

A CASE OF EPILEPTIFORM CONVULSIONS CAUSED BY SHOE BUTTON IN THE NOSE.

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"Man is wonderfully and woefully made" when a shoe button in a boy's nose will throw him into daily convulsions, often as many as six or eight a day, and if not relieved make an idiot out of what would have otherwise been a very smart boy.

The case I have to report is of a boy, "Master T.," age about six and one half years. Family history good, has several sisters and brothers, one of which is younger than he, and all in excellent health. Master T. was brought to me November 12, 1900, for the purpose of examining and treating his catarrh, with which he had been suffering for about two years. He proved to be a fat, chunky, well-nourished boy physically, with a rather large head, and large ball spot on back of his head, in the center of which there was a sore; this ball place and sore was caused by the boy falling backward when he had a convulsion and continually bumping his head against the floor or ground during a convulsion. These convulsions made their appearance about two years before he was brought to me; at first they were light and not of frequent occurrence, but gradually grew worse and more frequent, until when I saw him they were of almost daily occurrence and often as many as six or eight a day, and very severe. Before these convulsions made their appearance Master T., for his age, was up to the average in intelligence, but shortly afterwards his mind, instead of continuing to improve, began to show signs of weakness, which increased until when I first saw him he had almost forgotten how to talk, or would not talk, nor play with the rest of the children; in fact, his mind seemed almost a blank. When brought to the table he would with both hands grab for anything he could reach; he could not be controlled, and was almost always hungry.

Master T. had been treated by the best native doctors in Mexico, and, no doubt, had taken almost everything in the pharmacopia recommended for epilepsy; and while under the influence of some strong nerve sedative would sometimes go as many as three or four days, but never more than five days, without a convulsion.

On examining his nose, both nostrils presented the appearance of a chronic catarrhal rhinitis, with a little enlargement of the middle

turbinated bodies. In the left side, situated between the middle turbinated body and septum and at about the junction of the middle and anterior third, was apparently a black crust which failing to wash or wipe out, I removed with forceps quite easily, and to my surprise it proved to be a shoe button, which from its appearance must have been in the nose for a long time, for it was rough, the enamel being nearly all worn off. On inquiry found out that the boy had not worn button shoes for about two years, the last pair he was wearing when the convulsions first made their appearance two years before. The boy had never learnt how to blow his nose, yet there was very little fetid accumulation in this nostril, and after three days it was almost impossible to tell that there had ever been a foreign body in the nose. The nose was treated locally for his chronic rhinitis, with antiseptic sprays and applications of protargol, iodine, etc. At this time he was taking large doses of potassium bromide, which doses I ordered decreased until on the sixth day they were discontinued. The daily treatment of the nose was kept up. On November 28th the convulsions returned, but not so severe, yet were of daily occurrence for five days. On the fifth day I thoroughly cauterized the middle turbinated body at point where button had been pressing, with the result of again checking the convulsions until December 24th, when he had a very mild attack, also one on the 25th, which was the last he has had. I feel confident that he is entirely cured, About all the internal treatment he had was a laxative quite frequent and the infusion of valerian symptomatically. Master T.'s mind began to improve shortly after the removal of the button, and, although not entirely well, he is very much better and on a good road to complete recovery. On June 22d I removed the right tonsil, it having become quite enlarged in the last two months. One characteristic of Master T.'s convulsions was that he would always fall backward, and shortly before the button was removed would foam at the mouth and cry out a great deal. I was not fortunate to see the boy in convulsions, but from all the information I could get these convulsions were due to a reflex nervous irritation caused by the button in the nose, and not the obstruction caused by the button, which was much less than would be expected. In almost all the cases I have seen reported of convulsions caused by foreign bodies in the nose they were of a character pointing to the obstruction in the nose as the principal if not the sole cause of the convulsions, and not as in this case to a direct nervous irritation.

The father and mother were even more surprised than I that the boy had any foreign body in the nose.

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