

quantities, when they acted as local irritants, not producing as much effect on the cerebral system as an equal quantity of alcohol. The above cases, however, show that they must be taken, "*cum grano satís*."

The treatment to be adopted is merely to sustain the vital powers till the effects of the anæsthetic passes off. The stomach pump appears useless, as although applied in three of the above cases within forty minutes of the accident, the matters removed showed no trace of chloroform, while in one of Mr. Spence's cases it excited violent retching and vomiting so as nearly to asphyxiate the patient. The warmth of the body should be maintained by hot external applications, and the respirations by electricity or the various artificial methods, using as little violence as possible. At the same time stimulating enemata might be given, those containing ammonia being preferable to alcohol.

HEPATIC NEURALGIA.

BY HENRY BOGUE, M.D., VICTORIA, ONT.

I propose to give you a few cases on the disease termed "hepatic neuralgia" (Hepatalgia of the French). As the terms applied to this affection are different, the fact would seem to imply a different pathological condition. I am, however, of the opinion that the condition answerable to the symptoms cannot always be satisfactorily made out. Great pain is always present when there is passage of gall stones, congestion of parenchyma, stoppage of gall duct, and in gastrodynia.

In hepatic neuralgia, congestion is probably at the bottom of it all; for by unloading the portal system, immediate relief has always followed. The cases are scarcely worth recording, but from the fact that we seldom see anything similar in journals. Still, such cases make up a considerable item in the medical man's practice in the country; and therefore, such being the case, he should be ready with the most appropriate treatment. The first case occurring in my practice was in the year 1860. Mrs. H., æt. 45, was seized with great pain in the right hypochondrium shooting through to the back; pulse rather quick, 90; great perspiration; some thirst; great tenderness over the part affected; respirations, about 25 per minute.

I ordered search for gall stones, but none were found. Treatment: bloodletting, 8 ozs.; hot poultices; opium, grs. 2, every 4 hours, with 2 grs. of calomel; as a diaphoretic, spiritus mindereri and nitric ether, every 4 hours; smart purging, followed by pot. nitrate and pot. bi-carb. *aa.* five grains every 8 hours. Recovery complete in about a week.

Mrs. M., æt. 36, mother of seven children, was seized with great pain in the right hypochondrium, extending to the pit of the stomach; pulse small and quick; some nausea, but no vomiting; pain paroxysmal; unwell sometime before. Was called hurriedly; bled to 8 or 10 ozs. from foot; put the feet in hot water, and administered calomel and opium every two hours for two or three doses, followed by a brisk purgative. I also used diaphoretics, quinine and tinct. ferri. mur. She got over the attack in a few days, although not perfectly well, and has had no more attacks since. Was this passage of gall stones, or simple congestion, stretching the peritoneal covering?

Mrs. P., seized with great pain in the right hypochondrium; worse than any case yet seen; bled to 8 or 10 ozs.; full doses of tinct. opii; calomel and opium, *aa.* 2 grains, 3 or 4 powders: brisk purge; nitro muriatic acid in full doses; pot. bi-carb. and pot. nitrate, *aa.* five grains, every 6 hours. She recovered in a few days, and continued well for a longer period than any time before. This case was treated for a long time by other medical men without success.

Mr. Henry B., of New Hamburg, complained for eight or nine months of sudden and severe pain in the right hypochondrium, when he was obliged to leave off work and call in a physician. Every week or two the pain would recur, and this state of things continued for eight or nine months. Being a stranger, I was called. He was bled to eight or nine ozs.; tinct. opii. was administered in full doses for a few hours,—then calomel and opium, followed by brisk purging, and diaphoretics. Quinine pot. nitras and sodæ bicarb were given three times a day for a few days, when he became quite well, and continued so for some time, until he escaped my observation. His cure is remarkable, from the fact of his being under treatment so long without benefit.

The next case was a Mrs. P., advanced in life, about 70 years of age, who was seized with great