

Medical Matters.

DIPHTHERIA.



IN an American Journal, the chief features of this disease have recently been summarised in a very clear and definite form as follows: (1) The majority of cases are mild and only affect the fauces. (2) The exudate lasts from one to two weeks, but to this there are exceptions. (3) Removal of membrane is useless, as by denuding the surface, septic infection is promoted, and, besides the membrane quickly re-appears and remains longer than if it had not been meddled with. (4) The involvement of the larynx is always sudden, and comes as a new attack, and not by extension of the diphtheritic process. (5) The larynx becomes involved in about four per cent. of cases. (6) Every case complicated with uræmia had post-diphtheritic paralysis. (7) Laryngeal involvement is most to be dreaded between the ages of three and five. (8) Intubation and tracheotomy will become less and less necessary as the value of antitoxins is recognised. In discussing treatment, Jerowitz says:—(1) The first thing noticed after using antitoxin is a reaction, an immediate effect, showing that antitoxin is a powerful agent. (2) In every case in which I administered antitoxin in the proper dose, the membrane disappeared inside of three days. Without its use, while I have seen patients get well in the same length of time, yet the majority of cases lasted from ten to fourteen days. (3) In all cases in which I employed antitoxin in the beginning, the larynx did not become involved, and uræmia did not occur, while in cases treated without antitoxin the larynx became involved frequently, and uræmia also followed. (4) In cases in which the membrane involved the larynx, trachea, and even the bronchial tubes, recovery followed when treated with antitoxin, while the same class of cases before the use of antitoxin always resulted fatally. (5) Neglected cases, complicated with septicaemia and laryngeal involvement, do not recover with any treatment. (6) In severe cases of dyspnoea, with occasional cyanosis, the use of antitoxin and emetics has obviated the necessity for tracheotomy. (7) Measles as a complication is no bar to the use of antitoxin. (8) In laryngeal cases, complicated with uræmia or

nephritis, antitoxin was followed by favourable results, thus proving that uræmia and nephritis are not necessarily contra-indications to the use of that agent. (9) As paralysis was seen to follow only the cases of long duration, those in which antitoxin were administered early were not followed by paralysis. Of those in which it was given on the second or third day, it occurred in about eight per cent. From this it follows that antitoxin does not prevent paralysis, except indirectly by cutting short the disease. (10) Place of injection, behind the scapula. No abscess or other bad result followed.

OCCUPATION DISEASES OF THE THROAT.

IN the *Medical Record* for December 16th, 1899, is a paper by Oppenheimer, of New York, on "The Effect of Certain Occupations on the Pharynx." The author commences by referring to the granular pharyngitis and congested larynx of public speakers. The occupations cited are those of laundry "bleachers," those who, in their work, are subjected to changes in temperature, deleterious chemical substances, etc., and the conclusions are summed up as follows:—(1) The pharyngeal mucosa of the mill hand under twenty years of age is more susceptible to unfavourable influences than is that of the individual over this age. (2) The inhalation of dust, fibres, and chemical agents are the factors of most importance. (3) The majority of industrial workers are affected with pharyngeal disorders, dependent to a certain extent upon their occupation. (4) In those already affected with pharyngitis before assuming these occupations, the morbid changes are augmented by the work. (5) The primary pharyngeal changes are those of acute congestion and inflammation. Chronic changes are the ultimate result. (6) The pharyngitis produced in part or wholly by the occupation does not differ in any respect from the ordinary forms. (7) Provided the nasal chambers be in approximately normal condition, pharyngeal affections are much less liable to occur than otherwise. (8) Hygienic measures applied to the environment of the worker are of vast benefit as regards the improvement of his general condition, and, therefore, of the upper respiratory tract.

The whole subject is an eminently practical one; and in other diseases, than those of the throat, the nature of the occupation often supplies a clue both to cause and cure.

[previous page](#)

[next page](#)