

SELECTED ARTICLES

AN INTERESTING CASE OF ACUTE BRIGHT'S DISEASE

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Saturday evening, June 29th, Dr. H., of this city, attended an entertainment and sat in an open window, with a draught blowing directly on his back. He was suddenly taken with a violent "cramp" in his neck, along the course of the sternocleido-mastoid muscle, but thought nothing more of it. The next day, while attending to his duties, he was seized with a malaise, and upon taking his temperature he found it to be 103° F. He immediately went home and to bed, first having taken a dose of quinine hydrochloride. The doctor having suffered for some years with external and internal piles, which were easily replaced in the rectum, found that after having taken a small dose of calomel he could not replace the piles as usual, and that they were much swollen and enlarged. He sent for a physician to do something for them, at the same time telling the physician of his temperature and malaise. The physician immediately prescribed five grains of salol to be given every two hours, and injected the external piles with pure carbolic acid. The next day the patient was suddenly taken with heart failure, and the attending physician was immediately sent for. He came some hours later, and found his patient very much collapsed and with no pulse at the wrist. With hypodermic injections of digitalin and strychnine he succeeded in a few days in bringing the heart almost to its normal state, the temperature subsiding to 101° F. The patient now noticed that he was having some difficulty in passing his urine, that it came in small quantities, and in a short time he was compelled to use a catheter, which he had no trouble in passing, but only getting about a teaspoonful of urine. Simultaneously with the absence of urine the patient complained of great itching in the piles. The itching spread all over his

body, and upon examination of his body the skin was found to be covered with an eruption resembling very much the eruption of urticaria—large red wheals and blotches—which itched very much. To relieve the itching of the piles the patient placed thereon a piece of gauze saturated with a strong solution of cocaine and took a hot bath, which brought a flow of urine, the eruption of the skin disappearing at the same time, but the heart failed rapidly from the effects of the cocaine, and the patient was thought to be dying. The attending physician again administered the digitalin and strychnine and the heart returned to almost a normal condition, but the patient still suffered alternate attacks of lack of a diuretic flow and the eruption, which at first left petechial spots after disappearing.

On Friday evening, July 16th, I was called in, and upon questioning the patient got the history related above. I found him suffering from the eruption, and was told that he had passed only about three or four ounces of urine in the past twelve hours. The hands and ankles were swollen and the eyelids puffed. He complained of headache, backache, flashes of light from the eyes, and dizziness, and I immediately made a diagnosis of acute nephritis, taking a specimen of the urine with me, but prescribing five-grain doses of acetate of potassium, to be given every three hours, and a tablespoonful of the infusion digitalis, three times a day. I then went to my office and examined the urine. It was highly loaded with albumin and contained about a quarter of 1 per cent. of sugar. Upon visiting my patient that evening I found that the eruption had disappeared and that he had passed considerable urine voluntarily. I then prescribed a milk diet, hot baths, and a hot-water bottle over the kidneys, and substituted ten drops of the tincture of juniper berries for the potassium acetate.

Saturday, July 17th.—Upon seeing my patient I learned that he had had a good night and had passed about 35 ounces of