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SUCCESSFUL CASE OF TRACHEOTOMY IN DIPHTHERITIC CROUP.

At the meeting of the Medico-Chirurgical Society of Montreal, held on the 30th of Oct., last, Dr. John Bell read an account of a successful case of tracheotomy, the subject of which was a boy two and a half years old, rather delicate, who had a year before suffered from a severe attack of bronchitis, and who, at the time, was suffering from diphtheria. The boy began to be ill and feverish on the 20th September. Having complained of difficulty in swallowing on the 24th, his throat was examined, and white membranes were found covering both tonsils and extending up the pillars of the fauces. The treatment he was subjected to consisted of tincture of iodine locally, together with a sulphite of soda, sulphurous acid and glycerine wash, and also the administration of the citrate of iron and quinine. The extent of the diseased surface increased until the first of October, when dyspnoea began. Poultices were then applied to the throat and carbolized steam was constantly produced near the bed. His strength was kept up by means of milk, meat broths and brandy. On the 3rd the dyspnoea and cyanosis having become extreme, chloroform was administered and tracheotomy performed by Drs. Bell and Roddick. Respiration had ceased before the tube (Durham's) was introduced, but was soon restored by artificial efforts. The usual improvement in the color and appearance after the operation soon took place. The tube was kept free from blood and mucus, both by the vigorous blowing of the little patient and by the introduction of feathers. A stream of strongly carbolized steam was directed against a moist sponge placed over the mouth of the tube, and this was kept going con-

stantly until after the removal of the tube. The local treatment of the throat was continued until the membranous patches had entirely disappeared. On the 6th the tube was removed for the first time, and washed, the opening remaining patent in the meantime. On the 9th the patient was able, on the edges of the wound being held together, to force a small quantity of air through the larynx. On the 10th, considerable congestion of the back and base of the right lung was discovered, accompanied with blood-stained sputa. This, however, gradually resolved under simple treatment. The average range of the pulse, respiration and temperature during the time the tube was in the trachea was: P. 125, R. 34, T. 99.6. Nothing further worthy of note occurred in the history of the case. The tube was left out altogether on the 19th, after which the wound soon contracted and healed over, the voice also returning without any serious defect in character. Some irritability of the bronchial mucous membrane, especially on exposure to draughts, remained for some time. The boy has since remained well, and quite recovered his former degree of plumpness.

On the 16th of October, his sister, aged five, years, who lived on the same flat, took the disease in a well-marked form, and also his mother on the 15th, with severe initial symptoms. The little boy had a diphtheritic patch at one angle of the mouth, and the surface of the incision in the neck at first became covered with a thin greyish white layer. There seemed to be little or no septic poisoning of the blood, and no evidence of any paralysis has since appeared. That the case was one of undoubted diphtheria was not questioned by any of the members present at the meeting. The case is one of interest, not only from its result, but also from the fact that it is the first successful tracheotomy in diphtheria that has been performed in this city. The principal point of interest in the treatment of this case was the thorough use of antiseptics, particularly of carbolic acid in steam projected against the moist sponge covering the tracheotomy tube.

MARRIAGE.

In Montreal, on the 8th January, at the Church of St. James, by the Rev. M. Sentenne, Edmond Robillard, Esq., C.M., M.D., M.C.P & S., Q., to Miss Antonia A. M. du Mazuel.