

Medical Department after the war, because they have had to meet so difficult a situation with such inadequate resources that it is impossible that there should not be particular instances where the machinery has broken down. A captious critic could quote cases of an overfilled, undermanned hospital without medical necessities in one place, or of hardships endured by the sick and wounded in another. How can it be otherwise when a Department which is sufficient for the needs of two army corps has to provide for the wants of 200,000 men with typhoid raging among them? Taking it on the whole, the Department has been well organized and well worked, and has met an unforeseen and exceptional state of things with remarkable success.

A CASE OF PNEUMONIA TREATED WITH ANTIPNEUMOTOXIN.

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CLINICAL HISTORY.

I was called on December 20 to see E. T., twenty years of age, who worked in the moulding-room of a large stove factory. He had an attack of pneumonia five years ago. His present illness began on the 18th, and may have been in a measure due to his having worked all day (on the 16th) in wet clothing.

The attack began with a chill on the 18th of December. When seen at noon on the 20th he was in bed, with cough and pain in the left side. He expectorated a large amount of rusty sputum, and had a temperature of 104°, pulse 120, and respiration 24. The physical signs were, increased vocal fremitus, bronchial breathing and dullness on percussion over the lower lobe of the left lung. The crisis apparently occurred on the 24th. Up to this time the patient had been treated with alcohol and digitalis, with one or two doses of morphia to quiet pain. On Christmas day, feeling very much better, the patient most imprudently left his bed, dressed and went into the yard.

On the 26th I found him in bed delirious, with a temperature of 104°, respiration 56, and a pulse that could not be counted. The pain was severe on the right side, and the physical signs were those of consolidation of the right lower lobe. At 6 o'clock in the evening his temperature had risen to 105°, his pulse was still uncountable, and his respirations were 56 to the minute. At this visit I injected 12 c. c. of antipneumotoxin. In three hours his temperature fell two