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## CONTENTS.

ORIGINAL COMMUNICATIONS.	PROGRESS OF SCIENCE.	CORRESPONDENCE.
A Case of Typhoid Fever Occurring in an Infant 8 months old..... 25	Points from the Address in Surgery before the British Medical Association ..... 34	Letter from Paris..... 43
Why Apostoli's Method Sometimes Fails to Arrest Hemorrhage..... 26	Treatment of Pediculi Pubis..... 33	Antiseptic Treatment of Wounds.... 45
Intra-Uterine Treatment of Fibroids. 29	Treatment of Migrane ..... 39	<b>EDITORIALS.</b>
Progress on Dermatology and Syphilology..... 30	The Necessary Peroxide of Hydrogen 40	The Use and Abuse of Pepsin..... 45
Treatment of Carbuncle—Dry Seborrhœa of the Scalp..... 32	The Local Treatment of Diphtheria and Scarlet Fever—A Simple Ointment for Pruritus—Prescription for Psoriasis—Diseases of the Eye and Ear ..... 41	Education of the Sense of Smell..... 46
<b>SOCIETY PROCEEDINGS.</b>		Book Notices..... 47
Medico-Chirurgical Society of Montreal. Meeting October 3rd, 1890... 32	The Proper Time to Administer Quinine ..... 42	Personal..... 48
		News Item ..... 48

## Original Communications.

### A CASE OF TYPHOID FEVER OCCURRING IN AN INFANT 8 MONTHS OLD.\*

By Frank R. England, M. D. C. M., Professor of Diseases of Children in Bishop's College, Montreal.

Mr. President and Gentlemen. The case which I have ventured to bring before you to night is one of typhoid fever occurring in an infant 8 months old, and before reading a report of the case, I shall not attempt to make any other apology than acknowledge that there is nothing remarkable or peculiar about the case in any way. I have reported it simply because typhoid in very young children is an extremely rare disease, at least is a disease rarely recognized in infants.

A. L., an artificially fed babe, aged eight months, small thin and delicate looking, with a rather large and irregular shaped head (from lying a greater part of the time on the right side) covered well with long auburn hair. Family history good. In the month of June, which was the commencement of our infantile trouble in the city, he had some difficulty in digesting his food and had one or two attacks of vomiting and diarrhœa also an attack of bronchitis. The parents acting on my advice went away to the country for the hot months where they remained until Sept. 18. While they were in the country the mother said he got on well and gained in size and weight.

*Present attack.*—They had not been home more than ten days when his stomach and bowels again became deranged. There was some vomiting and a little diarrhœa. He was worrisome, restless and feverish. I was sent for on the morning of Oct. 2nd, the third day of illness. The pulse then was rapid 140 per minute, tem. 102½° F.; respirations not much accelerated. Examination of chest showed the heart and lungs to be normal. The abdomen was much distended and tympanitic. Remembering the old digestion trouble in the early part of the season and being suspicious as to the quality and freshness of the milk supply, I put down the disturbance as being probably due to an entero-colitis, and treated the case accordingly beginning with a small dose of castor oil. and carefully regulated the feeding. After watching the case for a week and doing all I could to relieve the symptoms I found my patient no better, the temperature still remaining high from 102½° F. in the morning to from 103° to 104° F. in the evening the remission usually beginning after midnight. The pulse too was small and rapid, varying from 140 to 160 per minute and the heart's action feeble; the abdominal distention not at all lessened; with these rather grave symptoms to persist so long in so young a child I began to look upon the case as being somewhat serious and was at a loss to explain to my satisfaction the real cause of all the trouble. About this time on examining the abdomen I found the spleen enlarged, so much so I was able by gentle pressure over the abdomen to

\* Read before the Medical Chirurgical Society of Montreal, 7th Nov. 1890.