A Thesis on

Plutarch

by

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Benedict 1850
On Morbidity

Before entering on the discussion of the subject of this paper, I think it would not be altogether out of place to offer some remarks relative to the nature of the disease which I am about examining in one of its observed conditions. I shall first give a short history of the disease, after which I shall more fully relate on the particular cases of question arising in coming places to certain claph allied. Certain actions occurring under peculiar and modifying circumstances, which deserve some notice as they have their origin during a period when the action is distended by the presence of after the completion of a process which generally underlay for the time of its continuance, from our great mental diseases some slight to modify our treatment and as much as private is unadvised the condition of parts when dis- covered subsequently to death are found to possess the same anatomical character as in the subsisting disease, or the appearances which extremely occur are present, they are so armed with other which formerly tended to do so the former in the present instance of the disease and its symptoms.
The veins are thus derived formed by the confluence of the capillaries and run for their office the return of the blood to the heart. At their origin they are larger than the corresponding terminations of the arteries in the lower parts, and they are found to retain a similar relation to them all over the body; they are arteries more numerous. The capacity of the venous system is twice much greater than that of the arteries, and it has been generally estimated as being capable of containing twice or thrice as much as the arteries. The arteries of small size have for the most part two veins accompanying them, those of larger character, but one. These are two sets of veins one superficial situated beneath the integument the other deep accompanying the arteries. Veins have more numerous branches joining them and communicating with each other often than arteries of a similar caliber. The disposition of the veins bears much resemblance to that of the arteries the greatest differences being Brancard in their middle coat—which is deficient in the muscular—those instead of the yellow elastic ones so common
in the latter. They are for the most part described as having three coats or external, middle, and internal. 1st. The external coat is composed of fibres and bundles interlacing in all directions they are principally of the same nature as those fibres seen in the muscular and fibrous tissues, a few elastic fibres intermixing with them. The whole composed from a strong tough but transparent tunic. 2nd. The middle coat—made up of one, two or more laminae of fibres agreeing in all respects with those white filaments seen in muscular tissue, sometimes almost free in one layer and in the other mixed with a variable proportion of fibres having the same aspect as the plain muscular seen in the middle lamella of arteries. These fibres have usually a circular direction in one layer and in a second be present they have either a longitudinal, oblique or irregular direction. Some think the veins of the extremities both superficial and deep have a layer of circular fibres externally and within this a stronger lamina having the fibres taking a longitudinal course while those of the trunk and heart have almost the
whole of these fibres assuming the circular form, may few being longitudinal. Now the brach the large have distinct muscular fibres; the form from that organ for a short distance, the same can be observed in the pulmonary veins. This oil is much thicker in some vessels than in others. The inferior vena cava and its branches become much thicker walls than the superior vena cava and its tributaries. The surface of the body being critical has been found to pour walls much thicker than any other part of a similar size. In a number where the more superficial a vein the thinner the walls, and in proportion as the size of a vein increases or diminishes so do the walls become broader or finer.

2. The internal coat has much more thickness and is not as easily ruptured as the corresponding external one, it is very fine and by reason of its physical properties is not so difficult of demonstration. It can be peeled off without tearing which is not so readily affected in the arteries. Internally it consists of a layer of epithelium, deflected on one or more laminae of fine elastic fibres, but not all possessing equal
tensity, and which from close longitudinal arti-
culations, with or without partitions of perfor-
atcd Membrane. The walls of the vein are sup-
plied with blood by their Branching Vasa. Some
observers have succeeded in tracing small
branches of nerves in them especially on the in-
sferior Cava, and the central Sinuses. The in-
terior of the vein presents duplications of thin
lining Membrane, named Valves, which have
for their office the prevention of any reflux of blood.
These folds consist each of two laminae of thin
lining Membrane having interposed between them
a quantity of dense vascular tissue strengthened
by fibers. The margin of these folds is continuous with
the wall of the vein, the one is free in its Curves,
both these margins are slightly thicker than the
end of the fold. One of the surfaces looks to the
Curves of the vessel while it is bathed by the
blood, the other corresponds and looks to the
towards the wall of the vein which is always de-
lated somewhat on the cardiac side by the
valves. Where the valves are fixed from the pa-
tion which they generally occupy against the
wall of the vein their free Margins come in
Contact and they form a common force towards the heart—where contains the blood and prevents its reflex at this point having a continuity in the respective directions. These vessels are single, that is, twist of one fold in these veins having a diameter of a line or somewhat larger than they, and line we meet with any few of them. At the opening of some small veins into larger branches we occasionally find a single eccentric fold. In ones of medium size we find them arranged in pairs, and this is the most frequent arrangement in the human subject, but sometimes we find them arranged in a row on the side of a vessel.

In large quadrupeds these, few, or one for one by the dozen uncommon. These folds are found in the small superficial veins especially in those of the extremities and in the femoral ones more so than in the deeper. These are the valves found in the veins of the brain, in the veins of the cancellate tissue of the bones, or in those of the spine, in the carotid, umbilical veins, some caro uterine, hepatic, and venal veins or in those of the lungs. They are sometimes s few in the intercostal veins larger
In some chronic healthy cases the power of distending themselves in a circular direction much more than the arteries and not unfrequently they are found two coats after injuries. Some play more frequently than the arteries. They cannot how the elongate somewhat so much as the latter. They are present of very little possibility. Their contractibility is at once shown by the elasticity with which a vein included within two ligatures can empty itself when punctured. Chemical agents as the acids, cold, &ca. decide contracting of that portion of a vein to which they may be applied.

History of Abscesses. John Hunter was the first who drew attention to the inflammation of the living membranes of the mind in a paper which he read in the year 1767 to a society for the improvement of Medical and Surgical Knowledge and which was subsequently published in 1793. In other diseases of mind the use of remedies enlargements had to such a period second any attention. He was lost to a knowledge of the disease from having frequently observed in horses when he was dissecting them.
...mists redder, thicker, and filled with pus. shoes he found had been previously laid in the feline area, and he stated that the inflammation extended down along these into the thorax, but the particular reason of their deaths he could not say unable to determine. Perhaps it might be he thought from the inflammation extending to the head or from the matter created from the interior of the pung nipping with the blood in that organ in a considerable quantity. He also mentioned that the exposure of the nasal cavities during operating and after accidents might be the cause of these secondary extensive inflammations which followed these causes and the reason why perhaps they extend beyond the scope of continued sympthies.

...that he was almost as well acquainted as we are with the nature of this affection is evident from the following quotation. "In all inflammations of the cellular membrane whether spontaneous or after accidents such as compone spraining and surgical operations the cause of the larger pung of the post-bone also inflame and their inner surface take an anemic suppuration or ulcerative action such present..."
according to the stage of the disease. The vein would have adheres formed in them, did not the
pulse often pass readily to the head with the
blood, but this does not always happen. An
adhesive inflammation often exists between the spot-where
pur did form and the vein so that an abscess
is formed in the vein and the pur can only
rise with that portion of the blood behind the
adhesive inflammation. He thus recounts his belief
that those deaths which before his time had been
decided solely to injuries by cutting, and
notes instance from those same cause. This he made
out in a man who died after an operation and
in whom adhesive inflammation was set up in
the vein above and below the orifice. In some
places was deep, in others shallow, had con-
spired on that side with the skin forming
a circumscribed abscess. Some veins of the scalp
had also suppurred, but the adhesive inflam-
motion had made in the pur which mixing
with the blood probably was the cause of his
death. Mr. Alexander a pupil of John
Hunter published three cases of this type of
the adhesive variety and he explains the mode
in which the constitutional symptoms are produced by thinking that the irritation of the Virud lining was extended to the heart—which was the agent producing such great disturbance.

Much about the same period 1792 Dr. John Clarke and Mr. Wilson noticed inflammation of the internal kind as an appearance first in some cases fatal subsequently to delirium. Dr. Clarke found pus in the trachea, tonsil and Mr. Wilson found the trachea lining thinned and partially obliterated, as also the tracheo-bronchial and phrenic, The trachea end had its coats thickened and adhesions to the surrounding parts, and it contained four cases of pus in that part below the diploic veins where it was contracted. Mr. Wilson had two other cases, what similar ones. Meets in 1794 gave an acco-

The case of a paroxysm of fever when in delirium, after death. The thickenings of the Virud coats attracted his attention and he therefore minutely inspected the whole of the veins and found those of the Virud much enlarged, thickened in their coats, and when cut into a puriform fluid escaped. The Virud was also engaged in the inflammation. Ricardus says after this fund the Virud
inflamed and the umbilical cord from the hand to the base full of pus in a child who died of pyrexia a few days after being born. Michel records a similar case where jaundice, edema, vomiting, fever and a few days later on examination the peritoneum was inflamed and contained purulent fluid in its cavity. Both the liver, pancreas and umbilical veins were inflamed and thrombosed. Michel also refers to the result of their experience that the inflammation of the umbilical cord is the cause of the fetal ascites, pyrexia fatal soon after delivery, and this disease stands almost always to the bowels and anus. Talotta in 1804 gives a case of inflammation occurring in a pelvic vein which led him to suspect that this event, by the opening, tunic had been carried into the circulation and produced the abscesses in the lungs and other organs observed on dissection.

The French pathologists remained ignorant of our remarks into the nature of this disease till so late as 1815 when Dr. Hodgkin wrote approvingly. Only one case of Dr. Gravitas was mentioned in their journals in the interim. This was the case of a man who had been
frequently bled for epilepsy, and in whom inflammation was set up in his phlegmatic vein which in some deep spot burst. The vein was found filled with pus from the wrist to the shoulder, its walls were thickened and red. A quantity of pus was found in the bladder tissue of the posterior surface of the same side, a quantity of effused serum was found present in the ventricles of the brain. There was fluid effusion between the pia mater and arachnoid, the latter of which was opaque, thickened, and inlaid. Some opaque films in the right side of the pleura, both lungs presented a number of petechial points varying from the size of a pea to that of an acorn, and greased with fluid while in some places was puriform. Very little attention was given at home to the observations of John Hunter, during the same period, but a list the appearance of Hodgson's work and the treating of Harvey, Carmichael, and Arnot. Now that notice to show which their importance demands. The work of Hodgson contains many cases of Monkey accidents, the Distention and in which were found on dissection pus or lymph in the lungs. The was ablation of their bulks to each
other and obliteration of thin Cataracts in some while
in others they are indicated and thickened and
adherent to surrounding parts. The symptoms produced
are like those of Staphylin fever having much bone
irritation and consequent debility their acute in-
flammations in general bring the sap to the vitiated
blood affecting the nervous system. Being in his
excess contracts the veins and arteries both as re-
gards their structure and function. The inflammation
of veins has the symptoms the same as those in
inflammations elsewhere, and it has the same ten-
dency to spread in a contumacious manner as the
inflammation of the lymphatics. Having in mind
these points of distinction explains the active and
constitutional symptoms peculiar to the latter.
Spreading of the Cataracts in which this inflammation
is frequently upon foot he gives the opinion of
his early that it was not an extension of the
inflammation to the trunk or to the membranes
of the brain or from the admission of pus into
the circulation. He attempts to be armed with
the best theory deducing as his objection that
these cases are the least rapidly fatal in which
after death no pus was found present but only
true adhesive inflammation and its products upon
His own theory was that considering the impaired
functions of the skin the extent of surfaced which
their combined area would give larger than any
of the air spaces was the principal and the dif-
ferent character of the inflammatory action in
one could attend to and throw idea to the matter
except the urine. The system is as much influenced
by arterial as by venous inflammation if of the same
extent of surfaced, but why it feels so much if
bene of the latter is that where it occurs it is
for continuously and affects much more of the
same tissue which is not observed as extends
the arteries. Since those cases in 1844 many ob-
servations have been made both in Britain
on the Continent as regards the causes and
symptoms of this disease and some of its patho-
logical appearances have been explained very
satisfactorily. Among the large list of authors
who have benefited as much as himself Broula
that Cruveilhier has done more than any other
discover contradictions the remarks of many others
by the course of experiments which he
performed and also by the process of disc-

Curwen
which he adopted as regards his own cases and
those of others. In fact I think his dictations like
those of our illustrious Countenance have but few
generally put forward as they should be and
in the concluding portion of this paper I shall
often and frequently notice many of his statements.
All the cases have at different points been offered
to be the subject of Philately but some are much
of their account than others. To constitute this class
those must be more than mere tidbits of the living
beneath, an appearance of great while the
inflammation continued during life, and if owing
the longstanding inhibition which Tages of occur
deeply affecting the living cells and is readily
explained when we consider that the blood
collely after birth in these muscles. When such
inflammation is present it have superadded
to elaps of a variable time, fine discolor in
picture not uniform but advanced infiltration
and the timing of their structure the effusion
of Congenital Lymph or part or the existence
of alteration in one or other of those surfaces
The inflammatory product be thrown
into the body of the skin Causing The Flaring on
its exterior forming adhesions to surrounding parts with inner lining, so in them before forming a false membranes, or may entirely fill up the cavity and obstruct the circulation. These products may become organized into cellular tissues and thus may be converted into a fibrous or fibromatous cord. The collateral vessels conveying away the blood quite ready for some time are fully dilated and set for the increased duty. This as well as lymph may occupy all these situations. If externally a diffuse abscess forms, if internally the jejunum obstruct the circulation and cause congestion of the blood and often the pus is found enclosed in a clot. Not unfrequently at one point the fluid may appear more or less than distance from the lymph which may be a part of the contents of the former watertight orifice. In one intestine the fluid in its course in series of abscesses. We must have in mind that all these cases in which fluid is found in the meso-colon is often in which phlegmonous present during life for this fluid may be introduced into from from abscesses on the external surface of the body, or as more frequently happens from intestinal ulcers, from cancerous growths.
of the sputum, and from frequent depositions in the lungs, which throw the voice from them, and other stigmas.

Syrinx in the vicinity is a much more frequent indication, and in the great majority of cases it is to be looked for as having its origin in the vessels in which it may be found.

The disease of the lungs differs much from those of the bat. Inflammation is common in the former case, and much less serious in the latter. It much be in fact, that it often exists without our being aware of it until a post-mortem reveals its presence, but seldom or never does a patient die of it. Blind have no decided habit. The American

sympathy in the arteries, for their branches are

treated equally to any pressure and when they enlarge, they become tortuous and dilated both in the trunk and also in the ramifications

growing into its ramifications, at respiratory and

systematogy deposit are exceedingly common

in the arteries but are hardly less rare in certain. In the veins because they are frequently found

us and then produced. Syrinx owing to their collecting in and propagating inflammation then

quickly. To these being connected with the function
of absorption and from the returning blood from scenes and spots after the heat of disease. The blood also circulates more easily in these vessels owing to its being equable and columbiform to the texture of its composition, and to the greater frequency of obstructions in these vessels. The merit of the veins is also of much lower grade than the arteries.

Woolcock paid the honor of first giving the term of propagating a name of phlebitis to this inflammation. It is a disease belonging to the physician and surgeon. The form of it is traumatic another much less try, is idiopathic or spontaneous. Cruikshank gives me another division 1st. Phlebitis is few cases. 2nd. Phlebitis of any extent in the substance of organs and 3rd. Capillary Phlebitis. It is also distinguished according to the grade of the inflammation, as being of the adhesion, suppuration, and the importance and useful division especially in regards the symptoms for the latter generally more fatal. As matter has treated, while the former is much less dangerous. The idiopathic form is of very rare occurrence indeed, but it has been induced by exposure to cold and cold air and from long standing in cold damp situations. Its origin can be generally at.
Signs both to come injury done to the neck, or from the inflammatory action exerted from some neighboring tissue to it. Wounds in the walls and periphery of the cavity of larynx by phlebotomy, empyema, and the operation of the placenta from the uterus after parturition, the application of a ligature to the apex of a divided or punctured vein for the arrest of hemorrhage, the operation for Verecŭing of the knee extremity as done at the present day, and still more frequently according to the old mode of care, are amongst the most frequent causes of the disease. In connection with the operation for incision. Abundantly thought that during the case the wound favor to the cooperation. Dr. Thorson thought that the lacer had caused to its both as regards its sharpness, to transverse wound, of the vein which favors gaping and exposure of the veins by cavity also liability and all authorities agree that bleeding with a lancet which has been recently employed in operating on some diseased part, of which thecut gives many examples from various cases being present on the instrument, since the patient is partly a fair chance of having phlebitis, some cutaneous thrombosis especially the widespread one more susceptible of
This disease than others and any derangement of the general
health predisposes. The grade of the disease whether it shall
be of the constitution or in the nature of one of the various
kinds of danger depends much on the state of the patient.
Disease like nephritis occasionally show itself in particular
ways, and to this possibly depended on certain unguessed conditions of the atmosphere, which
are generally prevalent at the same time and all
the circumstances which favor the onset of epilepsy,
epilepsy, etc., tend to precipitate it in a somewhat
and of its short notice degree. Many cases with
epilepsy are treated as broadened and others have regard to
the symptoms of epilepsy, nephritis, etc., as somewhat con
nected with the presence of pus in the blood. The ex
istence of ulcers is a constant cause of this lesion.
whether they be external or in more frequently happen
in some internal organ as the intestines or
in the intestines, as often deflection which we find
is so frequently followed by abscesses on the cause es
pecially in warm climates. It has followed the in
recent use of non-steroidal drugs and it has been
known to improve often passing a catheter into
a distended bladder. The irritation of a tooth
has spread pustule from inflammation. Sizing the
Occipital and dorso-tympanic, in which case paroxysm death was found in the sinuses of the brain, the fatal exhalations inflammation of infants has its origin in injury done to the brain, which induces inflammation in the cerebral vein and not, consequently, the brain is engaged in the mischief. The flow on the spine has caused the path from below. The application of pressure for four and of long duration has often caused inflammation in the subjacent veining. There have often caused its there having thron itself obliterated a saline aphasia behind the inner condyle at the base in a man, the only forms the employed lens pressure inferred with leaves of adhesive plaster. More configuration of the fluid as was first noted by Hodgkin has suffused for producing phlebitis, this is found in various veins. When a clot forms in that part which is getting on account of the slow motion of the blood, and extends up as high as the first collateral branch. At the clot is whirled the vein contracts and found incompressing and hard chord. Sometimes lumps often indue it especially disturbing ones, and if the subject hasiest of protruding, proceeds from the
The risk is much increased. Several Cases can on the
end of young practitioners dying from a fatal in-
flammation of the body produced by immersing
their hands in Acid Animal Morbidly to which con-
tained parts of a decomposing body. The Suicide
of a man in washing, a electrical surface caused
fatal to Dr. James. A knife used in scrap cutting
without producing this disease. The disease is Growth
attendant when employed for opening a small
ulcers on the hand. Sir Cuss's cases of gangrene of the
foot the same have been often found similar.

Johnes published a case where the inflammation of
extended to the case, eight ancile, and verticle,
its had its origin from a gangrene chillblain
on the hand. Chirchill in 1714 at the Hotel
Hew Made Glass Observations on the influence which
he found operating on, and injuries Connexion with
the toes had in producing this disease which he
thinks is principally resultant after such cases. He
has often found it spread along with elongation
the principal depth in individual organs, and
when suppuration had engaged a strong patte
breathy and surrounded or even extended into
the throat of the bone. The deposit in the vitreous
When we consider the consequences of inflammation and suppuration affecting the medullary membrane often for the length of the bone. We must here determine this suppuration may be of the pure enter the circulation he days then is to dangerous but as long as a protection depth is broken down and pus set in, a series of some injuries following occurring in a severe absorption of fluid from which all almost always proves fatal. The records of modern surgery are full of cases of this disease after performing an operation intermeddling with foreign body by ligature, knife, cautery &c. I have not frequently seen the results finish a patient in a fortnight who might otherwise have been living and enjoying life had because life summary had adopted. For thereby often says forces against all such proceedings, he often in the sudden death of his operation had done his own death of this sort which proved fatal and at a later date in his history he tells his clerk to the world quarter let one of them the fact general noting than his national supreme advice and silence. I would do the same and let it be the subject of information.
around the inflammatory action may extend to one
the hand or in the opposite direction to the distal
extremity of the limb. Contrary to the direction of the
blood, sometimes it spreads in both direction. The
point of the limb then begins to inflame and becomes pain-
ful. A little pus is seen over the surface before the
abscess appears. The limb affected becomes painful
swollen, tense, painful, and may swell, along the
course of the vessel. These signs are best pronounced
and in Belling disease there is felt a hard, fluctu-
ating tumour under the finger and pointing to the
patient acute suffering. The most frequent case
is that of the corresponding parts are affected, as well
as the vessel opening or appearance tells. Equally
more rarely the action is confined to the one limb
and the part immediately covering it.

The inflammation, action in the ring is usually
terminated by the escape of a current of blood
when at trouble it concurred. The action often occurs
at the opening of a branch, and when a branch
is frequently, covers all its junctions with the trunk.

The inflammation true in kind & that say it is
always to be a current to but at the first
when it does cease, the limb facing a branch.
or ends in a trunk. The extension of the inflammation to the brain and head—mentioned by Hunter as one of the probable causes of its fatal termination—has been generally found to have been caused by pathological observers. The inflammation seldom extends this far and the amount of surface engaged in fatal cases is very various, sometimes all or most of the area of an affected limb are engaged, not infrequently only the one in which it was first set up, and a few fatal cases are recorded where only a few inches of a vein was affected, which has led some to suppose that the whole of the inflammation was in contact with the nervous system. The symptoms have a very close resemblance to those produced by injecting acid and purulent fluids into the veins and as venereal fluids or other fluid of the inflammatory region is almost always present in the veins of those dying from this disease, much has accrued the occurrence of the secondary affection and of death to this particular as independent acting as a poison in the blood. Aristotle collected 14 cases in treatment of which was done in both palpably—
was found in the wounds at the first examination. In the case of inflammation, the
matter present is described in one of terms of adhesion (matter) in another. The case was engaged
as cases of lymph, and in only one case of Hodgkin.

When the case was brought to another lymph a fluid
was present. Reasoning from this it will be
evident to most persons that since an inflamed
product can only be lymph is almost universally present.

And since the presence of a similar fluid
into the wounds. Causes the same constitutional dis-
turbances, it is but a small deduction that the
Symptoms affect the wound in the same way. Hence, some
formerly assumed that the symptoms came on too
soon after the action had been cut up to be
thus accounted for but this must be all since
the microscope has come into such general use
offering a more vivid objection.

In from two to ten the twelve days after the receipt
of the injuries" says Mr. Smith "the secondary or Con-
stitutional symptoms manifest themselves. These much
betweenness and anxiety, destruction of strength and
depression of spirit, sense of weight at the posterior
frequent sighing or other breathing with frequent spitting of
apparent and indeed heating the patient at the
same time being unable to refer his sufferings to any
specific source. The common symptoms of four in
present— the pulse is rapid reaching to 130 to 140
per minute, but in other respects extremely palifiable,
weaker intermittent. There is often sickness and
violent vomiting especially of bilious matters itself
and some cases almost invariably occur vomiting
in the number of three or four in the course of an hour.
The general irritability and deep anxiety of the
constitutional increase, the nerves is excited and
the look occasionally wild and distracted. The
left to himself the patient is apt to mutter in
vocal manner, but in being directly addressed is found
calm and collected. The features are pinched and
the color of the whole body becomes of a duller
or even of a yellow color. Under symptoms of
increasing debility and at a time when the
local affection may appear to be in a great degree
abated, secondary inflammation of a violet
character and quickly terminating in effusion
of pus or lymph, which very frequently takes
place in situations remote from the original in-
pulp, the cellular substance, the joints, and the eye have been affected, but it is more particularly under a rapidly developed attack of inflammation of the mena of the chest, that the fatal issue usually occurs. Proton this is observed in the breath, and the patient proceeds by symptoms of extreme exhaustion, such as those of a rapid pulse, hot, dry, brown or black tongue, moist and lips drawn with cords, haggard countenance, low delirium.

The lung in the sin affected. This is the course taken to the patient, as there is life chance of the sin being obliterated by the adhering inflammation and the compression of the viscus; fluid, and the chance of the arrest of the inflammatory process is also much diminished. Inflammation of the latter branch of the brain is not an unfrequent occasion. Attendant of the sin is cord in formal instances; the eye is recorded by Higginbotham and Marshall. Hall as long perfectly transformed, the cornea burning and the contents of the orb, giving way. This has followed both in lifetide of the superficial and obliteration of the internal jugular vein.

From phlebitis occurs of the manner what variety the fatal effect is in agulation of the blood which
...in his experiments when he introduced a stick into the arm or injected some acid fluid. Resulting from this is a stagnation of blood and unless the lateral veins carry away the blood there is an effusion of serum beneath the surrounding parts. This is the pathology of one form of Rhigmacia alta, a disease affecting women when pregnant or after delivery, and in them the amount of danger is generally proportionate to the degree of swelling which is usually of a pale color. Inflammation of the lymphatics gives rise to a swelling of a rose color, thecold felt beneath the integuments is more distant and more superficial. These points might suffice for the diagnosis of the superficial set of veins and lymphatics, but nothing distinctive is known by which we can determine whether deep veins when affected be of one or the other quality.

By far the greater number of the cases of this disease terminate in the adhesion of the bulk of the vein to each other and its consequent obliteration. All the wounds of veins are then closed. It is in this same way that the uterine veins are closed after the separation of the placenta.
and in a similar manner as the ring of the umbilical cord, as well as those after an amputation or wound made. This form of the disease causes little disturbance to the system its effects extend little beyond the particular time when blood is expelled and fills its cavity. Absorption in time removes the whole if except its fibres which may either become organized or be itself also removed by the same process. Not uncommonly even although to this grade of inflammation be cut up and the wound be obstructed by the plastic lymph still absorption may hollow out a canal and the circulation be restored. Even this form is mortal if it affect the central sinuses. It dangerous when it affect a large trunk of the iliac or femoral for it occasions how much obstruction to the circulation swelling of. This form often passes into the supplicative especially as Chevalier shows when irritation is present along with inflammation. He has seen it pass from one to the other after repeated attempts to extract balls or dead bone from plugging a wound to about secondary hemorrhage, or from operating among parts the seat of an inflammatory action.
This Dr. grade of the disease is attended by the
appearance of pus which Councilman thinks is laid
down first not in the lining of the sin, but in the
center of its cell. Some of the old pathologists cling
to the thought, the clot organized and capable
of undergoing the inflammatory process but new
in the nature of the general case present. The same
is rare in case of circumcised slimy when the
lump in the center first forms pus because the
Clot that came from the break which preceded it
the same is rare in the tubercular deposits. Some
cases of the supplicative variety of the disease
having gone this far are checked and not
sought for. The pus is absorbed and the
phlegmation is either removed or organized
and its symptoms detecting its presence slow
themselves. Does the disease go on in its progress
the amount of pus increased till the sinus is filled
and the quantity of the phlegmone diminishes
the vein becomes shriveled when the pus forms
which may at last ulcerate a way for itself
towards the surface and be thus discharged.
Many instances of this are on record, viz
of abscesses being communicated with sins.
So long as the pus remains incalculable there is comparatively little danger, but as soon as if entering the cavity blood-turgor and abdominal symptoms which are tamponed fatally. Upon the body of a person dying of this form of the disease is examined incurable. Spinal fluid collections are found most frequently in the lungs and brain, but they may also be found in the cellular tissue, spleen, liver, kidneys, head or in the suprarenal and mesenteric cavities. So other brain of the organs affected can be traced to show to account for the presence of the fluid. In former times pathologists found after wounds and surgical operating abscess of the liver and lungs which they could not explain, and they exhausted their ingenuity in inventing things to account for the cause of death, for there cases were quite healthy and even able to breathe without the benefit of operation; and they were completely at a loss how to account for the rapid formation of these deposits. Confining (see second care) was in those days the only means of recovery. Even as in former days the only means of recovery from the effects of injury of the head is was done...
his day thought, and sympathy was felt upon such
a subject that it was his honour it gave life and
at once withdrew. When Hunter and More fully 
shewed pre-mature. Darwin explained that the 
link was
phlegm and not sympathy. Cullen in 1826
published the following statement: deduced from
his experiments. Every foreign body introduced in
the living subject into the various systems occurs
when its discharge by the lumbranes is impossible.
Vesicular abscesses completely resembling those on
infect on wounds, and surgical operations, and
such abscesses are the result of Capillaries phlegm in
the same viscera. Of the accuracy of this last
remark I am fully convinced in my mind, for the pain
often felt during life and the loafing
swellings of the limbs around observed in this
forme sufficiently to prove the fact that the pus
curried by the blood to the general viscera
has thus lighted up the superficial infection
from deposit in very in size. They are disseminated
through the tissues of two viscera which are
generally pierced to a pretty large amount in
their vicinity. The close observer of this book
of the philosophy of phlegm say that there is first.
Confinement of inflammation, which by and by becomes focused from the centre as from a nucleus and tends instead all over it. The question has been raised whether these surrounding organs would not be the cause of the pus carried thither by the blood raising up an inflammation in the organs, but most of the prudent hold that the inflammation produces and is the cause of the debility.

In the treatment of this disease our chief reliance is on the commencement of antiphlogistic remedies—indeed almost all their cases of traumatic phthisis which have been treated by it alone have proved fatal. The limb should be supported and preserved in a state of rest and luxury. Commencement with the curet of the bone should be applied along the course of the vein and a protest is attached—this is the most important part of the treatment. The joint must after wards be cured with a poultice or evaporating lotion. Diaphoretics, and Calum purgatives should also be exhibited. Mr. Sanson has treated phthisis both with tincture cætic, with smoked tobacco.

As to the constitutional treatment, bread which
Much reliance can be placed has yet been assayed
from the symptoms known to indicate a state of
great depression, stimulant must be given, by
the use of ammonia, quinine and Camphor in
the bath.

The proof of some of the propositions mentioned in
the course of the paper I shall briefly mention
a few of the experiments of Chamberlin which
illustrate the mode in which the action can
set up processes and also those how certain
facts have been brought to light by them.

Concerning the truth of which these last precisely
only a probability. The injection the general
fear of a dog with cold, irritating fluid such
a task in the direction, from the heart—having
previously broken down with a probe a few of
the valves, if the collateral veins laid the
fluid into the circulation, which happening
death at death, if not the limb swollen in
36 hours, and if we then kill the animal or
it dies, innumerable bloody extravasation are
found in the substance of the muscles and in
the cellular tissue of the limb. The large veins
are filled with an adhering Coagulum, and
also the small one of the peak where the extravasation occurred. Those belonging to the healthy part as soon
of the operation be again performed and the animal
no longer, we will find pus replacing the coagulating
of blood both in the muscles, and in the cardiac tissue.

When a piece of steel was introduced from the femoral
arm into the case and the dog was allowed to
live to the sixth day, the limbs were encased in the
infiltration extending up as high as the thigh.

All the veins of the lower extremity were full of
pus and on dissecting the muscles, small abscesses
were seen which proved to be granulating
wellsen with purulent matter. The knee joint
was also filled with pus. Being asked whether
of what became of the pus of a phlebitis, but when
infused with the blood, as from the irritation
is impossible, he was then forced to use because
of its matter low introduced what made from the
femoral or jugular veins. It was found in the
lungs; if sent in through the abdominal veins
it was found in the liver. If much be injected
the animal dies before 24 hours as if from asthma
or suffocation. Cataract: the whole is then found
in the lungs which are full of pus. 
If a smaller quantity be employed each of the lungs is surrounded after a time by an inflammation and distended by a collection of pus, and at a more advanced period a mixture of pus and tubercular matter. If the animal live a few months bacteria are found with a globule of pus in the center of each. Hafing gone down the medullary bility of the former he put in quicksilver the dog lived four or five days and re-swelling it all the latter was found in the lungs each globule still surrounded by an inflammation and cut wound entirely in the gymnastics of the pulmonary arteries. When burned and impregnated into the abdominal organs through one of the subcutaneous veins the found in a dog which lived 24 hours after the operation the liverudded with subcutaneous red patches slightly indurated containing each a globule in their interiors. Some of the passages had penetrated into the bile intra-intestinal veins affording each one of which the veins membrane was dark and blood colored by a subtle manganese. In a second dog which had an undefined
applicable be introduced some mixture into an ornamental vein, in ten weeks thewhole the animal. The mixture contained throughout many solid, liquid and agglomerated particles of some. The vein also contained a vein both on its surface and in its substance. They are composed of some small fibres of vitreous matter, then a紧紧围绕 of a non-venomous nucleus of quicksilver in the centre. The blood cells as it moved through the vein, introduced into the ring is arrested at various apertures of the capillary systems. Thence the blood enters the capillary phlebitis and enters not only the limb inflaming which adjoins to the above cases, that these matters are most frequently arrested in the limbs, and in the liver and these may cause tumors, provokes the capillary system in succession and cause inflammations in all parts of the body. All Medical men have noticed the great difference in relation to secondary effects between usually of long standing and the suppuration of recent wounds. Abscesses of long life often disappear very rapidly and there is no injury done to the health, although the pus taking the blood
and is again eliminated, but the difference seems to depend on the fact, whether the pus has been adhered or whether it be generated within the vessel and then be introduced without any change or preparation. In the former considering the moment of absorption, its character is altered and it is fitted for entering among the impure blood to be thrown off by its proper channel. In the latter, it acts as a poison and soon works fatal inflammation in a variety of situations.