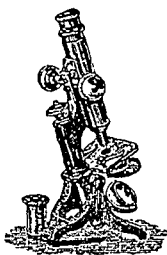


Medical Matters.



GANGRENE FROM ANÆMIA.

A curious case which is reported in a Berlin medical paper draws attention to one of the consequences of anæmia. A young woman, aged twenty, who had for some time suffered from chlorosis, developed gangrene of the right hand, the fingers turning bluish and five of them becoming necrosed up to the middle of the second phalanges. The gangrenous parts were removed by amputation, and the wounds healed slowly. At the operation it was remarked that the arteries did not spurt, but there was considerable general oozing of blood. The curious fact about the case is that the writer goes at considerable length into a number of probable and improbable theories to account for the causation of this condition. Probably the cause was very simple, for it is a well-known clinical fact that patients, who are suffering from anæmia are liable to the formation of emboli, and it is more than probable that this was the explanation of the affection of the fingers in this particular case: the blood supply being checked by a coagulum in the palmar artery, and the condition of the patient preventing the formation of rapid anastomotic blood supply. The case, we believe, is chiefly interesting as an example of the practical dangers to which persons whose blood condition is gravely disordered, are liable.

RESORBIN.

Most Nurses have had personal experience of the difficulty with which in some patients ointments are absorbed by the skin, when rubbed therein. This is due to the fact that the oily constituent of the ointment is, as a rule, not sufficiently finely divided. But as the method of treatment of some intractable skin diseases by inunction is of great advantage, the discovery of a new excipient which has recently been made, will be of much practical value. Resorbin is composed of the purest almond oil emulsified, with distilled water, and a small quantity of yellow wax, gelatine, soap and lanolin. It is claimed for it that, being in a state of excessive molecular sub-division, it is especially adapted for penetration through the skin, and that with its use only very slight friction is necessary in order to obtain the absorption of any drug with which it is mixed. If these advantages are proved by experience to be practically attainable by the use of this preparation, it will, doubtless, be of great value as a means of introducing mercury into the system

by the endermic method, will diminish labour on the part of the Nurse, and discomfort to the patient.

THE TREATMENT OF CANCER.

One more medicinal treatment has now been proposed for patients afflicted with malignant growths, and once more, doubtless, the profession will make a full and earnest trial of the remedy. It is stated that the use of papain combined with an iodide of thallin—a derivative of coal-tar—has acted with marked effect in reducing growths which were, to all outward seeming, cancerous in their nature. Furthermore, experience seems to have led to the belief that the papain has not any appreciable share in the production of the improvement manifested: so that whatever results are obtained, are considered to be due to the thallin salt. The case is not proved yet, although a distinguished observer claims that he has obtained most marked results with the drug. But sufficient has been shown to warrant an extensive trial of the treatment being made. It is claimed, as an explanation for its usefulness, that it acts by increasing the excretion of uric acid, and that cancer is a kind of first cousin to gout and osteo-arthritis in that it is accompanied by frequent paroxysmal outbursts of uric acid. With all due deference, we venture to question whether facts support this hypothesis, and whether, indeed, uric acid is not excreted in larger quantities occasionally without any causal relation to the malignant mischief. Still, it would be most unscientific to dogmatize upon this matter, considering the imperfect data furnished by our present knowledge on the subject; and it must therefore be most earnestly hoped that clinical experience will prove the treatment to be successful. If that be so, we can wait with considerable patience for a greater knowledge of the chemical processes of disease to confirm the present theory or to supply a better one.

DEATH UNDER LAUGHING GAS.

It is a well-known fact that, especially in dentistry, this anæsthetic is used to an immense extent, and that fatalities from its use are almost unknown. A case, however, has recently occurred which proves that it is not entirely free from risk. A gentleman, aged 25, who was having a tooth removed under the influence of the gas, forthwith died. The post-mortem revealed that the windpipe was full of mucus, which would make it seem as though the anæsthetic had exerted a more irritating influence than is customary. There can be no doubt that impurities sometimes exist in nitrous oxide gas as in all other similar preparations, and, to our mind, the chief lesson to be learned from this case is that, although the risk of the anæsthetic is small to an extraordinary degree, the greatest care should always be taken to ensure its perfect purity.

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