PNEUMONIA AND EMPYEMA.

THAT a mistake in diagnosis between these two conditions is probable seems hardly credible, and yet in consultation I have seen several cases in which the diagnosis of Pneumonia had been made, and in which the diagnosis of Empyema was afterwards confirmed by the evacuation of pus from the pleural cavity. That such mistakes have been made must be my excuse for this article.

In general symptoms these two conditions have much in common. In each we have a chill; in each we have a rapid rise in temperature; in each there is difficult respiration with unequal action of the two sicles; in each there has been a history of pain in the side; in each we may find a considerable depression and anxiety on the part of the patient; in each we may notice the hectic flush on the cheeks. When, however, we pass from the subjective symptoms and take the evidence obtained by physical examination, the two conditions are more readily differentiated.

On inspection we find in both cases difficult respiration, which is not equal on the two sides. In Pneumonia there is not bulging of the intercostal spaces; if there is any change it is rather towards a flattening of the chest wall. In Empyema, on the other hand, we will not find a flattening, but may notice a bulging out or widening of the intercostal spaces. This variation of the chest wall, however, is not of much practical aid in our diagnosis, for there may be no noticeable variation in the general contour of the chest wall in either case. A flattening would point to Pneumonia, and a bulging to Empyema. The position of the apex beat of the heart is also worthy of notice. In Empyema this may be displaced towards the side opposite to that on which the Empyema exists. In Pneumonia we do not find the apex beat of the heart so displaced. Change of position of the apex beat would point to Empyema rather than to Pneumonia. A change of position is not found in Pneumonia. This displacement of the apex beat noticed on inspection may be confirmed by palpation and percussion.

Percussion yields better results. In both conditions the