ON A CASE
OF THE
“HÆMORRHAGIC DIATHESIS.”

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THE pathology of the disease, or, to speak more correctly, perhaps, the diseases included in the term hæmorrhagic diathesis, is so obscure, and their occurrence, at least in this country, comparatively so rare, that a single case seems worth recording, if it were only as an addition to the literature of the subject; but the case which I am about to describe is, in many respects, so peculiar, even apart from its being an instance of this kind, that I hope it may be thought worthy of being brought under the notice of the Medical and Surgical Society.

For the opportunity of seeing and recording the case I am indebted to the kindness of Mr. Paget and Dr. Allan.

The subject of the disease was a tradesman, æt. 23, who, until 1862, when he left the country and began to live in London, was strong and healthy. Since childhood he had

been subject to occasional vomiting and other symptoms of what was called biliousness, but these never troubled him much, and he was able to do a hard day's work without difficulty. About a fortnight after coming to town he was exposed, during one night, to much cold, and to this exposure the beginning of his illness was attributed, for he was laid up for a month or six weeks afterwards with symptoms of what was supposed, at the time, to be some affection of the kidneys—albuminous and perhaps bloody urine, vomiting, &c. He remained ill for some time, and, as little or no improvement took place in town, he went into the country. Here he soon recovered his usual health, or nearly so, but very soon after his return to town (about the beginning of 1863) he again fell ill, vomiting, purging, and hæmaturia being the most prominent symptoms.

At about the same time a small swelling, like a little boil or acne pimple, appeared on the cheek, near the angle of the mouth, and, after being accidentally rubbed, bled profusely at short intervals for a fortnight, and it was thought that he must have lost altogether two quarts of blood in this time.

The bleeding, however, ceased at last, and did not occur again for nearly a twelvemonth. The vomiting and purging continued to occur very frequently. The matters rejected from the stomach were not peculiar, unless in their sometimes containing a little blood; the fæces were pale; the urine was dark, probably from its containing blood, but no regular examination of it was recorded at this time. During the whole of 1863 the patient's health was much broken by these various disorders, although he was not completely laid up.

In November, 1863 (nearly a year after the first severe hæmorrhage), another small pimple, which had recently appeared on the face, began to bleed with great violence, the blood spurting out forcibly to some distance, and its flow being almost uncontrollable, except by firm pressure. On this occasion the hæmorrhage continued until a common-sized washhand basin was nearly full of blood, notwithstanding the efforts that were made to stop it by pressure, by

powdered matico, &c., and, at last, by the actual cautery. He fainted for a short time during the hæmorrhage.

After some hours the flow of blood ceased, but on the following day it began again, and continued until a considerable quantity, though less than on the last occasion, had been lost. Similar hæmorrhages to these took place, at intervals, for about seven weeks. Sometimes, and most frequently, more or less blood was lost every day, the quantity varying from an ounce or two to half a pint; at other times one or more days passed without any hæmorrhage at all. The longest interval, however, with complete absence of bleeding, during the seven weeks, was only four days.

The blood, apparently arterial, usually spurted out quite suddenly from one of the pimples on the face, and often with a jet to the distance of a foot or more from the patient. It was always difficult, and sometimes almost impossible, to stop the bleeding, on account of the force with which the blood flowed. Pressure was the most effectual means, but even with this the blood welled out from beneath unless the pressure were very firm. Astringents did only partial good, and often none at all until a considerable quantity of blood had been lost.

The bleeding was chiefly, but not entirely, from the pimples on the face. Sometimes the nose bled, but less violently than the pimples. In small quantities, too, blood was occasionally present in the fæces and in the matters rejected by vomiting. It was almost constantly present in the urine.

The pimples were not unlike those of common acne, but somewhat flatter and of a duskier colour, and with a small areola of the same tint, or darker. Only one was larger, and that not more than double or thrice the size, though the dark purplish areola made it look bigger. There were about five or six on the face and two or three on the neck, but they did not all of them bleed. The first pimple, which was mentioned as bleeding in January, 1863, still remained, and was, therefore, of about a year's duration; the others had appeared subsequently, at different times during the patient's

illness. There were no similar pimples on any other part of the surface of the body, but several small, dark red points, scarcely raised, and like very minute purpura spots, appeared on the lower part of the legs.¹

The blood was said to coagulate always more or less firmly. A specimen that I saw, and examined carefully, looked in every respect like ordinary blood, and had separated, in the usual manner, into clot and serum; and unless that the clot was rather soft, it appeared both to the naked eye and under the microscope like that of ordinary blood.

During the seven or eight weeks that the bleedings continued, the patient became thinner and weaker, and was, at last, almost entirely confined to his bed. But he did not appear, even at this time, nearly so exhausted as might have been expected from the large quantities of blood that he had lost; the conjunctiva was red, and indeed looked rather congested; his face was not very pale; it wore a dull and heavy, almost stupid, expression, and was said to be much more dull, or even bloated, immediately before an outbreak of the hæmorrhage. The complexion was muddy rather than anæmic. He was quite rational, but answered questions in a hesitating manner, as if he only slowly comprehended them; he slept badly, and was sometimes "light-headed;" the pulse (112) was full, irritable and jerking; the bowels were rather costive, although previously, for many months, as before mentioned, they had acted too frequently. The urine was dark, dim red, and turbid, with a rather copious sediment of blood and lithic acid, and a little oxalate of lime; the heart and lungs seemed quite healthy, and no anæmic murmur could be heard at the base of the former. The abdomen, too, was quite normal, and there was no apparent enlargement of any of its viscera.

Nothing at all definite could be assigned as a cause of his illness. He was always of very sober habits, and had been married for three years. The house in which he lived was of

¹ They were quite small enough to escape observation unless looked for, but, after careful inquiry, I came to the conclusion that they did not appear until some time after the commencement of the hæmorrhages.

good size, though dark and close, with stables adjoining the premises behind. Other people, however, who lived in the house, were not affected with any special or like complaint, and his predecessor had lived there for many years, without any particular disease in himself or family.

Until within the date of his present illness the patient had never noticed that slight wounds caused any large or long-continued hæmorrhage, although he thought he was always, as he expressed it, "inclined to bleed." A short time, however, before the commencement of the severe hæmorrhages, he grazed one of his knuckles, and blood oozed from the injured part, though not in any large quantity, for two or three days. None of his family were specially subject to hæmorrhage, with the exception of his mother, who had often suffered from very severe epistaxis.

With regard to the treatment that was adopted in this case, it may suffice to say that it was without any other than temporary good effect either on the hæmorrhages or the patient's general health. Various means were tried, but without avail, and it was considered best to remove the patient to the country, as no benefit took place in town. He was accordingly removed about the beginning of January, 1864, nearly two months after the recurrence of the more alarming hæmorrhages. During the removal he seemed much exhausted and was partially insensible.

For an account of his progress during the next few weeks I am indebted to the kindness of Dr. Mott.

Some bleeding from the nose occurred for a short time, soon after his arrival in the country, and, two days afterwards, a small quantity of blood escaped from one of the pimples on the face. On the same day, and for the first time, he had two somewhat violent epileptic fits, and during the following night was sleepless and delirious, and required restraint to keep him in bed.

These were, however, the last serious symptoms that he had. On the day following his general health began to improve, at the same time that the urine became clearer, and the albumen began to disappear. No more bleeding occurred

from any part of the body, excepting a small quantity of blood which was passed with the *fæces* on one or two occasions, and from this time onward he speedily regained health and strength. Oddly enough, however, he lost all remembrance of the few days immediately preceding and following his removal from town, and could not recognise anybody whom he had seen for the first time during that period, although, at the time, he had conversed with them quite rationally.

After he had been in the country for about two months I again saw him. He was looking rather pale, perhaps paler than during his illness, but seemed nearly well, and said he felt so. The urine was clear and healthy, and with a bare trace of albumen.

The pimples on the face remained, and were scarcely at all altered. One of them, the largest, which had been touched, during a violent hæmorrhage, with the actual cautery, had still a purplish areola about a quarter of an inch wide.

Soon after this time he returned to his house in London, and in two or three weeks afterwards, as if from the change, and possibly, also, from trouble in business matters, he again seemed to be falling into a bad state of health. The chief symptoms were general debility and inaptitude for exertion; dulness of countenance and intellect; furred tongue; irritable pulse, &c.; the bowels were sometimes relaxed, and he had frequently passed small quantities of blood with the *fæces*. The urine, however, remained clear, and he had no return of hæmorrhage from any other part than the rectum. The pimples on the face remained almost as they were, or had, perhaps, become a little smaller, and there were no purpura-like spots on the legs or elsewhere.

December, 1864.—At this date (about eight months after the last note), he was well, and had had no return of hæmorrhage. He had been living during almost all the time in the country.

Although it would be improper to make any general deductions from a single case, like the present, it may be well to direct attention, very briefly, to its more important features,

and see what likeness, if any, can be discovered to other recorded instances of the disease, or to any other diseases, not usually supposed to be caused by the same hæmorrhagic diathesis.

And, in the first place, may be noticed the marked illustration afforded by the present case of the differences between the idiopathic and what may be called the simply traumatic varieties of the disease. The congestion which often preceded and which was only partly relieved by the hæmorrhage, the occasional delirium, the epileptic fits, and the absence of those symptoms of anæmia which follow a mere loss of blood, over and above the spontaneous occurrence of the bleedings, point to some condition of the system far beyond what can be accounted for by a want of coagulating power in the blood, or thinness of the coats of the blood-vessels, such as have been observed in cases of fatal bleeding after slight wounds.¹ It is not necessary, however, to do more than refer to these differences, inasmuch as those symptoms which best illustrate them are not peculiar to the present case.

In the interesting memoir of this disease by Grandidier,² cases are related which, in many respects, resemble this one, especially in the spontaneous and intermittent character of the bleedings, and in the signs of general congestion which preceded the hæmorrhages, as well as in the immunity from danger after slight wounds, in the intervals.

There is a reference, moreover, in Andral's 'Pathological Anatomy,' to two somewhat similar cases. "Two children, the subjects of this disease, presented, at various intervals, on their legs and thighs, a number of blue spots which swell to the size of a pigeon's egg and then assume a yellowish-green shade; they do not bleed unless when opened artificially, but the hæmorrhage continues until the patient falls into a swoon, and the body becomes pale as death. The further progress of the bleeding is arrested by the pressure of the

¹ 'Trans. of Med. and Chir. Soc.,' vol. viii, p. 227. Cooper's 'Surg. Dict.,' edited by Lane, vol. i, p. 864.

² 'Die Hæmophilic oder die Bluterkrankheit,' 1855.

finger on the orifice, which it is generally necessary to continue for twenty-four hours." The cases, however, have a greater likeness to some which are quoted by Grandidier than to the present, especially in the large size and other characters of the swellings.

"Redman Coxe mentions a case in which, without any wound, blood sweated from the ears, the nose, and the skin of the occiput; later, also, at the shoulders, the belly, the tips of the fingers, and toes," &c.¹

Other cases more or less like these might be referred to, but I can find none which more closely resemble the present; and there remain, therefore, a few points in the latter which are peculiar, and worth noticing, although, as before remarked, no general deduction can be safely made from them. The force with which the blood flowed, the large quantities which escaped, the delirium, convulsions, &c., are such as happen occasionally in other instances of hæmorrhage depending on this special diathesis, and are not peculiar to the present case.²

1. The pimples on the face, from which the blood flowed so profusely, had some peculiar characters. I do not remember seeing, previously, any exactly resembling them, but they were, most of them, sufficiently like acne pimples to make it possible that they may have been some eruption allied to this, whose characters were masked by the blood disease. Whether this were so, or whether they were a diminutive species of the "blood-swellings" sometimes observed in this disease, and described by Grandidier and others, I am unable to say.

2. The purpura-like specks on the legs were small and indistinct, and scarcely marked enough for one to decide positively on their nature, but they are interesting in connection with the likeness of the present disease to purpura, the so-called "eruption" of which they closely resembled.³

The absence, however, of a well-marked eruption, and the

¹ Virchow, 'Handbuck der Speciellen Path. und Therap.,' Band i, p. 265.

² Ibid., p. 267.

³ Petechiæ are, indeed, described by Grandidier and others as often

presence of the other peculiarities preceding and accompanying the hæmorrhages, prevent more than a passing notice of the likeness (often referred to by authors) between the two diseases. It is worthy of remark, however, that Grandidier, after describing the differences between them, and giving his opinion that they are essentially distinct, admits that there are some transition-forms, as it were, in which the diagnosis is very difficult.

3. The decided benefit which seemed to be almost immediately derived from change of air, certainly deserves special consideration, and more particularly as it occurred more than once, and after other means had been long tried in vain. A third time, too, the patient appeared to be on the eve of a fresh attack of the disease, after only a short residence in town. Mr. Moore remarks "that the characteristics of the hæmorrhagic diathesis may be induced in a young and previously healthy person by the privation of fresh air, light, and nourishing food, and by confinement in a damp low situation, and they will disappear again on placing the patient in conditions favorable to health."¹ In the present case, however, the cause of the disease could not be traced definitely to any special defect in the hygienic condition of the house or district in which the patient lived. But it may be that one, in whom there exists a tendency to such disease, may have the predisposition excited to action by particular and quite occult hygienic influences; and that the only means of freedom may be in the careful avoidance of all such as are found by experience to be hurtful. This seems, at least, a fair enough inference from the history of the present case, and among the records of some other diseases an analogy is not altogether wanting.

accompanying the hæmorrhagic diathesis, but they appear to be usually of considerable size. See Grandidier, l. c., Wachsmuth, 'Die Bluterkrankheit,' 1849.

¹ Holmes's 'System of Surgery,' vol. i, p. 656.