

CLINICAL CASES.

MANIA AND PARALYSIS COMBINED.

DR. N. GHATAK, B. A.

Sj.....Batabyal, aged 35, very thin and emaciated, an inhabitant of Chuadanga, Manbhun, came to me for treatment, when I was at Dhanbad in 1924. He was found at first to be a confirmed lunatic, too serious for any conversation with him, always sullen and at times vehemently irritable, though most of times, even in night, he lived in a fear that he must be some day or other murdered by his neighbours, though really there was nothing that might justify his apprehension. He was all along a good and sober man, but somehow or other contracted Gonorrhœa at the age of 21, for which he subjected himself to a long course of treatment under an eminent Kabiraj of Calcutta, and was apparently cured. After that since his 23rd or 24th year, that is immediately after his father's death, he used to look after his business which would require practically whole day's occupation. In 1919 he felt that his lower limbs were getting weaker and weaker, and a sharp, exeruciating pain used to come and go away, intermittently, staying for half an hour or so, from his hips to knees, sometimes down to the ankles. This pain became more and frequent, and at last one day he found to his astonishment that he could not move his legs,—they were paralysed.

In the September of 1919, he had been to Calcutta for his treatment under the same Kabiraj who so skillfully relieved his Gonorrhœal symptoms, and he had to live at Calcutta for the purpose for more than a year. The details of the treatment were not to be got as the patient was the person who knew the details and he lost his brains, so I could not collect those. The above history I could obtain from his wife and an elderly loving sister who knew all the facts. However, the

treatment proved worse than useless, as though he could now move his lower limbs a little, but he turned an insane by and by along with treatment. The only thing that I could gather was that some oils had to be rubbed over the affected parts during the time.

The present condition was very serious. Brains out of order, limbs, especially the lower, almost immoveable, inveterate constipation, mentally depressed, sullen and vehemently irritable, but especially *the fear of being murdered by the neighbours was constantly in his mind by day and by night*, which was, as the good wife said, *was really a torment to him* and was sucking his life-blood. Then, spasm of the throat muscles, so that food used to be thrown up before it could be swallowed. Frequent vomiting and nausea. Emaciation, fetid breath, no appetite. Nothing more I could obtain.

I prescribed on the Sycotic basis, Medorr., 1M. and waited for 2 months but no effect was found except a bit cheerfulness and improvement regarding appetite, nausea and vomiting. This small improvement was felt just after two weeks and I waited for 8 weeks in expectation of further improvement. In the 9th week I repeated Medorr., 2M,—no improvement. In the meantime I was hunting up for the peculiar mental condition along with the general picture as my patient had at the time, and I thought that Plumbum would be similimum in the case. I gave this medicine in 5C, in graduated doses for a week. It wore off the vehemence of the case, and it appeared that a higher potency was needful. However, after waiting a reasonable time for further improvement, I administered 3 consecutive graduated doses of Plumbum 1M, and my patient gave at once an improvement in his mental sphere. He had already been sobered down by virtue of 5C. and now it was a positive improvement, so that in course of 3 weeks after the 1M doses, there was hardly any abnormal condition so far as the mental side of his disease was concerned. But the paralytic condition of the patient was all there, rather it grew aggravated. I waited and waited for any benefit that

might come but no,—the patient was getting thinner and weaker day by day due to inanition.

Now it was pretty sure that the last medicine must have been the Similimum, otherwise the patient's mind would not have been touched at all. After a few months I had to repeat another dose of IM; and this cured the patient after a few aggravations.

A CASE OF ELEPHANTIASIS OF SCROTUM AND SKIN OF PENIS.

Late DR. MAHENDRA LAL SIRCAR, M. D.

• Patient a hindu, aged 44, came under my treatment for the above complaint, on the 6th Dec., 1897. He was subject to fever during new and full moon for 22 years. The scrotum and the skin of the penis used to swell during the continuance of the fever and subside after its disappearance. For the last 6 months there has been no subsidence of the swelling, and it has now assumed the appearance of elephantiasis. Ten years ago he had syphilis of which he was cured by old school treatment, but without salivation. Secondary symptoms appeared a month after the healing of the primary sore. Burning ulcers broke out on the scrotum, and they were cured by a course of Sarsaparilla. There are no ulcers now but there is considerable itching in the scrotum. The last attack of fever he had was in July, last and it had continued for two months. No fever since September. Palms and soles discolored, and corns have appeared on them. Had gonorrhœa and hæmaturia when only 16 years old. Gave him *Silicea* 12x. He had steadily improved under it. The improvement commenced in his feelings which were very despondent; then the sensation of heaviness in the parts disappeared, and the hypertrophy of the scrotum, I learn, has nearly gone.
