

ACCIDENTS OF THYROID INSUFFICIENCY.

Autoinfections.—Those with hypothyrea fall an easy prey to infections of the mucous membranes; pharyngitis, tonsillitis, peritonsillar abscess, herpes, etc., are common with these subjects. Heredity appears to play a prominent part and especially in those who suffer from tonsillar affections, and in these there seems to be a remarkable periodicity.

Periodical Autointoxications.—Migraine should draw one's attention to the possibility of hypothyrea, for it is often of thyroid origin. It is found most frequently in females, but also in males, and may appear as early as nine years or as late as thirty-five. The migraine is paroxysmal in character, and often associated with vomiting and nausea as to force the patient to his bed. Here, again, one should search for other signs of hypothyrea. Vomiting without apparent cause is seen to occur in the mornings; this and also the periodical vomiting of infancy are often of thyroid origin, as the happy effect of the treatment has shown. Urticaria and pruritis are frequently observed in these patients. Hertoghe has shown that thyroid medication possesses an inhibitory action on the menstrual flow, and is indicated in some cases of metrorrhagia. The pain which often accompanies menstruation in these cases is greatly lessened. They give as an example a young lady of twenty-three years who had suffered for ten years and who now passes her periods without any discomfort. In those suffering from hypothyrea the medication exerts a great influence on their moral natures. Attacks of anger, sadness, enervation, nervous excitability, also vertigo, diarrhea, palpitation, disappear with treatment. Thyroid insufficiency is often a family disorder and hereditary, as are some of the symptoms which accompany it, such as constipation and the sign of the eyebrow. Sometimes it is manifested by a morbid temperament rather than by any distinct disorder.

Recognizing actual minor signs and symptoms of hypothyrea, let us endeavor to make a diagnosis in order to give proper treatment. One should always examine the urine, as a certain number of manifestations of hypothyrea are also noted in autointoxications of a different origin. Many times in a well known case, side by side with well recognized symptoms are others which appear to conflict with the diagnosis. Thus, instead of constipation we may have diarrhea, insomnia in the place of somnolence. A third may have the eyebrows well developed. In reality this is often the case, and justifies the theory of dissociation of the thyroid functions, or they may be