

MEDICAL GUIDE TO PARIS.

A Description

OF THE PRINCIPAL

HOSPITALS OF PARIS,

WITH SOME

ACCOUNT OF THE PRACTICE

OF THE MOST EMINENT

PHYSICIANS AND SURGEONS

ATTACHED TO THE DIFFERENT

HOSPITALS.

Translated from the French of F. S. Ratier, M. D.

WITH

CONSIDERABLE ADDITIONS

BY

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PREFACE.



AT a period when so many English Students are crossing the Channel with the intention of continuing their Medical Studies in France, an attempt to facilitate their pursuits, however humble in merit, will I hope, require no apology.

I further trust, that my endeavour to add, though in a so slight a degree, to the information already possessed, respecting the practice of the French Medical Practitioners, will not be deemed presumptuous. So rapidly, however, has the intercourse

between the two nations improved during the last ten years; neither prejudice nor gout, hatred of "steamers," nor love of ease, having been able to keep worthy John Bull at home, that I fear I can scarcely hope to escape. It might be easy in London to select a hundred people that could not tell the boundaries or extent of an adjoining county, yet it would be surprising if ninety-nine of them could not descant most fluently on all the merits and demerits of Paris; the magnificence of its palaces, the danger and dirt of its streets, the beauties of the Louvre, and the horrors of the Catacombs; the grace of the women and the affectation of the men, and a thousand et-ceteras. I must hope then that my *travelled* countrymen have returned with an additional share of leniency, and that they will excuse the repetition, when it occurs, of that which they already know.

To the Student who is concluding his studies, the

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Hospitals of Paris must be objects of the greatest interest, since it is only by a comprehensive knowledge of the present state of the Medical Profession, that he can hope to employ his time to advantage in its improvement, or even practice it with distinction ; and it is generally admitted that the French School of Medicine, embraces a large portion of the field of Medical Science.

The belief that I should have derived considerable assistance from a work of this description, has induced me to undertake it, and to venture somewhat boldly perhaps, to supply the deficiency. If it be of service to a single individual, I shall not regret the time bestowed upon it, for the work itself has agreeably, and perhaps not unproductively employed a few leisure hours.

I cannot help feeling however, that as an account of the Hospitals of Paris, it is very imperfect; a book

of this description might, and should present a faithful picture of the present state of Medical Science in France; since it professes to give the practice and *principles* of treatment of those whose knowledge has raised them to the first rank in their profession. I am however, well aware I have not effected this; it would require an abler and more experienced writer than I am. I have however, anxiously endeavoured to make it useful and correct as far as it goes; and though I regret my own want of ability to make it more worthy of perusal, I lay down my pen, in the hope that the subject will soon be resumed by one much more capable of doing it justice.

I owe it to M. Rattier to say, that I have freely translated some parts of his observations on the hospitals, and in others have made additions from my own notes; the whole of the historical details too are of my writing, and indeed as I have throughout the

work, without hesitation, joined any information I might possess respecting these establishments; though the merit of the work, if it have any, must be given to M. Rattier; I alone ought to be answerable for its faults.

In compiling the following sheets, I have also freely availed myself of the last number of the "*Rapport de la Conseil General des Hopitaux, &c.*" of *Tenon's* valuable work on the French Hospitals, and of *Delaure's* "*Histoire de Paris.*" To some, this enumeration of authorities may seem superfluous, but I have been more anxious to make this little book useful, than to claim any merit on the score of originality; and some of my readers may probably feel interested in referring to the works I have alluded to, which contain much valuable information, and many interesting details.

And now that I have concluded that most tiring of all subjects, (to the reader) an author's motives and scribbling of himself, if the patience of any of my readers has carried them thus far, I have only to thank them, and to beg their excuse for so long occupying their attention.

London, April, 1828.

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GENERAL ADMINISTRATION

OF THE

HOSPITALS OF PARIS.



ALL the civil institutions in Paris, devoted to Public Charity, are directed by the "*Conseil Général des Hospices, &c.*" This council, as it is now organized, was the project of M. le Comte Frochet, Prefect of the Department of the Seine: it sprung up in the first years of the Revolution, from the ruins of the administration that had preceded it, and which was comparatively feeble and inefficient, probably from its power being much more circumscribed.

In 1801 a general council and administrative commission was formed. The first of these had the general direction of all charitable institutions devoted to the indigent, the disposal of their revenues, the

power to consider and put in force whatever measures they might think beneficial to the hospitals, &c. the surveillance of the archives of all the hospitals of Paris, ancient and modern, and the direction of the "*Bureau Central d'admission*," established in the buildings formerly destined for the foundlings, situated in the square of Notre Dame.

To the administrative commission the execution of the laws and decrees relating to the hospitals and other institutions, was particularly confided.

The labours of this council have produced the happiest effects; the order, regularity, and cleanliness, resulting from rigid discipline, observable throughout the Parisian hospitals, cannot fail to please every observer. These establishments, even to the most trifling details, are conducted in a business like manner, there is no appearance of hurry or bustle, yet the wants of the patients are promptly and well attended to. There seems to be no expence spared to make every part relating to them as perfect as possible, they are national establishments supported by the government, consequently whatever be the end proposed, the best means that scientific men can point out are at the command of the council, and generally adopted. It is therefore not a matter of

surprise that the internal arrangements of these institutions should have elicited so much approbation from the thousands of foreigners that have poured into France for many years.

It must be gratifying even to a general observer to walk through the wards of the best regulated hospitals in Paris. The neat beds with white dimity curtains, are arranged in two or three rows the length of the wards, and are almost reflected in the well polished floors; the whole presenting such an appearance of comfort as almost to induce us to doubt whether it is really the abode of so much poverty and suffering.

Most of the hospitals have a number of the "sœurs de la charité" to attend the sick; they are members of a religious order, and an extraordinary example of practical disinterested benevolence, devoting themselves all their lives to such tasks as these, without pay or recompence of any kind, except indeed the enviable satisfaction arising from the performance of an almost uninterrupted series of benevolent acts.

The visits of all the hospitals are fixed at six o'clock in the morning in summer, and seven in the winter, and the medical officers are in general

tolerably punctual; a visit is also ordered every evening.

The "*élèves externes*," or dressers, and the "*élèves internes*," or house surgeons, to the different hospitals, are elected after rather a severe examination from among the most efficient of the students, and with great liberality is open to candidates of every nation. The house surgeons are chosen from the best of the dressers of the preceding year, and have a small salary of from £20 to £30 per annum, in addition to their board and lodging; at the Hôtel-Dieu there are about twenty, but the number to each hospital is limited.

The following table of the number of patients admitted, will shew that the labours of this administration must be considerable.

Years.	Patients.
In 1806 - - -	28,225
1807 - - -	29,982
1808 - - -	29,359
1809 - - -	31,878
1810 - - -	33,210
1811 - - -	32,506
1812 - - -	37,687
1813 - - -	35,211

Every want, every infirmity, every period of life has now at Paris an establishment devoted to it. For lying in women there is the *Maison d'Accouchement*; the *Hospice d'Allaitement* also receives pregnant women, and children recently born; if they have no acknowledged parents, or if they have had the misfortune to lose them, they pass to one of the two hospitals for orphans, according to their sex, *Hospice des Orphelins* and *Hospice des Orphelines*.

An hospital has been formed to nurse and receive all children suffering from disease, receiving equally those which come from public establishments, or those whom their friends send from the interior of Paris. The age of manhood has many ordinary hospitals similar in their object but differing in extent; and those diseases which could not there be treated without inconvenience or danger, and which require precautions and particular regimen, have special hospitals. If the diseases are of such a nature as to preclude all hope of cure, there are two hospitals provided for them, one for patients of each sex. Old age also has its hospitals for men and women separately.

There are even establishments where married individuals may in their old age come and continue

to live together, while others have been formed for persons, who, though not entirely destitute, yet have not preserved sufficient for their support; in these institutions, on their paying a certain sum, the rest of the expences are defrayed by the funds of the establishment.

The hospitals for ordinary patients are *eight* in number.—The HÔTEL-DIEU, LA PITIE, LA CHARITE, SAINT-ANTOINE, NECKER, COCHIN, BEAUJON, and L'HÔPITAL DES ENFANS.

Three hospitals are destined to receive special diseases,—the HÔPITAL SAINT LOUIS, where affections of the skin especially are treated; the HÔPITAL DES VENERIENS and the MAISON DE SANTE, devoted to the treatment of the venereal disease.

Three hospitals for infancy,—L'HOSPICE DE L'ACCUCHEMENT, L'HOSPICE DE L'ALLAITEMENT, and L'HOSPICE DES ORPHELINS,—the two first serving for lying-in-women.

Two hospitals for old age,—L'HOSPICE DE LA SALPETRIERE for women, and L'HOSPICE DE BIGETRE for men. These two serve also as lunatic asylums.

Two hospitals for incurables, one for each sex, the females in *Rue de Sèvres*, and the men in *Faubourg St. Martin*.

Four hospitals where lunatic and deranged minds are treated, and where the patients are only received by paying. L'HOSPICE DES MENAGES, LA MAISON DE RETRAITE DE MONT ROUGE, L'INSTITUTION DE SAINT PERINE, and LA MAISON DE SANTE, in the Faubourg St. Denis, forming a total of twenty-four establishments, all placed under the administration of civil hospitals.

Nearly all the public hospitals are open to medical students of every kind, and to foreigners with quite as much facility as Frenchmen, with the exception of the Hôtel-Dieu, where those Englishmen only, who have taken their degree, or passed the college, and can shew their diploma, are allowed to attend. On presenting it however they immediately receive their ticket of admission from M. Dupuytren: and at the venereal hospital no one is allowed to attend but by the invitation or special permission of the surgeons.

The military hospitals, of which there are three, are not public.

Thanks to the care of a wise and benevolent administration, the hospitals of Paris, at first only destined to offer an asylum to suffering and misfortune, have become the seats of a highly valuable mutual instruction. Clinical schools are there formed

in every direction, under the auspices of the most celebrated physicians, and are eagerly attended by the students. Each practitioner is seen, taking advantage of the position in which he is placed, directing his endeavours towards one point, which he attempts to elucidate by numerous researches, and ingenious experiments, advancing thus powerfully the progress and perfection of science and art.

Pathological anatomy, cultivated with as much zeal as success, reveals to medical men the seat and sometimes the causes of diseases, pointing out to them new methods of treatment, or at least, and this is always a precious advantage, it shews them the affections against which their attempts would fail, and warns them to limit themselves to a palliative treatment.

Each year the administration publishes a medical Report,* the result of observations made in all the hospitals, it encourages by honourable rewards those of the students who have distinguished themselves by their labours and assiduity. It is by these means that the hospitals of Paris have produced so many men who now occupy a distinguished rank in the

* This Report had only appeared once in 1825, though then soon expected to be continued. No second publication has however yet taken place.

medical profession, and of whom a great number at present preside, or may hope to attain the rank of professors to the different faculties of France. It was on leaving the hospitals of Paris that Professors Delpeck, Lallemand, and Dugés were appointed public teachers to the Faculty of Medicine of Montpellier.

The numerous and useful modifications in the interior regulations of the hospitals, the new buildings erected according to the most approved plans, the ancient purified by every imaginable means, the establishment in the greater number of hospitals, of apparatus proper to administer fumigations, baths, of every kind; public consultations, by means of which a great number of patients are treated as at home, attest the active solicitude of the administration for the relief of human suffering, and for the advancement of the healing art, and place the hospitals of Paris in the first rank among institutions of this kind.

Though all the hospitals afford subjects of instruction, there are nevertheless some which, on account of their extent, their situation, and their clinical schools merit a special attention on the part of students and foreign professional men.

HOTEL-DIEU.

The Hôtel-Dieu, probably the most ancient hospital of Europe, is situated in the island of the city, to the south of the square, and facing the porch of the Cathedral of Notre Dame.

The history of this hospital through each successive age, from the seventh to the nineteenth century, is not without interest; the details are however far too numerous to enter into at present.

The Hôtel-Dieu consists of a mass of buildings irregularly disposed, added one to the other at different epochs. It does not, like many establishments of this kind, present a regular whole, composed of symmetrical parts. It is only on the square in front of Notre Dame that endeavours have been made to give it any regularity. An advanced pavilion of a severe style, crowned by a Doric frieze and a vast pediment, and accompanied at each of its sides by two iron railings, which open into the two courts, forms the only regular façade, and the principal entrance to the hospital.

Its various and principal buildings are extended along the northern banks of the little arm of the Seine from the *Petit Pont*, where there is an entrance, as far as the environs of the archbishop's palace.

This extent of ground has not sufficed for the wants of the hospital, they have been obliged to build on all the opposite bank of this arm of the river, and even to construct two bridges, the *Pont Saint Charles* and the *Pont au Double*.

This hospital is also inconveniently situated in the centre of Paris, and in a very populous neighbourhood. Its two bridges, covered with buildings, stop the current of air from the branch of the Seine, and notwithstanding the great improvements which have been lately made, it does not enjoy that free situation which is so desirable for an hospital.

Its ancient state less than a century ago was dreadful, as will be seen by the following extract from the Report made to the General Council of Hospitals, in 1816.

“ The beds were crowded in the wards, and the
“ patients crowded in the beds; there were often
“ four, and sometimes six sleeping in the same bed.

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“The administrators of this establishment mentioned
“it themselves in a memoir published in 1767,
“and more than a century before, in 1661, their
“predecessors had recorded the same fact, in an
“account of the Hôtel-Dieu. It has even been
“seen on some extraordinary occasions, that patients
“have been placed one above the other, by means
“of mattresses placed upon the top of the bed, and
“to which one could only enter by a ladder. The
“portion of air that the patient breathed was from
“three to four *metres*, and the patient would have
“required 12 not to experience great danger in the
“atmosphere that surrounded him.”

At present scarcely any traces remain of its ancient and afflicting state; the wards are large, well ventilated, and perfectly free from any thing that can offend the senses, the beds are placed at convenient distances, and each patient has one to himself.

In the winter, the wards are thoroughly and equably warmed by porcelain stoves, and without any escape of smoke.

Three iron gates close the entrance; after the first is a peristyle 40 feet in height, and from 30 to 36 in extent; to the right is a room where the physicians and surgeons meet each day, to the left is the

office for the inspecting agent, and beneath, the apothecaries shop, the kitchens, and the servants eating room.

In front of the entrance are three large doors, which lead to a vestibule of 30 feet in breadth and a 100 in length, from which seven doors open, four to the right and three to the left.

The first door to the right leads to a place where the guard for the night service remains, a corporal watches here, and admits the patients. At the entrance of the second door, a staircase leads descending to a court, in which are the baths, the magazines, and the pantrys. At the end of this court is a garden of about an acre, which has been formed on a place that was occupied by old buildings, and which is used as a walk for convalescent women. Another staircase conducts to the ward *Saint Jeane*, and to every part of the building for the hospital attendants, &c. The ward is on the first floor, and contains 90 beds. The rooms of the hospital attendants, their chapel, their infirmary, their eating rooms, their laundry, and some rooms for ecclesiastics, occupy the second, third, and fourth floors.

The third door to the right leads to *Saint Marthe's*

ward, occupied by women. It contains 66 beds. An altar is at the extremity; here mass is said on Sundays and holidays. Near this ward is an office where the linen necessary for the dressings for patients is prepared and distributed, the bathing tubs are also kept here. The fourth leads to the bridge which connects the two parts of the buildings of the Hôtel-Dieu.

The first door to the left is the principal door to the bureau, where the patients are registered; the second to the place where they wait and change their dress; the third by a landing place to *Saint Come's* ward, occupied also by women, and containing 42 beds; near to it are stairs descending to the kitchen, and used for the general service of the wards. Those wards on the upper floors are also all occupied by women; they contain 540 beds. On the second floor is a general laundry; this is the same size as the vestibule; above this again is a ward for women, containing 50 beds.

The other part of the building, that which is beyond the bridge and in the *Rue de la Bucherie*, is occupied by men.

We come first to *Saint Charles's* ward, which, with a little contiguous ward, called *Saint Jacques*,

contains 98 beds. It might contain a greater number if the increase of patients required it. The wards of *Saint Roche* and *Saint Antoine*, also on the ground floor, contain together 94, and that of *Rosaire* 40 beds.

On the first floor, *Saint Paul's* ward occupies, with two annexed ones, the length of the building, and are devoted to the wounded, and to surgical diseases; 184 beds are here placed; formerly there was a much greater number. At the side was a ward for operations, it was attended with all the dangers that a ward of similar destination can present.

The second floor has two wards, *Saint Joseph* and *Saint Martin*, of which one contains 104 beds and the other 79. There are 75 in *Saint Monique's* ward, on the third floor.

Thus the number of beds for the men is 674, that of the women is 588, and these are distributed in 23 wards, 11 for the men and 12 for the women, making a total of 1262.

A chapel has been established in a little ward, at the bottom of that of *Saint Charles*. The patients of both sexes may hear mass, without any communication between them.

In other parts of this building there has been constructed a guard room, a dead house, different places for dirty and clean linen, an amphitheatre for anatomical lectures, an amphitheatre for consultations, which serves also for anatomical and clinical lectures, dissecting rooms for the instruction of the pupils, sleeping rooms for the infirmary men, a great reservoir which furnishes the lower wards with water, and carries it by means of a pump to the upper.

The superficies of buildings, which form the Hôtel-Dieu, covers four acres of Paris, but in these four acres must be included the space not occupied by the wards, but by offices which are merely the necessary dependencies of so large an establishment.

Three registers are kept at the Hôtel-Dieu ; a general register in which is inscribed all the patients that enter ; those who die ; those who go out, with the duration of their stay ; and an especial one for the deaths. To these registers were added in 1791, fasciculi, to shew in a precise manner, the number of patients existing in each ward. A clerk always sleeps in a room adjoining the passage, for it had happened, that persons severely wounded or dangerously ill, brought during the night to the Hôtel-

Dieu, had died, before their name and condition could be registered.

The room in which the patient presents himself to be noticed and registered, is of considerable size ; when the weather is severe, it is changed to a room at the side, in which there is a stove.

The patients on entering the Hôtel-Dieu, quit the linen and clothes which they wear, and take those of the hospital. The clothes they had are registered ; they are made into a parcel, on which their name is marked, the day of their entry, the number of their register, and the ward where they are placed : there is for these parcels a particular magazine, divided for the two sexes. The clothes are returned to the patient, when he leaves the hospital ; if he dies, they are given up to the relations, provided their indigence be proved. Besides this, there are in the women's wards, bed-gowns for those who may require them.

These details respecting the registers, patient's clothes, &c. are equally applicable to all the hospitals, since they are all under the same administration, it will not therefore be necessary to repeat them. Formerly, feather beds were used ; at pre-

sent, each is composed of two mattresses, one bolster, and one or two pillows.

The administration of hospitals, has, in its report, comprehended ten years, from the 1st of January, 1804, to January 1st, 1814, and has ascertained from the comparison of the number of patients and of deaths, that the mortality during these ten years, was one death in $4\frac{98}{100}$.

In 1815, the administration counted in this hospital, three hundred and sixty-seven thousand, two hundred and fifty-five days; that is to say, the total of days that during that year each patient had remained there.

The patients are attended by sixty *sœurs de la charité*.

The visit to this hospital, is fixed at six o'clock in the morning in summer, and seven in the winter. The physicians and surgeons, are also expected to make a visit in the evening.

This hospital is only open to those of the Foreign physicians and surgeons, who have passed their examinations, unless by special permission from some of the medical officers attached to the hospital.

A clinical lecture is given every morning, about nine o'clock ; that is, immediately after the visit of the medical officer charged with it for that three months.

The Hôtel-Dieu, the most ancient and most extensive of all the hospitals of Paris, is also the most important under the head of Clinical Instruction, of which it is the centre. This hospital, where formerly were received and indiscriminately heaped together, diseases of all kinds, is at present devoted to acute diseases alone, either external or internal. Patients afflicted with special affections, such as the itch, herpes, syphilis, mental alienation, &c. are forwarded to those hospitals destined for their reception.

The surgical service, is confided to the care of M. M. Dupuytren, Sanson and Breschet, and divided between them ; though the greater proportion is reserved for M. Dupuytren : and in this division, a daily visit repeated night and morning, gratuitous consultations, surgical operations, clinical lectures ; all are done, with a zeal and assiduity difficult to imagine.

I believe nothing will be better adapted to give a just idea of the practice and opinions of this cele-

brated surgeon, than the notes he has had the goodness to give me.

“The demolition of the houses adjoining the Hôtel-Dieu, the access given to the air around this building, and in its interior; the suppression of those wards considered insalubrious; the purification of others by reducing the number of beds; the lowering the windows to the floor; the removal of the insane; of women in child-bed; of contagious, cutaneous, or other diseases; of ulcers; of the aged and infirm into other establishments; the abundance of every thing necessary for covering the beds and bodies; for dressings, food, and medicines; the order and regularity established throughout all the service, have made the Hôtel-Dieu one of the most salubrious hospitals of the capital. The sight and smell are no longer disagreeably affected as before; Adynamic Fevers are now scarcely ever observed here, and which a confined air, loaded with putrid miasma, produced in so great a number. Hospital Gangrene is no longer found, and M. Dupuytren has been more than once obliged to close his course of lectures on Clinical Surgery, without having been able to offer a single example of it to his pupils. The trephine operation is practised in those cases, where its em-

ployment is indicated ; and in those circumstances which are not beyond all resource, succeeds like others, and for analagous reasons.

On the other hand, and probably the effect of the precaution taken to favour the access of air into the hospital, to renew it, and make it circulate through the wards, a great number of inflammations is observed ; as if in avoiding one extreme, we must necessarily fall into another. In fact, if no more putrid and malignant fevers, or hospital gangrenes are seen, we observe pleurisies, pneumoniæ, peritonitis ; such are the causes of death of the greater number of patients who die in the surgical wards. All the bodies of individuals who have died during the last six years have been opened without exception, we have therefore been enabled to ascertain, that, as Desault often said, without being able to furnish the proof, the greater part of those persons who die during the treatment of surgical diseases, are carried off by internal inflammations ; which are the most frequently to the number of two, three, or four, on the same subject.

This observation has not been lost in the treatment of surgical diseases. Diluents and cooling medicines have taken the place of tonics, in nearly all the cases.

Bleedings and leeches have taken those of excitants and stimulants. Scarcely a pound of Quinquina is used internally, or a few pounds externally on nearly three thousand patients who are admitted and treated each year in the surgical wards.

The fractures are here nearly all treated by position ; some, such as those of the neck of the femur, and of the neck of the humerus, solely by these means the others by the position, aided by apparatus destined rather to guard against motion, than to act with force upon the limbs. Continual extension is not used in any case. The frightful apparatus for the reduction of fractures and luxations, has been banished, and has given place to milder methods. The herniæ are operated upon, the instant after the entry of the patients. The operations for cataract are made by displacing the chrystalline lens, and at the bedside of the patients, which guards against their removal after the operation.

The mortality here, is reduced upon an average, 1 in 18, 19 and 20. The operation for the stone succeeds in $\frac{5}{6}$ ths. of individuals. The operation for hernia in $\frac{3}{4}$ ths. ; those for cataract in $\frac{7}{8}$ ths. ; those for fistula lachrymalis, by the introduction of the

canula of gold or platina, in $\frac{12}{20}$ ths." *Note communicated by Professor Dupuytren.*

Independent of the surgical clinical instruction, there is besides at the Hôtel-Dieu, a medical clinical instruction, with which the physicians of this establishment charge themselves quarterly, and in rotation. These are M. M. Recamier,* Petit, Husson, Guèneau, de Mussy, Borie, de Montaign et Geoffroy.

M. M. Breschet and Janson, each charged with a service, independent of the visits, give courses of lectures on the different parts of the science, and second by every means in their power, their eminent chief. By this happy union of talent, the progress of science is assured. If different methods of treatment be proposed for the same disease, each of the surgeons adopts a particular one, so as to institute a comparative examination. It is thus in the operation for the stone, that M. Dupuytren operates by the bi-lateral, M. Breschet by the ordinary lateral manner, and M. Sanson by the recto vesical.

M. Recamier, one of the most extensive practi-

* Since the new organization of the Faculty, M. Recamier is Clinical Professor at the School of Medicine, and no longer of that founded by the administration.

tioners in the capital, and animated by the greatest ardour for the profession, which he exercises with distinction, is remarked for the sagacity with which he recognizes diseases, and their different complications, by the certainty of his prognosis, and the skill with which he manages the infinitely various means which Therapeutics furnish. In the midst of systems which succeed each other rapidly in medicine, he gives absolute preference to none; he borrows from each, those parts which appear advantageous. Passing turn by turn from the expectant, to the most energetic plan, he leaves those who would form an exact idea of his practice, in the greatest embarrassment. Like all the physicians of hospitals, he applies himself to researches of Pathological Anatomy, and Materia Medica, and he has not a little contributed to the advancement of science and art. At this moment he is occupied in researches on the treatment of cancer by means of compression. He denies the existence of primitive cancerous vice, and thinks that the cancer is at first only a local affection, and that there is only general infection, when the products of the degeneration, taken up by the absorbents, are carried into the circulating system. Setting out with this principle, he endeavours to diminish

cancerous tumours, by compressing them, by means which he varies according to the seat of the disease, for he attacks cancer of the breast, of the uterus, and even of the mouth. When there is ulceration and cancerous vegetation, he joins to compression, cauterization with nitrate acid of mercury, dissolved in nitric or nitro-muriatic acid. His most ordinary means of compression, is the agaric cut in disks, and placed in wedge-shape or elongated compresses, which he disposes between the turns of a bandage. He even goes so far, as to remove by means of ligature and excision, the carcinomatous vegetations, which prevent or oppose the application of the compressing bandage. M. Recamier speaks with enthusiasm of the good effects of this treatment.

It is easier to give an account of the opinions of other physicians of the Hôtel-Dieu, who divide themselves, though in an unequal manner between the ancient medical doctrine, and that which seems to have succeeded it. On the one side, M. M. de Montaign, Petit, Borie, and Geoffroy, appear to have preserved in their practice the ancient ideas of humours, and the opinions of Brown, on the employment of tonics and stimulants, and they rest upon theories more or less persuasive, and on advanta-

geous results. On the other hand, M. Husson adopting the principles of the chief of Physiological Medicine, seems to go even farther in his opinions. Prescribing in nearly every case, diet, emulcent drinks, local or general bleeding, baths and relaxing applications, he completely proscribes the greater part of other therapeutic means, and numerous successes seem to confirm him in the practice which he has followed during many years.*

NOTES COMMUNICATED BY M. DUPUYTREN,
Respecting some peculiarities in his Practice.

PHAGEDENIC AND CORRODING HERPES.

“There is not a physician who has not had an opportunity of observing and treating phagedenic or corroding herpes, and to experience a disagreeable proof of the inefficacy of the anti-herpatic, anti-scrophulous, anti-venereal remedies, and others which have been tried by turns against this cruel disease, according to its different appearances, and its supposed nature. We know, that in spite of all the remedies,

* Such was the practice of M. Husson, at the time of the first edition of Ratier, since that, new reflections and experiments, have induced him to put in practice, the counter-stimulant doctrine.

the phagedenic herpes, eats and destroys no less the nose, the lips, the cheeks, the eyelids, the ears, the temples; parts which it more especially and frequently attacks. Fire itself seems to irritate, as well as arsenical paste; these agents have besides the inconvenience of destroying the parts on which they are applied, and to add to their deformity. These motives have for a long time induced M. Dupuytren to seek other remedies against phagedenic herpes, and it seems certain that they may be cured without deformity, by the use of the following powder.

℞ Hydrarg. Submur. præcip. partes	-	199
Oxidi. Arsenici. Albi. vel.	}	partem - 1
Acidi. Arseniosi.		
		200

This remedy, which acts rather as a specific than as a caustic, may be variously employed. If the surface of the herpes is ulcerated, moist and cleaned, it is powdered with a little puff, charged with the above described powder, so as to cover it with a thick layer, of about the twentieth part of an inch. If this surface is covered with a scab, it must be thrown off by means of a poultice, and then it is

powdered as has been just described. In fine, if the herpes is actually covered with an imperfect cicatrice, it must be destroyed; twenty-four hours after, the surface is powdered, when it must necessarily have ceased bleeding.

If it be feared that the powder does not adhere sufficiently strongly to the parts, and that it should fall or be rubbed off, it may be diluted with gum-water, or incorporated in rose ointment. In this case, the dose of arsenical acid, must be increased to one or two hundredths. In all cases, we must wait until the powder or ointment falls off of its own accord, which happens ordinarily at the end of eight or ten days, and to renew the applications until the cure be complete. It takes place most frequently at from eight to ten weeks, or five or six applications. An experienced practitioner may of course augment or diminish the proportions of elements, constituting the remedy according to the extent or depth of the evil, but it appears important not to exclude any part of its composition. Both appear necessary to its action, without being able to determine in a precise manner, the part which each takes.

ANTI-SYPHILITIC TREATMENT,

Employed in the Surgical Wards at the Hôtel-Dieu.

“Syphilis complicates many surgical diseases ; it alone, produces a considerable number. From thence arises the necessity of making the anti-syphilitic accord with the other surgical remedies in the treatment of these complicated affections. We should endeavour in vain in these cases to treat separately the principal disease, and its venereal complication ; it is almost always necessary to effect a cure, to treat them simultaneously.”

The choice of curative means, is here of extreme importance. The metallic mercury, reduced to the state of oxide, by the trituration with lard, and applied in frictions on the extremities, cannot be administered but with much difficulty in the general hospitals, and in the large wards ordinarily deprived of a mild temperature, which disposes the skin to absorption. Besides, this combination has the inconvenience of growing rancid on the surface of the skin, and, in consequence, to spread an infectious odour, which is equally prejudicial to those who employ it, and those who are lodged near them. In

fine, these frictions have the inconvenience of contaminating for a long time, the dress and bed-clothes.

The sublimate administered by the mouth in concentrated solution, or much diluted, has other inconveniences : in concentrated solution, it acts too nakedly on the stomach, which it irritates and inflames, as also the lungs ; in diluted solution in the daily tisane, it is nearly always decomposed, precipitated, and thus loses all its virtue ; besides, its administration necessarily abandoned to the sagacity of the patients is commonly very irregular.

The venereal disease, which complicates surgical diseases, is most commonly ancient, inveterate, and constitutional, as it is called, and further, very often characterized by nocturnal pains, &c.

These considerations appear to have directed M. Dupuytren in the choice of means which he employs against these complicated affections. His treatment unites sudorific, mercurial, and calming remedies, the combination of which, constitute a whole, the most proper to stop the pains, and to combat the oldest and most inveterate venereal vice.

He gives the sudorifics in tisane and syrup, then the sublimate and the opium combined, and reduced in pills, the whole as follows.

Take every day, divided between morning and evening, in bed, as much as can be taken, the following drink.

℞ Rad. Smilacis. Chinæ. }
 — Sarsaparillæ. } *a.a.* ℥*fs.*
 Ligni. Guaiaci }
 Aquæ. Oij.

Boil it until it be reduced one-third. Add to the first glass of this decoction in the morning, and the last at night,

Sudorific Syrup, ℥*ij.*

In fine, take every day, morning, noon and evening, an hour or less before the next meal, each time, a pill composed of

℞ Extracti Guaiaci - - - gr. *ij.*
 — Opii Aquosi - - gr. *fs.*
 Oxymer. Hydrargyri - - gr. $\frac{1}{2}$.

A moderate diet adds to the efficacy of this treatment.

Ordinarily, there is no anti-syphilitic local treatment employed. In this manner, the local symptoms

become in a certain degree, the thermometer of the efficacy of the internal treatment, and they disappear nearly constantly after its use, for some time ; first, the pains at the end of eight or ten days, the venereal character of wounds and ulcers, at the end of a few weeks, the indurations, the excrescences, and the ulcers themselves, at the end of a month or six weeks, the exostosis last.

We are too generally led to look upon venereal affections, as being radically cured when the symptoms have disappeared. M. Dupuytren is persuaded that the disease is at that time, in the greater number of cases, only weakened ; and he attributes to the treatment, directed according to these principles, the spontaneous relapses, which frequently takes place in the venereal disease in the hospitals ; therefore, he has adopted as a general rule, in the treatment of constitutional venereal diseases, to continue the employment of curative means, after the complete disappearance of all the symptoms, during a time equal to that which has been necessary to dissipate these symptoms. It is then only, that cause and effects are equally cured, and without fear of relapses."

M. DUPUYTREN'S TREATMENT,

Of Inflammation of the Retina.

“ The operation for the cataract, is always done at the Hôtel-Dieu, by depression and breaking. One of the consequences, the most common and the most serious of this method, which otherwise has much the advantage of the operation for extraction ; is the inflammation of the retina, called *inflammation of the Iris or Iritis*, by those who are more struck with the apparent symptoms, than the cause and true seat of this disease. The result of this disease, is long and obstinate pains in the head and eye, contraction of the pupil, troubled aqueous and vitreous humours, redness of the conjunctiva, continual flow of burning tears, the impossibility of sustaining the faintest light, the strong contraction of the orbicular muscles, the formation behind the pupil, of a fibrous and accidental “*pellicule,*” to which the iris ordinarily adheres ; in fine, blindness, which, however, may be remedied at the end of some months, by destroying or displacing the pellicule, of which we have just spoken, by means of the cataract needle.

This inflammation attacks also very often children with scrophulous affections, and it presents the same

symptoms as in the preceding cases, joined to a horror of the light, and a contraction of the eye-lids. It leads them to hide themselves in the most obscure places, and to press the eye-lids one against the other so forcibly, as often to cause the lower eye-lid to pass behind the upper, which bringing the eye-lashes of the first, in contact with the conjunctiva of the second, adds, still further to the pain and danger of the disease of which we are speaking.

Without doubt, bleeding and leeches, diluents and derivatives, such as setons and purgatives, are indicated and useful in such cases ; but experience has but too often proved their insufficiency, and has induced M. Dupuytren to seek other means. That with which he has succeeded the best, for the last ten years, is the internal use of the extract of *bella-donna atropa*: the powder in a dose of three, four, eight, twelve, or a greater number of grains ; the extract is that of one, two, three, and a greater number of grains : the one and the other divided into six doses, to be taken every two hours.

To prevent either local or general narcotism, which these remedies might produce, M. Dupuytren is in the habit of accompanying their use with that of the artificial water of Seltz."

HOTEL-DIEU.

It is unnecessary to say that the use of anti-scrophulous medicines, of bitters, and of anti-scorbutics, remedies so lavishly employed during the last twenty-five years, can only nourish and excite this inflammation in children. M. Dupuytren's principles of treatment indicates that he takes care not to employ them in these inflammations, though they may have first owed their rise to a scrophulous affection."—*Note communicated by Professor Dupuytren.*

ON THE TREATMENT OF SCROPHULOUS DISEASES.

“The treatment employed by M. Dupuytren in scrophulous diseases, differs much from that generally followed in these affections.

His abandoning the ordinary method is the result of anatomical and physiological observations on the nature and progress of scrophulous diseases.

Whatever be the seat or variety, scrophulous affections offer three distinct periods in their progress. In the first, the disease is inert in some degree, and only manifests itself by the characters natural to the lymphatic constitution, and by a constrained action of the parts affected, more or less difficult to perceive. He employs in the first period

every means that hygien and pharmacy afford, of preserving and fortifying the constitution, and consequently of effecting the disappearance of the disease. M. Dupuytren further takes great care to avoid all that can irritate, disturb, or even heat, as for example the elixirs, the anti-scorbutic syrups, and other spirituous medicaments, with excitants which he thinks adapted to cause the change of the disease from the inert to the inflammatory state.

It is especially in the second state of the disease, always marked by excitation, fever, local pains, swelling, and sanguineous exhalations, that he avoids these stimulating remedies, which, as the elixir de peyrilhe, (an alcoholic and alkaline remedy united in one) the anti-scorbutic syrup and wine, have produced, by the abuse that has been made of them during the last twenty-five or thirty years, more harm than the scrophulous disease itself.

In the second period of the disease, M. Dupuytren, without any regard to its presumed nature, treats it as an inflammatory affection,* by bleeding, leeches,

* Now some years since, and prior to the epoch when the physiological doctrine appeared, many practitioners, among whom were observed Professor Fouquier, and M. Jadelot, physician to the Hopital des Enfants, professing the opinion put forth by M. Dupuytren, adopted it in their practice, and

diet and emulcients, by which means he has often stopped its progress and prevented its results, such as caries in the bones, distorted spine, spontaneous luxations, suppuration, its consequences, and the destruction of the organs. If the suppuration is established, and its produce easily escapes without, and the disease has returned to the nearly inert state which constitutes its first period, he recurs to the use of means calculated to modify and strengthen the constitution, but taking care always to avoid those which may irritate, agitate, cause restlessness, loss of appetite, or fever. On this account, even in the third period of the disease, he abstains from the use of vinous preparations, alcoholic, alkaline, and others analagous. He only prescribes, with this object, preparations purely aqueous of Cinchona, of Gentian, or of Quassia, persuaded that they contain all the *tonic* effects which belong to these substances, and he throws out all that the ordinary preparations contain of irritating, either in their principle or in the mode in which they are administered. Thus he only prescribes infusions and aqueous syrups of Gentian, employed an antiphlogistic treatment more or less energetic, in the inflammatory period of scrophulous affections, and abstained, at least for that time, from all exciting medicines.

Cinchona and Quassia, to which he gives more or less strength, according to the age and sex of the individuals, the kind or species, the seat and character of the scrophulous affection: even then he suspends the use of them from the moment that irritation shews itself."—*Note communicated by Professor Dupuytren.*

M. DUPUYTREN'S TREATMENT,

For Spots on the Cornea.

"The patients have flocked to the Hôtel-Dieu for some years, for the treatment of spots on the cornea, as formerly under Desault, for that of chronic ophthalmia of scrophulous or other nature.

The treatment employed by M. Dupuytren is as follows:

A bleeding if there be violent irritation. Leeches to the temples if this irritation is less. Afterwards, one or two mild purgatives, two or three days intervening between each. After which a seton made of cotton threads, united in a cylinder, and some inches in extent, under the skin at the back of the neck.*

* Professor Dupuytren prefers this kind of seton to the flat mesh unravelled at the edge, that has been employed hitherto, because it causes less pain at the moment of pass-

In fine, the insufflation, or blowing into the eye or eyes, with the barrel of a quill, the eyelids being separated, a pinch of an impalpable powder, composed of

R̄. Oxyd. Zinci. impur.

Sacchari Crystal.

Hydrargyri Submuriatis aa partes æquales,

Misce fiat Pulv. subtilissim.

The size of the pinch may vary, and the insufflation should be repeated night and morning. The patients ought neither to wash nor dry their eyes after it.

When there is no disease on the eyelids, no inflammation, no irritation of the conjunctiva, the insufflation of the above powder generally suffices to remove the spots. Those which are recent and slight are completely dissipated in a few weeks by this treatment. The thicker and larger patches are ordinarily cured in a month or six weeks, and very frequently patches which occupy nearly the whole of the cornea, and completely cover the pupil, entirely intercepting the passage of light into the eye, disappear entirely in a few months."—*Note communicated by Professor Dupuytren.*

ing it, and that in this manner a sufficient irritation may be produced, in giving to the seton an extent proportionate to the end proposed.

HOSPITAL OF LA PITIE.

Situated Rue Copeau, No. 1, at the corner of the Rue Saint Victor.

The demolition of some of the buildings at the Hôtel-Dieu, and others that were proposed, obliged the General Council of Hospitals to open a new asylum for patients. To effect this the Maison des Orphelins of the Faubourg St. Victor, well known by the name of La Pitié, was selected, the orphans were sent to the establishment for female orphans of the Faubourg St. Antoine, and in January, 1809, La Pitié was opened as the dependent, or annexed hospital of the Hôtel-Dieu. The number of beds was provisionally fixed at 200; the removal of private offices, &c. since, has allowed the wards to be enlarged, and the number of beds at present amounts to 600. Some other alterations have much improved the salubrity and cleanliness of the establishment. There are two reservoirs of water, well supplied, one of which supplies the bath rooms.

The buildings in their general appearance present a long irregular quadrangle. Its principal gate faces

the Rue St. Victor, and many of its wards overlook the Jardin des Plantes; the magazine of clothes and the necessary rooms for the admission of patients and keeping the registers are at the entrance.

An iron railing separates the first court from the second, in which are the kitchen and its offices, the refectory, the pharmacy and its offices, different depots, magazines of linen, &c. and four wards of patients on the first and second floors of two buildings, situated at the sides of this court, which is disposed in walks, only leaving the necessary pavement for the passage of carts, &c. Patients wards are also on the third floor of the buildings in the third court. A ventilator is placed in the centre, which purifies them throughout. These wards are for the women, and the court planted with trees serves them to walk in. The fourth court is laid out in walks for the men, and in the buildings are wards that are purified and separated by a ventilator that traverses them. There are here baths for the men, as there are for the women in the preceding court.

This hospital has 600 beds placed in 23 wards,—357 for the men, 243 for the women. The half of the women's wards do not contain more than 20 beds, and those of the men from 20 to 30. The

quantity of air for the patients to respire in is from 40 to 50 square feet in three wards; from 30 to 40 in some others: it is less in the other wards, and descends even below 18 in three or four of them.

Each patient has a bed, and is composed of a straw bed, two mattresses, a bolster, a pillow, two woollen counterpanes, and white curtains to all those beds where they can be put.

From 1809 included to 1813, the mortality was one in five, or about a fourth, and somewhat greater in the women than the men.

This establishment is in some degree a receiving house of the Hôtel-Dieu and Venereal Hospital; from the first are sent the convalescent, and those patients who, attacked by chronic diseases, wait here their definitive destination to an hospital. A division is reserved for women affected with the venereal disease. This service is perfectly distinct from the rest of the establishment, of which the chief surgeon is M. Lisfranc, of Saint Martin, who has succeeded the learned and studious Beclard, and who does not shew less zeal for the advancement of surgery. We are indebted to M. Lisfranc for having shewn that in many cases where cutting instruments were formerly used, that a medical treatment may

restore the patients to health, still preserving the organs that a too operative surgery would have deprived them of. He is one of the first who introduced the physiological doctrine in surgery, and shewed that many affections called surgical, dependent upon chronic inflammations, are reducible by anti-phlogistic treatment.

The physicians are Dr. Serres, known by his interesting labours on different points of general and pathological anatomy and experimental physiology, and Dr. Bally, who is occupied in researches on different points of materia medica and therapeutics.

The observations of M. Bally have appeared in different periodical publications.

HOSPITAL OF LA CHARITE,

Rue des Saint Péres.

This hospital is situated on a little eminence favourable to the draining its waters, of which advantage has been skilfully taken to procure for it a covered drain, whereby all the filth is passed to the

river. This hospital was formerly directed by a sect of monks of St. Jean de Dieu, and more than half of the establishment was occupied by them. At the beginning of the 17th century the number of beds was 150; in 1786, 208; at present it contains 300, 100 for the women and 200 for the men. The large and well aired wards, and the custom of placing only one patient in a bed, have always given satisfactory returns of mortality to this hospital. A table of the number of patients and deaths, from 1804 to 1814, gives the following results for the mortality.

Men, one in	7·41
Women.....	5·66
Average mortality	6 535

The space from one bed to another is three feet in the men's wards; it is more than six in the women's wards. The breadth of the bed is nearly four feet, and the passage between the two ranks of beds nearly ten.

This hospital, considerably enlarged, and newly provided with necessary apparatus for the administration of baths and fumigations of every description, is considered as the second hospital of Paris. The service of the surgical wards is confided to the care

of Professors Boyer and Roux, who are appointed by the faculty of medicine, the one with the clinico-surgical lectures, the other for the teaching of operative medicine.

The physicians of this establishment are M. M. Fouquier and Lerminier, and M. Chomel, who was charged, independent of the service of the wards, with that of the gratuitous consultation; he is only temporarily replaced by M. Rayer, to whom we are indebted for an excellent work on the diseases of the skin.*

M. Fouquier, since the reformation of the faculty has placed him as professor of internal pathology, no longer gives clinical lectures, properly so called, but he continues to explain at the bedside of each patient the causes and symptoms of the disease, to indicate the diagnosis and prognosis, and in fine to explain the motives and bases of treatment.

This professor, whose courses are followed assiduously by a great number of pupils and physicians, shews in his practice that prudent temporisation,

* "*Traité theorique et pratique des maladies de la peau, fondé sur de nouvelles recherches d'anatomie et de physiologie pathologique.*"—Paris, 1826, 1827, 2 vols. in 8vo. with finely coloured plates.

which knows how to leave something to the restoring efforts of nature, and those prompt and energetic measures, which changing or modifying a vicious tendency, snatch the patient from certain death. He is an attentive and scrupulous observer, uniting great freedom to an experienced eye, and distinguished by the accuracy of his diagnosis and the certitude of a prognosis that he never makes known until after careful examination. Far from endeavouring to dazzle by a pretended perspicuity, which guesses the diseases in some degree at the first glance, he teaches his pupils, on the contrary, in the investigation of diseases, to exercise a minute attention and a wise deliberation, which leads to positive results, or at least to the avoidance of those errors which compromise the dignity of the art. His therapeutic is simple and rational, and if he allows himself sometimes to make experiments, it is with that prudence and reserve which honour and the responsibility that rests on the head of a physician imposes.

Absolutely a stranger to the spirit of system, and following the path traced by observation and experience, it is long since he pointed out in his theoretical and practical lectures the frequency of phlegmasiæ, and the necessity of insisting on the antiphlogistic

treatment, even when they had passed into the chronic state. He had also taught that the essential fevers of the ancients were very often the symptom of an inflammation imperfectly recognized, nevertheless he thinks that essential fevers exist, that is to say, in which the state of excitation is general, and shews itself no where sufficiently predominant to be considered as the local cause of this phenomenon. It is also some time since this professor came forward against the abuse of tonics and stimulants in the treatment of acute diseases; nevertheless he cannot believe that the gangrenous inflammation of the intestines and the skin, which manifests itself in adynamic fever and in the carbuncle, is of the same nature, and requires the same remedial treatment as a free inflammation of the same parts which constitutes dysentery and erisipelas.

In many diseases M. Fouquier follows a particular method. In the painter's colic, for example, he has thought it right to turn from the beaten pathway, and he has made in the treatment, the modifications that a rational therapeutic requires, of which a long experience has shewn the efficacy. The acute rheumatism is considered by him as an inflammation, and he treats it accordingly; but he prefers the application

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of leeches and poultices, aided by drinks slightly diaphoretic, to warm baths, bleeding by the veins, which produce a long convalescence, this process has succeeded several times against chronic articular rheumatism, which had produced a sort of ankylosis. In nervous diseases, in general, he first employs bleedings, either venous or capillary, which he follows by blisters, applied not in the course of the diseased nerve, as Contugno desired it, but at the opposite part of the limb.

The number of *nervous* diseases, so great to those who observe slightly, is much diminished by the practitioner who seeks, to the utmost, to attach each series of symptoms to the injury of an organ. Notwithstanding this reduction, the affections to which we are obliged to preserve the denomination of *nervous* are sufficiently numerous. M. Fouquier admits the existence of diseases purely nervous, that is to say, those which our means of investigation have not, up to this time, discovered any material injury to which they might be referred. He professes that opinion relative to asthma, which M. Rostan, of Salpêtrière, regards as depending upon aneurism of the heart.

It is in the treatment of nervous diseases, such as

epilepsy, hysterics, and hypochondryism, that he has tried the extracts of poisonous plants, such as Henbane, Belladonna, poisonous Lettuce, and some remedies little known, as distilled water of Cherry Laurels and Hydrocyanic Acid.

M. Fouquier has made Dropsies his peculiar study, and on this subject he has made many researches on the action of diuretics, of which we may just observe, and without anticipating in any degree what he will doubtless one day publish on this subject, he has carried the doses higher than most practitioners. In later times, after the experiments of Dr. Ségalas, he has tried *urea*, in which he has found an energetic action on the apparatus for the secretion of urine.

This physician does not profess any particular opinion relative to venereal diseases; he employs most commonly against this affection, after having repressed the local symptoms by the ordinary resources of therapeutics, the pills of Napolitan ointment,* from which he leaves out the soap which

* *Pilules d'onguent Napolitain,*

℞ Ungt. Hydrarg. ʒjss,

Pulv. Glycyrrhizæ, q. s.

faut in Pll. xlv dividend.

enters into the composition of these pills, called *Sé-dillot*. He administers also the liquor of Van Swieten,* and thinks with M. Cullerier that this medicine does not merit the objections made to it, and especially, that it is incapable of producing pulmonary pthisis, though it may have hastened the developement of this disease in subjects predisposed.

Original predisposition to tuberculous or cancerous affections, has been the object of numerous controversies. M. Fouquier admits that for the greater part of the time this predisposition exists, though it may be possible to escape it; and the diseases that develop it ordinarily may manifest themselves in an accidental manner.

In aneurisms of the heart and large vessels, his treatment consists of general or local bleeding, more generally he has recourse to the latter, to disgorge

* Mercurial solution, commonly called Van Swieten's liquor.

℞ Hydrarg. Oxymur, ℥ xvj,
Sp. Vin. Rectif. ℥ fs,
Aq. Distil. lbj misce.

The dose is half an ounce morning and evening, in milk, gum water, or sudorific syrup.

The mixture is not made until the moment it is administered, to avoid the decomposition of the sublimate.

the vascular system. He repeats them more or less according to the facility with which the blood is repaired. He employs them to the end of the disease, and often he has seen venous bleeding resuscitate as it were, patients on the point of suffocation. Far from these evacuations favouring the augmentation of symptomatic anasarca, they seem on the contrary to facilitate the absorption of liquids thrown out, and to second the action of diuretics. When this effect is long in being produced, and the distension of the skin considerable, M. Fouquier, with a very sharp lancet, makes deep pricks to pierce the cells of the cellular tissue, which rapidly diminishes the swelling. Long experience has shewn this practitioner that there is no fear of gangrene, as some authors have asserted, but an indispensable condition is to divide the skin completely, instead of confining one's self to the division of the epidermis, by drawing the blade of the lancet over it. To these means is added a diet not very substantial, some diuretics to arrest the progress of the infiltration; in fine some preparations of Scilla and Digitalis, which are considered both as diuretics and as acting upon the sensibility of the heart, diminishing the energy of its contractions.

M. Fouquier has only published a few memoirs; he has made known from time to time to the persons attending his clinical lectures, the results of his labours on various points of practical medicine, and of his researches on several medicinal substances, on the *Nux Vomica*, on the Acetate of lead, on the extracts of *Ilyoseyamus*, of Belladonna, of Hemlock, of *Stramonium*, of *Lactuca verosa*, of *Rhus radicans*, laure water, (*Prunos lauro cerasus*,) and on Prussic acid. Some of these researches have been already published, and the rest will soon be presented to the Royal Academy of Medicine.

It is almost to be regretted that the clinical instruction and the numerous class of pupils, prevent M. Fouquier from devoting more time to writing, but does he not amply pay his debt to society by the instructed pupils that he forms each day?

The medical service is shared by Doctor Lerminier, a distinguished practitioner, and who has been good enough to furnish the writer with the following notes on his medical opinions, considered in a general manner. "I treat continued fever by simple sedatives, so long as no precise indication is observed. If general inflammatory symptoms and a phlethoric state exists at the same time, I prescribe a general

bleeding; if sanguineous congestions threaten to take place in any part, I turn them aside by the application of leeches. It is these different congestions that principally fix my attention in the course of fevers. I have often, for example, placed leeches to the neck or back of the ears with advantage, even at a rather advanced period of severe fevers, and when the adynamia was already sufficiently pronounced.

“ Whenever the diarrhœa is excessive, I moderate or stop it by an application of leeches to the anus. After the application of these means the stupor disappears, and the strength of the patient returns.

“ But when there exists a real adynamia I have recourse to tonics; the aqueous infusion of Cinchona is the preparation I make use of most commonly; I apply at the same time revulsives, &c.

“ When I observe those symptoms, which together are denominated *bilious symptoms*, I do not hesitate to employ emetics; they are useful, especially to abridge the course of the disease.

“ In intermitting fevers I have had every reason to be satisfied with the sulphate of Quinine, some cases excepted, where it appeared to me to cause nervous accidents.

“ I treat acute rheumatisms by general bleedings,

which I repeat very frequently, and until the buffy coat shall either have completely disappeared, or become less decided. The leeches, in rheumatism, remove the pain well from the part where they are applied, but they reappear at the same time in some other part: this does not happen when the vein is opened.

“ I have sometimes hastened the conclusion of certain cases of pneumonia, which had a tendency to the chronic state, in substituting for simple emulcents, gentle tonics, and especially the decoction of Polygala.

“ In metallic colics, I pursue to its utmost extent the ancient treatment of the Fathers of La Charité. I have employed it with success, even in cases where there existed a febrile movement sufficiently marked.”

The practice of M. Chomel resembles much that of M. Fouquier, if it be not that he has shewn himself a more zealous partizan of the doctrine of fevers, and of the employment of tonics and stimulants. This physician has brought facts, and even cures to the support of his method, on which enlightened and impartial physicians must alone decide.

HOSPICE DE LA CLINIQUE INTERNE.

This hospital is devoted to teaching Clinical Medicine, under the auspices of the Faculty of Medicine. Two professors, M. M. Cayol and Chomel, habitually perform the duty, not as might be desired, together, but alternately. Only he who is not on duty for three months, continues to make the visit to the wards, which is equally open, during this time, to the pupils, who may still derive instruction from the observations which the professor makes at each bed.

L' Ecole de la Clinique Interne, was established, (1801,) in the hospital of La Charité. The pupils watch there the course of the disease, its cure, and its duration, at the bedside of the patient, under the eyes of the physician, who gives them afterwards an historical account of the disease. The facts are verified in case of death, by the opening of the body.

M. Cayol rarely allows himself to substitute an empiric for a rational treatment, if it be not in desperate cases. In general, he prefers waiting, and never acts without a pressing indication; he depends much upon the efforts of nature. He considers that a

very great number of fevers ought to be considered as symptoms of local injury ; he, however believes, that essential fevers do exist ; that is to say, disorder, more or less considerable, of the system which has not been preceded by any local injury. This is the doctrine which he professes, and which he teaches the pupils of the clinical course, with demonstrations that would lead us too far to accompany him. As to the treatment of continuous fevers, when they present signs of a gastric and intestinal irritation, M. Cayol first ascertains whether this irritation has preceded the fever, or is the result of a direct excitation produced by the indigestion of stimulant remedies. It is only in these last cases, that he has recourse to leeches applied to the anus or epigastric region, but according to him, they are very frequent in the hospitals. When, on the contrary, the patients have been restricted to the diet, and in a mild temperature, from the breaking out of the fever, M. Cayol makes it observed, if they are yet in the period of turgescence, that the redness of the tongue is always in relation to the warmth of the skin, but that this roughness, accompanied with thirst, and sometimes a little sensibility of the abdomen, only belongs to a state of congestion ; it is seen to diminish at the same

time with the hot skin, without having had recourse to the leeches ; and when the general symptoms of plethora exist, M. Cayol prefers general to capillary bleeding.

The inflammation of the mucous membrane of the air passages, is a frequent complication of essential fevers ; it is in general more troublesome than phlegmasia of the digestive canal ; it often supervenes the course of a fever, continues severe, and would remain unknown, without a careful investigation by means of the stethoscope. M. Cayol treats it with almost uniform success, by means of cupping applied to the sides of the breasts, near the attachment of the *Serratus Major Anticus*. This means is also sometimes employed to combat simple sanguineous congestion of the lungs, in continuous fevers.

In general, the continued constitutional fevers commence by a state of sanguineous turgescence, which requires demulcent drinks, and sometimes bleeding. As to local affections which accompany them, if they have not preceded the fever, and if they do not present the characters of inflammations, but only those of congestion, M. Cayol gives himself but little concern, and abstains from local bleed-

ings, which, by impoverishing the capillary system, retard the progress of the crisis, and prolong, indefinitely, the convalescence. When the symptoms requiring the Antiphlogistic treatment disappear, and the head still remains in any degree affected, he applies blisters to the legs; and it is not until some days after, and when the symptoms of cerebral congestion still exist, that he resorts to the blister at the back of the neck.

In this second period of the fever, when there still exists a mucous rattle in the breast, M. Cayol employs with success, the decoction of polygala senega.* Later, if any purples or sloughs come on the sacrum, or if the blisters present symptoms of gangrene, (abundant suppuration, ichorous or purulent, with violent pain,) the indication of cinchona is positive; a grain of extract dissolved in a mucilaginous draught most commonly, and sometimes the decoction of cinchona acidulated. At the same time, M. Cayol orders

* *Potion with Polygala Senega.*

℞ Rad. Polygalæ Senekæ	- -	3℥.
Aquæ Ferventis	- - -	3vj.
Macerata per horas duas denique liquorem coli, adde.		
Syr. Tolut.	- - -	ʒj.
Gum. Ammoniac.	- -	ʒss. ad. ʒj.
Misce.		

the blister to be washed several times a day, with a strong decoction of Cinchona, and dressed with the opiate cerate.*

Such is the method followed by this practitioner in continuous fever; he loses an extremely small number of patients.

Though the physical constitution be generally inflammatory, from the age of twelve to fifteen, bilious fevers are sometimes seen; there have been eight or ten, within the last three months of the clinical course. Whenever M. Cayol sees from the commencement of the fever the union of these three symptoms, yellow and humid covering of the tongue, yellow tint; a cephalic forehead or orbit, with a general state of langour, he commences with an emetic, and always with success: afterwards, he employs lemonade, acidulated drinks, and cicoraceous apozeme; then the evacuations are always easy and followed by prompt relief. If these bilious symptoms are accompanied with some indications of irritating inflammation of the stomach or intestines, such as the redness and dryness of the edges of the tongue, a

* *Opiate Cerate.*—“*Cerat. Opiace.*”

R Cerat. Simpl.	-	-	-	lbj.
Tr. Opii.	-	-	-	ʒj. misce.

F

quick sensibility of the stomach or abdomen, M. Cayol orders bleeding to precede the emetic. When the bilious symptoms do not manifest themselves until the second period of the fever, he prefers purgatives to emetics. A fact, observed very constantly by this professor, is, that whenever it is determined to oppose the bilious symptoms by gum drinks and leeches, the fever is prolonged indefinitely, and after it has terminated, the patients remain long in a state of languor and uneasiness, which terminates often in boils or other eruptions.

M. Cayol rarely employs bleeding, either general or local, in the first period of eruptive fevers, unless a very intense local phlegmasia exists. But following the example of Sydenham, he bleeds from the arm pretty generally in the convalescence from fevers, especially from the small pox and scarlet fever. This practice has always succeeded with him, and during the long time he has adopted it, he has much more rarely seen those obstinate phlegmasiæ, the troublesome remains of eruptive fevers; he does not purge in these convalescences, unless the indications are very distinct.

In the treatment of acute phlegmasiæ in general, he repeats venous bleeding, until the fever yields.

When the fever is diminished, he comes to local bleedings, and when it has ceased he bleeds no more, (except in cases of exacerbation,) and he then has recourse to derivatives, at first, distant, and by degrees approaches the seat of the disease.

In acute peritonitis, as soon as the indication for draw blood is exhausted, two large blisters are applied to the inner part of the thighs, have appeared to M. Cayol to have a wonderful effect in abridging the disease, and preventing suppuration.

To favour the disappearance of chronic phlegmasiæ, (hepatitis, pleurisy, pneumonia, peritonitis, &c.) and to mark the progress of certain organic disorders, such as pthisis pulmonalis, when it is circumscribed, the schirrus of the stomach, the pthisis renalis, the different diseases of the uterus and bladder, M. Cayol has employed several times, and with un-hoped-for success, the seton, resulting from two sloughs, which he makes commonly with the caustic potass, and sometimes with the moxa; and through which he afterwards passes a flat or round wick, according as he wishes to obtain more or less of suppuration.

This kind of issue, is that which has appeared to him the most energetic; during its action, it often

treats, with success, the hectic fever, (especially when there are regular exacerbations, with shivering,) by means of cinchona in the form of extract only, or combined with some drops of laudanum; he has thus been enabled to stop hectic fever, and to prolong very much the duration of incurable pthisis.

M. Chomel, newly appointed clinical professor, presents to those who follow his courses, after having read his writings, something perplexing, and an appearance of inconsistency. In his practice in general, he acts in the same manner as those physiological physicians which he formerly opposed. He has not yet renounced his theory of essential fevers; sometimes in his lectures he touches upon them, but this is not observed at all by the patient's bedside. To sum up, the practice of M. Chomel, is that of all candid and well informed practitioners; and his clinical instruction, some slight faults excepted, is the best I have yet seen in Paris.

HOPITAL SAINT LOUIS.

This Hospital is situated on the Rue du Carême-prenant, between the Faubourg of the Temple, and that of St. Martin. It was founded in 1607, by Henry IV. and built in the space of four years, from the designs of *Claude Villeda*.

In 1619, this hospital was opened to patients; it consisted only of the ground floor, and first floor. The architect has completely fulfilled the object of the founder, who intended placing here, persons attacked by contagious diseases. He has established a double enclosure of walls, which are surrounded with double courts, intercepting all communications with the city. Many other parts of the plans of this hospital, tend to the same object.

This hospital was, and is still the finest in Paris. The number of patients however, are not found to be in proportion with its extent and its resources. It was not ordinarily occupied by more than six or seven hundred individuals: in 1787, they only reckoned three hundred beds; two and sometimes three patients shared the same bed.

During some years of the revolution, it was named *Hospice du Nord*; it has since resumed its name of *Saint Louis*.

In the years 1801, 1802, and following, repairs which were urgently required in the building were made; as also considerable ameliorations. Twenty-four copper baths, have been substituted for some old bathing tubs of wood. Two hundred baths may be taken per day. The windows have been enlarged by lowering them.

A pavilion of this hospital, has been assigned to the soldiers of the guard of Paris. It contains a hundred and sixty beds.

This hospital is destined to chronic maladies, the scald head, the itch, herpes, and venereal diseases.

Seven hundred beds are given up to the itch patients; four hundred for the men, and three hundred for the women: and in the seven hundred, four hundred and fifty are for simple itch, two hundred and fifty for complicated itch: the nurses with itch have a separate establishment. Two hundred beds are occupied by those who are afflicted with ulcers, herpes, cancers, and wounds; one hundred and twenty for the men, and eighty for the women. Two

hundred are destined to scrophula, the scurfy and those attacked by fevers.

In the space of ten years, from the 1st of January, 1804, to the 31st of December, 1814, there had been admitted into the Hospital St. Louis 56,934 individuals; viz. 35,081 men, 18,324 women, 1748 boys, 1781 girls; and during this interval of time, there died 2,138 individuals; of which 1,399 were men, 536 women, 85 boys, and 118 girls.

During the same ten years, the least mortality has been one in $26\frac{33}{100}$. For the women taken separately, the least mortality has been one in $33\frac{56}{100}$. For the girls it has amounted to one in $15\frac{67}{100}$.

Among the hospitals consecrated to a special destination, the hospital Saint Louis is doubtless one of the most important. Patients affected with cutaneous diseases, such as ringworm, the itch, scald-head; and many individuals affected with scrophulous, scorbutic, and cancerous diseases, are here received. Independent of patients living in the hospital, a public consultation is open to those whose diseases are so slight, as to allow of their cure without leaving their habitual occupations; and tickets are delivered to them, with which they come each day to take baths or fumigations, directed according to

the nature of their diseases. This establishment is confided to the care of M. M. Richerand, Professor of the Faculty of Medicine and Jules Cloquet, for the Surgical Wards, and to MM. the Professor Alibert, Biett, Manry, and Lugol, for the Medical service.

M. Alibert, whose numerous occupations do not prevent him devoting himself to the instruction of the pupils, delivers each year a clinical course on the diseases of the skin, in which he passes under the eyes of the auditors, the most remarkable cases, illustrating those affections, of which he has given hideous pictures, though full of truth, in his magnificent work. He has tried different remedies, against these troublesome diseases, with more or less success.

Charged alternately with the care of the wards devoted to the treatment of the itch, and enjoying the inestimable advantage of repeating, and comparing results in a great number of patients, the physicians of the Hospital of Saint Louis, have answered the general expectation, in devoting themselves to continued researches on the nature of the itch, and the numerous modes of treatment, employed at various times against it.

Dr. Manry has limited himself to the examination of what means ought to be preferred under the different relations of expence; change of linen, of the odour, of local and general accidents. He has tried twenty-two preparations, each on an equal number of patients; and adding the duration of treatment to the total of cases, he has from that drawn the average time for each method.

In a work published by M. Mouronval will be found much information on this subject; it is entitled "Recherches et observations sur la gale faites, a l'hospital Saint Louis, a la clinique de M. Lugol, pendant les années, 1819, 1820, and 1821." The experiments are made on a much more extensive scale, both as relates to the number of patients, and of preparations tried. Without stopping at that part of the work devoted to the history of itch, where, en-passant, we may observe he denies formally the existence of the *accarus scabiei*, if sarcoptics, which had succeeded it, and of all animalculi, on which itch is supposed to depend. I will remark that it is definitely proved by numerous experiments and good facts, that the itch may be cured more or less quickly by stimulants applied to the skin in the form of baths,

fumigations, lotions, frictions, &c.* that it may even yield to aqueous vapour baths, and that the internal treatment, that so much importance was formerly attached to, is useless, except in cases where the long duration, the extent and intensity of the disease, ought to make it considered as an abscess eruption, which it would be imprudent to suppress, without precautions.

Dr. Biett, charged especially with the wards devoted to the treatment of herpes, of different natures, has made numerous and interesting experiments on various substances employed against these diseases, and has devoted himself to very curious continued researches of *Materia Medica*, relative to epilepsy, and some other affections, the obstinacy of which, has often defied the power of medicine.

* Since the time when these researches were made, M. Delpech, has ascertained that the itch may be cured by simple oily ointments.

HOPITAL DES VENERIENS,

Is situated Rue des Capucins, Quartier de l'Observatoire, and was the ancient house of the Capucins, hence it is frequently, at this day, called Hopital des Capucins. Venereal patients were formerly treated at the Hôtel-Dieu and Salpêtrière.

In 1784, the ancient convent of the Capucins, in the Faubourg St. Jacques, was destined to serve as an hospital for venereal patients; it is vast, well ventilated, extending over a surface of from eight to nine acres, the half of which forms the gardens to the hospital. It looks on two sides into the country. The house was altered and repaired, to correspond with its new destination. In 1785, the venereal patients were first removed here, and then the nurses and infants from the Hopital de Vaugiraid.

In 1792, the new hospital was in a state to receive all the patients destined for it. In the years 1802 and 1803, great, and necessary repairs were made in this hospital, and continued through 1804-5. In this last year, a new ward was established, containing 50 beds, and in 1806, a ward for women, of 40 beds.

The following is an extract from the Report of the General Council of Hospitals.

“ A Table of Mortality, since the foundation of this hospital, which embraces about ten years, offers, neglecting the fractions, one death in 47 patients, for the men, and one in 48 for the women. The number of women admitted in this hospital in this interval, is more than 12,000 ; that of the men, does not exceed 9,342. The mortality has been much greater since 1801—in 1802, it was 154 on 2,275 ; and the following year, 1803, it was 167 in 2,536. In the ten years, from the 1st of January, 1804, to the 31st of December, 1813, 27,576 patients had been admitted to the Hopital des Veneriens ; 13,638 of which were men, 12,163 women and of children, 794 boys, 981 girls ; the four last of these years, have been much more considerable than all the others.”

The total of deaths in these ten years, has been 1,170, which is nearly one in 24. If we separate the children from the adults, the proportion changes much : for the children of both sexes, it is one in 2 and a half ; for male adults, it is only one in about 56 ; for adult females, about one in 67.

There is in this hospital, a gratuitous out practice, similar to our out patients, which began with regularity in 1808.

The number of patients admitted to this treatment has increased each year. In 1809, it amounted to 978 ; in 1810, to 1,227 ; in 1811, to 1,400 ; in 1812, to 1,421 ; in 1813, to 1,509.

The General Council of Hospitals, gives a curious table of men of different professions, who, during the years 1811, 1812, and 1813, have had recourse to this gratuitous treatment. The result is that the trades most subject to the venereal disease, are those of the shoemakers and tailors ; after which come the bakers, carpenters, cabinet makers, weavers and masons. Those who appear least liable to this disease, are the water carriers, hair dressers, and glass makers.

In 1811, they counted 161 shoemakers, 131 tailors, 55 bakers, 59 cabinet makers, 49 carpenters, 25 weavers ; there were only 11 glass makers, 10 barbers, and 5 water carriers.

The year 1812 furnishes 142 shoemakers, 100 tailors, 70 carpenters, 31 bakers, 9 barbers, 6 water carriers, and only 4 glassworkers.

In 1813, there were 174 shoemakers, 125 tailors,

58 cabinet makers, 55 bakers, 29 carpenters, and only 12 water carriers, 10 hair dressers, and 7 glass blowers.

It is to be decided, whether this difference arises from the greater number of shoemakers or tailors, &c. employed in Paris, or whether it results from the nature of their labours.*

This hospital, destined to the exclusive treatment of syphilis, and affections depending upon it, is confided to the care of M. Cullerier, and to M. Bard Gilbert. Here every form and variety of this disease may be observed, and also the effects of all the curative means employed against it. The results of the numerous researches made by the practitioners who direct this establishment, are given in the following concise account of their practice: the more circumstantial details would rather belong to another work.

Notwithstanding the different forms in which the venereal disease presents itself, the bases of the treatment are and ever ought to be the same. They

* It is observed, that a great number of the tailors and shoemakers of Paris, are natives, or originally from Germany; the fact is simply stated, without drawing any inferences against the Germans.

are only modified according as the affection is primitive or secondary. The local treatment varies according to the symptoms, and their various degrees of intensity.

Mercury is considered as a specific against the venereal disease; and the cases where it has not succeeded, are exceptions which ought not to weaken the general rule. During a long period of time, it was considered as the only remedy, but experiments in Spain and Italy, have proved that certain vegetables, and above all, sudorifics and a warm climate, may cause the disappearance of the disease, without the aid of mercury. To these experiments also ought to be added, the results of the extensive researches made both in England and the United States of America, on the treatment of syphilitic symptoms by antiphlogistics and other means, without the use of mercurial preparations.

The diet drink of Feltz ought not to be considered as a drink purely vegetable, when it is recollected that to the various plants which enter into its composition, are added Isinglass and Sulphuret of Antimony, which seems always to contain in variable proportions, white oxide of arsenic. Some facts, and notably the experiments made at the Hospital of

Saint Louis, in different cases of venereal eruptions, seem to prove that this oxide has much to do with the properties of the tisane of Feltz.*

* Tisane of Feltz, consists of the following ingredients.

R	Rad. Sarsap. concisæ	-	-	-	ʒiij.
	Iethyocollæ	-	-	-	ʒss.
	Antimonii Nativ.	-	-	-	ʒiv.
	Aquæ	-	-	-	Ovj.

The formula of the tisane of Feltz, properly so called, is more complicated than this, in which the substances truly active, have only been retained, and the useless accessories have been thrown out.

It is prepared in the following manner.—Inclose in a bag of linen the raw antimony, put it all into a varnished earthen-ware pot, taking care that the bag does not touch the bottom of the vessel. Pour upon it six pints of water, boil it until the whole be reduced to one half, by a slow fire, so that the boiling may not force the liquid over the edges of the vessel. About twelve hours would be necessary, before the reduction of one half would take place. The vessel is left on the hot cinders until the morning of the next day, and the decoction then strained through a fine linen, and put in bottles, which, in winter are left in a place of moderate temperature, and in the summer in cellars. These three pints of drink, form six doses of half a pint each, which ought to be consumed in two days.

This drink is given with success, in inveterate venereal affections, which have resisted mercurial treatment.

The patient should take three doses a day; the first at seven o'clock, the second at two o'clock in the afternoon,

When the primary symptoms of syphilis are to be treated, the liquor of Van Swieten, in doses of half a grain a day, and a simple drink of barley water, often even no drink, compose the most ordinary treatment.*

and the third at nine o'clock at night: each dose should be taken cold; and the patient should walk for half an hour after each.

The patient should eat twice a day, eleven o'clock in the morning, and six o'clock in the evening. These two meals should consist of a dish, two-thirds beef, and one-third veal, which should be boiled in a sufficient quantity of water, without vegetables, and without any seasoning. With the liquor a bread soup should be made. For a desert, he might eat stewed prunes without sugar. He should eat nothing between the meals.

The duration of the treatment is in proportion to its efficacy. The average time is from twenty-four to thirty days. This treatment is extremely successful, the patients never appear to experience the accidents which mercury too often produces; on the contrary, at the end of a few days, a sensible amelioration in their state is observed.

* The dose is half an ounce, morning and evening, in milk or gum water. The mixture is only made at the moment it is taken, to avoid the decomposition of the sublimate. M. Cullerier thinks that the liquor of Van Swieten, does not deserve the objections made to it, and that the accidents observed, result from its having been badly ad-

If it happens that the patients have the chest much affected by colds, and that there appears a commencement of pthisis pulmonalis, that the abdomen be the seat of some irritation, that the liquor produces pains in the stomach, and vomiting, M. Cullerier resorts to the use of frictions with the mercurial ointment, or else he gives the pills called Sedillot, (pills of Napolitan ointment and soap,) or pills with mercury of Hahnemänn. These pills have the inconvenience of acting on the mouth, as rapidly as the frictions ; this does not however prevent their being administered in cases of primary syphilis. M. Cullerier never employs them for secondary symptoms.

If a patient presents himself with secondary symptoms, the great confidence M. Cullerier has in the liquor induces him to administer it equally the same, and with a success so remarkable, that if some patients resist and continue the course of the disease, it may be believed that it is on account of the negligence of the patient in the course of the treatment. The frictions appear also, to M. Cullerier, an administered, and to subjects who were predisposed to pthisis pulmonalis, or attacked with gastro-intestinal chronic phlegmasis.

getic remedy against constitutional syphilis, and he employs them indifferently with the liquor of Van Swieten. He prefers them in patients which support ill this last preparation, and he obtains very advantageous results from their use.

When he administers the liquor in inveterate venereal affections, he joins to it commonly the sudorific drink, or sweetens it with sudorific syrup; but when the patients appear weak he mixes this syrup with that of cinchona, or anti-scorbutic syrup.

The tisane of Feltz is employed with a success truly surprising, and M. Cullerier possesses on this subject some extremely interesting facts. He administers this drink in secondary venereal symptoms, such as exostosis, pains in the bones, thickening of the periosteum, serpiginous pustules, ulceration of soft parts, caries of the bones and cartilages of the nose and mouth, when having yielded many times to the treatment by the liquor or by friction, they reappear. This means succeeds almost uniformly, and in a moderately short time, except the disease have produced too deep alterations of structure. The tisane of Armand is similar to the tisane of Feltz in its effects, at least such is the opinion of M. M. Cullerier.

The muriates (hydro-chlorates) of gold and platina

have not answered in the hands of this physician, the pompous boast of their inventors, he has therefore not continued the use of them.

He considers also, as an energetic means against the venereal disease, baths with a solution of oxymuriate of mercury, but he employs them rarely in his hospital, because this mode of administering the sublimate requires great precaution.

The local applications are very limited, they are the simple or mercurial ointment on the ulcers, the most frequently a piece of lint dipped in a decoction purely emollient or narcotic; the cauterization with the nitrate of silver dissolved; when the flesh is fungous the dressing with egyptiac ointment; with the digestive when they are indolent.

As to vegetations, excision only takes place when the specific treatment is finished, or at least far advanced. This means the most frequently succeeds, nevertheless some patients there are on whom the vegetations seem to spring up with greater vigour; in these cases cauterization with a solution of nitrate of silver, the hydro-chlorate of antimony, or the nitrate of mercury, are resorted to. In spite of the activity of these remedies, vegetations are seen that resist constantly.

The fissures about the anus are also treated by caustics. The actual cantery is that which has best succeeded with M. Cullerier. Those that we see on the hands and feet demand great cleanliness, and repose, and heal constantly with the liquor or the frictions, and a local dressing with simple or mercurial cerate.

The venereal pustules do not require a particular treatment; for the mucous pustules of the anus, on the thighs the vagina or the scrotum, M. Cullerier recommends great cleanliness and gentle frictions with mercurial cerate. He regards this means as very advantageous.

In exostoses, thickening of pereostium, &c. leeches have never been very useful; the general treatment is the most efficacious.

Blenorrhagia is a symptom of syphilis, on the importance of which opinions are divided. The long experience of M. Cullerier has shewn him that very often it was followed by a general infection; also he thinks that this morbid phenomenon ought to be treated by means appropriated to treatment of constitutional syphilis.

To the above, which presents the opinions of the late M. Cullerier, we think ourselves bound to add

the information which M. Cullerier's nephew, the present surgeon in chief of the hospital, and M. M. Gilbert and Bard, physicians of the same establishment, have obligingly communicated on the nature and treatment of syphilis.

The existence of a virus, contested by some physicians, and sustained by the greater part, is an object of doubt to M. Cullerier. M. Gilbert and M. Bard appear more attached to the doctrines of M. Cullerier's uncle. This question is yet undecided, and will remain so until a sufficient number of comparative experiments have been made. It is to be enabled to determine it, that the physicians and surgeons of the Venereal Hospital have undertaken to treat by ordinary means the primitive symptoms. These experiments, the results of which will be published elsewhere, prove that the affections called syphilitic, are in some cases simple local affections, curable without relapse by antiphlogistics, astringents, caustics; and in others, rebellious diseases invade the whole system, and are cured by mercurial preparations more easily and certainly than by any other remedy. In fine, that there are circumstances where mercury, far from improving the state of the patients, gives rise to phenomena

analogous to those of syphilis itself, which disappear only when its use is given up. Relapses after both the one and the other kind of treatment have been observed; it would be highly desirable to know precisely in what cases they are most frequent.

MAISON ROYALE DE SANTE,

Situated Rue de Faubourg, St. Denis, N. 112, in front of St. Lizarre: it is an establishment similar in purpose to the last, but much less extensive. It began with 88 beds, since which 37 have been added. The sums to be paid vary according to the accommodation or care required.

The greatest cleanliness reigns in this house, which has a fine extensive garden. Two physicians, M. M. Dumesil et Leveile; and two surgeons, M. le Baron Dubois, late Professor at the School of Medicine, of Paris, and M. Dubois, jun. have the care of the patients.

In 10 years, from January, 1804, to December, 1814, 10,686 patients were admitted; 8537 were

cured; 2113 died, of whom 1293 were men, and 820 women.

Though the *Maison de Sante*, is the seat of no public instruction, it is here mentioned, that we may notice M. Dubois, who has many peculiarities in his practice, and who, though more particularly engaged in the practice of surgery, has directed his attention very frequently to internal affections, for which a great number of patients seek his advice. Many of the opinions which he professes are peculiar to himself, and are supported by long experience. It is thus that he regards the tonic treatment as the most advantageous in the scrophulous and scorbutic affections, &c. that he considers mercurial frictions carried to salivation as the most sure means of healing inveterate and rebellious venereal diseases, whilst the greater part of the other physicians, and especially those of the *Hopital des Veneriens*, whose opinions in such a case are of great weight, consider salivation to be a troublesome consequence of mercurial treatment, which ought to be guarded against. His opinions in general approach those of Brown; he makes frequent use of stimulants, tonics, revulsives; bleeding is a means, on the application of which he shews extreme reserve, even in those cases where the greater num-

ber of physicians insist upon its employment, he rarely prescribes general bleeding in acute phlegmasia either membranous or parenchymatous; but limits himself, for the most part, to leeches and blisters.

LYING-IN HOSPITAL,

CALLED

HOSPICE DE LA MATERNITE,

Situated Rue de la Bourbe, was formerly divided into two establishments; in La Maternité Rue d'Enfer were the pupils and the school of midwifery, and in the house of La Maternité, Rue de la Bourbe lodged the women near upon their accouchement, also the new born infants. The foundlings were afterwards placed here also.

This order of things has been entirely changed since the year 1814. These two houses, always separate, no longer bear the same name; they have each a distinct destination, and are independent of each other.

H

Pregnant women, lying-in women, and the midwives (pupils) are united in the house of the ancient abbaye de Port Royal Rue de la Bourbe, and the foundlings have been transferred into the house of the Oratoire in the Rue d'Enfer.

Poor women were formerly delivered at the Hotel Dieu, 106 beds were destined for them, some larger than the others, the largest contained sometimes as many as four lying-in women ; from this fact we may judge of their state.

All pregnant women, after the eighth month, are admitted into the hospital, nevertheless those who are poor, and have not arrived at the given term, or who are on the point of accouchement, are admitted.

They may or may not make themselves known, if they do their secret is respected, but on entering they are subjected to a visit.

The number of beds is such as to allow each patient to have her own. The women are occupied in such labour or work as they can accomplish, and they are paid the value. They are furnished linen, and even clothing, if they are in want of them.

Eight days after their accouchement they leave the hospital, unless the medical officer orders a longer stay.

During 10 years, from the 1st of January, 1804, to the 31st of December, 1814, 21,053 women were admitted into this hospital. In this number, during 10 years, 859 women have died, and in the same interval 18,367 children have been born alive, and 865 still born. More than two-thirds of the women admitted to this hospital come from the Departments.

This hospital has 350 beds, and 55 nurses or attendants.

The four first months of the year are those which furnish the greatest number of patients. M. Chaussier, is physician in chief, and M. Deneux, assistant physician. M. Paul Dubois, Surgeon in chief, and M. Antoine Dubois, honorary surgeon. Madame le Grand, chief midwife.

The observations just made respecting the Maison de Santé, are equally applicable to this establishment, to which access, habitual access at least, is denied to pupils and foreign physicians. However there is no one who would not be glad to know summarily the practice of the celebrated physician, charged with the infirmaries of this fine establishment. Imbued with the Hippocratical doctrines and medicine, M. Chaussier has devoted himself to numerous re-

searches on the diseases of lying-in women; he is an enemy to systems which, dazzling on one side, lead the practitioner who abandons himself to them, to fatal errors, and he shews by a wise and rational treatment that he profits by his profound physiological knowledge. It may be remarked that he employs but a very small number of remedies, that he prefers in general those, the properties of which are well known, and that he only tries new substances with the greatest reserve: In fine, that he uses the preparations the best adapted to preserve and increase their virtues.



HOPITAL SAINT-ANTOINE.

Situated Rue de Faubourg, St. Antoine, established in the buildings of the ancient abbey of women, called *Saint Antoine-des-champs*. This abbey, suppressed in 1790, was, by a decree of the Convention, 17th of January, 1795, converted into an hospital, which had to contain at first 160 beds, The

number of these beds, and the wards that contained them, being found insufficient, they commenced in 1799 a wing to the building, which has since been interrupted, but which they are now about to continue.

The principal building is 264 feet in length by 45 in breadth; the wings commenced are each to extend 180 feet. In 1802 many important repairs and ameliorations were effected. The number of beds amount to 250, since 1811 the service of this hospital is confided to the "*sœurs hospitalières*" of the order of Saint Martin. The average mortality in ten years, from the 1st of January, 1804, to 31st of December, 1814, was one in $5\frac{1}{2}$.

This hospital, by its situation and the beauty of its buildings, may be considered as one of the most salubrious of the capital; it is not too extensive, and it is filled in a great measure by the patients of the quarter in the midst of which it stands. Patients of both sexes attacked by acute diseases, internal or external, and chronic diseases for which there is no special hospital, are received here.

M. Beauchêne is surgeon in chief to this hospital. M. M. Kapeler and Lullier Winslow, are the physicians; they are both known by esteemed works.

Dr. Kapeler especially is much occupied with researches in materia medica, and has employed with success, it is said, the counter-stimulant method of the Italian school. This method is now followed by a certain number of practitioners, and at one of the hospitals twelve, twenty, thirty, and even to forty grains of emetic are administered in a few hours, and in a quantity of liquid infinitely weak in proportion to the dose of "tartre stibié."

Since the above was written I have seen the emetic in high doses frequently employed. It has been in the smallest number of cases that there has been what the counter stimulants call tolerance, that is to say absence of immediate effects, vomiting and purging. As to the definite results, they are far from being what enthusiasm had at first represented them to be. M. Kapeler himself, after numerous experiments, has renounced, at least in a great measure, this mode of treatment.

M. Kapeler is one of those physicians who permit themselves to modify the empiric treatment, consecrated by custom in the painter's colic. He has also, in experiments, and the results of which he proposes to publish himself, given very large doses of many substances reputed very energetic, and

which some persons yet administer with such reserve, that the cures obtained by these means are new proofs of the remedying power of nature.



HOSPITAL OF SALPETRIERE,

Situated Rue Poliveau, No. 7, and Boulevard de l'Hopital, Quartier Saint Marcel, in the place where saltpetre was formerly manufactured. It was founded in 1656, and was originally intended as a place of confinement for mendicants and persons out of employment, which, for several years preceding, had amounted to no less than 40,000 in Paris, committing great disorders.

The buildings of this hospital are immense, and occupy, with the courts and gardens, a space which contains more than 55,000 "toises carrees." They are not built in a regular plan, because the numerous erections of which it is composed were raised at different times, according as the want of them was experienced.

In the centre of the hospital there exists a lock up house, which includes four different prisons.

The extent of the buildings of this hospital is immense; a great number of small towns do not each contain a population as numerous as that of this hospital. It is said to be the largest in Europe, that of Milan perhaps excepted.

Delivered in 1802 to the care of the administration of hospitals, this vast establishment has, since this epoch, experienced beneficial changes, and considerable ameliorations.

The service is distributed into five great divisions, namely—

1st. The "*reposantes*," or women [who have grown old in the service.

2nd. The indigent blind, paralytic, infirm, and octogenaires.

3rd. The septuagenary women, those affected with contagious diseases of the skin, the cancerous, and those who have other incurable ulcers.

4th. The infirmary, composed of 400 beds, of which the building is separated from the others.

5th. The lunatics; the epileptics are treated at Salpêtrière as at Bicêtre, by the same means and the same physicians.

In 1790 the mortality in this hospital was about a tenth. From January, 1804, to December, 1814, the mortality was one in $7\frac{26}{100}$, during which time 13,691 women had been received, 6,900 had gone out with pensions, and 6,017 had died. Old and infirm women are allowed to renounce their place in Salpêtrière and return to their friends, being allowed what is considered an equivalent pension. This is 120 francs for the healthy and 180 for the infirm per annum.

This vast establishment contains an hospice and an hospital. They admit here women advanced in age, or affected with incurable diseases or infirmities; also in separate buildings, women labouring under mental alienation. This part of the establishment was confided to the care of Professor Pinel and Dr. Esquirol, who supplied the place of his respected teacher, and who, now appointed to the direction of the Maison Royale de Charenton, has yielded his place to M. Pariset. We should believe we did great injury to our work if we were to omit the precepts full of information of this former physician. His successor recently established will not enable us to supply the deficiency. The surgical wards are consigned to Professor Lallemand, and

the infirmaries of the hospital to M. M. Rostan and Majendie.

The clinical lessons of M. Rostan are much followed, but it is generally with the desire of studying mental alienation that Salpêtrière is frequented, where Dr. Esquirol gives a clinical course, that is much esteemed, on this disease. All those who know this learned physician, are aware that his treatment of different kinds of "vesanie" consists less in the accumulation of a great quantity of medicines than in the wisely directed employment of hygienic agents and moral means. Thus, though his name will make but a small figure in a formulary, yet I think my readers will see with interest some notes on the means employed against intellectual lesions, which I owe to the kindness of M. Esquirol.*

To bring back the brain affected with this disease (mental alienation) to its natural state, the physician ought to use two means: the one consists in modifying the organ by the exercise of its functions, and

* These notes have been communicated by Dr. Georget, pupil and friend of M. Esquirol, to whom we are indebted for some interesting labours on the physiology of the brain and mental alienation.

are called *intellectual* and *moral*, the others are drawn from the ordinary resources of therapeutics, and have for their object the fulfilment of different curative indications, these are called *physical*.

1st, *Moral and Intellectual Treatment*. To isolate the alienated from objects which have excited their disease, parents or servants whom they detest, or whom they will not obey. 2nd, To treat them with mildness but sometimes with firmness. 3rd, To class them in the establishment so as to prevent the possibility of their hurting each other, and also to contribute to their cure; to place together the furious, in a quarter separated at a distance from the quarters of the other patients; to shut some patients who are very agitated in chambers badly lighted or quite dark; not to constrain those who are penetrated with excessive heat, to cover themselves with clothes too hot or too confined, even in winter. 4th, To separate entirely the convalescents from all the other lunatics, in making them pass into sleeping rooms more tranquil, according as they approach the term of their dismissal; to take great care to withdraw from these dormitories patients from the moment that they show symptoms of an access or relapse; to excite to work, to amusement, or to walk, those

patients whose reason is not entirely destroyed or deranged. 5th, To employ, as a means of repression and punishment, only the straight waistcoat, seclusion in a cell, the passage from one division to another, or the forcible shower bath, and never blows, chains, or other harsh treatment; to manage the first interviews of patients with their near relations or intimate friends, to provoke sometimes lively moral emotions by a surprise, a fright, an unjust reprimand; to replace one passion by another, not to forget ourselves in vain discussions with lunatics; to beware particularly of exciting them to anger or fury, whether it be by laughing at them, or by opposing bluntly their ideas, their passions, &c. to favour the meeting and associating of convalescent lunatics; to exercise the strictest guard on those who have a desire to commit suicide, even long after they seem to have given up this fatal idea, otherwise one runs the risk of being the dupe of a profound dissimulation, concealed with admirable prudence: to watch and isolate the patients addicted to masturbation, or to a more shameful vice; to avoid reminding deranged minds that are cured, either of the extravagancies of their delirium, or of the causes which have disagreeably affected them, unless they are the

first to fix the conversation on this subject; to advise the removing to a distance, causes which would lead to a relapse; such are the principal rules of moral treatment employed at the hospital of Salpêtrière.

The treatment called *physical*, resolves itself into hygiénic cares, and the medical agents adapted to fulfil the different curative indications.

Hygiénic Cures. To preserve the *deranged* from the influence of the excess of temperature, and sudden changes of atmosphere, by keeping them in the winter in places sufficiently warmed, and in preventing them from going bare-footed in iced water, or on the snow, and above all, in hindering them during the great heats of summer from receiving the action of the solar rays, to wash every day, and to air the cells of the dirty lunatics; to tie to their beds during the night, those patients who have a mania to sleep on the floor; and the paralytic, who would throw himself involuntarily out of bed; or still better, to put the latter into a kind of cradle, which holds him without restraint. To take great care to cover the lunatics during the night, especially during the rigorous colds; to avoid congelations of the feet: nothing is better to effect this, than to put a layer of straw above the counterpane. To give in all cases one or two baths

for cleanliness ; to cut the hair whenever there exists much heat of the head, and an habitual state of irritation ; or congestion towards this part ; or also when the patients, being furious, it is impossible to take proper care of their hair ; to distribute four times a day healthy and abundant diet, and especially, to refuse but seldom the patients who desire to eat or drink ; even during the night : to give to lunatics who obstinately refuse to eat, soups injected into the stomach, by means of a sound introduced into the œsophagus, also milk, soup, and sometimes wine ; often the pain which the sound occasions in the nostrils, induces the patient to eat ; but sometimes they are so obstinate, that they support all rather than abandon their resolution.

Though a very small quantity of remedies are employed at Salpêtrière, and that properly speaking, there are no formulæ to collect from the clinic of M. Esquirol ; nevertheless, some idea may be given of the remedial means by which he seconds the hygienic, and moral part of his treatment.

Curative Indications. Madness is ordinarily of long duration ; its nature is very difficult to appreciate, at least, in the greater number of cases. The indications of treatment founded on this knowledge,

are nearly always difficult to seize, often slightly or not at all decided. It is also necessary to state, that this disease does not always offer very favourable chances of cure, since, from returns made at Salpêtrière, scarcely a third of the lunatics are cured, who do not present any signs of incurability. All these causes ought to render the physician very circumspect. He should abstain from prescribing remedies, rather than risk the giving them without indications, which might produce different effects from those that he desires; he ought to be on his guard especially, not to be imposed upon by the violence of certain symptoms, and to believe that the cause of evil is in relation with their intensity. In two circumstances only, the physician may act with a certain vigour; it is at the commencement of the disease, or when the employment of rational means indicated, has been continued long enough, and that incurability is to be feared. When madness is passed into the chronic state, after many years of existence, if it degenerates into decay of the faculties; above all, if it is complicated with palsy, there is no longer any thing to hope by trying to obtain a cure; the physician has only in view the prolonging the life of the patient, in foreseeing and counteracting cerebral

accidents or others, which may destroy the patient. The nature of this work does not allow us to enter into the detail of curative indications, which may be shown in the clinical course, and to shew the appropriate means, we will limit ourselves to a small number of considerations, on some of the principal means employed.

Sanguineous Evacuations. Bleeding has often been abused, because general plethora has been confounded with the state of fury, and that it has been imagined that the paroxysm would be abated, as the mass of blood diminished: it is a mistaken idea. Plethora and cerebral congestion, have other characters than passion, symptoms which exist very often in this; and it is in vain to hope to calm a furious lunatic, in bleeding him to excess: patients have become more furious after bleeding; and it is only on regaining strength, that they have ceased to be so. Paroxysms of madness, with fury, have lasted the same time with and without bleeding. But when there exists a real plethora, a state of cerebral congestion, especially at the commencement of the disease, there must be no hesitation in drawing blood either by general bleeding, cupping or leeches. If there be a suppression of an habitual flowing of

blood, these means should be carried to the parts which were the seat of the periodical evacuation.

Baths. Warm baths (rarely cold baths,) are employed at Saltpêtrière: it is a very advantageous means of allaying different accidents.

“*Douches,*” or Forcible Shower Baths are seldom used, and with great circumspection; particularly when violent cephalalgia (head-ache) exists with great heat of the head. The forcible shower bath is most frequently employed as a means of repression for the patients who have taken some fatal and energetic determination; for example, that of letting himself die of hunger. They ought not to be given for more than a few seconds, rarely more than a minute.

The applications, and cold effusions on the head, are often very good allayants, and always without danger. In cerebral congestions, the lead is taken by bleedings from the jugular, or the application of leeches to the neck, a warm bath, in which the patient remains plunged a longer or shorter time, during which, refrigerant applications are made to the head.

Emetics. Emetics are advantageous by the shocks they give in certain cases of stupor and insensibility, without sign of irritation; but they cannot be used with too much prudence, on account of the impulse

which they communicate towards the superior parts.

Purgatives. They are often useful, both as proper to remove constipation, a symptom of great importance, and to which much attention ought to be paid; and as a means of establishing towards the intestinal canal, a salutary derivation.

Derivatives. Derivatives carried upon the intestines and on the skin, are in general use, and very advantageous in the greater proportion of alienations, and especially those which succeed lying-in. Purgative enema's, and cutaneous suppurations are preferred to other means in the cases above cited.

Moxæ, Blisters, Setons. The applications of moxæ on the head, have effected a cure several times; once a mortal cerebral inflammation has resulted; often the disease has not changed its form. It is the same with the application of actual cautery. The seton at the neck, and blisters are equally employed, according to the same principles, and with the same precautions.

Narcotics. They are rarely useful at the commencement of the disease; often they remain without effect, and when they procure sleep, they nearly always leave delirium.

General Means. Acidulated, mucilaginous, and

nitrous drinks are given in abundance in the period of irritation. It is sometimes useful to employ gentle tonics when the strength requires to be supported, in a word, we must be guided by the general rules of Therapeutics.

HOPITAL NECKER.

Though the hospital Necker is not included by M. Rattier in his account of the French Hospitals, yet if it were merely as the establishment where so bright an ornament to the medical profession as Laennec, practised ; and followed up his discoveries and researches, I should regret omitting it altogether. The note I have subjoined, written by Laennec himself, and communicated to M. Rattier, relative to his use of the emetic in large doses, will I hope be found interesting.

This hospital is situated in the Rue de Sévres, No. 3, beyond the Boulevard : it was originally a convent, which was suppressed in 1799, when Madame Necker purchased the place, and founded an hospital.

Louis XVI. aided her in the founding this useful establishment, which was called l'hospice de Saint-Sulpice, and du Gros Caillou: During the revolution it was termed l'Hospice de l'Ouest; but for some years it has retaken the name of its founder.

This hospital originally contained 120 beds. In 1792, this number was raised to 128; of which, 68 were destined to the men, and 60 for the women. These beds were distributed in eight wards: four on the ground floor, and four on the first floor; two of which appertained to convalescents of both sexes.

The original buildings not having been constructed for an hospital, there are in consequence numerous inconveniences, which diminish its salubrity; and though many repairs and ameliorations have been effected, still many remain.

At present there are 136 beds; 14 for the wounded men, and 12 for the women; 15 for the convalescents of each sex, and 36 for ordinary male patients, and 44 for the women.

During ten years, the average mortality, without distinction of sex, was about one in six; that of the men, was much more than the women. In 1862 deaths in ten years, 790 were men.

M. Honoré is the physician, and **M. Passos** the surgeon.

Note on the Employment of the Emetic, at a high dose, in various affections.

When the first edition of Rattier's work commenced, this mode of treatment had scarcely begun to be introduced in France. Now it has been employed by a great number of practitioners with various degrees of success. We do not think that we shall be enabled to give our readers a more exact idea of this kind of treatment, than by presenting them with the particulars which M. Laennec himself furnished.

℞ Antim. Tartar - - gr. vj.
 Infus. Foliorum exsic: aurant. lbj.
 Syr. Simpl. • - - ℥ij Misce.

To give a sixth, (half a glass) from two hours to two hours, during the day only. If the patient bears the emetic well, and if the disease be serious, the dose is augmented to three grains each day, or else continue the former without interruption through the night.

This remedy is applicable to the treatment of a great number of inflammatory diseases, or acute serous effusions. M. Laennec did not at all regard it with *Rasori*, as a *counter-stimulant* or *debilitant*, appropriate to all cases where there is "*hypersthénie*," *excess of strength or stimulus*, still less as an antiphlogistic, applicable to all inflammations. Experience has proved to him, that it is without efficacy, or that it cannot be supported in many of these cases: however it is useful in many cases of a different nature.

The only constant and immediate effect that he observed, was the rapid absorption of serous or acute purulent effusions, and the disappearance of inflammations: most frequently, no evacuation is manifested. These effects are never more sure, than when the patients have neither vomiting, nor alvine evacuations. They take place, however, notwithstanding very free evacuations, when they are not accompanied by other signs of well-marked irritation. They are stopped sometimes in a way, in some degree wonderful, by augmenting the dose of emetic, or else in joining opium to it. The cinchona does not neutralise its action.

The diseases in which this mode of treatment succeeds in the most decided manner, are

Acute Rheumatism, in which, without employing any emission of blood, cure is effected, in a manner as rapid as it is certain; the average duration of treatment is from one to eight days.

Peri-pneumonia. Two or three bleedings at most, in the beginning, suffice; then the tartar stibié is administered, which often in twenty-four hours, stops in a sensible manner, the progress of the disease, as is easy to be convinced of, by the use of the stethoscope. It is the same with acute suffocating catarrh, and acute œdema of the lungs.

Pleurisy: as in the preceding affection, general or local bleeding is necessary. The emetic has effects equally advantageous, when it is given at the commencement of the disease; it produces rapidly, absorption of the effused liquid; but when the fever has already fallen, this absorption is less rapid, though the remedy be long and well supported.

The redness of the tongue, the epigastric sensibility, and other signs of inflammation of the stomach, did not stop M. Laennec in cases of rheumatism, or intense peri-pneumonia. Under the influence of this treatment, the tongue becomes paler, the epigastric pain diminishes, and in one word, all the signs of irritation completely disappear.

Hydrocephalus, has often yielded with such rapidity, that the progress towards health, was sensible in a few hours interval. Cures have taken place in three days; but these advantageous results are rare, especially when the disease has become chronic.

In apoplexy, one generally begins with the strongest dose. Some patients support a drachm a day; the greater proportion as much as twenty-four grains, and that for a month. The emetic appears to favour the absorption of the congealed blood; but there are few examples of quick and complete cures.

M. Laennec was not satisfied with the "succédané," which Rasori has pointed out as equivalent to the emetic, the antim. sulphur. præcep. and the golden sulphur of antimony, which he has equally tried; they are more nauseous than the emetic. Some patients have supported them as high as 30 grains, but without obtaining very successful effects.

When the emetic is not supported in peripneumonia or articular rheumatism, which is rare, M. Laennec prefers the white oxide of antimony, ("*antimoine diaphorétique*") he begins by 36 or 48 grains, and carries it in three or four days to a drachm and a half; he has never found it produce vomiting; he is not sure that it is even slightly purgative, at this dose.

HOPITAL DES ENFANS.

This hospital is situated in the Rue de Sevres, No. 9, beyond the Boulevards. The Sieur Lanquet, curate of Saint Sulpice, founded this house in 1735, for the purpose of educating a small number of noble and indigent children of his parish ; it was afterwards converted into an hospital for orphans.

In June, 1802, the General Council of hospitals ordered this building to be prepared for the reception of sick children. At first, only those afflicted with acute diseases were received, and 300 beds were established for them : it was impossible to do better, the state of the building considered, which remained a long time without any repairs, though in great need of them.

The number of beds since 1803, has continued increasing, and at present there are nearly 600.

Various constructions and improvements have been made in the buildings, tending to consolidate them, and to render the interior more healthy.

The children attacked with diseases which appear

contagious, are placed in isolated parts of the edifice, separated from the hospital by large gardens.

There are 212 beds for those who are afflicted with acute diseases; 129 for the boys, and 83 for the girls. For those diseases which require the aid of the surgeon, there are 70 beds; of which 40 are for boys: the rest are for chronic diseases, the itch, scald head, and scrophula.

Notwithstanding the care and precaution employed in the treatment of the children, the mortality in this hospital has always been great. The general proportion between the number of persons dead and those sick, from the 1st of January, 1804, to the 31st of December, 1814, is from one-fourth to one-fifth.

The least mortality has been one on $4\frac{7}{100}$; that of boys taken separately, give the result of one in $4\frac{7}{100}$, the mortality has consequently been greater in the female children.

This establishment is appropriated to the treatment of sick children, from two to fifteen years old of either sex, and whatever be the affection under which they labour. The physicians are M. M. Jadelot and Guersent. M. Baffos, Sen. is surgeon-in-chief, and M. Delabarre surgeon dentist. The surgical wards, generally speaking, offer nothing very interesting.

It is here only, in Paris, that the diseases of children may be studied to the greatest advantage. The importance of a perfect knowledge of these affections is generally admitted, as also the great difficulty experienced in acquiring the power of accurately distinguishing them. When there is great vagueness, or often a total absence of information from the patient, a greater power and delicacy of observation is necessarily required to form an accurate diagnosis than where all the internal symptoms are intelligibly communicated. There is a stronger necessity, in pronouncing upon the diseases of a child, of observing the slightest deviation from the natural appearances. The colour of the skin, the features, &c. which might often be passed over in the diseases of adults, are here land marks and aids of the greatest importance.

In this hospital the student will find every facility for effectively studying this class of diseases. In the clinical lectures of M. M. Jadelot and Guersent will be found much valuable information, and in the practice of M. Jadelot there are many points that acquire additional interest from the originality of his views, as well as the success with which his plans are generally attended.

Patients affected with chronic diseases, scrophula, herpes, itch, are placed in separate wards to those destined to acute diseases. Those affected with scald head, are confined to M. M. Mahon, brothers, who are proprietors of a remedy that they have been authorized to try, under the inspection of the physicians of the establishment who bear witness to the cure. The remedy of M. M. Mahon is kept secret; it appears tolerably advantageous in its results.

The practice of M. Guersent is extremely simple and rational; he pays great attention to the examination of symptoms, and never employs energetic remedies but with the greatest circumspection, for he is persuaded that nature has never more resources than in the age when the organs have scarcely begun to exercise their functions. The observation of patients, and numerous researches in pathological anatomy, have proved to him, as to many other practitioners, that inflammations form the much greater majority of the diseases of children. I refer the reader to the numerous articles of pathology and therapeutics with which M. Guersent has enriched the "*Dictionnaire de Medicine*" in 18 volumes. This practitioner is also preparing an important work on the diseases of children, and he

delivers a clinical course of lectures, which are distinguished by the delightful manner in which he combines the theory of a disease with the practice. At each lecture, after having occupied his auditors with the patients submitted to their observation, he gives the history of a disease. The following details respecting the opinions and practice of M. Jadelot, have been collected by M. Troussel-Delvincourt, and as they have been revised by M. Jadelot himself, we doubt not they will be read with much interest.

Long before the revolution which took place in medicine, relative to essential fevers, this physician had been enabled by long and careful observation, especially directed to the diseases of children, to recognize in these affections a more definite and limited seat. Endowed with excellent sense, and which long experience had still further improved, he was not long in referring a great number of fevers to phlegmasiæ, whether isolated, or coming from the abdomen, the chest, or the head. Even then he ascertained that those of the abdomen were in a much greater proportion. M. Jadelot has not formed any particular opinion on intermittent fevers, of which, it is observed, the number has much

diminished; he employs the known treatment, but he modifies it if he observes in the middle of general disorders an alteration of function in one organ more marked than the others. It is thus that he employs with incontestible success a mixed treatment, that is to say anti-phlogistic, directed upon the parts which appear the seat of some irritation, and at the same time cinchona alone, or well united with camphors, in enemas.

Nearly all that the class of fevers lost was carried into that of phlegmasiæ; they were studied with more care, and the treatment better adapted to their seat and nature, became shorter and more successful. M. Jadelot was one of the [first physicians who acquired any very definite knowledge concerning phlegmasiæ, and especially on gastric and intestinal phlegmasia, he created for himself, if we may say so, new means of recognizing them, so that by the simple inspection of the features he came to a justness of diagnosis truly remarkable.

This "*seméiologie*" is peculiar to early age, though some advantage may be derived from it sometimes in the affections of adults, M. Jadelot has called it

“physiognomonic.” The reader will probably find a succinct account of it both useful and agreeable.* Independent of the alterations of colour which the face may present, and which furnish the physician with more or less positive information, the expression of the face, and the greater or less prominence of the different features, are further means of assisting the diagnosis.

In the infant, whose muscles of the face are not endowed with great mobility, three principal marks present themselves to the observer. They are nearly parallel, and take their course from the centre towards the sides of the face. The first the zygomatic muscle, arising from the os malæ, loses itself a little below the angle of the mouth. The second, the Levator Labii superioris alæque nasi, commences at the superior part of the wing of the nose, and prolongs itself half a circle towards the angle of the mouth. The last, depressor labiorum communis, commences at the corner of the mouth, and ends at the chin, on the line of the lower jaw.

* For more ample details, see the *“Traité des Maladies des Enfants,”* of Michael Underwood, translated by Eusebe de Salle, vol. I. p. 38.

Each of these marks relates to one of the "splanchnique" cavities. The first is joined to diseases of the cerebro nervous system, the second relates to abdominal lesions; and the third indicates the affections of the organs of circulation and respiration. This means of investigation M. Jadelot considers valuable, for in patients incapable of furnishing the physician with any information, it requires great practice; the happy results however obtained through it, he thinks repays the physician the labour he may have undertaken to acquire this power.

In small pox M. Jadelot endeavours especially to recognize the different affections which may complicate it in a manifest or indirect manner, and it is from this knowledge that he modifies his treatment. Thus, when he sees a violent angina, without paying any attention to the stage of the eruption, he employs antiphlogistics and the most energetic derivatives. If signs of gastric irritation supervene, he counteracts it by appropriate means, persuaded that the eruption will take place with more facility. In cases of severe small pox he has recourse to excitants and even to tonics internally, either by the mouth or in enemas. He recommends, during the period

of suppuration, the letting out the pus contained in the pustules, and especially when it is collected in a great quantity by the union of several pustules, by opening them with the point of the lancet, or else with scissors cutting the tops, which are cleaned immediately afterwards by fine linen. In convalescence he employs, with success, simple or emollient warm baths, to hasten the fall of the scab and to render cutaneous transpiration more easy.

The measles present still more frequently than the small pox the complication of phlegmasiæ, either mucous or parenchymatus of thoracic organs, and this complication merits as much or even more care than the principal disease. To anti-phlogistics M. Jadelot is in the habit of adding, as adapted to diminish the pulmonary congestion, hot baths to the hands stimulated with vinegar, common salt, or mustard powder. If the eruption, after having come out, disappears suddenly, which takes place ordinarily at the occurrence of a phlegmasy which develops itself in another part of the system, he attacks it with an energy proportionate to the danger which the patient incurs. If the eruption, in spite of this, hesitates to shew itself, he employe vapour

baths or else frictions, either dry or rendered more irritating by means of appropriate liniments. M. Jadelot does not hesitate to prescribe tonics and excitants internally and externally, when the eruption is but imperfectly formed on account of the weakness of the subject. He keeps the convalescents to a regime sufficiently severe, and he orders purgatives but rarely, and even then only the mildest.

The treatment of scarlet fever differs little from that of the measles. M. Jadelot recommends a most careful examination of the state of the throat, that he may be able in time to counteract the gangrenous angina which often complicates it.

The gangrenous sore throat is the same, whether it be preceded by scarlet fever or shews itself without preceding disease. At the commencement of this affection, which is ordinarily inflammatory, M. Jadelot follows a purely antiphlogistic plan, but when large white patches are perceived at the bottom of the throat, accompanied with signs of general debility, he immediately orders a mustard seed poultice to the feet, injections into the throat, with a decoction of cinchona, cataplasms of flower of

rice, boiled in a decoction of cinchona, and sprinkled with aromatic vinegar the moment they are about to be applied to the lower jaw : in fine glisters with the decoction of cinchona, diluting drinks, and fumigations with vinegar directed towards the bottom of the throat. He promotes the action of cataplasms of cinchona by frictions made upon the sides of the neck with ammoniacal liniment. Sometimes, though rarely, he is necessitated to have recourse to tonics, administered internally.

The inflammation of the mucous membrane of the air passages is a disease very frequent in infancy ; its importance is in proportion as its seat is near to the larynx. M. Jadelot is the first who has succeeded, by an attentive examination of the patient, in knowing the precise seat of the angina, and that is of immense importance on account of the treatment, which, nearly the same as to its principle, ought to be conducted with a greater or less activity and promptitude, according as there exists laryngeal or tracheal angina, otherwise the inflammation invades all the mucous membrane of the air passages. His treatment consists of the application of leeches on the anterior part of the neck, a mustard seed poultice

applied to the lower extremities, laxative or purgative medicines, and even emetics: he commonly gives the preference to the ipecacuanha in powder or in syrup. He employs it for weak patients but slightly excitable, and after having brought down the inflammations by local bleedings. In this case he does not hesitate to have recourse to it several successive times, and even at short intervals.

M. Jadelot considers the croup as a kind of angina of the air passage, presenting more violent symptoms, and having true paroxysms separated by well marked intermittents for special character. He admits different degrees in the disease according to its intensity, but without changing opinion as to its nature.* Bleeding by leeches and emetics, are the agents the most employed in the treatment of croup. The emetic alone has often sufficed to stop the disease, especially when it takes place in weak, pale, and bloated subjects, but in the opposite cases he insists on the application of leeches,† and allows the

* M. Guersent, in his clinical lessons, distinguishes a *false croup*, which is cured without other means than diet, repose in bed, and some soothing drinks.

† M. Jadelot has never been deterred by the fear of not being able to stop the blood which flows from the puncture,

blood to flow long enough for the infant to become pale, and the pulse to lose its strength. If the bleeding be too soon stopped, there is a danger of not arresting the progress of the evil, and a result, which is at least troublesome, is that of being obliged to apply more leeches.

After the bleeding, M. Jadelot causes vomiting, several times in succession, at intervals of two or three hours, and the practice is attended by the greatest success, for the children find themselves relieved each time that they have vomited.

When the croup has arrived at the second period without having been opposed, and the presence of a false membrane is suspected, M. Jadelot directs leeches to be applied, but from the moment that they fall he hastens to produce vomiting, and it is in this case that he employs by spoonfuls every ten minutes or quarter of an hour the mixture called

in a situation where numerous vessels ramify, and on which no compression can be made. He always succeeds with amadou soaked in vinegar, or powdered with alum or hard rosin, or by the use of caustic. To apply it properly, it must be rubbed exactly over the punctures, and as soon as it forms a little blackish crumb, cover it by a little morsel of amadou, pressed by the end of the finger, for some minutes. Cauterization, by means of a little wine heated to a white heat, is the most certain and not very painful.

L

anti-croupal,* until he has obtained vomiting. He insists equally upon derivatives used upon the skin or on the intestinal canal, he advises also to provoke sneezing.

When the disease is very rapid, it has been a question whether we ought to commence by bleeding or emetic. M. Jadelot's opinion is, that we should bleed first if the infant be robust, and if it present signs of congestion towards the superior parts; on the contrary, he would commence by vomiting, when the subject is pale and exhausted, and there is little heat and fever.

The sulphate of Potassa is a remedy that M. Jadelot never employs in croup, especially when in a very inflammatory state, he regards it as dangerous. He

* *Anti Croupal Mixture*—

℞ Infus. Polygalæ. - - ℥iv.†
 Syr. Ipecacuanah. - ℥j.‡
 Oxymel. Scillæ. - - ℥ij.
 Autim. Tart. - - - gr. iss. misce.

† *Infusion of Polygala*—

℞ Rad. Polygalæ. - - - ℥j.
 Aquæ Ferventis - - ℥j.
 Macera per horas duas et cola.

‡ Syr. Ipecacuanah. This preparation contains 1-86th part Ipecacuanha.

employs it sometimes in opposite circumstances. The dose varies, but it ought not to go beyond half a grain in twenty-four hours.

From numerous observations this physician thinks himself warranted in believing that the hooping cough consists in inflammation of the bronchiæ, accompanied by a particular lesion of nerves which distinguishes it from ordinary colds. In consequence of this manner of viewing the disease, his treatment consists in abstractions of blood, cathartics employed in all forms, at the same time he employs derivatives,* narcotics internally and applied to the chest, which last consist of poultices sprinkled with half a drachm, a drachm, or a drachm and a half of pure laudanum, or a solution of gummous extract of opium.

In acute hydrocephalus M. Jadelot distinguishes a gastric intestinal irritation which shews itself at the commencement of the disease, and which precedes more or less the developement of cerebral symptoms, and to which he opposes local bleedings,

* These are mustard seed poultices weakened, so as only to produce a slight redness and should be often renewed; frictions upon the arms and the front of the chest, with "*ether acetique*," are also employed with success. At the end of the disease good effects are produced by blisters.

and emollient applications to the abdomen. Later, and when the head appears to be the principal seat of the affection, he directs antiphlogistic means more or less energetic, to this part, without however losing sight of the abdominal irritation. M. Jadelot only employs ice on the head in the first period of the disease before the formation of the water, when a violent congestion exists towards the head. He recommends having recourse to it only after having made the necessary local bleedings, and to make these applications while the patient is plunged in a warm bath. Such are the means used in the first period, but when the signs known to M. Jadelot enable him to recognize the presence of an effusion in the brain, he insists upon the derivatives externally, he orders a blister to be applied to the back of the neck, and frictions to the members with " *éter acétique*," or else with volatile and aromatic liniments; he employs mercurial frictions on the shaved head, (half a drachm by friction) they are renewed every three, four, or six hours, after having taken care to clean the head with an ammoniacal liniment. At the same time he administers calomel internally, in a dose of two, three, or four grains, repeated four or five times a day. In fine, the last resource is a very large blister upon the head.

Here ends this general Sketch of the Hospitals of Paris, which has been written in the hope of furnishing the reader with some data on these establishments, so useful to medical instruction. I am far from considering this sketch as complete; the subject is too vast and too interesting to be treated in this concise manner; it might furnish the subject of a very curious and extensive work. Several articles by M. Rattier have since appeared, in the Archives Generales de Medicine, under the title of Coup d'œil sur les cliniques Médicales de la Faculté et des hopitaux civils des Paris.

Many very interesting things may have been omitted, but it is on account of the abundance of matter; and if some hospitals have been dwelt more upon than others, it is because they are by different circumstances more particularly devoted to instruction; this sort of preference implies no want of ability in the practitioners who have not been mentioned.

To conclude, the physician who visits the hospitals of Paris, will see with satisfaction the practitioners who direct them rival each other in zeal and talent, and substitute an analytic and rational course for the subtle and sometimes seducing theories

of ancient physicians ; he finds, in comparing their manner of acting, a similarity and analogy, which afford a strong proof in favour of the present state of medicine.

The physiological doctrine, more or less modified, but remaining pure as regards therapeutics, is nearly every where adopted, either in an evident manner or by an easy gradation.

In general much reserve is shewn in the administration of tonics, stimulants, and other disturbing remedies, useful means no doubt, but which had been singularly abused.

Observation and reasoning have brought practitioners back to expectant medicine. Some confidence is felt in the preserving efforts of nature, and the polypharmacy has yielded in many cases to the wisely combined employment of hygienic agents.*

* The more we frequent the different hospitals, the more we convince ourselves of the good direction which the physicians generally have taken. Empiric methods obtain but little credit with them, they have a fair trial, for nothing new should be overlooked, but having soon ascertained that the enthusiasm of inventors has misled them, they abandon the dangerous track to return to the road, indicated by experience and knowledge of the organization; such has been the history of the employment of the emetic in high doses.

Nevertheless the resources of the *materia medica* are by no means disdained, and by repeated experiments in many hospitals, and by different practitioners, attempts are made to prove the properties of new substances, to verify those which the ancients have attributed to the medicinal substances, which they have transmitted to us, and to discover new applications.

In fine, instead of losing time in learned dissertations, private observations and cadaverous researches extend the only solid basis of medical science. It is to this happy direction of men's minds that we are indebted for the actual state of the science; and if our knowledge has not acquired much in extent, it has at least gained in certainty and precision.

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