

## OUR PRIZE COMPETITION.

### DESCRIBE A CASE OF PHLEGMASIA (WHITE LEG WITH REGARD TO ONSET, SYMPTOMS, AND SUBSEQUENT HISTORY.

We have pleasure in awarding the prize this week to Miss Mildred W. Comer, Clandeboye, Hillbrow Road, West Southbourne, Bournemouth.

#### PRIZE PAPER.

The term Phlegmasia Dolens is applied to a swelling of one or both legs, characterised by pain, tension of skin, brawny hardness, absence of pitting on pressure and shining whiteness of surface. When it occurs it is usually after child-birth.

It is due to formation of a blood clot in a large vein. The condition is totally different from common œdema produced by pressure on veins, or even thrombosis of a vein under different circumstances, and can only be accounted for in two ways—either obstruction of the lymphatics as well as the vein is the essential part of the disease, or there is some toxic condition of the blood in consequence of which fluid poured out irritates the tissues and sets up a kind of inflammation leading to production of coagulable lymph.

Lymphatic obstruction is said to be the most essential part of the disease, and phlegmasia dolens may exist without any thrombosis in the veins. It may occur apart from pregnancy or puerperium. Usually the left leg is affected, probably because venous circulation in that leg is more apt to be impeded by a loaded rectum or sigmoid flexure. In some cases the other leg is affected after an interval of about a week. In rare cases the arms may be affected and thrombosis may occur in other situations, as in the neck. These multiple thrombi are generally sequelæ of some general septic infection, and the condition is grave.

The onset of pain is accompanied by rise of temperature (101° to 102° F.), weak, rapid pulse, rigors, headache, constipation and serious constitutional disturbances, intense thirst, severe pain in affected limb. Swelling quickly follows pain, and increases until the leg has the characters already described. The calf of the leg may swell suddenly and the inner side of the thigh become extremely tender to touch, or pain may begin in the calf and spread upwards to the abdomen; abdominal pain causes swelling of the vulva, groin and buttocks. The whole leg may swell to twice its normal size in a very short time. The white surface may be variegated by knots of purple superficial veins. Movement is difficult owing to pain and pressure of the swelling on the

muscles. Sometimes suppuration of the glands of the groin occurs.

The essential treatment, rest in bed, is prolonged for a considerable time because of the danger of pulmonary embolism; hence all friction and movement of the affected limb must be avoided.

The limb should be elevated on a pillow, kept warm by cotton wool (and the addition of a hot-water bottle when necessary), should be steadied by sand bags on either side; raise bed-clothes by means of a cradle. The bowels must be kept freely open; light, nourishing diet given, and such stimulants or drugs as may be ordered.

Pain may be relieved by hot fomentations, or painting the line of vein with glycerine of belladonna, or a paint composed of equal parts of camphor, chloral and menthol, which has a decided anodyne effect.

Quinine is sometimes ordered, and, later, tincture of perchloride of iron.

In the later stage, when swelling has subsided, the leg may be bandaged with a flannel, crêpe, or elastic bandage.

After about ten days pyrexia generally subsides, swelling becomes less tense and allows pitting on pressure. It may not completely disappear for some six or eight weeks, and sometimes the tendency to swelling remains for months afterwards.

Occasionally during the early stages there are renewed attacks of pyrexia, with extension of the thrombosis to fresh veins.

The chief dangers are cardiac thrombosis and pulmonary embolism.

Generally, under proper care and treatment the clot shrinks up and becomes disintegrated, and circulation through the affected vessels is restored.

More rarely the vessels become permanently obliterated. In these cases tendency to swell may remain in the leg for months, even years, and the use of the leg is impaired a corresponding time.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Henrietta Ballard, S.R.N., Miss M. Ramsey, S.R.N., Miss M. Catherine, Miss Y. Robinson, Mrs. Farthing.

Miss H. Ballard writes: "Before the days of antiseptics white leg, or Phlegmasia Alba Dolens, was a very common complication of parturition, but now it is extremely rare, one case showing itself in about six hundred."

#### QUESTION FOR NEXT WEEK.

In a children's ward, how would you deal with (a) Scabies, (b) Pediculosis capitis, (c) Thread worms in rectum?

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