

two months, laying loose in the pelvis, and connected to its placenta by a cord of the ordinary length. It was an extra-uterine pregnancy, the foetus being obviously contained in the Fallopian tube of the left side, which had just burst from the increased size of its contents, and had thus given rise to the fatal hemorrhage. The uterus was slightly enlarged, and upon slitting it open, was found lined with the membrana decidua, which, according to our standard authors, is usually found in such cases.

Washington, July 17th, 1843.

SEMINAL WEAKNESS—CASTRATION.

[Communicated for the Boston Medical and Surgical Journal.]

NOVEMBER 5, 1842, I was called to visit Mr. —, aged 22 years, whose health had been declining for more than six years. He had secluded himself almost entirely from society, and even from his family—had not eaten with them for four years—had not been in the street more than twice for two years, and for the last year had kept himself mostly in bed. I found him pale, trembling and dejected—pulse frequent and feeble—appetite bad—digestion impaired, and rather emaciated. At first he was unwilling to give much account of himself, but after a few visits I obtained the following history of his case. About the age of 13 years he began to masturbate, and, urged by his companions, he practised it some time before he produced an emission. After this he continued the habit more and more frequently, until he would perform the operation every day for several weeks in succession, and very often twice a day. At the age of 16 his health was so much impaired he was obliged to suspend all labor and active exercise, and had not been able, at the time I first saw him, to resume either. After this time he says he did not practise masturbation *much*, but had been constantly troubled with involuntary discharges—that the emissions had become painful and extremely prostrating. I learned from his friends that he had been attacked twice with furious delirium—both attacks were of short duration—had frequently sequestered himself from his family, so that they were alarmed with fears that he would commit suicide.

During the first four years of his sickness he was drugged with all sorts of medicines, for all sorts of diseases, by all sorts of doctors, and all the time grew worse, no one ever having suggested to him the true nature of his disease or the cause of it.

With very little expectation of benefiting him with medicine, I prescribed bals. copaib. and tr. cantharid. combined, carb. of iron, cold bathing to the hips and loins, and cold water injections into the rectum; but finding no impression was made by this method of treatment, and that the nocturnal emissions were so frequent and so exhausting, I did not think it advisable to continue the use of ordinary remedies to cure so desperate a disease. Believing the great constitutional disturbance to have been produced and kept up by the severe and often repeated shocks given to the brain and nervous system by the seminal emissions, and that removing the

testicles would remove the great source of difficulty, I recommended castration, with the confident expectation that it would prove successful. He was so miserable, and life itself had become such a burden to him, that he was not only willing to submit to the operation, but urged me to perform it—which I did on the 29th of November.

There was profuse hemorrhage from the right side of the scrotum during the night after the operation, which greatly reduced him. The healing and recovery from the operation were very slow; and the winter being very cold, there was but little apparent improvement in his general appearance until warm weather was established. Since that time, he has improved rapidly. He has now the appearance of good health—is cheerful and happy—can walk miles with as much ease and elasticity as any one, and, with every prospect of good health and a life of usefulness, he is actively engaged in making arrangements to go into business. For some months after the operation he had a weeping of prostatic fluid; but so soon as his general health improved, this trouble disappeared, and he has nothing of it at this time.

There was about two drachms of serum within the vaginal coat of the left testicle. The tunica albuginea testis was pale and flabby. The vessels of this coat in the right testicle were very much injected, showing considerable inflammation—there was no effusion.

Now as to the propriety of this operation for the removal of such a disease, I admit there may be much doubt. Cauterizing the urethra was not tried, for the want of a proper instrument. This operation, however, is not successful in more than three fourths of the cases, when it is resorted to under the most favorable circumstances, as appears from the cases reported by Mr. Phillips, of the St. Marylebone Infirmary. The parents of this young man were poor—had made many expensive trials to cure him without success, and had determined to make no further effort. From these considerations I was induced to operate—and the happy change produced in the patient, and the great relief afforded to the family, are abundant evidence of the propriety of the operation in this case.

JOSIAH CROSBY.

Meredith Bridge, N. H., July, 1843.

THE FAILING OF SIGHT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The failing of the sight is not an insulated phenomenon. The other senses partake of the same change. The same blur pervades them all, and spectacles are as much needed by the other senses as by the sense of sight. At 45 years of age, or thereabouts, people observe that they cannot read, or do any fine or delicate piece of work, as well as formerly. They may also observe that they cannot learn a piece of music, or sing and play a new tune, as well as formerly. The senses of touch and hearing have both failed in as great a degree as the sense of sight. If it were the sight only that had failed, a person could as well learn to sing, or