

Quite apart from its possible value Stocker considers that there may be two main objections to its use: First, that in the scar-tissue under treatment it is possible some virulent organisms may yet only be lying dormant because of their encapsulation, and that the action of fibrolysin may lead to their release and thus to a recrudescence of the original disease; and secondly, that such softening or absorption of scar-tissue in certain cases may constitute a danger in itself. For instance, Kassel has seen hamoptysis recur, Békéss an acute condition set up in a case of old endocarditis, and Teleky perforative peritonitis take place, due to giving way of an operation scar in the pylorus, all of which were attributed to injections of fibrolysin. The writer also quotes a case of his own which he thinks bears on this point.

A woman, aged thirty-seven, had suffered for five years, the result of some painful adhesions in the abdomen. Twenty-five years ago she had had some periostitis of the left radius, which soundly healed in a few weeks leaving only a small patch of "thickening" on the inner side of the forearm. Thirty years ago she had been successfully vaccinated, to which three large dead-white scars on the left upper arm bore witness.

An intra-muscular injection of 2.3 c.cm. of fibrolysin (Mendel) was given in the *right* upper arm. Slight local pain followed, with an evening temperature of 38.2° F. She complained of headache, and the left forearm was tender, hot and oedematous. As these symptoms had improved in the course of forty-eight hours another injection of the same quantity was then given. A few hours afterwards Stocker was called to see her and found the temperature 39° C., pulse 100. The patient felt very ill. No local reaction was apparent around the site of the injection, but the *left* forearm was swollen, painful, hot, and pitted on pressure, whilst the vaccination scars were also soft and tender.

Under suitable treatment these symptoms disappeared in some two weeks' time, and fortunately he is able to report that the adhesions in the abdomen did not continue to give rise to any more pain; but Stocker remarks that although the issue in this case was happy, these facts should form a valuable warning against the unrestricted use of fibrolysin, and concludes by remarking that only by carefully considering each individual case shall we be able to exhibit this drug in accordance with the highest principles of medicine, viz. *Nil nocere.* *Alex. R. Tweedie.*

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