

uteri, with the view of bringing on premature labor. Pains came on during the evening and at 12.20 A. M. October 30th she was delivered of a fetus apparently of about six and one-half months' development which had evidently been dead for several days.

With the exception of some rise of temperature on the second day, for which an antiseptic intra-uterine douche was given with immediate improvement, the patient made a satisfactory recovery.

November 30th. The patient is about and doing house-work. Feels fairly strong; no return of dyspnoea since labor. Urine abundant; specific gravity 1.025; albumen small in amount; and but one granular cast found in examination of two slides.

Judging by what I can learn from the text-books, and from conversations with physicians, such cases as those here reported are fortunately rare. When they occur, and medicinal treatment does not relieve, it seems to me the only hope for the patient may be speedy delivery, if it can be effected. In the first case there was no opportunity for the procedure. In the second, the patient's life was in jeopardy as shown by the recurrence of the alarming attack, notwithstanding she was under the influence of digitalis, diuretics, cathartics, etc., prescribed by Dr. Clement.

Whether such conditions appearing in pregnant women are always accompanied by cardiac or renal disease, or by both, I do not know. These troubles were present in the second case. In the first the point was not determined.

#### TOXIC EFFECTS AFTER USE OF OIL MALE FERN (ETHEREAL) FOR TAPEWORM.

BY JOHN H. GRANT, M.D., FORT PORTER, BUFFALO, N. Y.,  
Hospital Steward, U. S. Army.

C. H., aged thirty-five, was a soldier in the Garza campaign on the lower Rio Grande in Texas during the winter of 1890-91, at which time he was often obliged to subsist in part on insufficiently cooked goat meat. As a result, he became the possessor of a *tænia saginata*. Outside of the few large towns in this part of Texas, defecation by the inhabitants (principally so-called *greasers*) is universally carried on in the open-air and readily accounts for the manner in which our patient became infected.

In 1892, an army surgeon treated him by the administration of oil of turpentine, which produced violent strangury and the passage of about sixteen feet of the worm.

In November last he was again treated with drachm doses of oil male fern (ethereal) (of an old stock some time on hand); but two doses were retained, aborting about eighteen feet of the entosoa.

March 1st the man requested further treatment; and a fresh supply of the male fern having been received (W. H. Schiefflin & Co., New York), an emulsion with acacia was prepared, each fluid ounce containing one and one-third drachms of the oil. The day previous the patient abstained from solid food, a saline cathartic being administered at sunset. The morning following, at 6.30 one ounce of the mixture was given, and at 8.30 a like quantity; at noon a dose of sal rochelle was taken, resulting in the expulsion of about eighteen feet of the parasite. About 4 o'clock the patient, on leaving the water-closet, fell to the floor and had to be carried to his bed. The writer being

then called, found the patient in a most pitiable condition — almost pulseless, skin cold, eyeballs protruding and staring, suffused with tears, the lids puffed and of a dark-brown color. Deafness was nearly complete in both ears, but the sight was not at this time affected. Patient was husky, suffered from a vise-like constriction of the chest, gasping for breath, and with a ghastly expression of despair. He appeared to be *in extremis*. As soon as possible whiskey (one ounce) was administered, and a sinapism applied over the sternum. In about five minutes the pulse could be felt. The other symptoms gradually disappeared, so much so, that in a half hour the case was considered safe. The feeling of chest constriction and of burning within the stomach lasted for a few hours; but a few ounces of milk and whiskey and particles of ice freely dissolved in the mouth, soon gave relief. The patient had dimness of vision and was very weak and nervous the day following, keeping his bed for two days.

There were two interesting points about this case. The first was the extreme depressant action of the male fern in what might be considered not a large dose.<sup>1</sup> It will be noticed that it was nearly eight hours after the second and last dose in this case before any alarming symptoms presented, and not until after the bowels had been moved several times. The second point was the thrice-repeated failure to bring away the head. Diligent search in the present instance failed to discover any traces, although a portion of the voided parasite was very narrow. Possibly the head is very securely imbedded beneath a fold of the *valvula conniventes* and protected from the direct action of the drug. The peristaltic action of castor oil might have secured the head, but owing to the disgust excited by it in the patient on previous attempts, an alkaline cathartic was prescribed instead.

### Medical Progress.

#### RECENT PROGRESS IN PUBLIC HYGIENE AND PREVENTIVE MEDICINE.

BY SAMUEL W. ABBOTT, M.D.

##### INFECTIOUS DISEASES, AND THEIR PREVENTION.

*Diphtheria*. — Dr. Thorne Thorne, chief medical officer of the Local Government Board of England, in a recent lecture upon Diphtheria, said:

"Bad sanitary conditions might have an influence, but they are overwhelmed by other conditions which cause the disease. . . . Diphtheria chiefly attacks children of school age, from five to fifteen and it is clearly proved that the disease is influenced by school attendance. Dr. Power has shown conclusively that, by an aggregation of children at school, you can deliberately manufacture a potency of diphtheria. The reasons for this are chiefly the special infection from the breath of those who are congregated together for any length of time, and the limited space set apart for the scholars. There is also the danger, at young ages, of children passing confectionery from mouth to mouth, of drinking from the same unwashed cups, the absence of ventilation, and other conditions."

He laid special stress upon infection through the medium of milk, and advised every one to leave off drinking raw milk. He also named the lower ani-

<sup>1</sup> Pepper, vol. ii, p. 941; Hand-book of Medical Sciences, vol. iii, p. 65, and vol. vii, p. 790.