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Some Observations upon Scarlatinal Pleurisy and upon Thoracentesis in that affection. By R. P. HOWARD, M.D., L.R.C.S.E.; Professor of Theory and Practice of Medicine, McGill University.

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It is well known to practical physicians that acute pleurisy is, in children, a rare affection, as compared with its frequency in adults; it is even more rare as a complication of the eruptive fevers. Having, in the year 1864, during the prevalence of Scarlatina, met with several cases in which acute pleurisy supervened during the course of that fever; and as the complication is a serious one; as the inflammatory products appear generally if not invariably to differ from those of ordinary pleuritis; as the subject has not attracted the attention that it merits; and as the cases suggest some points of practice, I have ventured to bring them before the Association.

Case I.—A pale, delicate girl, of 8 years, took scarlatina anginosa in the latter part of March, 1864. The case was severe; both ears discharged pus, and her nose bled profusely, at intervals, for two or three days; so that I feared she would sink. About this time she complained of pain in the left breast, and on examination the left side proved universally dull, the respiration absent, the intercostal spaces filled up smooth and widened, and the heart displaced to the right nipple. She had had slight pain in the right side for a short time previously.

Recognizing the presence of pleuritic effusion a generous diet, sinapisms to the chest, and a mixture of iodide of potassium and bark were prescribed. Soon after, the Unguent, Iod. Pot., was rubbed in three times a day. I ought to have mentioned that about the time of discovering the pleuritic effusion the left lower extremity was œdematous and that the œdema extended up to the