Ward on the 16th December, 1844. At a very early ture of the liquid, it perhaps is unlikely that he took dejected unhealthy look, the countenance expressive of much distress, eyes sallow, lips pale and shrivelled. Body very thin, which perhaps is rendered more remarkable in consequence of the enormous size of the right leg, which is diseased from the knee to the toes. The integuments are considerably hypertrophied, and hang in puckered folds over the ankle and instep. latter are much enlarged, and the toes are three times their natural size. The cutis is not tuberculated, nor are the papillæ of the skin raised, and there is not that peculiar appearance so much like icthyosis. More than two years ago, an ulcer formed on the lower third of the leg, which has ever since continually discharged a thin serous fluid in considerable quantity and of a peculiar and offensive odour. As soon as his general health was sufficiently improved, amputation above the knee was performed, Dr. Cutting performing the flap operation. The patient recovered, and was discharged cured on the 9th December.

To be continued.

ART. LVIII—CASES OF RECOVERY FROM POISONING WITH CHLORIDE OF ZINC, AND THE SUGGESTION OF AN ANTIDOTE FOR THIS POISON.

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When chloride of zinc is exhibited internally, its medicinal dose is from half-a-grain to two grains, two or three times a day. The following cases of swallowing in mistake, a quantity of a solution of chloride

of zinc, lately occurred in Montreal.

Case 1 .- In a house in Craig Street, in which I had been residing, there was a quart bottle, suitably labelled, containing a weak solution of chloride of zinc. E. R., a servant girl, aged 17, supposing that the bottle contained whisky, put its mouth to her lips and (Nov. 4, 1847.) drank about a wine-glass full. She instantly knew she had made a mistake; she experienced pain and nausea, and had a quantity of milk given her; she vomited very freely. She felt indisposition and want of appetite for about three weeks after. She was not seen by any medical man, as shame prevented her from speaking of the occurrence till a month after, when I saw her. On the supposition that she drank two ounces of the solution, I have reason to think that she took twelve grains of chloride of zinc.

Case 2.—In May 4, 1848, J. C., aged 54, a porter, a stout healthy man, at noon took up a quart bottle, properly labelled, containing a dense solution of chloride of zinc, and supposing that it contained whisky, he put it to his mouth and drank (as he afterwards told me, he supposed) about a wine-glass full. A large wine-glass contains two ounces and five drachms, and if we consider that he swallowed two ounces of the solution, I have reason to think that he took four hundred grains of the chloride of zine; but, from the na-

age he became the subject of glandular disease, which more than an ounce of the solution, or two hundred principally affected the right leg; his general health has grains of chloride of zinc; from the size of the mouth been for some time declining, and he has now a very of the bottle, it is not likely that he took less than

> He instantly felt burning pain in the gullet, burning and griping pain in the stomach, great nausea, and a sense of coldness. In about two minutes he left the house, and vomited freely in the street, for about fifty yards, till he came to a friend's house, where he lay The down and continued to vomit, or endeavoured to do so. I was requested to see him, and I arrived about twenty minutes after; there was severe twisting and burning pain in the stomach; nausea and vomiting; cold sweating; pulse 45, small, weak; his legs drawn up; anxiety and alarm. I instantly made a strong solution of home-made brown soap, and gave him a quantity of it. He vomited every two or three minutes, and in the intervals drank of the soap-suds, of which he had altogether three or four pints. He also had warm water. The matter vomited was quite free from odor, as I showed to Dr. Winder and Dr. Mount, who were present. He now felt much easier; there was not much stomach-pain, except on pressure; pulse 50; less coldness. I sent him home in a cab, in which he vomited at intervals all the way. I ordered twelveleeches to the epigastrium, and an ounce of olive-oil every hour.

Five P.M.—Has vomited several times after the olive-oil; pulse 60, natural fulness, soft, weak: tongue moist; no particular thirst. They could not procure leeches. A sinapism to the epigastrium. To take an ounce and a-half of castor-oil now, and half-

an-ounce of olive-oil every second hour.

May 5.—Slept a little: stomach is easier, still some heat and pain on pressure; he applied a second sinpism, which gave great relief; has vomited severals times, soon after taking the olive-oil; tongue dry; thirst; one feetid stool; pulse 72, soft. Repeat the castor-oil; continue the olive-oil every four hours; linseed-tea and water for drink; no food; a blister five inches square to the epigastrium. In the afternoon, he vomited four pieces, about three-quarters of an inch square, of a thin substance; they were not kept, but from the description they probably were eroded shreds of the mucous coat of the stomach.

May 6. -Blister rose well; no pain internally; tongue red on tip, brown on edges; pulse 80, small, soft, weak; thirst; two fætid stools. No vomiting; discontinue the olive-oil; cold water only for drink; to take an ounce of castor-oil in the morning.

May 7.—Got up; no pain on pressure over the abdomen; no vomiting; three fætid stools; some appetite; pulse 60; tongue moist, white; weakness.

May 10.—Appetite pretty good; no uneasiness in the stomach. 12th: appetite improving. May 15: appetite, digestion, and strength, are the same as usual. May 30: he continues in perfect health.

On the first day, the patient was seen also by Drs. Winder, Mahony, Hall, and Mount; and several times after by Dr. Winder.

REMARKS.—As the solution of the chloride of zinc