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the condition of the contents of the chest by a man skilled in physical diagnosis, but I am not speaking to these men. For the average man the x-ray film gives much more accurate information concerning infiltrations, consolidations, and excavation than any amount of inspection, palpation, percussion and auscultation.

The most useful single physical finding in pulmonary tuberculosis is rales. Unless these are brought out in a certain manner, many times they will be missed. The patient should be asked to exhale, cough at the end of exhalation, and then inhale. The characteristic rale is heard with the inspiration that comes immediately after the cough. The procedure described causes all air to be expelled from the alveoli; if there is any inflammation causing an excess of moisture, the alveolar walls adhere to each other and when they are again expanded their separation causes a crackling sound. If this sound is carefully fixed in one's memory, there is little chance of confusing it with such adventitious sounds as crackling of hair on the chest and sounds due to muscle vibrations.

Special laboratory procedures other than the sputum examination are of no help in diagnosing tuberculosis. The condition of the blood is, of course, important in assessing the patient's exact physical condition for the purpose of treatment, but there is nothing in the blood examination that is characteristic of tuberculosis.

There are, of course, unusual situations in the lungs that are difficult to diagnose, even

for the specialist in chest diseases, but these situations probably should not remain in the hands of the general practitioner but should be referred to the specialist in the first place.

So much for making the diagnosis of tuberculosis. When the diagnosis is made, then one must, by means of complete blood examinations including a Schilling count and sedimentation tests, observation of the temperature fluctuations, evaluation of such symptoms as the weight loss, night sweats, cough, expectoration, etc., assess the precise status of the patient's disease for the purpose of treatments. But it must always be remembered that none of these things has any value in making a diagnosis of tuberculosis. Too many errors have been made by diagnosing tuberculosis in patients who have "symptoms of tuberculosis."

Many general practitioners seem to feel that tuberculosis is an uncommon disease. Furthermore, they, being closer to their patients than the specialist are loathe to make a diagnosis of a disease which is looked upon with so much horror by the average person. The general practitioner must appreciate, however, that his services are indispensable in the fight against tuberculosis. If he is alert and investigates the chests of all patients in whom the symptoms may be due to tuberculosis, and if he then goes further and advises all of the persons who have been in direct contact with a patient with tuberculosis to have x-ray films made of their chests, he will be performing an invaluable service for his community.

607 Main Street.

## Organization News

### PENNSYLVANIA CHAPTER MEETS

The Pennsylvania Chapter of the American College of Chest Physicians, which was organized at the time of the annual meeting of the College held at Cleveland on June 2, will hold its first regular meeting at the William Penn Hotel, Pittsburgh on Sunday, October 5th. This is one day prior to the annual meeting of the Pennsylvania State Medical Society. A business meeting will be held at 3:00 P. M. The following scientific program will be presented: Dr. Chevalier L. Jackson of Philadelphia will speak on "Obstructive Atelectasis"; Dr. Childerhose of

Harrisburg will speak on "Silicosis"; and Dr. Stites, Superintendent of the State Sanatorium, Cresson, will speak on "Experiences with Pneumoperitoneum in the Treatment of Tuberculosis of the Lungs and Intestines." An informal dinner will be held at the William Penn Hotel at 7:00 P. M., and Major General Reynolds will be the guest speaker at this function. All the members of the College from Pennsylvania and the adjacent states are invited to attend. For reservations, write Dr. Edward Lebovitz, Secretary, Pennsylvania Chapter, American College of Chest Physicians, 501 May Building, Pittsburgh, Penna.