

V.

DISEASES OF THE MEDIASTINUM.

---

ADENITIS.

The lymphatic glands lying in the mediastinum, along the spine and about the bronchi are involved in all inflammatory diseases of the bronchi and lungs. In broncho-pneumonia and the bronchitis of whooping cough and measles they are particularly prone to become swollen and inflamed, contributing by their presence and pressure to the severity of the cough. In tuberculosis of the lungs they are secondarily involved, becoming the seat of tubercular change, often showing foci of caseous degeneration.

In most cases the simple adenitis of these glands subsides with the primary lesion, with which it is associated. In tuberculosis they may suppurate, the contents being absorbed or undergoing calcification, or, more seriously, perforate into the œsophagus or bronchus.

CARCINOMA OR SARCOMA.

Usually secondary to cancer elsewhere and originating in the thymus gland, lymph glands, pleura or lung. Most frequent in males between the thirtieth and fortieth year.

**Symptoms.**—The symptoms are those of intra-thoracic pressure:—dyspnoea, cough, aphonia, dysphagia, plus the symptoms of venous obstruction, *i. e.*, cyanosis of the upper part of the body, with distention of the superficial veins.

**Diagnosis.**—From aneurism is very difficult. If the condition exists over eighteen months it is aneurism. Tumor has not the diastolic shock nor distinct expansile pulsation of aneurism.

### ABSCESS.

Abscess may occur and is usually due to trauma. Abscess usually forms in the anterior mediastinum. Pain, throbbing in character, with fever, chills, sweats and dyspnoea. Pus may erode the sternum, perforate an intercostal space or burrow into the abdomen.

### EMPHYSEMA.

May occur from trauma, diphtheria, whooping cough, in pneumo-thorax or after tracheotomy.

## INDEX.

### A.

Abscess of the Lung, . . . . .	130
Abscess, Mediastinal, . . . . .	150
Etiology of, . . . . .	150
Symptoms of, . . . . .	150
Active Pulmonary Hyperæmia, . . . . .	114
Acute Bronchitis, . . . . .	17
Acute Pneumonic Phthisis, . . . . .	78
Adenitis, Mediastinal, . . . . .	149
Occurrence, . . . . .	149
Adhesive Pleurisy, . . . . .	135
Adrenalin Chloride in Pulmonary Hæmorrhage, . . . . .	123
Aspiration of the Pleural Cavity, . . . . .	140
Asthma, Bronchial, . . . . .	41
Definition of, . . . . .	41
Etiology of, . . . . .	41
Symptoms of, . . . . .	42
Physical Signs in, . . . . .	42
Sputum in, . . . . .	42
Course of, . . . . .	43
General Treatment of, . . . . .	43
Remedies for, . . . . .	44
Atelectasis, . . . . .	107
Definition of, . . . . .	107
Etiology of, . . . . .	107
Pathology in, . . . . .	108
Physical Signs in, . . . . .	108
Symptoms of, . . . . .	108
Prognosis in, . . . . .	109
General Treatment for, . . . . .	109
Remedies for, . . . . .	110

**B.**

Benzoin, Tincture of, . . . . .	49
In Whooping Cough, . . . . .	21
In Bronchitis, . . . . .	18
Bronchi, Diseases of, . . . . .	41
Bronchial Asthma, . . . . .	18
Bronchitis, Acute, . . . . .	18
Definition of, . . . . .	18
Etiology of, . . . . .	18
Pathology in, . . . . .	19
Symptoms of, . . . . .	19
Physical Signs in, . . . . .	20
Complications of, . . . . .	20
Diagnosis of, . . . . .	21
Prognosis in, . . . . .	21
General Treatment of, . . . . .	22
Remedies for, . . . . .	25
Bronchitis, Capillary, . . . . .	25
Definition of, . . . . .	25
Etiology of, . . . . .	26
Pathology of, . . . . .	26
Symptoms of, . . . . .	26
Physical Signs in, . . . . .	27
Complications of, . . . . .	27
Diagnosis of, . . . . .	27
Prognosis in, . . . . .	28
Treatment of, . . . . .	31
Bronchitis, Chronic, . . . . .	31
Etiology of, . . . . .	32
Morbid Anatomy in, . . . . .	32
Physical Signs in, . . . . .	32
Symptoms of, . . . . .	33
General Treatment of, . . . . .	34
Remedies for, . . . . .	33
Bronchitis, Dry, . . . . .	28
Bronchitis, Fibrinous, . . . . .	33
Bronchitis, Fœtid, . . . . .	28
Bronchitis, Plastic, . . . . .	

Definition of, . . . . .	28
Etiology of, . . . . .	28
Pathology in, . . . . .	28
Symptoms of, . . . . .	29
Physical Signs in, . . . . .	30
Diagnosis of, . . . . .	30
General Treatment of, . . . . .	30
Remedies for, . . . . .	30
Bronchiectasis, . . . . .	37
Definition of, . . . . .	37
Pathology in, . . . . .	37
Symptoms of, . . . . .	38
Physical Signs in, . . . . .	38
Prognosis in, . . . . .	39
General Treatment of, . . . . .	39
Remedies for, . . . . .	40
Broncho-Pneumonia, . . . . .	99
Definition of, . . . . .	99
Etiology of, . . . . .	99
Pathology of, . . . . .	99
Symptoms of, . . . . .	101
Physical Signs in, . . . . .	102
Complications and Sequelæ, . . . . .	102
Diagnosis of, . . . . .	102
Prognosis in, . . . . .	103
General Treatment of, . . . . .	104
Remedies for, . . . . .	104
Broncho-Pulmonary Hæmorrhage, . . . . .	118
Bronchorrhœa, . . . . .	33
Brown Induration, . . . . .	117
Bruit de Airain, . . . . .	145

**C.**

Cancer of the Lung, . . . . .	126
Capillary Bronchitis, . . . . .	25
Carcinoma, Mediastinal, . . . . .	149
Symptoms of, . . . . .	150
Diagnosis of, . . . . .	150

Catarrhal Pneumonia, . . . . .	99
Cavities, Pulmonary, . . . . .	87
Chronic Bronchitis, . . . . .	31
Chronic Pulmonary Tuberculosis, . . . . .	80
Cirrhosis of the Lung, . . . . .	97
Codeine in Bronchitis, . . . . .	22
In Pleurisy, . . . . .	139
Cod Liver Oil in Phthisis, . . . . .	96
Cog-Wheel Respiration, . . . . .	86
Congestion of the Lungs, . . . . .	114
Consumption, "Galloping," . . . . .	78
Consumption, Pulmonary, . . . . .	80
Cough, Formulæ for, . . . . .	21
Remedies for, . . . . .	22
Cough, Whooping, . . . . .	45
Creosote in Bronchiectasis, . . . . .	39
In Phthisis, . . . . .	96

**D.**

Death Rattle, the, . . . . .	12
Diseases of the Bronchi, . . . . .	17
Of the Lungs, . . . . .	53
Of the Mediastinum, . . . . .	149
Of the Pleura, . . . . .	135
Of the Trachea, . . . . .	11
Dry Pleurisy, . . . . .	135

**E.**

Electricity in Phthisis, . . . . .	96
Empyema, . . . . .	138
Emphysema, . . . . .	110
Definition of, . . . . .	110
Varieties of, . . . . .	111
Etiology of, . . . . .	112
Pathology in, . . . . .	112
Symptoms of, . . . . .	112
Physical Signs in, . . . . .	112

General Treatment of, . . . . .	113
Remedies for, . . . . .	113
Emphysema, Mediastinal, . . . . .	150
Ergot in Pulmonary Hæmorrhage, . . . . .	123
Ergotole in Pulmonary Hæmorrhage, . . . . .	123

**F.**

Fibroid Phthisis, . . . . .	97
Fibrous Pneumonia, Syphilitic, . . . . .	131

**G.**

Gangrene of the Lung, . . . . .	39
Guaiacol in Bronchiectasis, . . . . .	127
Gummata of the Lung, . . . . .	131

**H.**

Hæmoptysis, . . . . .	118
Etiology of, . . . . .	118
Symptoms of, . . . . .	119
Diagnosis of, . . . . .	120
Prognosis in, . . . . .	120
Hæmorrhage, Pulmonary, . . . . .	118
Broncho-Pulmonary Hæmorrhage, . . . . .	118
Pulmonary Infarction, . . . . .	118
Hæmo-Thorax, . . . . .	146
Definition of, . . . . .	146
Etiology of, . . . . .	146
Symptoms of, . . . . .	146
Prognosis in, . . . . .	146
Diagnosis of, . . . . .	146
General Treatment for, . . . . .	146
Remedies in, . . . . .	146
Heroin Muriate in Bronchitis, . . . . .	22
Hydatids of the Lungs, . . . . .	132
Hyperæmia, Pulmonary, . . . . .	114
Hypostatic Congestion, . . . . .	116
Hypostatic Pneumonia, . . . . .	116

Definition of, . . . . .	116
Pathology in, . . . . .	116
Symptoms of, . . . . .	116
Prognosis in, . . . . .	116
General Treatment of, . . . . .	117
Remedies for, . . . . .	117
Hydro-Thorax, . . . . .	142
Physical Signs, . . . . .	143
Symptoms of, . . . . .	143
Treatment of, . . . . .	143
Remedies for, . . . . .	143

**I.**

Ice Bags in Pulmonary Hæmorrhage, . . . . .	123
Inhalations for Bronchitis, . . . . .	21
In Phthisis, . . . . .	96

**L.**

Lobar Pneumonia, . . . . .	53
Lobular Pneumonia, . . . . .	99
Lime, Hypochlorite of, in Whooping Cough, . . . . .	49
Lungs, Diseases of, . . . . .	53

**M.**

Morphine Sulphate in Asthma, . . . . .	43
In Pleurisy, . . . . .	139
In Pulmonary Hæmorrhage, . . . . .	123

**N.**

Nitro-Glycerine in Pneumonia, . . . . .	70
---	----

**O.**

Obstructive Pulmonary Congestion, . . . . .	117
Definition of, . . . . .	117
Pathology in, . . . . .	117
Symptoms of, . . . . .	117

Diagnosis of, . . . . .	118
Prognosis in, . . . . .	118
Treatment for, . . . . .	118

**P.**

Passive Pulmonary Hyperæmia, . . . . .	116
Pertussis, . . . . .	45
Phthisis, Acute Pneumonic, . . . . .	78
Phthisis, Fibroid, . . . . .	97
Definition of, . . . . .	97
Etiology of, . . . . .	97
Symptoms of, . . . . .	97
Physical Signs in, . . . . .	97
Treatment for, . . . . .	97
Phthisis, Florida, . . . . .	78
Pleurisy, . . . . .	135
Pleuritis, . . . . .	135
Definition of, . . . . .	135
Etiology of, . . . . .	135
Pleuritis, Adhesive, . . . . .	135
Pleuritis, Dry, . . . . .	135
Pleuritis, Plastic, . . . . .	135
Description of, . . . . .	135
Symptoms of, . . . . .	136
Pleurisy with Effusion, . . . . .	136
Definition of, . . . . .	136
Pathology in, . . . . .	136
Symptoms of, . . . . .	136
Physical Signs in, . . . . .	137
Diagnosis of, . . . . .	137
Prognosis in, . . . . .	138
Pleuritis, Chronic, . . . . .	139
Pleuritis, Encysted, . . . . .	139
Pleuritis, Interlobular, . . . . .	139
Pleuritis, Hæmorrhagic, . . . . .	139
Pleuritis, Tubercular, . . . . .	139
Pleuritis, General Treatment for, . . . . .	139
Thoracentesis in, . . . . .	140

Remedies for, . . . . .	141
Pneumonia, Catarrhal, . . . . .	99
Pneumonia, Chronic Interstitial, . . . . .	97
Pneumonia, Croupous, . . . . .	53
Pneumonia, Fibrinous, . . . . .	53
Pneumonitis, . . . . .	53
Pneumonic Fever, . . . . .	53
Pneumonia, Lobar, . . . . .	53
Definition of, . . . . .	53
Occurrence, . . . . .	53
Etiology of, . . . . .	54
Influence of Climate, . . . . .	54
Influence of Season, . . . . .	54
Influence of Age, . . . . .	54
Influence of Sex, . . . . .	54
Influence of Race, . . . . .	54
Influence of Social Condition, . . . . .	54
Influence of Personal Condition, . . . . .	54
Recurrence of, . . . . .	55
Trauma as a Cause of, . . . . .	55
Pneumonia, Lobar, Bacteriology of, . . . . .	55
Pathology and Morbid Anatomy of, . . . . .	56
Stage of Engorgement, . . . . .	56
Stage of Consolidation, . . . . .	56
Stage of Resolution, . . . . .	56
Other Organs, . . . . .	57
Pleura, . . . . .	57
Blood, . . . . .	57
Endo- and Pericardium, . . . . .	58
Meninges, . . . . .	58
Pneumonia, Lobar, Symptoms of, . . . . .	58
Invasion, . . . . .	58
Fever, . . . . .	59
Pain, . . . . .	60
Respiration, . . . . .	60
Pulse, . . . . .	61
Cough, . . . . .	61
Expectoration, . . . . .	61

Gastro-Intestinal Symptoms, . . . . .	61
Urine, . . . . .	61
Skin, . . . . .	61
Cerebral Symptoms, . . . . .	66
Pneumonia, Lobar, Physical Signs of, . . . . .	62
First stage, . . . . .	62
Second stage, . . . . .	62
Third stage, . . . . .	63
In children, . . . . .	63
Varieties of, . . . . .	63
Pneumonia, Lobar, Complications of, . . . . .	64
Pleuritis, . . . . .	64
Empyema, . . . . .	65
Endocarditis, . . . . .	65
Pericarditis, . . . . .	65
Meningitis, . . . . .	65
Bronchitis, . . . . .	65
Pulmonary Œdema, . . . . .	66
Paralysis, . . . . .	66
Jaundice, . . . . .	66
Pneumonia, Lobar, Diagnosis of, . . . . .	66
Prognosis in, . . . . .	67
Pneumonia, Lobar, General Treatment of, . . . . .	68
Local Applications, . . . . .	68
Stimulation, . . . . .	69
Heart Failure, . . . . .	69
Remedies for, . . . . .	70
Special Remedies in, . . . . .	72
Pneumonokoniosis, . . . . .	125
Definition of, . . . . .	125
Etiology of, . . . . .	125
Pathology in, . . . . .	125
Symptoms of, . . . . .	125
Treatment of, . . . . .	126
Pneumo-Thorax, . . . . .	144
Definition of, . . . . .	144
Etiology of, . . . . .	144
Physical Signs in, . . . . .	144

Symptoms of, . . . . .	145
Prognosis in, . . . . .	145
Treatment for, . . . . .	145
<b>Pulmonary Abscess,</b> . . . . .	130
Etiology of, . . . . .	130
Symptoms of, . . . . .	130
Diagnosis of, . . . . .	130
Prognosis in, . . . . .	130
General Treatment of, . . . . .	131
Remedies for, . . . . .	131
<b>Pulmonary Carcinoma,</b> . . . . .	126
Definition of, . . . . .	126
Etiology of, . . . . .	126
Pathology in, . . . . .	126
Symptoms of, . . . . .	126
Prognosis in, . . . . .	127
Treatment of, . . . . .	127
<b>Pulmonary Congestion,</b> . . . . .	114
<b>Pulmonary Echinococcus,</b> . . . . .	132
Definition of, . . . . .	132
Symptoms of, . . . . .	132
Treatment for, . . . . .	132
<b>Pulmonary Gangrene,</b> . . . . .	127
Definition of, . . . . .	127
Etiology of, . . . . .	127
Pathology in, . . . . .	128
Symptoms of, . . . . .	128
Diagnosis of, . . . . .	128
Prognosis in, . . . . .	129
General Treatment of, . . . . .	129
Remedies for, . . . . .	129
<b>Pulmonary Hæmorrhage,</b> . . . . .	118
Definition of, . . . . .	118
General Treatment for, . . . . .	122
Remedies for, . . . . .	124
<b>Pulmonary Hyperæmia,</b> . . . . .	114
Definition of, . . . . .	114
<b>Pulmonary Hyperæmia, Active,</b> . . . . .	114

Etiology of, . . . . .	114
Pathology in, . . . . .	114
Symptoms of, . . . . .	114
Diagnosis of, . . . . .	114
Prognosis in, . . . . .	115
General Treatment for, . . . . .	115
Remedies for, . . . . .	115
<b>Pulmonary Hyperæmia, Passive,</b> . . . . .	116
Hypostatic Form, . . . . .	116
Obstructive Form, . . . . .	117
<b>Pulmonary Infarction,</b> . . . . .	121
Etiology of, . . . . .	121
Pathology in, . . . . .	121
<b>Pulmonary Syphilis,</b> . . . . .	131
Etiology of, . . . . .	131
Symptoms of, . . . . .	131
Diagnosis of, . . . . .	131
Treatment for, . . . . .	131
<b>Pulmonary Tuberculosis,</b> . . . . .	78
<b>Purulent Pleuritis,</b> . . . . .	138
Etiology of, . . . . .	138
Physical Signs in, . . . . .	138
Symptoms of, . . . . .	138

**S.**

<b>Sarcoma, Mediastinal,</b> . . . . .	149
<b>Sero-Fibrinous Pleurisy,</b> . . . . .	136
<b>Stenosis of the Trachea,</b> . . . . .	13
<b>Strychnine in Broncho-Pneumonia,</b> . . . . .	104
In Hypostatic Pneumonia, . . . . .	117
In Lobar Pneumonia, . . . . .	70
In Phthisis, . . . . .	96
<b>Sunlight in Phthisis,</b> . . . . .	96

**T.**

<b>Thoracentesis,</b> . . . . .	140
<b>Trachea, Diseases of,</b> . . . . .	11

Tracheitis, Acute and Chronic, . . . . .	11
Definition of, . . . . .	11
Etiology of, . . . . .	11
Pathology in, . . . . .	11
Physical Signs in, . . . . .	11
Diagnosis of, . . . . .	11
Symptoms of, . . . . .	12
General Treatment of, . . . . .	12
Remedies for, . . . . .	12
Trachea, Stenosis of, . . . . .	13
Definition of, . . . . .	13
Etiology of, . . . . .	13
Symptoms of, . . . . .	13
Treatment for, . . . . .	14
Tubercle, Diffuse, Inflammatory, . . . . .	77
Tubercle, Evolution of, . . . . .	76
Tuberculosis, . . . . .	72
General Consideration of, . . . . .	72
Definition of, . . . . .	72
History of, . . . . .	72
Etiology of, . . . . .	73
Zoology, . . . . .	73
Man, . . . . .	73
Geographical Position, . . . . .	73
Race, . . . . .	73
Decrease of, . . . . .	73
Tuberculosis, the Bacillus of, . . . . .	74
Modes of Infection, . . . . .	74
Inhalation, . . . . .	74
Milk and Meat, . . . . .	75
Inoculation, . . . . .	75
Hereditary Transmission, . . . . .	75
Tuberculosis, Conditions Favorable to Development, . . . . .	75
Environment, . . . . .	75
Individual Predisposition, . . . . .	76
Age, . . . . .	76
Sex, . . . . .	76
Race, . . . . .	76

Occupation, . . . . .	76
Local Condition, . . . . .	76
Trauma, . . . . .	76
Tuberculosis, Acute General, . . . . .	77
Miliary, . . . . .	77
Typhoid Form, . . . . .	78
Pulmonary Form, . . . . .	78
Tuberculosis, Acute Pulmonary, . . . . .	78
Symptoms of, . . . . .	79
Diagnosis of, . . . . .	79
Tuberculosis, Chronic Pulmonary, . . . . .	80
Tuberculosis, Chronic Ulcerative, . . . . .	80
Morbid Anatomy of, . . . . .	80
Lesions of, . . . . .	81
Miliary Tubercles, . . . . .	81
Catarrhal or Broncho-Pneumonia, . . . . .	81
Areas of Consolidation, . . . . .	81
Cavity or Vornica, . . . . .	82
Sclerosis, . . . . .	82
Pleura, . . . . .	83
Bronchi, . . . . .	83
Bronchial Glands, . . . . .	83
Larynx, . . . . .	83
Other Organs, . . . . .	83
Tuberculosis, Variations in Onset, . . . . .	83
Fever Group, . . . . .	84
Bronchitis Group, . . . . .	84
Hæmoptysis Group, . . . . .	84
Laryngeal Group, . . . . .	84
Pleurisy Group, . . . . .	83
Tuberculosis, Local Symptoms, . . . . .	84
Pain, . . . . .	84
Cough, . . . . .	85
Expectoration, . . . . .	85
Dyspnœa, . . . . .	87
Tuberculosis, General Symptoms, . . . . .	87
Fever, . . . . .	87
Sweat, . . . . .	88



Pulse, . . . . .	88
Emaciation, . . . . .	88
Larynx, . . . . .	88
Nervous System, . . . . .	89
Pleura, . . . . .	89
Gastro-Intestinal Tract, . . . . .	89
Other Organs, . . . . .	89
Tuberculosis, Diagnosis of, . . . . .	90
Physical Examination in, . . . . .	85
Prognosis in, . . . . .	90
Prophylaxis, . . . . .	90
Tuberculosis, General Measures in, . . . . .	91
Fresh Air, . . . . .	91
Climate, . . . . .	92
Hygiene, . . . . .	92
Diet, . . . . .	93
Stimulation, . . . . .	93
Tuberculosis, Remedial Treatment, . . . . .	94
Pre-Tubercular State, . . . . .	94
Totality, . . . . .	94
Fever, . . . . .	94
Cough, . . . . .	94
Sweat, . . . . .	95
Hæmoptysis, . . . . .	95
Pain, . . . . .	95
Laryngeal Inflammation, . . . . .	95
Intestinal Tract, . . . . .	95
Tuberculosis, Special Suggestions, . . . . .	96
Cod Liver Oil, . . . . .	96
Strychnine, . . . . .	96
Icthyol, . . . . .	96
Creosote, . . . . .	96
Guiacol, . . . . .	96
Inhalations, . . . . .	96
Sunlight, . . . . .	96
Electricity, . . . . .	96
Tussis Convulsiva, . . . . .	45

**W.**

White Pneumonia, . . . . .	131
Whooping Cough, . . . . .	45
Definition of, . . . . .	45
Etiology of, . . . . .	46
Pathology in, . . . . .	46
Symptoms of, . . . . .	46
Complications of, . . . . .	47
Diagnosis of, . . . . .	48
Prognosis in, . . . . .	48
General Treatment of, . . . . .	48
Remedies for, . . . . .	48

**X.**

X-Ray in Phthisis, . . . . .	96
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