

## VETERINARIAN DEPARTMENT.

## DISEASES OF THE CHEST.

CANADA WEST, Jan. 16th, 1857.

Messrs. Editors:—The case of complicated chest affection, reported by H. Bel, was one of great interest, but is of frequent occurrence on both sides of the Atlantic, and had you a few more correspondents of H. B.'s stamp, we should see them more frequently recorded than they at present are; unfortunately, however, for the country in which we live, educated men practising the veterinary art, are "like angels' visits," few and far between.

Not knowing the history of the case alluded to from its commencement, I cannot, of course, speak positively as to the seat of the disease in its first stages, but from the number of cases that have come under my notice, presenting the same symptoms while living, and showing precisely the same diseased structures after death. I am of opinion that it originated in the serous membrane lining the chest, being a case of *subacute pleurisy*, and had H. B.'s attention been directed to the unfortunate animal at that time, I have no hesitation in saying he would have been living at the present moment.

On commencing this letter, I intended giving you the leading symptoms, &c., of *pleurisy*, both *acute* and *subacute*, also the distinguishing symptoms between the disease and pneumonia, &c., &c. As it would occupy too much space (*knowing your objections to long sermons*), I must refrain from doing so in this paper, and merely give the symptoms I have invariably found present on the existence of fluid in the cavity of the chest.

*Hydrothorax* is decidedly the most frequent termination of *pleurisy* in this country. It consists in the effusion and collection of a serous fluid in the cavity of the chest: it is sometimes confined to one, but more frequently exists in both sides, which occurrence, in the acute form of the disease, takes place generally on the third or fourth day. In the other form of the disease, we however, cannot put any limit to it, it may occur on the fourth day, or not till the twenty-fourth after the attack; when it does occur, a sudden change takes place in the symptoms, and persons unacquainted with the true nature of the disease, are very likely to fall into error, pronouncing the animal to be considerably better; and evidently he does feel better—his countenance denotes it; he is inclined to eat, which he has not before done since the attack. But, alas! this effort of nature (for so I consider it to be) gives but temporary relief, and we soon hear a fresh report: the animal has had a relapse. No such a thing, however, has occurred; the first change gave relief, by greatly reducing the inflammatory action, also by relieving the congested vessels; but a fresh impediment also took place at the same time, which must, sooner or later, act on the organs of respiration. This depends solely upon the quantity of fluid at first effused. Should it be small, the relapse, as it is called, will be longer in making its appearance; but, as I before said, the animal cannot continue in the same state. But I will now give you the symptoms present at the time that change takes place.

The patient, as I before stated, is inclined to feed, but the quantity taken is so small as to barely support life; the coat is harsh and stony; the temperature of the body is more natural, but still unequal; *anasarcous* swellings frequently make their appearance on the pendulous portions of the trunk; the eyes are prominent and stony; the counten-

ance, though improved, is anxious; the nostrils are dilated, from their a yellow serous fluid is flowing; the visible mucous membranes are blanched, slightly inclining to a leaden hue, which color they afterwards assume; the pulse is small, thready, frequent and very irregular; the respiration much quicker than natural, and gradually assumes an abdominal character, *auscultation* at once proves the true nature of the change; the respiratory murmur is no longer heard at the inferior regions of the thorax, it terminating abruptly about midway (it may be higher or lower) between the sternum and the heads of the ribs; it is also decreased in sound above that point, and even at the superior part it is not so clear as natural. Other peculiar sounds are sometimes heard, but I do not think they can be depended upon; the action of the heart is quick, but there is a dull, heavy sound with the quickness; on *percussion* being applied to the inferior portion of the cavity, both ant. and post., a dull sound is emitted, and by carrying on this operation, you can, pretty distinctly, tell the extent of the effusion. Some writers state, that if one side is struck by an assistant, and the hand or ear is placed on the opposite, the fluid will be distinctly felt or heard tapping or dashing against the side. I have tried the operation, as well as others (operations), but can place no confidence in it or them, one of these, both unscientific and cruel, is lifting the abdominal viscera with sacks, causing those organs to press on the diaphragm, and suddenly letting them fall so as to hear "the rush of mighty waters" in the chest of the poor brute. I am of opinion that no such operations are required to determine the presence of fluid in the chest, if the attendant will take into consideration the previous disease under which the patient has been laboring, the symptoms present at the time, *auscultate* and *percuss* the chest; and if, after doing this, you find they are combined, analogous to those stated above, you may make up your mind, you have a case of *hydrothorax*. I should have before stated that the respiratory murmur, &c., is sometimes absent only on one side; it is, however, a rare occurrence. A slight, weak cough is also generally present.

Most of the above symptoms increase as the disease progresses; fresh *anasarcous* swellings are formed, one in particular, between the wings of the lower jaw; the legs become *oedematous*; the breathing becomes difficult and painful; all appetite is gone; he is now moved with the greatest difficulty; the hair can be easily removed, the mane in particular, from the skin.

Having described all the symptoms generally present in *hydrothorax*, I would, if I knew any, describe those present in *hydrodrops pericardii*, or fluid in the heart's sack; but I find my mind without a single symptom, or sound, barring those I have stated.

I must now, Messrs. Editors, bid you adieu; first, however, wishing you the compliments of the season, prosperity to "THE TIMES," and an abundance of veterinary matter.

I am, gentlemen, yours, &c.,

CENTAUR.

—[Porter's Spirit of the Times.]

THE WOMEN-SOLDIERS OF THE KING OF SIAM.—The *Moniteur de l'Armée* has published some curious details relative to the army of the King of Siam. One corps particularly attracts the attention of strangers, which is the battalion of the King's Guards, composed of women. This battalion consists of 400 women, chosen among the handsomest and most robust girls in the country. They receive excellent pay, and their discipline is perfect. They are ad-

mitted to serve at the age of 13, and are placed in the army of reserve at 25. From that period they no longer serve about the King's person, but are employed to guard the Royal palaces and the Crown lands.—On entering the army they make a vow of chastity, for which there is no exception unless any should attract the King's attention and be admitted among his legitimate wives. The King's choice seldom falls on the most beautiful, but on the most skilled in military services. Their full dress is composed of a white woollen robe, embroidered with gold. The cloth is extremely fine, and descends as far as the knee; it is covered with a light coat of mail and a gilt cuirass. The arms are free, and the head is covered with a gilt casque. When wearing this dress on State occasions their only weapon is a lance, which they handle with wonderful dexterity. With their under dress they are armed with a musket. The battalion has been commanded for the last five years by a woman who saved the King's life at a tiger hunt by her courage and skill. She has the same establishment as a member of the Royal family, and ten elephants are placed at her disposal. The King undertakes no expedition without being accompanied by his female guard, nor does he ever hunt or ride out, without an escort of the same guard, who are devotedly attached to his person. Each individual of the battalion has five negroes attached to her service, and having thus no domestic occupation she can devote herself exclusively to the duties of her profession. Punishment is very rare in this corps, and when it is inflicted it consists of a suspension from service for a period not exceeding three months. But duels are much more frequent. They must be sanctioned, however, by the female captain, and be fought with swords in presence of the entire company. The military organization of this battalion is so perfect that the entire army endeavours to imitate it.

DR. KANE.—NEW ORLEANS, FEB. 25.—Dr. Kane's remains were escorted to the steamer for Louisville by the military, free masons, consuls, city authorities, and an immense concourse of citizens. On the consular residences, shipping and public buildings, flags were displayed at half-mast, and minute guns were fired from sunrise until the embarkation of the body.

PHILADELPHIA, FEB. 26.—The City Councils have passed resolutions of respect to Dr. Kane, and have appointed a Joint Committee to make arrangements for his funeral. It is contemplated that his body shall be laid in state, at Independence Hall.

HARRISBURG, FEB. 26.—The Senate passed resolutions of respect to the memory of the late Dr. Kane this afternoon.

CINCINNATI, FEB. 26.—A general meeting of the citizens was held to night, at the Merchants Exchange, when a committee was appointed to cooperate with the committee of the City Council in taking measures for the payment of respect to the remains of Dr. Kane. Appropriate resolutions were adopted.

Dr. Kane's remains passed through Cairo this morning.

SAVAGE & LYMAN have received per "Indian" a supply of RIFLE and MILITIA OFFICERS SWORDS, BELTS, SASHES, &c.  
Notre Dame Street,  
Montreal, Feb'y 27th, 1857. } 316

W. W. BROWN, HAIR-DRESSER, &c. Sussex Street, Ottawa.

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