

been perfectly convinced, not only that the greater proportion of deaths after wounds, in our metropolitan hospitals, result from the effects of disease in these organs, called into activity by the accidents which the patients have undergone, but also, that any operation or wound, however trifling, will be extremely liable to prove fatal in persons whose kidneys are in any degree suffering from acute congestion, or from any condition at all approaching to that state: and although my data are less complete upon this point, I believe that the same observation will hold good with regard to those who are the subjects of active, splenetic, or hepatic disease.

My attention was first drawn to the above fact by observing that the morbid character presented by the serous membranes and other structures, together with the appearances of the effused fluids &c., in those who died of acute internal inflammatory attacks consequent upon operations or injuries, (especially where the primary wounds were at a distance from the parts afterwards involved,) almost invariably bore a precise resemblance to those which so characteristically distinguish the inflammatory affections of the same parts which are known to result from Bright's disease of the kidney;—and, where this has been the case, I have seldom failed to discover that there has existed, at the time of the patient's death, some form of disease of the kidneys sufficiently intense to have interfered greatly with the proper action of those glands, and thereby to have been capable of setting up a disposition to the occurrence of fatal mischief in the serous membranes or in other important structures.*

I would be departing too much from the practical intention of these remarks to enter into an extended investigation with regard to the precise manner in which a wound of some distant part of the body—by producing an increase of diseased action in kidneys already suffering from a great predisposition to vascular lesion—is eventually followed by inflammatory affections of various serous, mucous, and other structures. It may probably be sufficient to state, that the occurrence of such a train of actions can often be traced with the utmost precision; but there can be no doubt, that the state of general vascular excitement which succeeds most operations and accidents is extremely liable (by giving rise to additional congestion in kidneys already in a diseased or failing condition) so completely to interfere with their powers of secretion, as to induce the destructive effects which invariably result from unrelieved suppression of urine, and the consequent accumulation of urea in the blood;—that is to say, where the secretion is suddenly and completely checked, œdema of the lungs and cerebral effusion—where it is more slowly and partially suppressed, serous inflammations and effusions, and other extensive organic lesions.

There can be little doubt that structural diseases of the liver and spleen are also liable to become aggravated by the vascular excitement consequent upon wounds or other injuries to the surface of the body, and (in consequence of this further derangement) to give rise to morbid effusions in other parts. The influence which organic diseases of the liver has in producing unhealthy actions in various structures, the serous membranes more especially, has long been recognized. Whether structural disorder of the spleen can by itself, effect similar injurious results, is a point less easy to decide: but it is certain, that some severe

* Dr. Bright has remarked, that "where the secretion of the kidneys is greatly deranged, the serous membranes seem always ready to become the seat of inflammatory action."