POISONING BY PHOSPHORUS;

JAUNDICE;

DEATH IN SIX DAYS.

FATTY DEGENERATION OF LIVER AND KIDNEYS.

BY

THOMAS HILLIER, M.D. LOND., F.R.C.P.,
PHYSICIAN TO THE HOSPITAL FOR SICK CHILDREN, AND TO THE SKIN
DEPARTMENT IN UNIVERSITY COLLEGE HOSPITAL.

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THE following case, though somewhat incomplete, yet, taken in connection with those recently brought before the Society by Dr. Habershon, may be sufficiently instructive to justify my reporting it.

Cecilia F. W., æt. $4\frac{1}{2}$ years, was brought to Dr. Coster, of Hanwell, on Sunday the 27th January, with the following symptoms: skin hot and dry, tongue much furred, pulse about 140, and much thirst.

Her mother gave the following history of the case: On the previous day she had left her alone in the house for a short time, whilst she went out on business. The child during her mother's absence took a box of lucifer matches from the chimneypiece, and sucked the composition from as many as

two dozen of the matches. The child's breath had an exceedingly offensive smell, and the room was scented strongly with phosphorus. The mother hoping to get rid of the poison gave the child half-a-teaspoonful of jalap, which soon acted on the bowels, causing eight or nine motions; there was no peculiar smell in them nor anything in their appearance which attracted the mother's notice. A motion which the child passed on Wednesday the 30th was streaked with blood and had an extremely offensive odour. On Monday evening, the second day after she took the poison, a tendency to vomiting set in, which was continued at intervals of half-an-hour or an hour until Tuesday morning. The vomit was yellow and was said to smell of phosphorus. Ineffectual and urgent attempts to vomit continued for two days. On the fourth day the skin and conjunctivæ were jaundiced. From the second day there was great thirst; the child was extremely restless and appeared to suffer much pain, rolling about its head and moaning. On Thursday night, 31st January, convulsions set in, and on the following day death ensued.

The treatment adopted was lime-water and milk in small quantities often repeated, and beef-tea enemata. After the third day a citrate of potash mixture was given.

Autopsy.—Seventy hours after death rigor-mortis still continued in the lower limbs; skin and conjunctivæ very yellow; abdomen much distended with flatus.

Thorax.—*Lungs* natural but paler than usual. Some hypostatic congestion of both bases.

Heart firmly contracted, cavities nearly empty. To the naked eye the muscular fibre appeared healthy; some yellow staining of the valves; no congelation of blood in heart.

Abdomen.—The small intestines contained throughout mucus mixed more or less with a dark almost black treacly-looking fluid (altered blood). The stomach contained a very small quantity of the same kind of fluid.

There was no ulceration or redness either of the stomach or intestinal mucous membrane, which was on the contrary unusually pale.

Liver very large but excessively pale, of a light fawn or pale chamois leather colour. The centres of the lobules were very slightly darker in tint than the peripheries. The capsule separated without tearing the liver substance. Under the microscope the hepatic cells were not easily made out, being replaced almost entirely by oil-globules of different sizes.

Kidneys.—On section remarkably pale with a good deal of mucus in the pelvis. The renal cells presented under the microscope an excess of fat globules.

Spleen looked normal.

Brain.—Some serous effusion into the meshes of the pia-mater, especially at the base, where the pia-mater was also a little opaque. The brain generally was less vascular than usual.

This case, though meager in its details, may prove interesting to the Fellows of the Society as an appendix to Dr. Habershon's paper.