

BARON MUNCHAUSEN, JR., ON NERVE-STRETCHING.

We copy the following from the July number of the Pacific Medical and Surgical Journal:

A correspondent of the Canada Medical Journal, writing from Edinburgh under the signature T. G. R., and giving an account of Lister's operations in the infirmary, describes a case of nerve-stretching for sciatica of five years' standing which had resisted all ordinary treatment, "such as the application of Corrigan's hammer, acupuncture, hypodermic injections, blistering, purging, etc." "The symptoms were mainly great pain, feeling of numbness and loss of power in the limb. In the operation the directions laid down by Nussbaum were carried out, viz., after exposing the nerve immediately below the gluteal fold, powerful traction was made on it, first from below, then from above, and lastly at right angles to the body—with such force in the latter direction as to raise the body of the patient off the table." The relief was instantaneous so that on the day following there was no pain, but considerable power in the limb. Think of a human being suspended in the air by the sciatic nerve, like a calf in the shambles by its hamstring! It beats the "drawing plaster" that we heard of when a student, which was so powerful as to draw a man to his bed up three flights of stairs.

THE HYPOPHOSPHITES IN PHTHISIS.

In the *British Medical Journal*, Dr. J. C. Thorowgood gives the following illustrations of the use of the hypophosphites of soda and lime: In the year 1863 I first began to employ these salts, and since I have learned more exactly to understand the nature of pneumonic phthisis and catarrhal pneumonia, I have been able more clearly to recognize the cases in which the hypophosphites come in as valuable remedial agents. Contrasted with many other remedies, such as mineral acids, quinine, and steel, the hypophosphites appear to much advantage, and may certainly stand side by side with cod-liver oil in the anti-phthical powers. As to steel, I believe it often does more harm than good, and tends to promote the increase of temperature which may herald the development of true tuberculosis in the lung.

CASE 1.—James R. E. was an out-patient at the Victoria Park Hospital, May 9th, 1867. He was a pale, thin young man; had been ill, with more or less cough for the last five years. He dated his illness from a sudden spitting of blood. The left side of his chest was flattened with impaired percussion resonance and abundant crepitant râles in inspiration. The right side of the chest was resonant; expiration was prolonged. Cod liver oil always made him sick. On the previous day he brought up blood. He was ordered to take five grains of hypophosphite of soda in camphor-water three times daily. May 16th the medicine agreed well, and he felt much better. On May 23rd the cough was much bet-

ter. Pulse 104. There was a cooing sound with expiration in the right lung. The left side was dull at the upper part, and here a dry creaking was replacing the crepitant râle. He was ordered to take five grains of hypophosphite of lime in place of the soda salt. On May 30th he was much amended; there was very little sputum now. On June 13th he felt himself well, though respiration was not normal in the left lung. He could now take some cod liver oil, and, at his own desire, left to go to his home in Wales.

CASE 2.—Benjamin D., a laborer, aged about 35, from Acton, was seen on June 27th, 1867. He had had a bad cough since March, with frequent spitting of blood. Pulse 104, feeble. The bowels were inclined to diarrhoea. The tongue was clammy. His breath was very short. Both sides of the chest were somewhat flattened. The respiratory sound was generally weak. Crepitant râles, to a slight extent, were heard over the left upper third. The liver was enlarged and tender. Cod-liver oil, he said, "always ran through him." He was ordered to take five grains of hypophosphite of lime with ten minims of saccharated solution of lime in effusion of calumba three times daily. He took this till August 8th, when he was discharged, stating that he could now walk a long distance without fatigue; his cough also was "nothing worth speaking of." Dry, creaking noises could be heard still at the upper part of the left lung.

Dr. Thorowgood adds several other cases equally striking.

EPILEPTIC ATTACKS PREVENTED BY THE HYPODERMIC INJECTION OF APOMORPHIA.

E. Vallender (*Berliner Klin. Wochens.*, April, 2, 1877, p. 185) has employed apomorphia in the following cases with favorable results. A young country girl, 20 years of age, was suddenly attacked by epilepsy, which soon became so severe that the invasions followed each other almost continuously, day and night, for weeks at a time. Sometimes ten to fifteen occurred in twenty-four hours. The aura which always preceded the attacks consisted in a feeling of heat in the gastric region, with considerable pain. The feeling spread to other portions of the body, the attack coming on after a few minutes, with cries, loss of consciousness, and clonic spasms. When the patient came under Dr. V.'s care a hypodermic injection of apomorphia solution (containing four milligrammes—one-sixteenth grain—of the alkaloid) was administered at the beginning of the aura, which checked the attack so far that simply syncope ensued. Subsequently two milligrammes only of apomorphia were injected, in order to avoid the production of vomiting. In a few weeks the number of the attacks was greatly diminished, as well as their severity. When the administration of the apomorphia was sus-