

three corpses was a difficult problem. A fifth man then went in, and very hurriedly and dexterously managed to strap one of the corpses to a hook which was at once drawn out; but he felt distressed in breathing for a short time and I had to get him into the fresh air away from the large crowd. He went in subsequently and brought out the other two corpses in the same way, though he felt distressed in the same manner each time. Artificial respiration was of no avail, as the bodies were in the well for nearly two hours. They were cyanosed. There was white froth coming from the mouth of one and food from another.

A lantern was then put in the well after the corpses had been dragged out. The light went out. Silver and brass ornaments were not tarnished.

According to Lyon's Jurisprudence carbon dioxide gas is produced by stored grain which has become damp; similar cases of dioxide gas poisoning are described in this book. I presume it was this gas which caused the tragic death of these three persons. It was germinated, in my opinion, from the husks.

A CASE OF RAT-BITE FEVER.

By M. A. KRISHNA IYER,

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A HEALTHY young man, aged about 26, a villager and a friend of the writer, was bitten by a bandicoot on his foot while returning from a hotel on a dark night in Madras. Some antiseptic dressings were applied to the wound and nothing was thought about it for some time. He is employed in a Government office and attended his office as usual. For about 6 months the ulcer did not heal. About October 1927 I happened to meet him at Madras. Then he showed me the ulcer in an unhealthy state with a good deal of inflammatory infiltration of the surrounding tissues. He told me how six months previously he had been bitten by a bandicoot and further added that he was getting irregular fever now and then, and that he felt very weak. I too noticed a change in his constitution. As I myself was ignorant of the characteristic symptoms that develop in a rat-bite case then, I could not help him much in the way of treatment. However, I asked him to have complete rest and proper treatment for the ulcer and to take some tonics for the general improvement of his health.

Soon after the publication of the article on rat-bite fever in the *Indian Medical Gazette* of September last, I got a note, that the condition of the patient was getting worse and that he had been reduced to a skeleton (a person who had appeared for police sub-inspector's selection for 2 or 3 years, and had had an excellent constitution with the necessary height, weight, girth, etc.), and that his disease had been diagnosed as, and was receiving treatment for, tuberculosis of the lungs.

On my suggesting to him the diagnosis of his condition, he approached his doctor with the object of getting injected with Neosalvarsan. For some reason or other the doctor did not give the injections and he had to go to another doctor, who gave him 2 or 3 injections.

He was cured and within the period of 3 to 4 months he regained his old constitution, and again appeared for police selection.

ASCARIASIS SIMULATING ABDOMINAL TUMOURS.

By J. F. HENRIQUES, L.M. & S., F.C.P.S., B.M.S.,

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A HINDU, male child, age 5 years, had a number of masses easily felt within the abdomen. Duration of condition: 2 months. The child looked anæmic. A diagnosis of tumour had been made elsewhere, and the patient had been advised to come to the dispensary for operation. I felt about 4 or 5 masses on palpating the abdomen; one especially seemed unduly prominent and fairly superficial. It was felt above the right Poupart's ligament. I suspected malignancy and advised the patient that operation was out of the question, but as always happens when the doctor does not desire to do anything in a case the patient wants him to operate; in this case the child's father was very disappointed that I was not going to operate. As a *placebo*, I prescribed salol with *mistura sodii* compound and as the patient lived some miles away I gave medicine for four days. During this time the patient had 6 grains of salol. This drug has some slight anthelmintic action and four days after the child was again brought to the dispensary, having passed during this interval 25 worms. The lumps had all disappeared and the abdomen was flat. I then gave a *santonin* powder; the child only passed a few more worms.

Though the man, who belonged to the illiterate classes, was happy to see his child all right after taking my medicine and thought very highly of me, still I felt very insignificant to think how poor my diagnosis had been.

This case shows the importance of giving *santonin* as a preliminary measure to abdominal operations in tropical countries.

A RADICAL CURE FOR HYDROCELE BY QUININE INJECTION.

By B. L. SHARMA, L.M.P.,

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THE following method for the treatment of hydrocele has been tested by me and found successful in several cases during the last two years. During this period cases of hydrocele of different size and duration have been treated by me with this method, and in no case was there any re-accumulation of fluid.