

Notes on cases of scarlet fever

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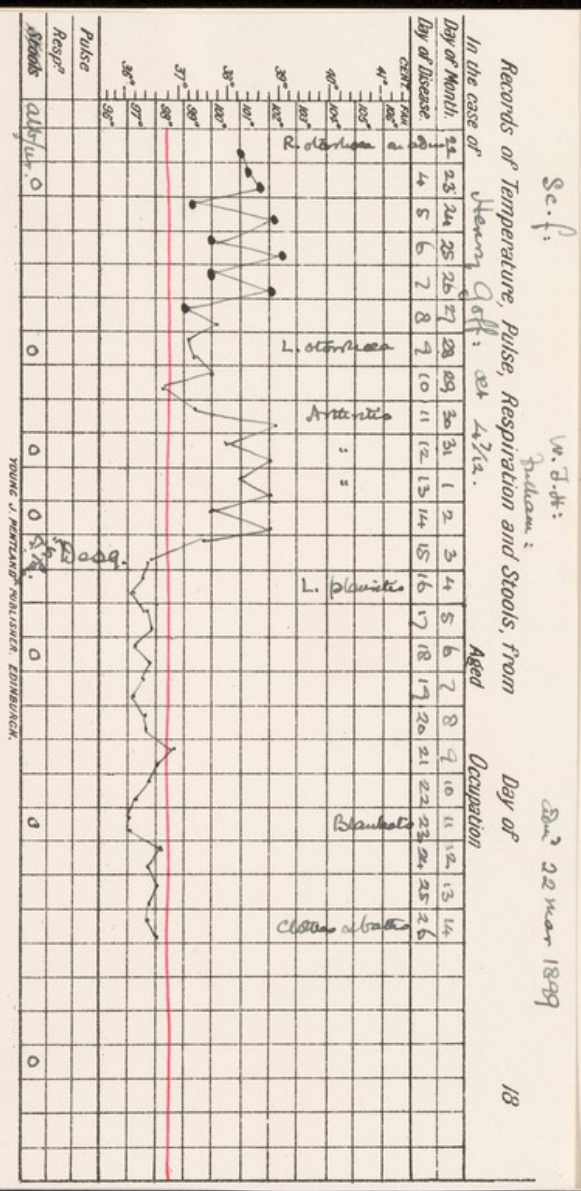
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Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
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Sc.f: \bar{c} Rash invading Circumoral
 Δ on forehead: scalp:
otomaea (3).

W. J. H. Fulham:

Henry Goff: Oct 4⁷/₁₂. adm^o. 22 Mar. 1899.

20 Mar. vomg, abd. pain. P.H. Petrusis 1898
 21 - vomg
 22 - vomg. Rash. R. Otomaea (3).

22 Mar. or adm. (3rd day)

Rash punctate or including face when it is present as a definite finish but raised punctation all over the cheeks & forehead, being especially marked about the bridge & sides of the nose - also extensively present on the Circumoral Δ invading it right up to the margins of the lips -

tongue typical denuded tongue & brown fungiform papillae "red strawberry".
 fauces inj^o. sl. inflamm. ed.
 clean. mucosa granular definitely
 inj^o all over:

R. otomaea.

23 Mar. Rash still well out all over face & scalp.
 punctate & still papillate.

YOUNG, J. PORTLAND, N.H. 1898. EDINBURGH.

fauces sore sand. on L. tons.
Claude suboce } distinctly palpable.
as }

26 Mar. Rash present also on palms
(yest today).

26 - Rash still out v. brightly - = mild staining
blotchy on appendages.

28 - L. otorrhea (9).

29 - tongue still red strawberry

30 - Arthritis (11).

2 Apr. Arthritis = gone

31 Mar
Sod. Salic. gr. x
T. Camph. Co. gr. x
aq. ad 3 ss
4th.

4 - L. pleuritis (16).

5 - pleuritis recedes since
strapping w. yest:

Ur. $\frac{2}{3}$ v. faint tr. on 3 Apr: (15).
but now on many ~~other~~ occas up to
1 May:

Myositis ossificans:

Western Mass Hosp:
Fulham:

Alice Tongue Oct 7
2 Tyler's Court
Barnet Pt. - W.

adm? W.J. Hop: 15 Dec c. p. f.

bone pectoral muscles sclerosed - but no
apparent ossification -

R. latissimus dorsi - fibrosed esp
at free ext. margin -

L. latissimus dorsi - fibrosed as the R.
but in addition ^{fine} osseous rods extending
from its attachment to humerus along
its external edge - some of them
is attached to the 3rd or 4th rib
by fibrous or bony tissue -

bone sterno mastoids fibrosed in part
~~separated~~

bone Erector Spinae partially fibrosed
in lumbar region -

R. forearm. ossification connecting
radius to ulna in the position
of the pronator quadratus, above
Epiphyseal line -
this prevents pronation -

big toes - much shortened,
& distorted:

terminal phalanges ankylosed to
1st phal. espee in R. toe.

Exostosis from base of terminal
phal. of R. big toe -

no other Exostoses:

no ankylosis except in big toes -
head can only slightly be rotated
or nodded -

arms have very slight movement
indeed:

legs free movement -

Scalatiua toxica

Mabel Brooks et 7 1/2 yrs:
living in Notting Hill W. London:

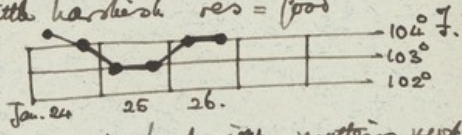
1898. 22 Jan: haebe rang. soeT. P.H.
23 - Rash. delirium. morbilli } 1893
petassio }
24 Jan. madu morbilli 1894

Rash - bright, vivid punctate erythema c' pale circumoral
D = 0 no jaundice.

tongue - dryish, feeling irreg. pap. prom.

throat - injected, swollen, much elevated.

Claude Coxie +
lungs in a little harshish res = good
ears 0
nose 0
Ht: 0



25 Jan: delirious again last night - muttering most
of the night -
vivid twice this morning.

P.M. not asleep for:
did not sleep:

this morning
was curled up on one side, covering sides
from time to time.
v. drowsy - eyes not fully closed.
Ht: 144 - Resp 20.
perish on being disturbed -
taking v. badly - vomg.
Rash v. intense.
throat v. dirty, markedly necrotic & toxic

26 Jan: not delirious last night but v. wretched.
retaining nasal food
cough rather harsh: suddenly became worse

Sc. f. Double hereditary predisposition Western Fever Hospital 1897-1898

Instance of a housemaid working with
a family whose children had little or
no power of coming out victorious with
an attack of Sc. f. - who also
herself caught Sc. f. at the same time
as they did - the attack with her
being of a malignant type -
from subsequent evidence it appeared
that she also was hereditarily vulnerable
to Sc. f. for her sister contracted Sc. f.
& was later also dead -
the type of the disease on each occurrence
not having been at all especially
severe in the surrounding districts:

Scalatiua toxica

Nellie Brooks et 16 housemaid:
in Notting Hill. W: London:

8 Nov: haebe, rang, sh.

9 - soeT. rash, Coxie ad.

13 Nov: madu:

Rash - v. intense universal punctate
Erythema. c' pale circumoral Δ.

D = 0
tongue ^{trich} furred - & dryish -

throat. much swelled on palate, uvula & fauces.
+ secretion v. dirty.

Glauco. cervic. v. sl. +

ears 0

lungs 0

Ht. 0.

much rheumatism in all joints
v. tender indeed:

14 Nov Delirious since 2 p.m. 13 Nov:

tongue v. dry:

throat clear:

jaundice v. marked, conj. scl. & skin

Generally:

no vomg since adm:

Resp. 48. alveoli dilating

Good air entry all over
no impairment

gl. mucosae in places

no harsh br:

Ht: 120 not quite reg:

Sts clear:

~~14~~ became rapidly worse in the late afternoon

Died 14 Nov. at 10.30 p.m.:

Postmortem no special cause for jaundice found:
~~stomach & intestine~~ not inflamed acutely:

Ch. of family she worked with = 4.

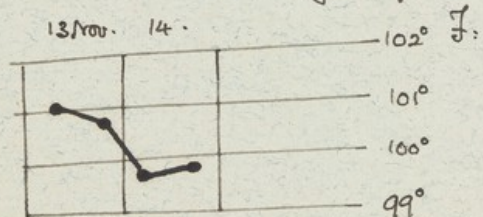
① Contracted Sc.f. - removed to Lambeth Hosp
died of Sc.f. within 4 or 5 days
of onset.

② Contracted Sc.f.: sent nurse from L.F.H.
refused to remove the ch. as it was
too bad - the ch. died that night.

③ Contracted Sc.f.: a day or two later
was removed to L.F.H. died of
Sc.f. within a few days of onset.

④ a week or two later I heard that
this ch. also developed Sc.f.
but I never heard whether the ch.
recovered or not.

(Temp of Nellie Brooks Oct 16.)



S.C.F.

W.F.H.

(2)

Ethel Brooks Oct 12. (= sister of Nellie or Mabel Brooks)

adm. W.F.H. 7 Feb 1898:

S.C.F. 5 Feb:

had an attack of sc. benigna
& made an easy recovery -
aphthous stomatitis (5).

alb. faint trace 10th day for 1 day's
observation - 2 days later it
had gone:

highest T° in A.M. = 100° 8.

Complications of c. f.

W.F.H.
19 Oct. 1897 →

~~Jan 1897~~

Sc. f: \bar{c} matting of L. cervic glands
& post pharyngeal abscess:
Spontaneous bursting into ph:
no penetration bc. naturally
recovers:
John Cotes
Oct 12 or 20
Nov. 1897.

Sc. f: \bar{c} Δ . (facial).
cellulitis of scalp without pus:
raised thick membrane on tongue
in two places (no K. L. bacilli
found in 2 cultures).
purpuric spots
limited to epidermis
on prominent points.
Flor. Jones on
Feb 1898.

Sc. f: angiosa.
necrosis of R. lower jaw:
spreading, & not stopped by
scraping w. nitric acid,
Death: child resistant to
throat being examined.
Christopher Raleigh
Oct 7 or 8
Jan 1898.

Sc. f: \bar{c} Δ -
necrosis (limited) of L. lower jaw
opposite canine or 1st molar:
child resistant to throat
being examined:
Austin:
Feb 1898.
Oct.

sc. f. semi-toxica
bright jaundice on 5th day:
rh.
death on 5th day -

Nellie Brooks
Oct 16
Nov 1887.

Sc. f.

Couplings.

W. J. H.

16 March 1898.

(Septic) Sc. f. a necrosis of ^{with notes} L. side of jaw
from 1st R. lower incisor to 2nd jaw on L.
in a septic Sc. f. boy (Oct 8) who wd not
readily allow throat to be cleaned -
it occurred in the 1st week & he
soon died. Christopher Raleigh

Δ Sc. f. ♀ Oct: Austin Feb 1898.
necrosis of jaw limited to a spot
at L. lower canine & the lat. incisor.
recovery:

Sc. f. & measles ♀ Oct. Finkelson March 1898.
Suppur. into R. hip joint -
Synovia not inf^d.

Sc. f. (^{Semi-}toxica). ♀ Oct 16 Nellie Brooks 8 Nov. 1897.
jaundice universal on 6th day:
fall bladder natural.

Sc. f. ♀ Oct Graham March 1898.
Suppur. Orose. adenitis. neglected -
broken down continually - & swelling
most fully - the cellular tissues all
round extensively inflamed. (full neck)
Subfascial abscess over mastoid
ad on R. side.

Sc. F. otomkoca . patussio . thrombosis of cerebral sinuses.

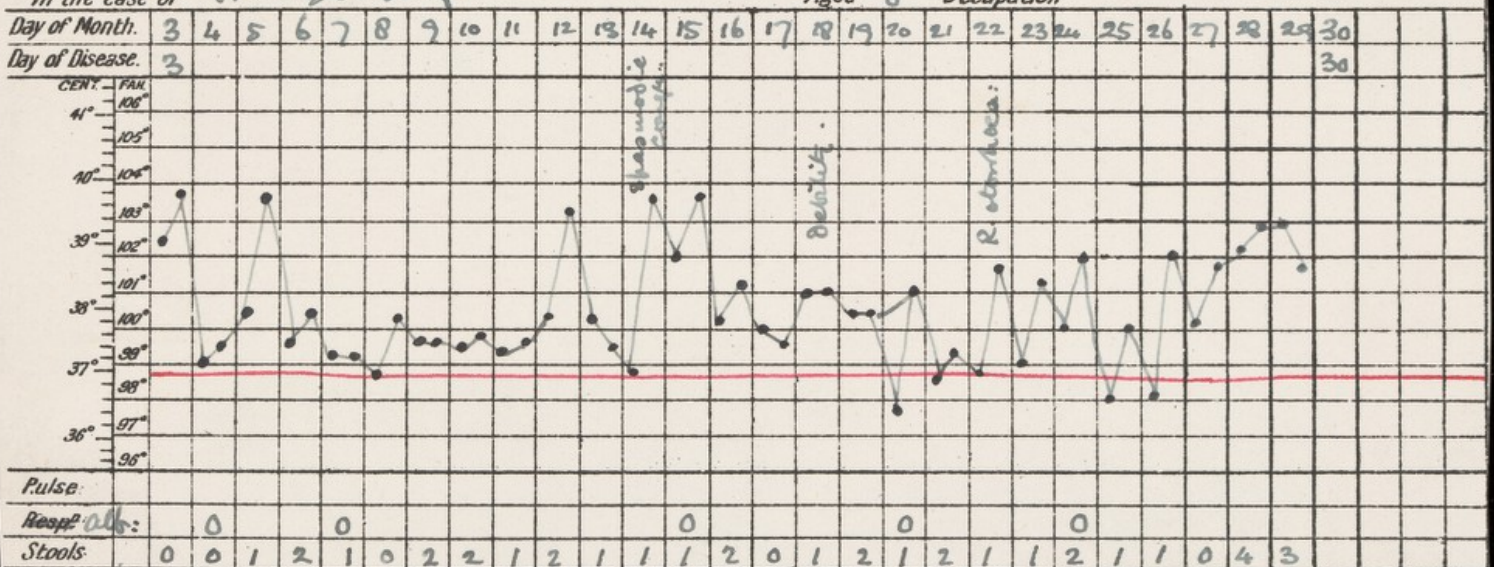
W. F. H.

Records of Temperature, Pulse, Respiration and Stools, from 3 Day of March

1898.

In the case of Nancy Stubbing.

Aged 8 Occupation



c dark clot on meninges.

Slight subpial haze on either side in Rolandic area, but esp. on R.

Slight purulent meningitis.

Ventricles normal

no military tubercles seen anywhere

no supp. abscesses communicating to meninges or pericranium.

No military tubercles found anywhere in the body.

Sc. f. \approx R. otomosa.

W. J. H.

1898.

QD. thrombosis of cerebral sinus
suppur. meningitis.

Nancy Stubbings et 8

P.H.

novilli 200 ago.

1 March vomg. Soc. T.

2 — Rash.

3 March on adm:

Rash punctate erythema c pale circumoral Δ .

D = \circ
tongue - white strawberry - thick coated.

throat - inj? swollen, slight sand.

Glands cervic. sb. +

ears \circ

nose \circ

lump oil made out in part.

It's \circ .

4 March:

tongue feeling - denuded in front. pap. prom:

palms of hands macular erythema showing thro.

punctate erythema also on dorsum of fingers.

Soles of feet also show slight erythema of a macular type.

Pruritus on face.

5 — D. on trunk.

6 — cough v. teasing.

7 — throat still + secretion

8 — cough not gone but v. much better.

14 — spasmodic attacks of coughing voided in med. after a fit of coughing

5 March.

ru. ipseae $\frac{1}{2}$ v

tincl campb Co. $\frac{1}{2}$ x

liq. ammon acetat $\frac{1}{2}$ ss

aq. cham ad $\frac{1}{2}$ ss

to.

6 — sit 200. 4. 10.

14 — steantant

of carbolic $\frac{1}{60}$.

(there was festusis in the word at this time 14 march)

15 march. again vomit after coughing

18 - became deliriated
 nasty taste in mouth
 lungs } nil abnormal found
 Ht: } except some râles

22 - R. otitis media

26 - still R. otitis media
 lungs nil except râles
 which were very slight.
 child is v. languid.
 tucked up in blankets today,
 she vomit so went back
 to bed.

27 - still vomg

28 - diarrhea, motions v. offensive
 still vomg
 cough v. severe at times.

29 - v. bad.
 vomg after something.
 hardly slept at all last night
 still diarrhea
 Ht: 252.
 lungs bronchi all over
 moist. R. ant base faint
 br. v. harsh (bronchial)
 at this area:

4p.m.: mouth twitching on L. side
 conjug deviation of eyeballs R

21 Post 3 ii

26 march:
 "blankets"

28 march
 ol. viscini 3iii sat.
 mist vism. & ac. hydrog
 3iii. ts:

29 march.
 Post omitted
 brandy 3iii.

mustard leaf
 over stomach.

inj. strychn
 1/3iii 4p.m.
 8p.m.

L. arm also was seen by
 nurse to twitch -
 28 march
 L. arm said by nurse to have
 been paralyzed.

P.M. 1st April 1898.

abd. peritoneum = nil
 intestines = nil
 stomach 2: natural
 mes. gland = natural
 spleen } do
 pancreas }
 liver v. pale fatty
 kidneys nil
 natural

Ht:
 lungs

R. lung
 old pleural adhesions at apex
 one or two solitary old tuberc lesions at apex (v. small)
 at root old CB fibrosis old small cavity -
 not whole mid. lobe young caseous tubercle.
 some bronchopneumonia at base

L. lung
 no tubercle found anywhere, but there was
 a little bronchopneumonia in places.

bronchial glands Several caseous on R. side
 all quite nat. on L. side.

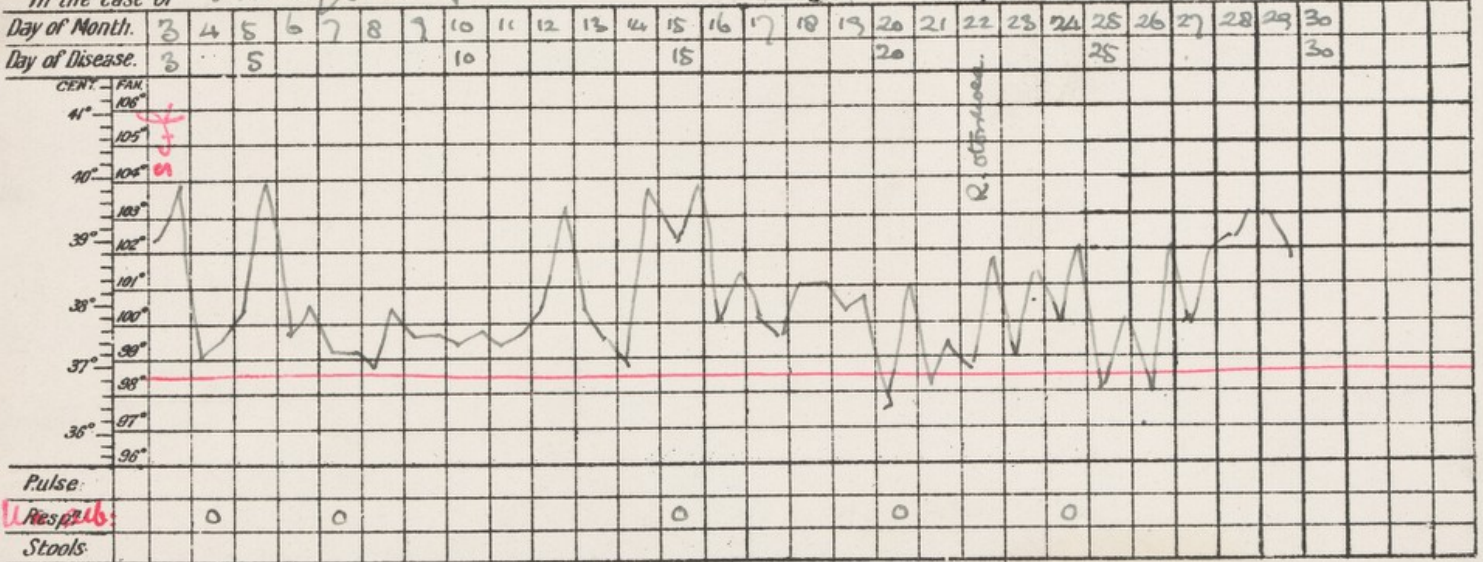
lymphs atacked = nil.

Brain & meninges (path. brownish clot)
 auto necrosis thrombosis of superior longit. sinus
 from crista galli to torcular -
 L. lateral sigmoid sinus - a L. jug. v.
 (the latter not distended)
 all cerebral & meningeal vessels greatly
 engorged - sinuses veins thrombosed

W.F.H. Fulham
 3 Mar. 1898
 30 Mar. 1898. 18

Records of Temperature, Pulse, Respiration and Stools, from

In the case of *Nancy Stubbing* Oct 8 Aged Occupation



scf:

R. ot:

Umbro's sup. long. sinus
L. lat. sinus
L. Jug. V.

pl. par. meningitis:

W.F.H:

Fulkam:

Nancy Stubbing et 8

adm. 3 mabk 1898.

1 march. vomg. soet.

P.H. mobilis 2yr ago

2 — Rash

3 march. oradus (3).

Rash punctate & pale circumoral.
tongue white strawberry: thick coated.
fauces ting. nodular. sb. soad.
hands corie sb. +.

4 mar. tongue itching & pap. prou:
halves of hands macular erythema shining
less spiders. also on soles.
rash also on dorsum of fingers.

5 — base. on trunk.

6 — cough v. teasing.

7 — fauces still + reaction.

14 — spasmodic attacks of coughing -
void after a fit of coughing last n:

15 — again void after coughing. (Crisp recalled by VIII
sp. bron. of VIII
G.)

18 — nasty taste in mouth: lumps } 0.
H: }

22 — R. otomosa (22).

26 — pale otomosa
lumps nil
ch. is languid - void once.

27 — still vomg.

28 Mar. Diarrhea . motions v. offensive
still vomg.
Cough v. severe at times.

29 - v. bad.
vomg after sweating, hardly sleep.
still diarrhea.
Jr: 252.
lungs bronchitis abn. bn.

4p.m.: mouth twitching outside.
Conjug deviation of eyes to R.
L. arm also was seen by nurse
to twitch.

30 - 1.40 a.m. died:

P.M.

localized tubercle in R. lung
Some bronchopneumonia.

thrombosis { sup. longit. sinus from crista galli.
L. lat. sinus
L. jug. vein for $\frac{1}{3}$ inch:

great enlargement of cerebral vessels.
Some subpial knife over
Rorandic areas.

Some peracute meningitis (slight).
no tubercles seen:

inner ear = normal on both sides
when examined macroscopically:

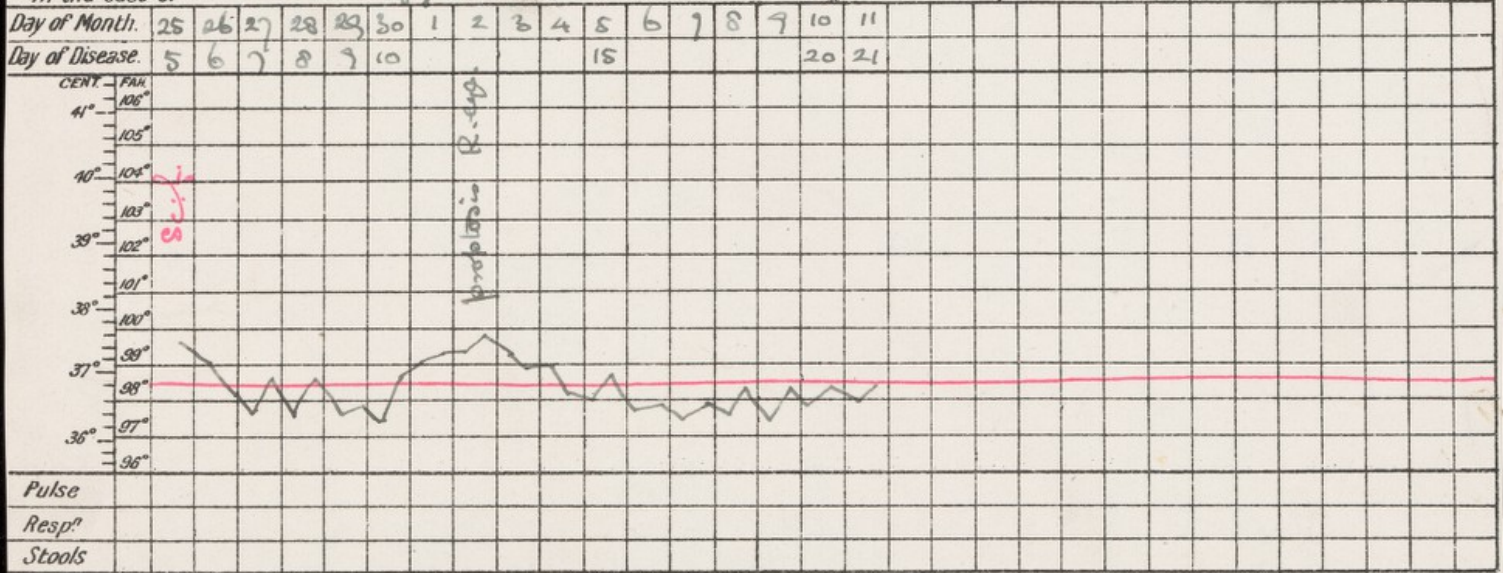
mastoids not examined.
nostrils not examined:

Sc.f. *S. typhimurium* Reage (12).

W.F.H. Nichol

Records of Temperature, Pulse, Respiration and Stools, from
In the case of Maud Hoggar Oct 6.

Day of 25 Apr 1898 18
Occupation 1 June 1898.



sch. ē proptosis R. eye ⁽¹²⁾/₍₈₎.

W.F.H.:
Fulham:

Maud Hogges oct 6. adm. 25 Apr. 1898.

21 Apr. sore T.
22 — Rash

25 Apr. or adm. (5)

1 Rash punctate
mouth torus clearing: pap. mou:
fauces inj. ob. swollen
palate inj.
Glands Cervic +
 ib.

26 Apr. subocc. } Glands + otitis.
 mastoid

2 May hæm. pyrexia

4 — R. eye marked proptosis since 2 May
 sweat quite sudden & attended
 w/ pain.

6 — R. eye proptosis v marked
 eyeball itself apparently healthy.
 lids ob. puffy.
 no strabismus
 no evidence of cellulitis of orbit.

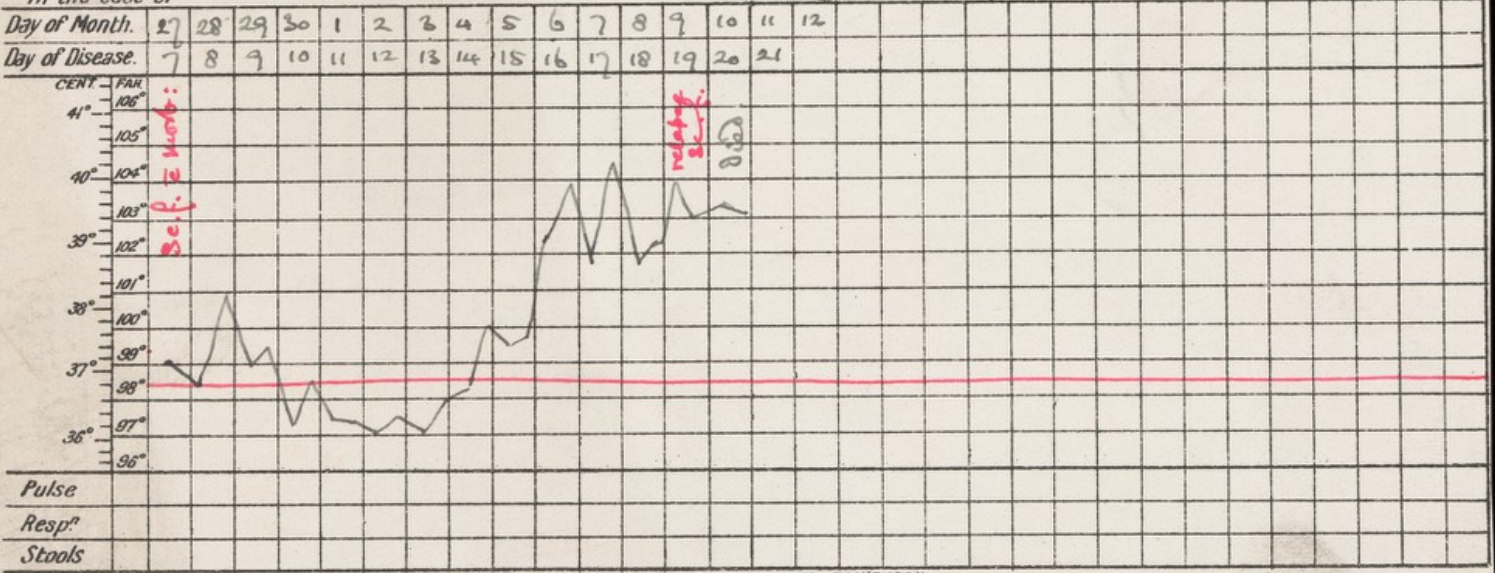
7 — Rash. proptosis mostly disappeared
 no pain or tenderness.

11 — fingers healing.

Sc. f. o. montilli: relapse *Sc. f. (18)*. Disease (2) relapse:

W. J. H.
Fulham:
27 April 1898 18
16 May 1898.

Records of Temperature, Pulse, Respiration and Stools, from
In the case of *Chas. Shaw*: Oct 2 1/2: Aged Occupation



Sc.f.:

Scf + mobili oradu:
relapse septie (18)

W.F.H.:
Fulham

relapse: (19) 2^o relapse

Chas Shaw Oct 22

admi^o. 27 Apr. 1898.

- 21 Apr. soct. Rash
- 22 — very cough.
- 23 — melalgia
- 24 — lachrymation
- 25 — glands +
- 26 — rhinorrhoea:

P.H. eczema on head
for 3 mos:

27 Apr. oradu: (7)

Rash mobili.
 Desq - nil
 mouth tongue denuding pap. v. prou:
 fauces v. iij? sl. swollen much + reaction
 Glands Cervic. 2 +
 suboc. 3 +
 capitis.
 Eczema capitis.
 lachrymation
 It: nil.
Rachitis

15 May. eyes rather severe conjunctivitis - principally
peripheral: lids v. swollen. relapse Sc.f. (18)

9 — Rash v. bright & general punctate
Desq. well marked centrifugal. trunk
 limbs.
 mouth tongue closing. pap. prou:
 fauces v. iij? swollen: much red
 in patches over tonsils swollen
 v. dirty.
 Glands cervic. v. swollen.

eyes the swelling of the lids has gone
down a great deal.

1. Ring marginal ulcers on side of
Cornea: Chemosis
Cornea rather opalescent.
L: eye. Cornea quite clear
Pl. oculo conjunctivitis.

10 May.

Rash. more intense
staining more or less all over the
body, including the face &
involving circumoral Δ .

dent. fr. the fangs attack of scap
v. brisk on the back.

face bloated.

Pl. stomatitis.

Glands cervic v. swollen indeed on
back side.

Faeces v. dirty indeed & swollen.

Taking v. well.

v. low

Wt: 168

lungs slight râles.

11.15 p.m. died.

Ecchymosis in R. lower lid.

much staining on R. flank

& bend of elbow.

sch

typically septic attack
seca in an adult.

W.J.H.
Fulham

Alice Ellen Chalks, Oct 22. adm^d. 12 Mar. 1899.

Drecomata:

6 Mar. hæm. bacæmæ: P.H.

SveT:

parotitis in infancy.

8 - Rash: skin: gland +
diarrhoea → adm:

~~12~~ ¹² hard on adm: (7)

Rash erythema of a septic type on chest.
fauces congested. Sordes on teeth slips:

the mouth v. dry:

tongue v. dirty: dark brown:

râtes in lungs:

skin -

cyanoed: typical septic aspect.

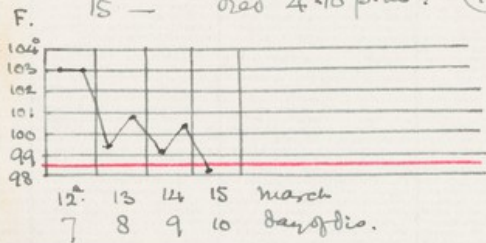
14 Mar: v. feeble: P. 144:

v. restless: sleeping v. badly:

cyanoed: mouth v. dirty:

skin profuse:

15 - died 4-10 p.m.: (10). album. faint traces.



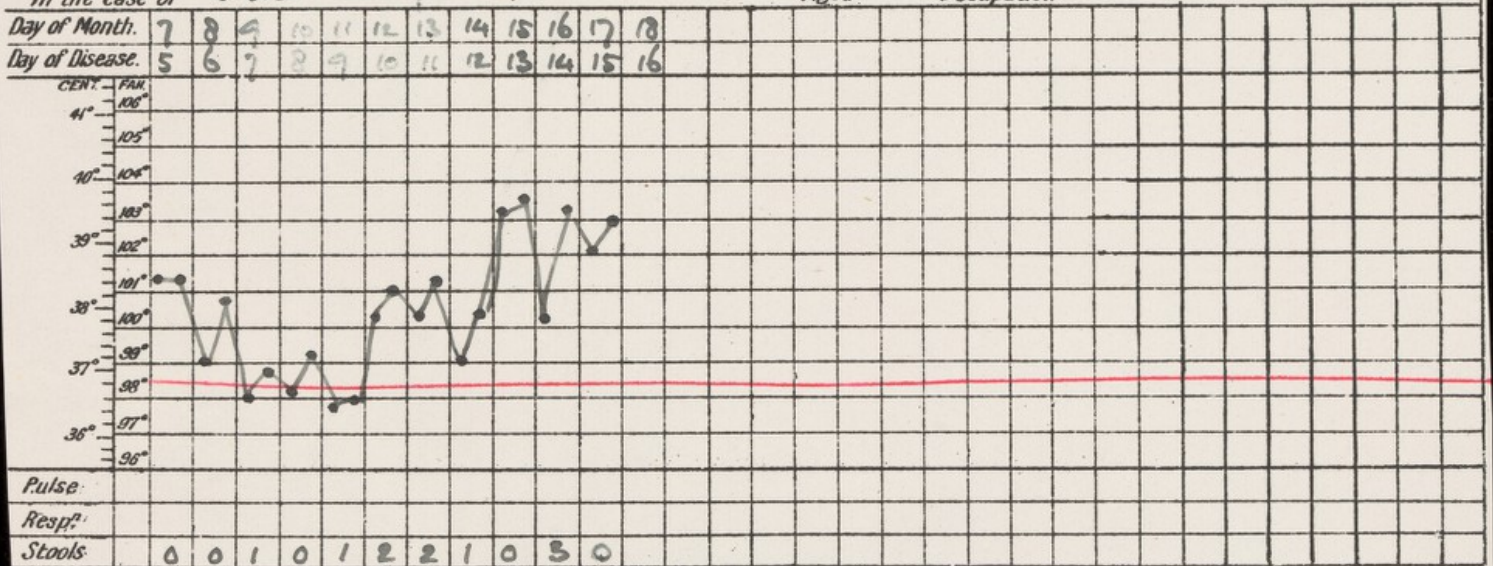
Sc. F.

otitis media: Gen. Suppur Meningitis

ad. 7 April 1899
died 18 April 1899. 18

Records of Temperature, Pulse, Respiration and Stools, from

In the case of Mina Morley Age: Occupation



Color v. fair indeed.

P. fairly raked.

T. over 102° for 2 days (med?)

11 p.m.: pupils widely dilated.

M: 200(?)

Resp. 60

o.b. exam. no neuritis in R. eye.

L. could not properly be seen:

conjunctival bullae appeared where eyeballs were exposed - these burst shortly before death:

arms moved fr. time to time - but no convulsions.

Eyes principally upward w. to R. head to L.

18 April 5 a.m.: Died: Comatose till the end.

AUTOPSY (head only) 18 April 5 p.m.:

General purulent meningitis but principally affecting the base, & most especially the medulla & spinal cord.

R. otitis media -

R. mastoid cells contained a good deal of pus.

L. auditory apparatus apparently quite free from disease.

Sc. f.:

Otitis med. (2).

Gen. pur. meningitis death (16).

Anna Morley 14.

W.F.H. adu^d 7 April 1899

Fulham: d. 18 April 1899:

Some "relaxed throat"

3 Apr. stalpa - feeling of water in ears. hache

4 - R. otorrhoea (2) "watery ser. profuse" SoET.

7 - Rash: (5).

7 April. adu. (4th day)

Rash v. bright punctate sc.f. general.

tonsils v. thick coated white strawberry

fauces inf^d over whole of palate tonsils + erand out tonsils.

R. otorrhoea profuse.

8 Apr: tonsils healing (6).

14 - hache - a backache

15 - M: 101°? ? not quite free

hair in back of h. shdr:

manus changed she has given up sitting up & lies curled up in bed - attempts to read but does not seem to make

P.H.

Subj. to cough

molleii at 4

V^c at 13

at 7 or younger once had scarache but never since she has been quite free from otorrhoea all her life

7 Apr:

formation 10%

19 Apr:

15 -

Sod. Salicylat gr^{xx}

first sample Co^{xy} xx

appear at 8th i.

4th i.

17 Apr.

much progress with her books:

16 Apr: Eggs water a bit.

Conj. v. uij?

IT: } uil.

fauces exam? each day but uil amiss.

~~17 Apr: ~~16 Apr~~~~ says she has had no stalfia since adm

asked me if she was "fairly ill" - she probably noticed the nurses treating her in a more serious manner.

v. reticent - lying coiled up on one side. habits said to be very unpleasant by the nurses.

17 Apr: backache has been continuous since 16 April.

R. otomoea was profuse till 11 April.

11 April it became 2

17 - R. otomoea continues but it is v. much 2

there has never been any foetus for it.

17 p.m.: got became restless & habits said to be very unpleasant -

at night restlessness increased

there was active delirium which remained constantly present till at 5 p.m. today Cona resumed

11 a.m.: Anomalous & cannot be moved

Supraorbital notch = v. little effect.

Conj. v. in sensitive to touch: v. uij?

Eyeballs oscillate a bit from side to side but mostly deviate to R.

veins of head not noticeably big.

Cannot swallow food: it remains in her mouth.

no vomg up to date:

no opisthotonos.

varied movements of arms & legs occas^{ly} & sometimes clenching of hands.

neck only one or two v. small claud. palp:

no thrombosed vein palp:

nothing else made out around sith. ear.

legs } uil.

IT: } uil. abd. held rigidly - otherwise uil. otherwise amiss.

2 p.m.: lying flaccid except for occas movement of arm -

eyeballs occas^{ly} moved

legs quite low: K.J. present:

tactile & algic reflexes present on star.

has passed something under her since last n.

Sgt. \bar{c} coarsely punctate exd. over head, including circumoral Δ .

Records of Temperature, Pulse, Respiration and Stools, from

Day of Edith Reed Oct 12

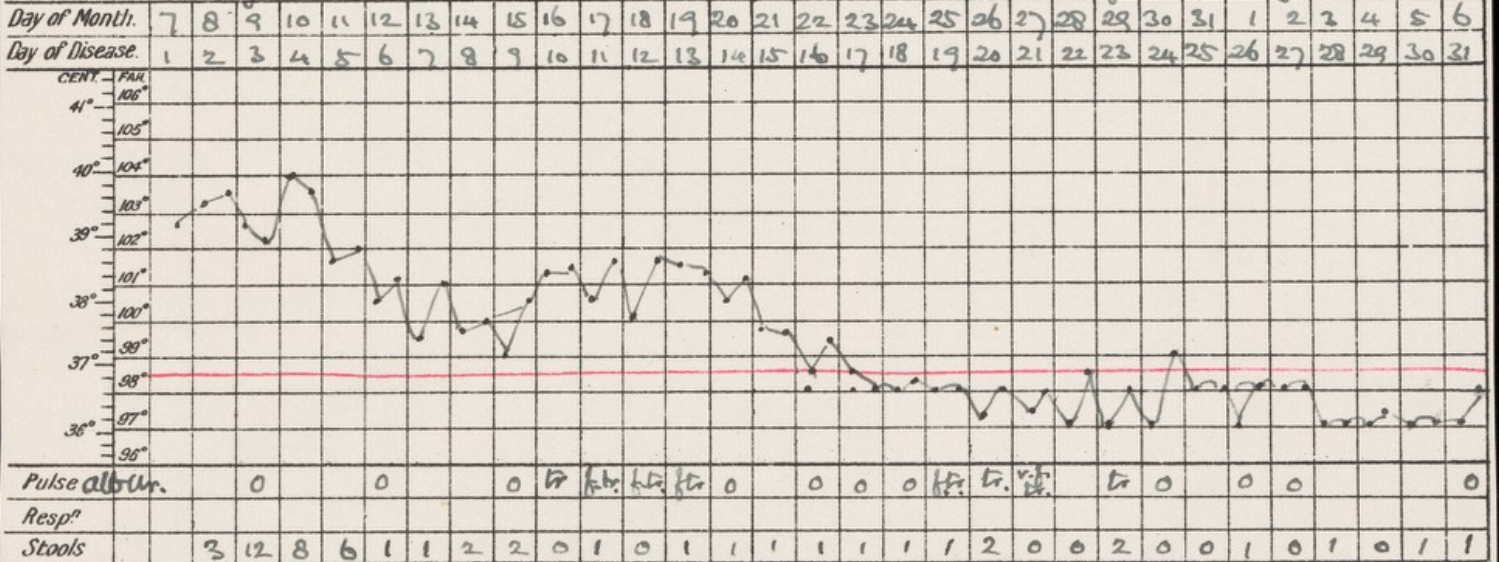
1800 m. 7

In the case of July

Aged

Occupation transp. 16 Aug 1899

transp.



Sc. 7.

c Coarsely punctate rash over
face, scalp, & circumoral triangle.

Edith Reed Oct 12. } adm. W.F.H. 7 July 1899
transferred to N.Hosp. 16 Aug 1899.

7 July sev. vomg. exd.

7 July on adm. (1).

Exd. gen. bright punctate.
fauces inj? swollen: much
loose mucoid secretion.
Hemorrhoea.

10 July exd. deep colour.
delirium sb dur. night.
conj. inj?
tongue v. dry.
pulse rapid, low tension.
Septic diarrhoea.

11 July (1st seen by N.H.) (5).

punctate exd. covering face (cheeks,
bridge of nose, forehead, whole of scalp,
& invading circumoral Δ).

Coarse punctation said to have been
present in these places a day or two
previously.

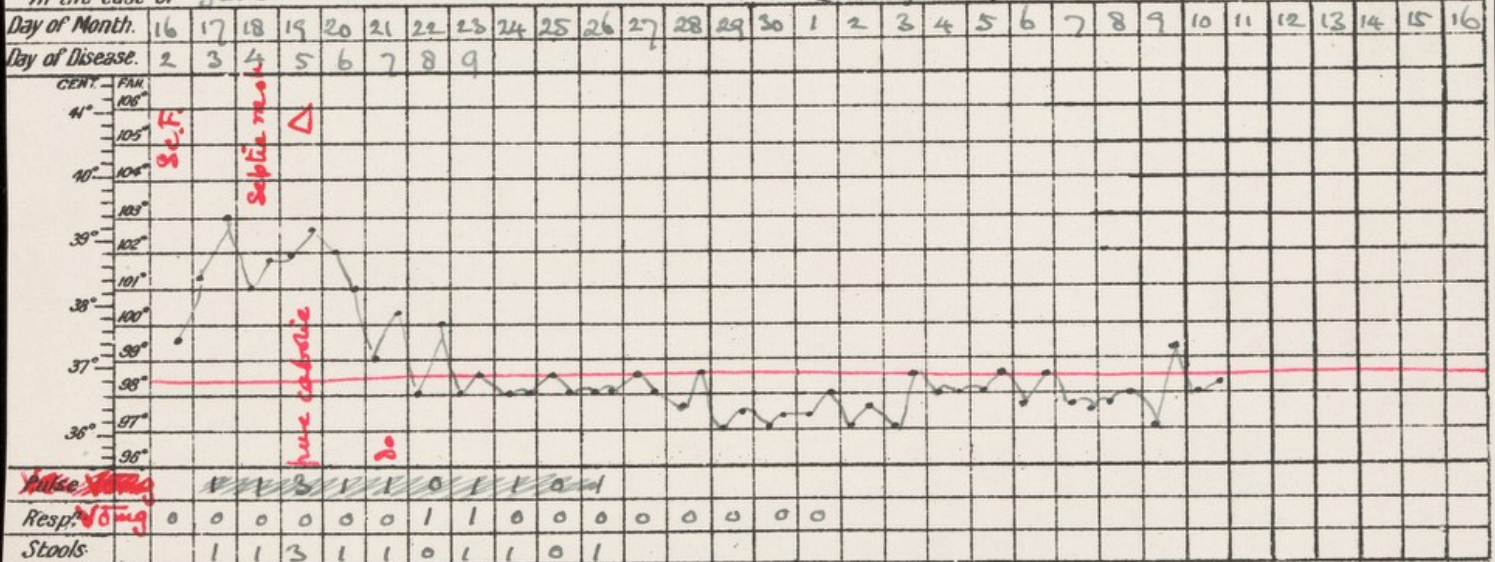
fauces v. ditto indeed - hard palate also
inj?

- 12 July. patch of closely set petechiae over
R. bellid.
- 13 — Ganes still considerable ulceration.
- 17 — functional bruit over Ht.
- 22 — cervical adenitis suppurativa (16).
- 16 Aug: transferred convalescent, up
about to Northern Hosp.
to complete the period of
disinfection.

Sc. F. Septic rash (4th day of dis) Wm. Ferrabel } adu^d 16 June 1900
 Dec^r. 26 Sept 1900

Records of Temperature, Pulse, Respiration and Stools, from Day of 18

In the case of June Aged July Occupation



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alt/ur %alt

Sc.F.

Septic rash. (on 4th day of disease).

Wm. Ferrabel Oct 5. adm. W.F.H. 16 June 1900
Doch. 26 Sept. 1900.

on adm (2nd day of dis) sc.f. 200. definite but
not rather pale.

18 June v. well marked septic maculae 200
on elbows, knees & buttocks: the original
sc.f. 200. having disappeared:

19 June well marked ~~septic~~ ~~maculae~~ ~~on~~ ~~elbows~~:

~~thin membrane on torids.~~
fauces. v. inj? much inflammat. oed.
v. swollen: ? ulceration of opposed surfaces
of torids: profuse shen.

19 June: well marked Δ of oed
thin membrane on torids:

A. Toxin 24,000 units.
Application of pure carbolic to fauces:

Septic rash 2nd dis appeared fr. knees,
& less intense on elbows:

21 \rightarrow 2nd final applic: pure carbolic to
fauces.

Subsequently flared on each side of the
rash superseded as were cicad.

Eventual recovery.

the application of pure carbolic seemed to
make all the difference with him -

the T° remaining permanently down on the
9th day of disease in spite of all the
Septic mischief in evidence.

See T° chart attached.

Sc.F. = septic rash slight (5).

Gertrude Aldred

adm^d W.F.H. 23 June 1900

Sc.F.