

199 (2159)

**Friedlander bacillus bacteremia.**

By O. W. H. MITCHELL.

[*From the Department of Bacteriology and Hygiene, Syracuse University, Syracuse, N. Y.*]

Rare instances of Friedlander bacillus bacteremia have been reported. Recently such an infection was encountered. The following are the most important data. An Italian girl, eight years old, was taken ill during the evening of March 19. All day she had been apparently well and ate a hearty supper with a large portion of egg-plant. At bedtime it was noticed that she was somewhat shivery and feverish but did not appear definitely ill. Went to sleep but at midnight was nauseated, vomiting and shivering. Her people were up with her during the night and in the morning she appeared quite ill. She was sleepy and dull. There was considerable trembling and some stiffness of the neck. She mumbled a great deal. A physician suspected meningitis and sent her to the University Hospital of the Good Shepherd. An examination of the spinal fluid gave normal findings. The patient was under the care of Drs. Cornell Smith and A. C. Silverman of the Pediatric Service. The physical examination was negative except for the following: "Examination of the lungs shows some harsh breathing in the upper right lobe, posteriorly. Occasionally coarse, moist rales are heard. Respirations are rapid and shallow, 52 to the minute. Pulse 160, temperature 103."

A blood culture was made on March 21 at 4 p. m. The following morning growth was observed. The flask had the odor of colon bacillus growth. In the hanging drop there was apparently no true motility. Subcultures were made on the usual media including lactose, dextrose and saccharose broth. The subcultures on the solid media gave the appearance of the colon bacillus. The growth was not particularly viscid. It was not sticky or tenacious. Subcultures were more typical and grew more luxuriantly. After standing five days the growth was tenacious. All of the sugars were fermented rapidly and the closed arm was almost completely filled with gas. This strong-

ly suggested the Friedlander group. Capsule stain from the subculture was negative but intraperitoneal inoculation in the white mouse yielded typical capsulated bacilli. The mouse was very ill when killed at the end of 18 hours. Gelatin was not fluidified. The organism was definitely a member of the Friedlander group. As the only physical finding suggested the possibility of a lung lesion the isolation of the bacillus pointed to that region as the most likely diseased area. The X-ray examination on March 26 showed marked density of the right upper chest from the second to the sixth rib. On March 30 this density had decreased to a mere cloudy appearance.

After a most stormy career for six days during which time the temperature reached 106.8°F., there was a rather sudden change for the better and the patient made a rapid recovery.

## 200 (2160)

### Thyroparathyroidectomy in the rabbit.

By SUTHERLAND SIMPSON.

*[From the Department of Physiology and Biochemistry, Cornell University Medical College, Ithaca, N. Y.]*

In reviewing the literature on the parathyroids, one is struck by the lack of agreement in the results obtained by different experimenters following complete removal of the glands, in animals of the same species. For example, Gley, in 1892, when he re-discovered the parathyroids, in his first series of experiments on rabbits, removed the thyroid and parathyroids from sixteen animals. In fourteen of these acute symptoms developed very rapidly and death followed within a day or two. In the same year Moussu repeated Gley's experiment on rabbits and of the eleven individuals on which he performed the complete operation not one showed the acute tetany described by Gley.

In late August and early September 1920, the writer thyroparathyroidectomized seventeen half-grown rabbits, keeping six of the same litters as controls. Of the seventeen, one died within