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**WEST, W. J. - On a peculiar form of  
infantile convulsions**

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laudanum and ammonia, were again administered, with the most beneficial effect; after which he rested tolerably well. The dressings were this morning removed, and the wound looks healthy; water-dressings and bandage as before were applied. From this period the sickness did not return. He took porter, which was gradually increased to one pint daily; had a nutritious diet; took aperient medicine when required, with  $\frac{z}{ss}$ , decoction of bark, and 20 drops of dilute sulphuric acid, three times a-day; the wound dressed as often as it was needful. He continued to get well gradually; and after ten weeks the wound was quite healed, and his general health much improved. It is now more than nineteen months since the operation; the leg has continued quite well; and he can walk eight miles without much inconvenience, which he frequently does. I have seen him to-day; he still wears a bandage, which, he says, supports the leg. On measuring it round the portion of fibula remaining, above, it is eleven inches; the sound leg, at this point, measures also eleven inches; below, just above the ankle, each leg measures the same, viz., seven inches; the foot turns inwards a little, with a slight inclination upwards.

The dry diseased bone removed, in length measures eight and a half inches, and round its widest circumference four inches and three-quarters. Its weight Troy is four ounces two drachms; a healthy fibula weighs about one ounce six drachms. The length of the surface of attachment to the tibia is one inch and three-quarters; its breadth at its widest part three-quarters of an inch. Above this surface is a cavity large enough to hold a small nutmeg, rough at the bottom, which contained a very small portion (not more than ten grains in weight) of detached carious bone; this cavity communicated with a canal, extending three inches down the centre of the bone, somewhat larger than a goose-quill.

After the wound was healed, he wore, for twelve months, a spring, which was fixed in a strong boot, having a joint opposite the outer ankle. This spring passed up close to the leg; and was fastened above, just below the knee, with a strap. This supported the leg, and, with the boot, obviated the turning in of the foot, and enabled him to work and walk much more comfortably. He has left off this for some months.

This case is interesting, from the increased size of the bone, the great density of its structure, and firm attachment to the tibia; the necessity of an operation, by affording more permanent relief than had hitherto been done, as well as the comparatively trifling inconvenience experienced in walking and using his leg, after the loss of so large a portion of the fibula; also the distressing sickness and extreme nervous exhaustion following the operation, so effectually re-

lieved, three successive nights, by the stimulating and opiate glysters, in conjunction with the creosote draughts.

Dec. 5, 1840.

#### ON A PECULIAR FORM OF INFANTILE CONVULSIONS.

To the Editor of THE LANCET.

SIR:—I beg, through your valuable and extensively circulating Journal, to call the attention of the medical profession to a very rare and singular species of convulsion peculiar to young children.

As the only case I have witnessed is in my own child, I shall be very grateful to any member of the profession who can give me any information on the subject, either privately or through your excellent Publication.

The child is now near a year old; was a remarkably fine, healthy child when born, and continued to thrive till he was four months old. It was at this time that I first observed slight *bobbing*s of the head forward, which I then regarded as a trick, but were, in fact, the first indications of disease; for these *bobbing*s increased in frequency, and at length became so frequent and powerful, as to cause a complete heaving of the head forward towards his knees, and then immediately relaxing into the upright position, something similar to the attacks of *emprothotonos*: these bowings and relaxings would be repeated alternately at intervals of a few seconds, and repeated from ten to twenty or more times at each attack, which attack would not continue more than two or three minutes; he sometimes has two, three, or more attacks in the day; they come on whether sitting or lying; just before they come on he is all alive and in motion, making a strange noise, and then all of a sudden down goes his head and upwards his knees; he then appears frightened and screams out: at one time he lost flesh, looked pale and exhausted, but latterly he has regained his good looks, and, independent of this affection, is a fine grown child, but he neither possesses the intellectual vivacity or the power of moving his limbs, of a child of his age; he never cries at the time of the attacks, or smiles or takes any notice, but looks placid and pitiful, yet his hearing and vision are good; he has no power of holding himself upright or using his limbs, and his head falls without support.

Although I have had an extensive practice among women and children, and a large circle of medical friends, I have never heard or witnessed a similar complaint before. The view I took of it was that, most probably, it depended on some irritation of the nervous system from teething; and, as the child was strong and vigorous, I commenced an active

treatment of leeches and cold applications to the head, repeated calomel purgatives, and the usual antiphlogistic treatment; the gums were lanced, and the child frequently put into warm baths. Notwithstanding a steady perseverance in this plan for three or four weeks, he got worse, the attacks being more numerous, to the amount of fifty or sixty in the course of a day. I then had recourse to sedatives, syrup of poppies, conium, and opium, without any relief: at seven months old he cut four teeth nearly altogether without any abatement of the symptoms, and, up to this period, he was supported solely at the breast; but now, at the eighth month, I had him weaned, as he had lost flesh and appeared worse; I then only gave him alteratives, and occasionally castor-oil. Finding no benefit from all that had been done, I took the child to London, and had a consultation with Sir Charles Clarke and Dr. Locock, both of whom recognised the complaint; the former, in all his extensive practice, had only seen four cases, and, from the peculiar bowing of the head, called it the "salaam convulsion;" the latter gentleman had only seen two cases; one was the child of a widow lady, it came on while she was in Italy, and, in her anxiety, she consulted the most eminent professional gentlemen of Naples, Rome, Florence, Genoa, and Paris, one of whom alone seemed to recognise the complaint. In another case, mercury, corrosive sublimate, opium, zinc, and the preparations of iron, were tried without the slightest advantage; and, about six months from the commencement of the symptoms, a new one was added; there began a loss of motion in the whole of the right side, and the child could scarcely use either arm, hand, or leg. Sir Astley Cooper saw the child in this state; he had never seen or heard of such a case, and gave it as his opinion, that "it either arose from disease of the brain and the child will not recover, or it proceeds merely from teething, and, when the child cuts all its teeth, may probably get well;" some time after, this child was suddenly seized with acute fever; the head became hot, and there were two remaining teeth pressing on the gums; the child was treated accordingly; leeches to the head, purged, and lowered; the gums were freely lanced; in a few days the teeth came through, and the child recovered, and from that time the convulsive movements never returned. Sir C. Clarke knows the result of only two of his cases: one perfectly recovered; the other became paralytic and idiotic; lived several years in that state, and died at the age of 17 years. I have heard of two other cases, which lived one to the age of 17, the other 19 years, idiotic, and then died. I wrote to Drs. Evanson and Maunsell, of Dublin; the former gentleman being in Italy, the latter very kindly replied, he had seen convulsive motions in one finger, arm, or leg, but had never witnessed it to the extent of my poor

child. As there has been no opportunity of a post-mortem examination, the pathology of this singular disease is totally unknown.

Although this may be a very rare and singular affection, and only noticed by two of our most eminent physicians, I am, from all I have learnt, convinced that it is a disease (*sui generis*) which, from its infrequency, has escaped the attention of the profession. I therefore hope you will give it the fullest publicity, as this paper might rather be extended than curtailed. I am, Sir, one of your subscribers from the commencement, your faithful and obedient servant,

W. J. WEST.

Tunbridge, Jan. 26, 1841.

P.S.—In my own child's case, the bowing convulsions continued every day, without intermission, for seven months; he had then an interval of three days free; but, on the fourth day, the convulsions returned, with this difference, instead of bowing, he stretched out his arms, looked wild, seem to lose all animation, and appeared quite exhausted.

## EPISTAXIS.

### PLUGGING THE NARES WITH PUTTY.

To the Editor of THE LANCET.

SIR:—William Wells, a painter, 8, Little Exeter-street, Lisson-grove, aged 44, was seized about three, A.M., on Friday, the 8th, with epistaxis. The blood flowed four or five hours. Next day, about ten, A.M., it burst out again, and flowed freely for about twenty minutes. During Sunday it recurred and ceased several times. On Monday it burst out anew; and then Mr. Cunningham, surgeon, Salisbury-street, was called in, who plugged the nostrils with lint; and that not sufficing, bled him to about eight or ten ounces. On Tuesday, two, P.M., bursting out afresh, a surgeon from the Marylebone Infirmary attended him, and plugged the nostrils through the mouth. The bleeding was not arrested; the pressure and material used, no doubt, being insufficient. At eight, P.M., on Tuesday, I saw him. The blood had been flowing since two; he was faint, his lips pallid; he said he could scarcely see. An order had arrived to take him to the infirmary. He prayed not to be removed. He begged the plugs to be withdrawn; I did so; and the nostrils being freed from blood, as much as possible, the left one, from which it chiefly flowed, was plugged with glazier's putty, inclosed in linen, by forcing, twisting, and pressing it up. The same was done to the right nostril. The mouth and throat were then several times gargled with water. No trace of blood.

At eight, A.M., next morning, I was sent for. The putty had shrunk; the bleeding