once both the accuracy and the utility of these tables.—I am, sir,
Your obedient servant,

H. C. Brenchley.
Aston, near Wallingford, Berkshire,
Dec. 23rd, 1846.

RECOVERY OF AN INFANT FROM A LARGE DOSE OF OIL OF TURPENTINE. BY R. W. EVANS, M.D.

Mrs. B.—sent for me in great haste to see her son, aged 14 months. On my arrival, the greatest consternation prevailed, being informed by the person who came for me that the child had swallowed four ounces of the oil of turpentine which Mrs. B.—had procured to apply for rheumatism.

The turpentine was kept in a long-necked bottle, which had been formerly used to hold milk for the use of the child. In the absence of the mother, the child procured the said bottle, and drank about four ounces of turpentine, which caused him to cough immediately, together with alarming cries, which aroused the attention of his mother, when, lo! to her astonishment, she was told that "Billy" had drank all the turpentine.

I found him two hours after the above occurrence in a comatose state; pulse 130; conjunctiva injected; pupils dilated; eyes watery; face flushed; breathing hurried, strangled; urine the smell of violets; bowels painful, particularly along the course of the espermatic vessels.

He was ordered an emetic of ipecac. Vomiting was soon excited, and briskly kept up by tepid water. The contents of the stomach had a strong odour of the turpentine. After the operation of the emetic, Aq. Ammonio Acet. 3j., omni horâ, cold applications to the head, and flannel cloths wrung out of hot water to be constantly applied to the epigastrium. At 6 p.m. same day,—eight hours after I first saw him,—much improved; is quite lively; pulse 120; bowels loose; had passed eight small worms. Ordered Tinct. Opil. iv. and Spt. Æther Nt. gt. v. to be given at bed-time.

On the following day, decidedly better; slept well during the night; slight pain in the bowels on pressure. Gave Ol. Ricini, 3ij. From this time he was daily recovering, except a little excitement about the brain; but in four or five days he was perfectly recovered.

I have no doubt, if the child had been neglected, he would have paid the debt of nature for this "singular debauch." However, this case may prove a warning to parents and others leaving medicine (although not ranked poisons) in the way of children: many have fallen victims by such neglect.—Richmond, C.W., Sept. 29, 1846.


Medical Intelligence.

THE CHOLERA IN THE EAST.

We have but little to report in addition to what has already been communicated respecting the cholera. The disease has broken out at Mossoul, and appears to be slowly spreading through Mesopotamia. The cold had so far arrested its progress, that most of the cases were of a mild sporadic nature. From fifteen to twenty deaths had occurred in about five or six days; and out of thirty cases only one proved fatal. Eumer Effendi and Dr. Droz, physicians of Constantiopolis, have been commissioned by the Turkish Government to proceed to Bagdad, and draw up a report of the disease. The above particulars are derived from the last number of the Gazette Médicale; and here we must remark, that our French contemporary falls into one of those strange geographical blunders so common among French writers. Thus it states, "According to the English Lancet, the cholera has broken out in the island of Candia (Candie), and several soldiers of the 95th regiment have already fallen victims. The Colonial Government has fled from Candia, in order to take refuge at Colombo." We need hardly remark, that the French scribe, whose geography appears to be somewhat imperfect, confounds the island of Candia (Crete), in the Mediterranean, with Candii, a large town in Ceylon, which gives its name to a kingdom of the island! According to the latest intelligence, the cholera had not reached Syria.

PERFORMANCE OF SURGICAL OPERATIONS DURING THE STATE OF NARCOTISM FROM ETHER.

Since we gave the first public announcement in this country of the American discovery respecting the power of the vapour of ether to produce temporary narcotism, we have learned from an account given by Dr. Forbes that the plan has been successfully tried by Mr. Liston at the University College Hospital.

"On the 22d December, we had ourselves the satisfaction of seeing this new mode of producing pain put in practice by a master of chirurgery on our own side of the Atlantic. In the theatre of University College Hospital, Mr. Liston amputated the thigh of a man previously narcotised by inhalation of the ether vapour. Shortly after being placed on the operating table, the patient began to inhale, and became apparently insensible in the course of two or three minutes. The operation was then

commenced, and the limb was removed in what seemed to us a marvellously short space of time—certainly less than a minute; the patient remaining, during the incisions and the tying of the arteries, perfectly still and motionless. While the vessels were being secured, on being spoken to he rose partially up (still showing no signs of pain) and answered questions put to him in a slow drowsy manner. He declared to us that at no part of the operation had he felt pain, though he seemed partially conscious; he had heard some words, and felt that something was being done to his limb. He was not aware, till told that the limb was off, and when he knew it, expressed great gratification at having been saved from pain. The man seemed quite awake when removed from the operation room, and continued so. Everything has since proceeded as usual, and very favourably, Mr. Liston afterwards performed one of the minor but most painful operations of surgery—the partial removal of the nail in onychia, on a man similarly narcotized, and with precisely the same result. The patient seemed to feel no pain; and, upon rousing up after the operation, declared that he had felt none.

"In these cases the ether vapour was administered by means of an ingenious apparatus extemporaneously contrived by Mr. Squire of Oxford Street. It consisted of the bottom part of a Nooth's Apparatus, having a glass funnel filled with sponge soaked in pure washed ether, in the upper orifice, and one of Read's flexible inhaling tubes in the lower. As the ether fell through the neck of the funnel it became vaporized, and the vapour being heavy descended to the bottom of the vase, and was thence inspired through the flexible tube. No heat was applied to the apparatus or the ether."**

The following case, quoted by Dr. Forbes from Dr. Bigelow, shows that the respiration of this vapour is sometimes attended with alarming symptoms:

"A young man was made to inhale the vapour while an operation of limited extent, but somewhat protracted duration, was performed by Dr. Dix upon the tissues near the eye. After a good deal of coughing, the patient succeeded in inhaling the vapour, and fell asleep at the end of about ten minutes. During the succeeding two minutes the first incision was made and the patient awoke, but unconscious of pain. Desirous to be again inebriated, the tube was placed in his mouth, and retained there about 25 minutes, the patient being apparently half affected, but, as he subsequently stated, unconscious. Respiration was performed, partly through the tube and partly with the mouth open. Thirty-five minutes had now elapsed, when I found the pulse suddenly diminishing in force, so much so, that I suggested the propriety of desisting. The pulse continued decreasing in force, and from 120 had fallen to 96. The respiration was very slow, the hands cold, and the patient insensible. Attention was now, of course, directed to the respiration and circulation. Cold affusions, as directed for poisoning with alcohol, were applied to the head, the ears were syringed, and ammonia presented to the nostrils and administered internally. For 15 minutes the symptoms remained stationary, when it was proposed to use active exercise, as in a state of narcotism from opium. Being lifted to his feet, the patient soon made an effort to move his limbs, and the pulse became more full, but again decreased in the sitting posture, and it was only after being compelled to walk during half an hour that the patient was able to lift his head. Complete consciousness returned only at the expiration of an hour. In this case the blood was flowing from the head, and rendered additional loss of blood unnecessary. Indeed the probable hemorrhage was previously relied on as salutary in its tendency."

The reader will find an interesting summary of what is known concerning this singular discovery in the British and Foreign Medical Review for January, 1846.

DEATH OF PROFESSOR BROUSSONNET.

M. BROUSSONNET, Professor of Clinical Medicine in the Faculty of Montpellier, died on the 17th December, at the age of 80. He was the oldest professor in France, and up to the last year of his life he continued to perform the duties assigned to his office.

On Saturday, the 26th inst., at Lower Garthmyl, Montgomeryshire, in the 74th year of his age, Edward Johnes, Esq. M.D.

ROYAL COLLEGE OF SURGONS.

The following gentlemen were admitted Members on Friday, December 29th:

- E. Archer.
- W. L. Dudley.
- R. B. Roscow.
- J. White.
- W. Morgan.
- F. W. Richardson.

APOTHECARY'S HALL.

Names of gentlemen who passed their Examination and received Certificates to practise on Thursday, December 24, 1846:

- Joshua Lever, Bolton-le-Moors.
- Henry Turner Lane Rook, Barnstable.
- Richard Budd Painter, Broadway, Westminster.
- Robert Allen, Cartmel, Lancashire.
- Francis Sibery.
- Long Clawson.
- James Edmund Clutterbuck, Newark Park, Gloucestershire.