

**ORAL SEPSIS AS A CAUSE
OF "SEPTIC GASTRITIS,"
"TOXIC NEURITIS," AND
OTHER SEPTIC CONDITIONS**

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Oral Sepsis as a Cause of "septic Gastritis," "toxic Neuritis," and Other septic conditions by
William Hunter

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WITH ILLUSTRATIVE CASES.

BY

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logical Curator,* late Pathologist, Charing Cross Hospital.*

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PREFACE.

THE following account of Oral Sepsis and its effects is a reprint of an article which appeared in *The Practitioner* of December, 1900.

It is a record of personal experience, and derives any value it may have from that circumstance. It is published in this separate form in the hope that it may serve to draw additional attention to a source of disease extremely prevalent, and most egregiously overlooked.

WILLIAM HUNTER.

103, HARLEY ST., W.

January, 1901.

CONTENTS.

	PAGE
I. INTRODUCTORY	3
II. (1) LOCAL INFECTIONS: Dental Caries, Gingivitis, Stomatitis, Periostitis, Pyorrhœa alveolaris, Tartar Formation, Alveolar Abscess, Osteitis, Osteomyelitis, Necrosis, Antrum Abscess, Tonsillitis, Pharyngitis, Glandular Enlargements, Otitis, Ethmoidal Suppuration. Bacteriology of Dental Caries	4
(2) GENERAL INFECTIONS: Osteomyelitis, Ulcerative Endocarditis, Suppurative Meningitis, Scorbutic Conditions	6, 26
III. GASTRIC EFFECTS: "Septic Gastritis," its Nature and Mode of Origin; Relation between Dental Disease and Indigestion. Cases	6
IV. TOXIC EFFECTS: Fever, Septic Rashes, Purpuric Hæmorrhages, Septicæmia, "Toxic Neuritis." Cases	13
V. OVERSIGHT IN REGARD TO IMPORTANCE OF ORAL SEPSIS	18
VI. TREATMENT	26

From "THE PRACTITIONER" for December, 1900.

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the London Free Hospital.*

I.—INTRODUCTORY.

FOR the last twelve years, in connection with various studies, my attention has been called in increasing degree to an important and prevalent source of disease, one whose importance, I think, is not sufficiently recognised. The source is oral sepsis—sepsis arising in connection with diseased conditions of the mouth. My attention was first drawn to it in connection with the pathology of anæmia; and since then it has been extended in connection with the pathology of a great number of infective diseases which have one factor in common—namely, septic organisms underlying them.

The case which brought to a head my interest in this subject was one I met with some two years ago. It definitely proved the connection between oral sepsis and one of its commonest effects—one so marked and so common that I have designated it by a special name, *Septic Gastritis*. Since then I have seen a large number of cases, illustrating both the frequency and the importance of the subject; illustrating, moreover, what I regard as even more striking—the extraordinary degree to which oral sepsis is overlooked, alike by all parties concerned—the physician, the surgeon, the patient.

I have already had occasion to draw attention to the subject; but additional experience only serves more and more to emphasise its importance from medical, surgical, and preventive medicine points of view. I desire here to point out once more

how common a cause of disease it is, how grave are its effects, how constantly it is overlooked, and what remarkably beneficial results can be got from its removal. In so doing, it is not my purpose to select rare isolated cases from the literature in order to produce a picture which may arrest attention from its dark colours. I shall illustrate the subject by cases from my own experience, thereby bringing out how common the condition is. In so doing, I shall draw attention for the first time to a new and hitherto unrecognised effect of prolonged oral sepsis—namely, *Toxic Neuritis*.

II.—LOCAL EFFECTS OF ORAL SEPSIS.

The oral sepsis, to which I refer, is by no means confined to or associated with any one diseased condition of the mouth. Its local manifestations are very various. They include a whole series of local inflammatory and suppurative conditions met with in the mouth and adjacent parts.

In the Mouth.—Dental necrosis in all cases; gingivitis and stomatitis of every degree of intensity, inflammatory, pustular, ulcerative, sloughing, and gangrenous; periostitis; suppuration around decayed teeth; pyorrhœa alveolaris; deposition of tartar.

In the Jaws.—Periostitis, alveolar abscesses, osteitis, osteomyelitis, necrosis, maxillary abscess.

In Parts adjacent to the Mouth.—Tonsillitis, pharyngitis, otitis, glandular enlargements, cellulitis, post-pharyngeal abscess; in rarer cases thrombosis of veins, ethmoidal suppuration, and meningitis by direct extension.

The important fact to be recognised is that one and all of these various conditions, including dental caries itself, are septic in their nature, and produced by pus-forming organisms; that such organisms are invariably associated with every case of dental caries, however slight; and that the question of effect in any one case is a matter of individual resistance. The effects I have mentioned are very common; that they are not even more common is due to the remarkably resistant powers possessed by the mucosa of the mouth. How rapidly wounds in the mouth heal is well known. And yet, the sepsis connected with diseased teeth is of a particularly virulent character, much more so than the pus derived from soft tissues. It is really connected with disease of bone; and a somewhat extensive pathological