

Hospital Reports.

MEDICAL AND SURGICAL CASES OCCURRING IN THE PRACTICE OF THE
MONTREAL GENERAL HOSPITAL.

Case of Acute Tuberculosis.—Under care of Dr. REDDY:—
Reported by JAMES BELL, M.D., Asst. House Surgeon.

J. F., aged 40, a large, well-built Englishman, was admitted on the 13th of May, complaining of cough and pain in the chest. He was also delirious and unable to give any reliable account of himself. From his friends it was learned that he was a very hard drinker, had had *delirium tremens* several times, and had also had several attacks of acute illness, with lung symptoms. The nature of these attacks could not be determined. He was a machinist, and, when sober, a hard-working man. About four weeks prior to his admission to hospital, he had been drinking very hard, and was obliged to give up work. He became somewhat delirious, especially at night. This was looked upon as the natural result of his spree, and little attention paid to it for some days. He had nothing more to drink, but remained delirious at times, and was very despondent.

About four or five days before his admission he became much worse, was feverish and complained of cough and pain in his chest. On admission his temp. was 103° F.; pulse, 108; resp., 30. He complained of a good deal of pain in the chest, but could not localize it. His expectoration was viscid and rusty. He was given chloral grs. xx, pot. bromid. ʒi, as he was delirious and could not be kept in bed. He was quieter after the draught, but did not sleep.

On examination, there was found to be dulness on percussion over upper lobe of right lung—slight in front, but more marked behind.

There were dry bronchial râles and fine, moist râles to be heard all over both lungs. In the right infra-clavicular and scapular regions (the dull area) there was fine crepitation, and the breathing almost tubular over the rest of the lung. Fine crepitation was also heard over a limited area at the base of the