

and strychnine may be employed to assist the action of the large intestine.

I have endeavoured thus to sketch out roughly for you some of the cases of dyspepsia in which only one of the digestive viscera is involved. I think that in your future practice you will be able to recognise some of these cases when you see them, and I think it will add much to your satisfaction in the treatment of all cases of dyspepsia, if you make the attempt to analyze the mass of symptoms and assign them to the different viscera to which they belong.—Vol. ii., No. iv., *American Clinical Lectures*, edited by E. C. Seguin, M.D.

REPORT ON EIGHTY CASES OF CHOREA.

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In the *Philadelphia Medical Times* of January 3, 1874, I published a digest of thirty cases of chorea, which was of interest not only on account of its having been the first of the kind ever made on this side of the Atlantic, but also as showing certain peculiarities manifested by the disease as it occurs in this country. Since then forty additional cases have been reported in the same journal for March 27, 1875, by Dr. Chas. K. Mills.

The present collection embraces fifty new cases, to which, for more extended study, I shall add those previously reported. The majority of the cases were obtained as before from the case-books of the Infirmary for Nervous Diseases; the remainder were under Dr. Weir Mitchell's private care, the notes of which he kindly gave me, or were seen by me during my terms of service at the Children's Hospital.

In studying the eighty cases in regard to the age and sex of the patients, I find that there were—

Under 10 years of age	23 cases	9 males	19 females
From 10 to 21 "	52 "	18 "	34 "
Total	80	27	53

The preponderance of the females over the males shown by this summary agrees with

the usual clinical experience, and may be explained by the greater liability of the former to disturbance of a nervous kind, and to their greater susceptibility, particularly during the age of puberty, represented by the second period of the foregoing table, to one of the great exciting causes of chorea, viz.: fright.

Side affected.—In twenty-seven cases the choreic movements were found to be general; in eleven to be general, but chiefly marked upon the right side, and in ten to be general, but better pronounced upon the left side. In thirty-two cases the affection was absolutely unilateral, being confined in twenty instances to the right side, and in twelve to the left.

The reports on chorea published at different times have varied greatly in regard to this point, but I am inclined to think that the more modern statistical accounts all point to the right side of the body as being the side especially liable to be affected. The present table agrees with the opinions expressed by such high authorities as Drs. Hughlings Jackson and James Russell, and it also coincides with the results obtained by me in 1874; but it is directly opposed to the statements of a number of French writers, among whom may be mentioned Ruz, Trouseau, and Sée.

A certain number of cases of chorea beginning unilaterally ultimately become bilateral; but by far the greater number remain so throughout the course of the attack. Another, though a very rare result, is the passage of the disorderly movements from one side of the body to the other; thus, for instance, converting a right-sided chorea into one of the left side.

In regard to the alleged cause of the disease, in twenty-two cases out of the whole number none was discovered. In eleven cases it was attributed to fright; to rheumatism without heart disease in eleven cases; to rheumatism with heart disease in seven cases; to heart disease alone in six cases, and in three cases, though no actual exciting cause was found, to a strong hereditary predisposition to chorea.

Out of the twenty remaining cases the disease was ascribed to violent pain in seven instances, and to mental worry and miscellaneous troubles in thirteen.

The relation between chorea and rheumatism,