

'Indeed, my father, it is right to pray to God, but behold my misery, I cannot even make the sign of the cross.'

I made the sign of the cross over him and consoled him by explaining that the prayer of the heart is acceptable to God, even without external manifestations.

'I thank thee, Sister!' he said, and a few minutes after he added: 'But, behold my misery! I cannot hold a pipe any longer; how shall I fill in the tobacco, and how shall I light my pipe? No! it will be better to die than to lie upon a bed and not be able to smoke a pipe.'

The physician took out his cigar-case, lit a cigar and put it into the mouth of the wounded man, who smoked it with evident relish and momentary relief from pain.

'Do not be afraid, brave son of the Czar and of the country. You will be taken care of.' The poor fellow's eyes glittered with joy. We bade him good-bye, and the surgeon promised to send him more cigars."

What a glimpse of the horrors of war!

Medical Matters.

A NEW SYMPTOM.



A FRENCH contemporary recently published a paper in which the writer suggested a new symptom of cancer, which he had observed in a considerable number of patients suffering from that disease. He stated that, in a case which he described, the patient presented on each cheek a patch of wine-red discoloration, formed by the dilatation of the superficial veins. On the strength of this one fact, the writer made a diagnosis of probable cancer at a time when there was yet no other manifest sign of that affection. He states that this has occurred in about two thirds of the cases of cancer which have come under his observation, and that it is particularly frequent in cases of epithelioma of the stomach and uterus, but less common when the malignant disease attacks other organs. The fact is certainly worthy of being put upon record just as every other fact connected with disease always is. But, for the present, it can hardly be accepted as a diagnostic sign of much value. We have seen a considerable number of cases of malignant mischief in which such a condition certainly did not exist; and, on the other hand, it is by no means uncommon to find this patch of discoloration on the cheeks, or on other parts of the body, of persons suffering from emphysema, from heart disease, from gout, and other conditions in which the circulation is interfered with, and the vessels dilated. The symptom appears to us to be more probably a result, of the general enfeeblement of the tissues caused by the cancerous cachexia, or by that asthenia which is so well recognised as a predisposing cause for the development of malignant disease.

THE FATAL HYPNOTIC CASE.

The greatest interest has been excited both on the Continent and in this country by the death last week of a young lady in Austria during the course of some hypnotic experiments which were being made upon her. It is indeed stated now, that she was not under hypnotic influence at all, but there seems good grounds for believing that she died during the hypnotic state, and that death resulted from the brain disturbance caused by that state. The post-mortem examination showed that there was marked anæmia of the brain and other signs of death from sudden mental shock. This is ascribed to the fact that she was describing, whilst entranced, the disease—phthisis—from which a certain person was suffering; and at the moment at which she foretold that his condition was incurable, she suddenly shrieked and expired. Presuming that the case was one of death under hypnotism, it is the first instance, we believe, of such a fatal result, and therefore is important as showing the extreme danger to which an excitable subject is exposed by such a severe strain upon the nervous system as the active hypnotic condition with efforts at what is termed *clairvoyance* must necessarily induce. It also raises a very fine question as to the exact responsibility, legal or moral, for this or any similar death. Seeing that hypnotism, to become effective, means that the subject experimented upon, is reduced to a condition of practical unconsciousness, as much as if a narcotic drug had been administered, the common sense reasoning would be that if that unconsciousness brought about a fatal result, whoever induced the condition, should be held to be responsible for the fatality. Legally, perhaps, a dose of morphia given by accident may be held to be a death by misadventure. But if it was deliberately given with the object of stupefying the patient, by any other person than a medical practitioner, and for any other object than one of a medicinal character, we imagine that if death followed the employment of the drug, the administrator would probably be charged with manslaughter, if not with murder. The case to which we refer, therefore, seems to be chiefly important as illustrating the necessity for some legal restriction being placed upon the practice of hypnotism.

TOLYSAL.

A German contemporary recently contained a valuable account of the action of this new drug as an anodyne. In head-aches due to neurasthenia, it was found to be very useful, even when antipyrin had proved to have no effect, and in the insomnia of the insane, without excitement, it also proved curative. Hysterical headaches, and those caused by organic brain disease, bone disease, or old rheumatism, and cases of true megrim, usually gave no results from the treatment.

[previous page](#)

[next page](#)