

## THE TREATMENT OF PNEUMONIA.\*

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**M**R. PRESIDENT AND GENTLEMEN,—It is my privilege to introduce for your discussion a subject upon which it is difficult to find anything to say that will be new.

So much has been said, and much so well said, that "I am but a gatherer and disposer of other men's stuff."

The subject is like human love, as old as man, but always new, and always interesting; inasmuch as every case presents some phase or type differing from any other.

So varied has been the treatment that many cases have recovered in spite thereof, cases where "the remedy was worse than the disease", while many others have proved fatal where the management has been the most scientific and best approved.

Undoubtedly all present have had patients recover from the most severe attacks, in the most unfavorable surroundings, under most unsanitary conditions, and, vice versa, have had them succumb when the environment, the nursing, and the general treatment have been all we could desire.

We have been called to cases that, from our knowledge of the patients' constitutions, severity of the attacks, general appearances, etc., we have not expected recovery; yet, after a hard fight, such have been restored to health. Again, at our first visit, we have been most cheery, feeling we had a hopeful case to deal with, but, after a few days, some complication, such as an attack of heart exhaustion, altered entirely our sanguine feeling, and we have been compelled to see our best efforts under defeat.

Possibly in no other disease have we such extensive pathological changes, with complete restoration of the parts, as in pneumonia, nor have we any better instances of spontaneous recovery under certain conditions and circumstances.

As it is an acute specific fever caused by a variety of micro organisms, with a tendency to self-limitation, at first view the expectant plan of treatment might be considered the ideal one to adopt.

Unfortunately, cases do not all recover, and death may be referable to exhaustion of the bodily forces as a whole, or some of them in part, especially the heart, to violence of the invasion and crisis, prominence of toxæmia, failure of respiration, from the extent and severity of the pulmonary invasion, and excessive pyrexia, or the many possible complications.

So much depends upon constitution, severity of the attack, and complications, that we are not justified in strictly adhering to the expectant

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