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MULTIPLE NEURITIS FROM ARSENICAL POISONING.

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Thos. S., æt 58; followed no special occupation: personal and family history good.

In April, 1889, a tumor appeared behind the ramus of the jaw on the left side. It grew rapidly, and early in May was as large as a hen's egg. He consulted a so-called "cancer doctor," who applied a plaster, leaving it on for two days, and then a poultice for two more, and so on for about two weeks. These applications, the plaster especially, caused great pain. Before the end of the two weeks' treatment he found his legs becoming stiff and numb, with painful sensations shooting through them. In a few days he was unable to walk. The hands became affected also, and he could make little use of them, soon becoming unable to feed himself on account of the numbness and weakness, as well as of some inco-ordination in them.

He entered the Toronto General Hospital under my care June 29th, 1889. The legs were then almost completely paralyzed, the muscles being wasted and soft. He complained of great pain in the legs and feet, especially at night, an opiate being necessary to secure sleep. Anæsthesia in them was very marked, but they were acutely sensitive to painful impressions as, e.g., drawing the finger nail along the sole of the

foot, or pinching the muscles of the calf. Cold was easily perceived, but heat was not felt except when great, and then gave the sensation of cold. Kneejerk and other muscle reflexes were absent; likewise superficial reflexes. With the eyes closed he was not conscious of the position of the legs. To the faradic current there was no response in the feet or legs, and only a weak contraction in the thighs; none also in forearms and hands. There was no wasting of forearms and hands, but much anæsthesia and weakness with some inco-ordination. He could not pick up small objects without looking to see if he had hold of them. The skin everywhere was dry and showed a tendency to desquamate; the soles of the feet were scaling very freely. He said he had had no rash. The legs were deeply pigmented. There were no bladder or bowel symptoms. Appetite and general nutrition were fair. On the left side of the neck below the ear was a circular slough  $1\frac{1}{2}$  inches in diameter; it was beginning to separate.

He was given ʒss daily of potassium iodide, and the bowels kept open by salines.

He slowly improved, and was able to stand alone by September. He is now able to walk a little, but, chiefly on account of the anæsthesia, he still needs the aid of his eyes to enable him to maintain his equilibrium. The calf-muscles have lost their atrophied appearance and become quite large and firm. He can now easily tell the position of the legs. The extensor muscles are still weak, and there is therefore a