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NOTES OF FIVE CASES OF PHLEGMASIA DOLENS—WITH TREATMENT.*

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In speaking of the progress of Phlegmasia Dolens, Playfair says: "After the acute stage has lasted for a week or a fortnight, the constitutional disturbance becomes less marked, and the pulse and temperature fall, the pain abates, and the swelling and tension of the limb now begin to diminish, and absorption commences. This is invariably a slow process; it is always many weeks, and it may be many months before the effusion has disappeared."

In speaking of the treatment, he says: "What has been said of the pathology of the affection, tends to the conclusion that active treatment of any kind, in the hope of curing the disease, is likely to be useless; our chief reliance must be on time and perfect rest," etc.

It is in view of these statements that the following notes are submitted to the Association:

Mrs. S., confined June 10th, 1887, labor protracted and terminated by forceps, considerable *post-partum* hæmorrhage. Did fairly well till June 18th, eight days after confinement, when she had a chill, followed by fever and sweating; for this quin. sulph. was prescribed. On June 22nd, twelve days after confinement, she began to complain of pain in left knee and groin; temperature 102.5°, pulse 106, also more or less stiffness and pain in all the extremities. In the previous April she had suffered from a mild attack of acute inflammatory rheumatism, which yielded promptly to soda salicylate. Her own impression was that she was now attacked in the same way, and had

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a return of her rheumatism. I was in doubt myself as to the exact nature of the trouble, though some tenderness in the iliac veins, and also in the popliteal spaces, made me suspect that phlegmasia dolens was the trouble. I ordered a cathartic of magnes. sulph. and infusion of senna, as the bowels were constipated, and soda salicylate in the following prescription:—

R—Acid. salicylic, ʒ iij.
Sodæ bicarb., ʒ ij.
Aquæ, ad., ʒ vj.M

Sig.—Two teaspoonfuls in water every three hours till sweating freely, then every four or six hours.

June 23—Pain not any worse, swelling in whole left thigh, and distinct tenderness along course of femoral vein, also pain in calf, which was slightly swollen; pulse 90, temperature 100° F. The disease was now undoubtedly phlegmasia dolens and not rheumatism; sweating very profusely; ordered the salicylate every six hours.

June 25—General condition much the same; the limb more swollen, tender and red along course of large veins; ordered salicylate every three hours, as it seemed to be controlling the pain and fever. Right limb showing signs of the disease.

June 26-28.—Continued much the same, except that swelling was less. Fever gone in the mornings, pulse 70° to 80°; salicylate continued at greater or less intervals as the sweating was more or less profuse.

June 29.—Patient was decidedly worse, swelling and pain had set in more severely in right calf and thigh. Temperature 103.4°, pulse 115; swelling, pain and tenderness in left limb abated. From this I judged that the salicylate might be doing some good, and continued it every three hours till profuse sweating or head symptoms supervened, when the time between the doses was lengthened to four or six hours.

June 30—July 3.—The symptoms in the left limb had nearly disappeared, nothing but stiffness remaining. The right limb, the second one attacked, was also much improved, no pain of any account being present except when the limb was moved. The characteristic white color was never so marked in this limb as in the first.

July 6.—The fourteenth day of the disease, the patient was much improved, some stiffness