

a very inadequate guide for practice, at the same time that it is no way calculated for popular perusal. Dr. Clarke has indeed taken care to remove his work from vulgar use, by introducing technical terms on every possible occasion. In speaking of the external applications for phlegmon, he recommends "the murias ammoniacæ, half an ounce dissolved in a pint of the acetum," in plain English, sal ammoniac dissolved in vinegar; then we have a composition which contains "a tea spoonful of murias sodæ," *id est*, common salt. But this is not all; the author, though writing and publishing in London, has chosen to dignify his performance with the splendid nomenclature of the new Edinburgh pharmacopœia. In one place we have the decoctum anthemidis nobilis recommended, which, after some reflection, we discover to be our old friend

chamomile tea. Many of the chapters are concluded by queries, some of which we think very fanciful and trifling, while others manifest an extraordinary deficiency of information. In speaking of the cure of agues, he asks whether "the affusion of cold water, or brine, might not be employed with every prospect of success, immediately after the hot fit is completely formed." This, every one knows, is the identical practice which is most accurately laid down by Dr. Currie; and still more unaccountably overlooking the discoveries of this celebrated and much-lamented physician, Dr. Clarke concludes his account of scarlet fever by asking, "might not the affusion of cold water, employed with the precautions mentioned when treating of typhus, extinguish incipient scarlatina?"

ART. IV.—*The Philosophy of Physic; or the natural History of Diseases and their Cure: being an Attempt to deliver the Art of Healing from the Darkness of Barbarism and Superstition, and from the Jargon and Pedantry of the Schools: shewing a more easy and certain Way of preserving and recovering Health than any hitherto known.* By the Rev. WILLIAM WILSON. 8vo. pp. 329.

THIS is one of the most impudent attempts to impose on the credulity of the ignorant that we have ever had occasion to peruse. Its title, we apprehend, was invented upon the old principle of *lucus a non lucendo*; for it is the very antipode of philosophy, the bathos of physic. The purport of this tissue of ignorance and imposition, is nothing less than to recommend to the public a certain powder, which, not from its appropriate virtues, but that it may have a well-sounding name, to distinguish it from the nostrums of Brodum and Solomon, is denominated the *Anti-arthritic Powder*. To this all-potent drug, the nature of which this conscientious divine means to keep a profound secret for the good of mankind, all diseases yield at once. Every disorder, acute or chronic, bilious, nervous, inflammatory, spasmodic, visceral, or cutaneous; scrofula, cancer,

consumption, siphylis, &c. &c. all disappear before the virtues of this magic powder. And moreover the reverend quack (if, indeed, he really belongs to the sacred order) has the assurance to stigmatise the whole race of physicians, from Podalirius and Machaon downwards (he read of them, we presume, in *Pope's Homer*), and to brand that science with the charge of barbarism, the very language of which he does not understand. "Thus," he says, in derision, "we read of pyrexia, of dyspnœa, dyspepsia, hæmorrhagia, menorrhagia, hæmoptoe, &c." p. xi.: from which we may judge of his complete ignorance not only of medical terms, but of that elegant and polished language of antiquity, with which it is somewhat disgraceful for one, who calls himself a divine, to be unacquainted.

ART. V.—*Observations on the Nature and Cure of Gout; on Nodes of the Joints: and on the Influence of certain Articles of Diet, in Gout, Rheumatism, and Gravel.* By JAMES PARKINSON, Hoxton. 8vo. pp. 174.

ALTHOUGH the author was incited to the publication of these observations by the appearance of Dr. Kinglake's work, and by a consideration of the danger which would ensue to the public from the general adoption of the practice which Dr. Kinglake recommends, yet it would scarcely appear that he had it in view to

refute or to answer the propositions, which this gentleman has endeavoured to establish. His object appears to be rather to recommend a practice, which he considers as more safe and more effectual than that of Dr. Kinglake, and thus to supersede the necessity of recurring to the latter. It seems to us, indeed, that the points to



which the respective methods of Mr. Parkinson and Dr. Kinglake are more particularly directed, are totally distinct; and that, provided the latter be as void of danger as Dr. Kinglake affirms that it is, the two methods of treatment, so far from being in opposition or even incompatible with each other, might be employed in mutual aid, to effect the completion of the same desirable end, the removal of gout from the system. Dr. Kinglake's refrigerating plan applies exclusively to the acute paroxysm of gout; whereas Mr. Parkinson's method of cure, as we shall see, is directed to the *prevention* of the paroxysms, or to the correction of the gouty diathesis.

Mr. Parkinson possessed an hereditary disposition to gout, and was attacked by it no less than fifteen years ago. Since that time he has made trial of a variety of remedies on himself, of which the application of cold water during the paroxysm was one; and it appears to have been attended with all the success which Dr. Kinglake ascribes to it. But "the suspicion that the immersion in cold water had been productive of injurious effects, led to the employment of other means. The most important among these was the fixed alkali, the beneficial effects of which appeared to be satisfactorily evident." *Pref.* A few years back the composition of those concretions, which form on the joints of gouty persons, was ascertained by Dr. Wollaston. They consist of the lithic acid and soda, constituting a neutral salt, a *lithate of soda*. The existence of this acid was also demonstrated by Dr. Pearson and M. Fourcroy in the calculi of the urinary passages. Independantly, therefore, of the previous experience of the preventive powers of the alkalis in regard to gout, which Dr. Cullen long ago noticed, it was an easy and natural step to suppose that the acid of these concretions might be arrested or neutralized in its incipient formation, and easily removed from the system. Dr. Wollaston himself offered the suggestion. The purport of Mr. Parkinson's "Observations" is, to prove the existence of the lithic acid in the humours of the gouty, and hence to recommend the use of alkaline remedies for the removal of the disease.

"The proximate cause of gout appears to be," according to the author's doctrine, "a peculiar saline acrimony existing in the blood, in such a proportion, as to irritate and excite to morbid action, the minute terminations of the arteries, in certain parts of the body."

Mr. Parkinson has shewn considerable ingenuity in the evidence which he has collected in support of this doctrine. We are indeed somewhat inclined to the opinion that, in the gradual progress of medical theories, from Stahl and Hoffmann up to their acmè in the schools of Brown and Darwin, we have conceded too much to the sensorial powers of the animal body, and have unjustly excluded all consideration of the humoral changes. But mere hypotheses of the one class or the other excite little of our interest. If the practical deduction be clearly made out, we care little for the fate of the hypothesis connected with it. Had Mr. Parkinson presented us with a series of circumstantial and unequivocal experiments or facts, tending to demonstrate the powers of alkaline medicines in eradicating the disposition to gout, he would have claimed our unqualified praise; and he might have indulged himself, without animadversion, in the amusing fields of hypothesis. But the general impression left by the latter on the mind is feeble and transient, because the practical inference is supported rather by collateral facts, than by direct experiment.

The "peculiar acrimony" of which the author speaks, is something altogether indefinite; and whether it exists at all in the blood, or in what state or combination, he is altogether unable to shew.

"No evidence, indeed, is likely to be adduced, to shew in what state, or in what stage of combination, the principles of this peculiar acid exist in the blood. To have the least chance of success in such an enquiry, a series of experiments would be required on the blood of the healthy, as well as on that of the gouty" (why were not *some* experiments attempted, before this crude hypothesis was brought forward?); "and were these experiments even to be performed, with all due accuracy, yet positive information would hardly be obtained.

"It is most probable that the uric acid would not be found to exist, formally, in the blood. A superabundance of the acid principle only might be detected in the blood of the arthritic and nephritic. That combination, from which the uric acid results, must be the work of some part of the animal system, since it is not known to exist in any of the substances which are employed as food: but in what part of the system this operation is performed, it is, perhaps, impossible at present to determine. It appears to be most probable that a superabundance of its principles are introduced into the stomach, and thence passes into the blood, forming there a saline acrimony of a peculiar kind. But that peculiar



arrangement and modification of its principles, from which its existence in the actual form of uric acid proceeds, is most probably the result of the action of those vessels, by which it is also separated, and deposited in different parts, as the kidneys, ligaments, tendons, &c. p. 10.

This is very vague; and, after all, the peculiar vascular action, as in all other *secretions*, is resorted to as the principal agent in these humoral changes.

The author goes on to shew, that a considerable part of the aliment used by man is of the acescent kind, and that impaired digestion is a most prolific source of acidity in the human system, in consequence of a sort of fermentation, considerably different, however, from the acetous fermentation, with which it has been confounded. This "gastric acid" is the source of much mischief at all ages. In infancy it is productive of vomitings, severe gripings, and sour green stools, and probably also of rickets, by neutralising the earthy matter destined for the formation of the bones. As life advances, the morbid effects of this acid become more evident; indigestion, heartburn, pain of the stomach, acid eructations, are some of the distressing consequences which result from it. He acknowledges that he cannot trace it regularly from the stomach, through its various modifications and combinations, to the actual formation of gouty or urinary concretions; but he thinks that he discovers a salutary discharge of some intermediate form of it in the lateritious sediment of fevers and of gout; and in the perspiration, especially during the critical periods of some diseases, and of gout itself. These are the two natural emunctories of the superabundant acid.

"But in those cases where the excessive indulgence in such articles of food, as yield much of the acetic and carbonic acid, has generated a larger quantity of this acid than can be removed by the joint operation of the kidneys and skin, disease most probably will succeed.

"It appears, by Dr. Wollaston's experiments, that the uric acid, as well as that compound of it with soda, which forms the gouty concretions, requires a very large quantity of fluid to hold it in solution. Whenever, therefore, it exists in a morbid proportion in the human system, a strong predisposition to its crystallization must prevail; and its separation in a solid form is reasonably to be expected. The part where this separation will take place, will necessarily depend on certain particularities in the general diathesis not perhaps to be explained. In some habits the

kidneys will prove to be the organs destined to effect this morbid separation; in which cases, the saline concretion will be found either in the urine, bearing the appearance, or forming one species of urinary calculus. In other habits, the ligaments and tendons will be the parts on which the morbid excess of this acid will be deposited. In this case gouty inflammation will be induced, and after every attack a thickening, with a considerable degree of stiffness of the ligaments, and hindrance of motion, will be occasioned in consequence of the deposition of the gouty matter. At the commencement of this disease, when the paroxysms are slight and seldom, a sufficient opportunity is yielded, between the fits, for the absorption of the deposited matter, which is in general soon removed, and the motion of the joint in a little time quite restored. But when the paroxysms are of long duration, the intervals from disease are not sufficient to allow of the removal of the deposited matter, before a fresh separation and deposition takes (take) place; hence accumulation proceeds, until considerable collections are formed in different joints." p. 23.

We apprehend that the notion of the deposition of urate of soda, in the first paroxysms of gout, is altogether gratuitous; and we do not perceive clearly in what manner the sudden cessation of the inflammation of the extremities, and the consequent spasmodic attack of the stomach, in retrocedent gout, is to be explained on the supposition of such a deposition of matter.

The author proceeds to enforce his doctrine, in the next chapter, by a view of the remote causes, which he divides into two classes; "such as promote the generation of morbid matter, and such as prevent its expulsion from the system." Among the former, "indigestion, produced either by the quantity or quality of the aliments, intemperance in the use of spirits," but more especially "of wine, or of other fermented liquors," are principally insisted on. The greater ascendency of wine is, in the author's opinion, one great reason why the intemperance of the wealthy is productive of gout, while that of the poor rarely excites it; and he quotes Dr. Huxham to prove the connection between the use of cyder, and arthritic and rheumatic complaints. "The ceasing of usual labour, cold applied to the lower extremities, and night-watchings," which are enumerated by Dr. Cullen among the occasional causes of gout, come under the second class of causes.

In his fifth chapter Mr. Parkinson treats of *nodes of the joints*, a subject on which he has been in some degree anticipated by



Dr. Haygarth. These diseases have been little noticed by medical authors, and have been generally classed among the consequences of chronic rheumatism; from which, however, as well as from gout, Dr. Haygarth has pointed out a decided distinction. Mr. Parkinson differs in some respects from Dr. Haygarth in his account of these nodes, and considers them as dependant upon the same condition of the fluids which gives rise to gout. He asserts, contrary to Dr. Haygarth's observation, that they most frequently affect "the labouring poor," and that they often occur to men. Among upwards of seven thousand poor patients whom we have seen, we recollect but a small number of cases of nodosity, and those almost exclusively in women. In stating the result of his method of treatment, the author omits to inform us of the number of his patients, and of the comparative success and failure of his remedies. In the "few instances" in which they have been employed they have been "generally successful." The indications upon which he has proceeded, are,

"1st, To diminish the increased action of the vessels, in the part by which the secretion of the morbid matter is performed: 2dly, To promote a free perspiration of the part affected: and, 3dly, To correct the prevailing disposition to acidity in the primæ viæ, and in the system in general. The two first purposes were fulfilled by applying leeches, and a plaster of diachylon and soap to the nodes; and the third by avoiding acids and ascents in diet, and taking *soda* in the quantity of from five to fifteen grains a day.

"From the combined influence of these measures, the utmost success that hope could look for has been obtained. The gradual diminution, and, finally, the complete removal of such tumours as have existed for several months, have been thus procured; whilst those which have existed for some years have been so much reduced, as to allow of considerable motion in joints which had become nearly immoveable." p. 81.

The author recurs, in chapter 6, to the subject of gout, and proposes his indications of cure, and indications during the fit, by which it is obvious he means the indications of *prevention* and *cure* of gout. With a view to the first, the objects of the physician are said to be, "to prevent the formation of the morbid acrimony, to remove and correct that which already exists, and to repair the diminished strength of the system." Attention to diet is therefore of the utmost importance, that the *gastric acid*, from which the *uric* or *lithic*

acid most probably derives its constituent principles, may not be produced. The use of *wine* is to be discontinued: "in proportion to the strictness of the abstinence from the use of wine will, in general, be found the degree of benefit experienced:" malt liquors should be sparingly drunk, and in a mild state; pastry and confectionary articles avoided; and *soda* taken regularly. Occasional bitters and tonics may be used to strengthen the digestive powers. Mr. Parkinson, we may remark, gives the most satisfactory explanation of the fatal effects of the Portland powder that we have seen. He says,

"When, from the powerful stomachic effects of the bitters, not only a greater portion of food is taken into the stomach, but a greater quantity of chyle, and consequently of blood, is produced, a plethoric state may be induced; the quantity of blood may exceed the powers of the already weakened vessels in which it is contained, whence may proceed those congestions on which the production of asthma, apoplexy, dropsy, &c. may depend. A circumstance of pretty general occurrence will strongly tend to produce this effect. The arthritic, suffering under considerable debility, to which diminished appetite and impaired digestion has much contributed, delighted with the restored powers of gratification, and eager to obtain a rapid renovation of his health, indulges his appetite without restraint, and thus totally destroys his health, which he was confidently hoping to establish." p. 98.

If the dietetic plan, and the course of antacid medicine, have been steadily pursued during the interval, the treatment, when the paroxysm occurs, will require little deviation from the method recommended by Sydenham. The author still advises, however, the use of the alkalis, fixed or volatile, the choice of which may be directed by the state of the skin and bowels. As for the treatment of the local affection, the indication is simply

"So to manage the inflammation, that, although the extreme violence of the pain be moderated, the parts shall not be interrupted in the functions they are now called upon to perform; and, at the same time, the escape of any injurious matter from the pores of the part affected shall be promoted as much as possible."

The author's last chapter is dedicated to the confutation of Dr. Kinglake's practice. He justly remarks, that Dr. Kinglake has omitted to examine those circumstances, under which, according to the common opinion and the highest authority in medicine, the sudden suppression of gout was



fraught with danger; and having omitted that, his doctrine must be necessarily crude and imperfect, and his contemptuous animadversions on the opposite opinions altogether unjustifiable. In this we entirely coincide with Mr. Parkinson. But when he affirms that "the sudden stoppage of the diseased action in the inflamed parts by cold *mèdia*, or by any other external application, is not justifiable in any case of gout or acute rheumatism, since although no mischievous effects may be immediately discovered, there is great probability that consequences of the most serious and distressing nature may occur at a distant period;" when this is affirmed, we must waive our concurrence. We have no doubt that, in many instances, the paroxysm of gout has been immediately suppressed without any obvious inconvenience; and we might appeal to Mr. Parkinson's own case for satisfactory evidence of it: and as to any distant, unforeseen, and indefinite event, which may occur in a gouty constitution, we cannot but think it highly unphilosophical and absurd to attribute it to the long previous use of a then salutary remedy. In two or three attacks of gout in the author's own person, the local disease was annihilated in a few hours by immersion in cold water, and he was set at liberty to pursue his professional avocations in good health. We doubt not that Dr. Kinglake will quote his antagonist's case, as one of the best illustrations of the refrigerant practice. Mr. Parkinson relates two or three cases, not however in the most discriminating manner, in which severe affections of the head or viscera ensued upon the suppression of the local gout.

ART. VI.—*A Reply to Mr. Edlin's two Cases of Gout, said to have terminated in Death in Consequence of the external Use of Ice and cold Water. To which is added an Instance of the fatal Effects of encouraged Gout: with Observations, Cautions, &c.* By ROBERT KINGLAKE, M. D. Member of the Royal Medical Society of Edinburgh, of the Physical Society of Gottingen, Author of a Dissertation on a new Theory and Practice of Gout, and Physician at Taunton. 8vo. pp. 61.

IN our last volume we noticed a pamphlet by Mr. Edlin, in which he gave an account of two cases of gout that terminated fatally, in consequence, as it appeared, of the external application of cold water: we have now to announce a reply from Dr. Kinglake, in which he attempts to repel the charges brought against his new practice. With respect to the two cases, it may be necessary to bring to our readers' recollection, that one only of them fell under Mr. Edlin's own inspection, and to this alone can any importance be attached,

This sudden suppression of the disease, then, according to the author's own evidence, is sometimes perfectly salutary, sometimes attended with unpleasant or dangerous consequences: and this we have all along considered as the truth of the matter. The question at issue is, what are the circumstances under which danger is to be apprehended from the speedy removal of the local affection, and what are those which indicate its safety? This question Dr. Kinglake was bound to resolve before he sent forth his *new theory* to the world; for while we remain in uncertainty, without any criteria which may enable us to judge of the result, the practice at large is dangerous. For the sake of those instances in which it appears to be remarkably salutary, we should have been glad if Mr. Parkinson had entered more philosophically into the discussion, and endeavoured to trace the connection of the circumstances of the cases with the remedy employed, since he has witnessed both its good and its bad effects. On the whole his attempt at confutation is feeble; we seem to observe a struggle of prejudice, and a favourite hypothesis, against his personal experience; and we are left precisely in the state of uncertainty in which we commenced the perusal of his work.

What effect the alkaline medicines, pushed to a great length, might produce, we know not; but the system of temperance in diet, and regular exercise, which he recommends, whether it may chiefly counteract the formation of lithic acid or not, is undoubtedly the sole cure for the gouty constitution.

as the other refers to an event which took place many years ago, and is related upon evidence by no means sufficiently direct to establish so important a conclusion. The first case, however, was under Mr. Edlin's immediate care; he had an opportunity of observing its progress from the commencement, and in the latter stages he had the co-operation of Dr. Haworth.

In the work now before us, Dr. Kinglake does not attempt to bring forwards any new fact respecting the case; admitting the general statement, his aim is to