

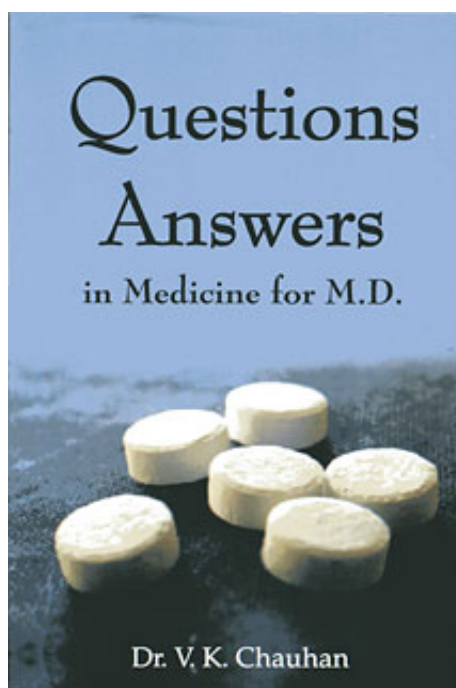
Dr. V.K. Chauhan  
Questions Answers in Medicine for M.D.

Extrait du livre

[Questions Answers in Medicine for M.D.](#)

de [Dr. V.K. Chauhan](#)

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## 2 Tropical Diseases

**Explain typhoid in detail, its aetiology, clinical features, and differential diagnosis, investigations needed. What is the importance of temperature chart? Write about five homoeopathic medicine indicated in typhoid.**

**Or**

**Describe clinical presentation of a case of Typhoid fever. How would you arrive at the conclusion of possibility of intestinal perforation and intestinal haemorrhage in complicated case of typhoid?**

**Ans.:**

*Definition:*

An acute intestinal infection caused by *Salmonella typhi*, characterised by insidious onset of fever intense headache, with relative Bradycardia, rose colored eruptions, abdominal discomfort and splenomegaly.

*Aetiology:*

Distribution	: Worldwide
Season	: Summer, autumn
Causative organism	: <i>Salmonella typhi</i>
Source	: Human case or asymptomatic carrier
Transmission	: Faeco:oral route
Spread	: By fly, food, fluid, finger, fomites

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Predisposing causes      Poor resistance, absence of previous infection. Overcrowding, poor sanitation

Incubation period      7 to 21 days

Age Sex

*Clinical*

MIMMMMMIMIMI  
; Children, young adults :

*Features:* a. First

week:

Symptoms:

Onset

Fever

: Insidious

: More in evening. Frontal, maddening-headache Bodyache. Anorexia. Constipation. Distension of abdomen. Lassitude.

Signs:

Temperature

: Stepladder rise, 39°C: 40°C by end of week

Pulse

: Relative bradycardia. Dichrotic. :

Face

Flushed. Pupils dilated : Coated,

Tongue

red tip and margins : Gurgling over

On palpation

caecal region

abdomen

b. Second week:

Symptoms:

Fever: continuous, reaches its peak. Headache is better. Marked prostration. Apathy. Listlessness. Delirium. Stupor. Pea soup diarrhoea. Cough. Epistaxis. Distension of abdomen.

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Signs:

Temperature : 40°C-41°C.

Pulse : Fast

Blood pressure : Low

Tongue : Dry. Coated in centre. Red tip and margins

Rose spot rash on trunk : Comes on 7<sup>th</sup> to 10<sup>th</sup> day. Rash is Red, Macular 2:4 mm in diameter Appear in crops. Fades on pressure. Disappear within 3:4 days.

: Abdomen, soft

On palpation abdomen

Spleen Liver : Soft, palpable

c. Third week: : Enlarged

*Mild infection (favourable outcome):*

Symptoms:

Prostration.

Appetite returns.

Fever subsides by lysis.

Mental state clears.

Abdominal symptoms subside. Signs:

Abdomen : Distended

Liver : Palpable

Spleen : Palpable

Temperature falls by lysis.

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*Severe infection (fatal outcome):*

## Symptoms:

Marked prostration.

Fever falls by crisis.

Delirium, stupor, Picking of bed clothes (carphology).

Muscular twitchings. Incontinence of bowel, bladder

## Signs:

Sordes in mouth. Delirium, with eyes half open

## Complications:

Intestinal haemorrhage.

Coma.

Circulatory failure. d.

## Fourth week: Symptoms:

Fever comes to normal.

Prostration persists. Appetite improves.

## Signs:

Temperature : Normal

Pulse : Fast

Spleen : Not palpable

*Investigations:*

## a. First week:

TLC: leucopenia.

DLC: relative lymphocytes.

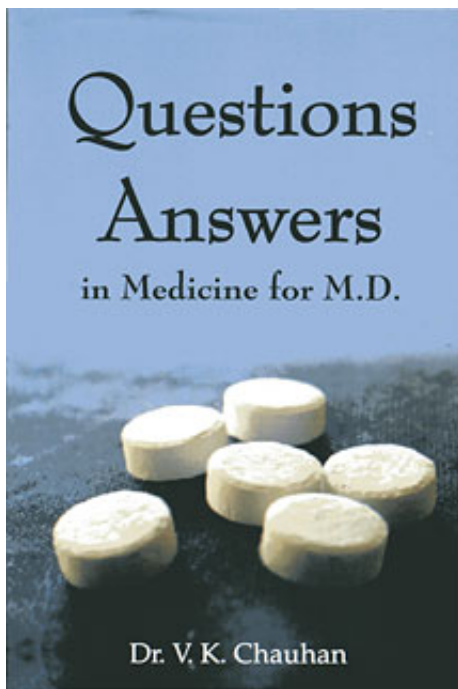
Blood culture: positive at end of week.

## b. Second week:

Widal test: positive.

Blood culture: positive.

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