

IODIDE POTASSIUM IN SPASMODIC ASTHMA.

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Although iodide potassium is well known as a remedy for spasmodic asthma, it is a remedy which seems to be held in very varying estimation. Some authorities speak of it as a specific, others say it is worth a trial, others do not mention it at all. I have 36 cases of asthma treated by me, as out-patients, with this drug. All of them displayed, though with varying severity, the cardinal symptoms of the disease, viz., difficulty of breathing, coming on suddenly, usually in the early morning during sleep, passing off after a time so as to leave the patient comparatively well, but recurring usually in a regular fashion, and at regular intervals.

Whatever be thought of the pathology of the disease, its existence as a symptomatic entity is undoubted. And I think that inferences concerning the effect on it of a simple drug like iod. pot. may fairly be drawn from outpatient practice; for (1) though the physician may not witness the spasm, the sufferer is as well qualified as any one to tell of its frequency and severity, and (2) the patient is treated without change of his every-day surroundings, a change which frequently is of itself sufficient to modify this disease.

I have endeavored to classify the cases as follows:

[The writer gives several pages in tabular form showing result of treatment, etc.] Asthma for the most part uncomplicated. Asthma with bronchitis or emphysema; the relation between the two being doubtful. Asthma with secondary emphysema. Asthma secondary to bronchitis or emphysema.

But unless the disease be watched from the beginning and over a length of time, and the physician be able to examine the chest both between and during the spasms, it is difficult to say into which category a case should go.

The iodide was given alone, or if in combination only after the effect of the uncombined drug had been watched. It proved a failure in nine out of the 36 cases, i.e., only in 25 per cent. Its good effects (with a limitation to be mentioned presently) were not limited to the uncomplicated cases. The cases where the asthma appeared to be distinctly secondary to chronic lung disease are indeed too few to say much about; but in some of them at least it did good. The symptoms most amenable to the drug were certainly the nocturnal attacks of dyspnoea; its effect on them was often remarkable; thus in many cases they disappeared altogether; in others they were much reduced in frequency and severity. But a troublesome cough, or certain shortness of breath on rising in the morning, often persisted. That the nocturnal attacks were really controlled by the iodide was shown by the fact that they recurred (in many cases) whenever the drug was stopped. It has therefore the effect of relieving rather than curing. Five or 10 grains three times a day suited best in most cases; in some a larger or smaller dose did better. In some an increase of the

dose did good for a time, but the effect seemed to wear off.

The condition of the nasal mucous membrane contributes, it is said, to the production of asthmatic attacks; and iodine might therefore be thought to act by producing coryza; but coryza occurred in very few of the patients thus treated. In one case the attacks had been preceded by coryza, and they were nevertheless stopped by iodide.

Syphilitic taint has never, so far as I know, been alleged as the cause of asthma. In one case the substituted mercury for the iodide, and a relapse immediately followed.

The gouty diathesis is an undoubted cause of asthma, and iod. pot. is known to be useful in cases of gout. But the promptitude of its effect on spasmodic attacks of asthma, and the promptitude of the relapse when it is stopped, makes it unlikely. I think, that it acts by modifying the general condition of the patient.

I believe that its action may be fairly compared to that of bromide in epilepsy. The chemical similarity of the drugs is obvious. There are similarities also between the two diseases; both are characterized by attacks which recur periodically and often with considerable regularity, and which leave intervals of tolerable health. Epilepsy often begins in the night, as asthma does still more frequently. Asthmatic attacks may be preceded by a kind of warning. Both diseases are probably due to some fault in the central nervous system, though in both extrinsic causes may determine an attack.—*Practitioner.*

HYDROCHLORATE OF COCAINE IN THE VOMITING OF PREGNANCY.

Weiss of Prague, has used this remedy successfully in a case of vomiting in pregnancy which had resisted all previous attempts at relief. The patient was weak and anemic, of a nervous disposition, and had suffered in three different pregnancies from persistent vomiting; in the present pregnancy her condition was serious. Weiss prescribed:

R Hydrochlorate of cocaine.....gr. ij
Alcohol, enough to dissolve
Water..... 5 v.

S: One teaspoonful every half hour.

After the sixth dose three tablespoonfuls of milk were well borne; after the eighth, a cup of broth with egg, without vomiting. After the sixteenth dose the patient ate with relish chicken broth, slices of white chicken meat, and drank a glass of wine without vomiting. The drug was then withdrawn for a time, owing to an increased frequency of pulse and respiration; but hourly doses were subsequently given, with the result of entirely checking the vomiting and enabling the patient to regain her former strength.—*Edinburgh Medical Journal.*