

that necessitated his leaving his occupation, that of shovelling grain in the Company's buildings.

*Previous History.*—Up to time of present illness, had enjoyed perfect health. While at work on Tuesday, felt considerable itching on left arm, a few inches above the wrist; supposed that he had been bitten by a fly, (slaughter house in vicinity); the little red point, from frequent irritation caused by scratching, increased in size, and continued to trouble him all day. A vesicle then formed; and the arm next morning commenced swelling. To prevent the inflammation from extending upwards, he firmly tied a handkerchief about three inches below the elbow, and two inches above the vesicle. He still kept at work, although suffering considerably; passed a sleepless night, and consulted me on Friday morning.

The vesicle was about the size of a ten cent piece, well marked and umbilicated, with a very dark centre, surrounded by a halo of angry inflammation. Tongue furred; pulse 90; bowels costive. The inflammation extending to the deep tissues of the arm; swelling considerable, this, however, at the time, did not extend beyond the ligature he had placed below the elbow. Although rather late, I thought it well to puncture the vesicle in several places, when a serous fluid escaped that darkened the point of the bistoury used, and apply nitric acid. Gave patient two pil. cath. co., and prescribed the following:—

R. Quinæ sulph., 3j.; ferri perchlor., q. s.; aquæ ad., ℥ viii.

Sig. Coch. mag. ter in die ante cibum.

I directed the man to return to his boarding-house and apply poultices—fresh ones every few hours. Pain very severe; sleep procured by using chloral, as follows:—R. Chloral. hydrat. ℥j.; Aqua aurant. syr. simplex., 3j. āā.

Sig. Take a fourth part when required.

The chloral acted very well, and was not attended by nausea; it was also taken in smaller doses during the day, and allayed the pain considerably. Saturday.—Swelling increasing; arm very painful; shooting pains running from the shoulder down to tips of fingers; hand increased in size; pills have acted freely; patient very anxious. After removing his ligature, the inflammation gradually crept up the arm; axillary region very sensitive; pulse ninety-four and hard; increased temperature of left arm well marked; appetite indifferent; uses tonic regularly.

Sunday.—Patient worse; high fever; pulse 100, hard; was slightly delirious through the night; per-

sistent elevation of temperature of left arm; appetite poor; uses poultices as directed. Inflammation still extending; line where ligature was applied not so well marked; complains of great pain; ordered full diet and stimulants in moderation; hand dark and congested, skin on dorsal surface presenting an ecchymotic appearance; fever higher; pulse 106; bowels regular, urinates freely; requires larger doses of chloral to procure sleep; tongue cleaner. The severe symptoms in this case lasted some fourteen days. At night the patient was frequently slightly delirious, possibly due to the chloral. Poultices were kept up for thirteen days, of the three kinds used, viz.: linseed meal, bread and milk, and carrots grated; the latter I think acted more satisfactorily than the former.

After the eighth day the inflammation ceased to spread; he at this time described the pain in the palm of the hand as lancinating, with a feeling that the hand would burst: no pus, parts œdematous, pitting deeply on pressure; fingers apart, due to swelling. The pulse during this period remained high, varying from 94 to 110. After the ninth day the slough commenced to separate, and came away at the fourteenth day, leaving a deep pit, fully as large as a full-grown filbert. Pain gone; swelling rapidly subsiding; can flex fingers; skin of hand peeling off; pulse 88; sleeps and eats well; tongue clean; bowels regular. Sore treated with a weak solution of carbolic acid, one to sixty; edges brought together by compresses. The granulating process was extremely slow; the skin surrounding the sore presenting a hard raised edge, showing little disposition to heal. By the twenty-seventh day it had nearly closed; when patient would return to his work. The healing process went on favorably, and the patient had no further trouble.

The solution of chloral used was made according to the Paris recipe—the orange flower water and simple syrup cover its pungent taste, and causes less of a burning feeling in the fauces than the simply aqueous solution. Much of the nausea and alarming symptoms caused by using chloral, have been due to an impure article being employed. In other cases it has not been fairly tried. The solution, if carefully prepared and kept well stopped, will remain good for two and three months. Under no circumstances should a solution be used that has a strong odor of chlorine. It has acted like a charm in two cases in my practice, of incipient delirium tremens, one of severe pleurodynia, one of puerperal mania, and in hysterical excitement. Many patients cannot take it.