

do not often find in such institutions cases of slighter injury, perhaps little attended to, but which may be the first step to serious consequences in after life. Mr. Solly records an interesting case of this kind.]

The subject of it was a fine young man about 23 years of age. About two years and a half previous to his consulting me (on the 4th September, 1852), he fell from a height of sixteen or seventeen feet, with his back flat on a hard gravel walk. He was stunned at the time, though he did not strike his head directly. He received immediately the best advice, was bled from the arm, and leeches over the left hip. He was very sore, and had severe headaches for some days afterwards, and was not able to walk until seven or eight weeks had elapsed from the time of the injury. He was then examined by several medical men and pronounced sound. After this he went abroad, and lived rather freely. Just ten months before he consulted me, he began to suffer from involuntary seminal emissions, accompanied with great feeling of weakness in the back. About two months after these first appeared he remembers finding a swelling on the left side of the loins; but this inconvenienced him so little, that he did not even mention it to his medical attendant, who treated him for dyspepsia, ordering him plenty of horse and pedestrian exercise, with tonics; but he continued to get worse, and was obliged to return to England. On his arrival, he applied to an eminent surgeon, who treated him for the spermatorrhœa with the caustic catheter. He remained under his treatment for two months, but without improvement, when his father brought him to me. From the history which I elicited by a careful cross-examination, I came to the conclusion that the spermatorrhœa had a spinal, not generative origin. On stripping him I found an elongated swelling, about four inches in length, on the left side of the lumbar vertebræ. It did not fluctuate, but it was elastic.

On rapping the spine in this situation he suffered a distinct, though not severe, thrilling pain, shooting from the spine down the legs, with some numbness. He now stated that he occasionally suffered from the same kind of pain when walking or riding, and from the motion of a railway carriage. He also complained of a feeling of weakness in both legs, but more especially in the right. I was also informed that he slightly dragged that leg in walking, and that he could not balance himself naturally. His countenance was anxious, and he looked out of health. The nocturnal emissions were occurring frequently, without erection or pleasurable sensations. I found spermatozoa in his urine, on examination under the microscope.

Putting all these facts together, I came to the conclusion, that the spine had been injured by the blow from his fall about two years and a half previously. I was rather afraid, from the swelling of the mass of the erector spinæ muscles, that an abscess was forming in that situation, and that the disease was not limited to the ligaments. Nevertheless I had great hopes that it was not so serious as that, inasmuch as he bore firm pressure and rapping on the spine too well for there to be much serious disease of the bones; but I had no doubt of there being chronic inflammation, with some deposit of the ligaments of the vertebræ, and also of the thes vertebralis.

With this view of the pathology of the case, I ordered him to be confined to the house, and almost entirely to the sofa, to have a large moxa made over the swelling, to take quinine, in doses of two grains ter in die, in the infusion of roses, with sulphate of magnesia. To remain quietly in the country; scarcely move off the sofa; on no account to ride, either a horseback or in any kind of carriage, railway, or otherwise; to have meat but not to take any wine or beer.

On the 24th of September I changed this to the carbonate of iron in tea grain doses, with pil. aloes c. myrrh. at night.

On the 22d October, 1852, about six weeks from his consulting me, I received the following from his medical attendant in the country:

"I am glad to say the — V. T., is going on as favorably as when I saw him. The issue discharges well. He has not any numbness on tapping