

child suffered severely from pain and tenderness, accompanied by frequent bloody stools, the dejections resembling currant jelly, with water, accompanied with much fever; and having resisted leeching, blistering, castor-oil aperients, with opiates and astringents, until the 30th of September, the following mixture was ordered:—
R. Fel. Bovis Inspiss., gr. viij; Tinct. Opii, m. ℥ i
Mucil. Acacia, co. j.; Chloroform, m. viij; Mistura Amygdal., ad m. ij. Fiat mixture; capl. sextan partem quartæ horæ. Under this treatment, with occasional doses of Dover's powder, this child speedily recovered, and is now, October 7th, convalescent.

I am, Sir,

Your obliged servant,
THOMAS HEWLETT.

**TRAUMATIC FISTULA OF STENO'S DUCT:
CURE COMPLETED DURING A CONTINUED
FEVER.**

By TOTHILL MANN, M.D., ESQ.

The patient was by occupation a mason, 43 years of age. When he presented himself to me, in September, 1847, he stated that he had fallen off a scaffold, six feet raised from the ground. He had a lacerated wound, extending from below the centre of the right malar bone to more than an inch. The eye and nose on that side were greatly swollen. The wound was brought together with strips of adhesive plaster. Ordered an aperient, with directions to live low.

On the third day, when eating bread, he felt water pouring down his cheek; his neck and shirt were quite wet.

I removed the dressing on the fifth day, and got him to chew a bit of bread, when the fluid poured out; it then formed a little stream trickling down the cheek.

On the seventh day the wound was united almost throughout the entire extent, leaving two small openings at each extremity, sufficient to admit the point of Acl's probe, and through which flowed, (as the man stated,) "a wine-glass of water during each meal." Touched the openings with a pencil of Nitens Argenti. Applied a list compress.

Tenth day. He was attacked with the fever which was then endemic in the adjacent lodging-houses. Complained of a heavy pain in the head, with loss of sleep and appetite; tongue dry, and coated with a white fur; respiration hurried; pulse quickened.

Eleventh day. Great thirst; the saliva has ceased to flow.

Thirteenth day. Fever continues; urine diminished in quantity.

Fifteenth day. Fistulous openings closed; a hard oval tumour occupies the entire extent of the cicatrix, not in the least diminished by pressure.

Twentieth day. The tumour continues tense, and yielding to continued pressure; fever almost gone; appetite returning.

5th of October, being thirty days. My patient is convalescent. The tumour has disappeared; the cheek is natural; and the saliva escapes through its own opening into the mouth.

How has this duct become a continuous tube? Has lymph united the parts by forming a sac between the divided extremities?—or have the walls of the tumour formed the connecting link?

CASES OF POISONING BY BELLADONNA.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND
SURGICAL JOURNAL.

Sir,

I forward you two cases of poisoning by belladonna, occurring lately in my own practice, which are interesting as bearing upon the late inquest at Sheffield, where the verdict of the jury appears to me to have been the opposite of that to which a careful review of the evidence would legitimately lead.

Your obedient servant,

SAMUEL COWAN.

Bath, Oct. 3, 1848.

CASE I.

June 25, 1848. General W., aged 73, a man of hale robust constitution, swallowed in mistake for a herbaceous draught, part of a lotion, containing, as I afterwards calculated about twenty five grains of the extract of belladonna dissolved in Lithiumum Saponis.

I was sent for, and saw him at 11 p.m., about twenty minutes after the accident, mustard and water having been previously administered to excite vomiting, without effect. I found him perfectly collected, complaining of slight vertigo, with staggering gait; the surface and extremities cold; the face pale; indistinct articulation; pulse feeble, 74; pupils not dilated. The stomach-pump was used, and the stomach freely washed out, the fluid returned containing a greenish mucus, convincing me by its smell that the poison was belladonna. Small quantities of brandy and water were now given. Vertigo and insensibility gradually increased; the temperature of the skin and extremities sunk; the pulse became weaker, and fell to 55. The pupils were now fixed, severely at all dilated, and he sank at twelve p.m. into a state of profound coma, from which it was impossible to rouse him. The dysphagia which had more or less shown itself since the commencement, increased to such an extent that it was impossible even to give him a teaspoonful of fluid without threatening suffocation. Mustard compresses were applied to the trunk and extremities.

12 p.m. The pulse gradually rose to 120, and became hard and bounding in character; the vessels of the head were congested; face flushed; sclerotics injected; pupils fixed, very little dilated; breathing stertorous and laboured; extremities cold, in fact all the symptoms of a well-marked case of apoplexy. I now opened the temporal artery and bled him to fourteen ounces; the pulse very shortly fell to 86, became softer, more compressible; face became paler; and the temperature of the trunk and extremities returned. The stupor was still profound, with stertorous breathing, pupils fixed, dysphagia extreme. A large turpentine emera was thrown up the bowel.

At 3 a.m., the left side of the face was much convulsed; the left arm and leg cold and apparently paralyzed; convulsive movements of the right side; the coma and stertorous breathing remaining; pulse

faller, 70. Between this time and five a.m., the power of deglutition gradually returned, when he could be roused by a sudden noise, though not sensible.

6 a.m. A low muttering delirium now came on, with violent spasmodic movements of the right side. The temperature of the left side gradually returning.

7 a.m. Insensibility continues; starter is gone; pupils a little contractile to the light of a candle; could be roused by a loud sudden noise, but could not articulate.

From this time till 12 at noon, when the catheter was passed, and a large quantity of water drawn off, consciousness had partially returned, the delirium alternating with it; complaint of double vision; pupils contractile; deglutition perfect; pulse soft, 84. The turpentine enema which had been retained all night, now passed. Nuchisement was given him, and a calomel pill and draught.

27th. Has passed a good night; consciousness quite returned; no double vision; complaint of debility, and there is partial paralysis of the right arm and leg. Has no remembrance whatever of any circumstance since the use of the stomach-pump.

Under the use of ammonia and camphor he gradually regained his strength.

CASE II.

Mrs. H., aged 34, of a spare nervous habit, was ordered a four-ounce lotion, containing one drachm of the extract of belladonna, for painful condition of the breasts twelve days after confinement. A fourth of this was by mistake given her, instead of a benzoin mixture. Owing to distance she was not seen for nearly an hour, nothing having been done in the meantime.

April 3rd. At ten p.m., I found her in the following state—Surface cold, clammy; face pale, distorted; mouth drawn to one side; pupils fixed, and immensely dilated; complete insensibility; breathing stertorous, hard, regular, slow; pulse 50, very compressible, irregular; extremities cold; hands clenched. Ordered a turpentine injection, (two ounces,) and small doses of ammonia, with mustard cataplasms to the stomach and extremities. The dysphagia as great, and suffocation so imminent, that neither the stomach-pump could be used, nor stimulants swallowed.

11 p.m. Cold effusion to spine.

12 p.m. Reaction beginning; the same symptoms continue, with the face flushed; sclerotics injected; vessels round the head turgid; breathing quieter; pulse steadily rising, harder, 120; surface and extremities cold; dysphagia extreme. Twenty-four leeches to the temples. Ice to the head.

2 a.m. Face paler; pulse softer, 100, regular; surface and extremities warmer; insensibility continues; stertorous breathing; pupils fixed, not so dilated; dysphagia less; spasmodic movements of the limbs; twitchings of face.

3 a.m. Low muttering delirium came on, and increased till five o'clock, when there was the wildest delirium, accompanied with violent muscular efforts; pupils less dilated; face flushed; dysphagia less. Twelve more leeches. Ice.

5 a.m. Delirium not so violent; wanting to get out of bed; living in dreams of the past.

8 a.m. Can swallow a little; pulse softer; face less flushed; delirium less violent, low muttering; can be roused by a sudden noise; urine drawn off by a catheter.

12, noon. Delirium passing away; correct her false

impressions; pulse softer, 80; pupils contracted; diplopia; wants food; complaint of weakness; left arm and leg paralyzed. She continued through the day partially delirious.

April 5th. Appears quite recovered, though excessively prostrated. Complaints of great loss of memory, having no recollection of the last two days. In about a week all unfavourable symptoms disappeared, and she gradually regained her memory and bodily strength under the use of ammonia, with tonics.

REMARKS.—Both these cases presented the well-marked general symptoms of poisoning by belladonna, though we find in each a variation in special symptoms worthy of notice, when considered in reference to the verdict given at Sheffield, at the request of Thomas Greenow, and the evidence of Mr. Law, as reported in the *Journal* of September 20th. Upon a careful review of the evidence adduced in that case, I doubt the correctness of the verdict given, and fully believe with Mr. Jackson, that death arose from the poisonous influence of belladonna on a system previously debilitated by age and disease.

In a healthy man, though aged, the quantity said to be taken would probably be ultimately harmless; but when we find, as in this instance, a man 76 years of age, labouring under gastric symptoms, (as I judge from the plaster ordered to be applied to the stomach,) and a chronic inflammatory condition of the bronchial membrane, the swallowing of five grains at least, and probably more, of the extract of belladonna at six o'clock in the evening, and soon after the complaining of tremor, debility, coldness, loss of speech, dilatation of pupils, dyspnea, followed in a little time by general reaction, swelling and congestion of the face and head, with dryness of the throat and fauces,—in short, all the symptoms of congestive apoplexy, and the patient left in this condition without medical aid until nine o'clock the next morning, we can easily, I think, to no other rational conclusion, than that death resulted precipitately from the action of belladonna on an enfeebled and diseased body, and directly from the consequent effusion into the ventricles of the brain and spinal canal.

I believe, in the two cases reported above, that death would probably have occurred from cerebral effusion, had the brain been left as long (fifteen hours,) unrelieved by local bleeding; and cannot but think that, had Greenow received medical aid at the proper time, he would have recovered. The absence of a single symptom, such as insensibility of the pupil, as noticed by Mr. Law, cannot be looked upon as important, as pathognomonic of poisoning by belladonna, for we find in Case 1, above, the very symptom (dilatation of pupil,) of all others considered characteristic of the influence of belladonna, absent.

It is difficult to arrive at the dose of the drug that will destroy life, but I believe that the patient's well-being hangs upon timely relief to the cerebral vessels in the period of reaction, and that, if this relief be withheld, the patient will sink under the cerebral effusion induced.

I have not the least doubt that the case of Thomas Greenow was one of cerebral congestion, arising from the influence of belladonna, and that, from want of medical aid, serous effusion took place into the ventricles and spinal canal, and thus destroyed life.