

his disciples that when they had cured the sick with the law of Similars, they should give God the glory, for the Law was His.

THYMUS GLAND ITS RELATION WITH CHRONIC BRONCHITIS IN CHILDREN

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Thymus is a known gland to us but its importance is not so much acknowledged. Generally it decreases from the second year of life and should have disappeared by adult age. In relation to children it generally increases in size in Rickets and Status Lymphaticus (a rare disease).

During the last 4 years I treated 25 such cases, of which every one of them had been treated with antibiotics and allied drugs for inflammatory conditions of lungs. Among these children one only had a history of hereditary asthma ; all of them being below seven years.

Generally the description of the cases are such ;—

- (1) Susceptibility to climatic variations, especially hot to cold and damp.
- (2) Continuous nasal discharge, usually non-acrid.
- (3) Enlarged lymphatic glands ; generally, hypertrophied tonsils and adenoids.
- (4) Lymphatic tissues throught the body in over-growth.
- (5) Growth of the adenoid tissue at the base of the tongue.
- (6) Dullness at the upper part of sternum.
- (7) Enlarged spleen.
- (8) General constitution : Flabby and anaemic.
- (9) Lympho cytosis.

(10) Albuminuria, and presence of phosphate in the urine.

These type of children develop bronchial congestion without any previous notice. Suddenly the condition becomes serious, and the acute condition resembles Asthma. Generally, it starts without any rise of temp. but the temperature rises within 48 hours and mounts up to 103 to 104°. The child refuses food and drink and becomes constipated.

These types of acute attacks are nicely palliated with Ferrum Phos. 6x and Kali Mur. 6x in combination; when the respiratory rate is too high, Mag. Phos. 6x along with the previous two drugs control the paroxysm within 12 hours. After the acute stage, Kali Mur. 6x or Kali Sul. 6x is to be used as expectorant, and occasionally Kali Iod. 30, or 200 is called for. In such cases I tried Acon., Bell., Ipec., Ars. alb., Nur V., Ac. Hydro., Lopelia, Samyucus, Hep. Sul., Cup. Met., Cal. Carb., Psorin., Caust., Ms., Thuja, Tub., Spong., Kali C., but got no satisfactory result. As an experimental measure I tried Aspidospermine θ but it increases the blood-pressure and Hamoptysis occurs in some cases. As regards palliation and curative treatment homœopathic drugs responded less but among the drugs mentioned, Acon., Ipec., Hep. sul. and Thuja had certain effect. Any how, biochemic drugs acted better as the conditions were palliated with the former two drugs. I tried for curative treatment with our selected polychrests but got no satisfactory result. Then an idea struck me : to treat the cases with a preparation of the same gland. And whenever the patients came late, I asked them to continue treatment in a fresh line which they did and got good results.

Generally, 1, 3, 4, 6, 7, 9, 10 are the common symptoms and signs in all the cases. Thymus 3x (BT) in 2 gr. doses was prescribed thrice daily, gradually decreasing the dose as an improvement commenced. In all the cases treatment was continued from 8 to 12 weeks.

This drug brings about a change very slowly. After two to three weeks, the spleen shrinks and at the end of the third or fourth week you will notice that the dullness of the upper part of the sternum decreases, and gradually the other lymphatic glands diminish in size. But if the patients' parents are of Rheumatic diathesis, tonsils remain of the same size. Diet should be given according to the situation and condition.

All the 25 cases I treated in the same line. Among these 25, 6 have no recurrence for the last three years and 11 for the last two years. The results of the rest are awaited. In conclusion, I mention that antibiotic treatment inflamed being conditions of children are gradually increasing these types of cases. I think a thorough trial of this drug is necessary.

Some times the patient develops jaundice during the attack of Bronchitis. Then Myrica Cerf. θ in 5 mm doses in water and 4 times daily clears up Jaundice within 48 hours.

Sensitivity to changing climate was developed in all the cases after the use of Antibiotics. So it can be considered that though antibiotics control the acute inflammatory conditions of the lung, they keep a stigma behind to flourish, which facilitates the growth of such condition. When such conditions are found even after the use of antibiotics and respond only to a preparation of thymus, then it can be said on the basis of clinical experience that the enlargement of thymus is the causative factor or such a syndrome which requires further observation and investigation.

In some cases history of syphilis and gonorrhœa of the parents was present, but the W.R. was not done due to lack of facility and fund.
