

Reflections

Interesting Cases that I have seen in Different Hospitals During My Career

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Editor's note: Prof. Eice Muhammad is a veteran physician with a vast clinical and teaching experience. He has served as professor of medicine and as principal of some of the premier medical institutions in Pakistan. He recollects and share some of the rare cases he has seen, many of us might not see in a lifetime.

A. In Nishtar Hospital, Multan

1. During time of house job in Nishtar Hospital Multan (NHM), a young patient about thirteen years of age was admitted in the ward. He had liver enlargement (4 fingers), slightly firm. Liver functions were slightly deranged. After few days, his liver began to reduce in size as I would palpate his liver daily. In about 5—7 days, the liver became impalpable and he went into coma and inspite of our efforts, he died.

2. During the same period, a young girl was admitted in hepatic coma on my beds. On admission her liver was palpable by two fingers below the Rt. costal margin. I remember treating her with 10 percent dextrose drips, clean water enemata, and Tab. Neomycin through nasogastric tube. After about one week, she became conscious. What was amazing to note was, that her liver became enlarged to about 5 fingers and nodules were palpable on the surface of liver. These were regenerated liver cells nodules which began to perform liver functions and as a result, she survived. During those days i.e., about 55 years ago, Hepatitis B, Hepatitis C or Hepatitis A viruses had not been discovered.

B. In Mayo Hospital, Lahore

1. When I was in Mayo Hospital, Lahore as Registrar in East Medical Ward under Prof. Muhammad Akhtar Khan, a diabetic patient, about 40 years of age was admitted in the ward. While we were assessing him for complications of diabetes, he started complaining of dim vision in both eyes. In 3—4 days, he developed cataract in both eyes. We started regular Insulin injections to control blood glucose level and as glucose level became normal in few days, the cataract in both eyes disappeared. This was amazing incident to witness. Later I learnt that was snowflake cataract that occurs during severe hyperglycaemia. Due to osmotic effects, the lens



become opaque. Once glucose is normalized, the cataract disappears.

2. In Mayo Hospital Lahore, when I was Registrar in East Medical ward, I saw a case of Cruveihler-Boumgarten Syndrome. This can occur in any disease causing Portal Hypertension. There is development of massively dilated veins on anterior and posterior abdominal wall. There may be splenomegaly as well.

3. There used to be Neuro-Ophthalmological Society monthly meetings in Mayo Hospital, Lahore in which teachers of Neurology, Ophthalmology and Internal Medicine used to present cases. During one of those meetings, I saw a case of Sabre Tibia due to Syphilis. I also saw cases of Familial Spastic Paraplegia in those meetings.

4. Similarly, I have also seen a case of Nieman-

Pick Disease and Arthroglyposis Multiplex Congenital (rare disorders).

5. A case of Naphthalene Poisoning (Moth ball) was seen again in Mayo Hospital Lahore. A young boy had ingested a moth ball. This caused severe haemolysis of red blood cells. He also developed haemoglobinuria. The patient was saved. He was given three pints of blood and other supportive measures. In our common language these moth balls are called فرنیل کی گولیاں.

These moths cause holes in the clothes especially the woolen clothes.

6. When I was in final year of MBBS course I used to go to the medical and other wards during the evenings. Once I joined the round and there was mention of Tuberose Sclerosis (Epiloia), a cause of epilepsy, dementia, and Adenoma Sebaceum on the face. After return to my room I read about this disease and developed intense desire to see such a patient.

After few days, I had a dream in which somebody pointed towards a person that, this is a patient of Tuberose Sclerosis.

Later, after many years while I was in Lahore. I actually saw a patient of this disease. This is how my desire was fulfilled.

C. In DHQ Hospital, Rahim Yar Khan

1. While I was working in District Headquarter Hospital (DHQ) as District Physician Rahim Yar Khan in 1972, nine family members came to the OPD. All had Mumps. The father and 8 others were affected ranging from 7 years to 20 years of age.

2. In the same hospital, sometimes half of the medical ward used to be filled with cases of snake bite. Nervous system complications in the form of Intracerebral haemorrhages, sub-arachnoid haemorrhages and spinal cord haemorrhages were more common complications of snakebite as compared to other areas where I have been posted.

3. In the same hospital, I saw many cases of maggots infestation of nose and ears with maggots falling out of ears and nose of the patients. Maggot oil was used to treat these cases.

4. In the same hospital, I saw two cases of Pulmonary Myiasis (Maggot infestation of lungs).

Patients complaining of spitting out maggots in their sputum. These two patients were suffering from Pulmonary Tuberculosis and had foul smell in their breaths. During sleep the maggot flies laid larvae in their mouths which travelled down and were later expectorated.

5. During my second posting in DHQ Hospital, Rahim Yar Khan, a patient with post-partum Tetanus was admitted under my care. The fits were occurring one after the other and in spite of administration of Anti-Tetanus serum, Inj. Penicillin, Diazepam, Phenobarbitone and Chlorpromazine, the intensity and frequency of fits did not decrease. On seeing no response to these, I started i/v Paraldehyde drip (diluted 7 times).

Fortunately, this controlled the fits and she survived. I noticed that she was virtually exhausted of physical strength after this dreadful period. Gradually she regained her strength.

6. During this time, I saw two patients belonging to one family. They were sisters. One had Pulmonary Tuberculosis and the other had Leprosy. One caused by Mycobacterium Tuberculosis and the other caused by Mycobacterium Lepae.

D. In Jinnah Postgraduate Medical Centre (JPMC) Karachi

1. During my FCPS training in Jinnah Postgraduate Medical Centre (JPMC) Karachi, we were posted in Sind Institute of Skin Diseases in Sadar area of Karachi. Late Prof. Nusrat Ali was head of that institute.

One day, he asked me to diagnose a case. The patient had more hair in one or two places on the arms. After putting few questions, I said; sir, this is a case of Porphyria Cutanea Tarda. He was so pleased that he patted me on my back and wished success for me. Later Prof. Nusrat Ali arranged our visit to Mary-Adelaide Centre of Leprosy in Karachi. Dr. Ruth Pfau showed us large variety of leprosy cases. Upto this day, I feel that if I had not seen those cases of Leprosy, I may have been misdiagnosing these cases as fungal infections or other diseases of skin.

2. In Jinnah Postgraduate Medical Centre (JPMC) Karachi, I also saw a case of Kala-Azar in a Bengali patient who originally had come from East Pakistan (now Bangladesh).