

his angels, whom she had seen about her. She had given no signs of pain, and when asked if she had felt any, she exclaimed with astonishment, "What! have you cut off my leg?" When the dressing was completed, still without her feeling any uneasiness, she was put to bed, and then she began to suffer from the wound, as has occurred in all the cases of amputation. The Academic has not pronounced on the dangers or disqualifications attending the employment of the vapour of ether.—*Dublin Medical Press.*

*On Scrofulous Inflammation of the Eye:* By A. JACOB, M.D., F.R.C.S.I., Professor of Anatomy and Physiology in the Royal College of Surgeons, and one of the Surgeons of the City of Dublin Hospital.—That the eyeball is sometimes the seat of a species of inflammation justly entitled to the denomination of scrofulous, from its symptoms and results, will not, I believe, be denied; but how far that inflammation is an immediate consequence of general constitutional derangement, or a concentration of a specific disease pervading the entire system, may not be so freely admitted. It may be assumed that the inflammation is not so much a local outbreak of scrofula as an inflammation caused by exposure to cold, and modified by that disease. The distinction is, however, not perhaps practically of importance, because in either case the peculiarity of the affection arises from its specific character. But while it cannot be denied that the eyeball is sometimes the seat of scrofulous disease, it may at the same time be doubted whether it is so frequently attacked by it as is generally supposed; for in many cases assumed to be of this nature, there is really no evidence of the existence of any such malady, either in the system at large or in the part affected. When treating of rheumatic and gouty inflammation of the eye it was necessary to enter at length into an inquiry as to the occurrence of such species of disease of the organ in any case; and assuming that to be established, it became necessary to consider how far the visible changes in the parts affected afforded conclusive evidence as to the fact. In treating of scrofulous inflammation of the eye, it becomes equally necessary to inquire whether the appearances are so peculiar as to justify the practitioner in pronouncing the disease to be of this peculiar specific character; or in other words, whether he can form a correct diagnosis from the changes in vascularity, diminution of transparency, or alteration in colour of the structures engaged. The common practice of assuming that certain forms of inflammation of the eyeball and conjunctiva are scrofulous, because the patient does not appear to be in a vigorous state of health, or because the disease does not yield to depletion or other usual remedies, leads to erroneous views and unsuccessful practice, and should be abandoned. No inflammation of the eye should be pronounced scrofulous unless the local disease or the constitutional peculiarities fully justify it, and it therefore becomes necessary to consider carefully what are the characteristic symptoms.

If a person of delicate frame, with fair skin, light hair, and blue eyes, be attacked with iritis or other form of internal inflammation of the eye, it is often assumed that such inflammation is either the immediate consequence of scrofula pervading the system, or at least that it has been induced by exposure to wet or cold, it is so modified by the constitutional disease that it should be considered scrofulous. It seems even sometimes to be supposed that the disease is the local manifestation of a malady affecting the entire frame, a concentration of the specific poison, if it may be so called, necessarily accompanied by inflammatory action. This assumption is, however, far from being justified by experience and careful observation. It remains, I believe, after all, to be proved that persons of fair skin, light hair, and blue eyes, are more prone to scrofula in any form than those of a different complexion, and I am convinced that true scrofulous disease affecting the eye is not more frequently found to occur

in such subjects. On the contrary, indeed, true scrofulous disease of the eyeball probably occurs more frequently in persons of dark coarse skin, black hair, and deep brown iris. The practitioner must therefore form his opinion as to the character of the inflammation from some more certain indication. His object should be to determine how far his treatment is to be modified in consequence of constitutional diathesis, and to attain this object he should first ascertain with certainty whether any specific constitutional diathesis be present or not. To establish the fact of the existence of scrofulous disease in the constitution with this view, it may not be necessary to have evidence of the presence of scrofulous tubercle, or other conclusive proof of the active progress of the malady; but there should be some more characteristic marks of it than those afforded by the tint of the skin or the general formation of the body. A thick upper lip, brawny prominent cheeks, and tumid nose, accompanied by coarse greasy, and dingy discoloured skin, will, when present, enable the practitioner to form a safe estimate of the state of the constitution: and if cutaneous excoriations at the angles of the mouth and margins of the nostrils, as well as at the edges of the eyelids and about the ears, be also present, and causing enlargement of lymphatic glands beneath the chin and angles of the jaws, little doubt need remain of at least a predisposition to the specific malady. I have also to remark that although I have denied that a fair skin and light hair necessarily indicates a scrofulous constitution, it must be admitted that extreme transparent delicacy of the cutaneous surface permitting the subjacent blue veins to appear ramifying beneath it, and displaying a florid brilliancy of colour of the cheeks and lips, is evidence, if not of that diseased state of the system, at least of a very feeble state of constitution, entailing great liability to destructive local inflammatory action. To enlarge on this subject would, however, be to write a treatise on scrofula, and I must therefore leave it to the practitioner to determine from his own resources how far constitutional symptoms justify him in modifying his treatment in each particular case which comes under his care. He has to be on his guard against pronouncing the disease to be scrofulous on insufficient grounds, while at the same time he has to guard against the risk of treating it as a simple uncomplicated attack, although truly specific in its nature.

In endeavouring to determine correctly the state of constitutional or local disease justly entitled to be considered scrofulous and to restrict the term to such state, care should be taken that we do not lose sight of the real object aimed at in our attempts to secure accuracy of nomenclature and arrangement: that we do not, in other words, overlook facts because we differ as to terms. Many who pronounce an inflammation of the eye to be scrofulous, probably do not thereby mean to assert that there is scrofulous deposit in the lymphatic glands, or any other form of local disorganization or constitutional condition undoubtedly of this nature; they probably mean only to intimate that the inflammation is of peculiar character, because the subject of it presents certain appearances of defective bodily health. The meaning intended to be conveyed perhaps is, that the inflammation will pursue a protracted and destructive course, because the powers of assimilation and growth are weak, the circulation feeble, and consequently the entire frame destitute of vigour. Of the correctness of such an inference there can be no doubt, and it therefore does not matter much as to the terms used in arriving at it. Deposition of fat, instead of growth of muscle, pallid skin, and feeble circulation, in consequence of ill-assorted or deficient food and defective respiration, are indications of a state of constitution calculated to modify the local inflammation as much as any positive proofs of the existence of specific scrofulous disease. This state of the system so often assumed to be scrofulous is of such frequent occurrence, and is so often the forerunner or cause of the