

for that of the other, with this difference only, as to the event, that this patient persisted in rejecting the use of all means prescribed for her relief, and continuing to grow fatter daily, was one morning found dead in her bed, after having eaten a hearty supper of animal food.

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*To the Editors of the Medical and Physical Journal.*

GENTLEMEN,

**S**HOULD the following observations appear worthy your attention, you will much oblige me by inserting them in your useful Journal. I am,

Your's,

Grantbam, May 10, 1800.

B. LEESON, jun.

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It is much to be lamented, that, in the narration of medical facts, an unjust preference is given to such as have had a favourable issue; while unsuccessful cases, however interesting in their progress, or important in their event, seldom are brought before the public eye. The self-gratification which occasions this partiality to successful cases, leads also to another error, still more injurious to sound practice and medical improvement,—to the publication of fortunate cases, the very existence of which is doubtful. Not that I can suppose any medical practitioner so void of principle, as wilfully to impose upon the public, fictitious cases; but, I doubt not, it will be granted, an attachment to a preconceived opinion will frequently prevent a proper attention to the discrimination of disease. Hence, complaints of the most serious import are frequently reported to have yielded to remedies of trifling efficacy; which, if again employed, on the authority of such reports, are only productive of disappointment. I have been led to these reflections by some accounts I have lately seen, of the successful treatment of the croup. Judging from these descriptions, a person would naturally conclude the croup to be a disease of long duration and easy management. As by one author we are informed, that mercury employed, so as to produce salivation, effectually cures: another is confident of the success of a lotion made with the spiritus ætheris vitriolici compositus; while a third relies upon a decoction of feneka.

No doubt, all these remedies might be productive of good effect, if the rapid progress of the complaint allowed them to be fairly tried. But I am afraid, such is the celerity of the dangerous symptoms, that few practitioners have had the pleasure to experience a recovery from the true croup. It may be right, I should define what I understand by the *true croup*: By this term, then, I would express a disease, arising from an extravasation of coagulable lymph within the trachea and bronchial tubes, which occasions that peculiar sound in inspiration we should expect, was the breath drawn through a narrow pipe. This is preceded by a slight inflammatory stage, of which the symptoms are so little troublesome, as seldom to be observed.

In considering the cynanche trachealis, it is necessary to premise, that two distinct diseases appear to have been classed by writers under the same name. The one arising from a spasmodic stricture of the parts surrounding the trachea; the other depending on extravasation, the consequence of inflammation. In the first, the exhibition of an emetic seldom fails to remove the complaint, while the second bids defiance to every effort of art. In the spasmodic croup, the attack is sudden, generally commencing some time after the patient has been in bed; it is accompanied by remarkable anxiety, and oppression about the breast; a hoarse, shrill voice; great redness of the countenance; (which expresses most grievous uneasiness) quick and difficult respiration, and a soft pulse. Upon the operation of an emetic, these symptoms gradually subside; the patient sinks into a slumber, and awakes with little remains of the complaint. I am acquainted with a family, in which this complaint has attacked more than once, each child of a numerous offspring, and has never failed to disappear upon the operation of an emetic.

Very different is the progress of the inflammatory croup; in this, the first appearance of disease is of such an insidious nature, as seldom to create any alarm, being considered by the attendants as a slight cough accompanied with hoarseness. By degrees the roughness of the voice becomes more remarkable, the breath is drawn with difficulty, as if through a narrow pipe, occasioning a peculiar shrill sound;\* there is a constant feverish heat upon the skin, together with a profuse perspiration about the head and face, in so much that the sweat stands in drops upon the countenance, which exhibits the greatest anxiety; the pulse is quick and soft; the lips are pale,

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\* Febris excitatur ad liberandum corpus a muco, & membrana extra vasa.  
*Home de Suffocatione Stridula.*

frequently livid; the changes of countenance are sudden and frequent; at one time it is red, in an instant it is pale as a corpse. The progress of this disease, from its commencement to its termination, as far as you may depend upon the information of nurses, never exceeds more than four or five days: from the first appearance of danger, the patient seldom continues more than thirty-six hours, rarely so long. I have been obliged to refer to nurses, as I believe few medical men have witnessed the first attack of croup, it being too inconsiderable to merit their attention.

Having endeavoured to enumerate the pathognomonic symptoms of the croup, I shall farther intrude by detailing two cases which have lately occurred to me.

G. M. eleven months old, naturally of a full habit, recently weaned, and now about his teeth; as he has generally had a cough and stuffing while cutting his teeth, the nurse was not alarmed at this circumstance, which had occurred for a day or two before I saw him. I was first called about eight o'clock in the evening; the great anxiety, difficulty of breathing, and peculiar sound in respiration, clearly indicated his complaint to be the croup: his gums were lanced, an emetic mixture, composed of four grains of emetic tartar, one drachm of oxymel of squills, and an ounce and a half of water, was given in doses of two tea spoons full every ten minutes until it operated; a lotion, composed of *sp. ætheris vitriolici compositus*, and the *aqua ammoniæ acetata*, was applied to the throat. At nine o'clock, the symptoms continuing equally urgent, I had the assistance of an eminent physician resident in this town; by his advice, leeches were applied to the throat, and the patient put into a warm bath; blisters were likewise laid on each side the neck; from these means some relief appeared to be gained. At eleven o'clock, the child being more restless, was again immersed in warm water; an oily mixture was given occasionally. At four o'clock in the morning, the violence of the symptoms increasing, an ounce of ipecacuanha wine was given, in small quantities, before it produced any effect; the warm bath was again used; about seven o'clock the child expired.

April 20, J. L. aged twenty-two months, yet still at the breast, has had a slight cough for a few days; it has increased much during the night; the child has been very restless, and sweats much about the face and head; swallows with tolerable ease; breathes with much anxiety, and with a peculiar shrill sound. It was nine o'clock in the morning when I first saw this child; being aware, from the fatal termination of the former case, of the necessity of powerful means to arrest the  
 progress

progress of the disorder, I immediately opened the jugular veins, and obtained from thence between six and seven ounces of blood; after which a solution of six grains of emetic tartar in an ounce and a half of water, with a drachm of oxymel of squills, was given in doses of two tea spoons full every ten minutes; the whole mixture was given before any vomiting was produced; the child was then placed in the warm bath for seven minutes. For a short time it appeared to be more composed, and to breathe with less difficulty; but, about twelve o'clock, the former symptoms returned. A tea spoon full of the decoction radicis feneka was then given every half hour, which excited great thirst, and additional restlessness; the patient grew worse, breathed with more and more difficulty, and expired about three o'clock P. M.

It has generally been observed, that the croup is most prevalent during a wet season, or in damp situations; these two cases occurred when the weather was more than usually dry.

It will be observed in the above cases, that there was considerable diminution of the sensibility of the stomach; as appears from the quantity of emetic medicine necessary to produce vomiting. May not this arise from an increased determination of blood to the trachea, diminishing the influx in the vessels of the stomach?

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*Remarks on the Treatment of incarcerated Herniæ, with Cases: By M. WARD, Surgeon to the Manchester Infirmary.*

HAVING seldom seen the taxis successful as it is generally conducted, in cases of incarcerated inguinal and scrotal hernia, I was induced, several years ago, to place the patient in an *inverted position*\* whilst I applied the taxis; and am convinced it possesses some important advantages over the positions in common use,

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\* By this phrase is meant, the patient being held by the legs on the shoulders of an assistant; his body being allowed to hang down: another assistant is then to support his head and shoulders, and to incline them a little forwards, so as to relax the abdominal muscles,