

CASES IN PRACTICE.

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CASE 1. EMPYEMA.—This according to authors may be true or false; true when the pus is secreted by the pleura, and false when it results from the bursting of an abscess of the lung into the cavity of the chest. In quantity it varies from a few ounces to many quarts, filling the entire cavity of the chest, in quality the pus in true empyema, varies from a genuine laudable pus, to a sero-purulent fluid, whilst in false empyema, it partakes more of the expectoration present.

I had a little patient some time ago, who proved very interesting on account of the disease mentioned above. He was about eight years of age. He was attacked with Pneumonia of the left lung, and was attended by Dr. Sproul of Markdale, who likewise consulted with Dr. McGregor of Chatsworth. The case received the utmost care and attention, but convalescence failed to be established, and the lad became gradually worse. Great pain over the pubes with difficult micturition set in. I was called merely to give relief, to permit him to die quietly, the other gentlemen's services having previously been dispensed with. I found the little fellow labouring under severe strangury arising from the effects of Emplastrum Cantharides, which had been applied to the chest. Using the usual remedies—sedatives and demulcents—he was soon relieved.

About two weeks after this, or the 26th day of June, when I made merely a friendly call, I noticed a bulging of the left side of the thorax, and an apparent pointing of an abscess below the nipple a little anteriorly. Not having met with such a case in my practice before, I was at a loss to know what to do. The pulse being about 150, respiration rapid, with cough and emaciation, the symptoms generally hopeless, my first impulse was to let him alone, without any attempt to relieve him. I had an instinctive dread to perform paracentesis, lest by the introduction of air to the cavity of the chest, I should but hasten the impending dissolution. I had read Dr. Oldright's article in the April number of the *Lancet*; his cases were interesting and instructive, and rather strengthened my