

MEDICINE.

UNDER THE CHARGE OF

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Pulmonary Tuberculosis Following Traumatism.—All the cases of so-called traumatic pulmonary tuberculosis hitherto reported have been unsatisfactory in showing the relation claimed. DR. O. SCHRADER (*Berlin. klin. Wochenschrift*, 1897, No. 46) furnishes an account which leaves little to be desired. A healthy man, aged twenty-nine years, with no tuberculosis in the family history, fell heavily on the right side of the back. The fall was so severe that the patient was unconscious a quarter of an hour, and felt ill afterward. The next day he began to work again, but was obliged to give up, and was admitted to the hospital with signs of pneumonia in the upper and middle lobes. The consolidation continued, with a remittent fever. In the beginning the sputum was negative, but on the fortieth day after the fall tubercle bacilli were found. By another month the fever disappeared. Soon after the physical signs had improved so much that only slight loss of resonance could be detected. Bacilli could not be found. [Treatment not described.]

The author inclines to the belief that the pneumonic process was tuberculous from the beginning, basing his opinion largely on the fever type. [The temperature curve as given might be that of sepsis.] Whether the patient already had a latent tuberculosis, or became infected after the injury, perhaps in the hospital, the author does not say. The course of the symptoms, the seat of the lesions, and the accuracy of the observation go to support the author's claim as to the relation of the injury to the disease.

An Albumose Substance in the Urine in Sarcomatosis of the Bones of the Trunk.—ROSIN (*Berliner klin. Wochenschrift*, 1897, No. 48) reports a case in which the patient for many weeks excreted in the urine a substance which had the general characteristics of an albumose. The more minute chemical details the author proposes to describe elsewhere. The patient was a woman of thirty-six years, the clinical diagnosis, nephritis with albumosuria and central hypoglossus and trigeminus paralysis. Autopsy revealed amyloid, fatty, and necrotic changes in the kidneys, without nephritis. There was a new growth affecting many ribs, originating in the marrow, identified as myelogenic round-celled sarcoma. The ribs were softened as in osteomalacia, but without deformity.

The most interesting feature of the case was the excretion of albumose. This could evidently not be due to the renal disease. An examination of the