

with the salicylate of soda every four hours, and to repeat the sleeping draught if necessary.

*February 9th.*—I managed to turn patient on his left side last night, and he had a very good night. He slept seven and a half hours in all, and out of them four hours consecutively the first time since his illness. Temp. 99°, pulse 72, resp. 28.

In changing his compresses I was astonished to see that there was hardly any swelling in the joints; at that moment we were discussing Gounod's music, and he grew quite animated, sat up in bed leaning on one elbow, and brushed back his hair with the other hand.

"You seem much better this morning," I remarked. He suddenly grew conscious of his position, and fell back, saying, "Yes, it is like magic. Only yesterday I couldn't move even the joint of my little finger, and to-day I have regained the use of my whole body."

In giving the report to the doctor I mentioned the above facts. "What is your impression?" he smilingly said. "It is his temperament; the recollection of his two past illnesses and the present circumstances, rather than his physical condition—which he has exaggerated to himself—that I go by," I said; "otherwise it would seem unaccountable that such an apparently acute attack should pass away so suddenly." "Keep his mother and sisters out of the room; go on with the salicylate, *feed him up*, cheer and encourage him, and make him take at least *ʒiv.* of whisky daily," were the doctor's orders.

The following day the compresses were stopped and the limbs were wrapped up in cotton wool, the salicylate was left off and a tonic was given, and finally the lower blanket was removed and replaced by a sheet, and patient was put on chicken and fish diet. He grew quite cheerful, and the whole household assumed a happier tone, so that by the end of the week I was able to leave him sitting up in bed enjoying a fish lunch, while I retired to rest. In my report, however, I stated that patient had complained again of rheumatic pains between the shoulders, and also underlined the temperature, which was the lowest we had had, being 96.6°. The doctor, however, was quite satisfied with the state of things, ordered chicken for his dinner, said he might see his lawyer that afternoon and sit up for half an hour after dinner and have his bed made. At 7.30 I came down to see that the doctor's orders were carried out. "You will find your patient obstreperous to-night," his wife remarked. "Nurse," he said entreatingly, putting out his hands, "I feel so ill, and tired, and sick, don't make me get up and eat that chicken." He was flushed and agitated, and his hands were

burning hot. His pulse was 128, temperature 104.6°, respiration 38, and I soon discovered that he had had a rigor at about 4 o'clock. The doctor arrived, ordered the salicylate of soda again, a sedative, *ʒiii.* of old brandy to be taken during the night, and an enema in the morning. Patient had a very restless night, talked disconnectedly, coughed frequently, a short dry cough, complained again of pain between the shoulders, and looked quite faint and dusky several times, but seemed to recover after the brandy, which he preferred to the whisky. The next morning the doctor examined his chest, and pronounced his heart to be weak, though sound, but said that his lungs were affected, and ordered linseed poultices. These he countermanded in the afternoon, replaced by two blisters 6 inches by 4 inches in size put at the base of the lungs. On removing them I dressed them with boracic ointment spread on lint, and kept in place by a large poultice jacket with shoulder straps, made of flannel and thickly padded with absorbent wool. It kept his chest warm and acted as a compress when he sweated later on. The charting was now that of a pneumonia, the temperature rising to 105.2°, and falling to 100.4°. A second Nurse came, and a consultation of three doctors took place. The conclusion the doctors arrived at was that the illness was not acute rheumatism, "but" *rheumatic influenza*, followed by double pneumonia. This, of course, accounted for the muscular pains which the patient had felt all over his body, for the swelling in the joints being so slight, for the feelings of nausea, and lastly for the pain between his shoulders which were really in his lungs, and which it was supposed were muscular and rheumatic. Things began to look very grave; the sputa became covered with blood; he was sweating profusely and incessantly, and the temperature kept high. His father had died of phthisis, his brother and sister (both adults) only a few weeks back of double pneumonia, and now, on a second consultation, a tubercular ring in the trachea was distinguished, and patient lost his voice. He was fairly quiet and conscious in the day, but quite delirious and violent in the night; he had an idea he was being poisoned, and spat out almost everything the Night Nurse gave him, and only swallowed a little when he grew very thirsty. Finally, on the ninth day of the pneumonia, and twentieth of his illness, the temperature came down, he seemed quieter, more sensible and conscious, his colour improved, and our hopes rose. But towards evening his temperature rose again to 105.8°, and he grew so violent that a third Nurse and Male Attendant were sent for. Meningitis set in, the doctor ordered an ice bag for his head, but it was im-

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