

had commenced about twenty years previously, and which often, especially in cold weather, was productive of considerable suffering. Several medicines had been tried both in Scotland and Canada, but without benefit. In this case I resolved to make a trial of extract of hyoscyamus and camphor, and accordingly instructed her to take two and a-half grains of each twice a day. The result was most gratifying. Before a week was ended she was quite well, but to increase the security, the medicines were continued for two weeks in the whole; she then had taken seventy grains of hyoscyamus and the same of camphor. I am happy that she has not had the slightest return of phlegalgia, though a good deal exposed to weather of every kind.

I have since met with several recent and not severe cases, which yielded much more readily and speedily to hyoscyamus and camphor, than they would have done, I am satisfied from previous experience, to the remedies I was formerly in the habit of employing. An investigation is still necessary to determine, whether the cure depends upon one or both of the medicines I employed; but having succeeded in a most obstinate and protracted case, a parallel to which may not occur for many years, I consider myself warranted in laying this paper before the medical profession. Debility being more or less connected with the disease, it is possible that cases may occur requiring stimulants besides, or if debility be kept up by some cause in the system, that this cause must be removed before hyoscyamus and camphor can act beneficially.

Phlegalgia oris having its seat in the mucous membrane, more extended observation may perhaps detect it in the stomach or alimentary canal. In the first very protracted case, years after the commencement of the affection of the mouth, the patient fell and struck her side with considerable force, against the end of a piece of wood. For a long period afterwards chords of false membranes, evidently from the interior of the colon, were voided from time to time afterwards, in dysenteric attacks. The same patient informed me, that little pieces of gelatinous exudation occasionally peeled from the edges of the root of the tongue.

A few months ago I was consulted by a middle-aged female, the mother of seven children, who immediately after a miscarriage, at the beginning of the year, had an invasion of the symptoms of phlegalgia oris, the sensation of scalding aggravated by pungent substances extending down the gullet into the stomach. Acidity was often present, and attacks of dysphagia, squemishness and vomiting were not unfrequent; the bowels were constipated; she