

BRITISH AMERICAN MEDICAL & PHYSICAL JOURNAL.

VOL VI.—No. 12.]

APRIL, 1851.

[NEW SERIES.]

ART. LVII.—*Case of Gangrenous Abscess of the Lung, caused by a foreign body,—with some remarks. By V. G. BROWN, M. D., Staff Surgeon, Amherstburg, C. W.*

Early last January, I was summoned to see Miss D., aetat. 21, the daughter of a half-pay officer residing in this town. She had been suffering since a few days before Christmas, from a short, dry, harassing cough, which disturbed her especially at night. It was accompanied by short fits of weakness, approaching almost to faintness. She had no expectoration with the cough, neither did she experience the slightest degree of pain in any part of the chest, on the deepest inspiration. The only pain she felt was in the throat; she complained of a slight difficulty of deglutition; there was a faint erysipelatous redness of the back of the pharynx and tonsils. She said that a few days before Christmas, while eating some broth, a small piece of bone had gone the wrong way. At the time, it caused her a good deal of uneasiness, but that she thought she had coughed it up again; ever since she has suffered from the cough. A careful examination of the throat was made, but no traces of the presence of any foreign body could be discovered in the larynx or trachea. Conceiving that in all probability the bone had left behind it some source of irritation which gave rise to the existing symptoms, a palliative treatment was decided on; the throat was well-washed with a solution of nitratis argenti grs. xxx ad ℥i; an astringent gargle, and a sedative cough mixture were prescribed. This treatment was persevered in for some days, with benefit; the cough nearly ceased, and she was comparatively speaking

easy, until the 14th, when the cough suddenly returned with fainting fits, accompanied with pain in the right side under the mamma; she was unable also to lie on that side; the pulse was quick and weak; skin hot; tongue foul; expression of face indicative of one laboring under pneumonic inflammation; expectoration scanty and very viscid in character. On a stethoscopic examination of the chest, the left lung presented nothing abnormal, neither did the upper part of the right; but the whole of the anterior, lateral, and posterior regions of its middle and lower lobes, elicited a perfectly dull sound on percussion; a fine crepitus also existed from below the mamma as far as the bottom of the lung—the sounds of the heart were distinctly audible all over this region, and she was laboring under considerable dyspnoea. A large blister was immediately placed on the affected side, to be dressed with ungt. hydrarg. and cal. grs. ij. tart. antim. gr. ½. and pulv. opii. gr. ½, every 3 hours, ordered. This was continued till the night of the 16th, when she was suddenly seized with a violent fit of coughing, almost approaching to suffocation; this was speedily followed by the most profuse expectoration; muco-purulent in character; of a dull ash color; and of such an insufferably fœtid stench, that it was almost impossible to remain by her bedside; the most distant parts of her room were pervaded by the horrible factor, which was painfully distressing and nauseating to the unfortunate sufferer. I saw her soon afterwards, and examined the affected side. Perfectly distinct, cavernous breathing with gargouillement and pectoriloquy, were discovered on the seat of the crepitus; the pulse was quick and weak, 140; face indicative of great