

tioner, were probably of the same nature with those above mentioned. In the instance here related, no doubt can be entertained of every necessary circumstance having been attended to in the operation.

It may be proper to observe, that no prejudice is likely to arise against the Vaccine Inoculation by the fatal termination of Whitburne's Case; the mother supposing the child to have been inoculated for the Small-pox, and attributing its death to the disappearance of the eruption, or, as she terms it, the striking-in of the pock on the 10th day. The only inference the case seems to furnish, is, that we should not under-rate the possible danger of the disease, and thereby afford a handle to prejudice or malevolence to oppose a most useful and important practice.

P. S. It is almost superfluous now to adduce evidence in favour of the new Inoculation; and I agree with Dr. Pearson, in thinking it best to bring forward unfavourable cases only, when such occur. I may observe, however, that I have met with two instances lately of the *permanently* preventive power of the Vaccine. Two female servants of Mr. Cater, of Gracechurch Street, were inoculated with Vaccine matter, the one two years and a half, the other fifteen months ago. They have both been employed lately in nursing a child of Mr. C's in Small-pox, with a numerous crop of pustules; and neither of them have suffered.

Walbrook, July 12, 1801.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

MUCH as the medical properties of *Digitalis* have been lately investigated, it has been little employed in surgery. Yet from my own experience of its powers, it is, I think, greatly entitled to notice, and secondary to none of the more useful remedies except bark, opium, and mercury. At present, however, I shall confine myself to the strangulated hernia; and as a proof of its efficacy in it, shall subjoin the following case.

On the 19th of June my assistance was requested for a young man labouring under an incarcerated scrotal hernia on the right side, for which he had formerly worn a truss. The descent was occasioned by over-exertion at his business as a weaver, and was attended with the usual symptoms. Before I
saw

saw him, reduction had been attempted, after employing phlebotomy and calomel, the warm bath, enema nicotianæ, and a solution of sal ammoniac locally; and as inflammation had supervened in the scrotum on the same side, leeches had been applied to it. The failure of these means presented the operation by incision as a final resource; yet, not entirely discouraged by disappointment, the enema nicotianæ was ordered to be repeated, ice to be applied to the scrotum and frequently renewed, and a grain of Digitalis to be immediately administered. In two hours their sedative effects were strongly manifested, all resistance was subdued, and the hernia now reduced.

I have ascribed the chief merit to the Digitalis, because the enema nicotianæ and cold applications had previously failed, and the circulation was interrupted in a remarkable degree. The pulse was hardly perceptible, the countenance sunk, and the general depression so great, that æther and other strong stimulants were judged expedient after the return of the intestine.

Foreign writers have insisted much on resorting early to incision, which, though dexterously performed, is certainly hazardous. But I am under a persuasion, that the necessity for it may be superseded, in general, by the proper employment of these sedatives. The exceptions to which I allude are, where from the particular manner of descent, the efforts at reduction oppose an obstacle to the return of the intestine; a variety of which I have seen, and which must baffle every other resource of art: Otherwise, very few cases, I apprehend, would prove irreducible. Where a single dose of the Digitalis does not answer, it may be repeated every second or third hour, in conjunction with the means commonly employed, according to their sensible effect; relying on the judgment of the practitioner in attendance when to abandon them. And I must caution him not to continue the ice too long, especially when mixed with salt, by which a greater degree of cold is generated, lest gangrene should be induced, and the event of the operation, if necessary, rendered more doubtful.

Reduction is chiefly prevented by the inflammatory state of the contents of the herniary sac; which state consists in an increased frequency and vigour of the arterial pulsations, producing an effusion, and accompanied with a morbid sensibility and tension. These augmented dimensions are further extended, by the hindrance given to the return of the venous blood, and by the watery fluids of the intestines distilling into the strangulated cavity, as well as by the expansion of the gas contained within it. While, on the one hand, every cause of dilatation

dilatation must tend to lighten the stricture, admitting the tendon to be wholly passive; on the other, a diminution of bulk must obviously facilitate the replacement of the protruded contents. The sedatives employed in this case seem well calculated to fulfil the several indications. By the Digitalis the supply by the arteries is stinted, and muscular resistance obviated by it and the nicotiana; and it is the well known property of cold to diminish sensibility, and contract the circumference of substances coming in contact with it. I have said nothing of inverting the body, supposing it to be done in every instance attended with difficulty, as in this. My method is, to suspend the patient by the arms over the shoulders of a strong person, sitting or kneeling on a bed, and to incline the head and body a little forward; in this position, the intestines recede towards the diaphragm, assist by their weight the external force, and draw back first the part last protruded; the fluids may also escape into the abdomen by their own gravity, and the muscles immediately concerned are still further relaxed. Coarse as it is, the one adopted by our ancestors was more so; but their object was the same. It may not be amiss to remark, that the fluid contained in the incarcerated intestine should be discharged by pressing laterally, or by endeavouring to approximate its sides, and not by pressing from the fundus upwards. Where the aperture is not very strongly closed, after reducing the tension, a little time spent in this way will seldom fail to empty it; for the stricture must be tight indeed to resist the transmission of a fluid thus impelled by the hands of the operator.

You have before recorded an instance of the success of Digitalis in the strangulated hernia (see Vol. iii. p. 330,) of which this may therefore be deemed a confirmation.

I am, &c.

Manchester, July 11, 1801.

W. SIMMONS.

Observations on Pblegmatia Dolens, by Dr. HULL.

[Continued from our last, pp. 51—63.]

II. *Observations on Mr. White's Theory of the Disease.*

IN the second part of his "*Inquiry*," the ingenious author makes the following remarks: "When a healthful woman, who has not had the *anasarca gravidarum*, is seized with this disorder, in her lying-in in its simple, perfect, but un-

complicated