Medical Matters.

PERFORATION IN TYPHOID FEVER.



IN a recent lecture published in this journal, it was pointed out that a modern treatment for perforating ulcers of the intestine, occurring during the progress of Typhoid Fever, was the performance of abdominal section, in order to close the opening in the in-

testine, and perhaps save the patient from inevitable death. A case has recently been reported in an American contemporary in which this course was followed. A man, aged 24, on the tenth day of typhoid fever, was suddenly seized with intense abdominal pains, and shortly afterwards presented wellmarked symptoms of perforation. On opening the abdomen, a large quantity of cloudy, serous fluid gushed out; the perforation was found, the opening was turned in and sutured. The peritoneal cavity was washed out with hot water, and the cavity was drained; but, unfortunately, the patient died about four hours afterwards. Out of seventeen reported cases of this treatment only three have so far proved successful; but the same want of success was common, only thirty years ago, in nearly every case of abdominal operation, and the probability therefore is strong that, with improvements in the methods of operation, a considerable saving of life in these cases will be ultimately obtained by immediate surgical measures.

ANTITOXIN IN DIPHTHERIA.

THE Metropolitan Asylums Board, recently issued its long expected report on the use of the antitoxin in diphtheria cases in the Metropolitan Infectious Hospitals during the year 1895. It represents the results obtained in six Hospitals under the Board ; it gives full, concise and well arranged information, and must be regarded as a most valuable contribution to our present knowledge of the treatment in question. Only the more severe cases of diphtheria were treated by the remedy. The best method of comparison so far as results are concerned will probably be obtained by taking the whole of the figures for 1895, and contrasting these with the results obtained in the first ten months of 1894-that is to sav previous to the introduction of the antitoxin treatment. This shows that in 1894, there

were 3,042 cases, of whom 902 died, a mortality per cent. of 29.6, a figure which nearly approaches to that recognised as the ordinary mortality of the disease. In 1895 there were 3,529 cases, of which only 796 died-a mortality of only 22'5 per cent. In other matters, except the special treatment, the conditions were precisely identical in the two years, except that the proportion of juveniles-that is to say, of unfavourable cases—was somewhat larger in 1895 than in 1894. The broad conclusion which is reached therefore is that in 1895 antitoxin saved no less than 250 lives in London alone. The report brings out very clearly the importance of using the remedy early in the complaint, the best results-that is to say, the greatest reduction of mortality-being secured in those patients upon whom the treatment was employed on the first or second day of the illness. Although the matter still remains open to question, and although a much larger number of cases must be recorded before the exact dosage and method of administration is ascertained, there can be no question that the remedy is now proved to be of very considerable value; and with increased knowledge in its administration and in the cases which are most suitable for its employment, it is only reasonable to believe that its usefulness will be still further proved and employed.

INFILTRATION ANÆSTHESIA.

THE method of obtaining local insensibility of the skin by injecting fluid underneath it, and thus raising a wheal which is found to be perfectly insensitive, has been widely tried. A German contemporary has recently published a description of the employment of solutions containing cocaine, morphine, and chloride of sodium for this purpose. It has been found that the weakest of these solutions is sufficient to cause complete insensibility for a considerable period. For relieving the pain of deep incisions, the method certainly gives greater insensitiveness than is afforded by the use of the ether spray, which really only paralyses the surface of the skin, and the nerves immediately beneath it. But as a practical fact it has been found that the anæsthesia depends more upon the fact of the distension of the tissues by the injected fluid than upon the exact drugs contained in the fluid. And it seems probable that as much insensibility is afforded by an injection of distilled water containing a few grains of common salt as by more potent drugs.



