

MURPHY (C.W.)

The Sequelæ of La Grippe.



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Before considering the morbid phenomena resulting from La grippe, it may not be inappropriate to first notice briefly its nature, origin, mode of propagation, varieties, etc. Influenza is an acute infectious disease of microbial origin, as numerous microscopists claim to have discovered the bacteria; it is epidemic and always travels rapidly from east to west, being a stranger to neither climate nor any class of society. It has a score or more of names according to the countries through which it has extended, but the most common term is "La grippe," from the French word *gripper*, meaning "to seize"; and as this is easily changed into the English word "grip," to all victims who have had it severely, the word "grip" has a wonderful significance.

There were well-authenticated epidemics of influenza before the birth of Christ. Old Hippocrates, whose accurate powers of observation made him familiar with almost everything, no doubt knew all about it. There are twenty well-recorded outbreaks from 1557 to 1889. Many puzzling facts are to be noticed in the spread of this dis-

ease. Unlike most other infectious diseases it has appeared in localities far remote from each other on the same day, which would seem to indicate that its spread is not dependent upon one center of infection. It occurred simultaneously in New York, Cincinnati, and St. Louis. How then are we to explain its transmission either from person to person or through the medium of the atmosphere? Tyndall in his philosophic work on "Floating Matter in the Air" says on the tops of the highest mountains in Switzerland there are no germs of any kind to be found; yet when the grip germs were carried there from the lowlands, they lived and multiplied luxuriantly. The influenza which has prevailed here for the past three winters was almost as hydra-headed in its manifestations as malaria; but the multitudinous symptoms arising from it may be classed into three principal varieties or groups: 1, Nervous. 2, Catarrhal. 3, Gastric.

In the first, headache, pains in the limbs and trunk, general soreness, etc., are prominent symptoms; in the second, bronchial catarrh, sneezing, sore throat,

coryza are more dominant; while in the third we have nausea, vomiting, diarrhoea and other symptoms of catarrh of the alimentary tract. In all there is fever of remittent character, acceleration of pulse, and there is occasionally noticed a combination of two or all three of these varieties. Unlike most infectious diseases one attack does not confer immunity from subsequent attacks.

When we consider how protean La grippe is in its manifestations—attacking so many different anatomical structures—we at once come to the conclusion that the sequelæ which it may induce would naturally be variegated in their nature, seat, and importance. In the great majority of cases no bad results follow La grippe: but it is unquestionably true that a great many nervous, mental, aural, respiratory, alimentary, urinary, and other diseases we have been called upon to treat within the past three years, have their sole etiological factor in this malady. Many of the sequelæ were also complications, inasmuch as their commencement occurred before the subsidence of the acute symptoms of La grippe. The mortality of this disease was due in most instances to some complication, as capillary bronchitis, croupous, pneumonia, pleurisy, acute nephritis, dysentery, acute purulent meningitis, and syncope.

In the Annual of the Universal Medical Sciences, issue 1891, is given quite a list of sequelæ recorded by different observers. Chatelier reports five cases of otitis media or suppurative catarrh of the middle ear, following influenza. Wilkes calls attention to the extreme prostration and cardiac weakness which occasionally follows this disease, and mentions four fatal cases in professional men in whom there was no previous history of heart disease. Dr.

Irwin, of Louisville, in a paper read before the Kentucky State Medical Society, mentions a case of cardiac asthenia in which there was frequent pulse, palpitation, edema of the feet, but no valvular lesion.

Myocarditis, endocarditis and pericarditis may result from influenza; so also rheumatism, phlegmasia, hematuria, purpura hemorrhagica, hemoptysis, phlebitis, gangrene of the leg, erysipelas, mumps, abortion, nephritis and cystitis; three cases of the latter affection having come under my observation and treatment. A disease which is so debilitating in its effects, so depressing on all the great nerve centers, naturally induces indisposition to bodily and mental exercise. I have frequently observed prolonged physical exhaustion and anemia following La grippe; and as a consequence of this impoverishment of the blood and defective nutrition, we have many peripheral neuralgias; the most frequent of which is trigeminal neuralgia; next in frequency intercostal, then sciatica. In the spinal cord we may have as sequelæ, myelitis, meningitis, or posterior spinal sclerosis; in the brain meningitis, abscess and insanity.

Cases of insanity following recent epidemics of influenza are quite numerous, and, on the other hand, instances are not wanting in which La grippe acted as a therapeutical measure, apparently hastening the recovery of an existing mental derangement. It is a fact which should not be lost sight of, that febrile delirium during an infectious disease is in reality an acute attack of insanity; and the same may be said of the delirium of some other febrile diseases as pneumonia, rheumatism, typhoid, cholera and erysipelas. Sometimes this delirium is most prominent during convalescence and this variety may very properly be denominated

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asthenic delirium or the "delirium of inanition." All the forms of insanity may be seen in which influenza was the etiological factor, but those most frequent recorded are cases of acute mania and melancholia. The prognosis in all these psychoses is usually favorable and the treatment, in the light of the very depressing effects of influenza, should be of a constructive character, combining with these, such soothing agents as are indicated.

That La grippe acts as an exciting cause in the production of pulmonary tuberculosis there is not in my mind the slightest doubt. At the present time I have under treatment four cases of phthisis, and all of them date the commencement of their symptoms to this disease. All of them have a hereditary history more or less remote, but just as we see cases following ordinary bronchitis where family history shows freedom from hereditary proclivities, so do we see a greater number succumb to it

in a disease so devitalizing in its effects as the one under discussion. But for this epidemic, it is quite probable a large per centage of the cases now afflicted with pulmonary lesions would have escaped.

The treatment of the sequelæ of La Grippe may be summed up in a few words. It does not differ essentially, from the treatment of these diseases when due to ordinary causes. In those cases of prolonged physical exhaustion, anemia and weak heart action, as well as those sequelæ strictly neuralgic in character, strychnia, in decided doses, and iron should not be forgotten. Phthisical cases should have good digestion, a very nutritious diet, fresh air, maltine and cod liver oil, hypophosphites, beechwood creasote, stimulants, etc. The treatment for the other diseases mentioned as possible sequelæ will readily suggest themselves to the physician.

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