

chondrium consisted of the gall-bladder so enlarged and distended as to bulge forward from the under surface of the liver, forming a pear-shaped tumour at the edge of the right lobe. Externally, the gall-bladder was uneven, and of a reddish-yellow colour. On section, broken-down cancerous material, of a pinkish-red colour, oozed out; inner wall of gall-bladder thickened and eroded; cystic and hepatic ducts blocked up and solidified. The liver was shrivelled and atrophied, but with no trace of cancerous deposit; and, on section, bile exuded from its substance. The intestines were matted together by recent adhesive lymph and pus. No infiltration of the abdominal glands or other organs. Juice from sections of the pylorus, pancreas, and gall-bladder exhibited under the microscope characteristic cancerous cells (of various shapes and sizes, with nuclei, nucleoli, and granules). On teasing out fragments from the diseased parts, the above cells were seen imbedded in a fibroid stroma.

Dr. Rickards remarked that during the early part of the illness, although there were strong suspicions of malignant disease of the stomach and liver, yet there was nothing to form the diagnosis upon except persistent unaccountable jaundice, with occasional vomiting. When the abdominal walls became flaccid, and the diseased growths could be felt, the liver was considered involved, whereas it turned out to be the gall-bladder transformed into a fungus hæmatodes. The abdominal pulsation over the epigastric tumour where it compressed the aorta was highly marked, but the other symptoms of aneurism were absent. Latterly, the stomach retained bottled ale better than anything else, solid or liquid.

ROYAL LONDON OPHTHALMIC HOSPITAL.

BLACK DISCOLORATION OF THE EYELIDS, DUE TO ARGENTIC CHLORIDE.

(Under the care of Mr. HULKE.)

From time to time, at long intervals, a few cases have been recorded of black discoloration of the eyelids. The subjects have mostly been young and interesting women, whose condition has generally excited much sympathy, and has not seldom baffled all attempts to trace its origin, and obstinately resisted every curative measure. Some—especially dermatologists—have referred the discoloration to a disorder of the sweat glands, others to the sebaceous glands, whence it has obtained the names chromhydrosis and steorrhœa nigricans; others again have looked upon it as a feigned disease, and with greater probability have suspected the surreptitious application to the skin of carbonaceous matters. In the following case the fraud was too palpable not to be detected. A well-grown, good-looking servant girl, aged fifteen, came to the out-patients' room on the 9th of March with a peculiar blackness of the lower eyelids, both being coated with black films of exfoliating epidermis. The appearance was just that which follows the light application of nitrate of silver to the skin, as recommended by some to allay the light-shyness in strumous ophthalmia. An analysis of a film of the blackened cuticle by a most competent chemist proved the presence of argentic chloride.

The affection began, the girl said, six weeks before as a slight darkness, which in three or four hours increased to an intense blackness. This lasted three or four days, when the cuticle began to peel off, leaving the skin beneath clean and tender. Three attacks of this kind had occurred during the six weeks. She positively asserted that she had not put anything to her eyelids, and as strongly asserted that she had not been the subject of a practical joke by her fellow-servants. How much these statements are worth we leave our readers to decide.

YORK COUNTY HOSPITAL.

CASES OF TETANUS.

FOR the following notes and remarks we are indebted to Mr. Frank H. Hodges, house-surgeon.

(Under the care of Mr. HORNBY.)

Traumatic tetanus; death.—J. G.—, aged thirty-two, a leather-dresser, had been attending the hospital as an out-patient with compound dislocation of the little finger, occa-

sioned by a fall, which had been treated antiseptically, but, having become gangrenous, the finger was amputated on Feb. 7th. Everything went on apparently well till the morning of the 10th, when the patient complained of rigidity of the neck and slight difficulty in opening the mouth and in swallowing. The symptoms having greatly increased in severity, he was admitted into the hospital at 12 P.M. of the same day, when the temperature was 97.3° F.; pulse 76; respiration sighing and prolonged. The mouth could be opened just sufficiently wide to allow of the tongue being protruded; there was no pain except such as was caused by slight stiffness of the neck and cramps about the jaws. A little brandy and milk were given, and a quarter of a grain of morphia and the sixtieth of a grain of atropine injected subcutaneously.

Feb. 11th.—The subcutaneous injection was repeated at 2 A.M., and after this the patient slept till 5 A.M. The tetanic spasms were as yet mild, but did not cease during sleep.—At 11 A.M. Mr. Hornby ordered twenty grains of chloral hydrate to be given every four hours, a poultice to be applied to the stump, strong beef-tea with brandy *ad libitum*.—2.30 P.M.: An ice-bag applied to the spine, and a turpentine enema administered.—10 P.M.: Ice-bag removed; enema has acted once. Temperature 98.2° F.; pulse 88; respiration 12. The spasms are increasing in severity; the expression is now anxious; cannot protrude tongue. There is extreme difficulty in swallowing. To have an injection every four hours, consisting of half an ounce of brandy, two and a half ounces of beef-tea, and twenty drops of tincture of opium.

12th.—Slept from 2 A.M. till 4.30 A.M., when, during a paroxysm, he bit his tongue, which bled freely; dozed at intervals till 7 A.M.—9.45 A.M.: Temperature 99.2°; pulse hard, 120. Abdominal muscles rigid, and since waking patient has had several attacks of opisthotonos; risus sardonius well marked.—7 P.M.: Patient violently convulsed; opisthotonos lasting over half an hour.

13th.—Morphia repeated at 1 A.M., and at 2 A.M. an injection consisting of six teaspoonfuls of brandy, an ounce and a half of beef-tea, and twenty drops of tincture of opium, was given.—5.45 A.M.: A favourable turn seemed to have taken place, and patient swallowed with ease two ounces of sago water and half an ounce of brandy.—9.30 A.M.: No pain; can open jaws sufficiently wide to protrude the tongue. Temperature 99.2°; pulse 146; respiration 24. This state of things lasted till 4 P.M., when difficulty of swallowing returned, accompanied by hiccough.

14th.—2 A.M.: Patient rapidly sinking and unconscious. Pulse 160; respiration 40. Opisthotonos very violent about every half-minute.—At 5.30 A.M. death took place.

Tetanus; recovery.—W. T.—, aged forty, suffered a fracture of the thigh in October, 1871. For this he was in the hospital three months, convalescence being delayed by a slough appearing on the heel. About the middle of January last he was discharged, but the sore was not quite healed. His health, however, not being good, it was deemed advisable for him to leave the hospital. The sore remained much the same till a few days before readmission, when it became worse; and on the morning of March 1st a twitching sensation, which rapidly increased in severity, came on in the leg.

On admission, March 2nd, a spasm of the diaphragm occurring about every five seconds, and emprosthotonos, accompanied by drawing up of the affected leg, were noticed. Temperature 98.4°; pulse 80. Thirty grains of chloral were given at once, the patient soon going off into a comfortable sleep.—At 8.30 P.M. one drop of nicotine, with an ounce of starch, was ordered to be injected into the rectum every four hours. The patient was sick almost immediately after the injection, and then slept, the spasms ceasing. Sickness occurred after every repetition of the injection. A charcoal poultice to be applied to the sore.

March 3rd.—Patient has dozed all night; takes all the milk and brandy given him; the spasms of the diaphragm still continue; temperature 99°; pulse 92. No implication of the cervical muscles or those of the jaw. Nicotine to be reduced to half a drop.—10.45 P.M.: Has not vomited since the last enema; symptoms remain unchanged.

4th.—Had a good night; abdominal muscles somewhat rigid. Ordered three grains of mercury with chalk, half a drop of croton oil, and five grains of compound colocynth pill: to be taken at once.—9 P.M.: Bowels moved once;