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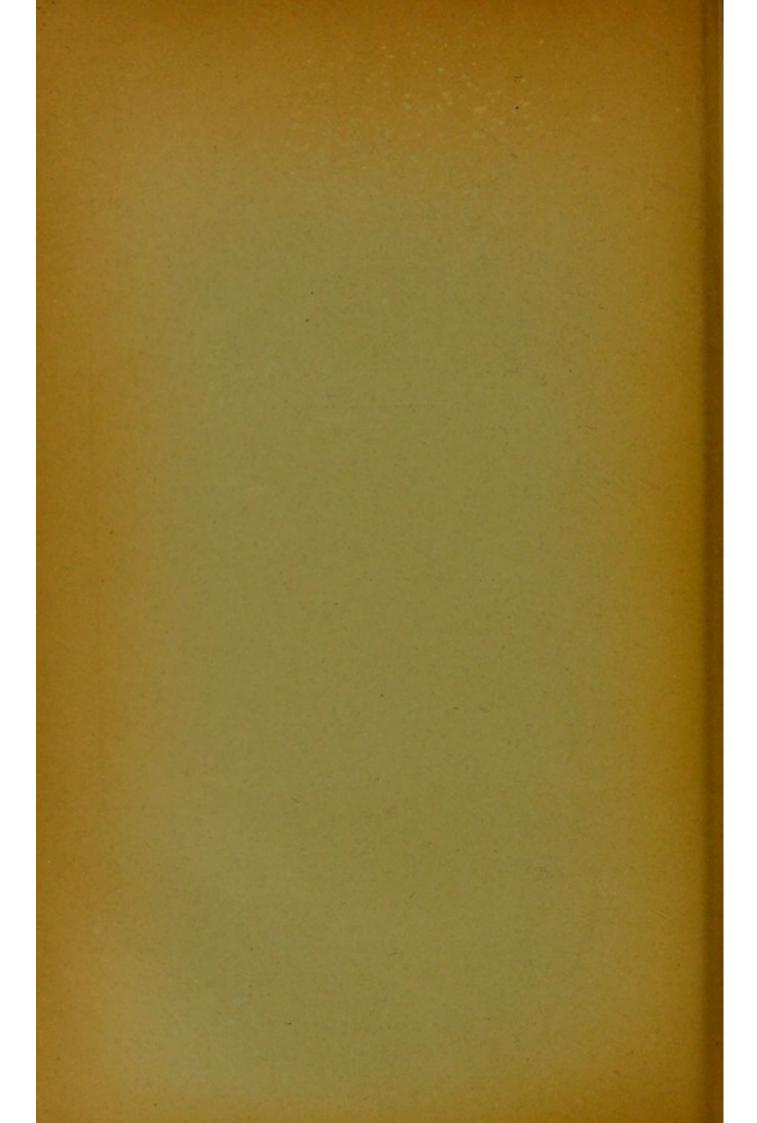
Mospital for Consumption and Diseases of the Chest, Brompton, s.w.

MEDICAL REPORT

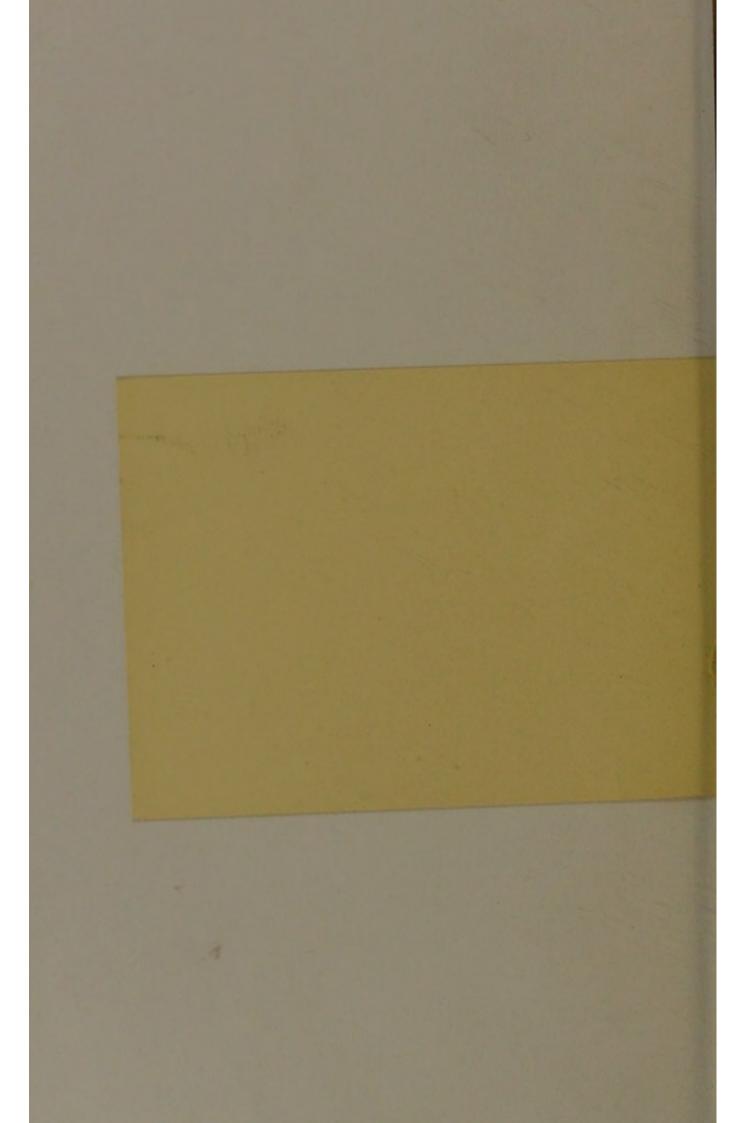
FOR THE YEAR 1903.



MCCORQUODALE & CO., LTD., CARDINGTON STREET, LONDON, N.W.



With the Compliments of the Committee of Management of the Brompton Hospital.



MEDICAL REPORT

FOR THE YEAR 1903.

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HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, BROMPTON S.W. 22 OCT 14

The RESIDENT MEDICAL OFFICER, the ASSITANT PESIDENT MEDICAL OFFICER and the Pathologist, present to the Committee of Management the Medical and Pathological Reports for the year 1903.

The total number of patients admitted to the wards was above the average, but the number dealt with in this report is less than usual, because the system of binding the notes has been altered from a classification according to the year of admission to one based on the year of discharge. Therefore in a first report of this nature patients who came into the Hospital during the latter end of the preceding year are omitted, as they have been already reviewed in the previous report; while those admitted during the corresponding period of the present year will be incorporated in the report for the year of their discharge.

Some additional tables have been introduced dealing with the results of treatment, and of factors in the ætiology of Tuberculosis.

1903 is the first complete year in which treatment has been carried out under conditions of natural ventilation.

During the year 'a new operating theatre has been opened, and a system of aseptic surgery introduced

The method of separating patients according to their diseases has been successful.

DEFINITIONS.

An Acute Case is one which is admitted direct from the Out-Patient Department, out of turn, since, in the opinion of the Assistant Physicians, definite benefit would thus result.

A Casualty Case is a case which, coming as a patient to the Hospital, is, although unsuitable for admission, too ill to send home in a cab.

Patients for small surgical operations are also admitted under this heading.

The results of treatment are classed as follows:-

M.I. Much improved.
I. Improved.
I.S.Q. In statu quo.
N.S.W. Not so well.

A patient who has "Much Improved" is one who is in every respect better than on admission, the temperature having become normal; dyspnœa disappeared; physical signs largely, if not entirely, cleared up, the extent of this depending on the number of lobes affected at the time of admission; no complications having supervened, or, if present on admission, having disappeared. Such a patient must have been up all day and have gained weight. On an average such patients have gained over a pound and a half a week.

Under the heading "Improved" are classed all patients who have made definite progress towards recovery, although not to the same extent as the preceding class. All factors are taken into consideration, but a patient who had progressed markedly in some respects, but not so well in others, would be classified under this head rather than as "Much Improved." No one feature has particularly controlled classification.



CASES TREATED IN THE HOSPITAL DURING THE YEAR 1903.

Cases in the Hospital on December 31st, 1902 ... 317 (See report for 1902)
Cases admitted and discharged during 1903 ... 1088

Cases remaining in the Hospital on December 31st, 1903 316 (See report for 1904)

Total admissions during 1903 1404
Total discharges during 1903 1405

The cases both admitted and discharged during 1903 alone are dealt with in this report; they number 1088.

Men		 	662
Women		 	426

COMPRISING :-

			Men.	Women.
Ordinary Cases	***	 	533	 343
Acute Cases		 	57	 26
Casualty Cases		 	72	 57
			662	426

TUBERCULOUS AND NON-TUBERCULOUS CASES.

		Men.		Women	1.	Total.	
		No.	%	No.	%	No.	%
Tuberculous	 	486	73.4	267	62.6	753	69.2
Non-Tuberculous	 	176	26.6	159	37.4	335	30.8

CASES ADMITTED AND DISCHARGED DURING 1903.

DISEASES FOR WHICH PATIENTS	1	MALES.		F	EMALES.		
WERE ADMITTED.	Ord. Cases.	Acute Cases.	Cas. Cases.	Ord. Cases.	Acute Cases.	Cas. Cases.	TOTAL.
Pulmonary Tuberculosis	428	15	29	242	6	15	735
Pulmonary Tuberculosis & Pleural		130	1	100			
effusion		5	-	1	1	-	6
,, and Empyema		1	-	1	-	-	3
,, Pneumothorax		2	1	-	2	-	7
,, ,, Aneurism of	100						
Aorta	1	-	1	-	-	-	2
Chronic Bronchitis and	1						
Emphysema	41	1	1	8	1	1	53
Asthma		-	-	2	-	-	2
Bronchitis and Bronchial Catarrh	5	2	2	9		1	19
Pneumonia	-	-	1	-	2	-	3
Broncho-pneumonia		1	-	1	-	-	2
Bronchiectasis		5	2	5	1		30
Pleurisy without effusion	2	-	-	-	-	-	2
Pleurisy with effusion	1	6	-	1	2	-	10
Emphysema	1	2	-	-	-	-	3
Adherent Pleura	1	7	-	1	-	-	2
Collapse of Lung after Pleurisy			-	1	-	-	1
Hydatid disease of Lung	1000	-	-	-	1	-	1
Sarcoma of Mediastinum	1	1	-	-	-	-	2
Laryngeal Syphilis	-	2	1	-	-	-	3 2
Angina Pectoris	-	2	-	-		-	2
Dilated Heart	1	-	-	2	-	-	3
Adherent Pericardium	-	-	-	-	1	-	1
Congenital Heart Disease	-	-	-	1		-	1
Mitral Stenosis		1	-	15	1	2	20
Mitral Incompetence		1	-	10	-	-	15
Mitral Stenosis and Incompetence	2	1	1	9	3	1	17
Tricuspid Stenosis and ,,	-	-	-	1	-	-	1
Aortic Incompetence	- 2	1 0	-	1	1	15.50	6
Aortic Stenosis & Mitral ,,	3	-		_	1		
Aneurism of Aorta	1	1	1	-	-	-	9
Carcinoma of Œsophagus	-	3		1	1		5 2
Exophthalmic Goitre	-	-	-	1	1	-	1
Leucocythæmia	-	-	-	-	-	1	3
Chronic Interstitial Nephritis	-	1	-	1	1		1
Uræmia				1	-		1
Spinal Caries, Amyloid Disease	-	-	150	THE REAL PROPERTY.	1	1	1
Arthritis of Knee	1		-		1000		1
Necrosis of Rib	1			1			1
Abscess over Sternum	1						1
Tuberculosis of Genito-Urinary	1	1	1	1000		100	1
Tract	1				Service of the last		-

CASES ADMITTED AND DISCHARGED DURING 1903.—Continued.

DISEASES FOR WHICH PATIENTS		MALES.		H	EMALES	9	
WERE ADMITTED.	Ord. Cases.	Acute Cases.	Cas. Cases.	Ord. Cases.	Acute Cases.	Cas. Cases.	TOTAL.
Admitted under Certificates of Chest Disease :—							
No Chest or other Disease found No Chest Disease, but :—	7	-	-	13	_	-	20
Granular Pharyngitis	1		200	1			2
Pharyngeal Catarrh	_	-	_	î		-	1
Adenoids	1	-	-	1	_	-	2
Neurosis	-	-	-	2	-	-	2 2 1
Gastritis	-	-	-	1	-	-	1
Appendicitis Chronic Rheumatism	_			1	-		1
Anæmia				6			6
Lateral Curvature of							
Spine	-	-	-	1	-	-	1
Left the Hospital before being seen by the Physician in charge	1	1	-	1	1	-	4
Admitted for small Surgical Operations:—							
Tonsils and Adenoids	_		25	123		32	- 57
Tuberculous Glands in Neck	-	-	1	-		4	5
Tuberculous Knee Joint	-	-	-	-	_ :	1	1
Costal Abscess	-	-	1	-	-	-	1
Sinus after Empyema Enlarged Turbinates	-	-	1	-	-	-	1
Examination for Stone			1		-		1
Septic Wound of Arm	-	-	î	_	-	-	1
	-						
TOTAL	533	57	72	343	26	57	1088

DEATHS AMONG PATIENTS ADMITTED AND DISCHARGED DURING 1903.

To	tal N	umber	 	118	=10.8 per cent.
Men			 		82=12.4 per cent.
Women			 		36= 8.4 ,,

		MEN.		WOMEN.			
CAUSES.	Ordinary Cases.	Acute Cases.	Casualty Cases.	Ordinary Cases,	Acute Cases.	Casualty Cases.	
Pulmonary Tuberculosis Pulmonary (Pneumothorax	1	3 1	10	21	3 1	-	
Tubercu- losis and Peritonitis		1	-	_	=	-	
Pneumonia Bronchiectasis	9	3	1	_	_	-	
Hydatid Disease of Lung Sarcoma of Mediastinum	1 1	1		_	1	=	
Meningitis and Cerebral Abscess subsequent to	_	1	_	_	_	-	
Empyema J Morbus Cordis	2 2	3	_	5	-	1	
Aneurism of Aorta Carcinoma of Œsophagus		2	2	_	1	_	
Chronic Nephritis Uræmia	1 1/2	_	=	1	-		
TOTAL	. 50	17	15	28	7	1	
TOTAL	. 30	11	10	28	1	1	

CHRONIC BRONCHITIS AND EMPHYSEMA.

Number of cases admitted:-

Men		 	 	 	43
Wome	en	 	 	 	10

RESULT.	No.	%	Average duration of stay in weeks.
Much improved Improved In statu quo Not so well Died	7	13·2	11.5
	40	75·5	10.0
	4	7·5	9.0
	2	3·7	12.0

BRONCHIECTASIS.

Number of cases admitted :-

Men	 	 	 	24
Women	 	 	 	6

RESULT.	No.	%	Average duration o stay in weeks.		
Much improved Improved	. 15	10·0 50·0 16·6	20·5 14·0 7·0		
Not so well Died	7	23.4	8:5		

The causes of death in the fatal cases were :-

Acute Bronchitis, two cases; Recurrent severe Hæmoptysis, Septic Bronchopneumonia, Pyopneumothorax and Gangrene of the Lung, Cerebellar Abscess and Multiple Cerebral Abscesses, one each.

PULMONARY TUBERCULOSIS.

Total number of cases admitted-735, comprising :-

	M	EN.	Wor	MEN.
RESULT.	No.	%	No.	%
Ordinary Cases Acute ,, Casualty ,,	 428 15 29	90·7 3·2 6·1	242 6 15	92·0 2·3 5·7
TOTAL	 472		263	

The Deaths numbered—78 or 10.6 per cent.

Men 54 or 11.4 ,,

Women 24 or 9.1 ...

Of the above-mentioned patients 17, 14 men and 3 women, left the Hospital before being examined by the Physician in charge of the case. The remainder on being classified, according to the number of lobes giving physical signs of disease on admission, presented the following percentage distribution.

No. of lobe			sical	1	2	3	4	5
Men Women				8·5 13·8	14·4 21·5	20·5 24·6	16:5 16:5	40·1 23·5

I.—Cases with ONE lobe giving physical signs of disease on admission (39 men, 36 women.)

					M	EN.	4		
RESU	LT.	Ord.	Acute	Cas.	Total	%	length of stay	Average change ofweight in lbs.	change
Much improved Improved In statu quo		 20 11	1	-	20 12	57·1 34·3 2·9	10·0 11·0 9·5	+ 15·1 + 6·8 + 6·7	+ 1.55 + .85 + .75
Not so well Died		 î li	_	_	1	2.9	13.0	- 8.5	
In the Hos		4	_	-	4	-	_	-	_

A case of fatal Hamoptysis.

						Wo	MEN.			
RESU	RESULT. Much improved				Cas.	Total.	%	length of stay	change	Average change perweek in lbs.
			15 20	1		16 20	44:4 55:5	12:0 12:5	+15.1	
Improved In statu quo	***		_			20	00 0	12 0	+ 19	+ 10
Not so well	***	***	-	-	_	-	_		4	1132
Died			-	-	-	-	-	-	-	-
In the Hosp than three	ital le week	988 S	-	-	-	-	-	-	_	=

It should be noted that although patients remaining less that three weeks in the Hospital are not classified as improved, not so well, or in statu quo, yet ALL DEATHS occurring among such patients ARE INCLUDED under the heading of Died in this and the following tables.

PULMONARY TUBERCULOSIS.

II.—Cases with TWO lobes giving physical signs of disease on admission (66 men, 56 women).

						ME	N.			
RESU	ILT.		Ord.	Acute	Cas.	Total.	%	length	Average change ofweight in lbs.	change
Much impro	ved	***	25	2	-	27	41.5	12.0	+14.8	
Improved			31	2	1	34	52.3	13.0	+ 7.0	
In statu quo	***	***	3	-		3	4.6	12.0	- 0.4	- '05
Not so well			1	-	-	1	1.5	13.0	- 5.0	- '40
Died			-	-		-	-	-	-	-
In the Hotthan three			1	-	_	1	-	-	_	-

II.—Continued.

						Wom	EN.			
RESU	LT.		Ord.	Acute.	Cas.	Total.	*	length of stay	Average change ofweight in lbs.	change
Much improv Improved In statu quo Not so well Died	red		14 30 7 —	1111	- 2 1 	14 32 8 —	25·9 59·3 14·8 —	11·5 12·5 12·0 —	+ 14·25 + 6·77 - 0·40	+ '63
In the Hosp	pital le	ess	1	-	1	2	_	_	_	-

III.—Cases with THREE lobes giving physical signs of disease on admission (94 men, 64 women.)

				. M	EN.			
RESULT.	Ord.	Acute.	Cas.	Total.	%	length of stay	ofweight	change
Much improved Improved In statu quo Not so well Died	20 48 11 5 1	- 2 - -	_ _ _	20 50 12 5 1	22·7 56·8 13·6 5·7 1·1	11·8 11·7 10·5 11·6 8·5	+14·9 + 6·9 - 0·8 - 4·1	+1·37 + ·66 - ·06 - ·47
In the Hospital less than three weeks	6	-	-	6	-	-	_	-

						Wo	MEN.			
RESU	LT.		Ord.	Acute.	Cas.	Total.	%	length of stay	ofweight	change
Much improv	ed		5	_	_	5	8.3	11.6	+14.0	+1.08
Improved			33	-	1	34	56.7	12.2	+ 5.7	+ '55
In statu quo			5	1	-	6	10.0	14.0	- 0.7	05
Not so well			13	1	1	15	25.0	11.4	- 5.5	- '55
Died			-	-	-	-	-	- /	-	-
In the Hosp	pital l week	ess	3		1	4		-	-	-

IV.—Cases with FOUR lobes giving physical signs of disease on admission (76 men, 43 women.)

					ME	N.	130		
RESULT.		Ord.	Acute.	Cas.	Total.	%	length of stay	Average change ofweight in lbs.	change
Much improved Improved In statu quo Not so well Died		8 34 12 9 3	- 1 -	$\frac{2}{-}$	10 36 13 9 5	13·7 49·3 17·8 12·3 6·8	11·5 11·7 11·3 13·5 6·0	+15·1 + 6·9 - 0·2 - 4·0	+1.5 + '7 Nil - '3
In the Hospital than three wee	less ks	3	-	_	3	_	-	-	-

					W	OMEN.			
RESU	LT.	Ord.	Acute.	Cas.	Total.	%	length	ofweight	change
Much improv	ed	 6	-	-	6 17	14.0	13.5	+14.7	
Improved In statu quo		 16 2		1	3	7.0	11.5	- 0.3	Nil.
Not so well		 13	-	_	13	30.2	11.0	- 3.3	- 4
Died		 4	-	-	4	9.3	8.7	-	1
In the Hosp		-	-	-	-	-	-	_	-

V.—Cases with FIVE lobes giving physical signs of disease on admission (184 men, 61 women.)

				M	EN.			
RESULT.	Ord.	Acute.	Cas.	Total.	%	length of stay	Average change ofweight in weeks	change
Improved In statu quo Not so well	15 47 27 34 36	- - 2 3	1 4 - 8	16 51 27 36 47	9·0 28·8 15·2 20·4 26·5	13·2 11·5 14·7 11·2 6·5	+16·1 + 6·6 - ·45 - 3·6	+ .75
In the Hospital less than three weeks	3	-	4	7	-		-	-

V.—Continued.

					Wom	EN.			
RESUI	т.	Ord.	Acute.	Cas.	Total.	%	length	Average change ofweight in lbs.	change
Much improv	ed	 7	-	_	7	13.0	12.0	+13.3	+ 1.2
Improved		 11	-	-	11	20.4	14.7	+ 5.7	+ .4
In statu quo		 6	-	-	6	11.1	13.2	+ 25	+ .02
Not so well		 10	-	-	10	18.5	10.3	- 5.4	- '37
Died		 17	3	-	20	37.0	8.3	-	-
In the Hosp than three		3	_	4	7	-	-	-	

COMPLICATIONS OCCURRING IN 735 CASES OF PULMONARY TUBERCULOSIS IN RELATION (1st) TO EXTENT OF DISEASE AND (2nd) TO THE RESULT.

COMPLICATION.	No.	of lason	the:	givi admi ase.	ng pl ssion	of the		RESULT.	
	1	2	3	4	5	Total.	Much Imp. and Improved.	In statu quo. Not so well.	Died.
THORACIC Pleurisy with effusion Pleurisy without effusion Empyema Pneumothorax Morbus Cordis Aortic Aneurism Carcinoma of Œsophagus LARYNGEAL		-4 1 -3 -	- - - - -	- 2 - 1 3 - -	3 4 1 5 1 2 1	3 14 2 6 7 2 1	-4 5 1	1 8 -2 1 -	2 2 2 4 1 1
Tuberculous Laryngitis Simple Laryngitis Hoarseness of voice, but nothing found in Larynx Tuberculosis of Pharynx	11 11	5 1 2 1	7 2 3 —	11 	37 - 2 2	60 3 7 3	9 2 6 1	27 1 1 1	24 - - 1

COMPLICATIONS OCCURRING IN 735 CASES OF PULMONARY TUBERCULOSIS IN RELATION (1st) TO EXTENT OF DISEASE AND (2nd) TO THE RESULT.—continued.

COMPLICATION.	No.	of l	on th	giv ie ac	imiss	hysical ion of		RESULT.	
COMI MOATION.	1	2	3	4	5	Total.	Much Imp. and Improved.	In statu quo. Not so well.	Died.
ABDOMINAL									
Appendicitis Perityphlitic Abscess Ascites Peritonitis following a per-	1		2 1 —		$\frac{1}{2}$	4 1 2	- -	2 1 1	<u>-</u>
forated Tuberculous Ulcer of Intestine Movable Kidney Uterine Fibroid, Polypus Ischio-rectal Abscess Fistula in Ano Persistent Diarrhæa, Slight ,,,,, Severe Severe Dyspepsia		- - 1 3 3 1	-1 1 2 3 10 3		2 - 3 5 3 22 3	2 1 1 3 10 15 38 10	1 1 2 8 9 7 2	- - 1 2 5 13 8	2 - - - 1 18 -
ARTHRITIC Tuberculous Non-Tuberculous Clubbing of fingers, Slight	1 1	1 2 4	1 5	1 3	2 7	4 4 20	3 3 11	1 1 8	
VARIOUS. Tuberculous Glands Tuberculous Epididymis Tuberculosis of Urethra Stricture of Urethra Albuminuria Arterio-Sclerosis Ichthyosis Tonsillitis Exophthalmic Goitre Tuberculous Meningitis Congenital Syphilis Gout, Acute Lupus Necrosis of Rib Tuberculous Abscess of Jaw Dental Abscess	1 3 - 3		1 2 1 - 2 1	1 - 1	2 1 1 3 - 1 2 1 1	4 1 1 1 4 2 1 6 1 2 1 2 1 2 1	2 -2 1 4 2 1 1	2 1 1 4 - 2 1 - 1 1 1 1	

Table shewing the **percentage** loss or gain of weight **per week**, compared with the weight on admission for all patients weighed regularly. Classified according to the number of lobes giving physical signs of disease on admission.

				MEN.					WOME	٧.	
No. of lobe	s	1	2	3	4	5	1	2	3	4	5
loss of weigh	nt. %										
1.8		_	-	-	_			1000	1	_	_
1.7		-	-	-			1		1	-	-
1.6		_	_						-	1	
1.5		_	-	-	- 24				-	-	-
1.4		-	-	-	-	1			-	-	_
1.3		-	-	-	-	1		-	-	-	-
1.2		_	-	-		-	_	_	-	-	1
1.1		-	1000	1	-	1	_	-	-	1	_
1.0		-	-	_	-			144	-	-	_
.9		-	-	-	1	2	-	-	-	-	-
.8		-	-	-	_	3	-	-	1	-	3
-7		_	-	-		5	_	-	2	1	-
.6		-	-	-	-	2	-		1	2	200
.5		-	-	-	1	2 3 5 2 4	-	1	2	1	1
.4		-	-	1	1	4	-	1	2 3	_	1
.3		-	1	1	2	4	_	-	3	1	1
-2		-	1	1	2	4	1	1	-	1	1
.1		-	_	5	2	7		2	1	1	2
									-		
No change		-	1	11	9	16	-	1	4	2	4
ain of weigh	t %										
.1		1	3	3	3	11		1	2	2	_
-2		-	2	1	6	6		5	2	-	. 1
-3		2	3	4	3	2		3	4	3	2
.4		-	5	8	2	1	4	4	1	3	4
.5		1	4	9	3	4		5	9	4	1
-6		4	7	8	2	9	2 2 7	3	5	2	1
.7		2	8	5	6	6	7	3 2	4	2 3	
-8		2	4	5	6	5		ī		1	1
-9		2	11	6	2	4	5	9	1	2	2
1.0		2 2 5	5	3	6	5	1	3	2	_	. 2
1.0 1.1 1.2 1.3		5	2 2 1	9	1	4	1	4	3 1. 2 4	1 1	1 3
1.2		1	2	5	2 1	3	6		-	i	3
1.3		1 1	1	1	1	3 2 3 1		2 1 1 1 1	2	2	_
1.4		4	1 2	- 1	-	3	1 1	1		_	2
1.5		1	2	-	-	3	1	1	-	1	_
1.6		1		1	-	1	_	_	_	-	_
1.7		1	1	1	2	1	-	1	-	-	1
1.8		2	1	1	1	1	1	1 1	_		_
1·4 1·5 1·6 1·7 1·8 1·9 2·0 2·1 2·2 2·3		4 1 1 2 1 2	1 1 1 1	-	-	1	1 1 1	44	1	-	- - 1 - -
2.0			1	-	-	1	1	-	_	1	_
2.1	***	-	1	-	-		1	1	-		-
2.2			-	-	-	-	_	-	-		-
2.3		-	-	- 1 1 1 - - -			-	-			-
2·4 2·8		2	-		1	-	-	-	-	-	-

CHANGE IN EXTENT OF PHYSICAL SIGNS.*

Number of labor giving		N	EN.			W	OMEN.	
Number of lobes giving physical signs of disease on admission.	Total No.	Physical signs Dimin- ished.	Physical signs Un- changed	Physical signs In- creased.	Total No.	Physical signs Dimin- ished.	Physical signs Un- changed.	Physica signs In- creased.
1	34	27	6	1	36	29	7	
2	65	55	9	1	55	38	15	2
3	87	58	25	4	60	32	16	12
4	68	44	14	10	39	19	11	9
5	130	61	41	28	34	13	16	5

* Exclusive of fatal cases.

TABLE.—COMPARISON OF THE NUMBER OF LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION WITH THE NUMBER GIVING SIGNS ON DISCHARGE.*

No. of lobes	Nu	MBER	OF	LOBE	s GI	VING	PHY	SICAL	SIGN	s on	DISC	CHAR	GE.	
giving physical signs on			M	EN.						W	OMEN.			
admission.	Total No.	0	1	2	3	4	5	Total No.	0	1	2	3	4	5
1 2 3 4 5	34 65 87 68 130	5 1 - -	28 17 4 —	1 44 5 2	-3 73 7 2	- 3 55 3	_ 2 4 125	36 55 60 39 34	4 1	32 6 1 —	- 48 2 4 -	- 53 1 2	_ 2 30 1	- 2 4 31

Explanation.—This Table shews that of 34 men admitted with physical signs of disease in one lobe, 5 left with no physical signs, 28 still presented signs in one lobe, and in 1 the disease had involved a second lobe. The remaining lines are to be interpreted in the same manner.

*Exclusive of fatal cases.

TABLE.—NATURE OF THE AFFECTION OF THE LUNGS, AND THE NUMBER OF LOBES GIVING SIGNS ON ADMISSION.

	Num	BER	of L	OBES	GIVI	NG P	HYSICAL S	IGNS	ON A	ADMIS	SSION	
Nature of Affection.		100	MEN.					V	VOME	٧.		
	Total No.	1	2	3	4	5	Total No.	1	2	3	4	5
Infiltration Excavation Fibrosis	94	34 1 2	51 9 5	48 31 8	35 34 4	84 89 5	135 99 14	28 5 3	37 15 3	30 26 4	16 26 1	24 27 3

Explanation.—The first line of this table shews the number of cases with signs of infiltration only. The second line shews the cases with excavation of one or more lobes, but in many of these there was also infiltration of other lobes. The third line gives the number of cases in which the dominant lesion was fibrosis, but in which there was no excavation.

NATURE OF AFFECTION IN RELATION TO RESULT OF TREATMENT.

-			A	IEN.		WOMEN.						
Nature of Affection.	Total No.	*M. I.	I.	I. S. Q.	N.S. W.	Died.	Total No.	м. і.	I.	I. S. Q.	N. S. W.	Died
Infiltration	252	59	117	39	26	11	135	34	62	10	17	12
Excavation	164	27	50	19	26	42	99	8	46	13	20	12
Fibrosis	24	7	14	2	-	1	14	6	7	-	1	-

*See Definitions.

COMPARISON OF THE NATURE OF THE AFFECTION OF THE LUNGS ON ADMISSION AND DISCHARGE OF EACH PATIENT.

LEN.								
Of	252	admitt	ted wit	h signs	of infiltration on	ly:		
	196	were d	ischarg	ed with	similar signs of inf	iltrati	on only.	
	9	33	,,	,,	signs of excavation	of or	e or mo	re lobe
	36	,,	,,	,,	signs of fibrosis	,,	,,	,,
	11	Died.						
Of	164	admitt	ed with	signs	of excavation in one	or m	ore lob	es :
	116	were d	ischarg	ed with	similar signs of ex	cavati	ion	
	6	22	,,	,,	signs of fibrosis.			
	42	Died.						

- Of 24 admitted with definite signs of fibrosis:-
 - $22\,$ were discharged with similar signs of fibrosis.
 - 1 was discharged with signs of spreading infiltration masking the previous signs.
 - 1 Died.

WOMEN.

- Of 135 admitted with signs of infiltration only:-
 - 96 were discharged with similar signs of infiltration.
 - 6 ,, ,, signs of excavation of one or more lobes.
 - 21 ,, ,, ,, ,, fibrosis of one or more lobes.
 - 12 Died.
- Of 99 admitted with signs of excavation of one or more lobes :-
 - 86 were discharged with similar signs of excavation.
 - 1 was discharged with signs of fibrosis.
 - 12 Died.
- Of 14 admitted with definite signs of fibrosis. -
 - 14 were discharged with similar signs of fibrosis.

TABLES SHEWING THE RESULT OF TREATMENT ON THE TEMPERATURE CHART.

The temperature on admission is the maximum recorded during the first week of stay, and that on discharge the maximum during the last week of residence in the Hospital.

I.—CASES WITH ONE LOBE GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

TEMPERATURE ON DISCHARGE.

Tem	pera	ture	on
ad	miss	nois	

admission.								
		MEN.	1000			Women	N.	
200	Under 99.5	99.5-101.5	Over 101.5	Died.	Under 99.5	99.2-101.2	Over 101.5	Died.
Under 99.5 99.5—101.5 Over 101.5	24 6 1	$\frac{-}{2}$		<u>-</u>	24 10 1	<u></u>	<u>1</u>	111

II.—Cases with TWO lobes giving physical signs of disease on admission.

TEMPERATURE ON DISCHARGE.

Temperature on

	1	MEN.			Women.					
	Under 99:5	99.5-101.5	Over 101.5	Died.	Under 99.5	99.2-101.2	Over 101'5	Died.		
Under 99:5	43	2	-	-	24	1	-	-		
99·5—101·5 Over 101·5	16	3	=		20	1	2			

III.—CASES WITH THREE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

TEMPERATURE ON DISCHARGE.

	1	MEN.				WOMEN	1.	
	Under 99.5	99.2-101.2	Over 101.5	Died.	Under 99.5	99.2-101.2	Over 101.5	Died.
Under 99:5 99:5—101:5	48 19	3 6	<u>-</u>	1	20 15	2 10	7	-
Over 101.5	3	2	3	-	-	3	2	-

IV.—CASES WITH FOUR LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

TEMPERATURE ON DISCHARGE.

Temperature on

	1	MEN.			Women.							
	Under 99.5	99*5-101*5	Over. 101.5	Died.	Under 99.5	99.2-101.2	Over 101.5	Died.				
Under 99.5 99.5—101.5 Over 101.5	23 17 1	4 8 4		_ 1 4	13 5 2	4 4 5	3 3	- - 4				

V.—Cases with FIVE lobes giving physical signs of disease on admission.

TEMPERATURE ON DISCHARGE.

Temperature on

		MEN.			WOMEN.						
2	Under 99:5	99.2-101.2	Over 101.5	Died.	Under 99.5	99.5-101.5	Over 101.5	Died.			
Under 99:5	34	13	1	4	8	3	-	2			
99·5—101·5 Over 101·5	37 16	17 5	9	15 27	8	2	3	11			

Explanation.—Table V. shews that of 52 Patients with five lobes affected on admission and presenting an initial temperature below 99.5°, 34 were discharged with temperatures below 99.5°, 13 with temperatures between 99.5° and 101.5°, 1 with a temperature over 101.5°, and 4 died. The other lines of this and of the preceding tables are to be interpreted in a similar manner.

In 9 cases in the above tables the temperature on admission was of the INVERSE type; of these 2 improved and 7 died.

HÆMOPTYSIS IN RELATION TO EXTENT OF DISEASE AND RESULT IN 719 CASES OF PULMONARY TUBERCULOSIS.

I.—Cases with ONE lobe giving physical signs of disease on admission.

	His	story before	of Ha	emopt	ysis	Actu	al Ha	Hosp	tysis ital.	occur	ring
RESULT.	Init-	SIN	GLE RECURRENT.		SIN	GLE	RECURRENT		FATAL.		
	ial Hæm.	Slight	Severe	Slight	Severe	Slight	Severe	Slight	Severe	Single	After Recur
Much improved Improved In statu quo	 3 3	9 7	5 2	3 4	3 3	1		2 _	1		1-
Not so well Died	 -	1		_	-	_	_	_	-	-	-

II.—CASES WITH TWO LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

	His	story o	of Ha	mopt	ysis	Act	ual H	æmop n Hos	tysis pital.	occur	ring
RESULT.	Init-	SIN	BLE.	RECUI	RENT.	SIN	GLE.	RECU	RRENT	FAT	AL.
	ial. Hæm.	Slight	Severe	Slight	Severe	Slight	Severe	Slight	Severe	Single	After Recur rent at.
Much improved Improved In statu quo Not so well Died	=	8 15 1 1	4 6 1 —	3 18 2 - -	4 4	11111		_ 2 1 _	_ _ _ _		11111
III.—Cases with	н ТН	REE		S GIV		HYSIC	AL SI	INS O	F DISI	EASE (ON
Much improved In statu quo Not so well		5 12 - 2	4 6 1 2	1 20 5 6	2 5 3 1	1 1 -	= -1			1111	1111

IV.—Cases with FOUR lobes giving physical signs of disease on admission.

Died ...

Much improved	 _	5	4	2	2	-	1	_	1	-	-
Improved	 2	7	8	13	8	1	-	1	-	-	
In statu quo	 2	2	2	4	2	-	-	1	-	-	_
Not so well	 1	2	2	6	-	1	_	1	1	_	-
Died	 1	-	_	-	3	-	1	-	-1	-	1

V.—Cases with FIVE lobes giving physical signs of disease on admission.

Much improved	 1	5	2	3	5	1	-	-	-	_	-
Improved	 3	8	5	9	5	-	-	1	-	-	-
In statu quo	 2	1	3	5	3	1	-	1	1	-	-
Not so well	 3	6	6	9	2	1	-	2	1	_	-
Died	 2	9	7	8	8	1	1	-	1	1	3

HÆMOPTYSIS ACTUALLY OCCURRING IN HOSPITAL IN RELATION TO THE NATURE OF THE LESION IN THE LUNGS.

		SIN	GLE.	RECU	JERENT.	F	ATAL.
LESI	ON.	Slight.	Severe.	Slight.	Severe.	Single Attack.	Recurrent Attack.
Infiltration Excavation Fibrosis		 5 3 1	2 1 1	5 8 2	5 3 —		1 4

HÆMOPTYSIS IN NON-TUBERCULOUS DISEASES OF THE CHEST.

			HÆMOI DMISSI	The second second	ACTUA		URRENG IN Hos		ÆMOP-	TOTAL NO.	
NATURE OF DISEASE.	SINGLE.		RECUE	RENT	Sinc	ELE.	RE	CURRE	NT.	OF EACH CLASS OF	
	Slight	Severe	Slight	Severe	Slight	Severe	Slight	Severe	Fatal	DISEASE ADMITTED	
Chronic Bronchitis and Emphysema	7	1	9		_	_		_	-	53	
Bronchitis and Bronchial Catarrh Bronchiectasis	0	1 1	1 5	-	1	-	$\frac{}{2}$	<u>-</u>	<u>_</u>	19 30	
Morbus Cordis Aortic Aneurism	3	2	8	-	=	1	1	=	1	60	

TUBERCULIN REACTIONS IN DOUBTFUL CASES.

The Tuberculin reaction was taken in 20 cases, and proved to be positive in 8 and negative in 12. Note.—Of the patients so tested 19 were discharged much improved or improved, and 1, a case of Bronchiectasis, in statu quo.

AGES OF PATIENTS SUFFERING FROM PULMONARY TUBERCULOSIS, WITH RESULT OF TREATMENT.

	MEN			We			
Age.	Much Improved. Improved.	In statu quo. Not so well.	Died.	Much Improved. Improved.	In statu quo Not so well.	Died.	Тота
- 5 -10 -20 -30 -40 -50 -60 Over60	2 34 96 68 59 18 2	1 10 35 39 19 3	$ \begin{array}{c c} 1 \\ 7 \\ 23 \\ 14 \\ 5 \\ 2 \\ 1 \end{array} $	1 3 35 74 29 15 5			2 6 106 269 167 104 29 5

TOTAL 688

The ages of the remaining patients were unknown.

HEREDITY.

A family history of Tuberculosis was presented by 237 patients (34.6%) of the 719, comprising 128 men (29%), and 109 women (44.1%). The grade of family taint in relation to the result of the individual cases is shewn in the following table of Actual Numbers.

		RESULT (OF IND	IVIDUAL	CASE.	
RELATIONS AFFLICTED WITH		MEN.			WOMEN.	
Tuberculosis.	Much Improved. Improved.	In statu quo. Not so well	Died.	Much Improved. Improved.	In statu quo. Not so well	Died.
Father Mother Father and Mother Father and Brothers or Sisters Mother and Brothers or Sisters Mother and Mother and Brothers or Sisters Brothers or Sisters Brothers or Sisters Paternal Grand-parent Maternal Grand-parent Paternal and Maternal Grand-parents Collaterals on Father's side Collaterals on Mother's side	$ \begin{array}{c c} 12 \\ \hline 4 \\ 5 \\ \hline 6 \\ 30 \\ \hline 2 \\ 1 \\ 4 \end{array} $	6 4 3 1 1 - - - - 1	$ \begin{array}{c} 1 \\ \hline 2 \\ \hline 3 \\ \hline 3 \\ \hline - \\ \hline 1 \\ 2 \\ \hline - \\ \hline - \\ \hline 2 \\ \hline - \\ - \\ \hline - \\ $	11 11 2 4 6 4 27 — — — — 3 4	4 4 1 3 2 - 8 - 1 -	$-\frac{2}{2}$ $\frac{1}{1}$ $\frac{1}{4}$ $\frac{4}{-1}$ $\frac{2}{1}$
TOTAL	192	34	12	72	23	1
Cases with no knowledge of a family history of Tuberculosis	184	74	42	90	38	10

i One case is recorded under two headings.

ENVIRONMENT.

This was ascertained in 635 cases, which were classified as follows:-

URBAN.—Where the Patient had been born and had always lived in a city or large Town.

SEMI-RURAL.—Where the Patient had been born in the country, but had immigrated into a city or large town.

RURAL.—Where the Patient had been born and had always lived in the country.

		RES	ULT.	
ENVIRONMENT.	Much Improved and Improved.	In statu quo. Not so well.	Died.	Total.
MEN				
Semi-rural	148 38 70	66 13 24	37 2 9	251 53 103
Women	6.793			
Semi-rural	112 19 20	39 7 11	16 1 3	167 27 34
		100000	TOTAL	635

It may be noted that the proportion of Urban to Semi-rural is greater than the proportion revealed by the census returns, though a little less than the proportion found among 7,000 Out-patients of St. Bartholomew's Hospital, the great majority of whom were not however suffering from Pulmonary Tuberculosis.

		In-Patients wi Pulmonary Tuberd Brompton Hosp	culosis	Out-Patients St. Bartholomew's Hospital.	General Populace.
Urban Semi-rural	 	 19%	,	84·7% 15·3%	65% 35%

OCCUPATIONS FOLLOWED BY PATIENTS SUFFERING FROM PULMONARY TUBERCULOSIS, WITH RESULT OF TREATMENT.

(OCCUPATION	on.			Much Improved and Improved	In statu quo Not so well	Died	Total
Men.	NDOOH							
Clerks					23	14	6	43
Shop Assistants					11	6	2	19
" "	(Grocer				10	3		13
Canvassers	,				3	5	2	10
Warehousemen					5	2	2 2 2	9
Servants, Domes					5	ī	2	8
Telegraphists			***		3		ī	4
Barmen)	***		***	***			-	
Cellarmen					10	4	1	15
Waiters	***	***	***	***	10	-	2000	10
Ship's Stewards					2	1		3
77. 1				***	3	i	1	5
Compositors	***		***		13	4	1	18
771		***	***	***	3	1	1	4
		***	***	***	10	2	1	13
Painters and De				***		- 2	1	
Upholsterers	W.				3 16	_		3 20
Carpenters, Join	ers, wo	od-w	orkers	***		4	-	25
Mechanics		***	***		12	11	2 2	
Metal workers		***	***		5	1	2	8
Laundrymen	***		***		2	1	-	3
Tailors					10	5	1	16
Shoemakers and	Leather	woi	kers		12	2	1	15
Cigar makers		***			3	-	-	3
Book-binders					7	1	-	8
School-boys	***		***		3	1	1	5
Various Indoor	occupati	ons	***		20	13	4	37
1	MIXED						TOTAL	307
Horsekeepers an	d Groon	ne			3	1	1	5
Messengers and			***	***	5	9	4	18
CI			***		1		-	18
bewer cleaner			***					and the same
						,	TOTAL	24

Occupation.	Much Improved. Improved.	In statu quo Not so well	Died.	Total.	
Men. OUTDOOR.					
Charles Van delesen sta		10	6	4	20
Ownthus Conductors		4		_	4
D. : -1-1 J. C4		9	5	2	16
Cananal labourers		26	14	9	49
0		2	_		
Candon and Assistantenista		4	3		7
The state of the s		3	-		3
Vanious Outdays samulious		11	1		2 7 3 12 2
C 1 / / / / / / / / / / / / / / / / / /		1	1	1	2
		2	9	1	4
		4	2 3 3		7
		5	9	3	11
The state of the s		9	3	9	1
Police			1		138
Women. INDOOR.					
INDOOR.		65	25	7	97
INDOOR. Housewives, and living at home		65 15	25 4	7	19
INDOOR. Housewives, and living at home School-girls				$\frac{7}{3}$	19 32
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail	 loresses	15	4	-	19 32 10
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses	loresses	15 20	4 9	-	19 32 10 47
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants	loresses	15 20 5	4 9 5 12	$\frac{-3}{2}$	19 32 10 47 7
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants Shop Assistants	loresses	15 20 5 33	4 9 5 12	- 3 - 2 1 2	19 32 10 47 7 8
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants Shop Assistants Barmaids and Waitresses	loresses	15 20 5 33 4	4 9 5 12 2 2	$\frac{-3}{2}$	19 32 10 47 7 8 6
INDOOR. Housewives, and living at home School-girls	loresses	15 20 5 33 41 4	4 9 5 12 2 2	- 3 - 2 1 2	19 32 10 47 7 8
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants Shop Assistants Barmaids and Waitresses School Teachers Clerks and Typists	loresses	15 20 5 33 4 4 2 6	4 9 5 12 2 2	3 - 2 1 2 3	19 32 10 47 7 8 6 9 4
INDOOR. Housewives, and living at home School-girls	loresses	15 20 5 33 4 4 2	4 9 5 12 2 2 1 2 2	3 - 2 1 2 3	19 32 10 47 7 8 6
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants Shop Assistants Barmaids and Waitresses Clerks and Typists Nurses Tobacco workers	loresses	15 20 5 33 4 4 2 6 2	4 9 5 12 2 2	3 - 2 1 2 3	19 32 10 47 7 8 6 9 4
INDOOR. Housewives, and living at home School-girls Dressmakers, Milliners, and Tail Laundresses Domestic Servants Shop Assistants Barmaids and Waitresses Clerks and Typists Nurses Tobacco workers	loresses	15 20 5 33 4 4 2 6	4 9 5 12 2 2 1 2 2 1	-3 -2 1 2 3 1 -1 4	19 32 10 47 7 8 6 9 4 2 19
INDOOR. Housewives, and living at home School-girls	loresses	15 20 5 33 4 4 2 6 2	4 9 5 12 2 2 1 2 2 1	$-\frac{3}{2}$ $\frac{1}{2}$ $\frac{1}{3}$ $\frac{1}{1}$	19 32 10 47 7 8 6 9 4 2

HISTORY OF INFECTION.

A definite history of contact with Pulmonary Tuberculosis was obtained in 88 cases, 59 men and 29 women, out of the total number of 719, which may be classified as follows:—

PROBABLE SOURCE OF INFECTION	MEN.	WOMEN
Patients' husbands or wives suffered from Pulmonary Tuberculosis	11	. 4
Patients occupied the same bedrooms as a sufferer from Pulmonary Tuberculosis	9	9
Patients nursed sufferers from Pulmonary Tuberculosis	-	7
Patients lived in same houses as sufferers from Pulmonary Tuberculosis:—		
Relatives	8	3
No relation	1	3
Pulmonant Tuberculosis	14	9
Pulmonary Tuberculosis Patients were in contact with sufferers from Pulmonary		3
Tuberculosis while in performance of military or naval duties	16	-

SURGICAL OPERATIONS PERFORMED IN THE YEAR 1903.

			MALES.		FEMALES.
Tonsils and Adenoids			25		32
Turbinectomy			1		-
Removal of Tuberculous Glands			1		4
Removal of Necrosed bone in Thu	ımb		1		-
Fistulæ		***	5		1
Opening of Ischio-rectal Abscess			1		-
" " Abscess in Neck			1		-
", ", " on Wrist		***			1
an Tana		***	1		-
,, ,, Dental Abscess			1		-
Classes I Alexand			-		1
,, ,, Psoas Abscess		***	1	***	-
", ", Abscess over Sternum			2		-
Resection of Ribs and Drainage	of Em	pyema	3		-
Resection of Ribs and Drainage					
Gangrenous Focus in Lung	1		-		1
Resection of Ribs and Drainage o		pneu-)			
]	1		-
Estlander's Operation			2		-
The about the same			-		1
Excision of Epiglottis			1		-
Removal of Uterine Polypus			_		1
Sounding for Calculus			1		-
Gastrostomy			2		1
Exploratory Laparotomy			1		1
Abdominal Section for Suppurati			is —		1
and the second of the second o			2		-
Trebuing to consultations					1000000

DENTAL OPERATIONS, TOTAL 202

M. S. PATERSON, F. C. SHRUBSALL.

PATHOLOGICAL REPORT.

Report of the Post-Mortem Examinations made during the Year 1903.

Total 107—Males 78, Females 29.

GENERAL TABLE OF DISEASES.

Diseases.	Total	Male	Fe- male	Remarks.
I.—Diseases of the Respiratory System.				
Pulmonary Tuberculosis	62	48	14	
Pulmonary Tuberculosis and Bron- chiectasis	2	1	1	The female O 226 shewed in addition
,, and Empyema		1	1	old mitral stenosis.
,, and Morbus Cordis ,, and Aneurism of	2	1 2 1	1	
Aorta	2	2		O 201, O 211.
Total cases with Pulmonary Tuber- culosis	74	56	18	This includes one case of arrested tuberculosis, who died of chronic nephritis.
Bronchiectasis	6	6		Of these, O 252 died of mutiple cere bral abscesses, P 34 of a cerebella abscess, P 3 of hamoptysis, P 4 o gangrene of the lung, O 212 o bronchitis, and P 11 of exhaustion
Foreign body in bronchus	1	1	-	O 250. This case presented a bone in the right bronchus, genera cylindrical bronchiectasis, septic broncho-pneumonia, and a right pyopneumothorax.
Total cases with Bronchiectasis	13	12	1	This includes the two cases mentioned above with pulmonary tuberculosis one case with bronchiectasis secon dary to an aortic aneurism, and three secondary to new growths in the mediastinum.
Chronic Bronchitis and Emphysema	1	_	1	the methasimum.
Hydatid of Lung	1	-		O 223. Sudden death from syncope ten minutes after aspiration.
Empyema	1 ,	1	_	O 214. Streptococci found in the pus and no tubercles in the pleura No signs of pulmonary tuberculosis found, but there were caseous
Sarcoma of the Mediastinum	3	3	-	bronchial glands. P 22, P 30, P 36. In all three there was some bronchiectasis beyond
				the margins of the growth. In P36 a pulmonary abscess had formed, and was opened during life. Four secondary growths had formed in the neighbourhood of the left corpus striatum, and tre
				phining was performed during life on the supposition that this was a secondary cerebral abscess following the pulmonary abscess already opened.

Report of the Post-Mortem Examinations Made During the Year 1903.—Continued.

Diseases.	Total	Male	Fe- male	Remarks.
II.—DISEASES OF THE CIRCULATORY SYSTEM, Infective Endocarditis Chronic Valvular Disease Aneurism of the Thoracic Aorta	2 8 2	2 3 2	5	O 206, O 259. O 208 shewed in addition a left hæmorrhagic pleural effusion and incompetent aortic valves. P 33 showed in addition a considerable degree of bronchiectasis secondary to pressure of the aneurism on the left main bronchus. In addition, two cases of pulmonary tuberculosis were complicated by aneurism of the aorta.
III.—MISCELLANEOUS. Chronic Interstitial Nephritis	3	1	2	O 258 shewed also old arrested pul- monary tuberculosis. O 253 shewed also two aneurisms of the abdominal aorta. P 14. All three cases shewed a considerable degree of atheroma of the arteries.
Renal Calculus and Double Hydro- nephrosis	1	-	1	P 18. A girl aged 10, who presented also a large effusion of blood between the cortex and capsule of both kidneys; death occurred from uremic coma.
Basal Meningitis secondary to a long standing Empyema	1	1	-	O 235. The empyema had been operated on fourteen days before death, and the wound was healing up. Trephining was performed a few hours before death for a cerebral abscess which (P.M.) was found in the left angular gyrus.

SPECIAL ANALYSIS OF THE POST-MORTEM EXAMINATIONS OF 74 CASES OF PULMONARY TUBERCULOSIS.

RESPI	RATORY SY	STEM.								
L	aryngeal T	ubercul	losis							 30
T	racheal Ulo	ceration								 12
В	ronchial U	lceratio	n							 4
В	ronchiectas	sis								 2
В	ronchitis							***		 2
E	mphysema									 1
R	uptured Pu	lmonar	y Ane	urism						 12
A	dherent Ple	eura	***	***						 71
Pi	neumothora	ax								 3
Se	erous Pleur	al Effus	sion							 4
E	mpyema									 2
DIGEST	TIVE SYSTE	M AND	ABDO	MINAL (ORGAN	NS.				
G	eneral Sept	ic Perit	onitis,	from d	leep t	ubercu	lous ul	ceration	on	 1
G	eneral Sept	ic Perit	onitis,	from p	erfor	ated to	bercul	ous ul	cers	 2
Ge	eneral Sept	ic Perit	onitis,	cause	unkno	own				 1
Lo	ocal Perity	phlitic 2	Absces	s, tuber	reulou	ıs		***		 1
Pe	erityphlitic	Adhesi	ons		***					 3
T	uberculous	Peritor	nitis							 5
	scites			***	***					 2
Ge	eneral Sero	us Men	ibrane	Tuber	culosi	s	***			 1
T	uberculosis	of the	Tonsil			***				 3
		,, ,,								 1
	mple Ulcer		Esop	hagus					***	 1
	stric Ulcer			***						 3
Tu	aberculous	Ulcerat								 1
	,,	,,,	.,,	Jejunu	m					 16
	,,	,,	,,	Ileum						 37
	"	"	7.500	Cæcum		***		***		 35
	"	**		Append			***			 26
	"	"		Ascend			***	***	***	 25
	"	"	,,	Transve						 16
	"	,,	,,	Descen						 13
	"	33	,,,	Sigmoi		xure				 6
	"	,,	,,	Rectun	a					 10

DIGESTIVE SYSTEM AND ABDOMINAL ORGANS.—Continued. Perforated Ulcers 2 Cirrhosis of Liver 3 Fatty Liver ... 12 Infarction of Spleen ... 2 Tuberculosis of Suprarenals ... 1 Tuberculosis of Kidneys 2 Fatty Kidneys ... 3 Interstitial Nephritis... 5 Infarction of Kidneys 1 Renal Calculus and Hydronephrosis 1 Tuberculosis of Epididymis ... 1 " Vesiculæ Seminales 2 ., Prostate 1 " Fallopian Tubes 1 Lardaceous Disease, see below. CIRCULATORY SYSTEM. Simple Pericarditis Tuberculous Pericarditis 1 Recent Endocarditis, small vegetations ... 3 Chronic Endocarditis, valvular disease 2 Marked Atheroma of the Aorta 5 Aortic Aneurism 2 Venous Thrombosis 5 GLANDULAR SYSTEM. Cervical Glands :-Enlarged ... 15 Caseous 15 Calcareous ... Bronchial Glands :-28 Enlarged ... Caseous ... 23 Calcareous ... 13 Superior Mediastinal Glands:-Enlarged ... 22 ... Caseous ... 19 ... Calcareous Anterior Mediastinal Glands:-14 Enlarged ... 9 Caseous ... Calcareous... 1

GLANDULA	R SYSTE	MC	ontinu	ed.				
Poster	rior Medi	astin	al Glar	nds:-				
E	nlarged				 	 		 15
C	aseous				 	 		 12
Ca	alcareous				 	 		 1
Mesen	teric Gla	nds:	-					
E	nlarged				 	 		 5
C	aseous				 	 	*	 9
C	alcareous		***		 ***	 		 3
Lumb	ar Gland	s:-						
. E	inlarged				 	 		 1
C	aseous				 	 	***	 2
OSSEOUS S	SYSTEM :-							
T	uberculo	sis of	Right	Tarsus	 	 		 1
MENINGES	:							
T	uberculo	us Me	ningit	is	 			 3
LARDACEO	US DISEAS	SE:-						
St	tomach			***	 	 		 3
In	itestines				 	 		 3
L	iver		***		 	 		 5
S	pleen				 	 		 6
K	idneys				 	 		 5
H	eart				 	 		 2

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