

# ACUTE YELLOW ATROPHY OF THE LIVER.

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Acute Yellow Atrophy must be ranked among the rarest of diseases. According to Hunter, it is seldom met with in the largest hospital practice. Out of 25,700 cases admitted during nine years into the London Fever Hospital at a time when a brown tongue and delirium constituted a sure passport to admission, Murchison only met with one case. Although observed as early as the year 1616, Best in 1903 estimated that the total number of recorded cases did not exceed 500 in number. Rare as this disease is in adult life—the great bulk of cases on record are in female adults between the age of 20 and 40 years—it is still more uncommon in children, although no age is exempt. Of 343 cases collected by English and Continental authorities, only 21 were in children under the age of 10. In America some years ago Heyes collected 17 cases, including one of his own, the youngest being only three months old.

The disease in children presents the same symptoms and runs the same course as in adult life. At the onset it cannot be distinguished from simple catarrhal jaundice. Icterus, nausea or vomiting, general malaise, with some enlargement of the liver and clay-coloured stools present a group of symptoms commonly associated with this mild disorder. After a period of from one to eight weeks from the onset, however, grave signs appear—extreme restlessness, delirium, and widely dilated pupils point to some severe cerebral disturbance; vomiting becomes persistent, and the vomit often becomes black or coffee ground in appearance. Examination of the abdomen shows an extraordinary diminution or even entire absence of the usual liver dullness, and a microscopical examination of the urine in a certain percentage of cases reveals crystals of leucin or tyrosin or both. In the great majority of cases the patient rapidly loses ground, becomes comatose, and the disease has a fatal termination; only very few apparently authentic cases having been recorded of ultimate complete recovery.

Recently a case of this disease was observed by me in the Auckland Hospital, and as the symptoms during life and the morbid condition of the liver and other organs discovered at the autopsy were typical of acute yellow atrophy