

by pressure over the organ, made with strips of plaster and a bandage, with some quinine and opium internally. Under these measures, three weeks sufficed to render the splenic prominence invisible, and in two more weeks the patient left, fancying himself well, although the organ could be felt still unduly prominent.

In the treatment of these cases of enlarged spleen, I cannot say I have found the biniodide ointment always successful. In some instances it has appeared to do little good, and in the case reported, I am disposed to place change of atmosphere from his village, 20 miles distant, in the first category of curative agents; the tonics exhibited, doubtless excited some influence on the general system, and the bandage probably aided subsidence of the enlarged organ. The plaster mentioned is only used as a means of inducing confidence, and therefrom the application of the roller; as not understanding the effects of pressure, many persons would have little faith in such an apparently simple measure, as the application of a common bandage.—(To be continued.)

THE PHYSIOLOGICAL AND THERAPEUTICAL EFFECTS OF CARBOLIC ACID ADMINISTERED INTERNALLY.

By P. CULLEN, M.D., *Civil Surgeon, Hoshungabad.*

HAVING extensively used carbolic acid externally, I was led to believe it would be serviceable internally, where an antiseptic was needed, in such cases as sloughing dysentery or diarrhoea arising from indigestion, where there is an apparent want of the chylipoietic secretions, flatulence, with offensive fermenting stools, &c., but having no proper guide as to the quantity that might be safely administered, I set to work to ascertain this.

I secured two pariah dogs, about the size of greyhounds, put them on the ordinary full diet of a patient, and commenced, on the 19th April last, with one minim doses to each dog, three times a day. On the 21st, I gave 2 minims, three times; on the 23rd, increased it to 3 minims, which I continued to give three times a day until the 1st May. I then increased the dose to five minims, three times a day, and on the 5th to 8 minim doses. On the 7th, I gave each day, 10 minims, three times, and as I was obliged to leave the station for some days, let them both loose until my return.

In eighteen days each dog took 225 minims without showing that it had had the least effect on him: no thirst appeared to be induced, nor any apparent discomfort, and they ate their food regularly.

I returned to the station on the 14th and caught the same dogs, and recommenced my experiment on the 15th, by giving 10 minims, three times a day, to each. On the 16th, I gave 12 minims, and on the 17th, 15 minims, three times during the day. On the 18th, after the third or evening dose, it was noticed that one dog (the smaller of the two), was panting, and inclined to be sick; he put his nose frequently to the water, but evidently was not thirsty; from his symptoms, I concluded that there must be some heat and irritability of the stomach, caused by the large dose of the medicine; the other dog was not affected, (but there is more difficulty in getting him to swallow his dose, and some times a little is spilt.)

From these symptoms I think I have nearly arrived at the largest safe internal dose, but do not believe it a cumulative poison, as the effects rapidly wear off. The experiment is being continued, and I hope to give further results hereafter, and merely record this to show that a much larger dose of carbolic acid may be given internally, than is stated in works on therapeutics.

Whilst this experiment was being conducted, I had the following two cases, in which I tried the drug with the satisfactory results I had expected.

I.—*Munno Lall*, Hindoo, aged 28 years, diarrhoea, admitted the 29th April, 1871. Stools frequent, semi-fœculent, light ochre colour; very offensive, containing mucus, and attended with griping. Two minims of the crystallized carbolic acid were given, three times a day. The next morning there was no mucus in the stool, which was more natural, and not offensive; but there was still a little griping, and the acid was continued. On the 1st May the motions were quite natural, and no pain or uneasiness remained. He was discharged on the morning of the 2nd.

II.—*Mussammut Simuniya*, female, aged 50 years, Mahomedan, had been suffering from dysentery for a long time; stools frequent, (8 or 10 in the 24 hours,) consisting chiefly of slime and sloughs, very little fœculent matter; pain in abdomen increased on pressure, and great straining at stool. She was admitted on the 2nd May. One minim of the acid was given three times; the character of the motions at once changed; they were reduced to four in the twenty-four hours, and were free from slime. On the 3rd, she had only two motions, which were nearly natural, and she expressed herself as much better. On the 4th, however, she had four stools, which again contained a little mucus and slime, and this continued throughout the 5th. On the morning of the 6th the dose was increased to two minims, three times a day, when she had but two motions, which were quite free from mucus, and there was no pain or straining. On the 8th she had two motions, quite natural and healthy; the medicine was continued until the 13th, when she was discharged quite recovered, all tenderness of the abdomen had gone, and her appetite was much improved.

These two cases are not sufficient to show that the acid will answer in all of this description, but I mention them in the hopes that some one else will give the drug a trial, as this is not a station at which dysentery or diarrhoea prevail to any great extent.—(To be continued.)

ENTERIC FEVER IN BENGAL.

By J. B. HANNAH, M.D., and THOMAS O'FARRELL, M.A., M.D., *Assistant Surgeons, 63rd Regiment.*

THE subject of this paper was suggested by a study of the statistical returns of fevers in the Bengal Presidency from 1864 to 1868 inclusive, as given in the Army Medical Reports of those years. It will be seen by the accompanying table, that, in the year 1864, the number of cases of enteric fever throughout the

Year	1864		1865		1866		1867		1868	
Strength	39,936		37,631		35,446		34,237		32,909	
DISEASE.	Admissions.	Deaths.	Admissions.	Deaths.	Admissions.	Deaths.	Admissions.	Deaths.	Admissions.	Deaths.
Febris remit-										
tens	1,643	50	1,993	62	1,014	38	911	29	1,314	33
Febris ty-										
phoides	9	5	13	8	14	3	16	8	70	40
Febris con-										
tinua	2,662	26	3,997	42	3,308	36	2,647	23	3,254	27

whole of the Bengal Presidency, with a strength of European soldiers amounting to 39,936, was only *nine*: a trifling increase of one or two in each year has taken place up to the year sixty-eight, when there is a sudden rise from *sixteen* in 1867 to 70 admissions in 1868, forty of which proved fatal. As the disease does not appear to have been epidemic in any locality, it is but