

CERVICAL ADENITIS.

This is one of the commonest sequels to tonsillitis. It may occur in epidemics, but cannot be said to be in any way a new disease.

Following on an acute naso-pharyngitis, usually due to the streptococcus, the tonsillar glands enlarge at the angle of the jaw and are painful. Shortly after this other glands in the neck may enlarge, the swellings being uni- or bilateral. At the slightest movement of the head exquisite pain is felt. The tongue is furred and the temperature high and inclined to swing. In a school this state of affairs may assume epidemic proportions. Some cases are accompanied by otitis media, or mastoid disease and in other cases the glands may break down and abscess formation occur.

Treatment.—The principle of immobilising an inflamed gland is a sound one and the author finds that the splinting of the child's head is the most important single detail in the management of such a case. Half a pound of cotton-wool is fluffed out in front of the fire, then wound round the child's neck. A crêpe bandage 3 to 4 in. in breadth is put round the forehead, then round the neck and finally under the arms, then round the forehead again and so on. It will probably require three bandages to limit the child's head movement thoroughly. At once the pain disappears and there is a tendency for the temperature to fall as organisms cease to be squeezed out into the circulation at each movement of the head.

Where there is any suggestion that the infection is due to the streptococcus one of the sulphanilamide group (Prontosil, etc.) should be given in doses of 2 to 7½ grains, three times daily.

If there is a marked septicæmia accompanying the inflamed glands the giving of 10 to 20 c.c. of antistreptococcal serum has been found efficient.

HÆMOLYTIC ANÆMIA.

This group is due to a breaking down of the red cells of the blood. The free hæmoglobin may be excreted, causing hæmoglobinuria, or, as usually happens, the formation of bilirubin, which gives an indirect van den Bergh reaction and may cause jaundice. Bilirubin is excreted and when reabsorbed it appears in the urine as urobilinogen.

In such anæmias, as a rule, the colour index and hæmoglobin are reduced together.

Hæmolytic anæmia may be divided into two groups (a) Icterus gravis neonatorum, and (b) Hæmolytic anæmia in older children.

ENCEPHALITIS LETHARGICA.

Epidemic encephalitis (encephalitis lethargica), popularly known as "sleepy sickness" may be defined as an acute inflammation of certain portions of the brain and brain stem giving rise, as a rule, to squint, stupor

and various sequelæ. It is much more prevalent during the winter months.

The cause of epidemic encephalitis is not clearly understood. The infecting agent appears to be a filter-passing virus. The length of the incubation period is not known, but its onset is usually accompanied by fever, drowsiness, headache, double vision and often vomiting.

As the child begins to recover he may show a great change in character. Diurnal somnolence and nocturnal wakefulness may begin, the child being wide awake, noisy, active and perhaps dirty in his habits during the night, but sleeping soundly during the daytime.

The most tragic aspect of the sufferers from this terrible disease is that the majority of these children show signs of mental change, and often they are morally incorrigible. Those who were truthful and pleasant become the reverse; lying and thieving habits are also observed. Not infrequently these children commit some anti-social act which brings them within the arm of the law. But to punish a child already so severely afflicted is an act of cruelty and injustice unworthy of the administrators of the law in a civilised country, and sufferers from encephalitis lethargica should be recognised as sick persons, and the law, if necessary, should be so amended that they should be dealt with as such.



Showing immobilisation of head in cervical adenitis by application of crêpe bandages over the cotton-wool.

ECZEMA.

There are various theories as to the causation of eczema, none of which is definitely proved. There are two types, the dry or scaly and the weeping type.

In regard to treatment the most important thing is the prevention of scratching and irritation of the affected parts. The arms should be encased in cardboard splints, and if necessary a loop of bandage should be pinned to the sleeve fastening the arms away from the sides to the cot or perambulator. If the face is affected and if it is the dry type of eczema,

the lesions should be kept dry with calamine lotion, or if it tends to weep slightly an ointment (of which the composition is given) should be applied. If there are crusts or scabs nothing is so useful as starch poultices. These poultices may require to be applied on a mask, holes being cut for the eyes, nose and mouth.

It will be realised that to those studying the diseases of children this book (the price of which is 12s. 6d. net) is of great value. We cordially commend it as full of useful, practical and up-to-date information.

We are greatly indebted to Messrs. Cassell & Company for the loan of blocks which illustrate this article. M. B.

A CHILD'S EPITAPH.

Here lies, but seven years old, our little maid ;
Once of the darkness—oh, so sore afraid.
Light of the world remember that small fear,
And when nor moon nor stars do shine, draw near.
Walter De La Mare.

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