

## Medical Matters.

### FOREIGN BODIES LEFT IN ABDOMEN.



According to the *British Medical Journal*, there are about 200 reported cases in which forceps and other objects have been left by operators in the abdominal cavity. The articles left behind by operators include:—Forceps, scissors, sponges and gauze pads, a signet ring, a diamond ring. To minimise the danger of anything being forgotten in the wound, Sir Spencer Wells used to tie a long piece of wire or silk to his instruments, but the inconvenience of such an arrangement made itself evident.

The Polish surgeon Von Neugebauer, who has collected all the known cases of instruments being left in wounds, mentions twenty-seven cases where the foreign body left in the abdominal cavity was a pressure forceps. The *British Medical Journal* itself adds the record of a case where a pair of scissors was forgotten, and only detected by the pain they caused the patient when dancing a few months ago. The scissors were successfully removed. Of the twenty-seven forceps cases, however, ten ended fatally, but in one instance amongst the ten a quack administered strychnine, contrary to order, after the operation, and the fatal result might have been due to the drug.

We admit, adds the journal, that it is to be feared that many cases may remain unrecorded. It would be unfair in the extreme to throw all the blame on the operator, just as it would be most unjust for the latter to endeavour to place all responsibility on the assistants and nurses.

### A NEW TREATMENT FOR WRY-NECK.

Dr. Leonard K. Hirshberg declares, in the *Maryland Medical Journal*, that the pathology of torticollis rests entirely upon negation and probability. The probability is in most cases that the kinesthetic centres for the sterno-cleido-mastoid, splenius, trapezius, scaleni, and deep cervical muscles are the points of origin for the various spasms. Another way to express our ignorance is to say that torticollis is due to irritation of the nuclei of the neurons. There are many combinations of the various muscles which are possible in this affection. Individuals with neuropathic relatives or ancestry are more subject to torticollis than the average

person. Congenital and rheumatic wry-neck are not included in this paper. The treatment of the first patient reported is given as follows:—The faradic current was used for five minutes daily over a period of four months. The positive electrode was placed over the wrist and a roller (negative) electrode was applied over the healthy sterno-cleido-mastoid and upper fasciculus of the trapezius on the unaffected side. Liquor potassii arsenitis was given in doses of two drops three times a day for four months. Almost from the beginning there was marked improvement. At the end of the treatment the patient's head was perfectly erect, and a scarcely perceptible stiffness of the muscles remained. The cosmetic result was excellent, and, although the arsenic had been stopped for some time, there had been no return of the clonic spasms. In another case treatment consisted of a rigid diet and the application of the faradic current for five minutes daily to the muscles of the well side. Improvement was steady. In the third case the treatment was the same as in the first, and in three weeks the patient discharged himself as cured.

### THE VALUE OF GOATS' MILK.

The value of goats' milk in infant feeding is scarcely sufficiently recognised. It yields a curd which is softer and easier of digestion than that of cows' milk, and it secures freedom from tubercular infection, as the goat is refractory to tuberculosis.

### SPOTTED FEVER (TICK FEVER).

Dr. John F. Anderson, of the United States Public Health Department, describes a new disease, entitled the Spotted or Tick Fever of the Rocky Mountains. In the States of Montana, Idaho, Nevada, Wyoming and Oregon the disease has been found at an elevation of about 3,000 to 4,000 ft. above sea-level. The disease prevails amongst persons whose occupation takes them into the brush, where they are exposed to tick bites (*Dermacentor reticulatus*). The incubation of the fever is about seven days; the eruption appears on the third day, and is general over the body and of a petechial character. The case mortality is very high—about 70 per cent. The blood parasite which has been found in spotted fever resembles the malarial parasite in many aspects, and so close is the behaviour and resemblance of the tick fever and malarial parasites that the remedy now relied upon for the treatment of spotted fever is quinine given in large doses.

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