

Medical Matters.

CARE OF THE THROAT IN PULMONARY PHTHISIS.



Dr. Geo. A. Robertson, in the *Charlotte Medical Journal*, points out some facts in the care and treatment of throat complications which aggravate pulmonary tuberculosis and thus, if possible, eliminate the distressing cases of laryngeal ulceration. The neglected cases coming to a specialist with laryngeal involvement, where it is easy to see the trouble might have been avoided, impress one more and more of the value of careful and regular examination of the throat in all cases of well-developed phthisis. And it is well in cases where the conditions make us fear active diseases will develop that a thorough acquaintance of the nose and throat conditions be gained.

Children of tubercular parents, also those that are weak and sickly, are all favourable subjects for beginning tubercular disease. Should the nose be blocked by spurs, septal ridges, or great boggy turbinates, the lack of air space makes for two conditions: either very shallow breathers, who do not find vigorous exercise possible, or mouth breathers, both of which conditions are injurious to healthy membranes. The nostrils should be opened up and as much space as possible made in the nasal chambers. Patients with adenoids or hypertrophied tonsils have ever a vulnerable point where foreign substances lodge and decay, where germs thrive and multiply. The absorption from such places as these is constantly going on and treated for indigestion, &c.

In the fully-developed cases of phthisis the nasal and pharyngeal spaces should be thoroughly overhauled. Recommend plenty of fresh air and out-of-door life in mountains, if possible. The constant inhalation of irritating particles which are ever present in poorly-ventilated houses and shops makes the lining membranes of the throat lax and congested with loss of tone, so that when the day's work is done and the patient goes out in the fresh air, instead of the cold causing a rapid contraction and stimulation to the circulation there is greater congestion due to loss of tone and still more favourable lodging places for infectious particles. Every practitioner is familiar with the pain on swallowing, the choking, the inability to raise sputum, the terrible thirst and

slowly starving patient, indicating a tubercular ulceration of the larynx.

On examining with the laryngeal mirror the tongue is full, throat relaxed, laryngeal tissues swollen and red, often boggy. There may be a fold of mucous membrane between the cords. Voice is rough and husky. At this time patient is constantly clearing the throat, no mucus to clear away, but a feeling as if a foreign body was present in the throat. This goes on until the throat looks like raw beef. Two-thirds of the coughing in tuberculosis is unnecessary, even worse than useless, for it is so irritating. When there is phlegm the cough is needful, but much of the time nothing comes up when the patient coughs, and all he does is to scrape and tear the membrane. Explosive cough is distinctly bad. It soon becomes a habit. One should not use heroic treatment in these cases in the way of strong local applications, but depend on cleansing sprays and simple alkaline washes. Forbid all use of the voice when there is great fatigue.

THE ORIGIN OF LIFE.

Some extremely interesting experiments have recently been made by Mr. John Butler Burke in Cavendish Laboratory, Cambridge University, the result of which is to cause him to claim the possibility of spontaneous generation. Mr. Burke made the following statement to a contemporary:—

"Observing that radium had several qualities in common with cyanogen—it is highly excitable and contains a vast store of energy—I made experiments with radium.

"I tried radium with sterilised bouillon, the ordinary culture medium, placing them together in a test-tube—the radium being in actual contact with the bouillon—and after a day or two I got cultures."

Sub-cultures were then made which grow slightly, but not as bacterial cultures should. Also they are soluble in water while bacteria are not.

When the atoms reach a certain size they subdivide, which seems to indicate that they are not crystals. Mr. Burke suggests possibly they are a primitive form of life. Nearly everything is radio-active. The earth itself is, and in some suitable medium life may have originated on the earth in that way.

"What has been done has suggested vitality. The important question is multiplication. If the particles reproduced behave in the same way, it would be positively conclusive."

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