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Original Communications.

BRIEF MENTION OF TWO INTERESTING PARASITIC DISEASES, WITH THEIR TREATMENT.

By J. H. SALISBURY, M.D., Cleveland, O.

Chloasma produced by the Microsporon furfur (ROBIN).—Mr. E. B., cigar-maker, Cleveland, aged 30, came to me in January last, covered over the whole trunk, anteriorly and posteriorly, with brownish yellow maculæ or spots of irregular outline, from the size of a pin head to 4 and 6 lines in diameter. The spots were not elevated above what appeared to be the surrounding healthy skin. Epidermis soft and pultaceous and easily rubbed off, appearing spongy when scraped with a scalpel, coming off in moist oily scales. By raising up the edge of a patch of colored cuticle, and taking hold of it with a pair of forceps, it peeled off like the epidermis from a boiled apple. The sheets and night dresses were covered with furfuraceous scales.

On microscopic examination, the epidermis was found filled with a fungus (*microsporon furfur*) both in the spore and filamentous stages of development. The dark spots were where the spores were developing in multitudes. These were the points of fructification. The intervening spaces were filled with the mycelium of the fungus.

1. Represents the spores of the *M. furfur* (ROBIN).
2. Represents the embryonic filaments of same.
3. Represents the structure of the filaments.
4. Represents the mycelium.

Treatment.—The patient was pale, anæmic, emaciated, nervous and fretful, and was disturbed at night with alternate sweating and chilliness. Ordered a good substantial diet of rare beef and bread, with a plenty of out-door exercise, and put him on the following treatment:—*R.* Acid. sulphuric. aromatic. \mathfrak{z} iii. *S.* Put 2 teaspoonfuls in half a pint of warm water and wash

the body and limbs all over every other night and wipe dry after. *R.* Nichols. sol. bi-sulphite of soda, \mathfrak{z} iii. *S.* Put $1\frac{1}{2}$ table spoonfuls in half a pint of warm water, and wash the body and limbs all over every other night and wipe dry. *R.* Tr. ferri chlorid. \mathfrak{z} iii. *S.* Take 20 drops in a full glass of water 2 hours after each meal. *R.* Tr. cinchonæ comp. \mathfrak{z} vi.; Potass. bromid. \mathfrak{z} iv. *S.* Take a teaspoonful before each meal.

Fig. 1.

Fig. 2.

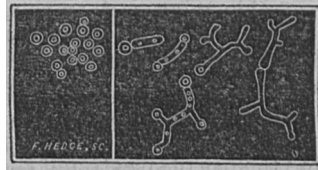
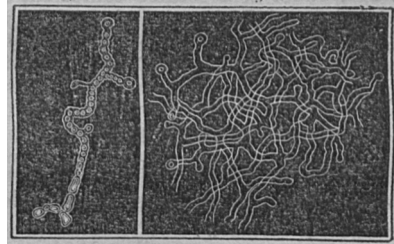


Fig. 3.

Fig. 4.



On the fourth day of the treatment, the spots had entirely disappeared. There were, however, many sickly spores and filaments remaining in the epidermis, but their further development seemed to be entirely checked. Continued treatment. At the end of two weeks, the vegetation had entirely disappeared, the skin had become smooth and healthy, and he had gained several pounds in weight and was feeling perfectly well; the nervousness, chilliness, sweating and wakefulness having entirely ceased.

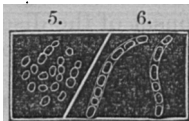
Parasitic disease of the Conjunctival Membrane and Epidermis of Cheek.—Mr. A. W., a carpenter of Cleveland, aged 26, came to me about the first of February last, with a diffuse inflammation, roughness and œdema of eyelids and the surrounding soft parts. The inflammation and scaly condition extended over nearly the whole cheek, to the wing of the nose, and from this point up

[WHOLE No. 2101.]

the ridge of this organ to the forehead, involving the entire eyebrow. The first impression was, that it was a case of erysipelas. A more careful examination discovered the epidermis to be filled with a fungoid growth, in the spore and filamentous stages of development.

5. Represents the spores of this parasite, and

6. The embryonic filaments.



This vegetation extended to the conjunctival membrane lining the eyelids, and probably to the tear gland, as there was an excessive flow of the lachrymal secretion which ran down over the cheek.

Prescribed:—*R.* Dilute citrine ointment, \mathfrak{z} i.; glycerine, \mathfrak{z} iii. *M. S.* Apply morning, noon and night, to the inside of eye and over the entire affected parts. *R.* Nichols. sol. bi-sulphite of soda, \mathfrak{z} ss.; aquæ, \mathfrak{z} viii. *M.* With an atomizer, threw the spray of this mixture into the eye and over the cheek, for five minutes, morning and evening, after washing and before applying the ointment. *R.* Tr. ferri-chlorid. \mathfrak{z} iii. *S.* Take 20 drops in a full tumbler of water two hours after breakfast and dinner. Forbid the use of sweets and all organic acids, and ordered a plain substantial diet. The patient rapidly improved, and in three weeks not a trace of the parasitic growth could be detected.

CASE OF PELVIC CELLUTITIS.

By A. D. SINCLAIR, M.D., Boston.

Mrs. —, aged 45, slender frame, fleshy, and generally healthy, married late in life, and never pregnant. Suffered from an attack of phlebitis of extremities, anterior and upper part of chest and lower portion of abdomen, less than a year ago. Catamenia sufficient and regular.

Dec. 26th, 1866, immediately after a menstrual period she underwent considerable fatigue in walking about the city, got her feet and clothes damped. Had some headache during the day, which passed off early in the evening, when she was seized with severe hypogastric pain and frequent micturition, temporarily relieved by hot fomentations, &c. On the following day and evening, she had nausea and vomiting, chills and fever, followed by perspiration. Pulse 108.

28th.—Carefully examined, per vaginam, but nothing remarkable discovered, except some tenderness about the uterus. Abdomen tympanitic and tender on pressure; pain at epigastrium, in right hypochondrium and back.

31st.—Again examined per vaginam, when an extensive cellulitis, of the right side of the pelvis, was detected. Præcordial pain radiates to axillæ and shoulders. Pulse 130. No defection since morning of 28th. Symptoms otherwise as already described. Is directed to take a cathartic containing podophyllin, &c., and to have eight leeches applied to the hæmorrhoidal veins.

Jan. 1, 1867.—Pulse 114; three defections. Leech-bites bled freely. Took a mixture containing quinine and morphia, every four hours, since last evening, with great relief to pain and distress. No headache. Tongue clean at edges, coated at base. Skin warm and soft. Urine passed with great pain, but not quite so often. Uterus fixed by effusion, in pelvic cavity, and cervix pressed, somewhat, against bladder. Cellulitis invades the cervix, laterally and posteriorly, and extends downwards on sides of pelvic cavity, so as to be readily felt through the vagina and rectum. Tumefaction thought to be discernible, on pressure, in right groin. Abdominal distention and tenderness somewhat diminished. Sensation of numbness in back.

2d.—Pulse 102; skin cool; tongue cleaner. Dejection in night with great pain, less general uneasiness since. Dysuria the same. Constant nausea with anorexia. Otherwise about as on yesterday. Uses vaginal injections of hot water, for several minutes, four or five times daily; bran poultices, constantly on abdomen, and a pessary of iodide of lead and belladonna, &c., nightly, in the vagina. Takes morphia and quinine, p. r. n.

Jan. 3.—Pulse 100; rested well until 3, A.M., when she awoke with pain and distress in abdomen. Dejection at 6, A.M., accompanied with much suffering. Otherwise as on yesterday.

5th.—Condition generally about the same. Let hypogastrium be painted daily with the ethereal tincture of iodine.

6th.—Sleep disturbed by sensation of "drawing pain" in back, which still continues. Two defections after enema yesterday, and two this morning, accompanied with much pain. Dysuria slightly diminished. Pulse 108. No appetite. Tumefaction in right groin distinctly felt for three or four days.

7th.—Throbbing pain in pelvis during night, with increase of dysuria.

8th.—Considerable pain in right groin this morning; occasional pain shoots down lower extremities. Slept better last night, during which she perspired profusely. Dysuria slightly relieved. Bowels relieved