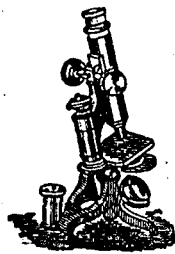


Medical Matters.

CYCLIC VOMITING IN CHILDREN.



In the *Journal of the American Medical Association* Dr. T. C. Ely discusses the mechanism of vomiting and its causes. In cyclic vomiting the vomiting is excessive, severe, protracted, and nothing can be retained by the stomach. Thirst is likewise excessive and distressing. There is no connection in an attack with diet or indigestion. There is generally a fever of indefinite type. Abdominal symptoms are quite immaterial and varied. The abdomen is generally about normal in appearance. There may or may not be constipation. The urine seems the most distinctive feature, being loaded with amorphous urates and uric-acid crystals entirely out of proportion to the fever and other phenomena. Closer study of the urine in all cases may reveal the true cause, possibly blood examinations assisting. The detailed clinical histories of three cases are given. The author would emphasise the following points: (1) The importance of being watchful, on one's guard for the vomiting of this gastric neurosis, distinguishing it particularly from bilious vomiting and the vomiting of kidney disease and reflex vomiting, as of brain disease. (2) In children of gouty and neurotic history the three cases reported point to a toxin allied to the uric-acid series as the possible blood irritant causing the vomiting. (3) The importance, in severe cases, of hypodermic injection of morphine and atropine in conjunction with elimination by high saline enema; by lavage; and, in extreme cases, hypodermoclysis and even intravenous injections of saline solutions.

THE TONGUE IN DISEASE.

Commenting on "The Tongue in Disease," in the *Lancet*, Dr. W. Dickinson says:—Persistent and considerable dryness of the tongue implies, as a rule, want of saliva. The lingual epithelium is nourished by the blood, but there is reason to believe that the presence of saliva is necessary to its proper growth. Perhaps the constitutional influence next in importance to the secretion of saliva is pyrexia; physiologists say that cell-growth increases with the temperature up to about 104°, and that it diminishes as it passes this point. The overgrowth of epithelium thus produced is the chief, though not

the only, agent in coating the tongue in recent and acute disease. Every degree of abnormal heat up to a certain point is indicated, at least in recent and acute disease, by abnormal proliferation and fur. Another influence is a local and even mechanical one—want of friction, scour and wash—which goes with failure to eat and deficiency of saliva. Other influences are inflammatory or congestive states of the tongue itself, such as produce the strawberry tongue of scarlet fever. In many phases of disease the tongue is more significant than anything else which the economy presents. It gives a shrewd hint as to the nature of the disease, displays in a comprehensive sum total its effects upon the system, and the tendency to death may often be discerned.

The Dotted or Stippled Tongue.

These terms are applied to the first stage of increase or investment, one but little removed from the state of health, or it may occur as an idiosyncrasy without any departure. It does not bear witness to any constitutional disturbance, but rather to its absence, though it may concur with any local disease which has not as yet gravely involved the system; it is necessarily of more serious import when dry than when moist.

The Coated or Loaded Tongue.

In the next stage of acquirement, the intervals between the papillæ are filled up and a continuous coat is formed; it is seen when pyrexia is associated with want of appetite. The pyrexia stimulates the growth of epithelium, the want of appetite reduces the wear. The coated tongue succeeds the dotted tongue, and is more or less mixed with it, the central part being continuously covered, the sides being only spotted; the intimate changes are chiefly epithelial excess. Whatever raises the temperature, impairs the appetite, or restricts the salivary wash, may give rise to this tongue, to lead, it may be, to more ominous phases. A dry-coated tongue is of graver significance than a moist one, and the average temperature is somewhat higher. Two varieties of the coated tongue deserve special mention—"the strawberry tongue," and what the writer calls the "plastered tongue." The ideal "strawberry tongue" occurs in scarlet fever, in which the tongue appears to participate in the eruption; but lesser degrees of it are to be found in other febrile conditions. The "plastered tongue," which looks as if mortar had been carefully spread upon it, abruptly ceasing at the edges, is the tongue of acute disease. The coat

[previous page](#)

[next page](#)