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U. OGDEN, M.D.,

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I. H. CAMERON, M.B.,

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All literary communications and Exchanges should be addressed to Dr. CAMERON, 28 Gerrard St. East.
All business communications and remittances should be addressed to Dr. WRIGHT, 312 Jarvis Street.

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LEUCOCYTHÆMIA.

BY J. E. GRAHAM, M.D., TORONTO,

Adjunct Lecturer on Medicine, and Lecturer on Clinical Medicine and Dermatology, Toronto School of Medicine. (Read before the Toronto Medical Society, on June 30th, 1881.)

The histories of the following cases of leucocythæmia are written in extenso, partly on account of the rarity of the disease and partly on account of some interesting pathological conditions which were present. The first case is one of the lymphatic variety, and the second belongs to the splenic form of this disease.

CASE I.—A. P., æt 26. Admitted to the Toronto General Hospital, November 15th, 1880. He has been employed from boyhood as a painter.

Family History.—Father healthy. His mother has been in delicate health for some years. She frequently complains of severe pains in the region of the stomach, which come in paroxysms. One brother suffers from bronchitic asthma. The other members of the family are healthy.

History of Previous Condition.—Patient has suffered for some years past from occasional attacks of severe colic, which were always considered to be the result of lead poisoning. His wife states that about two weeks before the commencement of his present illness he took a cold bath when in a heated, perspiring condition.

He is married and has a family of three children. They are all healthy.

The present illness came on three months ago. He complained first of most violent

pains in both hips, running down the thighs to the legs. The pains afterwards extended to the arms. For the first six weeks they were almost always present. Occasionally, however, they became more severe, and would be of the most excruciating character, causing the patient to shout out, roll about on the bed, or on the floor. Paroxysms would sometimes last for hours, and it would require large doses of morphia to relieve them. For the last two weeks patient has been free from pain, but during that time he has been troubled with a sore mouth, and has gradually lost colour. For some days past he has noticed swelling of the legs and feet. Previous to his admission, he had been under the care of Dr. A. H. Wright, from whom much of the information given has been obtained.

Present Condition.—The most striking sign present is the patient's appearance. His countenance is of a pale yellow colour, and his cheeks are flabby. The now existing anæmic condition presents the strongest contrast to the previous ruddy look for which he was remarkable when in health. The hair, which is very short, has not grown to any extent during the last four months, it has also changed in colour. The tongue is slightly coated. The gums are swollen and present a pale, rough, granular appearance, and exhibit ulceration in places. They show a strong tendency to bleed. Conjunctivæ are pale. The appetite is poor and the bowels are constipated.

Pulse, 108; resp., 20; temp., 102. The urine is normal in quantity, pale and thick; specific gravity 1020, loaded with uric acid and urates. There is no albumen or sugar. Urea, 23 parts in a thousand.