

The premonitory signs of its approach are generally found to be of a well marked and definite character; so much so, that in many instances he who has undergone a previous attack can foretell with unerring certainty the coming of a "fit," as it is termed, some time anterior to the appearance of the unwelcome visitor. The first symptom which excites observation is, a considerable increase of nervous irritability, manifesting itself in sudden explosions of temper, without material cause, and a general peevishness, and hastiness of manner, during the day-time. At night, the sleep is restless and unrefreshing, disturbed with frightful dreams, tossing of the limbs, &c. &c. The appetite (though not invariably) falls off. There is gastro-intestinal derangement, with a sense of fullness and oppression subsequent to meals; dyspepsia and heartburn are pretty constantly present. As the symptoms become aggravated, the patient is annoyed with flatulence, accompanied with sour eructations; the tongue is foul, either coated with a thick covering of yellowish fur, or in case the irritation of the primæ viæ reach a greater height than usual, is of a preternaturally red tint, dry, and glazed at its edges; there is a bitter, or at all events, a vitiated taste in the mouth, especially on first rising in the morning; head-ach in those of plethoric habit; the bowels are costive or relaxed, in either case the secretions are dark and offensive.† The urine is of a saffron tinge, often scanty in quantity, and charged with lithic acid. These form the more remarkable prodromata, and, curiously enough, are observed to possess a distinctly remittent character, the exacerbation taking place in the evening; the remission in the early portion of the day, during which the sufferer is comparatively better; (indeed, all the phenomena of gout affect the periodic form certainly much more obviously so than any other disease of similar type.) The foregoing train proceeds, with or without increase of severity, for several days, or even, may, in some instances,

lotion; change often.

8th.—No change. Continue applications and medicine.

9th.—Better.

The case recovered at the usual period, in young subjects, of twelve days, without let, help, or hindrance, from any medical treatment put in force by me. Query—Will any one say this case was cured. No; the patient "got well." This is the philosophy of the matter. From the first recipe traced on sand by the staff of Anaximander or Phercydes (the inventors of writing) up to the "fit *nistura*" of Dr. ——— (who has studied Latin grammar in a very peculiar manner indeed,) have we one which we can positively say will produce a certain and definite effect? No; not one. Medicine is then, as yet, nothing, save a nice balance of contingencies.

† Dark and offensive dejections are commonly present at the commencement, and during the progress, of this as well as most other disorders connected with lesion of the functions allotted to the organs of assimilation and nutrition, &c. The pathology of the gastric intestinal, and biliary secretions offers a wide, though not a very inviting, field of research for some inquiring disciple of the Liebig school of investigators. Let me enumerate a few examples.—In disorders of children, (particularly those affecting the head,) we observe the stools to be slimy, dark-green, and somewhat gelatinous. If calomel be given freely, it will also cause a greenish hue in the stools; why, we know not. Again, in some forms of chlorosis and dysmenorrhœa, the excretions are so dark as to nearly resemble tar in colour and consistence. In the Asiatic cholera, the "rice-water evacuations" are mentioned by every writer. The cause is not accurately known, and the fact is consequently left as it is found. In hœmery, the food passes in a great measure unchanged. In jaundice, the stools are like mortar in colour and consistence. In dysentery, the latter stage is characterized by discharge of a fluid resembling nothing so much as the washings of raw flesh, accompanied with shreds, either of coagulable lymph or epithelium, probably both. Again, there is a striking difference in the motions of a patient suffering under diarrhœa, and another with mucous enteritis. In melæna, the state of the stools is pathognomonic of the disease. If we administer the carb. ferr., the dejections speedily become of inky blackness, &c.

be lengthened to the duration of a fortnight or more, prior to localization of the disorder. Of the near approach of the "fit," the patient is warned by being seized at intervals with flying or transitory pains in different parts of the body, mostly affecting those portions of the frame already weakened by previous illness; they are sudden and transient in their attack, not dissimilar to those achine sensations in the cheek, head, stomach, or joints, which are so frequently occasioned by cold, and, like them, are as rapidly transferred from one place or organ to another, and often as suddenly disappear altogether for a short period. (It is at this stage that instantaneous relief may sometimes be given by the administration of a stimulant, when the pain or spasm incident to the derangement of organic action is in a moment transferred from the head, stomach, bowels, or back, to the extremities.)

These phenomena, then, are the heralds of the inflammation, which, in the vast majority of cases, takes hold, in the first instance, of one of the smaller joints of the lower extremity, either the metatarso-phalangeal articulation of the great or little toes, very seldom, except secondarily, of the intermediate ones. The seizure is, in nineteen out of twenty cases, during the night, or rather in the morning, between two and four, the patient being suddenly awoken by a violent pain in the part. Swelling does not in all cases immediately supervene, but the joint is exquisitely tender, the weight and heat of the bedclothes being nearly insupportable. The adjacent veins are observed to be somewhat turgid, and the integuments shining and tense. Partial relief from pain is experienced during the earlier part of the day; towards evening the symptoms undergo a material aggravation, and at the same periodical lapse of twenty-four hours, the exacerbation will have reached its height, pursuing a similar course of remission and increase for a time, the length of which I have observed to depend for its duration, first on the extent and severity of the attendant symptoms; secondly, on the interval which may have elapsed since the last attack. Supposing retrocession or metastasis not to happen, the course of the local inflammation will be the following:—Swelling of the joint and parts adjacent, accompanied with a considerable elevation of temperature; if intense, a circumscribed pale-pink flush is seen on inspection. This, however, is not always present, as the integuments often seem rather paler than natural, particularly if there be an imperfect or partial development of the local disorder. The pain is well known to be peculiarly agonizing, burning, and lancinating in its character, (different from the "gnawing" sensation of rheumatism.) Resolution is the usual termination; when this is at hand, there is a gradual subsidence of the heat and pain, into a sense of itching and tingling, followed by decrease of all the other local and general symptoms. The cuticle immediately covering the joint often desquamates to a slight extent, and the part is at length left free from gout, but weak, stiff, tender, and liable to be the seat of future attacks of a similar nature.

A most remarkable fact connected with the disappearance of the paroxysm is, that the patient, with the exception of being more or less crippled for a time, experiences a sort of general renovation of the system, and his state of health is better and more vigorous subsequently, than prior, to the fit. It seems as if the localization of this disease (if I may be pardoned a solecism) were a salutary process instituted by the "vis vitæ" for the more effectual and complete removal of the cumulative disturbance of the general economy.

Mr. ———, a middle-aged man, of irritable temperament, spare yet muscular frame, and otherwise healthy habit, is subject to periodic attacks of acute gout, which of latter years have returned pretty regularly about the midsummer months. His father had been subject, in a slight degree, to