

would at once conclusively point to the true state of affairs. The "black eyes" and painful swollen condition of the limb or limbs might at first suggest violence, of which the sign of crepitus might only serve to enhance the degree. The history of the case, if considered reliable, would of course be against this, and the extent of the swelling and absence of superficial injuries would negative it, too. The diagnosis from infantile paralysis is clear from the swollen and enlarged state of the limb, though at the first glance the lax motionless and powerless condition might be suggestive of the complaint. Lastly, acute periostitis might occur to the mind of the observer, and rise of body temperature, as occurred in case 2, would not tend to simplify matters. The history of gradually failing health, of progressive increase in the local condition, coupled with the absence of heat and tension locally and any acute febrile rather constitutional symptoms generally, negative this condition.

The earlier stages or lesser degrees of the affection are not so easily recognised, but vague pains, tenderness and some loss of power in or disinclination to move the limbs, should put the observer on his guard with regard to the possibility of a scorbutic taint. The dyspnoic condition noticed in case 2 was, I think, due to failing vitality, the partial dislocation of the sternum may have been a factor in the production of it, but how far I am not prepared to say.

### PYORRHOEA ALVEOLARIS OR SCURVY.

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I SHOULD like to offer a word of explanation in regard to the following paragraph which appeared in the September issue of the *Indian Medical Gazette*. The paragraph referred to is:—

"Major Andrew Buchanan, of Nagpur Jail, raised the question and claimed that the condition of pyorrhoea alveolaris, so common at that time in certain jails, was due to scurvy and produced by lack of vegetables. We challenged that opinion at the time, and this year we notice in the Central Provinces Jail Report that this condition of the gums was kept under control by a free use of the tooth-sticks and charcoal tooth powder."

The report referred to was written by Mr. Acklom who is not a medical man, and I do not think it was his intention to convey that no cases of spongy gums are due to scurvy. In the small book which I published last year I drew attention to the fact that "spongy gums" were more prevalent during or after the famine, and they were more prevalent in those districts in which the famine had been most severe, and

I said "it is clear that the famine has had in some way an influence in its causation, but how that influence has acted is not so certain."

In the chapter on the Relation between Spongy Gums and Scurvy I showed—

(1) That there had for over 20 years been constant differences of opinion between medical officers as to the nature and causes of the spongy gums which were found in jails.

(2) That no attempt had been made to classify the different kinds of spongy gums according to the causation.

(3) That if there are different causes of this condition it is essential, first of all, to differentiate these different varieties.

(4) That the different varieties may be classified into four groups:—

(a) Those due to scurvy or malnutrition.

(b) Those due to mercury.

(c) Those due to want of attention to cleaning of the teeth.

(And I said that in this class might be included cases which have had scurvy, but in which the gums had not returned to their normal condition owing to want of cleanliness, although the general scorbutic condition may have been cured.)

(d) Other causes (I need not refer to now).

Referring to group 3, I said at pages 32 and 33:—

(C). "When the gums have become spongy and ulcerated, the retention of particles of decomposing food and tartar may keep up the unhealthy condition even though the health of the man may have become otherwise good. My reasons for holding this opinion are, that in the great majority of cases which have been recently seen, there has been a great improvement in the gums after treatment with antiseptics and special attention to cleanliness. It may be said by those who hold that the disease of the gums is the result of dirt and want of attention to cleanliness, that this rapid improvement after local treatment is a proof that the softening of the gums is a purely local disease. But if dirt be the cause, how can the excessive prevalence of the disease since the famine began be accounted for? It would be necessary to assume that the people have recently been less cleanly in their habits than they were formerly. Besides, an ordinary scorbutic ulcer heals very much more rapidly if the ulcer is carefully dressed according to the regular surgical principles, and in the same way we should expect an improvement in the mouth if we give attention to the local conditions and remove anything of an irritating nature. General treatment is essential, and as the ordinary diet of the jail is an antiscorbutic diet, the general treatment is supplied as a matter of course. Local treatment is very important, but the rapidity of the cure under local treatment should not lead us to look on the disease as a purely local disease."

