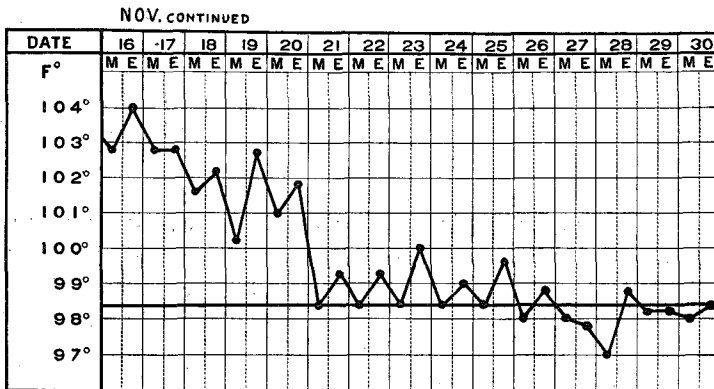
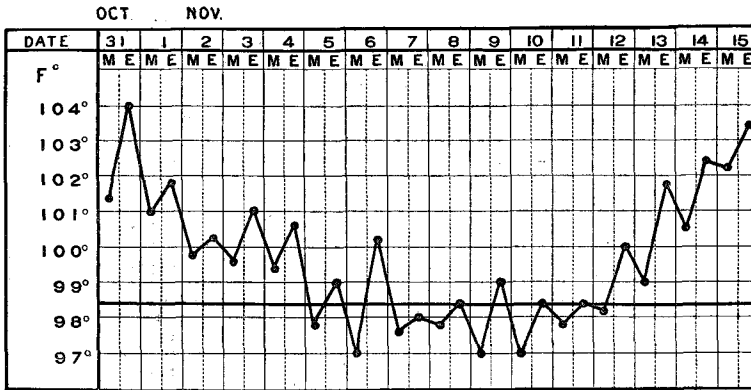


SOME OBSCURE FORMS OF FEVER IN NORTH CHINA.

By MAJOR A. C. FOX.

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DURING the past three years I, in common with other officers of the Corps in Tientsin, North China, have been much puzzled by a type of fever which has been fairly common amongst the European troops in this station. The native troops were exempt.

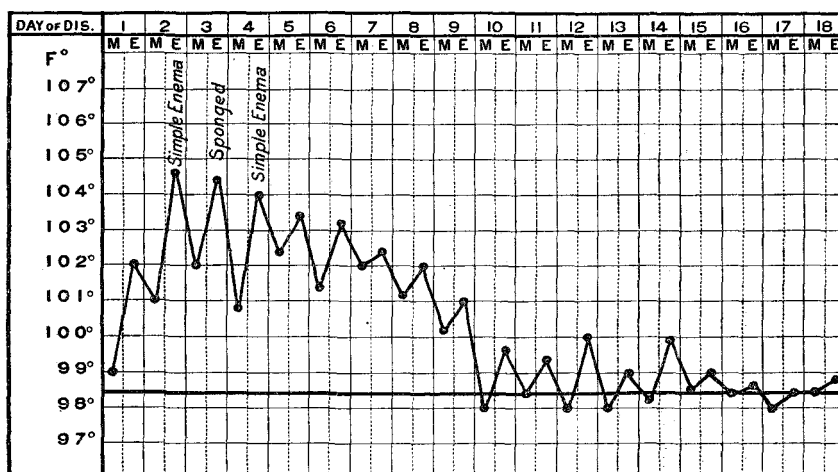


There have not been any of these cases during the present year (1911) in the garrison, and I am informed by one of the civilian medical practitioners that there have been very few cases among the civil population.

The disease was frequently met with during the autumn of 1908 and up to the end of the year 1910. It is well known here amongst the civil

community, and is spoken of as "ten day fever," but the actual cause of the fever has never been discovered.

The disease is characterized by the following signs and symptoms, the first five being invariably present in all cases: (1) Fever of a remittent type; (2) frontal headache lasting from two to three days; (3) constipation; (4) furred tongue; (5) slow pulse (comparatively speaking). In addition a few of the cases complain of abdominal discomfort, amounting in some cases to pain; others have complained of pain in the back, chiefly in the lumbar region, but the two last symptoms only occurred in a minority of cases. One of the most remarkable characteristics in the course of the disease was the small amount of disturbance in the general health of the patient. After the first two or three days of the



fever, and almost invariably after the disappearance of the initial headache, if the patient was asked how he felt, he answered "all right," and usually asked to be allowed up and given extra food, though at the time the thermometer would record a temperature several degrees above normal. The fever generally lasted from ten to fourteen days. Relapses were rare, and I have not seen a second attack occur in the same individual, nor have I heard of a fatal case. The onset of the disease was sudden in all cases. There were no premonitory symptoms. The face on admission was flushed, and the expression dull and heavy.

These cases have been met with at all seasons of the year, even during periods of severe cold, but they were most commonly seen during the months of August, September, October and November, during and after the rainy season, and also at a period when flies were most troublesome

No malarial parasites were found in any of the cases, and quinine internally had no effect whatever on the course of the disease. Sandfly fever was excluded, both by the course and symptoms of the disease, as well as by the absence of the causative agent.

Recently I have been struck by the similarity of this type of fever to one described in some recent numbers of the JOURNAL OF THE ROYAL ARMY MEDICAL CORPS by Colonel Firth and other officers, under the heading of "Paratyphoid Fever," and attributed by them to infection by the *Bacillus paratyphosis A*. The symptoms and course of the disease as described in the Journal are practically identical with those met with in Tientsin, and which, up to date, have been returned under the heading of "Pyrexia of Uncertain Origin." Owing to the absence of any laboratory in North China, it has not been found possible to carry out the necessary technique required in an examination of the blood to isolate the bacillus. If, however, any further cases should be met with, it might be possible, by sending down specimens of blood to the Shanghai Municipal Laboratory, to further investigate these cases and, if possible, discover their true nature.

Many of the soldiers who were down with this fever last year had been quite recently (within twelve months) inoculated against enteric. Therefore it would seem that anti-typhoid inoculation conferred no immunity on the individual against this type of fever. The convalescence of these cases has always been rapid and uninterrupted.

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#### A REVIEW OF THREE YEARS' SURGICAL WORK AT LUCKNOW.

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OPERATIVE surgery in this station is limited when compared with the work done at a large military hospital at home. In the first place many operations, such as radical cure of hernia, removal of varicose veins, and so on, are not often required, as the majority of cases are discovered before leaving England and are dealt with there. Then, again, it is only during the cold weather that many operations are performed. During the summer months the climate of Lucknow is extremely trying, so operative treatment during this season is, if possible, avoided. Altogether 225 major operations have been performed; of this number, 187 are what I call, for want of a better term, "routine operations," that is to say, the ordinary operations that one is called upon to do any day in a military hospital. The remaining thirty-eight were operations of more or less difficulty, and