in the cleansing or
healing of the Leprosy.

Tenah, Ficus, Fig-tree.
The fig-tree, although chiefly celebrated for its delicious fruit, was
nevertheless used in Medicine, and it is one among the few remedies
whose mode of application, as well as the disease to which it was ap-
plied, is clearly told. It was the application of a lump of figs to the
bile of Hezekiah, (Shekhin,) by the advice of Isaiah, that cured him
of his malady. The fig forms a very important article in the Materia
Medica of Celsus, and it is curious to remark that he recommends
its use in a disease probably of a similar character, viz., a kind of
ulcer, "quod a favi similitudine kerion a Graecis nominatur."
Under the name of Fig, various species of the Genus Ficus of Lin-
neus are included; some with edible and others non-edible fruit.
The former seems to have been used in Hezekiah's case.

Shekheleth, (Sept.), Onycha.
This is the only substance used in the preparation of the fumes or
ointments which was obtained from the animal kingdom, if indeed it
be so, and it seems to be the general impression of those who have
examined the subject so far as I can ascertain. The particular ani-
mal or animals are not known, but it is believed to have been shells
of various species of the Testacea, which, when burnt, yielded a
fragrant odor. I have not been able, by the few helps that I have,
to satisfy myself upon the subject.†

* Le Clerc supposes it to have been a small tree, from the fact that it is men-
tioned among the trees of which Solomon wrote, but it is evident that this expres-
sion is general, including both trees and plants of every kind.
† There are several other words used in the Pentateuch, representing sub-
stances probably of highly active medicinal properties, but they are used in
such a general and figurative sense that we shall only refer to them. Thus the
word Rash, translated in the Septuagint by Gall, or Venom, was used probably
The most celebrated of all the above articles in a medicinal point of view seems to have been, from the frequent references made to it in the Sacred volume, the Balm or Balsam of Gilead. The following passage, among many others of a like kind substantiating my remark, will occur to the reader: "Is there no Balm in Gilead; is there no physician there? why then is the health of the daughter of my people not recovered?" (Jeremiah viii. 22.)

III. Midwives.—From allusions made to it in the Pentateuch, we may reasonably infer that the Practice of Midwifery was pursued as a distinct profession, long before the time of Moses. The first mention that we have of Midwives is made in Genesis xxxv. 17, where we are told that Rachael, in her journey from Bethel to Ephrath, was taken in labor with her last child, Benjamin, during which she died. The names of two Egyptian Midwives are given in the first chapter of the Book of Exodus.

The origin of their appellation, and the notice taken of them in these places, sufficiently explain the nature of their occupation. The word Meyalledeth, translated Midwives, is a participle, used as a noun, from the word Yaledh, to bring forth, and in Piel, from which form the participle is borrowed, has the force of helping to bring forth; so that this noun really, literally signifies helpers or assistants in parturition, a word far more expressive than that used in our own language. The word being in the feminine gender, we may presume that it was a business practised only by the female sex, although this is by no means certain.

What may have been the amount of information possessed upon the subject must remain a matter of conjecture. The fact that the Egyptian Midwives were recognized by the King, is sufficient evidence, I think, that they must have been legally qualified and that they had gone through some probationary course preparatory to

for Poison of any kind. So also the words Laanah and Merorim, Wormwood and Bitter Herbs, are so general in their signification that it is impossible to know, with any degree of probability, what kinds were intended. They seem only clearly to mean herbs or plants that were disagreeable to the taste, or bitter, and even poisonous; for Bitterness and Poison were intimately associated in the minds of the Hebrews. The bitter water (meha marim) used in the trial of jealousy, was prepared by mixing the dust of the floor of the tabernacle in holy water. When it took effect it seems to have caused abortion and barrenness. (Num. v. 28.) May not the properties of this water have been due to the fungues growing on the floor, and mixed with the dust of the tabernacle?
entering upon the Practice of the Profession. The prognosis of the one who attended upon Rachael “Thou shalt have this also,” although it was evidently a case of great difficulty and danger, shews that she must have understood the mechanism of the Labor.

It has been and still is a matter of doubt among commentators, what is the true signification of the word Abhnayim, translated “stools.” Two opinions are entertained in regard to it, one that it intends a stone bathing trough, in which the mother and infant were washed soon after delivery: the other that it was a stone seat for the parturient woman, “Sella mulieris parturientis.”

It is evident, from the signification of the original word, that the utensil was made of stone. In Exodus vii. 10, it means vessels made of stone for holding water. In Jeremiah xviii. 3, it is called a Potter’s wheel, which Dr. Clarke says is even now made of stones. It is also evident from the force of the particle al, in the sentence where it is used, that the woman must have been placed upon and not by it, as Mr. Parkhurst supposes; for although it may have such a signification, it is by no means the most usual one. We think, therefore, that there can be no impropriety in supposing that it was a stone vessel made on purpose for such occasions, on which the parturient female sat during at least the first stage of Labor, and into which the Liquor Amnii was received. I have found that the sitting posture is the one most readily chosen by parturient women, and indeed it is not an easy matter to get them to assume any other, except in cases where manual interference becomes necessary. Some I know have had Chairs made for the purpose, with perforated seats. I recollect the first case to which I was called in my practice: I found the patient (a negro) seated on the front edge of a chair, with her hands suspended above; a midwife under her, and waiting to receive the infant, whilst the patient was yelling at a most furious rate. I did nothing, and in a short time afterwards she was safely delivered. In consequence of this mode of conducting a labor, the frequent lacerations of the perineum which occur among us may in great part be due.

The expression, therefore, seems to be equivalent to our “brought to bed,” or the French “accoucher.” I must, however, agree with Gesenius in the remark that “a greater knowledge of ancient manners and customs is necessary to determine the true meaning of this word” as used in this connexion.
ARTICLE XVI.

Cases Cured by Blistering the Spine. By John Davis, M. D., of Abbeville C. H., South Carolina.

Since reading the excellent articles of Professor Ford, of the Medical College of Georgia, on Intermittent and Remittent fevers, their pathology and treatment, whose opinions on these subjects are peculiarly entitled to a favorable reception by the profession, I have thought a few cases which occurred in my practice, (which I have not hitherto designed for publication) might not be altogether uninteresting to the readers of this Journal.

I shall confine my remarks to a simple, unvarnished statement of the facts of each case, and leave the reader to draw his conclusions for himself. It may not be amiss, however, to observe here, that those who have paid particular attention to the nervous system, in the treatment of our autumnal fevers, and in fact a host of other diseases, are alone capable of appreciating the importance that is now being attached to this subject, by a respectable portion of the profession, and which is destined, at no great period, to effect an entire revolution in the principles of their cure.

Case 1st. Mrs. C. applied to me (April 5th, 1841,) for advice in the case of her daughter, aged 20 years: says she has not been regular in her monthly sickness for four years; sometimes more than natural is discharged, then again scarcely any appearance at all, and again an entire suppression for eight or twelve weeks; bowels costive; appetite bad; pain in the right shoulder and side; shortness of breath on the least exercise; pain, and at times swimming in the head; has been subject to attacks of the third day chills more or less frequently for the last three years, both winter and summer; occasional fevers, attended with a burning in the soles of the feet and palms of the hands; dry, bilious tinge of the skin; sick stomach; urine scanty and high colored; pain in the small of the back and hips; very much troubled with keen pains about the chest, attended with twitching of the muscles of the breast. I am informed that the cause of her general bad health cannot be easily accounted for, unless it be an imperfect recovery from a severe attack of, what the medical gentleman who attended her called, "congestive fever," previous to which she had enjoyed remarkably good health.

Having, but a short time previous to this, returned from the North,
where I had received a thorough drilling on spinal irritation, by Prof. Revere, then, of the Jefferson Medical College of Philadelphia, and the patient having exhausted the entire catalogue of remedies usually prescribed for "liver complaint," &c., with little or no benefit, my attention was directed to the spine. On examination it was found very tender at different points, but more particularly at the two first dorsal and first lumbar vertebrae. The slightest pressure on the lumbar vertebrae gave the most excruciating pain. Prescribed a pill composed of equal portions of rhubarb and aloes, to be taken at bed-time, as circumstances might require. Applied a blister three inches broad, extending from the nape of the neck down the side of the spine to the sacrum, to remain till it draws well, then to be dressed in the usual way.

This prescription was made on the 27th of same month, and on the second of May, (just five days) there was a decidedly favorable change, in all the symptoms. The blister was now applied to the other side of the spine, and alternately changed from one side to the other, till its fifth application, when the lady declared she felt so well that she did not think it necessary to draw another, at least for a day or two. It will be recollected that there was a blister, running on one or the other side of the spine, for a little over six weeks, when the case was discharged cured; though she was quite weak, for which I prescribed the tr. of iron. She has ever since enjoyed the most uninterrupted health.

In about two or three months after I pronounced this case well, I requested an examination of the spine, which I made, very minutely, but could not discover the slightest tenderness. It may be proper also to state that this lady had taken medicine, from various physicians, during a great part of her bad health, for "liver complaint," and various other "complaints," with no perceivable benefit.

**Case 2.** W. R——, sent for me, on the 8th Sept., 1841— I found him laboring under the following symptoms: great oppression at the stomach; difficulty of breathing; great thirst; dry, hot skin; yellow, bilious tinge of the eyes; pulse quick and tense; pain in the head; furred tongue, &c. Had a chill about three hours ago, and says it was the severest one he has had in his life. However, he got better in some three hours, and gave me the following history of his case: About one year ago he had a chill—the first one he ever had—that he sent for a physician, who gave him quinine freely for three days; when he missed the chill, and got up, but by no means felt
well—in about two months afterwards took another chill, which was also checked by the quinine; but about the middle of December following, he took the “third day chill,” and it lingered about him, occasionally, till about one month ago, but did not confine him to bed, yet he was unable to take much exercise, owing to a fulness about the chest, and a shortness of breath: says his bowels during the whole time have not been costive, but, at times, rather the reverse. Ordered, five Cook’s pills, and went to bed. In the morning I examined the spine, and found the second dorsal vertebra quite tender, or in other words, he said when I pressed on it, it excited rather an agreeable sensation than otherwise. He also complained of weakness of the whole back, with an occasional soreness when he bent it, or moved suddenly.

This patient having a great aversion to quinine, from the large quantity he had taken during the last year, and believing as I did, that the blistering would “break the chill,” I resolved on its immediate application, and accordingly it was applied as in case 1st. The pills operated quite gently, and I ordered nothing farther to be taken that day. The next day, being the one in order for the chill, I promised to return and do all I could to prevent it.

10th. Blister has drawn well; patient feels much better; at breakfast took a little milk and mush; at 2 o’clock, P. M., the time for the chill, there was discovered slight febrile action: no chill.

11. Patient feels quite smart; difficulty and oppression much relieved; appetite much improved; skin cool and soft.

12th. Has had no chill to-day, nor fever; much relieved, and now says he feels, for the first time in six months, that he will get well. I now dieted him, and prescribed the application of the blister to the other side, so soon as the first began to dry; but it was not attended to, as he had improved so rapidly and found he could do without it. The chills did not return in this case; and in three months from the time I first saw him, he enjoyed as good health as he ever did.

Case 3rd. Sept. 26th, 1844, I was sent for to see Mrs. R—, aged 33 years—the mother of four children—general health delicate—has taken a great deal of medicine during the last six or eight years, for the chills, dyspepsia, “liver complaint,” &c.; has now had a chill every other day for three days; has considerable fever; sick stomach; pain in the head and right side; furred tongue; costive bowels, &c. Examined the spine, but found little or no soreness.—Prescribed, 10 gr. calomel, to be taken and followed with cast. oil, in
four hours, if necessary. Left 20 gr. sul. qui., in 2 gr. doses, to be taken every two hours the next day, in a tablespoonful of snake-root tea.

28th. Medicine operated well; slight chill and very little fever. Left 20 gr. sul. qui., to be taken the day following.

30th. Patient has had no chill to-day, but is unable to set up in bed. Prescribed, pills of aloes and rhubarb, to be taken at bedtime, as might be necessary, also, 10 drops tr. of iron, three times a day, from which she slowly improved.

Oct. 17th. Again called to see Mrs. R. She has had another chill to-day—in fact, has been a good part of her time confined to bed since previous attack. Examined spine again, and now found it very tender at several places, particularly over the dorsal vertebrae. Patient informs me that always, for the last four or five years, after being sick five or six days, the soreness of her back is often so great that she cannot lie on it with ease. Gave a dose of oil, and applied the blister as above.

19th. Blister has drawn well; slight fever, but no chill.

21st. Patient much better in every respect. Ordered the application of the blister to the other side of the spine, on to-morrow, and to be kept running as long as possible.

25th. Discharged.

Nov. 5th. Mr. R. informs me, to-day, that Mrs. R. is quite smart—able to be up and about; feels more like she is well than she has for a great while; has had no chill since blistering.

It will be perceived that, in this last attack, this patient took no quinine, not that I object to the moderate use of it, in such cases; but rather because I wished to give the blistering a fair trial.

Case 4th. Oct. 10th, 1845, Mr. M. brought a negro man (aged 24,) to me to be examined. He informs me that his boy has been under the care of an intelligent physician for the last six months, has taken a vast deal of medicine, and instead of getting better is on the decline. I found him laboring under the following symptoms—red tongue, but moist; red eyes; bowels rather loose than otherwise; discharges from the bowels of a rather thin, whitish appearance; appetite bad; cannot rest at night; pains shooting through the breast, bowels, arms and legs; very much emaciated; quick weak pulse; spine more or less tender from the second cervical vertebra down to the fourth dorsal; third lumbar vertebra quite painful under the slightest pressure.
Believing that this patient had been taking such remedies as the more prominent symptoms of his case indicated without any benefit, and it being a chronic case, and since I had now become a strong believer in Spinal Irritation, I concluded nothing could be lost by applying the blister, and awaiting its effects, for a few days. In this case the blister was five inches broad, and was placed over the spine instead of to the side of it. On the 14th (just four days) there was evidently a favorable change. All the shooting pains had subsided; rests well at night; appetite improved. 18th, still give no medicine; tongue and eyes of the natural, healthy, color; bowels more regular, and operations of a good colour, and healthy consistence.

20th. Gave Carbonate of Iron to be taken freely as a tonic.

27th. Able to do jobs about the yard, without the least inconvenience. From this time on, he continued to improve till the 15th of December when the medicine was discontinued.

It may be necessary to mention, that, the blisters were repeated several times, and that he took nothing but the carb. of iron, and an occasional dose of castor oil, during the whole time.

These are a few cases among hundreds of others in which I have witnessed the most astonishing effects from blistering the spine. In intermittent and remittent fevers, where they do not yield to the ordinary remedies, and assume an aggravated character, I have never known a blister applied to the spine, as in the above cases, fail in immediately checking, or very materially changing the nature of the case for the better. In all those malignant cases, if we will examine the spine closely, we will almost invariably find more or less tenderness to exist. And he who will make it an invariable rule to examine it, in every case to which he may be called to prescribe, will not only be surprised at the extent to which he will, often, find it diseased, but will be most agreeably surprised at the success of the above practice, if he will adopt it.

I now have in my possession a number of cases of what may be called chronic chills with enlarged spleen of long standing which yielded readily to one single blister, after the quinine had been freely given, with little or no permanent effect. In these cases I have always found more or less spinal irritation to exist, and when the cure was thus effected it was permanent; which I cannot say has been my experience with the quinine.

It would indeed be useless here to enumerate the vast amount of disease that I have cured by blistering, or otherwise irritating the
spine; and I do hope that medical gentlemen, generally, will give more attention to this subject than it has unfortunately hitherto received.

ARTICLE XVII.

A Case of Cauliflower Excrescence of the Os Tinæ, cured. By Franklin Branch, M. D., of Abbeville, S. C.

If the following account of successful treatment, in a case of cauliflower excrescence of the womb, can subserve the cause of humanity, by casting one flickering ray upon the science of medicine, the end designed in communicating it will have been accomplished.

On the 24th of May, 1844, being called to visit a female servant of Col. M——, I found her exhausted and fainting, from supposed uterine hemorrhage. Five weeks previous to my visit, she had been delivered of a living child. Her midwife was also a female servant, from whom I learned, that the patient had for many months been laboring under a discharge from the vagina, at times bloody, but generally watery and tolerably copious. When taken in labour, the old servant who acted as midwife made an examination per vaginam, and, as she expressed it, "found a great lump there, which she had to tear away, to let out the child." This laceration was followed by a profuse hemorrhage, which ceased with the birth of the child.

After delivery, the patient was laid in an easy posture, and suffered but little from hemorrhage until the night on which I made my first visit. I examined per vaginam, and with the finger, detected a large tumor, growing from three-fourths of the circumference of the os uteri. It had a smooth or glossy feel externally, but upon pressure it felt somewhat granular, and evinced a strong tendency to hemorrhage.

A thorough, but sad experience, gained from two previous cases of cauliflower excrescences, (both of which terminated fatally,) enabled me to detect the nature of the disease.

I gave the patient anodynes and astringents, internally, introduced the tampon, and directed cold applications to the loins, and left for the night.

On the day following I visited her, and, by the aid of a speculum, I discovered a tumour, as above described, attached by a broad base to
the os uteri, of an oval form, with an uneven surface, of a bright red color, as large as an apple of ordinary size. It gave no pain on pressure, but was easily made to bleed.

The patient, who had been healthy a year before, was now exceedingly weak and emaciated.

Although the disease was considered incurable, by most of the authors which I had consulted, I believed differently, and acted upon that belief. Aided by the speculum, introduced and extended, I passed a ligature of catgut around the base of the tumour, as near the os uteri as possible, and, bringing it through a canula, fastened it. The ligature was tightened every twelve hours, until the tumour was removed.

After the removal of the tumour, and cleansing the orifice, I discovered, by the aid of the speculum, that a portion of the diseased surface remained. To this surface I applied the nitro-muriatic acid, upon a pleget of lint attached to the end of a stick, passing it through the speculum, by which means the cautery could be applied to any particular point, without injury to parts adjacent. No pain was complained of upon the application of the acid, and no subsequent treatment prescribed, except tepid injections per vaginam occasionally, and an occasional dose of neutral salts.

After four days, another examination was made with the speculum, and on discovering a small point of diseased surface remaining, the cautery was again used, and the simple plan of treatment continued.

After six days, another examination was made, and not a vestige of the disease was there. The os uteri presented its natural appearance, with the exception of that purplish color always present in a cicatrix recently formed. Six months passed away, another examination was made with the speculum, and perfect health was restored to the diseased organ. The system was invigorated. I saw the patient, ten months after the cure was performed, laboring in the field as faithfully as another hand, asserting that she was perfectly restored.
PART II.—REVIEWS AND EXTRACTS.

Medical and Surgical Reports from the Army in Mexico.

Denied, ourselves, being participators in the active and interesting campaign in Mexico, we have made every exertion to obtain medical news from those who have been, and are now, engaged in this foreign service. If as yet we have derived nothing direct from the scenes of operation, it is not our fault; and to supply the omission of our promised correspondents, we publish below what we have derived from the sources credited. We are still without, the New-Orleans Journal for March, and may derive more recent information from it, should it come to hand in time.

Of Dr. Jarvis’ report, we make this comment. Of the three Divisions of the Army attacking and capturing Monterey, commanded respectively by Generals Twiggs 1st, Worth 2nd, and Patterson 3rd, (volunteers); in the 1st and 3rd, there were 24 amputations, while in the 2nd there were only 4. Does not this indicate plainly where the fighting was done—and yet Gen. Worth is alone looked upon as the hero of the taking of that city, and he alone has been rewarded by the President with a brevet. Has no injustice been done Twiggs of the regulars, and Patterson of the volunteers?

The Diseases of the Army of Occupation in the Summer of 1846. By H. R. Robards, M. D., of Memphis, Tennessee.—(Western Journal of Medicine and Surgery.)

The following abstract from notes taken while the writer was acting as Surgeon to a regiment of volunteers from Tennessee on its march to Mexico, and during a few weeks while stationed at Matamoros, is presented to the profession, in the hope that its details will be found interesting and useful. The notes were penned in camp, and my short military experience has taught me that the camp is not a place for easy or finished composition.

As early as May last, in anticipation of a call for volunteers for the war then just breaking out with Mexico, the stirring notes of the fife and drum were heard in Memphis; in a few weeks, five companies were made up, and remained in organization until the final lots were drawn in June, when only three were admitted into service.

The requisition made upon Tennessee was for three regiments—two of infantry, and one of cavalry; the latter, to which I was attached, was ordered to rendezvous at Memphis by the 15th of June, or as soon thereafter as possible. This regiment consisted of three companies from East, five from Middle, and two from West Tennes-
see. I am particular in locating the different companies, in order to show the varying influences of a southern climate upon constitutions from different sections of the State.

Three companies only had arrived at Camp Carroll, the place designated for the encampment, two miles east of Memphis, on the day appointed; on the 24th of June, the whole number were there; and on the 27th of July, we took up the line of March for Mexico; the entire distance about fifteen hundred miles, to be travelled by land.

Our camp near Memphis, so far as could be observed, was free from local causes of disease; the situation was elevated, and both men and horses were furnished with excellent water from a single large spring. The weather, during a greater portion of the time, excessively warm and dry, and the roads and whole encampment disagreeably dusty. For the first three weeks after the arrival of the troops at this place, we had little else, in the way of disease, to contend with but diarrhoea, intermittents, colic, etc., brought on chiefly by exposure and impiudence in diet. The companies from West Tennessee, being acclimated, suffered least; two-thirds of the men from other parts of the State, were attacked with one or the other form of these diseases soon after their arrival. The treatment was simple, and only varied with the cause. If diarrhoea, and the cause imprudence in diet, a dose of castor oil relieved most of them; if it did not, broken doses of calomel, ipecac. and morphia invariably put a stop to it. This was a favorite combination with me in this disease, and throughout the entire march never failed, when the patient could be restrained in his diet. The cases of intermittent fever were cured with equal certainty by administering two doses of quinine, of ten grains each, one given six hours before the chill, and the other two. As colic was often brought on by gorging with indigestible food, emetics were frequently administered, and gave instant relief. If the indications did not call for this remedy, calomel and opium, followed by a brisk purgative, were given; and if, as is often the case in this disease, an operation could not be procured in time by purgatives, then I had recourse to an expedient which with me has never failed, and I have used it in numerous cases of obstruction from various causes: this is forcing large quantities of lukewarm water into the intestines by injection. If the obstruction is caused by impacted feces, the water reaches them, they are moistened and pass off. If it be partial hernia, as I have known in one instance, where a knuckle of the intestine is retained in the internal ring, the gradual and powerful pressure of the water draws the bowel out, straightens it, and thereby removes the obstruction. I have often been astonished at the immense quantity of water that can be forced into the bowels without the slightest injury to the patient, but often with the effect of affording instant relief.

About the 20th of June a most troublesome camp disease broke out. I refer to measles, which, notwithstanding every precaution that could be used, remained among the men for three months; there
were not less than three hundred and fifty cases of the disease, and yet all recovered. The treatment adopted was chiefly expectant. Sometimes the patients took stimulating diaphoretics, and often during the march drank freely of hot whisky toddy, even while the fever was on, without any bad effects that could be perceived; purgatives were decidedly injurious in any form. Diarrhœa, which often occurred as a sequel to this disease, was sometimes obstinate, but yielded to external irritants, mucilaginous drinks, anodynes, etc.

About the first of July, a few cases of continued fever occurred in camp; but they were confined to one company, which was stationed in an elevated part of the encampment, and in which the usual degree of cleanliness was observed. This company was from a region in Middle Tennessee noted for its insalubrity; two of these cases proved fatal, in consequence, I believe, of the dread of the hospital that existed in that company, which deterred the men from calling for medical aid until the disease had made considerable progress. The brain was the organ that suffered most, delirium being a constant attendant. The treatment consisted of cold applications to the head, blistering, alteratives, etc. One fact I observed in the management of this fever, which strikes me as worth recording; that is, that quinine invariably aggravated all the symptoms. If experience should prove this to be always the case, will it not go far to prove that the cause of intermittents and remittents differs from that of continued fever?

During the time we were at Camp Carroll, the companies from East Tennessee suffered most from diarrhœa, colic, and such other diseases as are brought on by exposure and imprudence in diet, their constitutions seeming as yet to resist the causes of fever in any of its forms. It will be remembered that East Tennessee is for the most part a high, broken and healthy section of the State. In the companies from Middle Tennessee there were many cases of remittent fever, at the same time that diarrhœa, colic, etc., were common. The two companies from West Tennessee suffered but little from any other disease except remittent fever.

From the close proximity of the camp to town, and the freedom with which soldiers, when unrestrained, are known to indulge in every kind of dissipation, the number of cases of syphilis and gonorrhœa which I have to report will not seem extravagant, namely: twenty-three of the former, and eighty-four of the latter.

The first stages of syphilis were treated with calomel in combination with sarsaparilla; without waiting for the gums to be touched, this form of mercury was laid aside after a few days, and the cure completed by giving in full doses the proto-iodide of mercury, and sometimes the hydriodate of potassa. The latter was always used when the gums had been previously touched with mercury; dry lint or calomel was applied to the chancres, and iodine ointment to the buboes. The patients generally recovered in a few days.

Gonorrhœa was treated with equal success, by administering two
parts of the comp. extr. buchu and one of balsam copaiba in teaspownful doses three times a day, in the first stage: in the second, that is, after using the above four or five days, injections of a strong solution of nitrate of silver or acetate of lead were employed, and generally affected a cure at once.

On the 20th of July, our encampment was changed to the bank of the Mississippi river opposite Memphis. After this, we had but one or two cases of continued fever, while the intermittents and remittents assumed a much more malignant form.

But before I proceed farther, it may be as well to state that a little upwards of a thousand men, either belonging to or in some way attached to the regiment, came under the surgeon's care; out of which number, on the 4th of October, there had been more than twelve hundred cases reported. Of course, some of the men were several times on the sick list; but the case was never reported unless it was a different disease from the one previously treated; relapses were never reported the second time. This regiment, as I have before mentioned, consisted of volunteers from different sections of the State, of various professions and callings; many were educated gentlemen; many belonged to the respectable class of farmers and mechanics, and not a few were loafers. With all, the habits, customs, diet, etc., of a camp life were different from what they had before known. The sickly season was just approaching when they arrived at Memphis; the country through which they traveled was one of the sickliest in the United States. Is it wonderful, then, that so large a number of cases should have occurred? Is it not astonishing that only five had died up to the 4th of October, when I temporarily left the regiment? It will be admitted that this success was almost if not entirely unprecedented, and I attribute it greatly to the efficacy of a single remedy, quinine. This was our sheet-anchor, and, without it, my opinion is that our regiment, now by far the largest and most efficient in the service, would have been completely disabled.

From the accumulated experience of the profession, it is clear that quinine acts in some manner specifically upon the nervous system, producing, as I have lately seen, when given at improper times and in over doses, complete derangement of that system. May this not throw some light upon the vexed question as to the organ primarily affected by the remote cause of fever? If quinine cures fever, and the action of the article is specifically upon the nervous system, does it not follow that the cause of fever must act primarily upon that system? But I return from this digression to my notes.

I mentioned before that the remittent and intermittent fevers assumed a more malignant form on the bank of the river, but did not state that diarrhoea almost entirely disappeared from the camp, except when induced by drastic purgatives, which was so common an occurrence that we had to guard scrupulously against their use. The symptoms that ushered in intermittent or remittent fever
were very similar, and such as usually occur in that section of country. However threatening the premonitory symptoms might be, it was not often the case that medical aid was called for until the patient found himself shivering with a chill; then he was let alone until the stage of excitement passed off. If at this time the tongue, skin, etc., indicated a very disordered state of the secretory organs, a mercurial in some form, in combination with a gentle purgative, was given during the sweating stage; the kind of purgative to be given was always suggested by the nature of the case, the constitution of the patient, etc. Very often, indeed, they were not used at all, and the cure proved equally effectual. We usually commenced with the quinine eight or ten hours before the chill ought to return; ten grains were given, and repeated four hours afterwards; the third dose was given or not as the case seemed to require.

Ten grains of quinine I regard as a maximum dose, if to be repeated. I however frequently gave as much as thirty grains; but it was always when the case was seen for the first time a few hours before the chill was expected, and it constantly kept it off. I prefer giving the remedy in ten grain doses, for the reason that its effects are always certain and it acts more effectually upon the skin, and not so frequently as an emetic as when given in larger doses. My manner of giving it was simply to mix it with water. To some this is a bitter, nauseous dose, and caused vomiting at once; then it had to be made into pills, but I think the solution much more effectual and rapid. The doses I have mentioned invariably put a stop to the chill, whether simple or malignant; but to guard more certainly against a return, we usually ordered five or ten grains, according to circumstances, every morning for three or four days. If, after the chill was checked, the secretions remained vitiated, an alternative was given at night, and repeated if necessary.

The cases of remittent fever were treated differently, and it is in the treatment of this disease that quinine is most frequently abused. It is very much the custom in the South, at this time, to administer quinine in all the stages of fever and in large doses. My experience justifies me in saying that such a course is not only unnecessary, but altogether unjustifiable. In my opinion, quinine should never be given unless the remissions are very distinct, and never in the hot stage. I usually, in this form of fever, commenced the treatment, after the first exacerbation had passed off, by administering a gentle purgative, in combination with some article that would keep up an action upon the skin without irritating the stomach and bowels. Ipecacuanha generally answered the purpose remarkably well. Most frequently the combination was of calomel and ipecac, given in broken doses, which course, varied as circumstances required, was kept up for two or three days, when the remissions usually became more distinct, and quinine had the effect of arresting the disease. These cases rarely continued on hand longer than four or five days.

There are some other diseases which many southern physicians
regard as having a malarious origin, and treat indiscriminately with quinine; I allude more particularly to dysentery and diarrhoea. Now, I have not found such practice judicious, but, if I mistake not, have seen very injurious consequences result from it. But when these diseases assume, as they sometimes do, a periodical form, then quinine, in combination with morphia, is the remedy. I should never recommend it in these diseases unless they did assume such a form. This combination I have found exceedingly useful in the treatment of other diseases attended with the nervous irritability very common in the fevers in the South. The fevers on the Rio Grande at this time are so constantly attended with disordered stomach and bowels, that the morphia is indicated in almost every case requiring quinine.

As I before observed, our regiment took up the line of march on the 27th of July. We were under the necessity of leaving twenty-five sick men at the hospital in Memphis; most of them, however, were convalescent and followed in a few days. The direction of our march was a little south of west, passing entirely through Arkansas from north-east to south-west, and through the whole of Texas in the same direction. A geological and topographical history of this country would be a valuable and interesting work. My duties in another capacity were too arduous to allow much time for such investigations. From Memphis to Little Rock, the capital of Arkansas, the road passes through a low, flat, marshy country, pregnant with local causes of disease; and our troops suffered more, perhaps, in performing that distance of one hundred and fifty miles than on any other portion of the route. The weather was excessively warm, the roads dusty, and the water disgustingly bad; this was felt most severely in the Mississippi swamp, a distance of forty-five miles. Here, exposure to the sun, bad water and imprudence in diet brought on many cases of severe diarrhoea; the form of fever was principally malignant intermittent. I found it necessary not only to give as much as thirty grains of quinine at a dose, but to assist it with stimulants, external irritants, etc. Congestion was the symptom most to be feared, and there was no time to "prepare for quinine;" it must be given at once, and boldly given, or the patient was lost. It is astonishing how soon the worst cases recovered. Our conveniences for transporting the sick consisted of an ambulance fixed upon springs, and as many common wagons as were required. A great many preferred remaining on horseback, on account of the closeness of the wagons and the extreme heat. Measles on this account gave us much trouble; but notwithstanding all these inconveniences, we arrived at Little Rock in good time and without the loss of a man.

On this route an accidental case of surgery occurred, which, from its novelty in one particular, may be worth mentioning: A soldier, in taking a carbine from among some bridles, accidentally discharged it, the ball taking effect upon his comrade, who was standing so near that his clothes were set on fire. It entered the anterior inferior
part of the axilla, ranged upward, and passed out at the anterior edge of the scapula. Not being near at the time myself, the assistant surgeon, Dr. Washington, examined and dressed the wound. He reported to me that he thought the ball had passed above the axillary artery, fracturing the humerus at the head or neck. I had only time the next day to make a superficial examination of the wound, which I did without taking the bandages off. I discovered that the bone was evidently fractured, but at what point I could not determine, in the situation in which the arm then was. Dr. Washington was left in charge of the case, and reported to me, a short time afterwards, that on a more minute examination, he had discovered that the humerus was fractured, not at the head or neck as he had at first supposed, but three or four inches below, near the insertion of the latissimus dorsi and pectoralis major muscles; the axillary artery had remained uninjured, and could be distinctly felt pulsating when the finger was introduced into the wound. Suppuration was free, and the wound healed about the time that the bone united. In this case, the ball passed below the artery, but what broke the bone so far from the place at which it entered I do not clearly perceive; there was no fall or jar of any kind except that made by the ball itself.

At Little Rock we remained five or six days, recruiting; here the diseases assumed a milder form, intermitents being most common, and on the whole the number of cases was considerably diminished. Our march was now through a high, broken country, to Washington, in Arkansas, a distance of one hundred and twenty miles. The health of the regiment continued to improve until we crossed Red River, at Fulton, and encamped upon the edge of the swamp. Here my notes show a large increase in the number of cases of malignant intermitents and remittents, requiring even a more vigorous treatment than before. Congestive fever, in its worst form, prevailed at this time; remittents were also more obstinate, and required a more liberal use of mercurials. As the sick had to be hauled, these were given invariably at night, and in every case of fever where there was a remission, quinine was given in the morning, and repeated once or twice if necessary, regardless of the effect of the purgative given the night before. The condition of the bowels was attended to after the fever was broken, and quinine would do this whether the bowels were acted upon or not.

It may be worthy of remark, and I noticed it in a hundred instances, that though intermittent or remittent fever often preceded measles, it never accompanied or succeeded it during the march; diarrhoea, on the contrary, almost invariably followed it. The number of cases of fever occurring during the march through Texas was immense; this may be attributed in a great measure to exposure to the rays of an ardent sun during the day, and encamping upon the marshes and swamps of creeks and rivers at night. In the prairies, the heat of the sun was most intense, and was especially oppressive to persons from the North.
About the first of September, many cases of jaundice occurred; this was often though not always preceded by an attack of fever. The complaint was never serious, but excessively annoying to the patient, in consequence of the languor and general feeling of indisposition which it induced. It was almost invariably accompanied by a ravenous appetite. An emetic was given in the onset of the disease; this was followed by a brisk purgative, and then vegetable tonics were relied on to effect the cure. This course I persevered in for some time, but the cases did not recover as rapidly as we like to see them in the army. Another remedy must be sought for, more certain and rapid in its effects. Iodine struck me as coming nearer to fulfilling all the indications than any other I could think of, particularly the proto-iodide of mercury. This was given in the form of pill, in combination with rhubarb and aloes, twice a day, each dose containing two grains of the proto-iodide. My expectations were more than realized; indeed, it acted like a charm, and I had no further trouble with the disease.

I have now in a hurried and rather superficial manner referred to all the diseases we had to contend with in large numbers; of course there were many other isolated cases of rheumatism, dropsy, neuralgia, paralysis, etc., which recovered under the usual treatment. In giving the treatment of the different diseases encountered, I have left out all such remedies as are used merely as auxiliaries, and confined myself to such as were mainly relied on. Indeed, on a march through a wild country like that through which we passed, where both sick and well had to move at the sound of the horn in the morning, there was no time nor opportunity allowed for dealing in those minor remedies, so often used in domestic practice, more with a view of amusing the patient than with a hope of benefitting him.

Three deaths occurred on the road, one from each section of the State. No perceptible difference could be observed in the number or violence of the cases in the different companies after getting fairly into a southern climate, for there cannot now be found three men from any company who have not been under the care of the surgeon.

At Lavacca, a small town on the Matagorda Bay, now used as a depot for one division of the army, the regiment remained stationary eight or ten days; here my own health became so feeble that I obtained permission to go on to Matamorases by water. On the first of November the troops crossed the Rio Grande, and encamped on the bank of the river five miles above town.

Here the diseases have been chiefly of an intermittent form, accompanied in almost every case by gastric and intestinal derangement, and, owing to this, more difficult to treat than heretofore. Quinine alone almost invariably vomits; but rarely ever does so in combination with morphia, particularly if the precaution is used of applying a mustard plaster over the epigastric region at the time it is given. Owing to the frequent changes in the weather, relapses often occur, and the stage of convalescence is always protracted. Mercurials are often indicated, and are used with great advantage.
Abstract of a Letter from Dr. N. S. Jarvis, Surgeon U. S. Army, dated Monterey, Mexico, Oct., 1846, embracing several Surgical Cases, which fell under his Treatment and Observation.—(N. York Journal of Medicine.)

After stating matters of a private nature, Dr. Jarvis continues:—

“On the 19th of September we encamped within four miles of Monterey, in a grove of Peecan trees, called 'Walnut Grove,' where we were abundantly supplied with clear and cold water, from a stream of considerable size, and rapidity, formed by the junction of numerous springs, which took their rise in the surrounding lime-stone rocks. The combination of wood and shade rendered this spot admirably fitted for an encampment. On the following day parties were employed in reconnoitring the enemy, and in observation of the fortified position of the town. Towards evening my Regiment, 3d Infantry, with another, were advanced a mile towards the town, to cover a party of engineers, engaged in the erection of a Mortar Battery, but returned to camp about 9, P. M., having been relieved by another regiment.

On the morning of the 21st the whole division was thrown forward towards the city, with a view, as we supposed at the time, of making a diversion in favor of the 2d Division, under Gen. Worth, which was moving on the western side of the city by the Saltillo road. Few of us supposed, as we silently marched along, occasionally passing through cornfields and by the side of hedges, or whatever could conceal our movements from the enemy in their batteries, that we should so shortly be engaged in a fierce and deadly strife. As soon as, or in fact before, we emerged from under cover, the batteries from either end of the city opened their fire upon us, completely sweeping the plain in every direction, and enfilading the advancing columns of our troops, now rapidly marching towards the suburbs. The engineer officer having reported the practicability of attacking with success the rear of some of their forts, the 1st, 3rd, and 4th Infantry were ordered to advance rapidly by separate roads, and now it was my professional labors commenced; the nearest and only shelter that presented itself to me for the wounded, falling every moment under a most destructive fire, was a quarry pit, four or five feet in depth, and the same in breadth. Several of these were contiguous, and to them I directed the wounded to be carried. By stooping we were protected from the shots, which, however, became every moment thicker, owing to the fact, that our troops had by this time advanced within range of the enemy's fire, and the moment they perceived a party of men bringing the wounded to us, they directed all their guns upon it. I had already performed one amputation, and was preparing for a second, when two or three fugitives rushed into the pit, falling over the wounded that lay there crowded together, saying that a large body of lancers were approaching. So little credit did I attach to their report, which I ascribed rather to their fears than the
actual presence of this dreaded description of troops, that I never raised my eyes to observe them; which circumstance doubtless saved us all. Had I been discovered, all would have been massacred, as in their headlong fury, they would neither have delayed to ascertain our character or profession, nor have paid much respect to our patients. Several soldiers who had sought an adjoining pit with an officer were slain. They were soon after repulsed by a regiment of Ohio and Mississippi Volunteers, marching to reinforce those already in the town, and their retreat was farther quickened by a shower of grape opened upon them by our artillery.

I commenced with a determination of giving you a surgical history of the actions of the 21st, 22nd, and 23rd September, but have unintentionally thus far given a military narrative. This, however, will show, in the incidents above narrated, that the military surgeon is at times somewhat unpleasantly situated, when in the discharge of his professional duties, deprived as he is of the security, and many of the appliances enjoyed by his fellow practitioner in civil life.

The first wounds were received in crossing the plain, and were inflicted by grape and cannon-shot. This was of course before we had approached within reach of their musketry. These wounds were all low: generally at, or just above the ankle, according to distance and direction. Of the first three men brought to me, two had received wounds from twelve pound shots just above the ankle, which had nearly severed the limbs, which were hanging only by a portion of integuments. The other had his heel torn off by a six pound shot. Shortly after, our troops having advanced within reach, and under the fire of the Mexican Infantry, numerous cases of wounds by musket and escopette* balls were brought to me; these latter are one-third larger than our musket-balls, and consequently inflict a more severe and formidable wound. So numerous at this time became the wounded in our pit, and so constant and heavy the fire, directed towards the parties approaching with the wounded, as to compel us to remove our hospital several hundred yards farther in the rear. We had not long been in our new position, when some covered wagons bringing the wounded attracted the attention of the enemy, who immediately re-opened their fire, compelling us a second time to remove beyond the range of their shot.

Among the numerous projectiles, occasioning severe and fatal wounds, were grape, canister, fragments of iron and copper shells, and stones knocked by the balls from the buildings and walls. Their shells were thrown with great accuracy, frequently in the midst of a body of troops, but fortunately killing and wounding but few.

Before speaking of any particular wounds, I will here take occasion to make some remarks respecting the character they assumed, and the peculiar causes acting to prevent a favorable result, so far as

* An escopette is a short carbine, similar to a blunderbuss, and carries a ball one-third larger than our musket.
regarded the healing of all, even the most slight. The first annoyance we experienced, and which no doubt exerted an injurious effect, was one little anticipated at the time. The moment a limb was amputated numerous flies would alight on the stump, and must have deposited their eggs, for when it became necessary to dress the stump, myriads of maggots were found buried in it, which could be expelled with great difficulty; rendering it necessary in some instances to re-open the flap, for their complete extermination. A much more formidable enemy made its appearance in an erysipelasous inflammation of the integuments, covering the stump, which generally set in two or three days after the operation; and notwithstanding all the means made use of to arrest it, most commonly ended in sloughing, and either proved fatal or rendered a second amputation necessary. That some influence existed previously, either external or internal, from causes connected with the state of the atmosphere, or habits of the men, arising from diet or water, was manifest. The slightest wound or scratch became in every case a tedious ulcer, in some instances proving a cause for serious alarm. Apparently the most trifling wounds required an unusual time for healing, and even those that had previously healed would break out again, and present greater difficulty in their cure than in the first instance.

At this period no atmospheric causes apparently existed to produce this unfavorable aspect of things. Nothing could exceed the loveliness of the weather, if I may so express myself, and if the middle of the day were warm, the morning and evening refreshed us by a most delightful temperature and cloudless sky. No rain had fallen, with the exception of one or two showers, for nearly a month, and consequently little moisture existed to produce its well-known morbid influence. Immediately after the capitulation of the city, on the 25th of September, all the wounded of the different divisions entered the town, and suitable buildings were provided for their accommodation. Upwards of two hundred officers and men from the 1st and 3d Divisions, who had been most severely wounded, were conveyed thither on the same day in litters and wagons. The wounded of the Second Division already occupied the city.

Our camp afforded no comfort nor shelter for them beyond a few small tents and a solitary blanket laid on the ground: and many were destitute of even this apology for a bed, having lost them on our march. Many had no other clothing than that in wear, which was not only torn and soiled in climbing over the hedges, walls, &c., during the battle, but was stiff and saturated with blood from their wounds. A few days after their reception into the hospitals, tertian intermittent fever made its appearance, attacking many of the wounded, and in a majority, retarding or completely arresting convalescence. On many of those severely wounded it exerted a decidedly pernicious influence, and no doubt contributed, in some cases, to a fatal termination. It not only attacked the wounded in the hospitals, but prevailed extensively in camp and among the popu-
lation of the town and neighboring country. I cannot say to what extent, this may be attributed to the putrid exhalations arising from the numerous bodies of men and horses slain in the different combats, and which had been slightly covered with earth, and emitted a most sickening and offensive effluvia. This, doubtless, contributed largely towards infecting or destroying the purity of the air, and establishing a poisonous miasm.

With these preliminary remarks, I will now give you an outline of a few of the most interesting cases resulting from gun-shot wounds, received during the three days' attack on Monterey, and which came under my observation at the time. With a view to some order and classification, I will describe first those of the head and face.

Case 1. Corporal Sherridan, 1st Infantry, was struck by a musket-ball on the anterior and central portion of the os frontis, destroying it for a distance of two inches. Considerable portions of the brain issued from the wound, and notwithstanding the severity of the case, the patient appeared to suffer little or none until the third or fourth day, when, coma supervening, followed by delirium, he died.

Numerous wounds of the scalp, accompanied in three cases by destruction of the periosteum and outer table of the skull, came under my observation, but presented nothing new or different in their character and progress from ordinary cases.

Case 2. Private Redville, of the 3d Infantry, in passing a stone wall, received a wound in the right eye, as he supposed, from a fragment of stone broken from the wall by a cannon-ball, and which struck him with force sufficient to knock him down. I saw him two or three hours after the injury was received, and found his eyelids so much swollen, as to render it very difficult to ascertain the condition of the eye itself. In placing my finger over the inner canthus, I felt a sharp point, apparently of some hard substance. This I immediately extracted with a pair of common forceps, and found it to be a fragment of grape, three-quarters of an inch in length, and one half an inch in width at the centre, of an oblong or elliptical shape. It was of copper, or an alloy of that metal, and had evidently been broken off by striking the wall. On examining the eyeball I found it uninjured, the fragment having passed between it and the inner canthus, and penetrated to the posterior wall of the orbit, destroying the lacrimal sac, the os unguis, and wing of the sphenoid bone. Considerable inflammation and suppuration followed, and although at the present time the wound has entirely healed, the pupil remains permanently dilated, and vision destroyed. This seems to indicate an injury of the optic nerve, which the missile from its length must have reached and destroyed.

Case 3. Private Jones, of the same regiment, was wounded about the same time by a musket-ball striking him near the angle of the inferior maxilla, on the right side, fracturing the bone, passing directly through the tongue and the corresponding portion of the bone on the opposite side. The tongue was completely severed at its base,
hanging only by a few muscular fibres. The patient was almost moribund when brought in, and died shortly from excessive haemorrhage.

Case 4. Major L., commanding the 3d Infantry, received a wound from an escopette-ball directly in the centre of the upper lip. The ball passed obliquely backwards and to the left, tearing away the bony palate, and completely destroying the upper maxilla and malar bone of that side, and fracturing the condyle of the inferior maxilla, passed out behind the ear near the mastoid process. The velum pendulum palati was completely separated from its superior connections and rested on the tongue. The whole of the alveolar process, together with the teeth on the left side, was carried away. To enable him to articulate, as well as swallow, I contrived to fasten up the pendulous palate by a stitch, and afterwards by a ligature around the remaining incisor tooth, with a view of afterwards endeavoring to effect a union with the parts from which it was torn. I subsequently secured it more completely by a strong ligature passed through it in two places, the ends being brought together, and by means of a probe carried up through the nostril and fastened with adhesive plaster to the forehead. Intense inflammation followed, involving the whole side of the head, and during several days pieces of bone were being constantly separated and discharged. The previous ill health of this officer rendered his case the more unpromising. He had suffered for two or three years from severe and repeated attacks of Asthma, which had so enfeebled his general health that the least exposure or fatigue was attended by intense suffering and danger of death. Up to the present time nature has made but little recuperative effort, in consequence perhaps of an attack of intermittent fever, which, in many cases, thus acts in retarding the healing process.*

Case 5.—A private of Col. Hays' mounted Texan Rangers was wounded on the 21st in an attack made on the eastern side of the city. A copper grape-shot striking him at the same point as in the preceding case, passed obliquely backwards and downwards wounding the tongue and fracturing the lower jaw on the left side near its angle; then coursing along the neck, beneath the integuments and muscles, lodged near the insertion of the left sterno-cleido mastoid muscle into the clavicle, where it was cut out. Fragments of bone came away, and considerable inflammation, with difficulty of swallowing, followed, but the wound progressed favorably, and notwithstanding the size of the shot and destruction of parts, is at the present time nearly healed. His head is considerably drawn down, and a rigidity of the jaw, with inability to speak, remain.

Case 6.—The sergeant-major of the 5th infantry was wounded on the 22d, the ball entering near the same point as in the two former cases, but passing obliquely backwards and upwards above the roof

* This officer died a few days afterwards.—M.
of the mouth, and lodging near the articulation of the jaw on the right side, between the coronoid process and masseter muscle. It was subsequently extracted, and the wound at the present moment has entirely closed, leaving, however, as in the former case, more or less immobility of the jaw.

Case 7.—Private Lewis, of the 1st Mississippi Regiment, was wounded on the 22d September. The ball struck him at the lower point of the lobe of the ear, and posterior edge of the ramus of the inferior maxillary bone on the left side. After fracturing this bone midway between its angle and articulation, the ball passed transversely inwards, tearing away the back part of the palate, and came out through the right malar bone. This case progressed favorably, and the wound at the present time is nearly healed. Some deformity, arising from ossific matter thrown out in the union of the jaw, and a certain degree of immobility remain. The close vicinity of the carotid artery to the point of entrance of the ball, and its entire escape from injury, renders this case doubly interesting.

The next order of wounds are those of the neck, thorax and abdomen, many of which, of an interesting character, presented themselves during the engagement, but the limits of my letter warn me I must reserve them for a future occasion. I will, however, describe a few cases of wounds of the pelvis and bladder, presenting some singularity in the direction and force of the balls, and interesting in the nature and result of the injuries they inflicted.

Case 8.—Lieut. G——, 4th Infantry, was wounded in three places about the same time, on the morning of the 21st September. The most severe wound, however, was one, in which the ball, striking the upper and anterior portion of the thigh, entered the pelvis, wound the fundus of the bladder, and passed out at the sacro-ischiatic notch. The femoral vessels, in the course of the ball, escaped being wounded in a most remarkable manner. The urine passing freely through the wound necessarily produced considerable infiltration and inflammation of the cellular tissue of the thigh. By changing his position so as to lie on the left side, and introducing a catheter, which was constantly maintained in the bladder, no more urine escaped through the wound, and the inflammation rapidly subsided. No unfavorable symptoms followed. The usual separation of the parts destroyed in the course of the ball took place, succeeded by a healthy suppuration, at the usual period of gun-shot wounds, and a hope was entertained by his friends of his speedy recovery. This hope was still more strengthened when, on the tenth day after the wound was received, the catheter, by some accident, became obstructed, and remained so some time before it was discovered, and on its withdrawal and re-insertion, upwards of twelve ounces of urine were drawn off, showing conclusively that the wound in the bladder must have entirely closed, to enable it thus to retain so large a quantity of fluid. The expression of his countenance, and cheerfulness of manner, would hardly have indicated any great pain or suffering. It was only on
the twentieth day that any alarm was excited in the minds of his friends, by his suddenly being attacked by rigors, followed by fever and profuse night-sweats, which, notwithstanding the means made use of, rapidly reduced his strength, and he expired on the night of the 13th October, and on the twenty-second day after being wounded. A post-mortem examination of this case would have proved highly interesting, showing how far wounds of this description, affecting internal hollow organs, may heal, and the manner in which a restoration of the parts destroyed takes place; but the pressure of professional duties at the time has prevented so desirable a finish to the history of the case.

Case 9.—Private Capers of the Baltimore Battalion, was wounded early on the 21st September. The ball entered directly above the os pubis, and taking a direction downwards and obliquely backwards, wounding in its course the bladder, passed out of the pelvis between the sacrum and tuberosity of the ischium on the left side. It was found lodged between the integuments and glutei muscles, from which point I extracted it. Urine passed freely at the time, from the wound over the pubis, but ceased shortly after the introduction of the catheter, which was constantly maintained in the bladder, as in the former case. Very little tension or tenderness of the abdomen followed, nor any symptoms of peritoneal inflammation, showing that the ball had entered the bladder without wounding the peritoneum.* Neither were there any signs of extravasation or infiltration of urine, and but little or no febrile action. About the tenth day after its reception the wound over the pubis, which had by this time entirely closed, broke out again, discharging urine, this was shortly afterwards followed by the opening of that in the nates, made for the exit of the ball. Through the latter, both faeces and urine, passed, showing that sloughing had taken place, and a communication formed between the rectum and bladder. The contents of both of these were occasionally discharged from the anterior wound. The patient lingered in this miserable situation until the sixteenth day, when he expired, worn out by pain and suffering.

Case 10.—Private Young, of the 1st Tennessee Regiment, was wounded nearly at the same time and place as the above. The ball entered just above the os pubis, and about one inch to the right of the symphysis. It ranged diagonally across the pelvis, inclining downwards, wounding both the bladder and rectum, and passing out through the left sacro-ischiatic foramen, just above the os coccygis; urine and faeces passed out from both orifices of the wound. When brought in, it was supposed, from his general appearance, that he would survive his wound for a very short time. A catheter was introduced immediately, which was retained with considerable difficulty. The wounds were dressed in the usual manner; urine and faeces

* The ball entered the bladder below the point where the peritoneum is reflected from the posterior wall of the abdomen upon the fundus of the bladder. M.
continued, however, to pass out of the wounds, attended by considerable irritation and febrile action. In this condition he lingered twenty-three days, when he expired, worn out, as in the case of Capers, by long-continued suffering.

Having given a brief description, of a few of the gun-shot wounds in the different assaults on Monterey, I will conclude my communication, with a statement of the number and results of the larger amputations, performed on those occasions. The total number in the three divisions of the army was twenty-eight—viz: ten in the first division, four in the second, and fourteen in the third or volunteer division. Twenty were performed on the field, or on the following morning, in the camp; the remaining eight, at subsequent periods, varying from five to twenty days. Twelve of the number, including two in those taken prisoners and operated upon by the Mexican surgeons, proved fatal, and the remaining sixteen, have nearly or quite recovered. This average of mortality was not confined to our wounded. I was told by Dr. Hidalgo, surgeon in charge of the Mexican military hospital, that of thirteen amputations performed there, five had proved unsuccessful, and one case, that had recently been operated upon, appeared to me to be in a critical condition, but whether the patient died or recovered I have not learned.* In addition to unfavorable causes, not enumerated among those I have heretofore noticed, and from which the Mexicans were happily exempt, was the repeated removals to which our wounded were subjected. In carrying them from the field to the camp, a distance of three or four miles, they suffered greatly; and the subsequent removal to town, still farther increased the pain and danger, and in one or two cases, evidently, was productive of a fatal termination.

With a few remarks, on the appearance and condition presented by the two cases of amputation of the thigh, performed by the Mexican surgeons, in their hospital alluded to above, I will close. One of these had been operated upon on the same day with the injury, and the other some four or five days after. Neither stump on examination, after the removal of the dressings, presented any unusual appearance; on the contrary, the flaps had been neatly adjusted and brought together, and kept so by a number of interrupted sutures and adhesive straps, encircling it in every direction, and adhesion had apparently taken place, in one case along the line of divided integuments. No one judging by the external appearance of the wound, if we except a degree of paleness of the integuments of the flap and some factor, would have suspected the condition and extent of disease within. On dressing the first case and removing the lint and adhesive straps, which had become somewhat offensive, the edges of the flap receded or partially separated, so as to reveal a large cavity or excavation, the whole surface of which was dark and ill-conditioned, and from the centre projected the end of the bone. There were no signs or appearances of suppuration or granulation having ever

* This case subsequently proved fatal.
taken place in the divided muscles; on the contrary, they appeared absorbed or attenuated by previous discharge, of which none existed at this time. The patient rapidly sunk, and died on the fourth day after his admission into the Division hospital.

Private Alexander, of the Baltimore Battalion, the other case, was brought to our hospital some two days after the one above. His stump presented nearly the same appearance as the first, with no indications whatever of the diseased condition within. Eleven days after his admission the flap gave way, disclosing the same appearance as in the former case, with most intolerable factor. Gangrene rapidly extended, and he died on the twelfth day after his admission, and the thirteenth from the time of the operation.

Among other consequences arising from gun-shot wounds, in my hospital, were two cases of traumatic tetanus, both of which proved fatal. The first case manifested itself seven days after the injury, which was a wound of the knee-joint, with a fracture of the patella by a grape-shot. The man was brought from the camp of the 4th Infantry to the Division hospital, and was attacked a few hours afterwards, by opisthotonos, followed by trismus and severe spasmodic action of all the muscles of the body. He died the same night. The other case originated from a gun-shot wound of the left thigh, in which the ball passed down to the femur, six inches below the trochanters, and taking a direction upwards on the outer side of that bone, denuded it entirely of the periosteum for the distance of three or four inches, and was cut out from beneath the gluteus maximus muscle of the same side. Here the first symptoms manifesting an attack of this dreadful disease was violent spasmodic action of the muscles of the injured limb, which soon extended to those of the whole body, followed by trismus and a certain degree of opisthotonos. He expired on the fifteenth day after receiving his wound, and nine days after being received from the Mexican hospital; having been taken prisoner and carried thither on the 21st September, the day on which he was wounded.

Remarks on the Medical Topography of Texas, and on the Diseases of the Army of Invasion. By George Johnson, M. D., late Surgeon in the United States Army.—(St. Louis Medical and Surgical Journal.)

The Brazos Santiago Island, Texas, has become a place of much importance since the present war with Mexico commenced. From May last to the present time, all troops, destined for the "army of occupation and invasion," have been landed at the Brazos, and on account of the difficulties of transportation at the commencement of the war, many of the regiments remained encamped upon the island for several weeks. During the last summer, most of the volunteer
regiments have been stationed along the banks of the Rio Grande, between Matamoros and the mouth of the river. Much has been said in the newspapers, and elsewhere, on the unhealthfulness of this region, but I have not seen the true causes assigned for the great mortality which has occurred amongst our troops on the Rio Grande; I will, therefore, at your request, give you a brief sketch of the medical topography of this region, together with some of the causes which have led to this mortality. Hereafter I hope to see this subject discussed by the medical officers of the army, many of whom have had far better opportunities, than fell to my lot for obtaining correct information on this head, particularly those accomplished surgeons, Drs. Wood and Wells, at Point Isabel, and Dr. Wright and his assistants, at the general hospital at Matamoros.

The Brazos Island, it might be inferred from the many statements that have been made, is particularly unhealthy, from its location. This, I think, cannot be the case. Though a dreary and uninteresting sand-bar, I believe it to be as healthful as Galveston, or any other spot along the Gulf coast. This island is about four miles in length, and one and a half in breadth. It would be almost level with the Gulf, but for the sand hills which line its southern extremity for half a mile. There are some two or three ponds on the island, called on the maps of the country, fresh water ponds, though I found them quite salty on trial. These ponds are situated about a mile and a half from the sand hills, (the place of encampment of the troops,) and to the north. The sea breeze blows almost continually from the south-west, so that no deleterious effects can arise from them. This breeze usually commences about 9 A. M., and continues throughout the night, making sleep delightful and refreshing. By it the sun's heat is rendered less oppressive, and there was not a day so warm, during our stay upon the island, which was during the month of June, as to prevent the men of our regiment from perambulating it from end to end, on fishing and hunting excursions. Here, too, the men enjoyed the pleasure and benefit of bathing. I have understood that the Mexicans considered the Brazos healthy, prior to the arrival of our troops, and I learned from an American woman, a native of North Carolina, who has lived upon the Island for several years, that her family, consisting of six children, had enjoyed excellent health since her residence there. Yet she had occupied, during the whole time, a miserable little shed, only partially covered with ox-hides.

The Mexicans who were taken prisoners at Palo Alto and Resaca de la Palma, were employed in the Quartermaster's department, at the Brazos, and though these men were exposed, day after day, to the heat of the sun, in their labors about the shipping, yet I never knew a case of sickness to occur amongst them. The other employees of the Quartermaster's department, such as teamsters, carpenters, etc., also retained their health, whilst the troops at the same period, were suffering with diarrhoeas and dysenteries. I accounted for this circumstance, thus: these teamsters were making daily trips
to the mouth of the Rio Grande, (nine miles,) and they kept their messes well supplied with the excellent water of that river. Besides, they had learned to cook their food properly, and they slept in the dry and comfortable Government storehouses, whilst the troops were lying under tents, upon the wet sand, eating food that was only partially cooked, and drinking the brackish water from the wells that it was almost impossible to retain upon the stomach.

It is known to all military men, and to the profession, that dysenteries and diarrhoeas are camp diseases, and are common to every location where troops are encamped for a few weeks. Our regiment was encamped for about a week at Algiers, opposite New Orleans, and it was very rainy weather during the time; in consequence, dysenteric affections became numerous. At the present time, the troops stationed at Santa Fe are suffering severely with these diseases, and it will not be denied that Santa Fe is a healthy town.

The water used by the troops at the Brazos, is obtained by digging small wells in the sand, usually to the depth of two feet. The water obtained from a well recently made was not very palatable, being the rain water contained in the upper surface of the sand, but in a short time the salt water from beneath would be mixed with it, thus rendering the well useless, so that new wells were constantly being made, and as the space occupied by the troops was only about half a mile in extent, and one hundred and fifty yards wide, (in rainy and stormy weather all the rest of the Island being covered with water,) and as this sand hill ridge has been occupied by troops since the 20th of May last, even as many as three regiments have been stationed here at one time, it can readily be understood how the water of this ridge is affected.

The troops that have, from time to time, sojourned at the Brazos, have been for the most part volunteers, and they have had much more to learn than the drill and discipline. They have been compelled to take a few lessons in the culinary art—particularly so far as related to the cooking of pork and beans—a knowledge of which was not obtained until the pains of colic had been experienced more than once. It would be fair to say that the beans of every volunteer regiment are not half cooked, for, at least, the first month of service. Besides, the young soldier is apt to indulge in every excess. He will lie down on the wet ground without his blanket. The old soldier is more prudent—he may drink a little too much whiskey, (if he can get it,) but he will not expose himself unnecessarily to the sun's heat at mid-day, in fishing or hunting. Neither will he eat the coarse and unwholesome food that a recruit will swallow with avidity. The old soldiers of our regiment were the only men who would not indulge in eating red fish, oysters and crabs, whilst on the Island. They were influenced, in part, by the example of the Mexicans, who eschew these luxuries during the summer months.

The country between Matamoras and the mouth of the Rio Grande, is low, with lakes every few miles, between which is interspersed
the chapparei and prairie—the only elevation being the ridge of Burita, upon which the village is situated, and one nearly parallel with it on the opposite side of the river. These ridges, commencing at Burita, extend up the river about a mile. These elevations have been occupied by troops during the last summer, and I can speak for those encamped upon the ridge of Burita, as having enjoyed a good share of health. There was a marked improvement in the health of the St. Louis Legion, after they encamped here. Red fish, oysters and crabs, could not now be obtained. Good water was within reach, and the beans were boiling in the camp kettles at an earlier hour than formerly. Here, too, was felt the delightful and invigorating sea-breeze, but sleep was not so sweet as at the Brazos. Centipedes, (some of them six inches in length,) tarantulas, and other venomous and creeping things, would travel over a man's nose, occasionally, and wake him up before reveille.

Immediately south of Burita, there is a fresh water lake of considerable size, and about half a mile on the opposite side of the ridge there is a salt lake. Fresh and salt lakes may be seen in close contiguity in this vicinity.

The Mexicans in Matamoras, and those who live at the ranchos in the neighborhood are as healthy a looking people as I ever saw. I visited, during the months of July and August last, many ranchos, where I saw children, and I do not remember to have seen one child that had an unhealthy appearance. In many regions of this (Mississippi) valley, during the same months, it would not be surprising to find half the members of every family laboring under remittent and intermittent fevers. The only sick Mexican I saw whilst in the country, (except the wounded in the hospital at Matamoras,) was a woman, with intermittent fever, at Brazos Island. I was afterwards informed by an old Frenchman, who had lived for many years on a rancho near Matamoras, that the fever and ague was the only disease that prevailed in the neighborhood, but that the "chills" were not as severe as those he used to have in Louisiana—here the patient got well in a few days, without, perhaps being obliged to keep the bed.

I have remarked that the Mexicans have, universally, good teeth—an indication, certainly, of good health, and I venture the assertion, that there are as many old people, according to the population, as can be found in any part of the United States. I will further state, that in Matamoras, I became acquainted with several American merchants who had resided in that city for several years. They informed me that the country was healthy—that they had enjoyed better health in Mexico than in the United States. I therefore believe that the great mortality amongst our troops upon the Rio Grande, during the last summer, was owing to the imprudence of the men—the bad cooking—to a neglect of proper police, in most of the volunteer regiments, and to the necessity which compelled the soldier to lie upon the wet ground during a rainy season.

In order to show the number of diarrhoea cases, in comparison with
all other diseases, I will here give an extract from my monthly report of “sick and wounded” for June. The regiment during that month, was stationed at the Brazos Island.

<table>
<thead>
<tr>
<th>NAME OF DISEASE</th>
<th>REMAINING</th>
<th>MEAN STRENGTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diarrhea</td>
<td>170</td>
<td>93.6</td>
</tr>
<tr>
<td>Dysentera</td>
<td>18</td>
<td>77</td>
</tr>
<tr>
<td>Remittent Fever</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Catarrh</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>Rheumatism</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Phthisis</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Asthma</td>
<td>1</td>
<td>631</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>3</td>
<td>601</td>
</tr>
<tr>
<td>Syphilis</td>
<td>3</td>
<td>601</td>
</tr>
<tr>
<td>Colics</td>
<td>8</td>
<td>601</td>
</tr>
<tr>
<td>Wounds</td>
<td>426</td>
<td>601</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>601</td>
</tr>
</tbody>
</table>

Most of these cases of diarrhoea were preceded by colic, and could be traced to some imprudence in eating. The most successful mode of treatment I found, was to empty the bowels with castor oil, particularly when there was tenderness or pain over the region of the abdomen, and then to administer large doses of opium, 3 or 4 grains, at intervals of four hours, until the bowels were constipated, and, after waiting forty-eight hours to give a dose of castor oil and laudanum. This was the only plan of treatment that was curative. Hy. cum. cræta., dovers powder, with calomel, etc., were given without success at first. Though the cases of diarrhoea were so numerous, yet we did not lose a man out of our regiment with that disease.

Most of the cases of remittent and intermittent fevers supervened upon diarrhoea. The remittent fevers were of a low form and very obstinate in their character. What retarded recovery, especially in these cases, was a despondent state into which almost every patient sank. After a man had suffered with fever for a week, he either made up his mind to die, or became so dejected that it was almost impossible to persuade him that he would recover, or to rouse his feelings in any way. I saw a few cases of pure nostalgia, and I believe there were many such, during the first six months of service, amongst the young men of the army. The marasmus, after remittent fever, was striking, and convalescence remarkably slow. These patients had the same cadaverous appearance and haggard expression of countenance as is common to children who are laboring under tabes mesenterica. There was also that loose and wrinkled condition of the skin of the abdomen which is common in such cases. Diffusible stimulants were very freely given in these cases, and with the most happy effects.

Two cases of wounds came under my notice that are worth mentioning, on account of the result. The first occurred in the Fifth Louisiana Regiment, (Col. Peyton's.) whilst stationed at Burita. Two men, previously good friends, had been drinking together, when an altercation ensued, and one of them drew a large Bowie knife and
plunged it into the breast of the other. I reached the wounded man at the same moment with the surgeon of his regiment. On examination, we found a piece of the lung, two and a half or three inches in length, protruding from the wound, which was about an inch below the left nipple—the knife passing between the ribs, downwards and outwards. The wound was at least three inches in length. After consultation, we concluded to introduce the wounded portion of lung within the thorax, and to close the external wound with the interrupted suture. The man was kept upon the most strict antiphlogistic treatment, and some twelve or fifteen days after, when I last saw him, there was every reason to believe that he would entirely recover. The knife with which this wound was given was two inches wide, and it must have penetrated the lung, four inches. On reflection I am not convinced that our practice in this case was the best that could have been adopted. The wounded portion of lung had only an attachment of three-fourths of an inch, and would it not have been better surgery to have clipped it off than to have replaced it within the cavity of the chest?

The other was a case of gun-shot wound, which occurred accidentally. A man was shot in the left axilla, with a musket ball; the man who fired the gun being immediately opposite, and about one hundred and twenty yards distant. Being absent from camp I did not see the wounded man until the evening of the second day after the accident. On examination I could find no signs of the ball. The man was laboring under distressing dyspnea. I learned that he had expectorated blood freely, when first shot, but now his cough was suppressed and he could not expectorate at all. The left cavity of the chest seemed to be half full of blood, and on raising the man and turning him on the left side, at least half a pint of blood escaped through the wound. The following day he was bled twice, and the treatment was strictly antiphlogistic. About a week after, the track of the ball was plainly to be seen. After passing through the chest it made its exit half way; and just below the spine of the scapula; thence glancing inwards and downwards, lodged near the spinous process of the twelfth dorsal vertebra, where I extracted it. Beattie, the man whose wound I have just been describing, lives in this city. Prior to the accident he was a robust and healthy man, but he has now become thin and wan, and is frequently troubled with a cough.

From Professor William B. Herrick, M. D., of the Rush Medical College at Chicago.

In Camp, near Mon Clova, Mexico,}

November 5, 1846.

I am now writing in the vicinity of a Mexican town, containing about 5000 inhabitants, situated between, and nearly surrounded by, mountains.
The distance from San Antonio, Texas (the point where the column under General Wool was organized), is about 400 miles. We started from San Antonio the second day of October, and arrived here the 2d of November, thus making a march of thirty days without stopping.

This marching, day after day, so far into the interior of Mexico without meeting with any opposition, and with no prospect of a fight, causes a great deal of dissatisfaction, and is the subject of constant complaint with our Illinois Volunteers.

When on the march, we start in the morning by sunrise, go from 12 to 15 miles without halting, excepting for a short time now and then, and encamp for the rest of the day and following night, generally about 11 o'clock, A. M. As I remarked in a former letter, we pass through all the towns in our way with drums beating and colors flying. In the towns of most importance we take formal possession, and plant the American Flag in the most public and conspicuous position.

A few miles from each town we have, in every instance so far, been met by the Alcalde, or ruler, with the principal men of the place, as a deputation from the citizens; and it is by means of such deputations that the people throughout this section of country, have unanimously, as I believe, expressed their determination to offer no opposition to our progress. In truth, it seems to be their wish, not only to remain neutral in the contest between the United States and their central government, but many of them openly express a desire to become separated from it, and a wish to form a republic of their own, or to come under the protection of that of the United States.

As an evidence of their oppressed condition, and to show from whence this feeling originates, it may be stated that, according to their representation, the Mexican army, in marching through their country, would live by robbing and plundering the inhabitants. The officers of ours, on the other hand, treat them as friends when they are friendly, and pay them fair prices for the means of subsistence.

With regard to the question, will it be good or bad policy to admit this portion of Mexico into the Union? intelligent men will of course differ in opinion. For my own part, I do not believe the Mexicans, as a mass, are, as yet, sufficiently far advanced in civilization and intelligence to admit of their establishing and sustaining a truly republican form of government; and therefore it would be not only bad policy, but dangerous, to endow them, at once, with the rights and privileges of citizens of the United States.

As examples of their barbarous customs, and tyrannical laws, the following may serve as specimens.

In many parts of the country matrimonial engagements are temporary merely: it being a common custom, as I am informed, for parties to agree to live together as man and wife for a few months only, at the end of which time either is at liberty to dissolve the compact. As an excuse for this demoralizing custom, they say that the
Indians have, in many parts of the country, destroyed so many of the men, that there are to every male inhabitant five or six females, and that unless such an indulgence be permitted, the population of their towns will rapidly diminish, and eventually become entirely extinct. Whether this be a sufficient reason or not for such an absurd and ridiculous custom, our readers can, for themselves, determine.

One example of their oppressive laws, and we are done for this time with Mexican institutions, and the character of the people.

In marching through this part of Mexico, we find the inhabitants, not scattered over the country as in the United States, but collected together, in towns from 20 to 50 miles apart, in the rich valleys between the mountains. We frequently meet with a collection of rude buildings surrounded by a wall, and inhabited by numerous slaves who, like the herds of cattle, and many square leagues of land in the vicinity, are owned by a single tyrant. An establishment of this kind is called by the Mexicans, a hacienda.

The slaves thus condemned to servitude and a life of bondage are not, like ours of the United States, marked by nature as a different race of beings from their masters, but in many cases, the Mexican slave is as well formed, physically, and is as intelligent as the tyrant who owns and governs him.

This being the case, the question naturally arises, why is it that people of the same race, not differing materially in natural endowments, are a few of them masters and the rest slaves?

This state of society results from a most tyrannical law, which provides that whenever one person becomes indebted to another, the debtor, unless he is able to make immediate payment, becomes at once the slave of the creditor, and is obliged to labor for him at a rate not exceeding 3 or 4 dollars per month, till the demand is cancelled. The amount earned, in this way, by the debtor, is often less than the sum required for his subsistence, consequently he is obliged to purchase on credit still more of his master, and thus to perpetuate a life of bondage.

The worst feature in this system of slavery for debts is, doubtless, that which provides for the perpetuation of this life of bondage; for it is not the debtor alone that is bound thus to give up his liberty, but his children inherit his debts, and with them loose the rights of free men.

Having thus given a few hints concerning the customs and laws of the Mexicans, we will now proceed to the consideration of a subject which more immediately interests the people of Illinois, especially the medical men of our State.

Since joining the army, I have, for the most part of the time, been the only medical officer attached to the 1st regiment of Illinois Volunteers, and can of course speak with entire confidence, with regard to the diseases which have prevailed among the volunteers of this regiment.

On entering upon the duties of my office at Camp Crocket, near San Antonio, Texas, I found from 60 to 70 on the sick report. Of
the cases thus reported, a majority were miasmatic fevers of a mild grade, which yielded readily to gentle laxatives and quinine, in doses of from 10 to 15 grains in the course of 24 hours.

This kind of treatment soon reduced the number of sick from 75 to 40, in a command of about 800 men. My experience, so far, in the army, with this class of diseases, has fully confirmed my belief in the utility of administering large doses of this most efficient remedy in miasmatic diseases. I have given it in all stages of these fevers, with uniform success, and without, at any time, producing unfavorable results. Diarrhoea is another disease very prevalent in the army; but, in most cases, it is of a mild form and yields readily to some mild mercurial, such as blue pill followed by, or combined with, opium and camphor. There are a few cases of a chronic form however, that do not yield so readily, but continue obstinately to debilitate the patients and produce emaciation. Many of these, I have no doubt, are dependent upon an ulcerated condition of the mucous membrane, whilst others perhaps result from torpid or diseased livers.

But of all the diseases to which the volunteers have been subject, those of the lungs consequent upon measles, have been the most destructive to life. From what I could learn of the diseases, previous to my joining my regiment, nine-tenths of those which proved fatal were of the lungs, and in all the cases, the patients had had measles whilst on the march, or in camp, in cold tents and sleeping upon the ground. To those acquainted with the progress of this cutaneous disease, and its tendency to produce lung affections under any circumstances, it will not appear strange that it was the cause of fatal results in so many cases, nor will they be surprised to learn, that all kinds of treatment under the circumstances proved of little or no avail.

We are now on our march through the high lands of Mexico, where there are, probably, as few causes of disease, as in any section of the world. It is to be expected, therefore, that unless we get into a brush with the Mexicans, and as a consequence, have a few surgical cases, we shall have but little of professional interest to communicate. Still, we shall not let any opportunity pass, of giving to our readers interesting intelligence, whether it be of a professional or general nature.

To those who are hypochondriacal or who can enjoy a hearty laugh, we recommend the following professional witticism:—

A New Plan of Medical Reform.

To the Editor of the Boston Medical and Surgical Journal:

My Dear Sir,—The causes that contribute to the origin and sustenance of empiricism, are subjects of interesting investigation at the present time. I think it a matter of regret, that many influential
persons, fired by an ill-judged scientific zeal, have endeavored, by sober argumentation and rules of logic, to demolish the prevailing systems of quackery. All past experience proves, very conclusively, that to convince a man's judgment when his prejudices are enlisted on the opposite side, is a hopeless undertaking. Who ever heard of a single convert being made by a religious controversy? The antagonists themselves commence their set-to in all the over-boiling exuberance of christian charity—like a couple of friends sparring. One finally gives the other a dab which sets his nose to bleeding; he retaliates, and their light sparring becomes a serious matter of fist and scull.

Our friends of the schools militant commence their attack upon the quacks, by the declaration of sundry sound and indubitable aphorisms—such as "truths are stubborn things," &c. To this I reply, "and so are asses;" there is nothing more difficult than to drive one of these long-eared gentry one way, when he pertinaciously sets his mind upon travelling another. Send a country lad to drive a pig: does he endeavor by compulsion to get the contumacious brute to walk off in the desired direction? Not he; he knows by experience that he would only get his labor for his pains—the pig, like Falstaff, will "give no man a reason on compulsion." The only way to succeed easily is to make the spirit of insubordination subservi- e his purposes, and he catches the animal by the tail to pull him in the opposite direction. Any other plan, he will tell you is all gammon.

The wrong plan has been adopted for the opposition of homoeopathy. Denunciations have been forged, and hurled with thundering sound, to no effect, and the credulity which enshrouts men's faculties, leaves them blind and willing victims to the doctrine of infinitesimal doses. The system has been handled with rough ceremony, and the monstrous faith in less-than-nothing doses assailed with the fury and indignation so easily excited by a threatened invasion of pecuniary interest; but the gaping crowd still swallow the little powders, and Herr Homoeopath laughs in his sleeve as he pockets the fat fees so easily fished from the pockets of credulous hypochondriacs and hysterical women.

You are wrong, gentlemen! Cease your opposition; admit the truth of Hahnemann's nonsense; nay, outstrip him in fertility of invention and deception. If a homoeopath tells you that a globule of sugar, moistened with the 30th dilution of a given remedy, and applied to the nostrils of a patient in extremis, will relieve him, reply to him, and shout to the world that we have a remedy, so exquisitely powerful in its influence upon the animal machine, and only known to allopathic physicians, that the same globule moistened with the 300 dilution (!!!) and applied to the nether end of a dead man, will bring him to life! You must learn the game of brag, and always "go better." Try your d—st (excuse Kentucky vernacular) to persuade people that there is really nothing strange in homoeopathy, compared with some half-hatched system with which you are about
to astound the world, catch the pig by the tail, and two to one the "Dutch doctors" will soon be found upon some other hobby, denouncing their quandam favorite as the most insignificant, irrational, and transparent hoax that was ever devised and attempted.

So with hydropathy. If Priessnitz swears that he cures his patients by pouring cold water by the gallon down their throats, turn up your noses at him, and tell the world that you are much more successful by squirting buckets full of hot water up the back way.

He assails the enemy in front, you behind—he carries the citadel by storm, you by surprise; and I appeal to all authority to decide which manoeuvre is the safest and best. If he publishes tables of cases that show a success amounting to 75 per cent., you publish larger tables, and claim 95 per cent! Admitting that you do not adhere to veracity, and that you are charged with it; you may be thankful that it is so, raise the cry of persecution, and your fortunes are sure.

A good while since, after Harvey had enlightened us concerning the circulation, it was announced to the world that life might be preserved, ad infinitum, by the process of transfusion. Old people pricked up their ears, and eagerly stretched out their emaciated arms to receive a new the vital current from a sheep! What a captivating idea! "The grand secret of earthly immortality resting upon the piston of a pewter squirt! How the sublime blends down into beautiful harmony with the ridiculous! For a time syringes "looked up." But it was soon discovered that this great idea was "as the baseless fabric of a vision." And yet this was the wisdom of Solomon, compared with some notions fashionable in our day of new lights.

Homeopathy is certainly a very popular delusion, and, like some other delusions, exceedingly agreeable, if we could only persuade ourselves of its truth. Who would not rather be cured, "cito et juncunde," by the sugar of milk, than to die, "secundem artem," under the remorseless fire of a "regular practitioner's" prescription? What if a man is told, by sneering opponents of the system, that the homoeopathic medicine is a very near approach to pap, and that it is exceedingly appropriate to his infantile credulity!

Let those laugh that win. There has been a good deal of speculation concerning the origin of homoeopathy. It has been attributed to ignorance, superstition and craft, and some are even uncharitable enough to believe that Hahnemann himself acknowledged, before his death, that it was all a humbug. I profess, Mr. Editor, to be an observing man, and I think I can explain the matter to the satisfaction of every reasonable individual, of course including yourself in the category.

You remember, doubtless, that in old times people had no nerves—the old gentleman in the play said that he never had any in his life. Nerves and hysterics are things of purely modern invention. The "vapors" and the "blues" owe their existence to the "conventionali-
ties of fashionable society." The hyper-sensibility which has, in these latter days, come to be considered the indispensable of refinement and fashion, seems to have extended to the stomach and bowels. A while since, an honest, rousing dose of physic was required to make an impression upon the sturdy organs of a patient—the encounter between the doctor and the disease was a fair stand-up fight, soon ended with hard blows, and no favors asked. But the fashion of us moderns, which makes a man the creation of starched dickies, high-heeled boots and starched waistcoats—the thing of a barber's brush and a tailor's yard stick; and angelic woman, a swaddling lusus—a heterogeneous compound of wad of cotton, French chalk, buckram, and strips of whalebone, has drawn so exquisitely fine the delicate cords of sensibility, that the "30th dilution" applied to the nose proves perfectly overpowering. There are thousands of persons, now-a-days, of both sexes, who under proper circumstances, can die Pope's aromatic death.—Of course they come to life again, modestly expecting the performance to be encored! Great heaven! What is the world coming to, when sacred sensibility is worn as a harlequin's dress, to amuse an audience, and monkeys are become the highest objects of emulation to mankind? "Just to that point [remarks an ill-natured friend at my elbow] which so far divest them of common sense, as to make men credulous of infinitesimal agencies." Softly, my dear sir, we must take the world as we find it.

Do you not perceive that Hahnemann's system is the offspring of necessity and of nerves? You would begin your reformation where it ought to end: if you restore mankind to a state of health, bodily and mentally, and blunt by proper education the morbid sensibility of the nerves, homeopathy will die a natural death; but destroy at once the little globules, and what becomes of human nature!

Besides all this Mr. Editor, we profess to be a little wiser than our fathers. I fancy, sir, that we require something a little more pretending than sheep saffron and barn-yard poultices to suit the taste of the present generation. If we cure disease by conjuration which they encountered with the awful list of pills, portions and plasters; why not? We can even quote precedent for our practices. There was a famous pill, celebrated in Pindaric verse, which, with your permission, I will copy.

"A bumpkin came among the rest,
And thus the man of pill addressed:
'Zur, hearing what is come to pass,
That your fine pill hath cured the king,
And able to do everything,
D'ye you think, zur, t'will make me find my ass?
I've lost my ass, zur, zo should like to try it;
If this be your opinion, zur, I'll buy it.'
'Undoubtedly!' the quack replied,
'Yes, master Hob, it should be tried.'
Then down Hob's gullet, cure or kill,
The grand imposter pushed the pill,
Hob paid his fee, and off he went;
And traveling on about an hour,
His bowels were sore with pains were rent;  
Such was the pill’s surprising power,  
No longer able to contain,  
Hob in a hurry left the lane,  
And sought the grove—where Hob’s two eyes,  
Wide staring, saw with huge surprise  
His long-eared servant Jack, his ass!!

'Adzooks! a lucky pill' quoth Hob;  
'Yes, yes, the pill hath done the job.'

"Globules (remarks again my crusty friend) have discovered more assés in these times than did Pindar’s pills; and what is stranger, all are affected with the mange, the itch, or—something worse!" But, my good sir, this is not the fault of the system of Hahnemann. That fact does not condemn, by any means, the sugar of milk; only the mal-practice, and filthy habits of the times. We must do penance, in mercury and sulphur, for past peccadilloes, and thank God if this is the nearest acquaintance we are destined to have with brimstone. Alopahy has done nothing more (we are told,) in 2500 years, than to discover these two specifics, and homœopathy, forsooth, must teach her to employ these properly! It remains to be seen what the "Young Physic," recently born under Dr. Forbes’ obstetric management, will accomplish. Until then, with an apology for the length of this straggling epistle, allow me to subscribe myself, with great respect,  
Your ob’t servant,  
Lexington, Ky., Nov. 14th, 1846.  
Old Physic.

**Bloody Vesicle of the Vagina.** By John A. Cotten, M. D., of Greenwood, Mississippi.—(Western Journal.)

July 7th, 1837, Dr. Stokes and myself were called to see a servant girl of Mr. E. H. Stone, then of Madison county, Miss. The patient was aged about twenty-three years, decidedly above ordinary size, well proportioned, and of sound constitution. She was between seven and eight months advanced in pregnancy, and complained of an incessant itching and burning sensation at the vulva, accompanied by general constitutional disturbance. Upon examination, we found situated within the vagina, about one inch from the sphincter, an exceedingly vascular tumor, very elastic, of an oval form, about one inch in diameter. The woman informed us that the growth had been very gradual, and the uneasiness proportioned to its size, the pain increasing with the growth of the tumor. To be more specific, the tumor had been about a month acquiring the size to which it had attained when we saw it. In appearance and consistency it resembled more than any thing else a bloody vesicle filled to its greatest capacity. Thinking as we did that the gravid uterus afforded the best rationale of the complaint, we took from the arm of the patient about twenty ounces of blood, ordered a saline cathartic, cold astrin-
gent washes to the parts, low diet and the recumbent posture. This plan of treatment was persisted in for about ten days, without checking in the least the progress of the disease.

Having failed in this attempt to disperse the tumor, and no pulsation being perceptible, it was proposed to evacuate the tumor by puncture, and accordingly Dr. Stokes made a small opening with a thumb lancet. A stream of dark venous blood, of fully the size and force of that in venesection from the arm, followed the operation. We suffered the blood to flow to the extent of about ten ounces, without the slightest diminution in the size of the tumor, the supply being fully equal to the loss. We began now to suspect that the tumor was aneurismal in its nature. All efforts to arrest the flow of blood by compression proved abortive. I finally proposed strangulation with the ligature, and, Dr. Stokes concurring in the suggestion, I immediately passed a curved needle, armed with a strong thread, below the base of the tumor, and divided the ligature so as to embrace the posterior half with one portion of the thread and the anterior with the other. The ligature was tightly drawn around the respective portions of the tumor, and the hemorrhage immediately ceased.

On the fourth day the strangulated portion sloughed, and the patient appeared to be doing well for a few days; but in a little while the same itching, burning sensation which characterized the pain of the first tumor began to manifest itself still higher up the vaginal canal. Careful examination brought to view another tumor of the same appearance and about half the size of the first. After much difficulty, we succeeded in embracing with a double ligature the base of this tumor also, as we had practised in the first. In due time it sloughed, and all unpleasant symptoms subsided. At the full term, our patient gave birth to a well grown and healthy child.

It is now more than nine years since the removal of the tumors, and though the woman has given birth to three or four children since, there has been no return of the disease.

On the Use of the Hydriodate of Potassa. By Augustus Van Buren, M. D., Assistant Physician to Bellevue Hospital. (N. Y. Journ. of Med.)

John Daly, aged 38, native of Ireland. Admitted in the Penitentiary Hospital, Blackwell's Island, with a primary chancre, nearly healed, and three large and deeply-excavated buboes, with jagged and indurated edges, nearly resembling cartilage.

He had had syphilis four years before, but has never enjoyed good health since, being much affected every spring and fall with rheumatic pains; complains now of aching pain in bones, and severe headache, with partial remissions in the morning; has been salivated in the city before entering the hospital.
He commenced taking sixty grains a day of the iod. potass. in solution with syrup and water; this dose was in a few days increased to one hundred and twenty grains; the sores were dressed with poultices of bread and flax-seed, and the pulv. cantharides sprinkled on some three or four times; in a few days healthy granules were seen peeping up, and the sores began to take on a healthy action.

The dose of 120 grains per diem was kept up for twenty days without any apparent ill effects, or the usual results of large doses of the hydriod. potass.; the skin, instead of breaking out in pimples, gradually assumed a dusky brown colour, somewhat resembling the effects of long-continued doses of the nitras argenti.

The sores were now healing rapidly, pains much diminished, appetite good, and able to rest very well at night.

On the thirty-first day after admission, and the twenty-first of the 120 grains, thinking to expedite his cure, he swallowed during twelve hours, the remainder of a solution containing about 300 grains.

Six hours after he was seized with violent pains in the head and stomach; countenance anxious, tongue coated, pulse small and very quick. These symptoms, notwithstanding all treatment, gradually increased to delirium, which lasted for 48 hours, after which they slowly abated, and in twelve days more he was discharged cured.

The sores were now completely healed, leaving that depressed, shiny, and dusky brown color, peculiar to syphilitic cicatrices; the pains in bones had disappeared, and he was now able to rest well at night; since then he has been daily employed working out stone in the quarry, and is apparently in possession of good health.

This is one of a number of cases of the same kind, where the dose of the hydriodate was carried to a great extent; but the only one where it was not followed by those peculiar eruptions on the skin, which in this institution are found to be one of the common accompaniments of large and continued doses of the iodide of potassium.

The above case is in corroboration of the experience of Dr. Eliotson, as described by him in the London Lancet, for the years 1831 and 32, page 728. And also of Dr. Buchanan, in the London Medical Gazette, Vol. XVIII., page 519. Dr. E. states, that on many occasions he exhibited two drachms of the iodide three times a day, not only without any injurious effects, but with decided and marked improvement to his patients. Dr. B. is stated to have given it to the great extent of 1 ½ oz. a day with similar results.

Aneurism by Compression.—(Dublin Quarterly Journal.)

On this subject we notice the accidental discovery, by a patient of Dr. Harrison, of the application of a number of clamps (such as used by joiners and cabinet-makers, to secure their glued wood-work,)

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Aneurism by Compression.
along the course of the artery, proving it not to be necessary completely to arrest the pulsation in the tumor; but by causing a lessened current of blood through it, produce coagulation and a contraction of the sac. (Mr. Wilde.)

Dr. Bellingham applies two compressing instruments upon separate parts of the limb, one tightened, the other not; and by thus alternating the pressure, producing the same effect as if constant compression were maintained at one point, the patient being enabled to bear it for a much longer period than other instruments.

Tabular arrangement of all the Cases of Femoral and Popliteal Aneurism which have been treated by pressure on the Femoral Arteries in Great Britain and Ireland.

<table>
<thead>
<tr>
<th>No.</th>
<th>Date</th>
<th>Surgeon</th>
<th>Locality</th>
<th>Description of Aneurism</th>
<th>Age of patient</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1820</td>
<td>Mr. Todd</td>
<td>Dublin</td>
<td>Popliteal</td>
<td>30</td>
<td>Fem. Art. tied.</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>27</td>
<td>“</td>
</tr>
<tr>
<td>3</td>
<td>1825</td>
<td>Mr. Duggan</td>
<td>“</td>
<td>Femoral</td>
<td>36</td>
<td>Cured.</td>
</tr>
<tr>
<td>4</td>
<td>1826</td>
<td>Mr. Cusack</td>
<td>“</td>
<td>Popliteal</td>
<td>33</td>
<td>“</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>26</td>
<td>Cured.</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>33</td>
<td>“</td>
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<tr>
<td>8</td>
<td></td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>35</td>
<td>“</td>
</tr>
<tr>
<td>9</td>
<td>1830</td>
<td>Sir P. Crampton</td>
<td>“</td>
<td>Femoral</td>
<td>35</td>
<td>“</td>
</tr>
<tr>
<td>10</td>
<td>1842</td>
<td>Mr. Hutton</td>
<td>“</td>
<td>Popliteal</td>
<td>40</td>
<td>Doubtful.</td>
</tr>
<tr>
<td>11</td>
<td>1843</td>
<td>Dr. Bellingham</td>
<td>“</td>
<td>“</td>
<td>59</td>
<td>Cured.</td>
</tr>
<tr>
<td>12</td>
<td>1844</td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>29</td>
<td>“</td>
</tr>
<tr>
<td>13</td>
<td>1845</td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>28</td>
<td>“</td>
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<tr>
<td>14</td>
<td>1846</td>
<td>Mr. Liston</td>
<td>London</td>
<td>Femoral</td>
<td>32</td>
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</tr>
<tr>
<td>15</td>
<td>1845</td>
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<td>Dublin</td>
<td>Popliteal</td>
<td>39</td>
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</tr>
<tr>
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<td>“</td>
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<tr>
<td>17</td>
<td>1845</td>
<td>Mr. Allen</td>
<td>Haslar Hosp.</td>
<td>“</td>
<td>27</td>
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<tr>
<td>18</td>
<td>1845</td>
<td>Mr. Greatrex</td>
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<td>“</td>
<td>29</td>
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<tr>
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<td>1845</td>
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<tr>
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<td>1845</td>
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<td>Torbay</td>
<td>“</td>
<td>29</td>
<td>“</td>
</tr>
<tr>
<td>21</td>
<td>1845</td>
<td>Mr. Harrison</td>
<td>Bristol</td>
<td>“</td>
<td>42</td>
<td>Fem. Art. tied.</td>
</tr>
<tr>
<td>22</td>
<td>1845</td>
<td>Mr. Darnell</td>
<td>Chatham</td>
<td>“</td>
<td>33</td>
<td>Cured.</td>
</tr>
<tr>
<td>23</td>
<td>1846</td>
<td>Mr. Mackern</td>
<td>Litherland</td>
<td>Femoral</td>
<td>32</td>
<td>“</td>
</tr>
<tr>
<td>24</td>
<td>1846</td>
<td>Mr. Storks</td>
<td>London</td>
<td>Popliteal</td>
<td>24</td>
<td>“</td>
</tr>
<tr>
<td>25</td>
<td>1846</td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>32</td>
<td>“</td>
</tr>
<tr>
<td>26</td>
<td>1846</td>
<td>“</td>
<td>“</td>
<td>“</td>
<td>37</td>
<td>“</td>
</tr>
</tbody>
</table>

Thus 29 cases of aneurism—6 femoral and 23 popliteal—have been treated by pressure upon the artery leading to the sac; in 4 the femoral artery was tied, chiefly from want of confidence in pressure, on the part of either surgeon or patient, and in 25 instances this mode of treatment was successful. Mr. Todd's three cases, Sir Philip Crampton's case, Mr. Duggan's case, Mr. Cusack's case in 1826, and also that of Dr. Molloy and Mr. O'Farrell's two cases,
have not been before introduced into any of the notices or tables of this operation which have appeared in the periodicals.

In ten instances, local pressure on the aneurismal tumor by means of pads and bandages was used, in addition to the pressure by the instrument. An examination of the published cases will show how irregularly the pressure was applied; and it is quite apparent that its removal at a particular time, even for a few minutes, and allowing the flow of blood through the sac again to take place, will undo all that had been before effected. It is, moreover, very possible, that in many instances the pressure has been continued far longer than was necessary.

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Case of Hydrocephalus successfully treated by Iodide of Potassium.

By Lyman Brackett, M. D., of Rochester, Fulton co., Indiana. (Illinois and Indiana Medical and Surgical Journal.)

Josephine S. ætât 6 years, was seized on the first of April, 1846, with the usual symptoms of Hydrocephalus, which continued to progress, in defiance of the most active treatment, given with a view of checking the inflammation and preventing the effusion of serum, the symptoms of which have given the name of hydrocephalus to this truly obstinate and at times, fatal disease. The inflammation continued, and effusion took place (as indicated by the symptoms) after the usual course had been steadily and perseveringly tried for the space of two weeks. During the last six days of this time she had been lying insensible to sight and sound; pupils very widely dilated and insensible to the strongest light. Continually rolling her head from side to side. Hemiplegia of right side and partial paralysis of the left. Incessantly moaning, except when she would throw her left hand to her head, and cry out as if in great distress. This happened about every half-hour. Vomiting would almost invariably happen when she was raised in bed into a sitting posture. Involuntary passage of feces and urine. Then after having tried all other customary remedies, I resolved on using the iodide potassium, knowing she could not long survive in her then condition.

I began by giving an aqueous solution of the iodide (composed of iodide of potassium, \( \text{I} \) to \( \frac{\text{g}}{5} \) water,) gtt. xvi. every three hours increasing the dose gradually to 30 gtt. An evident amendment was the next day perceptible, when some soreness of the mouth and bleeding of the gums took place. From thence forward she improved rapidly, and on the fourth day from commencing the iodide, I had the satisfaction of pronouncing her out of danger. The loss of power over the muscles of locomotion and of speech was not, however, perfectly relieved by it, but was restored by the epidermic application of a solution of strychnine along the course of the spinal column.
The solution of strychnine was of the following composition:—
Strychnine, grs. viii.; acetic acid 3i.; alcohol 5i.: If you think the preceding case is worthy of a place in your Journal you will please publish it. I have made it as brief as possible that it might not occupy too much space.

BIBLIOGRAPHICAL.

1. *A Practical Treatise on Inflammation, Ulceration and Induration of the Neck of the Uterus.* With remarks on the value of Leucorrhœa and Prolapsus Uteri, as symptoms of Uterine Disease.
By James Henry Bennet, M. D.

A small monograph bearing the above title, has recently been republished by Messrs. Lea & Blanchard, Philadelphia. The many able works that have recently issued from the press, on the Diseases of Females, especially those of Churchill, Lever, Ashwell Lee and Colombat D'Isere, seemed to have left little to expect or desire on the pathology and treatment of uterine diseases; but this little book cannot be regarded otherwise than as a valuable acquisition.

The excellent opportunities Dr. Bennet enjoyed, as Physician "interne" in some of the principal Hospitals in Paris, of observing the practice of some of the most eminent physicians of that metropolis, and of investigating uterine diseases, has enabled him to explain more satisfactorily than has hitherto been done the nature and causes, and to furnish some useful information on the subject of the therapeutics of inflammation, induration and ulceration of the cervix uteri, which he justly considers the most common of all uterine lesions.

The extreme frequency with which the speculum is employed in Paris, not only in investigating diseases of the womb and vagina, but in examining all licensed prostitutes and all women who, after being brought before the police, are not claimed in a certain time by two respectable citizens, affords physicians opportunities for studying uterine pathology, which they cannot obtain in the United States or Great Britain, especially in private practice, where female delicacy in itself most laudable, when not carried to a culpable degree, and the more criminal remissness of physicians, in not urging the importance of such examinations, often cause them to be delayed until too late to profit by the information furnished by them. Many deplorable instances in this city might be adduced, if it were necessary, to prove this position.

From the customs referred to in Paris, diseases of the mouth and
neck of the uterus are often detected in their incipiency, sometimes even before they are suspected by the patients themselves; in which stage they generally yield promptly to local applications, with little or no constitutional treatment.

In private practice in the United States, local applications by induction and different kinds of cauterity, are too much neglected, but the practitioner cannot expect the same satisfactory success that Dr. Bennet enjoyed in the Parisian Hospitals, inasmuch as he has to contend with more inveterate cases which will call in requisition as adjuvants the preparations of mercury and of iodine, chalybeate tonics and other internal remedies.

We cannot recommend too highly this little book to the attention of all physicians who desire to understand the pathology and treatment of some of the most frequent diseases peculiar to women.

J. A. E.

2. Lectures on Natural and Difficult Parturition. By Edward William Murphy, A. M., M. D., Professor of Midwifery in the University College, London, &c., &c.

A work bearing the above title has recently been issued from the press of Messrs. Samuel S. & William Wood, New York. This is not a complete system of Midwifery, but a series of lectures on natural and difficult parturition, and several important subjects connected with the principles and practice of obstetrics.

The author's views and principles are sound, judicious and highly practical: he treats every subject on which he touches in a scientific, able and masterly manner. We only experienced one regret after reading this work, an unusual one, that he had not written more—that he had not comprised in his lectures other important subjects on which we desired to have his opinions and the result of his ample experience. We hope the next edition will be more comprehensive. In its present form it is a valuable work, and worthy the studious perusal of every practitioner, as well as student of Midwifery.

J. A. E.


In a previous and recent No. of this Journal, we took occasion to give our opinion of this work. The translation of Velpeau's greatest publication issued in Paris 1839, has now been completed by Dr.
Townsend of New York, with the addition of several hundred pages furnished by Dr. Mott of the same city. The work has been published in three immense volumes, numbering over 3000 pages, besides the Atlas of plates.

We have nothing to add to our former opinion, which is one of regret and mortification too, that Dr. Mott should have condescended to play second to his junior, M. Velpeau, instead of publishing a Surgery of his own. We have believed, and still consider him second to no man living as a surgeon; and we are greatly surprised in examining the plates to find not a single instrument added by him. The Atlas is literally an exact copy of Velpeau's, issued in Paris eight years ago.


This work has also been noticed in our Journal from the English edition, and we have only referred to it, to acknowledge the renewed obligation we are under to its generous publishers, for a copy issued by them. This is the best work extant on the all-important subject of Scrofula.

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**PART III.—MONTHLY PERISCOPE.***

*Asphyxia Neonatorum.*—M. Depaul has written a very elaborate paper on the subject of artificial respiration, as a means of resuscitating still-born children. He instituted a series of experiments on the dead subject, with the view of determining the amount of danger of injuring the lungs by the insufflation of air. He satisfied himself that this danger is almost an imaginary one, since, even after the lungs were removed from the body, it required several most forcible insufflations, far stronger than would ever be made in the case of a still-born child, to produce rupture of the pulmonary vesicles. On the other hand, he was struck with the great force needed thoroughly to inflate the lungs, while their resiliency was sufficient to expel the greater part of the air. He found, moreover, in many cases where children had died suddenly after breathing for several hours or days, no other morbid appearance than an unexpanded condition of a large portion of the lungs. With reference to the mode of practising artificial respiration, he condemns the mere blowing into the mouth as
inadequate, and recommends the use of a tracheal tube. He is of
opinion that there is more danger of failing from imperfect insuffla-
tion than of doing harm by its too forcible performance. It is of
importance, likewise, that it should not be suspended on the first sign
of breathing, but continued until the child cries loudly and respires

On the Results of Drinking. By W. Ormerod, Esq.—Of all dis-
cases of internal organs produced by drinking, the granular liver
seems to have attracted most attention—perhaps justly; but there is
no doubt, that of all organic diseases, the two most to be feared in
intemperate persons with recent surgical injuries, are the granular
kidney, and slight, but general emphysema, with a dilated, but not
always much diseased heart; and in persons past the middle of life,
dying rapidly in hospitals, after operations and surgical injuries,
combined with much loss of blood, these two affections of the urinary
and respiratory organs are very far from uncommon.

The three chief affections destroying patients after operations and
injuries,—namely, the general habit produced by drinking; secondly,
organic disease of the lungs and kidneys, especially emphysema in
the former, and granular disease in the latter; and, thirdly, tubercle.—act very differently, and at different periods. During the early
period, and often for weeks after operations, patients laboring under
tubercular disease do well; and it is often only at the absolute return
to health, rather than during the recovery of the patient from the
operation itself, that the effects of tubercle begin to show themselves.
Organic disease produced by drunkenness, and habitual drunkenness,
act differently: the organic disease presses heavily at every period,
and may destroy life early or late; but the mere habits of the drunk-
ard show themselves chiefly at a very early period. The patient
who nearly sinks from his unsound organs within the first few days,
often lags on for weeks and months in danger; but the man who has
simple delirium tremens is taken ill directly, and often dies; but if he
recovers from his delirium, he generally gets well from the operation,
and sometimes quickly.—[London Lancet.

Blindness caused by the use of the Sulphate of Quinine. By John
M'Lean, M. D., Prof. of Mat. Med. in the Rush Medical College.—
Four cases of blindness are reported by Prof. M'Lean, which he at-
tributes to the use of Quinine. In these cases the medicine was
administered in large doses; in one, sixteen grains were ordered
every hour, and continued until nearly an ounce was taken. The
report closes with the following remarks:—We think it clear that
the blindness in the foregoing cases was the effect of the quinine;
for we see it in each, coming on suddenly during its administration
in large quantities, and at a time, when no other medicine was given
that would be likely to produce such results. Here, cause and effect
appear to be closely connected, and are so plain, as scarcely to admit
of the possibility of a doubt. From the symptoms accompanying the foregoing cases, we should judge that the proximate cause of the blindness, was mainly an affection of the retina or optic nerve, producing amaurosis.—[Ill. and Ind. Med. and Surg. Journal.

Treatment of Irritability of the Stomach.—In irritability of the stomach, with the deposit of earthy phosphates, arising from derangement of the functions of the spinal cord, and evinced by emaciated countenance, burning, gnawing pain in scrob. cordis, and heavy pain across the loins, tongue clean and red, pulse quick and sharp, skin dry and imperspirable, with vomiting after meals; try strychnia, as in the following formula:—Strychnia gr. j., acidi nitrici dil. 3i., aquæ 3xij., solve, at sumat æger, fiat 3j. ter in die, and rub the scrob. with a liniment of croton oil; milk dietary, consisting of eighteen ounces of bread, one ounce of butter, and two pints of milk daily. The medicine to be taken fifteen minutes after each meal. The strychnia acts particularly upon the spinal marrow; and it is supposed that when alkaline urine is secreted, independently of the character of the ingesta, there is always some lesion of this part. (Dr. Bird.)

Unfermented bread is said to be useful where there is habitual headache, acidity of stomach, flatulence, eructations, sinking at the pit of the stomach, and pain after meals; in fact, in confirmed indigestion, and to all who are subject to gout and gravel.—[Braithwaite's Retrospect.

Whooping Cough.—Purgation with calomel; if febrile symptoms, calomel and antimony; an occasional emetic, and small and repeated doses of carbonate of potassa, or the following formula:—Potassae carb., 3j.; coccus cacti, gr. x.; aq. fervent. q. s. The dose according to age; for an infant, a tea-spoonful thrice daily. (Dr. Allnatt.)

Dr. Wachtl, of Vienna, recommends the ammoniated tincture of cochineal.

In the first stage, mild antiphlogistics, daily emetics, and strict confinement to the house, except in summer months. In the latter stages give the following:—Tincture of cantharides, tinct. of opium, comp. aa. 3ss.; tinct. cinch. co. 3vss. A tea-spoonful to be taken three times a-day in a little boiling water; the dose to be increased if no strangury is produced. Be careful, however, at all times, not to give opium if it can be avoided. (Drs. Graves and M'Gregor.)—Ib.

Chronic Rheumatism.—A man 40 years of age, complained of chronic rheumatic pains. He was directed the following mixture:

2. Syr. Sarsaparilla, 3i. iii.
Tinct. Colchici, 5i.
Hyd. Potassa, 5ii. M.

Thirty drops to be taken three times a day.—[N. Y. Medical and Surgical Reporter.
Treatment of Diabetes.—Glucosuria.—Diet. Strictly forbid all farinaceous substances, as those into which starch in any way enters. Gluten bread is of great value; it satisfies the cravings of the appetite. Animal food, with eggs, milk, butter and cheese, are proper. Also the following vegetables: spinach, endive, lettuce, asparagus, sorrel, haricots verts, cabbage of all kinds, along with fat pork or salt bacon; cresses with oil, and hard-boiled eggs. Fresh gluten, with butter, and cheese grated upon it, is an excellent dish. For dessert, allow olives, almonds, filberts, and walnuts; occasionally, and in small quantities, allow apples, pears, cherries, currents, gooseberries, strawberries, raisins, and pine-apples. Drinks: The French wines, Bourgogne and Bordeaux, about a pint in the twenty-four hours; they are astringent; sometimes the quantity is to be increased, but the least approach to inebriety is injurious. N. B. Some patients are made worse with wine. Beer is injurious. Coffee is good, and should be taken without sugar, or the quantity of sugar should be very small. Lemonade and drinks of this class are injurious. Clothing: Protect the body from sudden chills, by clothing it in flannel. Exercise should be carefully regulated; the patient should engage in those exercises in which he takes pleasure; but fatigue is to be avoided. Baths are not of much use; occasionally a tepid bath may do good; swimming in the sea has been found very useful.

Medical Treatment.—Carbonate of ammonia, 77 grains; rum, 310 grains; water, 1550 grains. One-third to be taken half an hour before each meal; or give it as a bolus (eight grains), with treacle, from two to ten to be taken every night.

Give Vichy water. The alkaline bicarbonates, particularly soda, are very useful.

Dover's Powder and Opiates.—The former is very useful; ten grains at bed-time. Crude opium and morphia often disorder the stomach.

Theriaca divina, 3 ss. to 3 i., every night: a drachm contains one grain of opium.

Chalybeates and Tonics.—When there is decided pallor of skin, resembling chlorosis, give tonic bitters with iron. The pulverised iron, or iron reduced by hydrogen, is the best form of chalybeate.

Evacuants.—Commence the treatment by giving an emetic and afterwards a purgative, to clear away any thing injurious in the prima via. Evacuants are of no use afterwards, except to combat certain symptoms.

Lime water, calcined magnesia, alkalis, nitric, phosphoric, and sulphuric acids, alum, tannin, and other astringents, are of little if any use.

Bleeding.—General bleeding is always injurious. Leeches or cupping to different parts, as the stomach or anus (as symptoms indicate), will be found useful, viz., where there is epigastric tenderness or suppressed hæmorrhoids.
The chief reliance must be placed on dietetic and hygienic means. (M. Houchardat.)—Braithwaite's Retrospect.

Pain in the Side in thoracic inflammations, generally corresponds, according to the indication of the patient, not to the precise point of the organ affected, but to one a little below it—that is, the painful sensation experienced is in a situation inferior to the lesion. When local evacuations of blood, therefore, are ordered, or blisters, they should be directed to be applied a little higher than the painful part. (Rostan.) This precision is not without importance in certain cases, for it may happen that, following the indication of the patient, remedies are often applied to the abdomen, when the disease is at the lower part of the chest.—[Lond. and Edin. Month. Journ. of Med. Sci.

Subcutaneous division of Sphincter Ani.—Dr. Post stated that he had recently operated at the Hospital, for the cure of a fissure of the anus, by the subcutaneous division of the sphincter ani. The first time, he believed, the operation had been performed in this country. Nitrate of silver had been previously applied to the ulcer without benefit. A small incision was first made in the skin about one-fourth of an inch from the anus. The finger then being introduced into the rectum as a guide a director was introduced through the external incision, and forced through the cellular tissue alongside the rectum, with its groove directed from the mucous membrane. A very narrow bistoury (tenotome) was then passed along the director, and the sphincter divided. Some tension being still left, the opposite side of the sphincter was divided in the same manner. So far the operation promises to be perfectly successful, the fissure appearing disposed to heal, and the patient's bowels being moved without pain. There has been, at no time since the operation, complete incontinence of feces, though the patient as he expressed it at first, had to be very quick in his movements. If the operation prove successful, it will be a very great improvement upon the open section of the sphincter as independently of the great difference in amount of the pain and suffering caused by the two operations, the old method frequently left the patient unable to retain his feces for a twelve-month.—[N. York Journal of Medicine.

Treatment of Gonorrhæa.—Dr. Green stated that he has been in the habit of arresting gonorrhœa, by introducing a small bit of sponge, fastened to the end of a bougie, and saturated with a strong solution of nitrate of silver, (40 grs. to oz.) for a couple of inches into the urethra. Dr. Stewart stated that he would at the next meeting exhibit to the Society a little instrument, by which he was accustomed to effect the same object.—[Ibid.

Treatment of Ganglions.—A puncture with a point of a small lancet is a less painful and more certain remedy than a blow. The
puncture may be sufficiently large only to allow the contents to be pressed through. A pad of lint, bound down with adhesive plaster firmly applied, will almost invariably destroy the cavity in twenty-four hours.—[Medical Gazette.

**Syphilis within the Os Uteri.**—In consequence of several individuals affirming that they had been infected with the venereal disease by a young woman apparently in perfect health, M. Delmus instituted a very minute examination. The exterior of the genital organs, as well as the margin of the anus, were in a normal condition. On employing the speculum, nothing abnormal could be perceived in the vagina. The os tineæ and neck of the uterus did not vary from their natural appearance in a female who had not borne children. There was nothing which indicated either inflammation or syphilis. On pressing the neck of the uterus in various directions, to ascertain the degree of sensibility of the parts, and the nature of the liquid which proceeded from it, an almost transparent albuminous matter was observed, mixed with a whitish liquid of a doubtful aspect. Some of this matter being collected with a curette, a lancet was charged with it, and four pricks made on the thigh. On the fourth day, the wounds assumed the form of four well marked chancres, and subsequently almost the whole body, not excepting the face, became covered with flat pustules, some dry, and others running. The eruption rendered the woman almost hideous, and it was not until after a mercurial course of three or four months' duration, including the use of strong sublimated baths, that she was cured.—[Braithwaite.

**Treatment of Engorged Womb.**—The treatment in this case consisted in scarifying the cervix, and thus bleeding the womb; taking from one to two ounces of blood at a time, which was repeated on several occasions. She was kept at rest; the bowels were relieved by saline aperients, and she used the following injection:—Dec. Papav. vij.; Ext. Conii. 2ij.; Liq. Plumb. diae. 3ij. Speedy relief followed the use of these means, and I did not see her for some time.


**Protracted Lactation.**—Dr. I. P. Smith, of Gloucester, relates in the Boston Medical and Surgical Journal, a case in which lactation was protracted for nearly twenty years, the patient never weaning one child, till the birth of another compelled her to do so. During the period mentioned she gave birth to eight children.—[M. News.

**Castor Oil Emulsion.**—R. Ol. Ricini,
Syr. fruct. Aurant. na 3i
Vitellus ovi, No. 1.
Aq. flor. Aurant. 3i.
M. ft. emulsion.
This makes a very pleasant emulsion which is readily taken by adults as well as children.—[M. Delluc, New York Jour.
Vermifuge Syrup.—Extr. Spigelia Maryl. fl. 3viii.
Mix while hot, and evaporate to a proper consistence. Dose, a small teaspoonful, for a child one year old—[Ibid.]

MEDICAL INTELLIGENCE.

Graduates of the Medical College of Georgia—March, 1847.—We publish below the catalogue of Graduates at the last conferring of the Degree in the Medical College of Georgia. The bona fide number of Students in our College, exclusive of M. D’s, &c., was 106. Though not quite so numerous as the previous Class, we can safely say there never has been a better one in this Institution. Among the number were those who had been engaged for 15 or 20 years in the active duties of the profession. The leading article in the last No. of this Journal was furnished by one of these, whose noble zeal and untiring devotion to his calling will long be remembered here.

A. A. McKee, Jasper co., Ga. " Digestion.
J. D. Cooper, Wilkes co., Ga. " Pneumonia.
T. C. Hitchcock, Canada. " Chymification.
F. S. Colley, Hancock co., " Turning.

Notice of a Globular Body found in the Stomach of an Oe. By H. H. Carey, M. D., of Antioch, Troup county, Ga.—A few days since a gentleman of this place having shown me, what I regarded as quite a physiological curiosity, I take pleasure in giving you a brief account of it.
In the month of November last, Mr. McH. having killed a beef, on opening the stomach, a globular body two and a half inches in diameter was found in its cavity. The external surface of this ball was smooth, of a dingy brown color, somewhat resembling the lithic acid calculus, in appearance, and of about the same hardness. On piercing it with an instrument, it was found to consist of a shell, two lines thick, whose cavity was filled with hair, very firmly compacted. The hair resembles that of ordinary beees—the shell was apparently composed of a mixture of earthy and vegetable matters.

This hair was, I conclude, invested with its calcareous coat, while in the stomach. The rationale of the whole process of formation of this singular body I conceive to be this:—The animal by licking himself, or others, accumulated a quantity of hair, which having assumed a globular form by the action of the buccal apparatus, passed into the stomach; hair not being susceptible to the digestive action of that viscus, it then remained till incrusted by an insoluble deposit, in the same manner that the urinary calculus is formed around its nucleus.

A large Calculus.—We have just learnt from a Knoxville paper, that Doctor Baker, of that city, had recently removed from a man aged 23, a stone measuring 13 by 5½ inches in its greater and lesser circumferences. Its weight, however, was only 5½ ounces, being of lime formation, which are generally light and porous. The operation was the lateral, and the calculus was broken in its extraction. The patient utterly refused any nourishment after it was performed, and died on the night of the third day.

Milk a Purgative.—During the night of the 4th, we saw an Italian who had received the stiletto of his comrade, near the junction of the eighth rib with its cartilage of the right side. Having had, up to the fourth day after the wound, but one motion from his bowels, a laxative dose of medicine was proposed; to which he objected, stating milk was his only physic. He took a common size tumbler of sweet milk, and at the next visit he had had 5 or 6 evacuations. We made particular inquiry on the subject, of himself and others around him, and were satisfied that this article of diet operates upon his bowels.

Number of Medical Institutions in the United States.—There are now, thirty-seven Medical Colleges in the United States, and we may add, a few more of the same sort still in contemplation.

Partial Report from the great Battle of Buena Vista.—We have just derived from a letter of our friend, Dr. Hitchcock of the United States Army, and formerly stationed at the Augusta Arsenal, the following items:—He has the supervision of eleven hospitals, eight American and three Mexican; in all 400 American and 200 Mexican patients.* He cut out over sixty balls on the field of battle, and has performed eighteen capital operations, besides those of a minor character without number.

* My report this morning, was 370 soldiers, 26 officers—total 396, Americans. Mexicans, 185 soldiers, 4 officers—total 189.
Medical Intelligence.—Meteorology.

National Medical Convention.—At a meeting of the Delegates to the National Medical Convention from the city and county of Philadelphia, held at the Hall of the College of Physicians, March 9th, 1847, it was resolved to accept the polite offer made by the Academy of Natural Sciences, of the use of their spacious Hall for the meetings of the Convention; and the following committee was appointed to make the necessary arrangements for the meetings and deliberations of that body: Drs. Hays, Condie, Emerson, Fox, Bridges, Norris, Morris, West and Paul.

The above committee, in furtherance of the objects of their appointment, invite the delegates to the National Medical Convention to meet at the Hall of the Academy of Natural Sciences, west side of Broad-st., near Chesnut-st., on Wednesday, May 5th, at 10 o'clock, A.M.

The several standing committees appointed at the last Convention, are invited to meet at the same place on Monday morning, May 3rd, at 10 o'clock.

To facilitate intercourse between the delegates, they are invited to report themselves as soon after their arrival in Philadelphia as convenient, to the committee of reception and arrangement, named above, who will be at the Hall of the Academy of Natural Sciences on the 1st, 3rd, and 4th of May, from 10, A.M. to 3, P.M., and on the evening of the 4th of May, from 7 to 10 o'clock.

The secretaries of the associations who will be represented are requested to transmit, at an early day, the names of their delegates to the chairman of the committee, Dr. I. Hays.—[Medical News.

METEOROLOGICAL OBSERVATIONS, for March, 1847, at Augusta, Ga. Latitude 33° 27' north—Longitude 4° 32' west Wash. Altitude above tide 152 feet.

<table>
<thead>
<tr>
<th>Date</th>
<th>Sun Rise</th>
<th>Ther. Bar.</th>
<th>2, P. M.</th>
<th>Ther. Bar.</th>
<th>Wind</th>
<th>Remarks</th>
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<tr>
<td>1</td>
<td>32</td>
<td>29 90-100</td>
<td>60</td>
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<td>93-100</td>
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<td>46</td>
<td>30 3-100</td>
<td>67</td>
<td>29 98-100</td>
<td>s. e</td>
<td>Cloudy—sprinkle.</td>
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<td>8</td>
<td>53</td>
<td>29 87-100</td>
<td>63</td>
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<td>9</td>
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<td>10</td>
<td>58</td>
<td>89-100</td>
<td>80</td>
<td>89-100</td>
<td>s.</td>
<td>Rain, thunder, light.</td>
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<td>11</td>
<td>63</td>
<td>71-100</td>
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<td>n. w</td>
<td>Rain, 1 inch and 35-100.</td>
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<td>12</td>
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<td>57-100</td>
<td>41</td>
<td>54-100</td>
<td>n. e</td>
<td>Rain, Flood in the river.</td>
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<td>13</td>
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<td>54-100</td>
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<td>15</td>
<td>33</td>
<td>30 2-100</td>
<td>51</td>
<td>30 1-100</td>
<td>n. w</td>
<td>Fair—some clouds.</td>
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<td>16</td>
<td>33</td>
<td>30 1-100</td>
<td>50</td>
<td>30 7-100</td>
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<td>Fair—blow.</td>
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<td>17</td>
<td>30</td>
<td>23 33-100</td>
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<td>30 6-100</td>
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<td>18</td>
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<td>29 92-100</td>
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<td>29 97-100</td>
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<td>Fair—blow, rain at night93-100</td>
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<td>21</td>
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<td>28-100</td>
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<td>Cloudy—rain last night40-100</td>
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<td>74</td>
<td>97-100</td>
<td>n. w</td>
<td>Fair—breeze.</td>
</tr>
</tbody>
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16 Fair days. Quantity of Rain 3 inches and 60-100. Wind East of N. and S. 6 days. West of do. 19 days.