

for the little fellow, *resulting in changing the blood* to a bright scarlet in the wound in the neck, and causing the *return of auto-respiration*. I had proceeded with the operation, and found it necessary before I completed it to repeat the respiratory work with the forced respiration apparatus some six or seven times, in some instances having to respire quite a little time before auto-respiration was re-established. This is a peculiarly interesting fact, associated with the question of interference with respiration through exudates in the respiratory tract, that it is possible (it may be for a short time only, and at other times save life) to retain the life of a patient, breathe for him, and tone up the system so as to enable auto-respiration to be carried on. I completed the operation and placed the tracheotomy tube in the trachea, and found it necessary before consciousness returned to respire for the lad for some time. He became conscious and breathed easily, apparently with very little trouble, for quite a period of time. The general treatment directed was the application to the throat and nasal passages of the peroxide of hydrogen, about 30 per cent. aqueous solution. The father was directed to use this with the spray apparatus occasionally in the wound in the neck if he found it necessary. The afternoon of Sunday revealed the condition the same as that which existed after the operation in the morning. The boy was moving around the house, although the respirations were at all times more or less labored. In a little while the inner tube of the tracheotomy tube would close up with the exudate, and would frequently require cleansing. The father said to me that if he would follow my directions, to merely spray lightly the wound in the neck, his boy would probably have been asphyxiated. He said he found it was necessary to place the tube of the spraying apparatus in the neck or in the tracheotomy tube, frequently to prevent the cyanotic condition from ensuing. He said: "The spray seems to liquify the membrane or the matterly substance, and it comes away in a sort of foamy, frothy state." During the afternoon the condition became worse, the membranes filling up the trachea apparently, so that Dr. Colton, who was present, applied the forced respiration *through the tracheotomy tube*, again relieving the little patient from

the severe dyspnoea which prevailed at the time. Sunday night the case progressed about the same, frequent resort having to be made to the peroxide of hydrogen to enable the little fellow to get along at all. On Monday and Tuesday, membranous casts of the tubes and trachea were coughed up and passed out of the tracheal opening. The boy retained his vigor under adverse conditions existing until Tuesday afternoon, when the exudate seemed to be increasing and interfered with the respiratory efforts, which conditions could not be overcome even by the forced respiration apparatus, and about 11 o'clock Tuesday evening the patient died from exhaustion and heart failure.

It was very clearly evidenced in the case of the boy that he would have died before I could possibly have performed the operation of tracheotomy had it not been for the forced respiration apparatus. How many cases of a serious character might be benefited, or have life retained, by such work and tided over the most serious results, cannot be foretold. It is unreasonable to assert that some patients may not recover who are as seriously sick as was this young boy.

#### FITCH ACCIDENT HOSPITAL CASES.

The following cases took place at the Buffalo Fitch Accident Hospital which had been supplied with one of my emergency cases. I was not present at any of them, and am obligated to Drs. John Paramenter and E. L. Ruffner of the hospital staff for the information regarding them. Dr. Ruffner stated that all the cases saved would have proved fatal without the use of forced respiration.

No detailed reports of these cases were kept, so that the reports are wanting in many interesting particulars. The variety of cases in which the apparatus was used with success indicates in part its wide range of application.

It was used in cases of carbonic oxide, opium, cocaine and chloroform, "rough on rats," and cocaine poisoning; in drowning, case of internal injury from house falling on a man, injury to base of brain, ether narcosis, etc.

#### CASE XXIX.

September 10, 1892. Opium narcosis. Mr. B. The Fell Method failed to resuscitate.