IN A HOSPITAL WARD.

By Miss A. M. Burke.

The following case caused a good deal of interest. I send it to the Journal feeling sure it will interest some of its readers.

M. G., a school boy aged 11 years, was admitted into hospital about 9 a.m., and looked very ill indeed. His parents who accompanied him gave the following history: Whilst playing with other school friends on the hockey field his tooth ached and being loose he pulled it out with the result that bleeding set in which he could not stop. He was taken to a dentist who applied an hemostatic, this had the effect of making the bleeding less but it did not cease; the child was taken several times to the dentist who did everything he could and when he did not succeed advised the child's being taken to hospital. On admittance his general condition was poor; his body was covered with bluish spots and patches and he was in an anemic condition; the gums were bleeding and blood was clotting on them. His gums were swabbed with adren. chloride with no effect and mist cal. lact. gra. 20 was given t. d. s. for one day and smaller doses later also with no effect. All remedies given internally and externally failed and he died three days after admission; he had been treated for about five days outside. The diagnosis of the case was purpura.

In W. R. Jacks Wheeler’s Handbook of Medicine, page 311, the following description is given of purpura:—

Purpura is not a disease but symptomatic of some grave change in either the blood or blood vessels, whereby extravasations of blood into various tissues occur, producing red or blue patches which do not disappear on pressure or after death. In some instances the cause of the hemorrhages is known and these are referred to as symptomatic purpura, of which the following are the chief varieties:—

1. Infective Purpura, a form associated with the malignant fevers, those fevers in which rashes become hemorrhagic as already described under typhus, measles, etc.

2. Cachectic Purpura, a form associated with grave constitutional changes, i.e., syphilis, chronic Bright's disease, cardiac disease, scurvy, etc.

3. Toxic Purpura, a form associated with the circulation of certain poisons such as snake poison, quinine, antipyrin, copaiba, mercury, etc.

4. Neurotic Purpura, a form which is met with in cases of myelitis, locomotor ataxia, severe neuralgia, purpura articular, etc.

There are forms on the other hand of which the etiology is entirely unknown, although the condition is very probably due to the circulation of a toxin.