

PHYSIOLOGY AND MEDICINE.

Series of Lectures delivered to probationer Nurses at Lahore Medical College,
during Session 1909-10.

BY

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DISEASES OF THE ALIMENTARY SYSTEM.

MOUTH.

THERE are several varieties of inflammation of the mouth (lips, gums, tongue and inside of cheeks) or *stomatitis*, as it is called.

Simple stomatitis occurs frequently in children under one year and is rarely of a serious nature. The mouth is dry and there is slight fever. With a dose of castor oil and strict attention to the cleanliness of the child's mouth, the inflammation rapidly subsides.

Parasitic stomatitis or *thrush* is due to the growth of a fungus parasite in the mucous membrane of the mouth and is characterised by white patches on the diseased areas, loss of appetite and frequently diarrhoea and some fever. It occurs most commonly in children, as a result of using dirty feeding bottles; but it is also frequently met with in adults debilitated by disease. In advanced phthisis and in other cachectic conditions, its occurrence often indicates the approach of death. The parasitic fungus, which is the cause of this disease, requires an acid medium for its growth and is rapidly killed by wiping the mouth with a clean cloth soaked in an alkaline antiseptic lotion.

Thrush has to be distinguished from diphtheria. To do this, remove one of the white patches with a forceps: in diphtheria, a bleeding ulcer is left; in thrush, the mucous membrane is intact. The site of the white patches is also a help in diagnosis: in diphtheria they occur typically on the uvula and soft palate; in thrush, on the tongue and inside of the cheeks.

Only in a very cursory examination could curdled milk be mistaken for the white patch of thrush: curdled milk can be so easily wiped off with the tip of one's finger.

Follicular stomatitis begins as an enlargement of small follicles in the mucous membrane of the mouth, especially (1) about the edge of the tongue and (2) inside of the lips. The enlarged follicles become vesicles which very soon burst, leaving rounded ulcers with grey or yellowish bases. This disease occurs in children and adults placed under unfavourable hygienic conditions, run down in health, or suffering from indigestion. The condition is attended by considerable pain and local uneasiness but quickly yields to treatment. The local treatment consists in touching with solid silver nitrate and thereafter using an alkaline mouth wash.

Ulcerative stomatitis is a much more serious condition, with much more extensive ulceration of the mucous membrane of the mouth. It affects in particular the gums, which are usually swollen and painful. The teeth may even become loose. This form of inflammation occurs in individuals who are badly nourished and in a cachectic condition, and typically in scurvy and mercurial poisoning. The treatment will, of course, depend upon the underlying cause.

Gangrenous stomatitis or *cancrem oris* consists in a gangrenous ulceration of the mucous membrane of the lip or cheek, spreading to the deeper tissues, frequently extending (1) to the skin producing perforation of the cheek and (2) to the jaw leading to caries or necrosis. This is a disease of childhood, occurring in sickly children most commonly after exhausting fevers, and is generally fatal. The disease begins insidiously, as a red swollen patch inside the mouth at the junction of the gum with the mucous membrane of the cheek. Sloughing rapidly follows, with fetor of breath and salivation. There is, generally, little pain but prostration is extreme. The diseased tissues must be removed by caustic or cautery and stimulants freely administered to the patient.

Teething is blamed for many more of the disorders of childhood than it ought to be; yet there can be no doubt that the eruption of the primary (and to a less extent of the secondary) teeth is frequently accompanied by considerable disturbance both locally and constitutionally. The gums may become swollen and painful; gastro-intestinal catarrh and consequent diarrhoea and vomiting are common; and nervous symptoms, particularly convulsions and squinting, are occasionally met with. In this connection it should be remembered that in rickets the period of first dentition may be abnormally delayed—even to the second or third year; whereas in tuberculosis and syphilis the teeth may appear earlier than usual. Lancing the gums is an operation which is much abused. For to lance the gums prematurely is not only unnecessary but harmful; the resulting cicatrix will merely increase the resistance to the eruption of the tooth when the proper time for that arrives. Careful attention to feeding and to the cleanliness of the child's mouth and the administration of a dose of castor oil generally suffice to correct ordinary teething troubles.

The condition of the *tongue* does not at the present time receive such minute attention as in older days; still, a routine examination of the tongue is valuable, not merely for diagnostic purposes but also for treatment. Careful attention to the cracks, fissures, ulcers, etc., of the tongue adds greatly to the comfort of the patient. The tongue in health may be furred, but is never very white or very red. The *furred* tongue may be white, creamy or brownish in colour and is rough—the papillæ being still in evidence: the *coated* or *loaded* tongue has a thick creamy layer plastered over it, the papillæ

being no longer visible : the *dry* tongue occurs typically in fevers, is brown in colour and is generally associated with *sordes* (dirty dark-grey or brown encrusted matter about the teeth and lips) : the *red raw* tongue is met with in cases of long-standing dyspepsia or associated with intestinal troubles such as sprue and chronic diarrhoea ; the epithelium is thin and the surface uneven with cracks and fissures : the *pale flabby* tongue, dented at the margins, frequently accompanies chronic dyspepsia : the *strawberry* tongue, so characteristic of scarlet fever, is well known to most nurses.

In some of the conditions described above, it will be found that hot food causes pain : in such cases food can often be given cold (*e.g.*, cold milk) with comparative comfort to the patients.

Much more space than usual has been devoted to these abnormal states of the mouth for several reasons. Cleanliness of the mouth is an important point in health ; it is of much greater importance in disease,—not only in the treatment of local affections of the mouth itself and adjacent structures, but also as part of the treatment in cases of gastric ulcer, anæmias and other general conditions. Further, the toilet of the mouths of patients that cannot perform these duties generally devolves upon the nurse.

THROAT.

Acute tonsillitis or *quinsy* consists in inflammation of one or both tonsils, tending to suppuration. It occurs at all ages, but most commonly in youth, and generally follows exposure to cold. In some persons, particularly in rheumatic individuals, there is a tendency to recurrence. The local symptoms are—pain in the throat shooting up towards (and often referred to) the ears, tenderness on pressure at the angle of the jaw, pain and difficulty in swallowing. If the mouth can be opened sufficiently to show the tonsils, these glands are seen greatly swollen, with sometimes yellow spots, indicating foci of suppuration, or white ulcerated patches on their surface. Constitutional symptoms are often severe—fever, rigors and general malaise. An aperient, hot applications (fomentations or hot dry pads of wool) round the neck and hot gargles or steam bring relief. The food should be fluid ; and if the pain on swallowing be severe, it may be necessary to spray the throat before meals with 10 per cent. cocaine. If suppuration occur it will be necessary to incise.

A *chronic tonsillitis* or enlargement of the tonsils, along with enlargement of the lymphatic glands (adenoids) in the upper part of the pharynx, frequently occurs in delicate children and may cause alteration of the voice, mouth breathing and sometimes difficulty in breathing and swallowing. Other disabilities which may accompany this condition are deafness, defective mental development and a liability to colds. Excision of the tonsils and enlarged glands is generally necessary.

Simple acute sore throat or pharyngitis is apt to follow exposure to cold and damp. The mucous membrane of the throat (pharynx) is at first dry, red and congested. During this stage there is pain on swallowing, and a tendency to cough. The coughing may be severe and occur in paroxysms, particularly at night, and prevent sleep. After two or three days the throat becomes moist and coated with mucous: there is at this stage little pain but a tendency to hawk, the phlegm being sticky and mucous or muco-purulent. A warm moist atmosphere (*bronchitis kettle*) is soothing in the early stage while the throat is dry. Potassium-chlorate tablets or crystals, allowed to slowly dissolve in the mouth and thus gradually swallowed, are useful. The cocaine spray may occasionally be necessary to relieve pain.

(To be continued.)

"FIELD DAYS" IN THE C. M. S. HOSPITAL, SRINAGAR.

"Mr. Rugg's enjoyment of embarrassed affairs was like a housekeeper's enjoyment in pickling or preserving or a washerwoman's enjoyment of a heavy wash or a dustman's enjoyment of an overflowing dust-bin or any other professional enjoyment of a mess in the way of business."—*Little Dorrit*.

"Someone has described hell as disqualification in the face of opportunity."—*Coniston*.

I have come on both the above quotations quite recently. The first appealed to me in connection with what in this hospital we call "Field Days," and while I was wondering why they are so enjoyable, and had only got as far as deciding it was because they make such a demand on one's resourcefulness, I came on the second, so I put them together. Several times in the year there are Mahomedan anniversaries or local Saints' Days which attract immense numbers of villagers to the city here. The hospital is on one of the highroads to it, so many who are "something in the city" pass by it on its north and west sides daily, but these and their country cousins take on a very different aspect on a "Bara din." Tiny ponies carry babies, chickens, pots and pans, village products. The women have kilted skirts and the one clean garment of the year on head or shoulders. Ten or fifteen will step out briskly behind two boys with a native drum and a German mouth-organ.

But not all can enjoy the *tamasha* element of a religious festival. Many sick are being jolted in *jampais*, *doolies*, on beds or on horseback from village to shrine, with two alternatives to face after that goal is reached: the first to be jolted back to the tender mercies of the village barber or blacksmith, the second to go to one of the European hospitals and there probably (they think *certainly*) be "cut."

On the 21st of August last year, twenty major and sixty-six minor operations were performed between noon and nightfall, and when the last had been admitted there were 145 in-patients, several of whom were on improvised beds or on the floor.

M. NORA NEVE.