Treatment was at first by full doses of quinine and tinct. ferri perchlor, injection of antistreptococcic serum, and copious ingestion of glucose and water; later stovarsol gr. 4 was given twice daily and was entirely without effect.

I am indebted to Major E. B. Marsh, M.C., for kindly coming from Netley to see the case in consultation, and to him is due the second of the above examinations of the blood.

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REPORT OF A FATAL CASE OF POISONING BY TETRACHLORETHANE.

BY MAJOR J. M. ELLIOTT,
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FATALITIES as the result of drinking tetrachlorethane are so uncommon that a short description of the clinical signs of a recent case in Egypt and its attendant circumstances is considered to be merited.

Tetrachlorethane (also known as tetrachloracetylethane) is a clear fluid with an odour rather like chloroform (this odour being characteristic of the chloro derivatives of paraffins), and is sold on the market under various trade-names as a grease remover.

It is to be found in Army offices in eight-ounce tins labelled "Silk Cleansing Fluid," being supplied by the Stationery Office for the purpose of cleaning the silk of duplicators. Records of poisoning by this substance show that the fatal dose may be as low as 5 cubic centimetres.

On November 17, 1932, at 8.45 a.m., I was summoned to the Medical Inspection Room, Zafaran, where I found Serjeant Y, aged 49 years of age, with eighteen years service, lying on a stretcher. He was completely unconscious and markedly cyanosed; pulse 90; respirations 20; pupils contracted and not reacting to light; corneal and conjunctival reflexes completely abolished; no external signs of injury; his breath smelt strongly of a chemical having the odour of chloroform. I gave instructions to search his bunk for any bottles of which the contents might have been drunk, and I took the patient forthwith to the Officers' Hospital in the waiting ambulance, and washed out his stomach. By this time a tin of fluid labelled "Silk Cleansing Fluid," and subsequently proved by analysis to be tetrachlorethane, was handed to me, having been found in the patient's bunk.

At 9.30 a.m. respiration began to fail and the patient ceased breathing altogether, but the heart was still beating strongly; artificial respiration was carried out for several minutes, oxygen administered, and a hypodermic injection of camphor in oil given, and respiration was re-established.

At 9.45 a.m. it was noted that the patient had passed urine and faeces involuntarily, the voided material smelling strongly of the silk cleansing fluid, but whether the smell was from the urine only, as seemed likely, or from both excretions, could not be determined.
Administration of oxygen was carried out almost continuously as the patient's face and extremities were extremely cyanosed; a further injection of camphor was given at 12.45 p.m. At 1.30 p.m., a saline enema of five ounces was retained, and during the afternoon the patient appeared to be holding his own; there was a very faint pupillary response to light from 2 till 3 p.m.; an enema of coffee and saline was retained at 4 p.m. At 5.45 p.m. the pulse rose from 116 to 128 and began to fail considerably; an injection of 1/8 grain of strychnine hydrochloride was given, and at 6.15 p.m. a further injection of camphor, but the pulse became rapidly weaker and almost imperceptible, and at 7 p.m. the patient suddenly expired, approximately twelve hours after drinking the poison.

The following notes are extracts from a post-mortem report made by the Medical Specialist, Major W. E. K. Coles, R.A.M.C.:

"... No staining of the lips or mouth ... the stomach contained free fluid smelling strongly of the chemical referred to ... the whole of the gastric mucosa was very hyperaemic, but there were no perforations ... kidneys normal in size, slightly congested ... Heart, liver and spleen appeared normal ... The alveoli of the lungs showed signs of acute congestion."

A suggestion was forwarded to General Headquarters by the Assistant Provost Marshal that this silk cleansing fluid should be kept under lock and key, and should be labelled poison, and an order to that effect has been issued.

I am indebted to Colonel J. Tyrer Johnson, D.S.O., Deputy Director of Medical Services, The British Troops in Egypt, and Major L. Murphy, D.S.O., R.A.M.C., Senior Medical Officer, Abbassia and Helmieh, for permission to forward these notes for publication.

A PRACTICAL TEST OF THE LETHAL ACTION OF STEAM AND FORMALIN VAPOUR ON SPORE-BEARING ORGANISMS AND BUGS.

By Private A. F. Alderson,
Royal Army Medical Corps.

The apparatus required for the experiments was improvised from a length of rubber tubing, a two-gallon petrol can and a cresol drum with a capacity of 1,350 cubic inches. The petrol can was fitted up as a boiler, a Bunsen burner supplying the necessary heat. The cresol drum with the bottom cut out made an admirable substitute for a Lelean sack. A length of rubber tubing (ordinary garden hosepipe) connected the two tins, the hose connections being in each case at the top (see sketch).

The organism chosen was one of the subtilis group and was isolated from horse manure. A luxuriant growth was obtained on agar plates. A