CURRENT MEDICAL LITERATURE

MEDICINE.

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HÆMATEMESIS IN APPENDICITIS.

Hæmatemesis has been described in appendicitis by several French writers, but appears to have been almost unnoticed in this country. In his "Cliniques de l'Hôtel Dieu," 1901-02, Professor Dieulafoy devoted a lecture to "Vomito Negro Appendiculaire," in which he reported cases of appendicitis accompanied by abundant hæmatemesis, sometimes so severe that blood entered the air passages and suffocated the patient. All the cases were serious and many of them were fatal. As there were often also jaundice and oliguria, recalling the symptoms of yellow fever ("vomito negro"), he used the designation given above. He regarded the hæmatemesis as a manifestation of general infection or intoxication which lead to the production of small gastric ulcers. In the Gazette Hebdomadaire des Sciences Médicales de Bordeaux of March 8th Dr. J. Duvergey has described, under the title of "Les Petites Hématémèses de l'Appendicite," a form of hæmatemesis in appendicitis in which the hæmorrhage is slight and not of serious significance. He relates two cases. In the first case he was called in consultation on November 13th, 1905, to a man, aged 52 years, who had always enjoyed good health. On the evening of the 10th he began to feel abdominal pains, which on the 11th became localized to the right side. On the 13th the pain was increased and he vomited twice. The pulse was 90 and the temperature was 100.20 F. The abdomen was not distended and there was no cutaneous hyperæsthesia. On the right side the abdominal muscles were rigid and McBurney's point was tender. The vomit consisted of a slightly brownish liquid mixed with a little mucus, in which floated blackish filaments. Here and there and settled on the bottom were masses like coffee-grounds. Microscopic examination of the vomit showed red blood corpuscles for the most part deformed. Dr. Duvergey recommended expectant treatment, but knowing the gravity of hæmatemesis in appendicitis he was prepared to operate on the slightest indication. The hæmatemesis ceased and recovery took place in about eight days. On December 26th he removed the appendix, which was long, swollen at its extremity, and surrounded by adhesions. In the second case, a youth, aged 19 years, was seized on the night of July 31st, 1907, with violent colic all over the abdomen, but especially on the right side. On August 1st the pain increased and on the 2nd he was seen by Dr. Duvergey. The pulse was 120, the temperature was 103.20, and there