

his care in University College Hospital, where the use of phosphorus was followed by almost complete restoration to health, the white corpuscles had diminished to the normal amount, the spleen did not however regain its normal size, but this appeared to have no deleterious influence. It does seem from recent observations that people may live and enjoy fair health, even after the removal of the spleen. M. Pean \* has removed the spleen in two instances with success, and it appears that no injurious effects have followed, both patients being in good health. What influence an enlarged spleen may have on the health remains yet to be seen.

In the present case although phosphorus failed to save the patient's life, it cannot be denied but it had a remarkable influence not only in reducing the size of the enlarged spleen, but also in diminishing the number of white corpuscles, and we are strongly of the opinion that had we recognized the disease sooner, and given the phosphorus earlier the result would have been different. The phosphorus (except during the first week) was well borne, during the last few weeks he was steadily taking 1.50 of a grain three times daily, without its causing him any inconvenience.

Dr. Moxon of Guys' Hospital lately read a paper † before the Clinical Society, on two cases of leucocythæmia. In both cases the treatment by phosphorus was employed, but with an unsuccessful result. One of the cases however was complicated with a malignant tumor, which compressed and obstructed the bile duct at its entrance into the duodenum. This case is certainly not a fair test for the treatment by phosphorus. In the discussion which followed the reading of this paper Sir Wm. Jenner said he had a case of leucocythæmia lately under his care, where the treatment by phosphorus failed to do any good whatever.

In our patient the diarrhœa from the first was obstinate, and no doubt it was the immediate cause in bringing about the exhaustion from which he died. For sometime previous to his coming under our care, diarrhœa alternated with constipation, but from the time that the disease was recognized, with the exception of three days during which the bowels were confined, diarrhœa was always present. At first it was not severe, but during the last four weeks of his life, it was profuse and little at all influenced by the most active treatment.

\* Lancet, August 26, 1876.

† British Medical Journal, March 11, 1876.

Whether the inflammation of the lymphatics in the left thigh was a merely accidental complication, or *not*, we are unable to say. In this connexion it may perhaps be worth mentioning that the patients' father, a man aged 77, died 24 hours before his son, from idiopathic erysipelas of the right leg and thigh. Both lived in the same house. In concluding these remarks, we would state, that after the treatment by phosphorus was commenced, no other drugs were employed, with the exception that the red oxide of mercury ointment was continued for about a week.

#### (II). LEUCOCYTHÆMIA LYMPHATICA.

We have unfortunately only very imperfect notes of this case. The patient resided a long distance from us, and it was only at considerable intervals that we saw her. We did not see her for sometime previous to her death.

Miss I—, aged 20, first consulted us on the 19th of October, complaining of swellings on her neck and shortness of breath. The disease is of a little more than two years duration, and first showed itself as a swelling on the right side of the neck, a little below and in front of the lobe of the ear. This swelling gradually increased and extended. About fifteen months ago the other side of the neck commenced to enlarge and has been gradually increasing in size ever since. Up to the commencement of the present trouble she enjoyed excellent health. The family history presents nothing of importance. She is medium-sized, weighs 130 lbs., muscles well developed although flabby. There is no emaciation but she has an anæmic appearance. The face has an anxious expression with a cyanotic hue. She has had no menstrual discharge for four months, but previous to this she was quite regular.

PRESENT CONDITION.—The cervical glands on both sides of the neck are enormously enlarged. The hypertrophied condition of each separate gland can be distinctly recognized, differing in this respect greatly from scrofulous glands. The skin over the most prominent parts of the right neck has a bluish tinge, and in two or three places there are red cicatrices, caused by the application of an escharotic. The following measurements were taken:—

(I.) From the lobe of one ear passing over the