Reviews.

On Indigestion, and certain Bilious Disorders connected with it: with short Notes on Diet. By George Chaplin Child, M.D. London: Churchill, 1847. pp. 219.

Dr. Child's treatise on indigestion is well written, minute, and clear, with regard to what is already known; evincing a good acquaintance with the literature of the subject, and an acute observation of the ordinary phenomena of the disorder. But there is no mark of originality, and no attempt at grappling with any points except those which have already been discussed again and again by writers on dyspepsia. There is considerable care displayed in the arrangement of the different points, and many minor topics are well and lucidly argued. As far as personal observation is concerned, Dr. Child gives, in various places, a reference to 200 cases; and apparently the observation of these cases forms the basis of the essay.

There is one point we cannot avoid pointing out as injurious to the book as a piece of professional writing—namely, that the author "ventures to offer it" "to the public;" and we say this, fully convinced that the popular study of "indigestion, and certain bilious disorders often conjoined with it," would only tend to render the dear public dyspeptic, instead of curing the disorder. We dislike, too, the translation of many professional terms, as an indication of a popular aim which is prejudicial to medical literature. Thus, certain chapters are headed, "cephalalgia, *or* headach;" "pyrosis, *or* water-brash," "rumination—a rising of food into the mouth," &c. With the hygienic portion of dyspepsia, the public may have some concern; but the hygienic and strictly medical divisions of the subject should be kept separate, or it becomes a fruitful source of self-tampering and of weakened faith on the part of the sick. Though we make these remarks, we give Dr. Child the full benefit of a quotation from his work, which displays a sound spirit on the subject of empiricism generally. He is speaking of those thousand aches and pains occurring in the nervous, and which imitate more serious disorders.

"It may be observed that the term pseudo-disease, or mimosis, is far from unobjectionable as a name for the cases now being considered, because, although they accidentally resemble other and more serious disorders, they are not the less on that account real diseases in themselves, and often of a very distressing character. When their exact nature is mistaken by the medical attendant, it usually happens both that the remedies employed are more severe than what the case demands, and that the friends of the patient are made to suffer much needless alarm. The diseases here alluded to—the mimoses—are the mine which the quack works easily and with success. There is undoubtedly a strong propensity in the mind to magnify dangers incurred, and this observation applies to disease not less than to other things: hence, one person expatiates on the perils of a crisis in sickness happily passed through, with as much zest as another on the dangers of a voyage. With this tendency, the notions, or at all events the interests, of the quack chime in admirably; accordingly, with him and his patients there *never are any imitations.* The mimosis without danger passes for the formidable or generally fatal complaint which it resembles, —consequently wonderful cures abound. He can point to a hundred instances of disease against which the greatest physicians must admit they seldom can contend, wherein he triumphs nearly every day, and a host of grateful and right-minded patients are ready to back his assertions out and out. Who can feel surprised that quackery should prosper? and where is the remedy for it to be found, except in seeking to elevate the attainments, both scientific and moral, of all permitted to practise in the profession?"—p. 186.

Medicines; their Uses and Modes of Administration. By J. Moore Neligan, M.D. Second edition. Dublin: Fannin and Co., 1847. pp. 485.

Dr. Neligan has already acquired a solid reputation as a writer on materia medica and therapeutics. This, the second edition of his work, has received a large addition of new and important matter, many of the former articles having been entirely re-written, and a full account introduced of all the newest remedies. The work includes the preparations of the three British pharmacopœias. In the arrangement, an alphabetical order is followed, both for the different classes of remedies, and for their various specimens, as antacids, anthelmintics, antispasmodics, &c. The remarks on the therapeutic classes of remedial agents are brief and succinct, and the individual agents, and their various preparations, are treated with great fulness and perspicuity—a separate consideration being given to the botanical characters, preparation, physical properties, chemical properties, adulterations, therapeutic effects, dose and mode of administration, and incompatibles. Altogether, the work will be found useful both to the student and the practitioner; while it is indispensable to the library of the special cultivators of therapeutics.

The following quotation is a very good specimen of the sagacity and practical character of the work:—

"Antacids are medicines which correct acidity of the stomach and digestive organs, by combining chemically with the free acid existing there, and neutralizing it. Their action is manifestly only temporary and palliative, as they do not correct that peculiar state of the digestive organs which favours the formation of acid; their protracted use, indeed, produces a precisely similar disease of the alimentary canal; and few individuals can bear the continued use of free or carbonated alkalies, a state of general anæmia usually attended with oxalic acid deposits in the urine being caused by it. Antacids should therefore be prescribed in combination with *vegetable tonics;* and in no case should their administration be long persisted in without occasional interruptions. One or two circumstances, relating to the particular remedy of this class which ought to be employed, require to be noticed:—Where the acid exists in the stomach in the gaseous state, ammonia and its carbonate should be preferred, as, in consequence of their volatility, a gaseous acid, which would elude the action of the fixed alkalies, will be neutralized by them. If the acidity be present in the lower bowels, as in the cæcum or colon, magnesia or lime ought to be administered, as being less likely than the other antacids to be neutralized or absorbed before they reach that portion of the intestinal canal. Where the acid exists in the urinary organs, the alkalies will be found best adapted, as they have a tendency to act more directly on the kidneys; and where it is *lithic acid* that predominates in the urine, the preparations of potash should be preferred to those of soda, as the salt formed by the combination of the former with the acid in question is much more soluble than that formed with the latter."—pp. 1, 2.

This will be sufficient to show our high appreciation of the book. There is, however, one point which we consider a blemish; but which we have no doubt escaped the consideration of the author—namely, the introduction of formularies for quack medicines, and of medicines taking the names, whether truly or falsely, of medical persons. We conceive quack medicines should be banished from legitimate medical writings altogether, or never referred to, except for special condemnation,—certainly not for the sake of ascertaining and mentioning their constituents; and so much lying, knavery, and barefaced quackery, has grown out of the habit of affixing the names of medical persons to particular preparations, that we had rather see the point reformed altogether. In Dr. Neligan's otherwise exemplary work, we find reference made to a very heterogeneous mixture of quack and semi-quack and legitimate articles, christened after this fashion:—Such as, Albespeyrre's Paper, Hoffman's Anodyne, Caustic of Filhos, Recamier's Caustic, Cazenave's Paste, Turner's Cerate, Donovan's Solution, Dzondi's Pills, Roche's Embrocation, Gowland's Extract, Franks' Solution of Copaiba, Gondret's Ointment, James's Powder, Gregory's Powder, Heberden's Ink, St. John Long's Liniment, Whitlaw's Tincture of Lobelia, Murray's Solution of Magnesia, Brandish's Solution, Mindererus' Spirit, &c. So many quackish evils have, as we have said, arisen from the barbarous custom of affixing the name of a medical man to any pill, powder, ointment, or solu-

tion that appears, that we should prefer the total abolition of such a form of nomenclature. The less direct quack medicines are introduced, even by name, into a scientific treatise, without the full reprobation and exposure which would be well nigh impossible in a systematic treatise on therapeutics, the better. We trust Dr. Neligan will take these remarks in good part, and more especially if his work should reach, as we cordially hope it may, a third edition.

As a further quotation we give his account of a new and highly useful preparation:—

"Hydrargyri Nitras Acidum. *Acid nitrate of mercury.*

"Preparation.—Take, of pure mercury, 100 parts; commercial nitric acic, (Dens. about 1380,) 200 parts: dissolve the mercury in the acid with the aid of heat, and evaporate the solution until it is reduced to 225 parts.

"This preparation contains about seventy-one per cent. of nitrate of mercury with an excess of nitric acid. It is a powerful caustic, and is very much employed in the present day on the Continent to destroy malignant ulcerations, particularly when of a cancerous character. It is applied by means of a camel's hair pencil, and the parts are then covered with lint."—p. 122.

We also quote an account of another new remedy, which is somewhat extensively used by the first authorities:—

"Preparation.—Take of the bruised root of valerian, two pounds; water, eight pounds; sulphuric acid, three ounces, one drachm: macerate for two days, and distil until the liquid no longer reddens bibulous paper. Let the distilled liquor be then exposed to the air for a month, at the end of which time, put it into a mattrass, with half an ounce of recently precipitated, perfectly pure, hydrated oxide of zinc, and digest for from eight to ten hours on a sand-bath, heated to 176° F., stirring occasionally. Filter the warm liquor, evaporate it to three-fourths of its volume, pour into porcelain capsules, and expose to the heat of a stove until crystals are formed, which are to be dried with filtering paper.—Brun Buisson." . . . . .

"Therapeutical Effects.—Valerianate of zinc is a tonic antispasmodic of much power, and as such is peculiarly adapted for the treatment of neuralgic affections, which are so generally dependent on loss of tone in the system. It has been found especially useful in the treatment of facial neuralgia and of vertigo; but I have seen it prove equally beneficial in most of the Protean forms of hysterical neuralgia. In short, I look on it as one of the most valuable modern additions to the materia medica; and I fully agree with the observations of Devay, that the chemical combination proves much more beneficial than the oil of valerian and oxide of zinc prescribed together.

"Dose and Mode of Administration.—The dose of it is from three-fourths of a grain to one grain twice or three times a day; it may be prescribed in the form of pill made with a little mucilage or conserve of red roses, or in solution in orange-flower water, or in distilled water flavoured with syrup of orange-flowers. The compounder must bear in mind that the crystals of valerianate of zinc do not dissolve readily in cold water, floating on the surface in consequence of their lightness; they should therefore be first incorporated with a few drops of water in a mortar.

"Incompatibles.—All acids; the soluble carbonates; most metallic salts; and astringent vegetable infusions or decoctions."—pp. 32—34.

Essay on the Great Prevalence of Venereal Diseases in Great Britain. By Alfred Hall, M.D. Glasgow: Lang, 1847.

This pamphlet is a well-executed attempt to set forth the wide-spreading evils attending upon the uncontrolled spread of syphilitic contagion, and the necessity of improved sanitary regulations, specially directed to the diminution or extermination of this evil. The facts which are used as the basis of Dr. Hall's reasoning are mainly derived from the labours of Mr. Acton, and our own articles in furtherance of the same views. The subject is handled in a careful and spirited manner, and cannot fail to be of service in the cause of improvement to which it is devoted. No long time will elapse, we are convinced, before the necessity of rescuing the guilty, as far as may be, from the results of their vices, and of warding off disease from the innocent, will ensure the adoption of sanitary regulations upon this subject.

Medical Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

Feb. 23.—Dr. Copland, F.R.S., in the Chair.

Case of Elephantiasis. By George Southam, Surgeon to the Safford Royal Hospital and Dispensary, Manchester.

(*Communicated by* Mr. T. B. Curling.)

The patient, an unmarried female, first came under the author's notice in the autumn of 1843. The disease had then existed about twenty years, and commenced when she was in her eighteenth year, on the dorsum of the foot, having been preceded by attacks of deep-seated pain. As the œdema extended, the pain became more severe, and the integuments became the seat of frequent erysipelatous attacks. A large ulcer formed on the inside of the thigh, and three others near the ankle. The only cause assigned for the disease was the sudden cessation of the catamenia from cold. A drawing of the disease, taken in 1845, was exhibited to the Society; the measurement round the calf of the leg was two feet nine inches; above the knee, three feet four inches; and at the upper part of the thigh, including the nates, five feet six inches. Owing to the integuments having yielded unequally, the leg had a somewhat lobulated form; there was neither indentation nor pain on pressure; the sole of the foot was the only part of the limb not implicated. She was able to go about the house, and assist in household duties, until within a few weeks of her death, which took place on the 21st of November last, from an attack of dysentery.

On examining the body, the enlargement was found to have been caused by the deposit of a dense, white, lardaceous substance, interspersed with fat, in the subcutaneous cellular tissue. The principal venous trunks were much larger than natural, and when divided transversely, were patulous. The coats were thickened and converted into a fibrous substance, disposed round the vessel in laminæ. All the smaller vessels, when divided transversely, resembled arteries filled with coagula. The disease in the veins had not extended beyond the groin; those of the pelvic cavity were sound; the viscera were healthy; nothing beyond slight hypertrophy of the epidermis and cutis was detected in the skin.

The author remarks, that he has been informed by several medical friends who saw the patient, and who had witnessed elephantiasis as it is met with in the natives of South America and the West Indian Islands, that the tumefaction seldom attains so great a size as was observed in the case now related. From the appearances found on dissection, it is evident that the disease originated from repeated attacks of subacute or chronic inflammation of the venous capillaries, which caused the pain and febrile symptoms. The author is of opinion, that the immediate cause and pathological changes of elephantiasis bear an intimate relation to those of phlegmasia dolens and the induration of the cellular tissue, in new-born children; the apparent differences depending on the degree of venous obstruction and on the remote influences which have originated it.

Dr. Copland said that the case before the Society was more fully detailed, both as regarded its history and progress, than any previously published. It was an interesting question, whether the disease was one affecting the veins only, or the lymphatics, or both.

Mr. Curling would mention a case, because it had been probably overlooked by the author of the paper. It was quite as remarkable an instance of the disease, and was recorded by M. Chevalier in the second volume of the Society's *Transactions*. The limbs in each case were nearly of the same dimensions. In M. Chevalier's, the enlargement commenced after an attack of phlegmasia dolens. The original drawing of the leg and the foot were in the museum of the London Hospital, having been purchased at Mr. Heaviside's sale. He had at the present time a case of this disease under his care in its early stage. The patient was a boy nine years of age. The disease affected the right lower extremity, which was as large again as the left. The greater enlargement was in the leg, but the thigh was much thickened. It originated in a blow on the leg, given by a schoolmaster. The boy was improving under treatment, and he hoped to effect a cure by supporting the limb, and administering the liquor potassæ. In answer to a question, Mr. Curling said that he had not been able to detect any obstruction in the femoral or other large veins of the lower extremity; but this would be difficult,