

Clinical and other Notes.

A CASE OF COSCOROBA BACILLURIA.

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LIEUTENANT M. appeared before a medical board after demobilization for continued illness after malaria, and was admitted into hospital for observation and treatment.

History.—He had done eleven years' planting in very malarious areas before the war without once getting malaria. During mobilized service in Mesopotamia and France he developed a chronic condition of pain in the kidney regions, with general malaise and debility.

He was returned to England, where he was treated with a long course of vaccine, stated to be an autogenous *Bacillus coli* vaccine for bacilluria. Incidentally during this time he had been diagnosed as a case of colitis, chiefly, apparently, because of abdominal pain and tenderness in the upper left iliac area.

He returned to India for civil employment on tea and rubber estates, and very shortly succumbed to an attack of malaria. This had been continuing for some time when he came before a medical board for pension purposes and was admitted to hospital for observation.

On Admission malaria benign tertian parasites were immediately found in the blood and quinine treatment was commenced. In addition, however, he complained of severe intermittent abdominal pains on the left side of the umbilicus and in the left iliac fossa; for this he stated he had been diagnosed colitis. There was no diarrhoea, and no thickening or tenderness of the colon was apparent; the tongue was furred and the appetite very poor; there was general debility and lethargy. Splenic tenderness was present at first but cleared up with quinine.

The debility and lethargy had been periodic, being more pronounced every five or six weeks for about ten days, and being accompanied by an increase of pain and general discomfort. In spite of quinine treatment the symptoms, including a slight evening rise of temperature, continued while in England.

Treatment with Vaccine.—Bacteriological examination of the urine indicated that there were a large number of organisms, mostly of one kind, present in it.

Therefore a catheter specimen of urine was obtained from the bladder with the utmost aseptic precautions soon after a natural evacuation of urine. This urine was plated, out on Conradi plates in the usual manner for enteric group or other organisms.

A pure culture of a bacillus was obtained, which on further examination was found to be *B. coscoroba*. Sub-cultures were sent to the District Laboratory for confirmation.

Cultures of this were put up on agar and a vaccine prepared from these. The vaccine prepared was of a strength of about 6,200,000 per cubic centimetre.

An initial dose of half a cubic centimetre, i.e., about 3,100,000, was given, as it was not considered that this organism would have any great pathological reaction.

A most violent reaction occurred within six hours, which took four days to clear up. The chief points of the reaction were:—

(1) A temperature up to 105° F.
 (2) Intense pain in the lumbar regions and tenderness all round the kidneys on both sides.

(3) Marked irritability of the bladder, i.e., micturition every few minutes with the passage of only a few drops of urine and great pain and scalding during the act.

As soon as the temperature dropped the patient felt very much better except for the local pains; these continued, decreasing for six to seven days. A second dose was given one week after the disappearance of the pains. This time the dose was reduced to 400,000. A very satisfactory slight reaction was obtained, the chief point again being slight pain round the kidneys and slight irritability of the bladder.

The next three doses all had the same slight but decreasing effect, the dose being increased to half as much again on each occasion.

A very marked improvement set in. The patient became robust and with a good appetite began to put on fat. He stated that he had not felt so well for several years. He also stated that the *B. coli* vaccine had never had any marked effect on him and had never given him any such benefit.

He had to return to England before his course was completed and took the remaining doses with him. He considered that he had been cured of his chronic complaint.

Comments.—It may be presumed that probably his condition has been a coscoroba bacilluria from the beginning and that a *B. coli* vaccine should not have been used. There seems no doubt that *B. coscoroba* was the actual causative organism since it was obtained in pure culture from catheter urine and also from the fact that it had such marked results.

The very marked reaction to a small dose of an organism which one would not naturally regard as pathogenic was somewhat startling. The dosage should presumably commence with not more than about 200,000 and rise by about 200,000 for eight to ten doses.

The chief feature of the case, however, is the nature of the causative organism and the satisfactory results of treating the same with an autogenous vaccine. In all the literature available (Pasteur Institute Library available by kind permission of Lieutenant-Colonel Cornwall, I.M.S.) no mention or trace of a case of coscoroba bacilluria could be found. It is therefore considered that this case has sufficient interest to bring it to the notice of others who may chance to meet a similar condition, especially as regards treatment with autogenous vaccine.

A CASE OF SPLENIC ANÆMIA IN A CHILD DUE TO *LEISHMANIA INFANTUM*.

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A MALE child, aged 3, was admitted to the Military Families Hospital, Curragh, late in August, 1920.

History.—The patient was born in Malta, and lived on the island until 2 years old, when it was brought home by the parents apparently in good health. While in Malta it had associated with a poodle from time to time.