

The point of interest in this case is that, inspite of the abnormalities of the position of the viscera, the functions of the various organs appeared quite normal. Up to the time of her abortion, the girl was perfectly healthy. After the abortion her periods became irregular and she began to lose weight and strength. This went on and fever set in with the enlargement of spleen and liver. All these were due to kala-azar from which she must have been suffering for over a year.

COBRA POISONING.

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KARIMBAX, Sanitary Jamadar, age 32, resident of Pachmarhi, came to me at 11 A.M. on 3rd November, 1919, saying that he was bitten 15 minutes ago on the palm of the left hand, between the thumb and the index finger and at the root of the latter, by a cobra which he had reared in his house for a month and a quarter. He is accustomed to catch snakes since he was a boy of 12, and the present snake was caught by him in the house of the Postmaster a month and a quarter ago.

I immediately put my handkerchief on the arm and on going to hospital a rubber cord. He said the wound was squeezed out and bled by him and a little pot. permang. was applied over it.

Condition on admission:—11-30 A.M. The patient had walked half a mile to come to hospital. Face anxious. Temp. 98. Pulse 72. Resp. 26. Complained of burning sensation in the bitten part, which was slightly swollen. It was washed and examined with lens. It had one small puncture, skin-deep, at the root of the index finger. By this time half an hour had elapsed and no constitutional symptoms had appeared. The patient told me that he had removed both the front teeth (fangs) of the snake after it was caught by him. This left me in doubt as to whether he would get poisoning; however I thought it better to wait for symptoms, preparing myself in the meanwhile for the emergency.

12 Midnight. Pulse 64. Resp. 24. Burning sensation in the hand, got shivering, given spt. ammon. arom. one drachm. Hot bottles to the extremities.

4 Nov. 1919 12-30 A.M. Pulse 64. Resp. 24. Shivering again. Restless. Complaining of pain in the hand. 10 c.c. of 5 p.c. solution of gold chlor. injected in the adjoining area of the bitten part.

1 A.M. Severe pain in the arm. Rubber cord and handkerchief removed.

1-30 A.M. Pulse 64. Resp. 24. Temp. 98. Calm and quiet. No sleep. Spt. ammon. arom. half drachm.

2 A.M. Pulse 64. Resp. 24.

2-30 A.M. Shivering. Hot coffee to drink.

3 A.M. Pulse 64. Resp. 24. Drowsy.

3-30 A.M. Vomited. Pulse 60. Resp. 26. Temp. 98.

3-45 A.M. Getting dull. Does not answer questions.

4 A.M. Saliva trickling down, speech indistinct, eyelids drooping. Conscious, but says

cannot see anything. Swallowing difficult. Pulse 64. Resp. 28. Temp. 98, 80 c.c. antivenene, dated 31-12-18, given subcutaneously in flanks.

4-30 A.M. Pulse 80. Resp. 32. Other symptoms as before. Complains of choking sensation in throat. Given 100 c.c. antivenene, dated 2-11-16, intravenous in right arm.

5 A.M. Slight perspiration. Ptosis marked. Unable to move eyelids and eye-balls. Pupils dilated. Saliva trickling. Speech markedly indistinct. Unable to swallow. Conscious. Pulse 72. Resp. 28. Temp. 97.4.

5-30 A.M. No change.

6 A.M. No change, 40 c.c. antivenene, dated 4-1-16, intravenous in left arm.

6 to 9 A.M. No change. Pulse 72. Resp. 28.

10 A.M. 80 c.c. antivenene, dated 1-4-18 and 31-10-18, intravenous in left arm. Bladder emptied.

11 A.M. Pulse 72. Resp. 32. Temp. 100. Can open eye-lids. Speech indistinct.

12 Noon. Pulse 72. Resp. 32. Temp. 100. Can open eyes and move eye-balls. Can recognise. Speech more clear. Can swallow water.

1 P.M. Temp. 101. Pulse 120. Resp. 32. Hot coffee. Speech clear. Can move in bed.

4 P.M. Temp. 102. Pulse 144. Resp. 32. Diaphoretic. Says feels better.

8 P.M. Temp. 102. Pulse 144. Resp. 32. Calomel five grains.

12 Midnight. Temp. 101. Pulse 144. Resp. 32. Had good sleep.

Hereafter the patient stayed in hospital till 14th November. Till 9th he had temperature rising from 100 to 101.2, after which it remained normal till he was discharged. The hand was much swollen during the first three days and became gangrenous. Deep incisions were made in 3-4 places and the hand was kept in hot permang. bath. This brought down the swelling and the hand was getting healthy when the patient was discharged.

The snake was replaced in its usual bamboo basket by the man after he was bitten. Eight days later I tried to kill it by immersing the basket in water for half an hour. The snake did not die. So the lid was opened, the snake came out with its hood up and was killed by hitting on the back. It is preserved in spirit. It was a cobra, 4 ft. 3 in. in length. The left fang was well out of the surrounding tissue though I believe smaller in size. The right one was shorter than the left and not out of the tissues.

General remarks.—Do the fangs come up again after they are knocked down? Is gold chloride of any use? If not, it is better to stop its use as it sets up a very bad gangrene. I have noticed this in many cases. Is ligature, free bleeding by incising the part and washing by pot. permang. not sufficient to prevent the onset of symptoms? Would 100 c.c. antivenene given intravenously be sufficient to neutralize the poison? I believe it will be well to stock 200 c.c. of fresh serum in every hospital and not to destroy the old serum of two years' standing.