Notes on some Case in Practice:

"I despair."

Alla, April 29th 1879.
Introductory

The choice of a subject for a thesis must always be a difficult one.

It becomes doubly so when engaged in private practice, away from the centre of study, where opportunities for individual research, or clinical investigation are so frequent. During one's student days, there is so much more pressing and immediate work to be done, that though surrounded by cases that only require working up to make valuable theories, the future is left to itself.

In the busy round of General Practice, there is neither the time nor the opportunity for elaborate dissertations on abstract subjects, both of reference being hard to find in libraries, and long journeys being out of the question.

Therefore, not being able to thoroughly master any one subject, I have resolved upon making a few brief notes of "Some Cases in Practice."

John Home Hay.
Some Cases in Practice

As Midwifery is one of the most important branches of General Practice, I will cite one or two of the more unusual cases, which have come under my notice.

On Sunday, April 28th 1878, I was sent for to see Mrs. J., a Multipara— a midwife was in attendance. The case was one of twins, the first of whom had been born an hour or half before my arrival, but the management of the second had baffled the skill of the midwife.

The patient was very near exhaustion, having been in almost constant pain for about three hours; her previous state of health had not been at all good.

On examination, the right arm of the child was felt in the vagina, the hand projecting externally. The body
framed lightly down in the pelvis.
The arm had evidently been used as
a tractor by the midwife.
With considerable difficulty intro-
duced my hand into the uterus with
the view of turning the fetus.
A fist was readily grasped, but all my
efforts to alter the position of the child
were unavailing. I endeavored
to remove the arm, before freeing the
fist, but the uterus was too firmly
contracted to allow it.
Deeming it expedient to have further
assistance before proceeding to extreme
measures, a message was despatched
to a neighboring practitioner, to request
his help. He also gave turning
again trial, but as the mother's
strength seemed rapidly failing, her
pulse becoming very much irregular,
we decided to remove the arm at
the shoulder joint, in order to
facilitate Boston —
A small scalpel was used as the
quickest means of clearing the area, and great care was taken of the maternal tissues, the hand of the operator being between these and the arm. The head was soon arrested, and on my again grasping the part, the child was readily turned, labour completed. The mother never called, but rapidly sucked and died about an hour after the termination of the labour. The first child did well; the second of course was dead born.

This case shows the grave disadvantages of midwifery practice by midwives, even though they have had a fair account of teaching, and a large number of cases through their hands. Had a medical practitioner been in charge of the case from the first, the probability is, that by early judicious interference both lives might have been saved.
The next midwifery case of any interest, was one of complicated labour. The patient had always had considerable difficulty in her previous labours (four), all the children, with the exception of the first, presenting abnormally. She had been in labour all day, but they had not been successful in getting a doctor sooner. On my arrival the patient was of course somewhat exhausted from her long continued exertions.

Examination showed that the Osflex, right arm, righthand of the trunk were all presenting—they had been in the same position for some time. Tota—

Forcible were immediately applied through with some difficulty, the foeto being much squashed by the long continued pressure, and delivery was, with considerable force, accomplished. The child was still-born, but the mother made an excellent reco-

covery, never having any subsequent symptoms.
In connection with the peculiarities of some women of unnatural predisposition, the subsequent history of this patient is interesting—

A short time since I was again called to attend her in labour—uterine action had commenced at 4 A.M. and, about six o'clock, a great quantity of water came away, after which the labour ceased entirely, and when I saw her at 11 A.M. I found her quiet and comfortable—

On vaginal examination the os was felt widely dilated, and, in accord with the bony of the pelvis, the right foot presenting—A teaspoonful of the liquid extract of ergot was administered, and about three quarters of an hour after another dose—As, after waiting a considerable time there was no return of uterine contraction, I decided to leave the case to nature—visited her again in the evening, still there had been
Jno. Vaine, though the right foot was felt considerably lower in the pelvis and immediately above it the left. Forty drops of Laudanum were given to induce sleep and with instructions to be called should labour recommence. Left — Accordingly at about 6 or 7 o'clock her head returned on the patient awaiting sleep, and was proceeding vigorously, so that any soon a healthy female child born. Both mother and child did well —

The next case I mention is one of Menorrhagia, the cause of which I could not ascertain —

In the evening of Sept. 29th 1898 Jno. called to see Mrs. A. who was said to have been altering continually for about three weeks — On inquiry, ascertained that up till the preceding month she had always been regular
though, since the birth of her last child nineteen months previous, her general health had not been good.

The usual duration of her catamenia was three or four days, but the last one continued for more than a fortnight, the discharge being very profuse.

There had been only three sets of an interval between the two occasions—

Her family history was markedly pathological.

I found her utterly prostrate, face blanched, pulse very weak, and unable to raise her head from the pillow. I examined her per vagina, turned out some large clots. The hemorrhage was very profuse and I detained introduced strips of cloth as a plug. I applied cold externally.

It seemed to be an enlargement or affection of that organ. To account for the great loss of blood, and I think we must refer to the state of the blood itself, and the general condition of the patient, the causation of the disease—
English, administered hypodermically, was followed by great sickness and vomiting on the two occasions on which it was tried, without any diminution in the amount of discharge. She was ordered to keep the recumbent position & to have plenty of milk, eggs, berflia, rice; everything to be taken nearly cold. No alcoholic stimulant was allowed.

The following mixture was prescribed:

\[\text{Epsom Salt } \frac{3}{4}\text{ lb.} \]
\[\text{Lemon Hydrate } \frac{1}{4}\text{ lb.} \]
\[\text{Sr. Aurant } \frac{1}{2}\text{ lb.} \]
\[\text{Aquae ad } \frac{3}{4}\text{ lb.} \]

The teaspoonful to be taken four times daily.

Pound of Gallie Samsung salts were also ordered, five grain dose of each to be taken three times daily.

Given by the mouth the Epsom Salt produced no unusual symptoms.

On removal the patient next day, tough
Clots came away, and the fluid continuing, the hemorrhage was not nearly so severe as before. As the blood gradually diminished, the area of a considerably patent took its place. Slowly the amount of discharge lessened, although in any unusual movement on the part of the patient, hemorrhage returned, until in about ten days it ceased entirely.

The patient gradually improved, gaining strength daily, but looking forward anxiously to the next menstrual period.

Three weeks after the cessation of the discharge, the catamenia returned in full force, and a small was allowed to sleep before any remedial measures were tried, when as there was no amelioration of the patient's condition the former mixture was repeated. On this occasion the discharge proved very ultimate, and the patient was soon as reduced as before or even more...
to, and grave fears were entertained for her recovery — Injections of solution of alum gave some relief, but whenever the patient moved or attempted to sit up, the blood fairly gushed. The dose of Sapsinu was increased but to no purpose —

This state of things went on for several days, the patient becoming weaker and weaker, till on the suggestion of a friend I determined on trying Arsenic — Fine draft doses of the hypour Arseniebich were taken in water three times daily, and almost immediately the amount of discharge became less. As the haemorrhage diminished, the patient rapidly improved, appetite restored, the colour to her cheeks —

The physiological action of the arsenic produced such disagreeable results, that the patient took a great dislike to it, so much so as rebel against it altogether. The drug was discontinued for a time, to allow these symptoms to subside, and
then given in only three minute doses, as her next menstrual period was approaching. It was dropped into the milk she drank, and so given without her knowledge.

To our great relief she altered next time quite normally, and has continued well ever since, never having any trouble with her menses.

Whether the favourable result is to be attributed to the effect of the Arsenie, or whether the credit is due to the "Vis Medicatrix Naturae" is a matter of opinion.

I incline to the former view, for not only was the improvement more marked and rapid than on the previous occasions, but it was also more lasting. She having continued well ever since.
The following case not only illustrates the

efficacy of \textit{Gelsemium Sempervirens}

in some nervous affections — the

preparation used in each case was

the \textit{tincture}, and the dose twenty

to twenty-five minims, given with

varying frequency. The \textit{physiological}

effects were real produced in some

of the cases —

Brief action of the remedy was always

produced before commencing the medicine

J. D. a mason, aged 25,

consulted me for a severe pain in the

right side of the head, from which he

had suffered for about four years —

The pain was accurately confined to

the right side of the head, forehead —

the right eye, at times, slightly during

the continuance of the affection.

She had been under treatment on

several occasions, and had taken large

quantities of quinine, among other re-

medial measures, but had received little

or no benefit — I determined to give
the timeline of Selenicium astride, 130 ordered him twenty-five minims 
sometimes daily.

On seeing him a month later, he stated that the pain had troubled him only once or twice since commencing the 
boottle, but that on one or two occasions he had to drop work on account of the 
double vision and giddiness it had caused. I advised him still to 
continue taking it, but only three times 
daily instead of four. A fort-

night later he again called to say 
that he had stopped the medicine having 
had no return of the pain — and from 
that date till the present time, nearly 

a year, the headache have never 
troubled him, though before taking the 
Selenicium he was never a day free from 
pain.

G. P. aged 42, had suffered 
from hemiplegia for nearly thirteen 
years. Selenicium was prescribed with 

a similar result, i.e., the administration
had to be repeated occasionally for a week or two. He has continued quite free from the affection —

I., aged 28, a cabinet maker, complaining of headache affecting the left side of the head of forehead, states that he has been subject to some pain in the part mentioned, for about a year.

The attacks were of daily occurrence, commencing usually in the forenoon, about 11 o'clock, lasting full two hours — prescribed, during five minutes of the tincture of Potassium nitro-carbonicum to be taken every four hours, commencing in the evening. The next day the

perception of pain was not quite so

same as not so long continued as usual, and on the day after still less so, until on the third day it was about altogether. With the exception of

a day or two, the following week

the pain has never returned —

The medicine was continued once daily

for a week and then discontinued entirely.
The following case is one of Scabia, in which Pilocinum seems to be beneficial —

Dor W., a widow aged 67, had been under treatment for Scabia for some months. The usual treatment gave no relief. Noticing some remarks in one of the Medical Journals, I combined vinegar (alcohol) with the gum tree. In this case the scabia cleared of the wine to touch of the Pilocinum, took some every five hours.

On being the patient read the I found her considerably improved. The skin in the head greatly diminished. The medicine was then given

frequently, for fear of irritating the mouth of the Pilocinum. Her recovery was rapid and in ten days she was able to be about her usual home

work.

As a check to their successful case, I may state that I have given the Pilocinum in similar cases without the slightest good result.
On July 6th 1878, I had an urgent message to visit Mrs. J. 68 years of age, who lived some little distance from my residence — I found her lying up in bed, suffering from extreme dyspepsia, great pain of slight of weight in the chest, and severe headache.

The illness had come on the previous evening.

In auscultating the heart, it was found to be beating somewhat irregularly, though no murmurs were audible.

The breath sounds were harsh, and a few rales could be heard both anteriorly and posteriorly.

She had had a somewhat similar attack last year before. Her hands were well bandaged, and poultices applied to the chest both back and front, and a saline expectorant mixture ordered.

The next day her condition was considerably improved, yet she was still very much distressed —
She was very much surprised, on the 9th, to find a bloody discharge coming from the vagina, exactly as if she had been menstruating. This continued for a week, behaving just as if it had been one of her menstrual periods returned.

She stopped eating at 41 years of age, so that for twenty years she had been quite free from discharge—when eating her usual periods lasted generally the week, just as this one has done. She recorded her troubled health rapidly, and has continued well since then. What the cause of this peculiar feature in the case could have been seen some idea, but merely venture to record it as a peculiar circumstance—
W. G. a collier, aged 32, consulted me about a swelling situated on the middle and inner side of the right thigh. He had noticed a pain about a fortnight previous.

The tumour was fully the size of a walnut, and very hard.

As the man complained of a sore cough, from which he had suffered for some time, I examined his chest, found unmistakable evidence of Phthisis in both lungs, but particularly in the right. Aspiration for the cough, soup of cod, cold lemon ice were ordered. The swelling to be punctured with Mixture of Sodick.

Gradually the tumour increased in size, became quite painful until about two days, the fluid material slowly boiled up and softened, when I evacuated the abscess. The contents were a dark pus and brown fluid. It continued to dis-charge and did not heal; at the same time the pulmonary condition became
rapidly worse. The expectoration was very purulent, black, with rather a fishy smell, as is usual in small-pox.

Puhin, though very slight bronchitis in rallies is often attended by a black expectoration.

The patient quickly grew worse, being not much disturbed by the cough.

About three months after he complained of great pain in his back below the right scapula, to relieve which, poultices were applied. My attention was drawn to a fulness over the painful spot, which gradually increased in size, until in a week it resembled a large bean. Poultices were applied to the back. Fluctuation could easily be made out. The next day was fixed for evacuating the matter by aspiration. However, on being the patient on the following day as arranged, I was informed that, the night before he had spat up a large quantity of matter in mouthfuls, in all about a breakfast-cupful, and
on examining the back, the swelling had disappeared. Three days afterwards the patient died. At Postmortem no gas obtained, though it would have been interesting to ascertain the exact relations of the cavity of the chest. It is clear that it must have opened into the lung—

The last case I mention is that of an engineer employed on board one of the steam-boats belonging to this Port. While the vessel lay at anchor in the river, he went to fix some serious machinery with the engine, having his legs in the hole where the bearing work is.

The action of the water on the paddles, the tide ebbing at the time, caused them to resolve, and, the machinery unfortunately had being locked, down came the engine. He saw it coming, and had time to draw his left leg up; but his
right was caught and crushed very severely - he was brought home, and on my seeing him, I found the limb much bruised and lacerated.

There was a semicircular flap of skin about four inches across, reflected downwards over the patella, a deep gash, about five inches long, sphagued in the inner side of the calf, the muscles protruding through the wound. Most unaccountably there was no fracture, though how the bones reappeared is very singular, as the space between the muscle and the sides of the hole in which it plays was only two inches.

The reflected skin was washed, and replaced, silken sutures being introduced, though the vitality of the flap was extremely doubtful. The wound of the calf was also turned up.

The case went on very favorably, though the flap of skin slopped as was reflected. Few skin speedily
from the sides of the wounds, the lotions being changed frequently, as each seemed to lose its effect after a short time. Passive movement of the knee was carefully carried out, wondrously soon the patient could move the joint readily.

A month after the accident, my attention was drawn by the sufferer to a sore on his floor penis, which he had first noticed a fortnight after he was laid up. He confessed to having had intercourse with a prostitute in London, around before his injury, thus giving three weeks for the incubation of the disease. The sore was solitary, placed on the surface, hard at the base, somewhat raised above the surrounding level, presenting the characters of the true Hunterian Chancre.

Black bread was immediately ordered as a diet, and tea, sweet or lemon water, the usual remedies of the Fever Hydroxygyn Pot.
-chloride, to be taken thrice daily.

His general health continued very good, and although some had
in three weeks after the complaint
of slight one throat, no mucous
patches were visible.

A few suspicious "lana of hair" tinted
spots appeared on the chest and arms.

Slight phlyctenae was produced, and
then the quantity of mercurial was
reduced, being given only twice daily.

Notwithstanding these disadvantages,
the wounds of the leg went on healing
rapidly, and were perfectly treated
in month after the accident.

The further manifestations of Syphilis
have not appeared, but anxiously
watch the case, fearing its
development