

should be warned to maintain the same care with this which they have learned in the sanatorium, both on account of the danger to others and also to themselves from reinfection.

Though they may be free from cough and expectoration, and have no physical signs in the lungs, they may have tuberculous glands, bronchial or elsewhere, which, on the occurrence of acute affection or as soon as the vitality of the system is depressed, will reinfect the lungs.

One of the most promising ways of helping to maintain the health of those restored at sanatoria is by the establishment of labor or farm colonies, where gardening, farming, raising of chickens, keeping of bees, cultivation of flowers, etc., can be carried on, with gradually increasing hours and severity of work, under medical supervision. This can be done at some of the sanatoria, where they have land enough, or at special farms devoted to the purpose, like convalescent homes. In fact, many patients could and would be better for doing some work of this kind during a part, or in some cases all of their time at the sanatoria, provided there are grounds enough to set up such régime at the institution.

Woodcock,¹ of Leeds, dwells on the injury to patients from idleness, and gives an account of his investigation of the possibilities of labor colonies. He reports that at Kelling, in Norfolk, at Dr. Fanning's Sanatorium, which is practically a farm, all patients work; even those unable to leave the shelters, carve wood and make mats, and their work is sold. Seven hours is the maximum for work, and three the average. The colony does a large business in eggs and poultry, and the carpenter is kept busy all day making egg boxes. At Kelling they have an "after care" committee, which concerns itself with getting suitable situations for discharged patients. Dr. Fanning spoke enthusiastically of his results. He considers that patients who work five hours a day bring in a profit to the institution of four shillings per week. He had been very successful in obtaining employment for his patients, and sends a circular to employers, offering to take back at once any patients who relapse while in employment. He is not against suitable indoor work. Dr. Fanning believes that idleness is the worse curse to the consumptives.

Boucard, of Cannes, at the same congress, insisted that a part of the millions appropriated for the erection of sanatoria be used in establishing farm colonies, and that, while, as Dr. Panwitz says, nine-tenths of the patients refuse to do the ordinary chores about a sanatorium, they would be glad to learn the care of bees, raising poultry, etc., which would give them suitable occupation when they leave the institution.

POISONING BY PRIMULA OBCONICA.

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While so much is being written of the dermatitis caused by the brown tail moth and other agents, a narration of the following case may be of slight interest:

The patient was Mrs. R., 59, married, the mother of four children. While in attendance for an attack which proved to be appendicitis, I noticed a suffusion of the face and made

inquiry thereto. She gave a history of having suffered from a most obstinate dermatitis for three years, with occasional exacerbations and remissions. Itching and burning were intolerable and at times a severe conjunctivitis was also present. She had consulted various physicians, together with one or two specialists, and had persistently followed the usual course of treatment with salines, ointments, and alteratives, until finally some one had introduced her to the term "dyscrasia," which she had seized avidously, becoming resigned to her fate. Accompanying her husband on his annual trips to Hot Springs she had each time been free from any irritation, only to have it immediately recur on her arrival home. This fact, together with a similar occurrence on the patient leaving to have an appendectomy performed, led me to believe that the causative factor was within her own household, and although no gastrointestinal or nervous symptoms were present it seemed to me most likely that arsenic was at the bottom of the trouble. While making an analysis of the wall paper to determine this point, the timely arrival of a nurse, a friend of the family, interrupted all proceedings. She at once descended on Mrs. R.'s eastern window and, selecting one of the handsomest plants therein, declared it was the cause of the difficulty. It was soon banished from the house and no further trouble has ever been experienced.

Primula obconica is a cultivated plant of the primrose or cowslip family and is closely related to *Primula sinensis* (Chinese primrose) seen so commonly among lovers of plants. The flower is lilac or purplish and usually droops. The leaves are radical, apparently springing from the root, the shape being ovatecordate. Innumerable sharp hairs are attached to the leaves and these constitute the irritating-poisonous principle. As in rhus poisoning, susceptibility varies greatly, and, although not positive concerning the point, I believe that in these people actual contact is not necessary.

Removal of Tumor in Hypophysis Through Nose.—H. Schloffer of Innsbrück was recently called on to relieve a patient who presented symptoms indicating a tumor in the hypophysis (pituitary body). The patient was a tailor, 30 years old, who had suffered from recurring headache since 1900, with loss of nearly all his hair, hemianopsia, occasional vertigo and syncope, etc. Roentgenoscopy revealed a tumor, presumably in the hypophysis, and it was removed by turning back the nose to the right, excising the turbinated bones and septum and the inner wall of the left orbit and maxillary sinus and part of the left upper jaw. The ethmoidal cells were opened and evacuated and the sphenoidal sinus opened. The difficulty was to determine the exact location of the sella turcica. Roentgenoscopy showed the distance from the root of the nose to be 6 cm.; this was computed to represent 5.3 cm. in reality, and a soft friable tumor was found at this point. Nearly the whole was removed with a flexible lead spatula, without injury to the dura. The adherent portions were left undisturbed, possibly a fifth of the entire tumor. The large cavity in the sella turcica was tamponed with gauze dipped in Peruvian balsam, and another tampon was applied to the base of the skull, the ends of both brought out through the nose which was sutured in place. The operation lasted an hour and a quarter, and there was comparatively little hemorrhage. Cerebrospinal fluid dripped from the nose for several days, a drop falling every few minutes, but except for a mild intercurrent erysipelas recovery proceeded rapidly, and the patient was free from all disturbances and clinically cured by the end of a month, with the exception of the persisting hemianopsia. The hair of the beard has sprouted again. The operation proved simpler and easier than expected, and no signs of meningitis developed. The case is described in detail in the *Wien. klin. Wochschr.* for May 23, 1907, xx, p. 621.

1. Congrès International de la Tuberculose, Paris, 1905.