

PLEURISY AS ASSOCIATED WITH TUBERCULOSIS.*

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IN the medical literature of pulmonary diseases, for decades before the discovery of the tubercle bacillus, there are to be found many evidences, if not of an assured faith, at least of a strong suspicion, that there exists a special relationship between pleurisy and tuberculosis—the latter being an exciting or predisposing cause of the former. Clinical experience and pathological research were too strong to allow the very frequent association of these diseases to pass as a mere coincidence.

The discovery of the tubercle bacillus in 1882 gave to bacteriology the mission of establishing the true relationship that exists between these diseases, and the years that have intervened since then have been utilized for this purpose. Three lines of investigation have been systematically followed: (1) Microscopical examination of the exudate in pleurisy—bacilli have been found in the exudate as well as in cultures made from it. It is true that the serous exudate is often sterile, even in cases of assured tuberculosis, but this fact in itself is now looked upon as being suspicious of a tubercular origin since numerous bacteria are to be found in the exudate of pleurisy due to cold, traumatism or other non-tubercular causes. The bacilli are to be found not only when the exudate is serous but also when it is fibrinous or purulent. (2) *Inoculations*.—The results obtained by this test—when a fairly large quantity of the exudate has been injected—have been of the most positive character. Experiments on guinea-pigs have given results such as the following: Where a tuberculous exudate was used, 50 per cent. of positive results were obtained. In cases where the pleurisy was attributed to cold 40 per cent. of the animals became tuberculous. In cases where the pleurisy was evidently due to other causes, *e.g.*, traumatism, pneumonia, etc., the results were negative. In one experiment the inoculations were made from fifty-five cases of pleurisy and 85 per cent. of the animals developed tuberculosis. In fifteen cases of pleurisy in which the tuberculin test was used 87 per cent. of these gave the general and local reaction. (3) *Clinical Evidence*.—Here also the evidence that a very large percentage of the cases of pleurisy are of tubercular origin seems indisputable. In recent text-books on the practice of medicine and in medical journals series of cases have been published, such as these: In fifty-seven cases of pleurisy twenty-one died of tuberculosis within ten years. In one hundred and thirty cases of primary pleurisy 40 per cent.

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