

PATHOLOGY.

ON THE MORBID ANATOMY OF CHRONIC ULCERATION OF THE RECTUM.

By T. B. Curling, Esq., F. R. S.

My inquiries into the morbid anatomy of the rectum have led me to remark the frequency of ulceration of its mucous lining, not only in cases of dysentery, and as a consequence of the ordinary disease of the part, such as stricture and cancer, but as a separate affection. In several specimens which I have examined, ulceration was diffused over a considerable extent of surface. I have observed the whole of the lower part of the rectum stripped of its mucous membrane for a distance of two or three inches. This extensive disease is sometimes, indeed generally, attended with thickening and consolidation of the subjacent tissues, without diminution in the calibre of the bowel. The muscular coat is in some instances hypertrophied. In one case, the mucous coat for a short distance within the sphincter was so riddled with holes as to form, as it is described in the post-mortem book, "a perfect cribriform tissue," the submucous tissues being at the same time much thickened. I have seen the mucous membrane ulcerated in patches, the sound portions being in some places detached from the muscular fibres beneath, so as to form bridges more or less broad, or merely some narrow bands or bridles. There were frequently abscesses and fistulous passages in the thickened tissues around the diseased rectum. In two instances ulceration had produced a perforated opening communicating with the peritoneum, death having been caused by the escape of some feculent matter into the abdomen and inflammation of the serous membrane. In other cases the peritoneum was involved in the consolidation, and inflamed without being perforated, the omentum in one case being adherent to the anterior part of the rectum.—*Brit. and For. Med. Chirurgical Review*, October, 1851.

THERAPEUTICS.

ON THE DECOMPOSITION OF PHOSPHATIC CALCULI BY SOLUTIONS OF LEAD.

By Dr S. Elliott Hoskins, F. R. S., &c.

[From cases which have occurred under his notice, Dr. Hoskins says, that not only does the bladder, under irritation, tolerate the presence of solutions of lead, but also that they act as sedatives, and exert a favourable influence, directly and indirectly, on the morbid secretion of mucus which generally, in such cases, exits. Dr. Hoskins proceeds:]

After having made trial of most of the vegetables supersalts of lead, all of which act, more or less, as unirritating decomponents, I have returned to the use of that originally proposed, the nitro-saccharate, as by far the most effective. That prepared for me by Mr. Garden, of Oxford Street, is much more energetic as a chemical agent than my own, and equally mild in its physiological effects. It is likewise more decidedly an organic salt, which I consider essential to the fulfilment of the ends in view; and I am strengthened in the opinion that sugar is a necessary ingredient, from the perusal of two papers in the July number of the *Pharmaceutical Journal*; one by M. E. Peligot, on the "Combinations of Sugar with Lime," and another by M. Barreswill, on the "Solution of Carbonate of Lime in the Saccharates."