

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
88	George Pattison	4 1/2	March 6 th	March 13 th	D. Wadhvani	53 hrs.

No. in Reg ^d	NATURE OF DISEASE
18 80	
303	"Large white Kidneys." Peritonitis.

MORBID APPEARANCES

Gen. Condition. Well nourished. Face blotchy. hair brown. Hardly any oedema of legs.

Lungs. Compressed & somewhat collapsed.

Heart. 4 oz: uncontracted
natural in all respects.

Liver. fully changed 1 1/2 lb: fatty: gall bladder empty. } no

Spleen. 3 oz: natural. } laid across

Kidneys }
Large white. 7 oz: large: mottled white. surface smooth: capsule slightly adherent in places. } inactive.

Peritoneum. Distended with puriform fluid.
Chronic peritonitis. Surface of intestine roughened only here and there.
Signs of congestion on parietal pericardium: a little here & there on the visceral.
No perforation of intestine.

Samuel D. W. L.

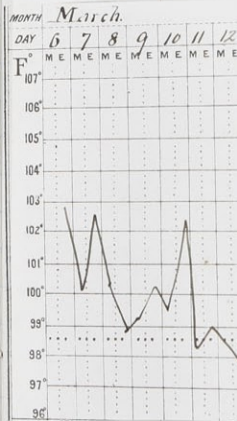
CASE

History.

The patient had sweats & chills for 2 1/2 yrs, from this time there had been a discharge from the ears noticed, otherwise his health had been good. A fortnight before admission his mother had noticed a rash all over ^{his} body, accompanied with a little soreness of throat, frustiness & no discharge from the ears. Only 3 days before admission was the dropsy noticed, he complained of headache & pain in the back. There was slight diarrhoea. The urine was not noticed. Vomiting occurred occasionally, at first with the appearance of the rash.

On Admission
Mar. 6

There was general oedema face, abdomen, penis, scrotum & legs. - Stern pecking.
Sore-throat: headache: pain in limbs. Stiffness of throat: white coated tongue.
small & rapid. Prop. quiet.



at base a few large bronchitic sounds.
a soft systolic limit heard all over the cardiac area.
no distant: faint fluctuation at lower part.
smoky, loaded with albumen.
Mar. 7 Mag. Sulph 5gr. R. Digitalis m.v. Ag 3gr. ^{1 1/2} hon.
7th an erysipelatous blush appeared on the face, cheeks & upper lip. A line ^{with} ^{up} ^{to} ^{the} ^{angle} ^{of} ^{the} ^{eye} ^{to} ^{the} ^{angle} ^{of} ^{the} ^{mouth}, the blush was limited by ^{it} ^{on} ^{the} ^{margin} ^{of} ^{the} ^{8th} but the swelling of the opposite side was said to have ^{been} ^{as} ^{much} ^{as} ^{that} ^{on} ^{the} ^{l.} By the 10th the red blush had quite ^{disap.} ^{peared}.
The oedema persisted, here as elsewhere.

Mar. 10.

The medicine was omitted on the 10th, he had several attacks of vomiting that evening. The bowels were very freely open, on the 12th Hyd. Chlorid 8j. Pile Salap. Co. gr. viij were given, the bowels acting 7 times during the following night.

Mar. 13.

From the 10th the patient gradually sank; vomiting continued. There were no convulsions. He died on the 13th at 10 AM.

J. J. Macpherson Dunbar.

No.	NAME	Age	Admitted	Died	Under the care of	Examination, at what time after death
88	George Pattison	4 1/2	March 6 th	March 13 th	D. Wadham	53 hrs.

No. in Reg. 18 80	NATURE OF DISEASE
303	"Large white kidneys." Peritonitis.

MORBID APPEARANCES

Gen. Condition.	Well nourished. Face bloated. Hair brown. Hardly any oedema of legs.
Lungs.	Compressed & somewhat emphysema.
Heart.	4 1/3: uncontracted natural in all respects.
Liver. <i>fatty change</i>	1 1/2 16: fatty: gall bladder empty.
Spleen.	3 1/3: natural.
Kidneys <i>Large white.</i>	7 1/3: large: mottled white. surface smooth: capsule slightly adherent in places.
Peritoneum.	Distended with puriform fluid. <i>Chronic peritonitis.</i> Surface of intestines roughened only here and there. Signs of congestion on parietal pericardium: a little there on the visceral. No perforation of intestine.

Barbault & Co.

CASE

History.

The patient had measles & chicken pox at 2 1/2 yrs, from this time there had been a discharge from the ears noticed, otherwise his health had been good.

A fortnight before admission his mother had noticed a rash all over ^{his} body, accompanied with a little soreness of throat, frustness & the discharge from the ears. Only 3 days before admission was the dropsy noticed, he complained of headache & pain in the loins. There was slight diarrhoea. The urine was not noticed. Vomiting occurred occasionally, at first with the appearance of the rash.

On Admission
Mar. 6

There was general oedema face, abdomen, penis, scrotum & legs. — Skin peeling.

Sore-throat: headache: pain in loins. Stiffness of throat: White coated tongue.

P. small & rapid. Prop. quiet.

Lungs at bases a few large bronchitic sounds.

Heart: a soft systolic limit heard all over the cardiac area.

Abdomen distended: faint fluctuation at lower part.

Urine: smoky, loaded with albumen.

Mar. 7 Mag. Sulph 5ʒ R. Digitalis ʒi. Aq. 5ʒ. ⁱⁿ 1/2 hrs.

On the 7th an erysipilous blush appeared on the face, cheeks & upper lip. A line ^{with} ~~of~~ ^{the} ~~mouth~~ was drawn from the ^{inner} angle of the R. eye to the L. angle of mouth, the blush was limited by this line on the mouth of the 8th but the swelling ^{was} of the opposite side was said to have diminished as much as that on the L. By the 10th the red blush had quite disappeared, the oedema persisted, here as elsewhere.

Mar. 10.

The medicine was omitted on the 10th, he had several attacks of vomiting that evening. The bowels were very freely open, on the 12th Hyd. Chlorid ʒij. Pile Salap. Co. ʒij were given, the bowels acting 7 times during the following night.

Mar. 13.

From the 10th the patient gradually sank; vomiting continued. There were no convulsions. He died on the 13th at 10 AM.

J. J. Macwhorter Dunbar.