

sewer-gas poison, and numerous instances illustrating this fact have come under my observation, with the details of which I will not trouble my readers, as I think most of us realize that both this trouble and the ordinary erythematous sore throat may be thus caused. Dr. Langmaid informs me that in cases of public singers sojourning at hotels he has on several occasions advised cutting and sealing the waste pipes of set bowls to hasten the cure or prevent the recurrence of throat troubles.

CASE VII. Rheumatism. L. M., aged forty-two, subject to very severe attacks of inflammatory rheumatism and also gout, the latter being hereditary. In the house which he lived in cerebro-spinal meningitis, pneumonia, scarlet fever, and nearly all the other ills which flesh is heir to held full sway during the two years following the introduction of modern conveniences into an old-fashioned family mansion. His wife, too, had two severe attacks of rheumatic fever during this period. Competent authorities pronounced the entire arrangement of plumbing and ventilation to be faulty in the extreme, and L. M. decided to seek another residence, which he speedily found. Results: In his wife's case no more rheumatism. In his own case neither rheumatism or gout for eighteen months, when an attack of the former followed long exposure on a marsh during a shooting trip in the West.

CASE VIII. Pneumonia. An aged lady, the grandmother of Case II., a monomaniac on the subject of warmth, who never ventured out-doors from November 1st to the middle of May, had an attack of acute pneumonia in April, 1879, after a winter passed under the protecting influences of furnace heat, open fires, window strips, and numerous shawls and wraps of all kinds. At the same time another member of the family had watery diarrhoea (Case II.) and I think both diseases may be fairly attributed to the same cause.

CASE IX. Asthma. A little girl, aged eight, had severe paroxysms of asthma in the winter of 1878. The patient lived in a house where numerous faults in drainage and plumbing were discovered. The family were in poor circumstances, and the terms of their lease were such as to render them responsible for all repairs, while their lack of means prevented their seeking another residence until the present lease expired. Up to the time of their removal (October, 1878) the child continued to suffer from asthma, but the attacks ceased immediately after changing her residence to a house where the sanitary arrangements were good.

CASE X. Nervous prostration. Mrs. X., a lady of rather flighty temperament, but who had enjoyed good health until within two years of her first coming under my observation, in December, 1881. During the period mentioned she had suffered from intense weakness and all sorts of anomalous complaints, in short, her condition seemed composed of equal parts of hysteria and debility, and her life had become a burden to her family as well as herself. She had been assiduously treated by a regular physician during the first eighteen months, and during the six months preceding my first visit had been trying the "faith cure," so called, which in her case seems to have consisted in hiring a female of unprepossessing exterior and exaggerated dignity of manner to stare at her steadily for an hour or two every day. I was summoned to advise regarding an acute rheumatic affection which had recently appeared. Her other symptoms, with the mysterious nature of which she was fully impressed, she

preferred to have remain under the supervision of the exponent of the "faith cure." Salicylate of soda very soon relieved her rheumatism, and I ventured to suggest that it would be well to have the drainage inspected. To be brief, this was found to be decidedly bad, and the mason and plumber soon brought about the disappearance of the nervous prostration and the dismissal of the exponent of faith.

This case has led me to wonder whether oil of peppermint might not prove indirectly the means of relieving some few of the cases of neurasthenia, with the details of which our ears are constantly filled by sympathetic friends of the sufferers.

The point which I have tried to establish is one which is often hinted at but not pressed so strongly as I think it deserves to be. When we are called to a case of typhoid nor diphtheria we at once order an inspection of the drainage and plumbing, and are seldom disappointed in finding defects, but I am convinced that we ought also to do this in many other cases of diseases which are as yet merely suspected of being infectious, and in some to which no suspicion is attached. Sewer-gas poison seems to seek out the patient's weak spot, and often brings discredit upon the physician, whose inability to relieve his patient is due to his failure to appreciate its unlimited powers of mischief.

THE USE OF MANACA (FRANCISCEA UNIFLORA) IN THE TREATMENT OF ACUTE RHEUMATISM.

BY HERBERT C. ROGERS, M. D., BROOKLYN, N. Y.,
Adjunct Surgeon Long Island College Hospital.

My attention was first called to manaca by a physician practicing in South America. I am in the habit of giving the fluid extract in ten to twenty drops, using the preparation made by Parke, Davis & Co., of Detroit, Michigan.

CASE I. March 3, 1883. Was called to see James D., aged twenty-one, a native of Ireland, car driver. He had enjoyed good health until three days ago, when he was suddenly seized with a severe chill followed by fever and sharp pains in his limbs. The next morning he was unable to walk. The left knee and ankle were swollen, red, and painful. The right knee had been affected, but got better before he sent for me. He perspires profusely. Suffers most from his pain at night. He complains much of headache. Tongue badly coated. Bowels constipated. Urine deeply colored and free from albumen; specific gravity 1030. Pulse 130. Temperature 104° F. He was ordered five grains of calomel and ten grains of compound jalap powder, also ten drops of fluid extract of manaca every three hours. The painful joints to be covered with cotton.

March 4th, eleven A. M. He has had but little sleep during the night. The right knee and ankle have become inflamed. He suffers a good deal from headache. Bowels have moved several times. Examination of his heart negative. Ordered ten drops of tincture of opium with the fluid extract manaca every three hours. The painful joints to be wrapped in cloths wet with liq. plumbi et opii. Temperature 104½° F. Pulse 130.

March 5th, 11.30 A. M. Patient passed a better night. Has been able to sleep three hours. Swelling

and pain less. Temperature $103\frac{1}{2}^{\circ}$ F. Pulse 120. Headache better. Vomited once towards morning. Bowels have moved three times during the last twenty-four hours. Examination of heart negative. Treatment continued.

March 6th, two P. M. Still improving. Temperature 103° F. Pulse 120. Stopped opium unless pain should become severe. The fluid extract of manaca increased to fifteen drops every three hours.

March 7th, ten A. M. Pain, heat, and swelling have disappeared from all the joints with the exceptions of the right knee and left elbow. Treatment as before. Temperature 101° F. Pulse 114.

March 8th. Temperature $100\frac{3}{4}^{\circ}$ F. Pulse 110. No change in condition since yesterday.

March 9th. Found patient sitting up. The inflammation has disappeared from elbow. He says he feels well, and wants to go out. Temperature $99\frac{3}{4}^{\circ}$ F. Pulse 100. Is to take the manaca three times daily.

March 12th. Patient about the house. Says he feels as well as he ever felt in his life, and is anxious to go to work. All joints are in a healthy condition. Appetite good. Is to take the manaca for a few days longer. Careful examination of his heart fails to detect any abnormal murmur.

CASE II. March 22, 1883. Fannie C., aged twenty-one, born in England, single, a seamstress by occupation. She had been confined to her bed for two days. Complains of pain, attended by swelling and redness, in almost all her joints, particularly of the knee and wrist. She has not been able to sleep for two days. The pulse rapid, 120. Tongue thickly coated. Urine high colored, free from albumen. Temperature 103° F. Ordered ten drops of the fluid extract of manaca in water every three hours, and one fourth of a grain of sulphate of morphia at bed-time. The painful joints to be enveloped in cotton-wool. Ordered a milk diet.

March 23d, ten A. M. The patient feels about the same. Has been able to sleep a few hours during the night. Temperature $102\frac{1}{2}^{\circ}$ F. Pulse 120. Treatment continued.

March 24th, 10.30 A. M. Patient complains of severe pain in the shoulders and hands. Other joints are a little better. Increased the fluid extract of manaca to fifteen drops every three hours, and to take one sixth of a grain of sulphate of morphia every two hours till pain is relieved. Careful examination of the heart fails to disclose any abnormal murmur. Temperature 102° F. Pulse 118.

March 25th. Slight improvement. Pain in the hands and shoulders not so bad. The morphia seems to affect her bowels. Temperature 102° F. Pulse 118.

March 26th. Condition about the same. Pain, swelling, and redness disappearing from the joints. Reduced the fluid extract of manaca to ten drops every four hours. Temperature $101\frac{1}{2}^{\circ}$ F. Pulse 100.

March 27th. Same as last note. Temperature $101\frac{1}{2}^{\circ}$ F. Pulse 100. Continued treatment.

March 28th. A distinct systolic murmur was heard at the base of the heart to-day. The pulse has increased in frequency, being 120. Temperature $101\frac{1}{2}^{\circ}$ F. Is to take twenty drops of the fluid extract of manaca every three hours.

March 29th. Examination of heart to-day reveals a very loud murmur at the base, completely masking the second sound, and heard under the clavicle. A few bronchial râles are heard over the anterior part of the chest. Temperature $100\frac{3}{4}^{\circ}$ F. Pulse 116.

March 31st. Symptoms continue about the same. A double murmur is still plainly audible. The pain in all the joints is much less. The fluid extract to be taken every four hours. Temperature 100° F. Pulse 100.

April 2d. The improvement still continues. Her appetite is increasing, and she sleeps better. Temperature 100° F. Pulse 100.

April 4th. Condition about the same as last note. Temperature 99° F. Pulse 90. Treatment continued, with ten drops of tincture of iron three times daily.

April 7th. The double murmur still continues, but not so loud. It is heard at the upper end of the sternum, below the clavicle, but faintly at the apex. Temperature 98° F. Pulse 90.

April 10th. The pain is gradually passing away. The murmur is very faint at this examination. To take five drops of the fluid extract of manaca three times daily.

April 14th. The murmur has entirely disappeared. The patient is up and about the house. As she is still anæmic is to take the tr. ferri for a few days longer.

CASE III. January 15, 1884. Samuel A., aged twenty-three, bar tender, born in Germany, married, always enjoyed good health until a few days ago, when his left knee began to pain him, and became swollen, red, and hot. By advice of some of his friends he rubbed the joint with kerosene oil, and wrapped it up with flannel.

January 16th, two A. M. Patient had a chill this morning followed by pain in the right knee and thigh, which are red and swollen. He cannot bear anything to touch them, and complains if any one walks across the floor, as he says it jars the bed and increases his suffering. Temperature 103° F. Pulse 124. Ordered fluid extract of manaca in doses of ten drops every three hours, and sufficient opium to ease the pain. His joints to be enveloped in cotton-wool.

January 17th. The inflammation has extended to the left thigh, both shoulders, and ankles. He is covered with a profuse, acid perspiration. Urine scanty, but free from albumen. Temperature $103\frac{1}{2}^{\circ}$ F. Pulse 130. Increased the manaca to fifteen drops every three hours.

January 18th. Condition unchanged. Is obliged to take one and one half grains of opium to produce sleep. Increased the manaca to twenty-five drops every three hours.

January 19th. Condition about the same as last note.

January 22d. Mr. A. is feeling more comfortable. He slept better last night than he has done for over a week. The pain, heat, and redness have nearly disappeared from all the joints, with the exception of the left knee, which is still quite painful and moderately swollen. His appetite, which has been very poor for the last two weeks, is improving, and he begins to relish such food as he is allowed to take. This consists of Volentine's beef juice, milk, and Vichy water. Temperature 101° F. Pulse 116. Continued treatment, with the exception of the opium, which is to be omitted.

January 24th, nine P. M. Patient's condition about the same as last note. No abnormal heart murmur can be detected. Temperature $100\frac{3}{4}^{\circ}$ F. Pulse 110.

January 27th. Found patient sitting up in bed. The pain, swelling, heat, and redness have disappeared from right knee, thighs, shoulders, and ankles. The left knee is somewhat swollen, and gives him pain

when moved or touched. Careful examination of heart and lungs negative. Temperature normal. Pulse 100. Manaca to be reduced to fifteen drops every three hours. Also ordered

R Ferri et quiniæ cit. gr. lxiv.
Tr. gentianæ co. q. s. ad 3iv. M.
Sig. Teaspoonful after eating.

February 3d. Patient resumed his business this morning. The left knee is still a little swollen, but free from pain.

CASE IV. Patrick C., aged twenty-five, expressman, born in Ireland, married, came under observation April 3d. On the 1st of April the patient had a well-marked chill, with vomiting, headache, fever, and acute pain in left wrist, accompanied by heat, redness, and considerable swelling. He grew weak, lost his appetite, and felt unable to exert himself, but attended to his business until April 3d, when he sent for me. I saw him at eleven A. M. The inflammation had attacked the ankles, knees, and right shoulder. Urine scanty, high colored, free from albumen. Temperature 102° F. Pulse 118. No abnormal cardiac murmurs perceptible. Ordered milk diet and twenty drops of fluid extract manaca every three hours. The painful joints to be bathed with the following liniment:—

R Liq. plumbi subacetatis 3ij.
Tr. opii 3i.
Aque q. s. ad Oi. M.
Sig. External use only.

April 4th, ten A. M. Condition about the same. Slept fairly well last night. Complains that the milk makes him sick. Ordered five grains of sodii bicarb. to each glass of milk. Treatment continued. Temperature 101° F. Pulse 120.

April 6th, eleven A. M. Pain in all the joints, with exception of the left wrist, has been considerably relieved. Appetite is improving. Temperature 100½° F. Pulse 110. Applied small blister (2×2) to left wrist.

April 7th and 8th. Condition same as last note.

April 10th. The swelling, redness, and pain in all the joints have greatly diminished. Careful examination of the heart to-day fails to detect any abnormal murmur. Temperature 100° F. Pulse 100.

April 16th. All acute inflammatory symptoms have disappeared. Only slight stiffness of the limbs remains. The patient is able to go about the house. Appetite fairly good. Ordered the fluid extract of manaca to be discontinued, and the following tonic to be taken:—

R Tinct. ferri chlorid., }
Syr. Zingiberis, } aa 3ij. M.
Aque, }
Sig. Teaspoonful in wineglass of water, after eating, through a glass tube.

REPORT ON DISEASES OF CHILDREN.

BY T. M. ROTCH, M. D.

SIMULATED DISEASES IN CHILDREN.¹

DR. JULIUS EROSS, assistant in the hospital at Budapest, has written a long and interesting article on this subject, describing the bad influence which sympathetic parents have on this class of cases, also the results of healthy children being brought in contact with those suffering from various nervous disorders, such

¹ Jahrb für Kinderheilk., xxi. B., 4 H.

as chorea. Girls were found to carry out the rôle of pretended disease better than boys. The symptoms were of all kinds: deafness, blindness, headache, pains in the extremities or thorax, palpitation, dyspnoea, spasmodic cough, vomiting, weakness of joints: clonic contractions, paralysis, convulsions, and many others. Eröss states that the unmasking of the pretended symptoms was found to be the best way to cure the children, and he cites a number of cases which he had observed in the hospital during the last three years. The following are some of the more interesting of his cases:—

I. H. K., a girl twelve years of age, began on the 8th of February to have such an intense spasmodic cough that a physician had to be summoned. Examination of the organs of respiration showed them to be normal; the cough continued with short intervals for four days, when she was sent to the hospital and soon recovered.

II. N. N., a girl six years old, pretended to be totally blind in one eye. Her father stated that she had received a blow on the left eye, that inflammation had followed, and resulting blindness. The ophthalmoscope showed the eye to be normal. The right eye was closed with a bandage and the child told to walk towards the examining physician, Dr. Vidor, who by various manoeuvres soon proved that the sight of the pretended blind eye was perfectly good.

III. J. S., a girl eleven years old, was reported by her mother to have had repeated attacks of vomiting for three years; the vomiting lasted for days, sometimes weeks, and would then cease for five or six days and begin again. The vomiting was without straining. The child always retained solid food, but even a few spoonfuls of soup, milk, coffee, or water were immediately rejected. The patient looked so well nourished, and her functions were so regular, that it was soon observed that she really did not vomit at all, but that the liquids were retained in the mouth and not swallowed. She was kept in bed and only allowed to have soup and milk, which she very soon decided to swallow and retain.

IV. J. D., a girl eleven years old, had for two weeks complained of pain in the stomach, and during the attacks pains also in the upper extremities; the hands would begin to tremble so that she let her work fall and the trembling would last for several minutes.

V. R. L., a girl thirteen years old, was reported to have had the following symptoms for two years: tonic and clonic spasms of the upper extremities, of the trunk, diaphragm, and abdominal muscles followed each other in quick succession; the rigidly extended arms presented the appearance of epilepsy; the muscles of the shoulders were in active motion, so that the shoulder-blades moved quickly backwards and forwards. The lower extremities remained quiescent. These movements continued until the child had been in bed for an hour, and even then the shoulders and arms would twitch for a minute at a time. Sleep brought complete quiet, but on the next day the contractions returned as before. The child's confidence having been obtained it was found that she could at will control part of the movements while the other muscles were in action, and finally she consented to control all the movements, though for a long time she found it impossible to keep her fingers quiet on account of the contractions having extended over the long period of two years.