

THE
CANADIAN PRACTITIONER

FORMERLY "THE CANADIAN JOURNAL OF MEDICAL SCIENCE."

EDITOR:

A. H. WRIGHT, B.A., M.D. Tor., M.R.C.S. England.

Business Management,

The J. E. BRYANT COMPANY (Limited), 58 Bay Street.

TORONTO, FEBRUARY 17, 1890.

Original Communications.

EPIDEMIC INFLUENZA.

AN ABSTRACT OF CLINICAL REMARKS DELIVERED AT THE TORONTO GENERAL HOSPITAL.

BY A. M'PHEDRAN, M.B.,

Lecturer on Clinical Medicine in the University of Toronto.

In the present epidemic of influenza, which is gradually lessening, there has been great variety in the symptoms presented. The symptoms may be conveniently grouped under the following heads, viz.: 1, febrile, 2, nervous, 3, catarrhal, 4, gastro-enteric. Febrile and nervous symptoms were present to a greater or less degree in all cases probably: a few may have been apyretic, but I have met with none in which there were not some nervous disturbances. But in many cases there were no catarrhal symptoms, and only in a comparatively small proportion of cases were these symptoms very severe. Gastro-enteric disturbance occurred in several.

This case of A. T., aged 30, presents a good illustration of the group in which there were only febrile and nervous phenomena present. He awoke in the morning feeling sore all over, as if from over-work. The soreness was most marked in the lower dorsal region, and by evening was so severe that breathing was extremely painful, there being a feeling of much pain and tightness around the chest. During the night the temperature rose to 102° , with frequent flashes

of heat, followed by chilliness, dizziness and sleeplessness. There was no frontal pain, sneezing, coughing or nasal symptoms. Free perspiration was induced, but without any rapid relief to any of the symptoms. The temperature fell to normal next day, and the pains rapidly abated, so that he was able to return to business in the afternoon, though he was sore and stiff for a day or two. The appetite was good throughout, and no prostration followed. In many cases quite as mild as this the appetite failed, and there was in some very great prostration, so great in a few that syncope occurred even while quietly in bed. In some the pains were extremely severe, and assumed a periodic character, coming on at a certain hour every day, and lasting an hour or two, or perhaps all night. In some of them the pain was frontal, even in the absence of any other evidence of implication of the frontal sinuses: in others, the pain was in the sides, the back, the thighs, or the abdomen. In most of these the pains were difficult to relieve, and only disappeared slowly, under rest, good nourishment, and tonic treatment.

The fever rarely lasted longer than from one to three days, a continuance of it being probably due to some complication as bronchitis or pneumonia. The temperature rarely rose higher than 102° or 103° ; occasionally to even 105° .

Sleeplessness has been a troublesome feature in many cases, some not obtaining any sleep for 4 or 5 days.