

the time I first saw her. She made a very good convalescence, which was aided by sulphate of quinine. Although the rheumatism left the joints, she still, on occasions, experiences weakness and slight pain. She lost a good deal of flesh during her illness, and although now in very good health, has not yet recovered her former *en bon point*.

There are several points of interest in this case, to which I would beg to draw attention. In the first place, the *profuse and continued perspiration*, a circumstance of such rare occurrence, that I have never observed a similar instance, nor am I able to discover any allusion to it in any of the authorities I have been able to look into on the subject. Several pass over the condition of the skin with an allusion to its high degree of temperature, a circumstance in itself sufficient to indicate the absence of perspiration, which would tend to reduce the heat did it exist. I may also add, that cold water could not be with propriety used upon the principles on which *Dr. Currie recommends it*, if perspiration existed. *Dr. Armstrong* says, the skin from the preternatural flow of blood towards it soon becomes not only morbidly sensible to the touch, but rough, dry, and hot.

Mr. Green in his work on diseases of the skin, says, the febrile excitement and heat of skin, &c., coincides with a *total suppression of perspiration in particular*, and of the secretions generally.

Rayer says the skin, which is much hotter in this than any of the other exanthematous diseases, is *burning, itchy, parched*, and tender to the touch.

Withering notices it to be intensely hot, *dry*, and harsh.

Patterson notices the heat to be morbid and pungent. *Good and Tweedy*, *Graves*, and such other authors as I have consulted, all speak of the great heat, but none mention, a state of perspiration, unless as a critical termination, upon the application of cold water.

The next circumstance I would notice is the unfavourable complication which abortion was likely to induce, although the issue in the case fortunately was otherwise. I have not had time to seek for authorities on this point. I believe all are agreed on this matter. *Tweedy* says it is a fatal disease, when it attacks pregnant or puerperal women.

Watson says, when scarlet fever befalls parturient women, it almost always proves fatal.

The issue on the present occasion, fortunately, proves an exception.

I shall now merely notice another complication, namely, the rheumatism, which when confined to the joints, is merely a painful addition, and a retardation of convalescence. It may however involve the heart, per-

icardium or other internal fibrous organ, and then materially complicates and adds to the danger of the complaint. On the present occasion it retarded the convalescence, and still is an occasional source of suffering to the patient.

The beneficial influence of the tincture of Iodine in removing the more acute affection, was most remarkable. This is a remedy which I have in many cases of acute articular rheumatism, found of the greatest service.

I attributed the unusual occurrence of perspiration, to idiosyncrasy, as I have not seen any other case so affected, either during the late epidemic, or on any former occasion.

Montreal, September, 1845.

SINGULAR CASE OF CEREBRO-SPINAL IRRITATION IN A YOUNG LADY.

By CHARLES WM. COVERNTON, M. D.

Read before the Toronto Medico-Chirurgical Society, July 2, 1845

Miss H. T., *æt.* 17; a tall and muscular young person, light hair and eyes, florid complexion, daughter of a respectable farmer, for two years previous to the present violent seizure, had been subject to severe headache, frequently followed by syncope; in the beginning of June, 1841, she experienced so violent an attack of these symptoms, that her parents sent for me to prescribe for her. On visiting her, I found her with a flushed countenance, heavy and languid eye, tongue but little coated, pulse about 90, respiration and action of the heart normal, catamenia regular, no perceptible tenderness on pressure along the spine—bowels open from medicine previously administered;—the intense pain of head was then referred to the centre of the coronal suture, and has continued in that spot, with but very slight occasional relief, to the present period, (August, 1842.) I abstracted blood to ξ xii, and prescribed ten grains of colocynth pill, with gr. iij of the submuriate at bed-time, and effervescent saline draughts every four hours. The next day there was but little alteration in her symptoms, and the medicines were ordered to be continued. On the evening of the third day, I was summoned in great haste, and found her to be in a perfect state of insensibility, countenance flushed, pupil dilated, pulse slow and oppressed. I again bled to ξ xviii, ordered the hair to be cut, and applied evaporating lotions, counter-irritation with *sps.* turpentine along the spine, blisters to calves of the legs, and placed two grains of submuriate on the tongue every four hours. Towards the middle of the night she made urgent attempts at vomiting, but immediately lapsed into insensibility. In the afternoon of the next day, she recovered from this comatose state, but was perfectly blind, the brightest light having no