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INFLUENZA AND ENTERIC FEVER.

ONE of the best ascertained facts in pathology is that the various infectious fevers to which the human frame is liable are caused by the growth within the body of various organisms to which, for convenience, we give the generic title of microbes. These, being implanted in the body from without, grow and elaborate certain poisonous products, each after its kind; and according to the manner in which these products—these toxins—affect the economy, and the manner in which the body reacts to the embarrassing new conditions in which it finds itself, so is the disease produced, be it enteric, or influenza, or some other kind. Hence, although, taking the whole course of the disease, each specific germ implants its own specific character upon the malady, a very large proportion of the symptoms met with are not the direct product of the disease germ or its toxins, but are the outcome of the body's efforts to resist the invasion to which it is being subjected, and as there are only certain lines along which resistance can be effected, it is not to be wondered at that, if we put on one side such directly toxic signs as rashes, there is a general similarity between the early symptoms of many febrile diseases. Thus it happens that, in forming a diagnosis, dependence has often to be placed upon the progress and succession of the symptoms rather than upon the picture presented by their grouping at any given moment. Enteric fever and influenza, for example, are diseases which differ greatly in their course. Yet they are not infrequently mistaken for each other in their early stages. This was well illustrated in an outbreak of enteric fever which occurred in Clifton (Davies in *Medico-Chirurgical Transactions*, vol. lxxxi.) a year or two ago, a considerable number of the earlier cases having been thought to be suffering from influenza, and their true nature having only being discovered by the energy of the medical officer of health in bringing Widal's test to bear upon the problem. We are again reminded of this matter by the reports which have come to hand in regard to the illness of the Tsar, which, after being at first regarded as influenza, was later on discovered to be enteric or typhoid fever, or, as it is often called on the Continent, typhus abdominalis. Enteric fever may easily be confused with other diseases, especially during the first week. In patients who have suffered from tuberculous disease in any form, it may be a matter of great doubt

for several days whether one has to do with enteric fever or with some secondary tuberculous affection—tuberculous meningitis, or acute general miliary tuberculosis. In regard to influenza, it is well recognised that the gastro-intestinal form of this disease may closely simulate enteric fever. According to Dreschfeld, we may have a roseolar rash, tympanites, gurgling, a markedly enlarged spleen, and profuse diarrhoea, while the pyrexia, as in enteric fever, may last some weeks. Moreover, as a still further complication, one must not forget that influenza and enteric fever may occur together, so that a case may appear to be a typical one of influenza, and indeed may form one of a group of such cases, and yet after the subsidence of the pyrexia due to the influenza a rise of temperature may again take place, and the case may run through all the symptoms of enteric fever, showing that there has been a double infliction. As to the question of diagnosis between influenza and enteric fever, it is to be noted that although in influenza there may be in some rare cases a roseolar rash, this tends to be more widely distributed than the spots of enteric, and does not come out in successive crops, as so generally occurs in the latter disease. Then the gurgling in the abdomen is not confined to the right iliac fossa, but is more generally distributed, as in ordinary diarrhoea. The course of the fever tells much if one has it from the beginning. The sudden onset of the pyrexia in influenza, sometimes running the temperature up to 103° Fahr. or 104° Fahr. in the first twenty-four hours, would of course go to negative enteric; as also would the absolutely sudden onset of the other symptoms, if one could be sure that the apparent date of onset was the real beginning of the disease. Unfortunately, a sufficiently large number of cases of enteric fever pass through the early days of the disease without actual breakdown to make it sometimes difficult to feel sure that the given dates of onset are correct. What may appear to be the onset of an influenza may really be the breakdown of a case of ambulant enteric fever. This same uncertainty as to dates, and especially the fact that the early days of enteric fever have often gone by before the patient comes under observation, may deprive us of the very great assistance which the course of the temperature, as described by Wunderlich, gives when it is observed. Where there is enough the discovery

of influenza bacilli in the expectoration might clear up the diagnosis. The more specific diagnostic signs of enteric fever are often unfortunately not very definite at the very time when their help is most required. The diazo reaction is often absent during the first week, and even when present is by no means peculiar to this disease. If typhoid bacilli can be discovered in the urine, that would be clear evidence; but this sign is often absent in the first week. Horton Smith says that the bacilli may make their first appearance in the urine at any period of the disease, but that the

condition is rare before the third week. Widal's reaction, again, is valuable when it occurs in a distinctive degree; but it does not usually appear until the second week, although it may in some cases be met with between the fifth and eighth days. What is sufficiently clear is that in the early days of enteric fever it may be most difficult to arrive at anything like a positive diagnosis, and that in attempting to distinguish it from certain forms of influenza our dependence must be placed upon the course and development of the symptoms rather than upon individual signs.

STREET ARCHITECTURE.

At a time when suggestions for "housing" the poor—suggestions mostly more or less irreconcilable with common sense and sound economy—form the stock-in-trade of innumerable political quacks and self-styled "progressive" reformers, it is very delightful to receive from an eminent engineer suggestions for the better housing of classes somewhat higher in the social scale, such as, presumably, would be the tenants of the new street which is about to be made between Holborn and the Strand. It is true that the tenants in question do not appear to have been the primary objects of Sir Frederick Bramwell's concern, and that he has been thinking mainly of the best methods of employing and covering the space which the London County Council will soon have at its disposal; but it is no less true that the former consideration must, to a very great extent, be involved in the latter, and that every construction which increases the general value of the houses, and the impressiveness and convenience of the street architecture, will be likely to increase, in the same proportions, the comfort and wholesomeness of the individual dwellings of which the street is composed. Sir Frederick Bramwell's proposal has been too fully discussed in the *Times* and in other papers for it to be necessary to enter here into any detailed description of it; and it is sufficient to say that he would make the ordinary ground-floor shops project beyond the general line of the houses of which they formed part, and carry upon their roofs a second or elevated footway upon which a "first-floor" row of shops would open, and which would be accessible from the footway below by stairs at convenient intervals, and be partly covered by the projection over it of the second floors of the buildings. Bridges would be carried over side streets at the level of the upper footway, and similar bridges would cross the main street with sufficient frequency. The suggestion, therefore, is that every house would have two shops, an upper and a lower one; that the footway in front of the upper shops would be to a great extent protected from rain or snow; and that the stairs and footbridges would allow pedestrians to cross every side street at the first-floor level, or to cross from one side of the main street to the other, without either arresting the carriage traffic or being in danger from it. Increased

house value, increased convenience, diminution of mud, and protection from snow and rain are held out as the chief advantages to be expected from the adoption of the plan.

From a sanitary point of view the most important consideration arising out of Sir Frederick's proposal has relation to the probable cleanliness of the stairs and footway. This question has already been raised in the *Times*; and Sir Frederick replied to it, not very effectively, by saying that he had visited the stairs leading from the Holborn Viaduct to Farringdon Street, and had found them, if not all that could be desired, at least not very dirty. He would have done better to visit the stairs leading from the Thames Embankment either to Wellington Street or to the railway bridge at Charing Cross. The Farringdon Street stairs are scarcely used, except as playgrounds for a few stray children; the Embankment stairs are a good deal used. In winter they would furnish mud by shovelfuls; in summer, dust by handfals. If the construction proposed were of such a nature that the stairs and footways could be effectually cleaned and washed with hose every night, and if this were done by the municipality as a regular part of its duty, some of the indicated advantages might, no doubt, be secured; but if the cleansing were left to the residents, to be accomplished in a fragmentary way by each householder, with such imperfect means as he could command, the stairs and footways would be filthy, and the dwellings giving upon them would soon become correspondingly unwholesome. This seems to us to be the real difficulty of the case, and the other objections which have been raised are in large measure imaginary. Mr. Frederic Harrison, for example, is filled with holy horror at the idea of the County Council letting its sites under conditions as to the class of building which should be erected—in such a way, for example, as to compel the adoption of Sir Frederick Bramwell's scheme. The idea of liberty entertained by some is based upon a perfect readiness to *restrain*, to say "you shall *not*," with a corresponding unwillingness to *constrain*, to say "you *shall*." True liberty, however, says you *shall* do everything that is clearly for the good of the community, and only says you shall *not* in those exceptional cases in which the proposed form of activity would be in the highest degree hurtful and injurious.