

ON SOME FORMS OF FUNCTIONAL
HEART DISEASE.

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(Concluded.)

I will endeavor to illustrate my subject, by quoting the following histories from my case book:—

Case I. J. McD., Oct. 27, presented the following symptoms,—anæmic, loss of appetite, prostration, with frequent attacks of dyspepsia, and excessive palpitations coming on at irregular intervals, usually at night after retiring to rest, on which occasions he would suddenly awake with a feeling of impending death, after which he would walk his room rather than return to bed, his pulse rapid and irregular, but not intermitting, heart sounds normal, its action irregular and the impulse weak.

He had been taking iron for some months without any signs of improvement. Finding his appetite impaired I gave him infus. of prunes ij 3, three times a day for a week. I chose the prunes in preference to the simple bitters, because it combines the qualities of a sedative or corrector of the heart's action, with that of a tonic superior to the ordinary bitters. After a time his appetite improving, he was able to take more nourishing food than he had been accustomed to, without disturbing the digestive function. The palpitations, &c., still continuing, I gave him *tr. ferr. chloridi* gtt , three times a day, from this time he continued to improve, his strength and color returned but the irregular action of the heart remained, it was more readily detected by listening to the heart than by the pulse, the latter having increased in volume and had nearly lost its jerky irregular beat, the systole was disturbed, there would be twenty or more rapid contractions a like number very much slower, and then an apparent loss or confusion of the systolic sound after which it would return as before. I now prescribed *strychnia* gr. $\frac{1}{4}$ three times a day with iron, and after continuing this treatment for six weeks the irregular action of the heart passed away gradually. This patient used tobacco and usually found his unpleasant symptoms increase after the use of the pipe, he was one of a class of persons who appear to be obnoxious to the use of this substance. I can assign no reason why such should be the case farther than, in practice we find some individuals who possess a peculiar idiosyncrasy which renders the use of tobacco injurious, and liable to produce in them various functional ailments.

Case II. C. W., says she has been losing her

health for some considerable time, but noticed that she has been getting very much weaker during the three months previous to consulting me, complains of shortness of breath and palpitation on making the slightest exertion. She appears robust, color good, has no appetite, menses regular, heart's action jerky and irregular almost impossible to fix the sounds, slight bellows murmur at the base, pulse weak, and interrupts every twenty or thirty beats, the treatment followed was the same, as in the former case, and the result was equally satisfactory.

The histories of the two cases given above are selected from among many of the same kind. I have introduced them as types of the affection under discussion, they may afford some useful hints regarding the treatment of this and other allied diseases.

It is the common practice to treat functional heart disease as well as simple anæmia, &c., with the preparations of iron.

Iron is believed to be the specific in such cases, this proposition may be looked upon as being correct but in entertaining it we may lose sight of the fact that in many instances the remedy is not absorbed, and is carried away with the evacuations without coming in contact with the blood, and we may go on administering it without deriving any benefit therefrom.

This may be instanced from the first case in which the patient had taken preparations of iron, for more than two months without any good result, on the contrary it sometimes caused disturbance of, and interfered with the digestive act, this I believe is not unusual; in my experience in the use of iron I have not seldom found it to be the case.

This non-assimilation of iron is doubtless, owing to impairment of the digestive apparatus, and we may obviate it by having recourse to a preliminary treatment with bitter tonics which will prepare the way for the assimilation of the more active remedy.

Another point worthy of notice is, that large doses of iron are not required, the quantity of this substance in healthy blood is not large and the amount to be supplied to it in its diseased state cannot be very large; if then we take into account the length of time which is required for an anæmic person, to add sufficient of this substance to his blood to bring it to a healthy state, we must conclude that the amount absorbed from each dose is very small in quantity.

Taking this as a rule we must conclude, that only a given quantity is assimilated at any one time, hence it is obvious that if a quantity be given greater than is required, the excess must be thrown off as useless, and its introduc-