

usually introduced in meat that has been enclosed, either in a pie, or in a leaking tin, and the unfortunate point about these occurrences is that meat contaminated with this organism has not as a rule any distinctive odour, so that its presence cannot be detected before the food is consumed. This form of poisoning is often fatal, because the products of the growth of the bacillus (which are known as ptomaines) are excessively irritating to the intestine, and also give rise to a great degree of prostration when they are absorbed into the blood. Troubles of this sort are, in practice, usually connected with pork pies, but this is simply because, for some unexplained reason, pork is more frequently made into pies than other meats. The source of the trouble can be detected by isolating the bacillus from the pies, and additional proof can often be obtained by adding some of the blood serum of the patient affected, to a few drops of a broth culture of the germ, when it is found that the organisms which have previously been seen under the microscope to be moving about freely, gradually stop and collect into clumps, the serum of a healthy person having no such effect.

In infantile diarrhoea it is probable that the organism is conveyed to the milk (for it does not occur in breast-fed babies) by flies, which have previously crawled over infected meat, settling either in the milk itself, or on the vessels containing it, and the curious feature of the growth of the organism in milk is that it apparently does not form toxins to any great extent in raw milk, but only in that which has been boiled, the theory being that the souring which occurs in the former prevents, or rather hinders, the growth of the bacillus. This point, however, has not yet been finally settled. When infantile or, as it is alternatively called, epidemic diarrhoea, does occur, it is apt to be a very fatal disease. The symptoms are, in addition to uncontrollable diarrhoea, prostration, at first a high, and then a subnormal temperature, and rapid emaciation.

The forms of diarrhoea that occur in neurotic people, and which are not due to anything wrong with the diet, need only be mentioned briefly. They are characterised by suddenness of onset and may occur at any time of day, and are connected with some form or another of emotion, generally either fear, or the form of self-consciousness which is often known as shyness.

Coming now to the treatment of the various forms of diarrhoea, it will be obvious that the first point is to eliminate the offending articles of diet from the patient's dietary; thus, when the disease is due to improper feeding of infants, a change must be made, and it is often

best to stop milk altogether for a time and to substitute albumen water, or whey, or something similar until the diarrhoea has ceased; in adults, we similarly give only liquid food, such as milk, or milk and arrowroot, for the same period.

The next point is to remember that diarrhoea is an effort of nature to expel an offending article of diet, and is often, therefore, salutary, the test being, in this respect, the effect which the illness is having on the patient; if there is much collapse, we must check the process, but otherwise it is often best to allow the diarrhoea to continue, making the patient comfortable meantime until the irritant has been expelled. When the illness is not very acute, therefore, we assist nature by administering a purgative, preferably either castor oil or calomel; grey powder is very useful in this respect for babies. This often clears the intestine once and for all, so that we can follow up the purgative with a sedative, which will soothe the irritated mucous membrane of the bowel.

Undoubtedly the best sedative is opium or one of its derivatives, and if given in full doses it will check almost any diarrhoea, but, as I have said, it is better, if we can, to reserve it until the bowel has been well emptied of its contents. Another excellent sedative is bismuth, preferably combined with soda.

In the bacterial form of diarrhoea, however, our treatment has to be more energetic, and we have to deal with the pain and collapse which are almost always present to a greater or less extent, and we want also to disinfect the contents of the intestine as far as may be possible.

The collapse is due mainly to the withdrawal of fluid from the tissues which the violent diarrhoea entails, and we remedy this in severe cases by the infusion of saline solution underneath the skin, or, when the necessity is not extreme, by making the patient drink very freely of water or thin barley water. We also keep him warm, and it is often necessary to pack him with hot water bottles. Opium, preferably in the form of chlorodyne, will be required on account of the pain, except in babies, when this is best treated by the application of hot fomentations to the child's abdomen.

To disinfect the intestine is not an easy task, but salol is often useful, while children stand mercurial preparations better. In adults, trial may be made of one of the modern disinfectants of the coal tar series such as Izal. But it is the collapse consequent upon the diarrhoea that is usually responsible for the fatal issue in these cases.

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