

The “reexamination of the sign”

La “reinterrogación del signo”

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It happened around 1938 when the Argentine cardiologist Pedro Cossio was summoned from Brazil to the city of Rio de Janeiro. Dollabella Portela, with the noble title of Earl of the powerful Matarazzo family, was dying of end-stage heart failure. He was treated by von Bergmann, the most important German clinician of his time. The local physicians before the expiring condition he presented and having exhausted the therapeutic alchemies of the time, thought of Pedro, who hesitated to go. The Argentine president Roberto M. Ortiz, at the request of the Ministries of Foreign Affairs of both countries, convinced him of the need to provide aid to the neighboring country. Tiring and inclement was the trip in one of the first four-engined aircrafts of the time, in partial but continuous flights to arrive in haste.

Once at his destination, he entered without pause the room that smelled of incense. The mist disguised the smell of agony, while a merciless tropical downpour made the rarefied air warmer and more humid. A man with a dark complexion was waiting for him sitting with uneasiness on the edge of the bed. The examination was thorough. The word in the interrogation was sharp; the touch and hearing exasperated to the utmost to find a beginning of hope in some modification that would relieve the sick man. The latter, puffed, almost sitting up to take advantage of the labored breathing, with an accentuated fatigue after each maneuver or response given to the physician, exhibited cold and clammy skin. His feet were swollen. His nose was like two blowing wings that widened in search of more air for his insufficient lungs.

Bent over with the anxiety of an explorer, the doctor ceaselessly repeated his maneuvers and questions. The sick man could hardly follow him with his eyes. A haze in his eyes was getting in the way of the doctor. All his muscles contracted to the maximum with

each breath revealing a torso dissected by effort, as the veins on his neck became prominent and tortuous, foreboding. The ear lingered on his chest. His heart was racing and his lips remained blue.

He left the patient. He repeatedly studied and cross-checked the tests looking for a clue he did not perceive. He reviewed the medication. Everything was logical and current. He did not reveal new findings in the examination nor did he find it useful to modify the therapy prescribed.

Cossio said goodbye to the patient with the conviction of failure. The haggard face of the dying man became intolerable to him. His Brazilian colleague escorted him to the hotel gate. They only exchanged a few monosyllables in farewell faced with the arrogance of frustration.

Locked up in his room, he returned with his imagination to the observation that had taken place. He again chiseled the patient. He reexamined the sign. He suddenly remembered it with all the withering splendor that it presented. He did not hesitate. He rushed to meet it. He was illuminated. He requested a blood cell count. The patient had barely a million and a half. As the patient was dark-skinned, he had not noticed his pallor. He was anemic and to top it off they had performed fourteen bleedings assuming it was a condition of pulmonary edema. The situation now had meaning. Anemia was the cause precipitating his heart failure.

As the blood flowed through the transfusion towards the patient, he gradually lost his yellowness and the suffocation diminished. Two weeks later the Earl returned to the office and continued to conduct his business.

This is a true story. It demonstrates the importance of the “reexamination of the sign” in semiology to reach the correct diagnosis.