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CASE OF POISONING BY WORM LOZENGES.

By BENJ. D. GIFFORD, A.M., M.D., Gloucester.

ON Dec. 23d, 1869, I was called to a child, three years old, who, two hours previously, had eaten seven "worm lozenges," judged to contain santonin as the medicinal ingredient. I found her in clonic spasms of the left side; pupils widely dilated and uninfluenced by light; respiration, much impeded, eighteen per minute; a viscid, frothy mucus issuing from the mouth at each expiration. The spasms involved every muscle on the left side of the body. The face was twitched into frightful contortions, and pleurothotonos was developed every other second. Pulse fair, 160 per minute. No ability to speak or move. She had vomited freely before I saw her. I endeavored to produce emesis with ext. ipecac. fl. and by tickling the fauces with a feather, without avail. I then gave her chloroform gtts. v. every fifteen minutes; also injections of diluted whiskey. In course of an hour the spasms began to yield and the pupils to respond to light; at the end of two hours she was perfectly quiet. I directed the chloroform to be continued should the spasms return, and left. An hour afterwards they did return, and I was again called. I found her worse than ever. Instead of the muscles of one side, both were involved in the spasmodic action. The pulse was so fast and fluttering that I could not count it. Respiration was very laborious, with mucous râles throughout both lungs. I continued the chloroform, with an addition of tinct. opii gtts. v., every twenty minutes; also small injections of whiskey. At the end of an hour and a half the spasms entirely abated, and the patient slept from 8.30 to 11, P.M.; she then awoke conscious, drank some beef-tea, then slept till morning, when she was apparently as well as usual.

A similar case is reported in the *Annale de Thérapeutique* for 1852 (see U. S. Dis-
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pensatory, eleventh edition, article Santonin), after what was considered an overdose of santonin, but which was afterwards proved to be strychnia. The symptoms were the same in my case, though instead of cold sweats the body was preternaturally hot and bathed in perspiration. I never suspected strychnia at the time, nor till I had seen the later edition of the Dispensatory. I then subjected one of the lozenges to analysis, by powdering it on a clean porcelain surface, drenching it with sulphuric acid and adding a small crystal of bichromate of potassa. After a few minutes the characteristic purple or violet color was produced, showing the presence of strychnia. The color was of precisely the same shade, though less distinct, as that produced by the same experiment with a specimen of Rosengarten & Sons' strychnia. Hence I conclude that the case was in reality one of an overdose of strychnia, and that the santonin played no part in producing the symptoms. I suppose the admixture of strychnia with santonin is purely fortuitous; but it behooves the manufacturers to carefully test their santonin before sending it out, for in this case it was far from being "positively safe."

PSEUDO-MENINGITIS.

Extracts from an Article by M. BOUCHUT in the *Union Médicale*. Translated by LUTHER PARKS, M.D., Boston.

Pseudo-Meningitis as a Prodroma of Acute Diseases (Tonsillitis, Pneumonia, Variola, Measles, Scarlatina).

This form of the affection is very common, and often gives rise to grave errors of diagnosis. It is more frequent at the outset of angina tonsillaris than in the beginning of any other disease. It is met with only in children of a certain age—that of early infancy. I have never seen it in those older than seven years.

Pseudo-meningitis tonsillaris is the result of acute inflammation of the tonsils, and not of diphtheritic or other different phlegmasiæ of these glands. It is the conse-
[WHOLE No. 2218.]