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A NOTE ON THE DURATION OF EOSINO-  
PHILIA IN TRICHINOSIS.

BY THOMAS R. BROWN, M.D., BALTIMORE, MD.

IN a comparatively recent number of the *Boston Medical and Surgical Journal*,<sup>1</sup> Dr. Richard C. Cabot, in discussing eosinophilia in trichinosis (the first account of which had been given by me in the *Johns Hopkins Bulletin*, April, 1897, followed by a complete report in the *Journal of Experimental Medicine*, Vol. III, No. 3, of three cases in which a marked eosinophilia, between 45 per cent. and 68 per cent. had been found in the blood, and living trichinæ in the muscle), remarked that it would be interesting to know how long the eosinophilia lasted after the cessation of the acute symptoms.

This question had also occurred to me, but unfortunately, all our three cases left the hospital and the city while still showing a marked eosinophilia, 16.8 per cent. in the first, 17.6 per cent. in the second and 34.7

<sup>1</sup> December 30, 1897.

presented by the author —

per cent. in the third, with a leucocytosis of 11,000 per c. mm. in the first, and 9,000 per c. mm. in the second and third cases. Recently, by a lucky chance, the third case has again come under my observation and, as there had been no symptoms since leaving the hospital (January 22, 1898) to suggest another trichinotic infection, I took the opportunity to examine his blood to see whether any trace of the old eosinophilia remained.

The count made on July 10, 1898, was :

Leucocytes (per c. mm.) . . . . .	7,000
Polymorphonuclear neutrophiles . . . . .	68%
Small mononuclears . . . . .	23%
Large mononuclear and transitional forms . . . . .	6%
Eosinophiles . . . . .	3%

That is, practically, a normal number of leucocytes per c. mm., and normal percentages of the various forms, thus showing that the eosinophilia had entirely disappeared within the five months subsequent to his leaving the hospital. This one would naturally expect if the eosinophilia is related to the acute stage of the trichinotic infection, as seems to be the case. Nevertheless, that there is an increase of the eosinophiles in the blood for a *considerable* time after the cessation of the acute symptoms, is highly probable, when we consider the very great increase in the number of these

cells in the blood, and the fact that a considerable length of time must elapse after the enormous new formation has ceased, before a sufficient number has been destroyed to bring their proportion again within normal limits.

The fact that all three of our cases, leaving the hospital after their symptoms had practically ceased, had still a marked eosinophilia, shows that for a certain length of time at least, the increase is maintained, although gradually lessening.





