SUPPLEMENTAL DATA ON THE PATHOGENESIS OF ASPIRIN.

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PATHOGENIC DATA.

A case is also on record in which the urine of a physician who had been taking acetyl-salicylic acid freely showed *sugar*, *albumin*, *tube casts* and *blood corpuscles*. The urine of thirty soldiers who had been given from 2-4 gms. (30-36 grains) all responded to the Trommer test for sugar.*

Aspirin causes an increase of 6.1 per cent, in CO_2 output and in heat production, *i. e.*, the basal average in five subjects was increased to 40.3 calories per square meter per hour, in contrast to the average of 37.8 in the same persons. Control experiments showed the average change in temperature to be —0.08c. and after the drug \pm 0.03c. The respiratory quotient and pulse rate were unaltered. Aspirin has been found to possess a marked antipyretic effect in 1 gm. (15 gr.) doses.

One case of anaphylaxis of the alimentary type has been reported, lasting for a period of nine years. Desensitization was accomplished in this case by the administration of the drug in doses of from $\frac{1}{12}$ - $\frac{1}{2}$ gr. at first, increased to 4-8 grains, repeated 13 times in 6 weeks.

UNTOWARD EFFECTS.

Numerous cases were encountered during the influenza epidemic of severe stomach disturbances with hematemesis, melena sometimes being the first indication of the gastric hemorrhage. Some of the cases were very severe with syncope, the symptoms returning in one case after but three or four tablets had been taken.

^{*}Italics our own. W.

N. B.—This added data is compiled from Volume X of Sajous' Cyclopædia, and as the volume has just been issued, was received too late to be incorporated in the original paper.

CHRONIC ASPIRINISM.

A case of chronic aspirinism has been observed in a woman aged 50, suffering from rheumatoid arthritis, who had taken 10 grains of aspirin twice daily for seven years. During the first six years there were no symptoms, the first untoward signs being the sensation of "sand in the eyes." Marked hyperemia of palpebral and ocular conjunctiva, with chemosis and lacherymation developed. A week later an urticaria appeared; and within a few days "a typical urticaria major" with circumscribed edema, and elsewhere a severe urticaria bullosa were in evidence. There was insomnia, weakness, massive edema of the tongue and fauces with marked dysphagia developed, and a tracheotomy was averted only by the use of ice and ice water and astringent gargles. Vision was obstructed by an extreme palpebral edema. Urine showed salicyluric acid. After active physiological treatment the symptoms abated and the urticaria had vanished after seven weeks, and the urine was again normal.

The interesting fact is, however, that although the Aspirin was discontinued, "all traces of the rheumatism beyond the bony deformities had disappeared."

The case is reported of a man suffering from periostitis and osteitis of the tibia, who finding that a 5-grain tablet of Aspirin gave relief, decided to take the drug, whereupon at first one or two tablets kept him comfortable, but he had to increase the dose to from 5 to 12 tablets, with the result that its use was followed by "obstinate constipation, slight digestive disturbances, and a rather low blood-pressure."

ANAPHYLAXIS.

Desensitization was obtained by administering small but gradually increasing doses in anaphylaxis.

SCHEMATIC ARRANGEMENT OF ADDED DATA.

Eyes: Vision obstructed by extreme palpebral edema. Sensation of sand in the eyes. Hyperemia of palpebral and ocular conjunctive, with chemosis. Lachrymation.

Mouth and Pharynx: Massive edema of the tongue and fauces.

THROAT: Dysphagia.

ABDOMEN: Diarrhaa and vomiting.

Pulse and Temperature: Lowered heat production, lowered blood pressure.

Skin: Urticaria major, circumscribed edema, urticaria bullosa.

SLEEP: Insomnia.

Nervous System: Great weakness.

KIDNEYS AND URINE: Urine showed salicyluric acid. Urine containing sugar, albumin, tube casts and blood.

CASES FROM PRACTICE.

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I select the following cases to report, as some of them emphasize symptoms in the provings which are not overfamiliar, while others, perhaps, will show familiar symptoms in some new aspect or combination. All of them are examples of the efficacy of the high potency in single dose.

The potencies used are Dr. Fincke's.

I. AORTIC INSUFFICIENCY.

A lady sixty-six years of age has for many years suffered from heart trouble. On auscultation this proved to be a very pronounced case of aortic insufficiency.

She had recently had an attack of bronchitis, and this together with tincture of Digitalis, prescribed by her physician, brought on the condition in which I found her.

Heart very feeble, irregular, intermittent, rapid—now fast, now slow.

Respiration rapid, shallow, with decided dyspnæa. The heart and respiration very much worse lying down. At night she had to be propped up in bed and slept only in snatches. She could not take a few steps in her room without very much increasing the heart's action and becoming faint.

Throbbing here and there throughout the body, especially marked in carotids, where it was painful, and in left hypochondrium. The heart was worse during the night and especially toward morning.