

GANGRENOUS CELLULITIS WITH SLOUGHING OF THE RECTUM.

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On the 7th of January I was called to the country to see a lady suffering from mania, the result of overlactation and menorrhagia. She was 32 years of age, of delicate nervous temperament, the mother of four children, the youngest about seven months old.

The child had just been taken from the breast. Nourishing digestible food, tonics and mild purgatives were recommended, and in three or four days the mania disappeared, the appetite returned, and she became hopeful and cheerful. The improvement lasted about four days, when she became feverish, restless, and weak. She then passed, by a single stool, an enormous quantity of very hard scybalous matter, which was followed during the next few days by several very copious semi-solid evacuations.

On the 19th I was again requested to see her, when her attending physician presented me with "something very strange which she had passed from the bowels" a few hours before my visit. This proved to be a large slough, about four or five inches long, two inches broad, and about a quarter of an inch thick, but somewhat ragged and irregular.

On entering her chamber she was found presenting the ordinary symptoms of septicaemia, while two or three large fungoid growths occupied the left labium and perineum. The uterus was normal to touch and in its right place, and the anus enlarged as if the sphincter were partially destroyed.

On passing my finger through the anus, the whole pelvic cavity appeared to have been dissected out as cleanly as if it had been done with the knife: nothing was left, but the vagina, uterus, muscles, and ligaments, with the bladder in front. I could pass my fingers between the muscles and ligaments at the sides of the pelvis and trace them to their attachments. Every vestige of the lower three inches of the rectum and pelvic cellular tissue had disappeared as far as my finger could reach, and the end of the rectum appeared to hang loosely in the cavity,

about three inches from the anus. As the cavity contained a quantity of horribly offensive matter, which was evidently poisoning the whole system, I washed it out with carbolized water, and while doing so a large quantity of half solid fecal matter was passed by the side of the syringe.

Directions were given to wash out the cavity with carbolized water, three or four times a day, and to let her have quinine and nourishment as freely as she could take them; nevertheless she continued to sink, and died in about nine days after my last visit.

The mania at my first visit presented all the usual characteristics of puerperal mania, although from the length of time it occurred after confinement it is called mania of lactation, and yielded readily to treatment, although at the time of my first visit she was very weak and restless, and very anxious to have her old medical attendant hung.

With regard to the extensive sloughing which took place, I think the large accumulation of hard fecal matter pressing upon tissues much reduced in vitality, excited a low grade of inflammation, which soon ended in the death of the parts affected; and that in all cases where the patient's consciousness is impaired, as in mania, we should ourselves ascertain by actual examination whether accumulations are taking place in the lower bowel, as I am quite satisfied that nurses and attendants are often deceived in these matters.

CONCURRENT MORBILLI (OR RÖTH-ELN) AND VACCINIA?

Reported by Dr L. M. SWEETNAM.

A. B., male, æt. 25. Never had any serious illness. Had mild scarlatina and parotitis. About seven days after exposure to contagium of measles, pain in the head and back (the latter only relieved by recumbency), elevated temperature, increased frequency of pulse, and loss of appetite with general depression occurred. These symptoms were persistent for ten days, gradually increasing in severity. At the end of this time a well-marked rigor occurred followed by still more marked febrile