

very little nourishment for three or four weeks, none in 24 hours. This I think made one ounce of opium tincture produce as much effect in her case as two would do under ordinary circumstances. During six or seven hours of the treatment I think she would have died in 15 minutes without forced respiration.

Dr. Joseph C. Green, one of the oldest and most respected practitioners in Buffalo, said of this case in a letter received by me the day I started for this place, September 4, 1893:—

"I have been acquainted, theoretically, with your apparatus for producing artificial respiration in cases of drowning and opium poisoning, for some time, but I never had an opportunity to test the merits of it until one day last month (August, 1893). I was called to the bedside of a lady belonging to one of my old families, and found that she was suffering from the effects of an overdose (one ounce) of laudanum, taken *five* hours previous to my visit. She was cyanotic; breathing four times a minute when undisturbed; pulse small and fluttering, with all the other symptoms of opium poisoning. Emetics and stomach pump being out of the question, I gave a hypodermic injection of 1-16 of atropia, which dilated the pupils perfectly, and sent a messenger for you to bring your apparatus, but you being out of the city, Dr. J. W. York kindly consented to come with it. For ten mortal hours we used it continuously. At the end of that time natural respiration was established.

"This one case, dear Doctor, is sufficient to establish its superiority over all other methods that I have any knowledge of. It speaks volumes for your instrument, and no doctor in active practice should be out of its reach. I have been in active practice for over thirty years, and I have lost patients after all the old methods known to science had been tried, and I am confident that some of them might have been saved by your method if it had been known."

CASE XXVIII.—Dr. FELL.

The following case is presented with the belief that it has some features of novelty of an interesting character; and

1st. To illustrate how forced respiration may possibly be of great value in surgical

operations associated with conditions of asphyxia;

2nd. To illustrate its value per face-mask in cases of membranous diphtheria and croup.

A resident of Buffalo, his family consisting of wife and four children, the eldest a daughter 9 years of age, a son 7 years and 3 months, a daughter 4 years, and an infant son, 2 years of age. The eldest daughter was taken ill with throat troubles and general disturbance of the system. She was quite sick, and was taken from school. On the 29th of March the eldest son was taken sick, and he, like the sister, was treated with home remedies until about 5 a.m. on the Sunday following, when the father discovered him in a cyanotic condition, breathing with great difficulty, and evidently in great danger. I was called about 8 o'clock in the morning, and arrived at the residence an hour later. On examination, I found the four children ill with diphtheria, the exudates being quite clearly marked in the eldest daughter and the son. The son was respiring with great difficulty, and his life was in immediate danger. I informed the father that there was only one thing that could be done at that time, and I recommended tracheotomy as a means of holding the case, but held out no hope of ultimate recovery of the child. The younger children were also ill, the exudates, however, not so extensive, as the disease had affected them later than the first two. The mother desired the operation to be made. I sent for Dr. Albert J. Colton, near by, to assist me, but before we were ready to make the operation the lad became unconscious from the asphyxia, and was in a very desperate condition. He was placed upon a table, the initial incision made for the operation of tracheotomy. The blood was purple. No anæsthetic was used as it was not necessary. A few moments after the first incision was made, Dr. Colton called my attention to the fact that the pupils of the eyes were dilating. I had fortunately prepared my forced respiration apparatus so as to have it for immediate use should occasion warrant, and had it not been ready I undoubtedly would have had the experience of death occurring during the operation. I immediately placed the forced respiration cup upon the face and respired