

THE DEFINITE TREATMENT OF PNEUMONIA:

WITH A REPORT OF THE GERMICIDAL POWER OF QUININE AND
OTHER CINCHONA DERIVATIVES UPON PNEUMOCOCCUS CULTURES
in vitro.

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(*Author's Abstract.*)

CLINICAL.

For generations quinine has had a traditional, empirical reputation as a potent agent in the treatment of lobar and lobular pneumonia and similar maladies. Systematic employment of the drug according to a definite plan, for a period of twelve years—thus during seasons of varying meteorology and epidemic virulence—has given abundant evidence of the correctness of this tradition.

In many of the cases so treated recovery would probably have been as certain without the drug as with it; but in no case did it prevent recovery, and in a large number it averted death. Some patients in the author's service do not receive it. As a rule, however, the initial dose is given on admission, and repetition is determined by circumstances. In those cases which give no indication for repetition of the dose, recovery is practically invariable. In the severer cases—those calling for repeated doses—mortality has been greatly reduced even among alcoholics and derelicts; and the clinical picture is commonly changed from profound distress to comparative comfort, not only in cases of happy ending, but also in the fatal ones. In other words, toxemia is overcome or minimized. Thus cough is not troublesome, delirium and insomnia are much less frequent, and respiration, even when rapid, is not labored in anything like the ordinary degree. Hence the use of hypnotics, of sedatives and of oxygen, is rarely called for. The best results are observed in patients seen not later than the third day of overt symptoms—which may be the seventh or tenth day, or even later, of actual disease—and in those less than fifty years of age; but surprising recoveries are met with in late cases and old persons.

Presented by invitation at the meeting of the Ontario Medical Association, June 1st, 1916.