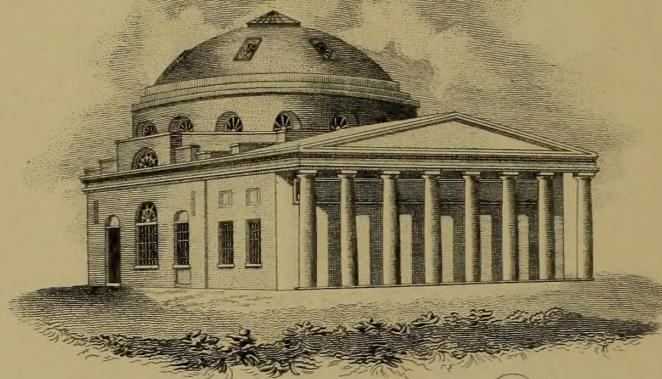


BOOKS
OF ALL
DESCRIPTIONS

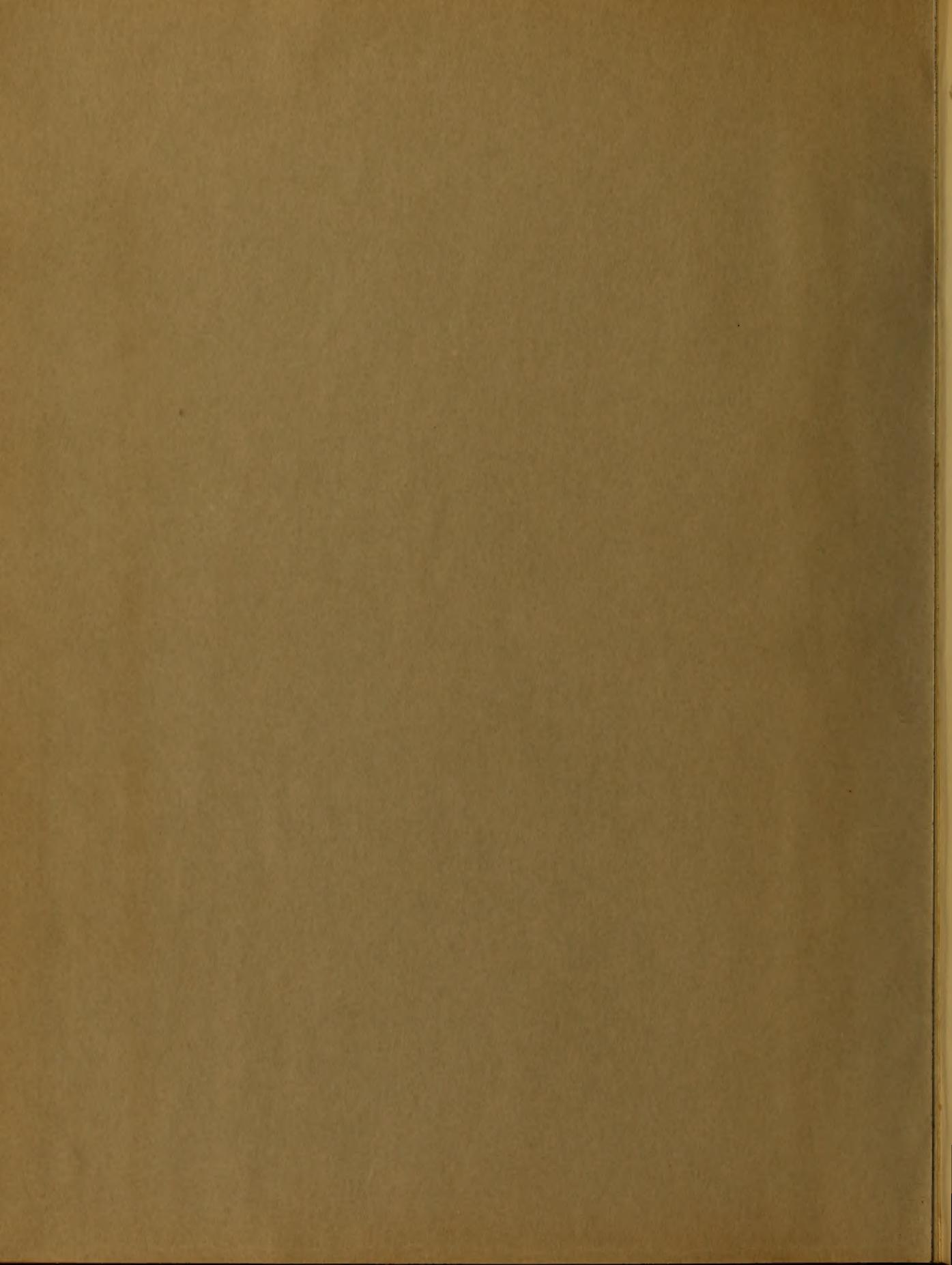
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LIBRARY
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School of Medicine



University of Maryland



University of Michigan Library

Early Doctor of Medicine and Lawyer Manuscripts with
Correspondence

These manuscripts described as above, and their continuation or an incomplete
copy were presented to the University by the son of the Doctor of Medicine and
Doctor of Law, John C. H. Smith (1823). The individual
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contents for the bound volume read "A collection of historical documents, fifteen
distinct years. To address them easily, an alphabetical arrangement without numbers"
has been inserted at the beginning of each volume.

The project team who investigated and curated the historical documents
were: Michael J. Belton, Historical Literature Preservation Officer; Mark
Bergman, Indexer, Manuscript Management Division; Angela Gosselin, Manuscript
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University of Maryland Theses

Early Doctor of Medicine and Doctor of Physic Dissertations with
Corrected Tables of Contents

These manuscripts described as either an Inaugural Dissertation or an Inaugural Essay were presented to the University of Maryland for the Degree of Doctor of Medicine and/or Doctor of Physic during the years 1813-1887. The individual dissertations were bound together during the 1940's. The original tables of contents for the bound volumes contained multiple errors in authors' names, titles, and/or years. To address these errors, an additional "Corrected Table of Contents" has been inserted at the beginning of each volume.

The project team who investigated and corrected the tables of contents were Richard J. Behles, Historical Librarian/Preservation Officer; María Milagros Pinkas, Metadata Management Librarian; Angela Cochrane and Carol Harling-Henry, Resources Division; Sarah Hovde, Abra Schnur and Megan Wolff, Services Division.

These dissertations were digitized in 2011-2012 and are available at the UM Digital Archive (archive.hshsl.umaryland.edu) and the Internet Archive (www.archive.org).

(CORRECTED TABLE OF CONTENTS)

UNIVERSITY OF MARYLAND

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1868 (a)

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Scott, Lee	Alcohol, Its Use and Abuse
Grimes, Harry J.	Cholera Infantum
Thompson, Knox	Alcohol
McCormick, Cyrus	Phthisis Pulmonalis
Early, William W.	Permanent Stricture of the Urethra
Chesley, James B.	Delirium Tremens
Finch, Edward Willis	Opium
Moncure, James Dunlop	The Physiology of the Encephalon
Baker, Newton D.	Pneumonia

UNIVERSITY OF MARYLAND

THESES

1868

Miller, C. E. <i>Edward</i>	Clinical Report of Seven Cases	26p.
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P

AN
Inaugural Dissertation
ON
A Clinical Report of Seven Cases
Submitted to the Examination
OF THE
Provost, Regents and Faculty
OF
PHYSIC,
OF THE
UNIVERSITY OF MARYLAND,
FOR THE DEGREE OF
DOCTOR OF MEDICINE,

By

C. Edward Miller
of

Baltimore Maryland

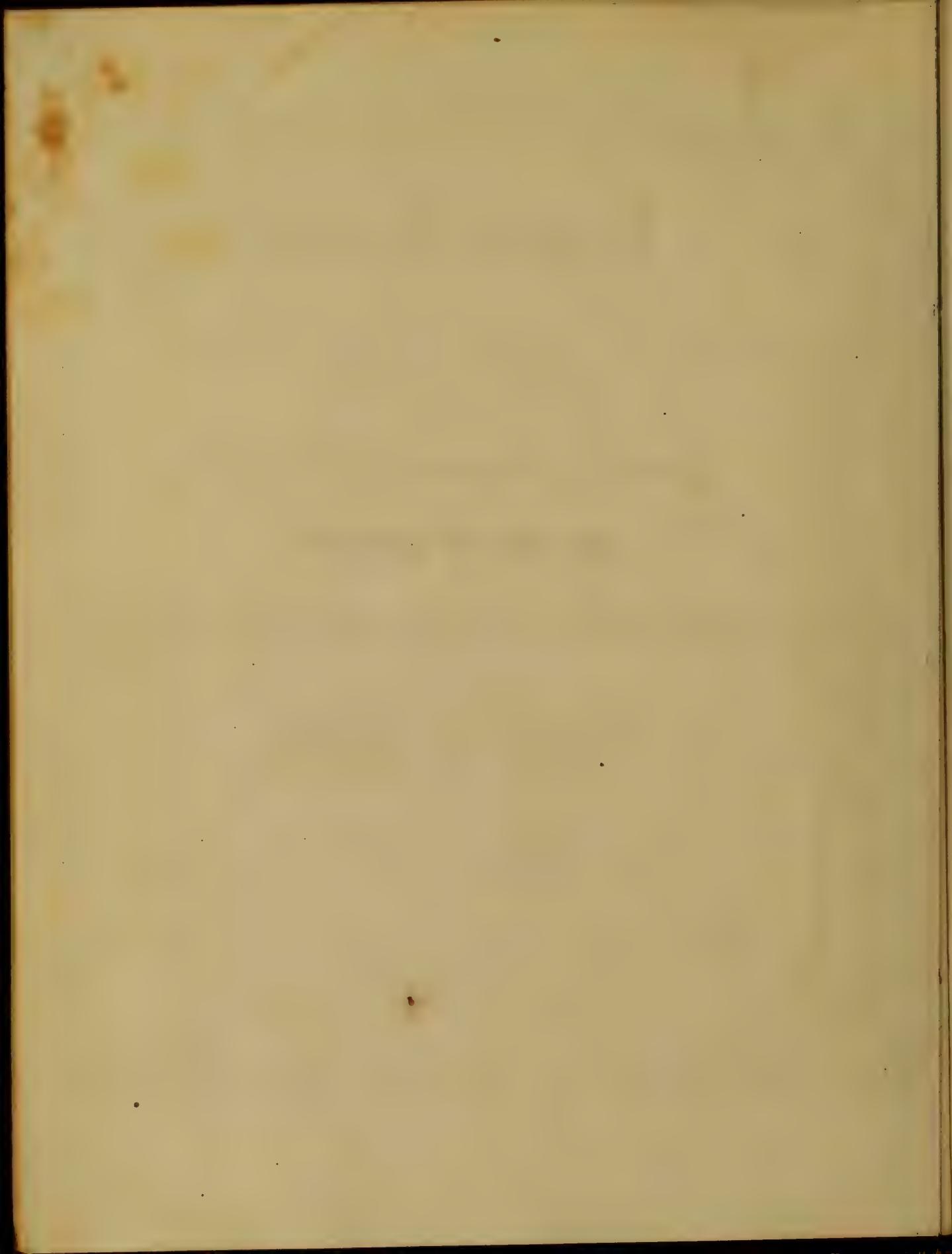
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Session of

18

JULY
1893





To

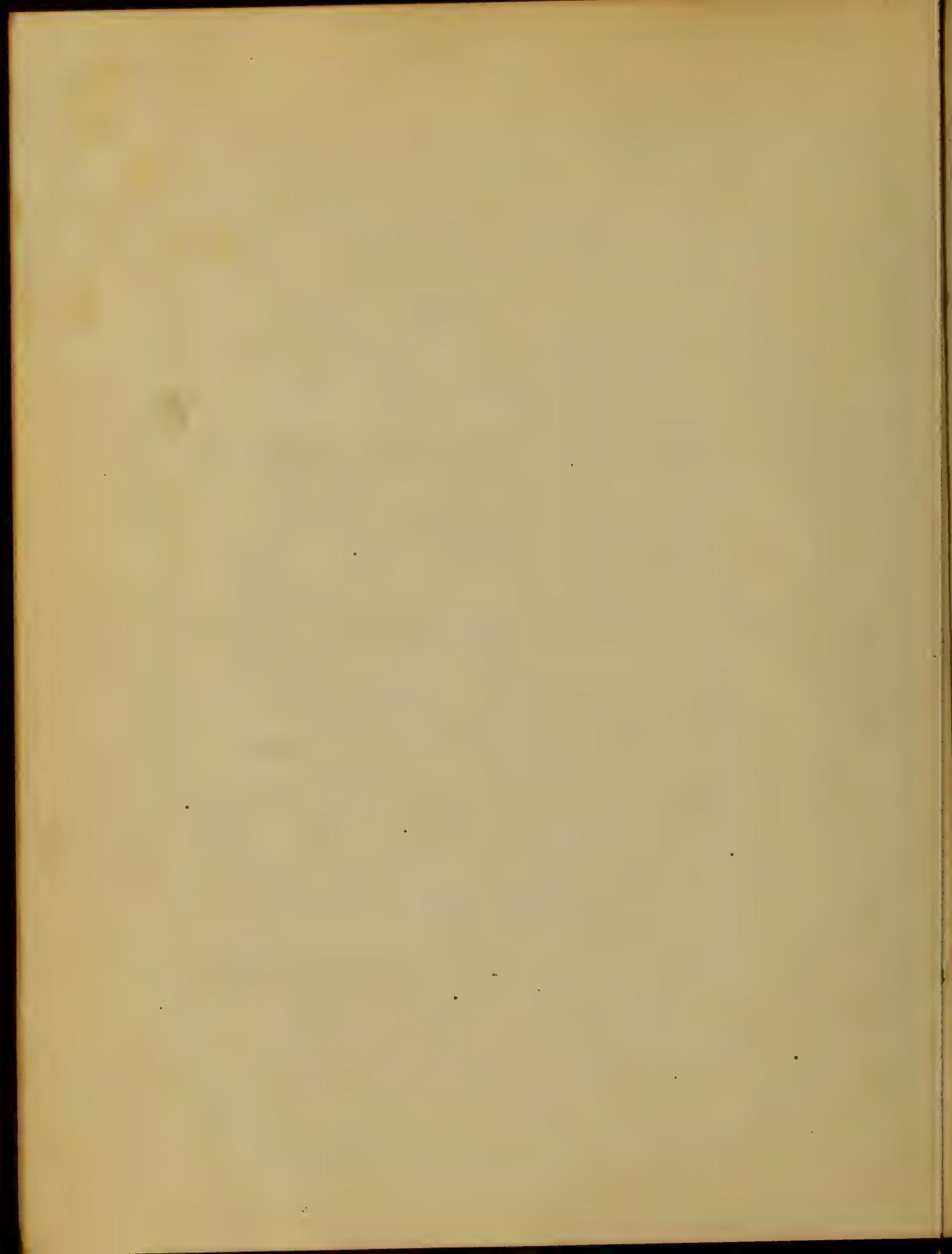
James D. Marquardt M.D.



The following Traumatic Dissertation
is most respectfully dedicated as a tribute
of sincere gratitude and high respect
for the many kindnesses and valuable
advice received from him, while pursuing
my medical studies under his able guid-
ance and fostering care.

C. E. Miller

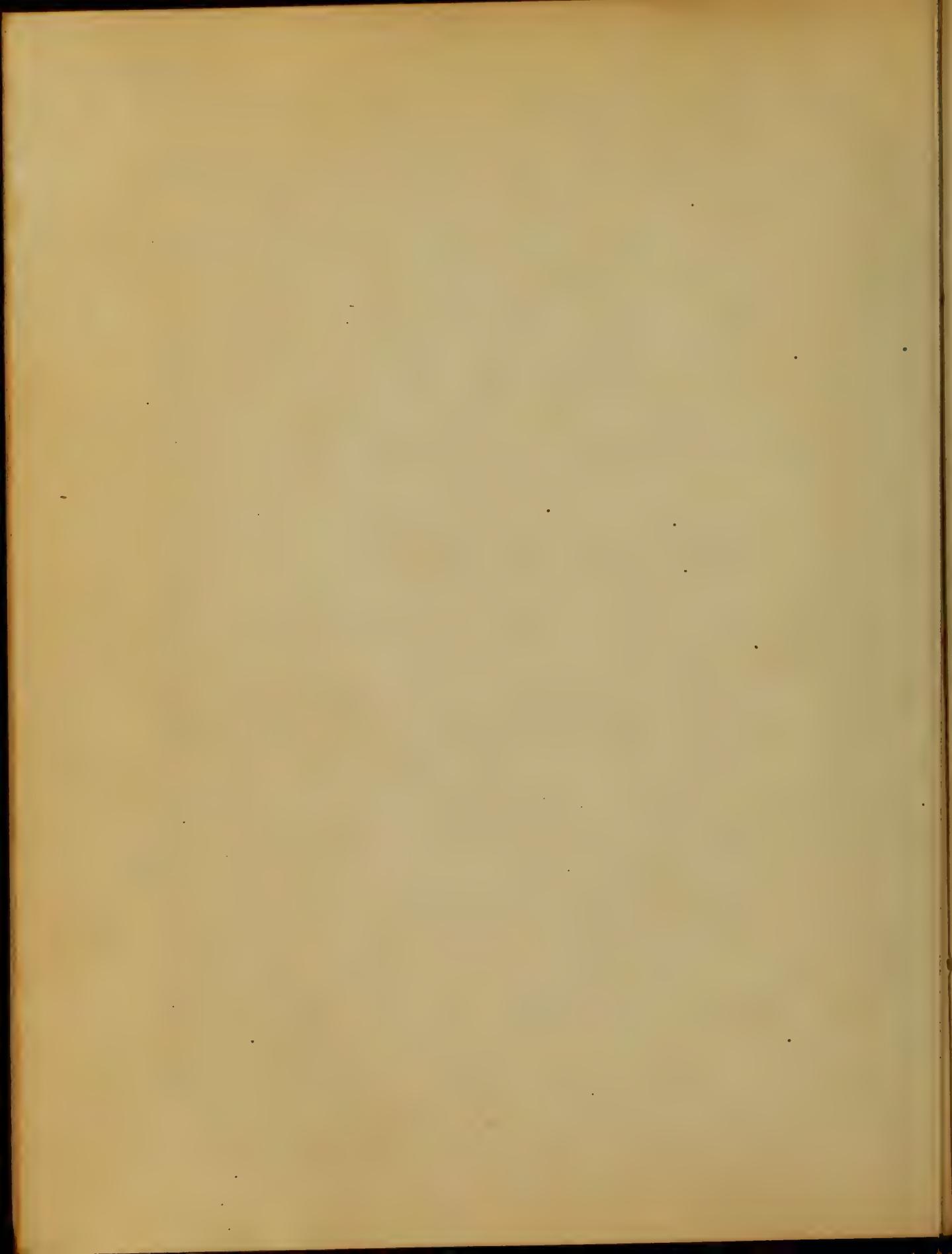
1869



Case

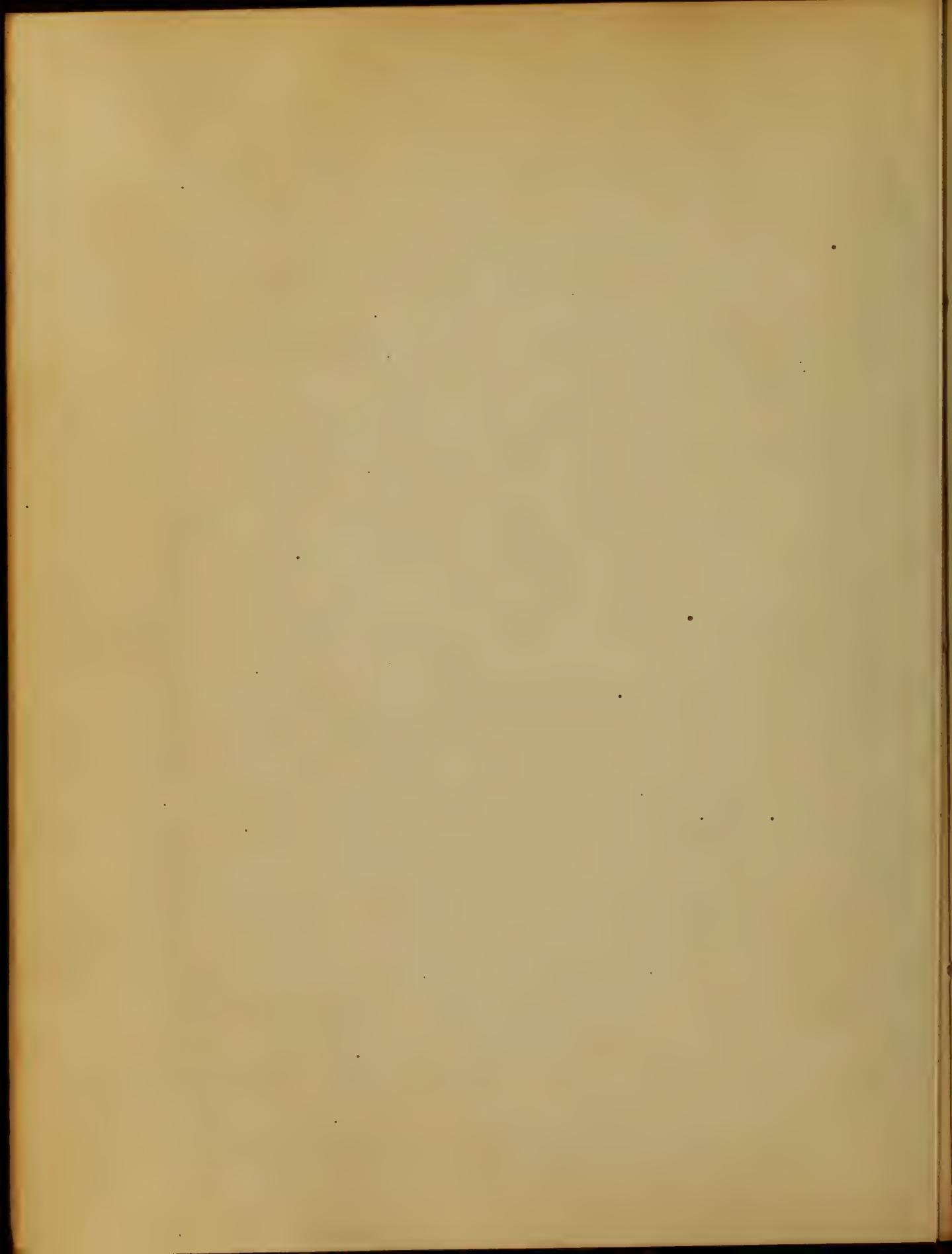
1st

I will now relate a case I have to
you which occurred in a man of about
40 years with no history of disease whatever.
I had him to attend me
on account of a swelling in the right
abdomen. He said he had a swelling
in the right side of his abdomen
about 10 days before. He had
a small hernia on the right side. At once I
endeavored to reduce it by牽is into the abdominal
cavity but without any success whatever. The pain
caused by the protrusion of part of the intestine
through the external abdominal ring, was intense
and painful. The slightest manipulation would
cause the hernia to protrude again.
After a few moments of pressure
the hernia was discovered



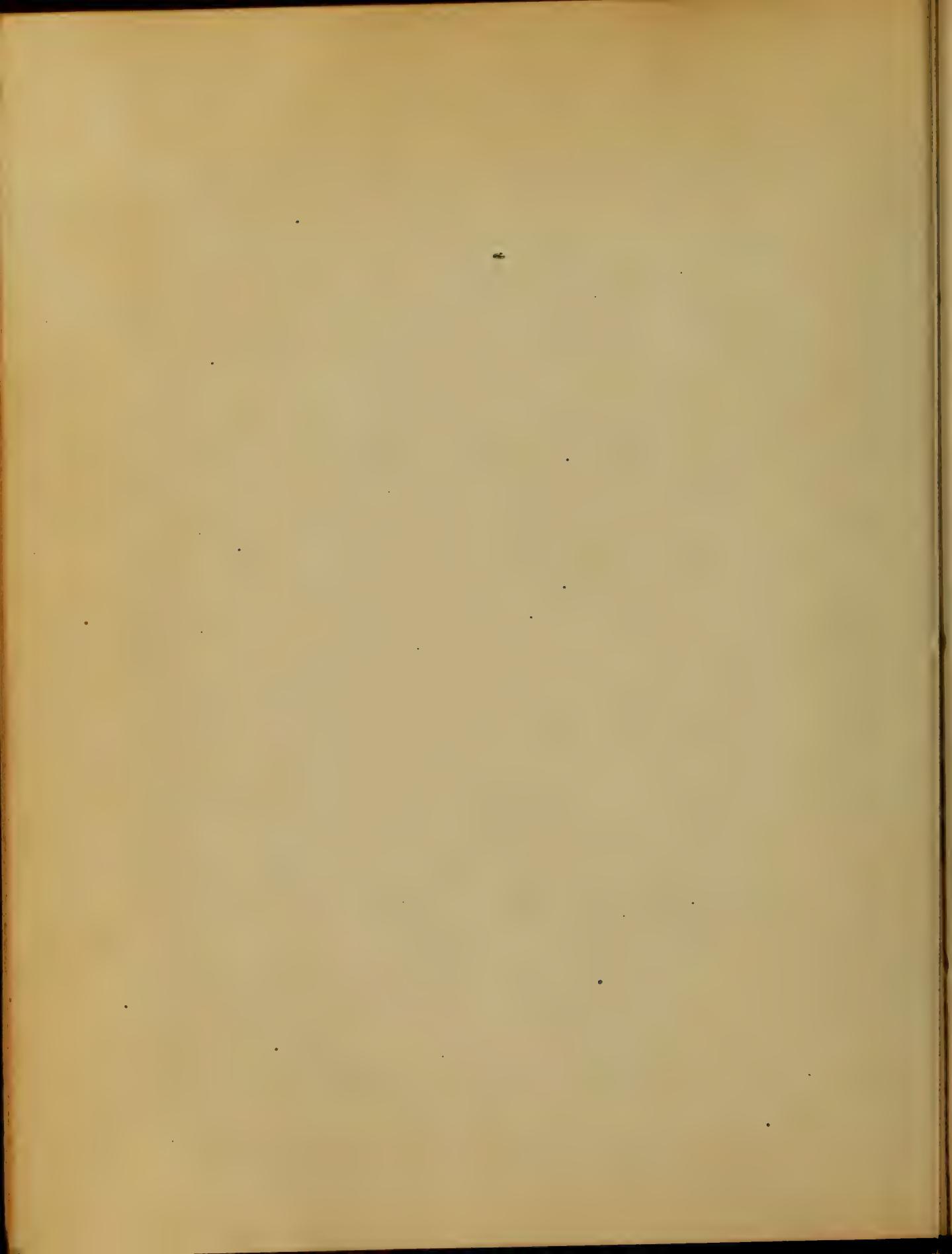
2

middle of which was a small
wound in his side, and he said
he had been shot in the shoulder.
I told him I would do my best
to get a good surgeon at it. To which he very reluctantly
agreed, he finally consented to let me make an
other attempt. I commenced this time by having
him placed upon a couch, and I applied
what is called the Middle Finger. I
reduce it if possible, & went to work. And admirably
succeeded in relieving the poor man, so that
he could stand up and move about
without pain. He coloured in the face, &
I told him the patient will be

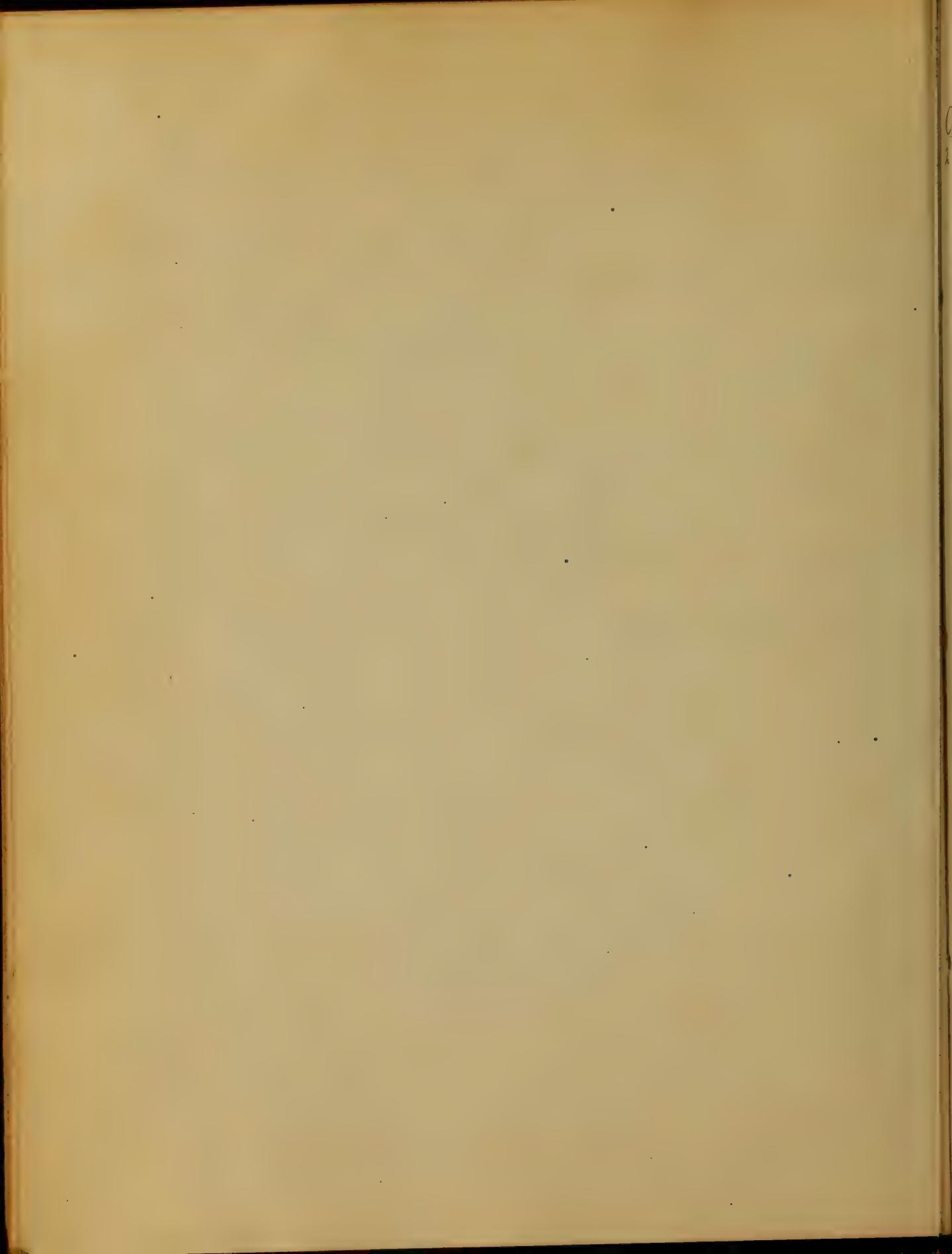


Tell Mr. Tristiff you have seen my letter
to him, and that I am sorry he did not
receive it in time to receive it before I had laid
it with my goods at the Post Office, and
despatched them to him. I will not
be long away, and when I return, you will
see me when you please. Please
excuse this hasty letter.

With the best regards to your wife,
and to all the children, I remain
with an affectionate regard, and all my best
wishes and every good blessing from
several Morphia Powders which were sent to me
in the course of my study of Medicine.
I would say that one dose of 10 grains
of the powder dissolved in water, or
of the powder itself dissolved in water, is
a sufficient dose for a man.



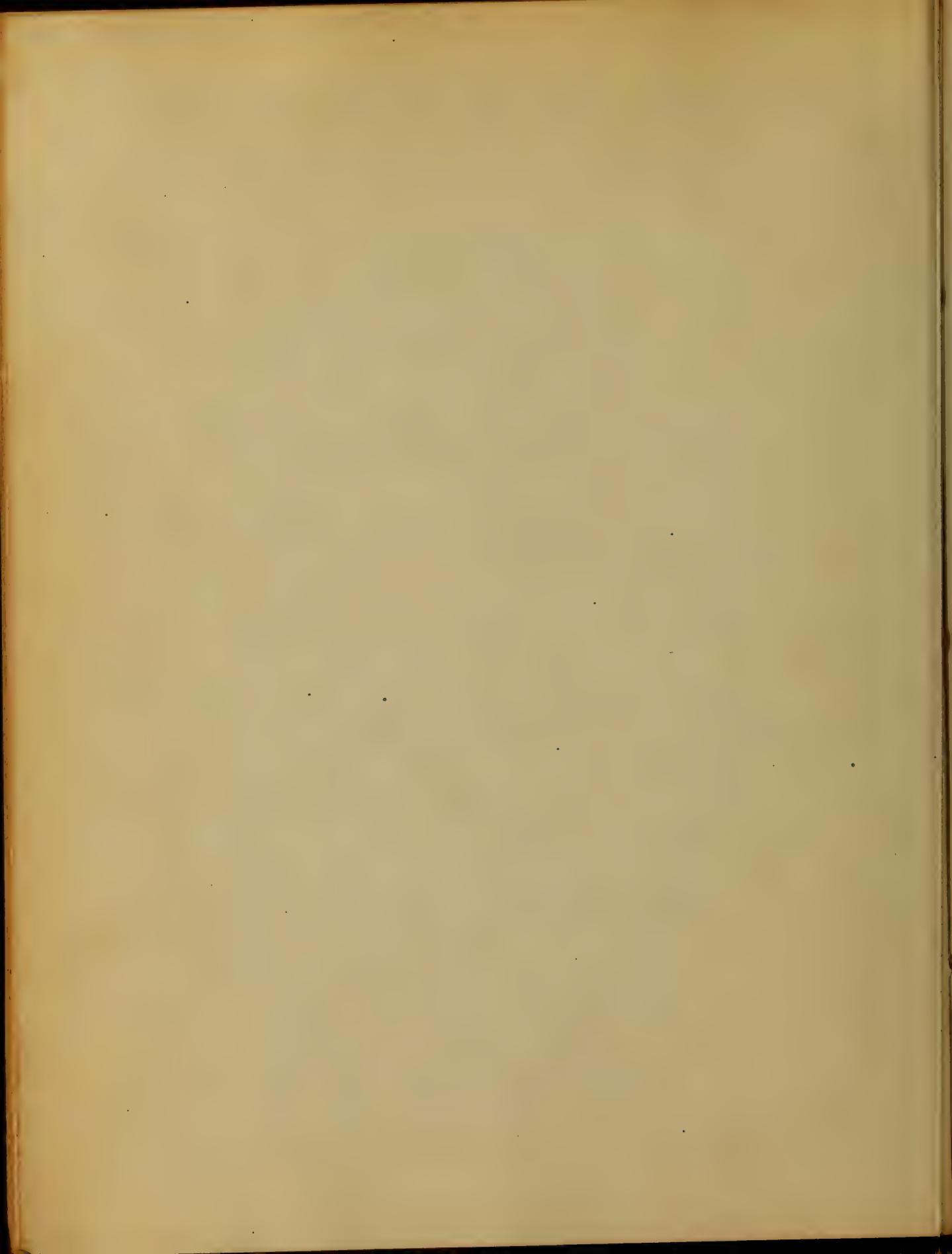
but I found that after the reduction of the
Hemorrhage it was unnecessary to continue the Senna, & therefore
decreed it unnecessary; to the contrary gave him
15 grs. of Hyd. Chlor. Nit. at bed time to be
followed in the morning by a Seidlitz Powder,
he not having had a passage for 4 or 5 days.
This was all the treatment necessary in
this case, as his patient recovered without
any difficulty.



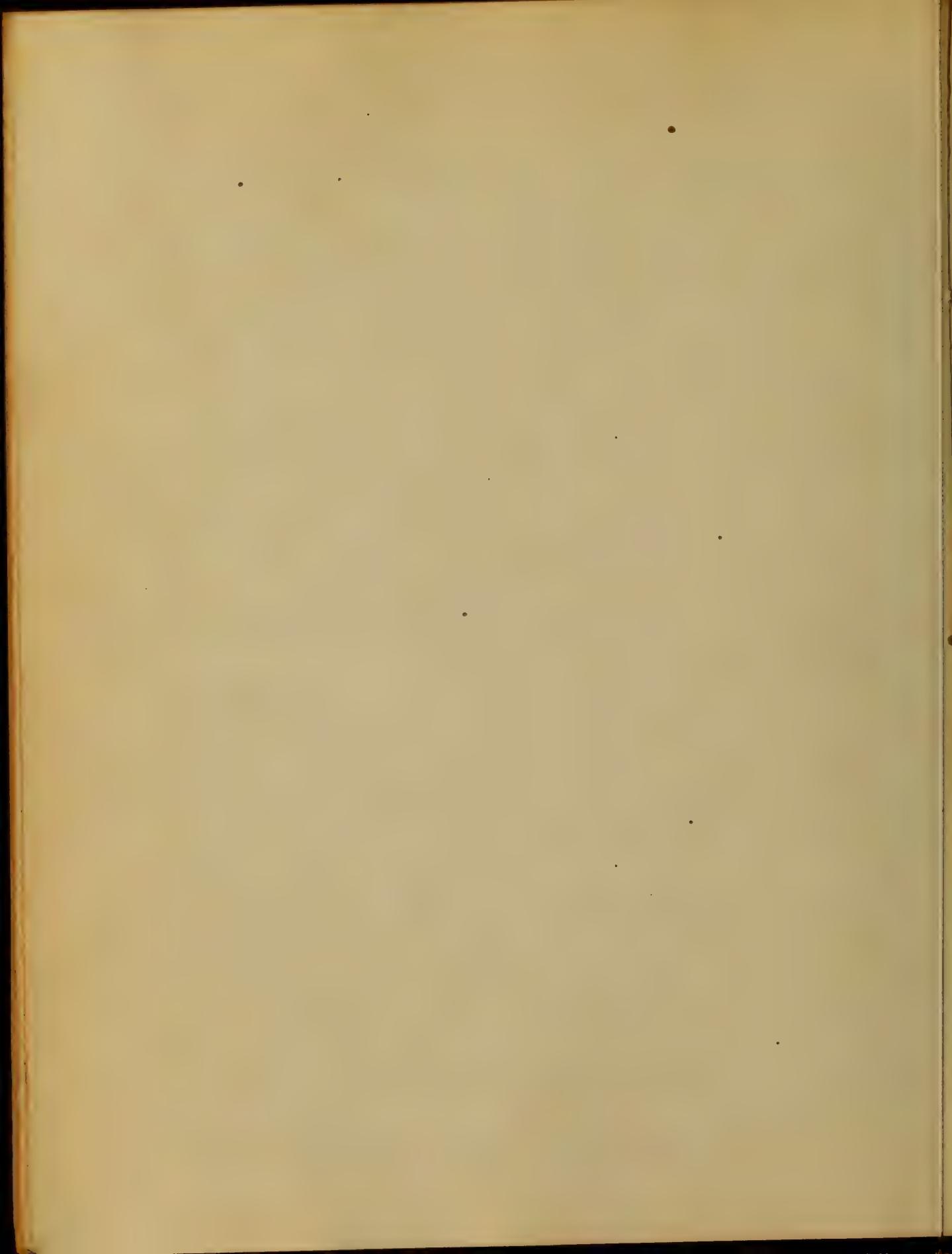
Case
2nd

Two Cases of Iron Glass Contraction, Mrs. Hovey

Dec. 4th 1868. at 11 P.M. I received a hasty call to go to Mrs. G.'s. The messenger informed me that she had been delivered of a healthy boy an hour and a half previous, I made a birth and as yet ^{not} come away immediately answering the call. I found the woman in good condition only laboring under great mental anxiety, and continually crying out "I am going to die!" "Oh I am going to die!" I made an examination for impaction, and found the following condition of things. The vaginal was well lubricated by the secretions of the parts, but the uterus was high up in the abdomen and very immovable to get at. I tried several positions to get at it - impaction, all being ineffectual. At last I concluded to lie down upon my back, and by that position, I found it to be just what



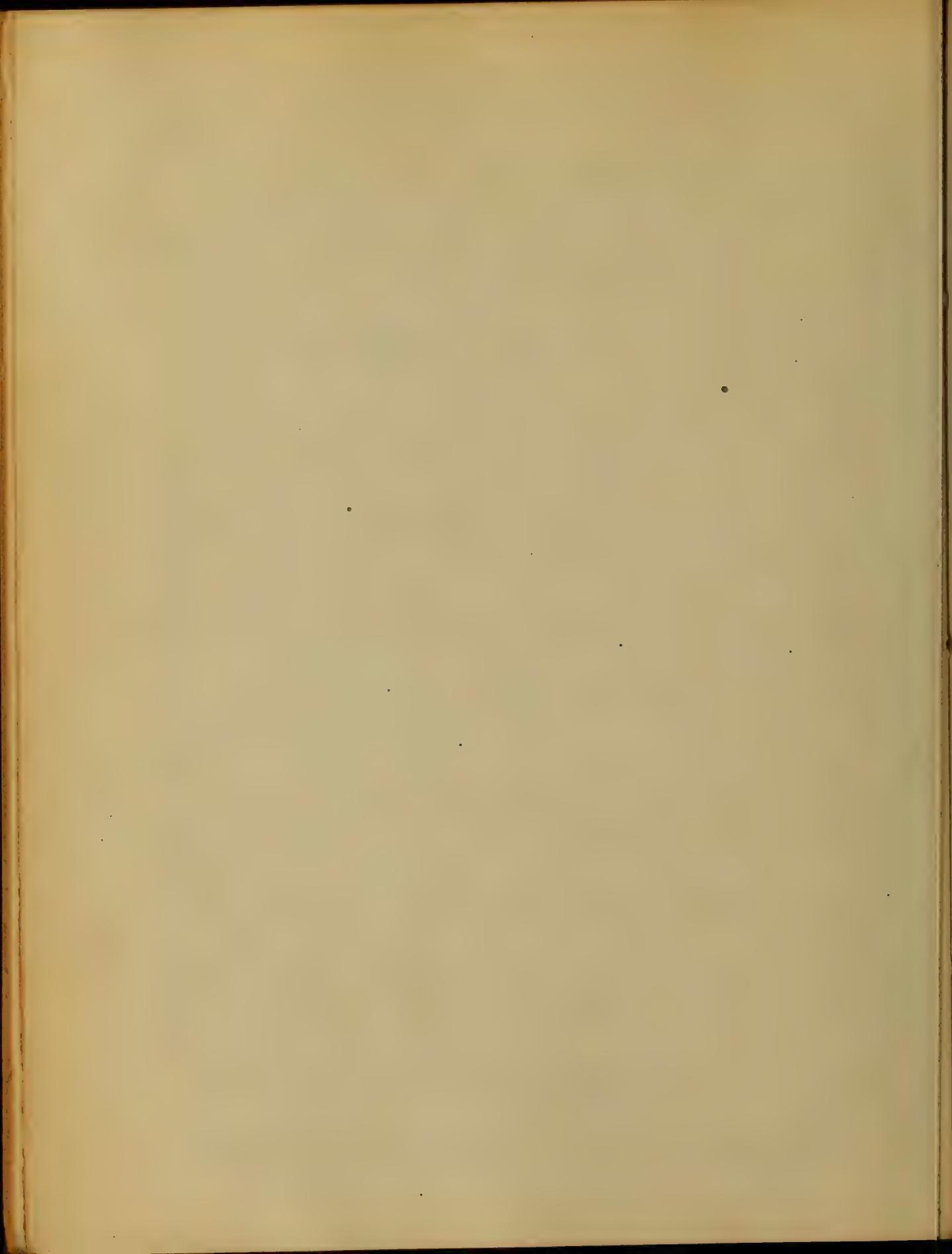
I wanted, after I had introduced my finger
and I could dilate it wide open
without giving her great pain. The sacral
cord was my guide to the entrance of the
womb, and found that the orifice was dis-
tended but about midway & found that it
had contracted down upon the sacral
cord so much that it felt like ring
of bone. I endeavored to force an entrance
through the stricture, but was unsuccessful
for over an hour. When gradually I felt
the rigidity of the contracted portion of
the fibres to yield to the persevering pressure
which I brought to bear upon the parts.
The method of introduction was, which I
presume is practiced by every practitioner.
First to gain entrance with one finger
then as the constriction yields follow it up



7

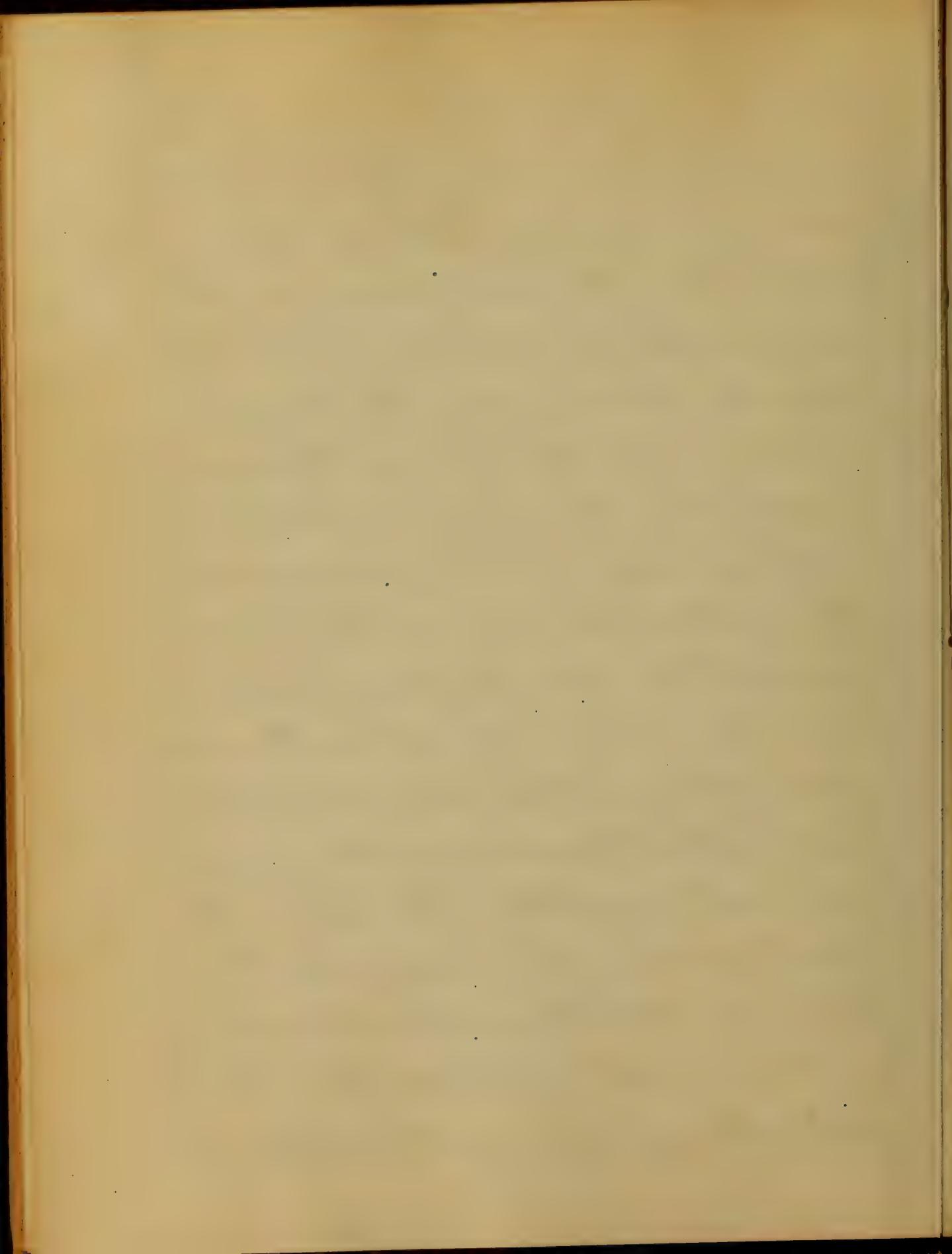
with the remainder till all are engorged
in the duty of expansion. When it was
sufficiently dilated so that I could get my
whole hand above the constriction & pared
off the placenta gradually" and "firmly
seizing it I gently withdrew it from where
it had been so constantly retained. No
hemorrhage of any consequence followed.
She made good her recovery in two days
after her confinement.

Case No 2. The
second case of which I will speak
was that of Mrs. P. aged 38 I was called
upon during the absence of my student
on Saturday evening about 10th June 1868. This
case in many respects was similar to
my first. The child was born several
hours before I saw the woman, a midwife



being present - she being very reluctant to send for a regular practitioner. When I arrived the midwife informed me that she had tried all available means to take away the placenta, but without success.

I made a vaginal examination and found that like my first case the placenta had been completely retained above the constriction. I found the womb in about the same situation, as I did in case No. 1, it being high up in the abdomen and difficult to get at. I used the same modus operandi as in the foregoing case, and succeeded admirably. The only difference of this case from the other was, that the constriction was not so persistent as case No. 1. She met with no obstacle in the way of



recovery, vary that it was more protracted. I presume that was caused by the nature that she was rather delicate and of a weak constitution.

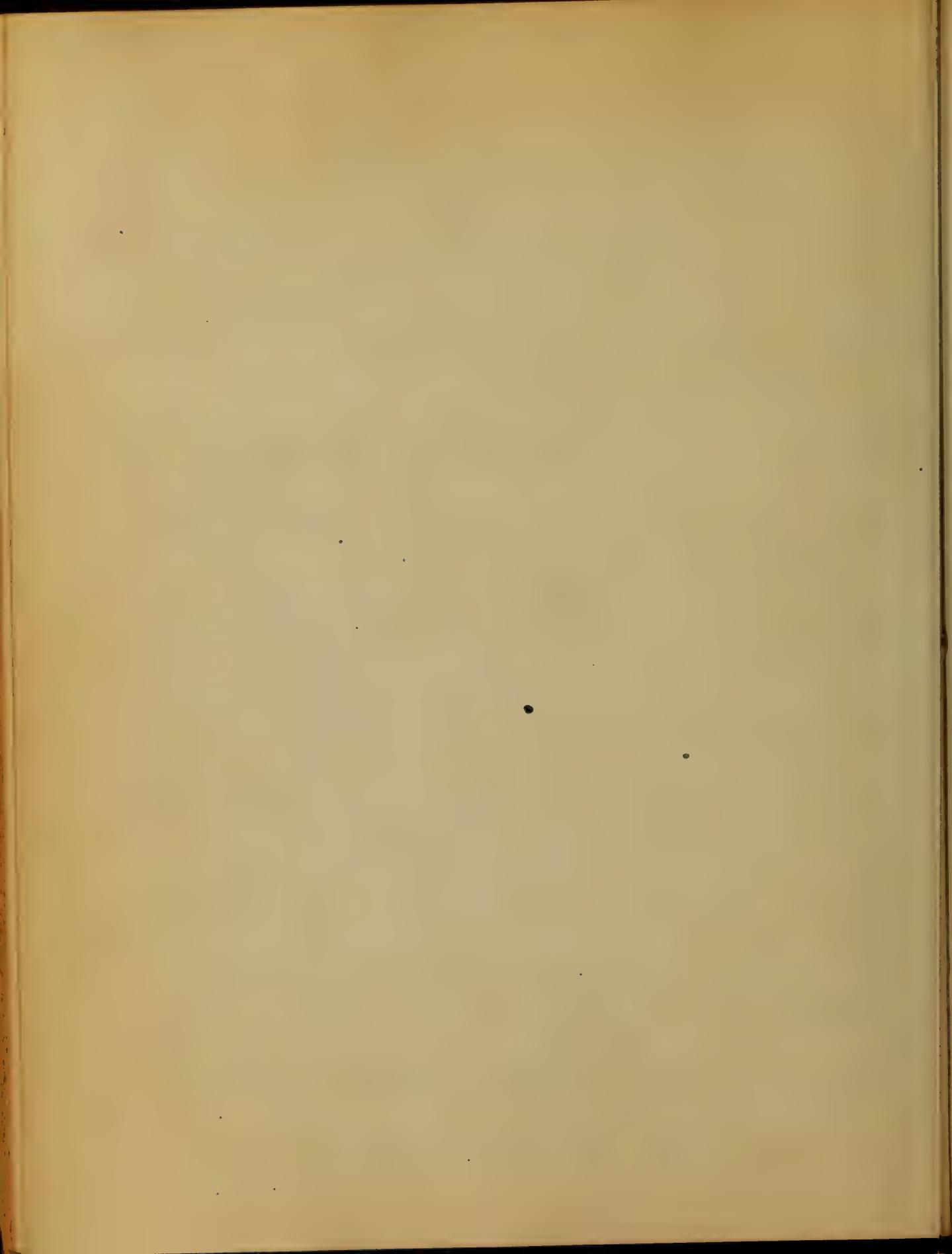
Case 44 ~~6th~~

Case
4th

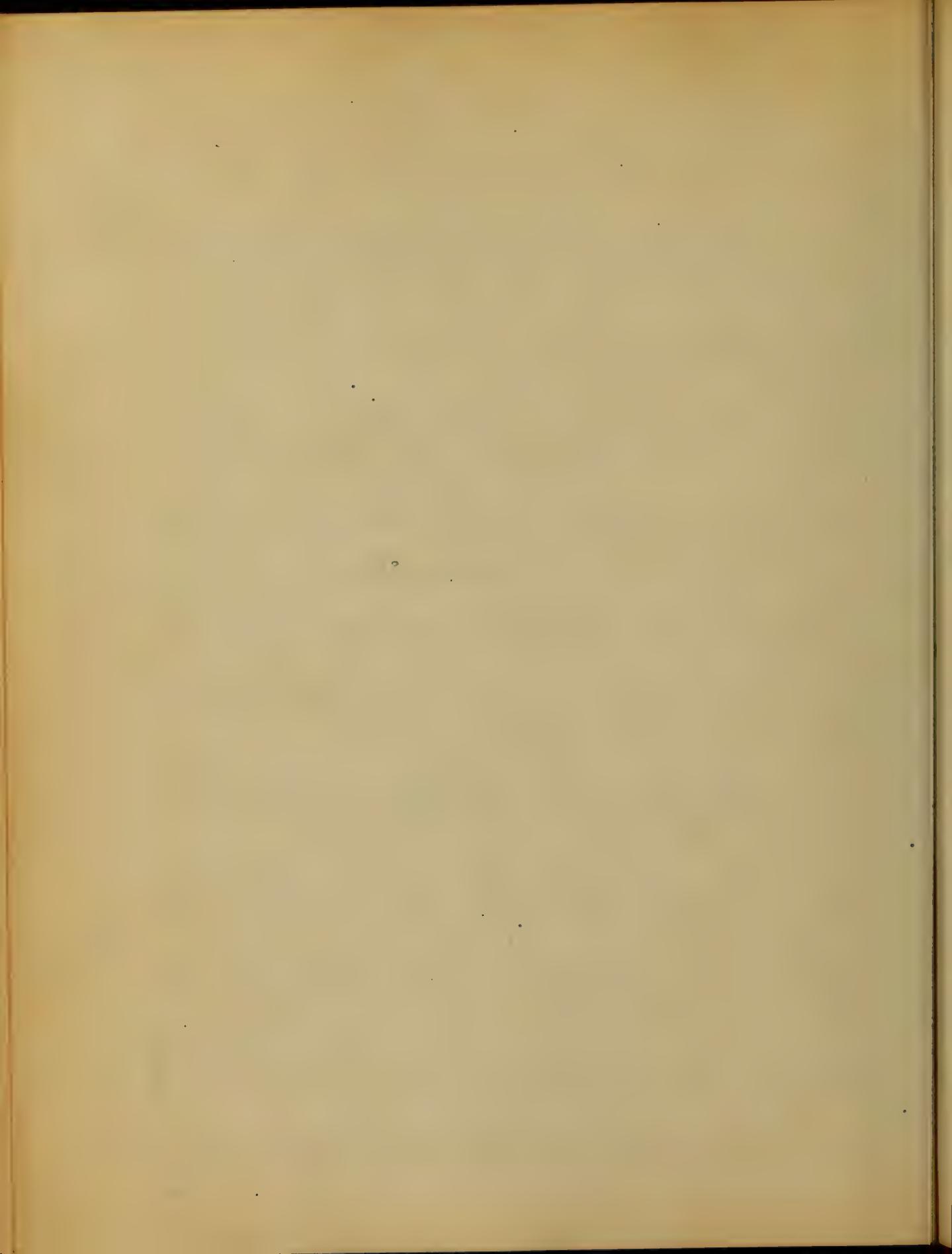
A case of Fracture of the Skull

Mr. H.H. age 53 was seriously injured by having his skull fractured by a heavy blow from a spiltton in the hands of one of his boarders, who was at the time under the influence of alcoholic stimulants. My Receptor being called upon but being absent, I answered the summons.

When I examined the wound I found that it extended an inch and a half, - almost parallel with the left eye brow. I introduced my finger then my probe, & found that the bone was fractured to the extent of two inches.

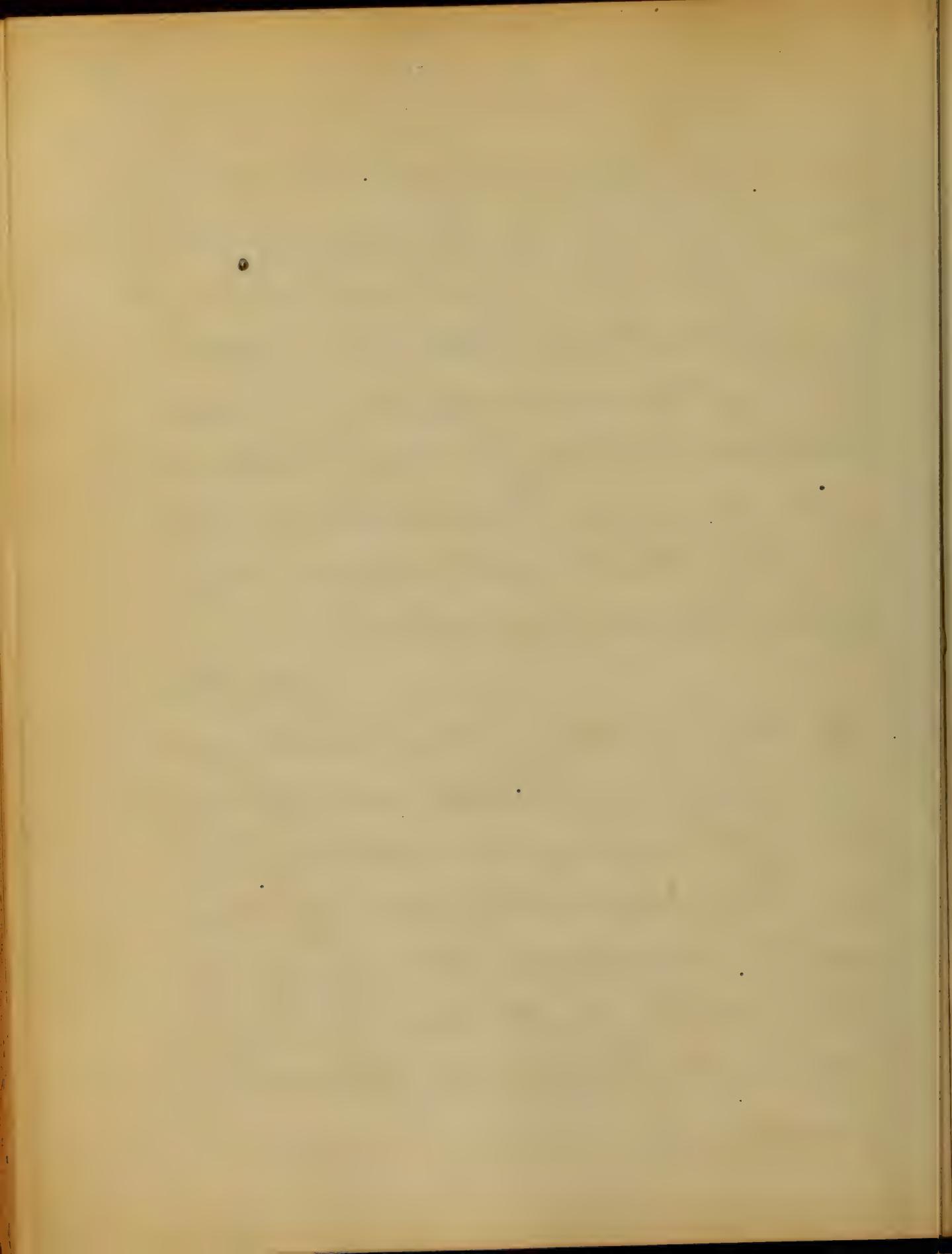


The fissure commencing at the suborbital
area and running in a little different di-
rection from the wound, cast itself in the
supraciliary ridge. I found him quite un-
conscious with free hemorrhage from the nose
and mouth. I had him placed upon a bed
^{and made} as comfortable as possible, ordering cold
applications to his head. At 11 O'clock P.M.
four hours after the casualty I found
him somewhat better, and ordered the con-
tinuation of the applications till morning.
Saw him again at eight o'clock AM next
day, he then had a very high fever and
almost incessant cough, caused as he said
by the trickling of blood down through the
nerves into the fauces, and being occasionally
delirious. His bowels not having been moved
for several days, I ordered a tablespoonful of



Aromatic Syrup of Sennae, with a drop of
Ole. Tigliei every 3 hours till freely purged.
At six P.M. saw him again, and was in-
formed that the purgative had operated
freely after the second dose, the cough had
almost ceased, but the fever had but little abat-
ed in its violence. I ordered Pulv. Specac Et
Opii ℥ in Chart. IV. once to be taken every
2 hours till sleep was produced.

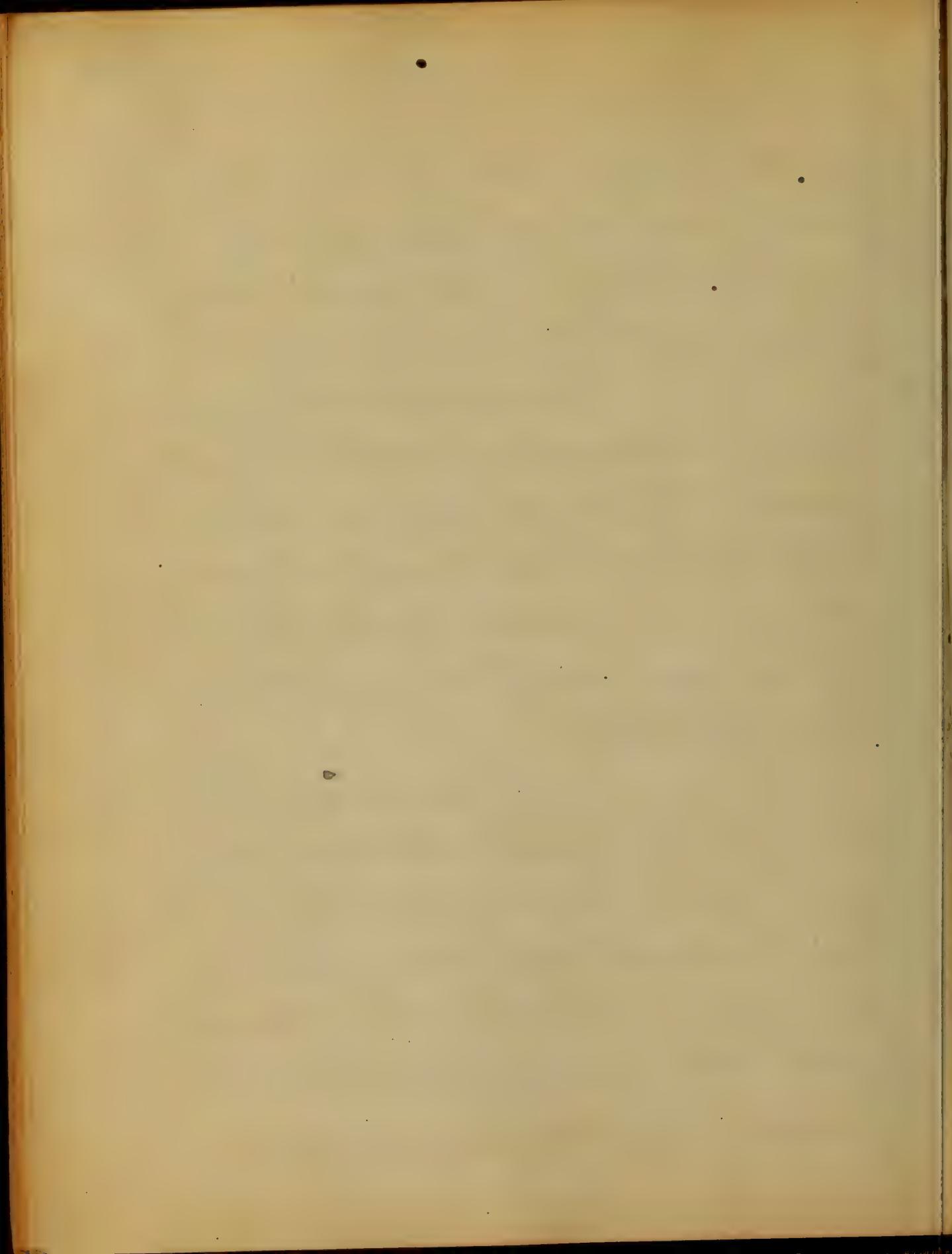
On the third
day when I visited my patient, I had the grat-
ification of hearing that he had slept nearly
all night, he having taken but one pow-
der, which produced the desired effect. He
was perfectly rational with only slight
pain over the frontal bone, the cough
had entirely ceased with little hemorrhage
from the nose.



In the evening he took another powder which again brought him under its influence and upon waking next morning felt quite refreshed.

He continued to improve from day to day until he made a complete recovery. The wound being more of a contusion than a cut, it mattereded considerably, but it gradually healed without any bad symptoms by the application of warm fomentations.

Of course this case struck me very forcibly that it was one of simple fracture. The diagnosis was so simple and noncomplicated that one could not but be impressed with the idea of its nature and the modus operandi of its treatment. We could clearly trace the fissure almost

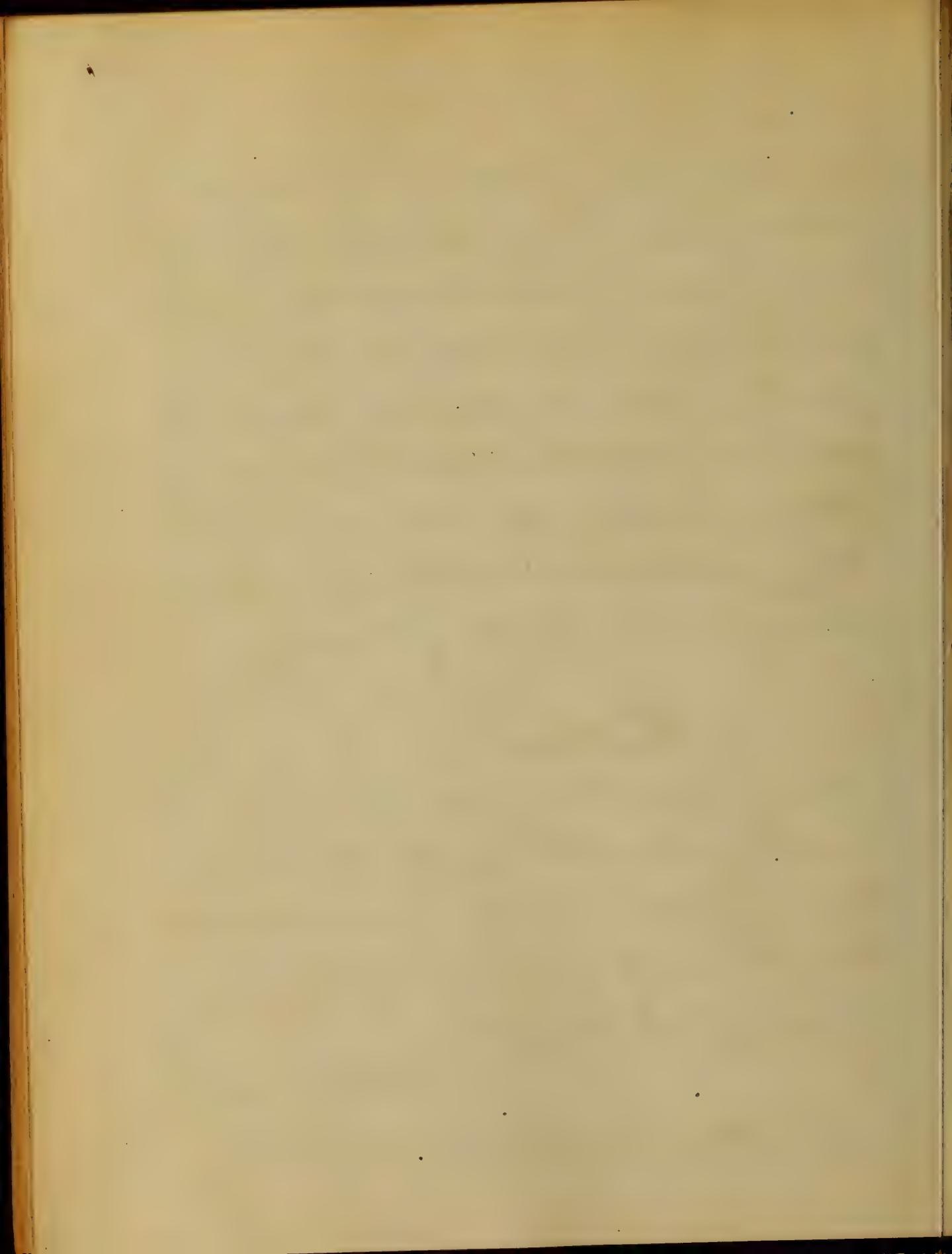


from the beginning to its termination, either with the probe or finger nail, with the hemorrhage from the nose and mouth seems to prove conclusively the amount of danger inflicted on the skull by the blow. Though I do not believe that the internal structure or petrous portion of the skull was fractured or my patient would not, perhaps so soon have shown symptoms of recovery.

Fractures

During the last two years in which I assisted my Preceptor in attending to a portion of the calls which he received I had the opportunity of seeing the following number fractures, viz. 23.

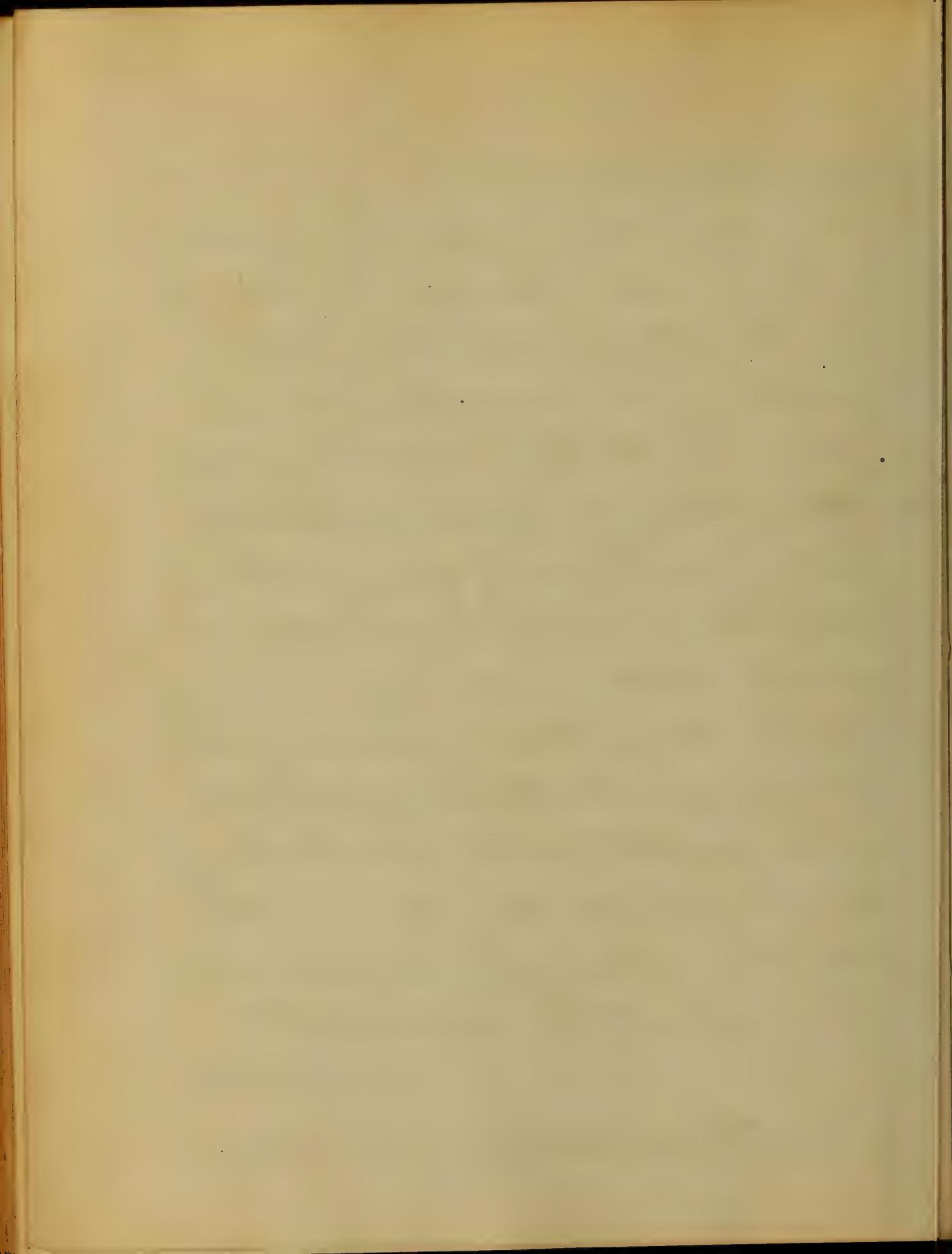
I actually assisted my Preceptor in seven cases, in the remaining



16 I reduced the fracture myself, or assisted by some member of the patient's family. Of these 14 were of the lower extremity, and 9 of the upper. A further division of the fractures of the lower extremities is as follows. 3 of the thigh - 2 at the lower third and one at the middle, of these, two were children respectively, 2 and 9 years of age. Of the tibia and fibula 6 - 4 at the lower third, and 2 at the middle. I also observed in every instance but one, that the fibula was fractured higher up than the tibia, of the tibia alone, and that at the lower third, of the fibula alone 4. all of the lower third. One of the fractures of the tibia and fibula was compound and one comminuted.

Fractures

of the upper extremities were 7 in number

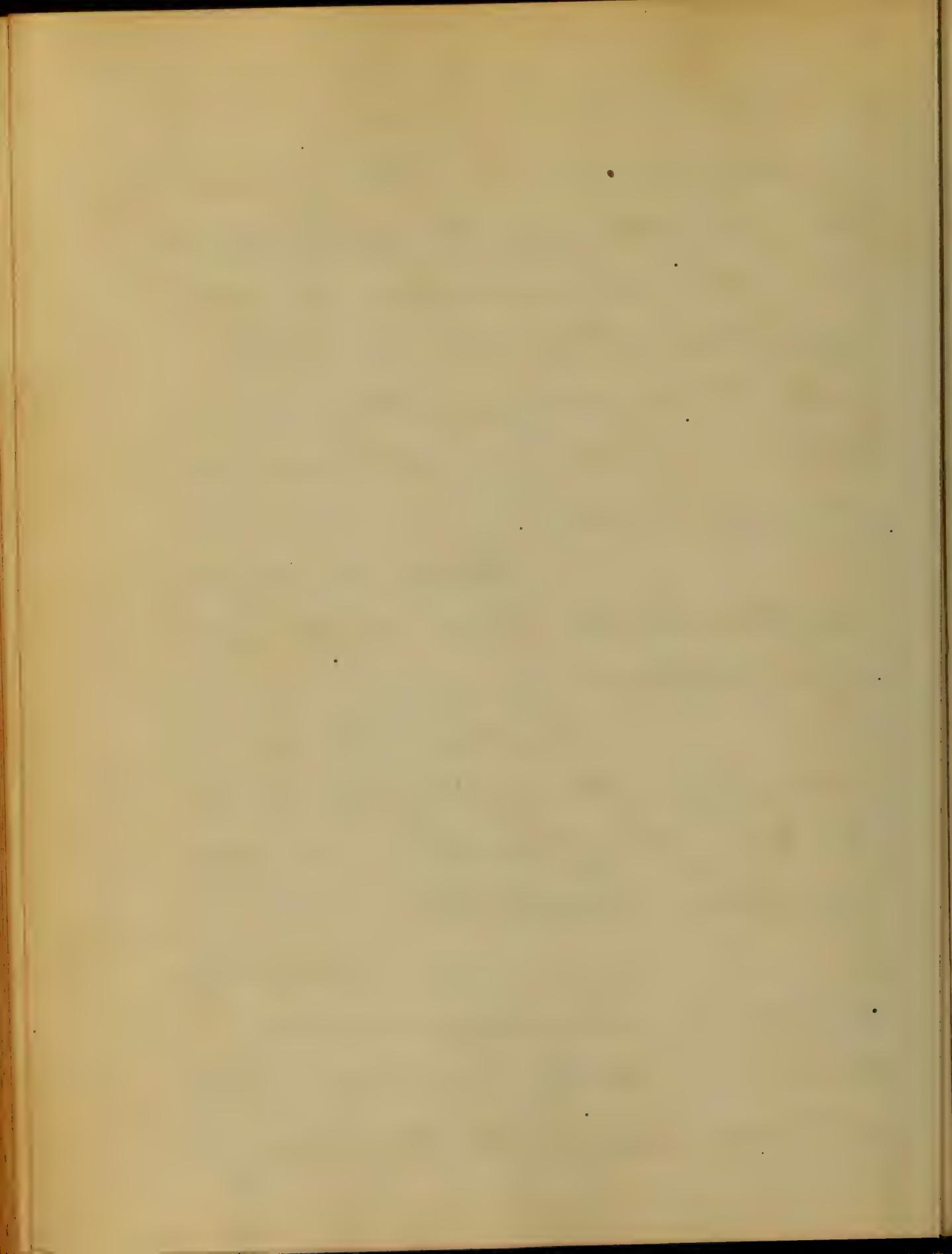


Viz. one of the humerus at the upper third,
 two of the radius near the wrist joint, and
 six of the radius and ulna, all at the
 lower third. Of these five were children
 under twelve years of age, the fractures of
 the radius and ulna, were all transverse
 and easily diagnosed.

Thirteen were Males
 and Ten Females. Fifteen Adults and
 Eight Children.

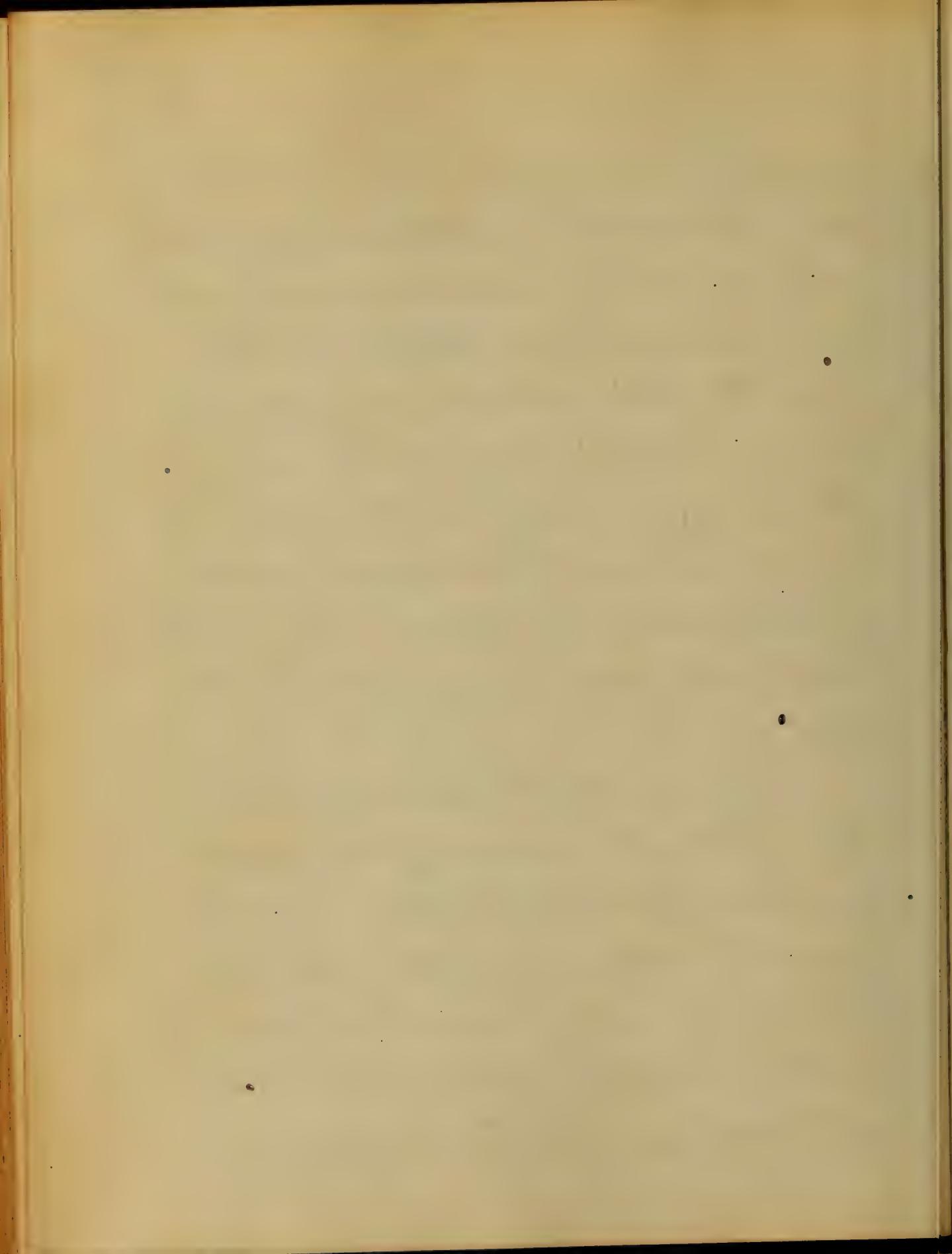
Fractures of the right
 arm seven. of the right leg ten, total 17.
 Fracture of the left arm two. of the left leg
 four, total 6. Grand Total 23.

These fractures
 occurred in various ways, every one of
 them accidentally, principally by falls.
 The treatment varied with the extent of the



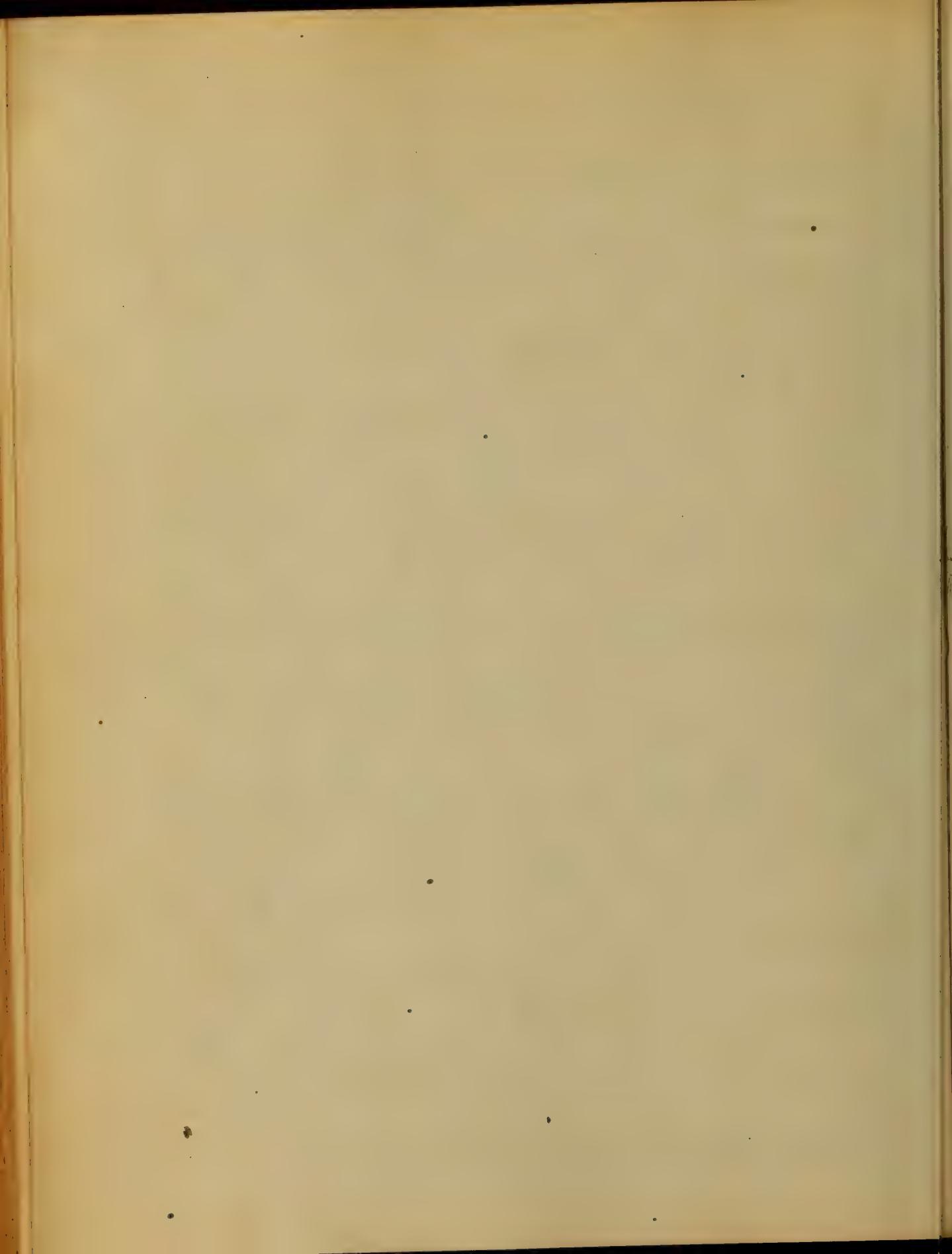
injury, in the subjects which I treated not one of them being constitutionally affected with any chronic disease, which might have produced some deleterious action upon the parts impaired, all of them being young with but few exceptions, and of the working class of people. Their vigorous physical health and strength made it a point decidedly in my favor. Consequently I met with great success in their treatment.

The only splints I made use of was Prof. N.R. Smith's anterior splint and the common, taste board splint, with the starched bandage. I would in every instance by the aid of an assistant have the parts, or ends of the fractured bone brought in as thorough an apposition as possible.



Then I would wrap a layer of bandage around the limb then follow with the plastic board, previously cut into shape, and soaked in water, immediately over the fractured part. Then follow that with a double or triple layer of bandage. If I would deem it necessary I would apply a coating of starch which would make it very firm and hard and keep it perfectly insitu. This I would leave on as a general rule from six to eight weeks never taking it off till I was perfectly satisfied that the bone had firmly united.

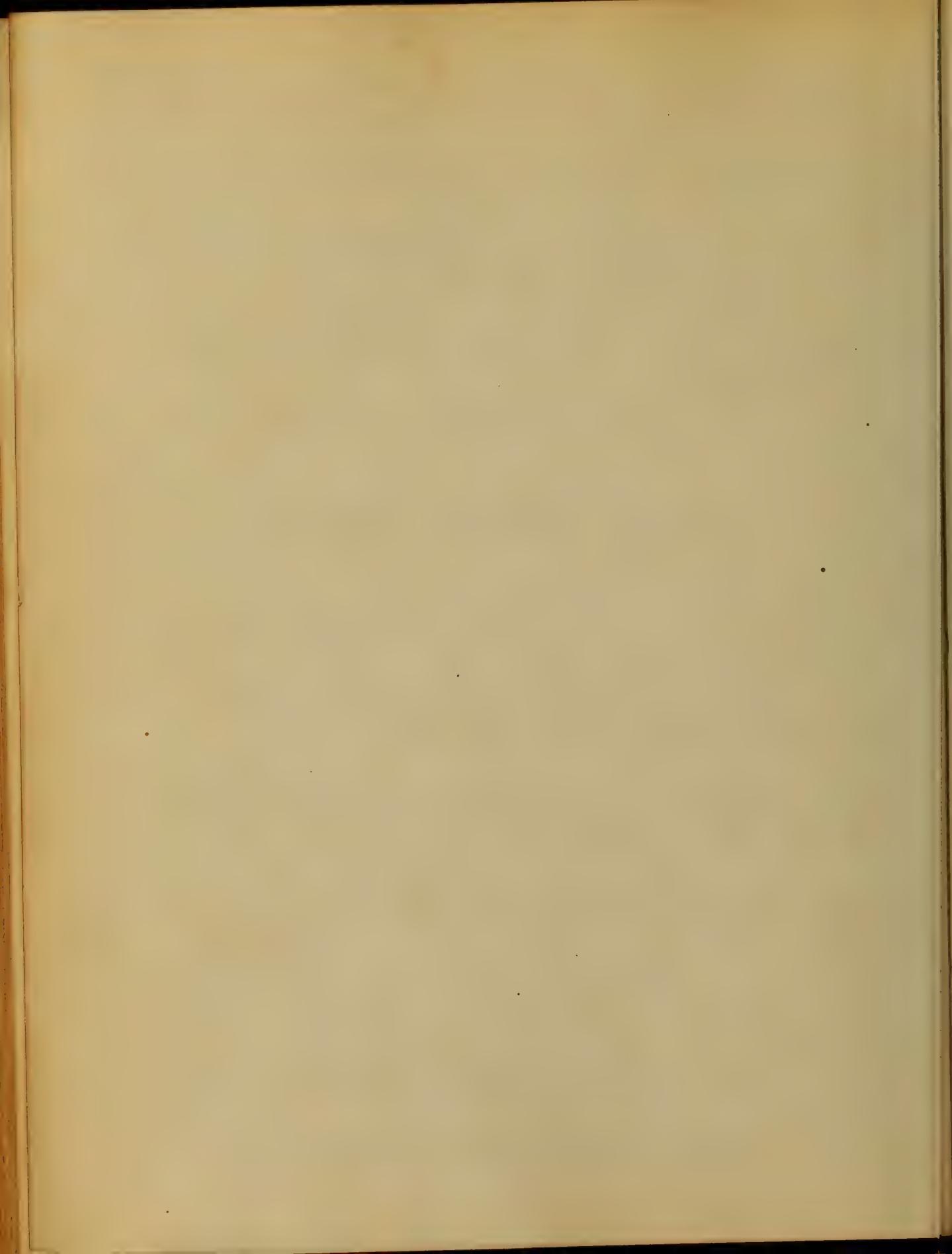
I never thought that it was necessary to bring Smith's anterior splint into requisition only when there was a bad break, and a long and tedious case before me.



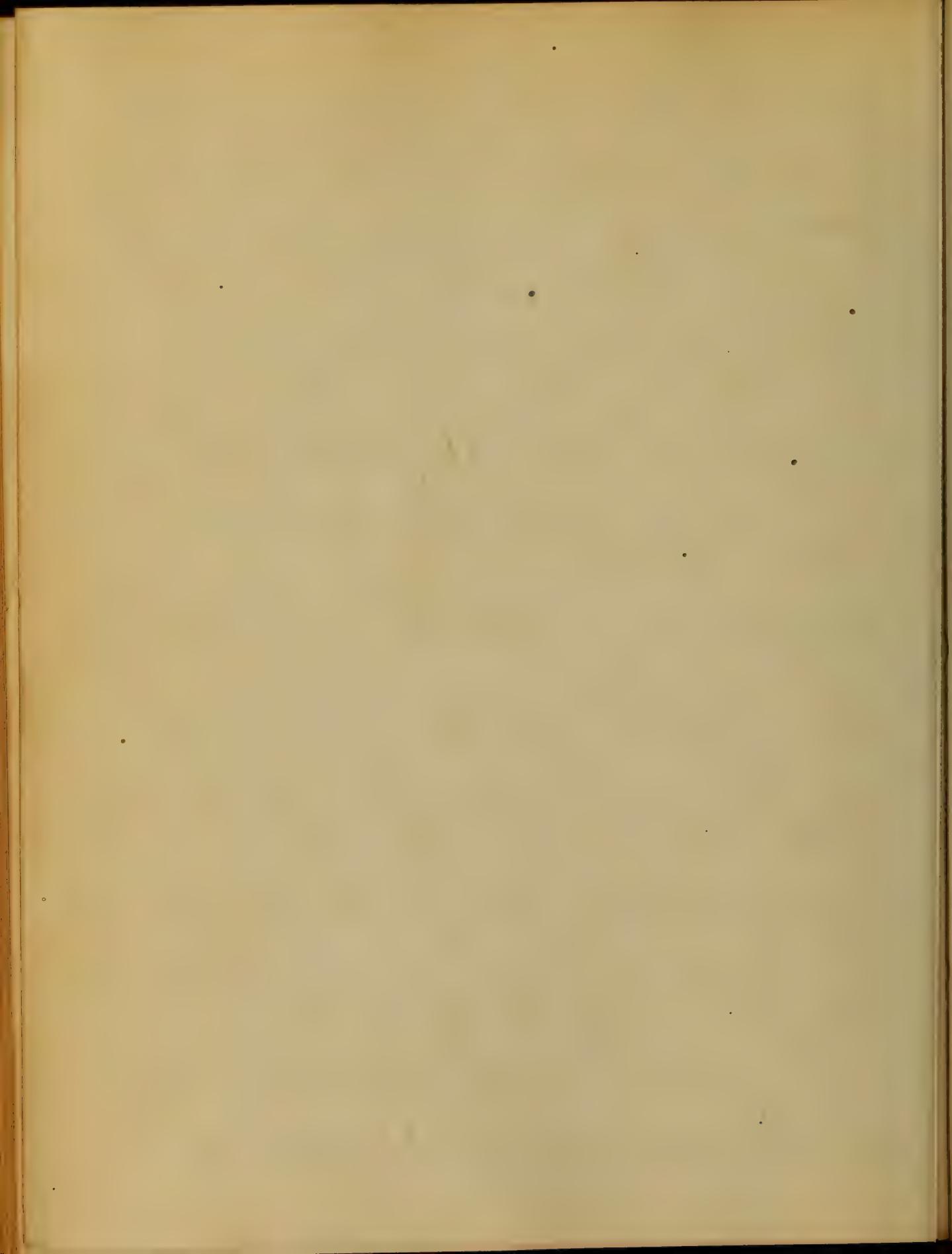
I have used it on several occasions where
the leg was badly contused and fractured
with very good results. The main reason
I suppose of its non universal adoption,
is - that it is not always at hand.

A Case of Opium Poisoning

July 11 1868 I was
suddenly called upon, during the absence
of my Preceptor to attend to a case of
poisoning. One T.C. age 42 a wagoner by
trade was supposed to have poisoned him-
self by taking into his stomach some
poisonous drug. I remember distinctly
the general appearance of the man when
I first saw him. The symptoms of the
case as they made themselves manifest

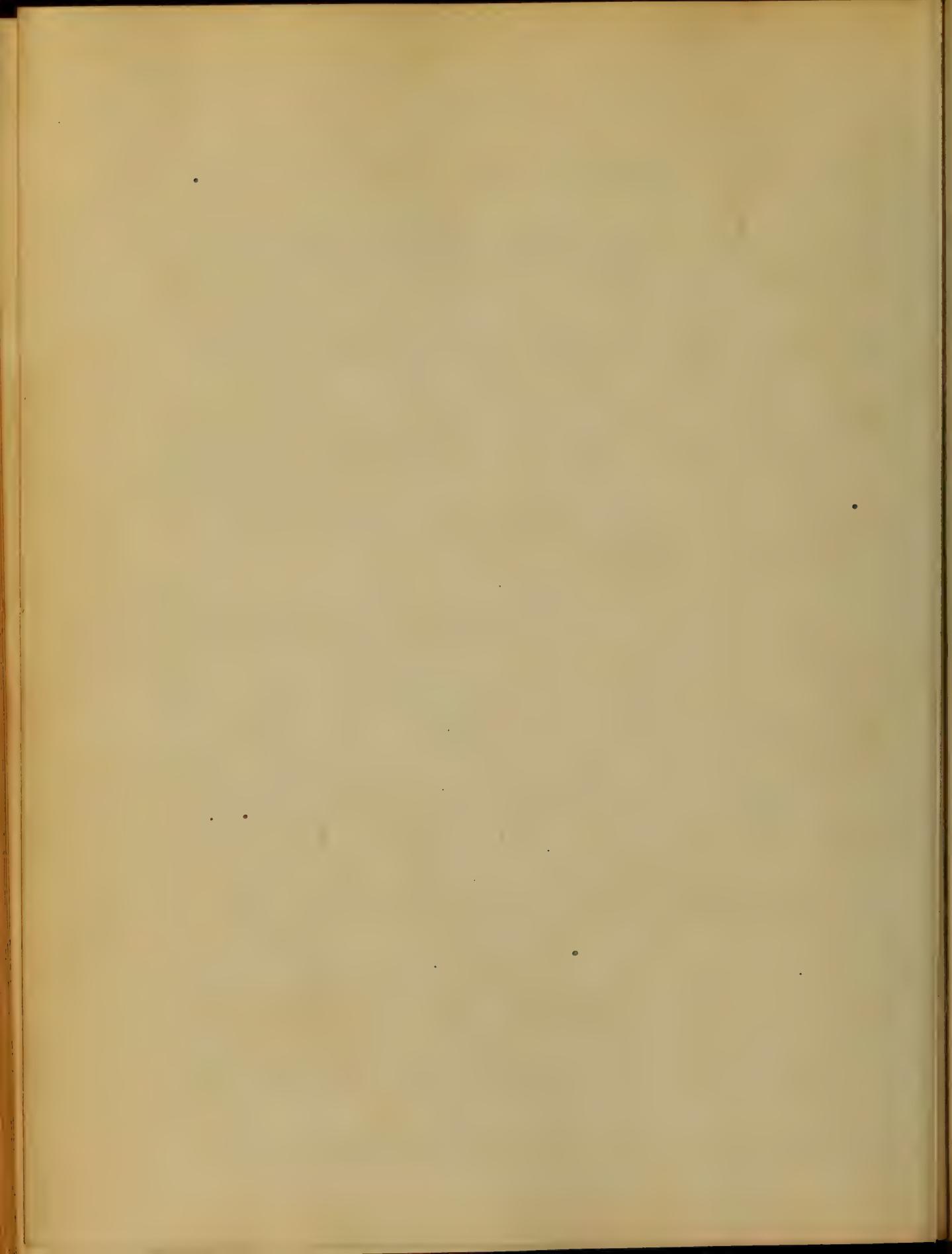


could easily be diagnosed as those of some strong narcotic. I was informed by some of his friends that he was seen producing a paper from his pocket, and swallow the contents of it. I saw the paper it had no label on but simply the inscription of Morphine. The quantity taken I could not ascertain, no one about the house knew that he had it; I suppose it must have been about two grains, do not think that less than two grains could produce such decided effects upon the system, I was also informed that he had been strictly temperate up to date, but through some cause he liberally indulged in strong drink this day, coming home very intoxicated, at a moment of despair or frenzy intended upon self



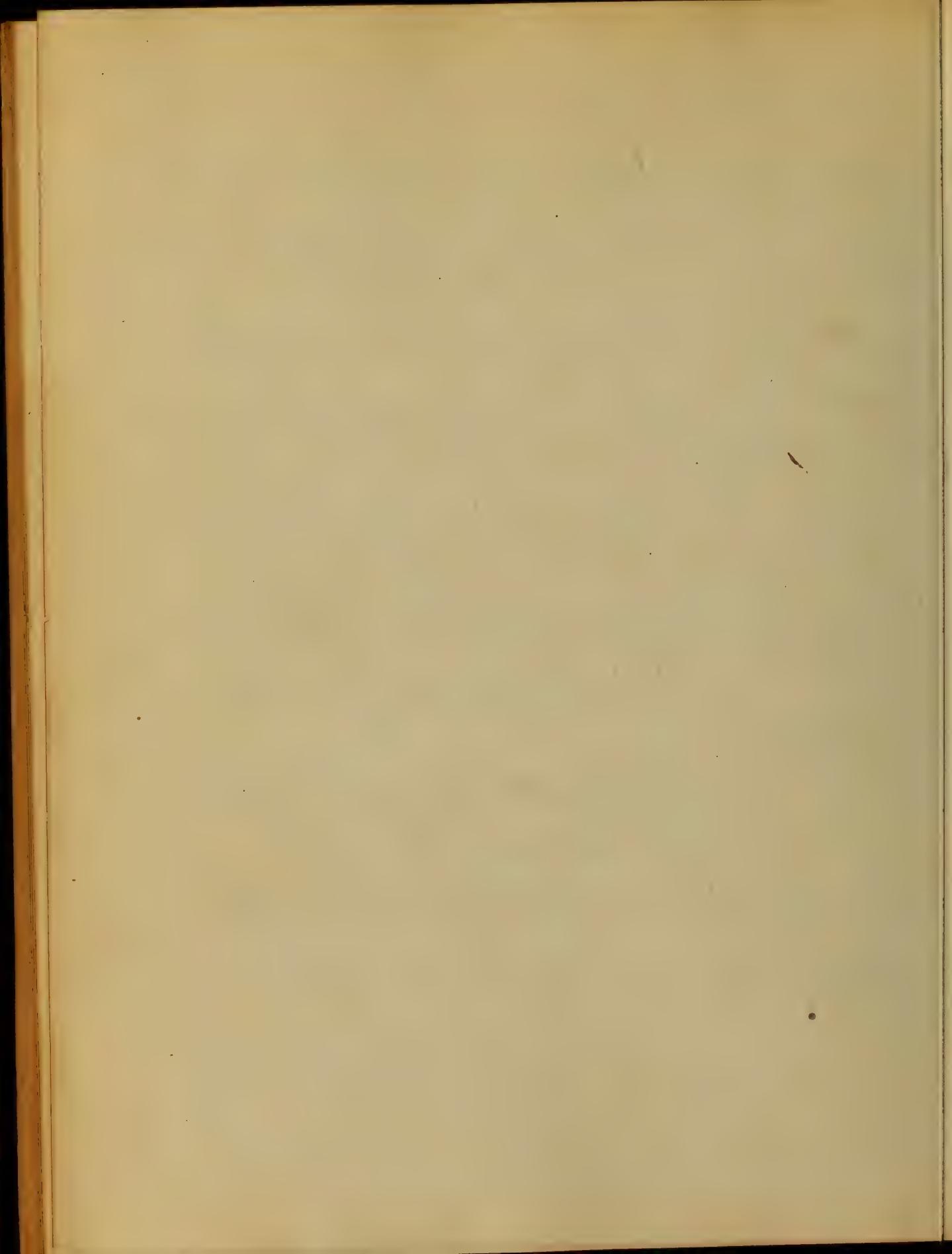
destruction. Often I saw him he was perfectly insensible to all surrounding objects, even to rough shaking and loud calling. The dashing of cold water in his face had or made but little impression. His ^{lips} were contracted, skin cold and clammy, pulse full and slow - respiration sterorous.

I had him placed upon his feet, and walked up and down the floor, seemingly with no benefit. Finally I succeeded in introducing the stomach pump, but could not get it work satisfactory, so I filled a good size syringe with a solution of Sulph. of Tinct, about $\frac{1}{2}$ ss. of the salt to the whole, and forced it through the pump into the stomach, which caused him to vomit.



quite freely. I then injected ^{0.1} subdermically a solution of atropia, % of again so the injection, which I repeated twice at an interval of half an hour, with marked success. He began to show symptoms of recovery, an hour and a half after. I first saw him. and at 11 O'Clock P.M. 3 hours after my first visit; he had sufficiently revived through the diligent application of the above remedial agents, to pronounce him out of danger.

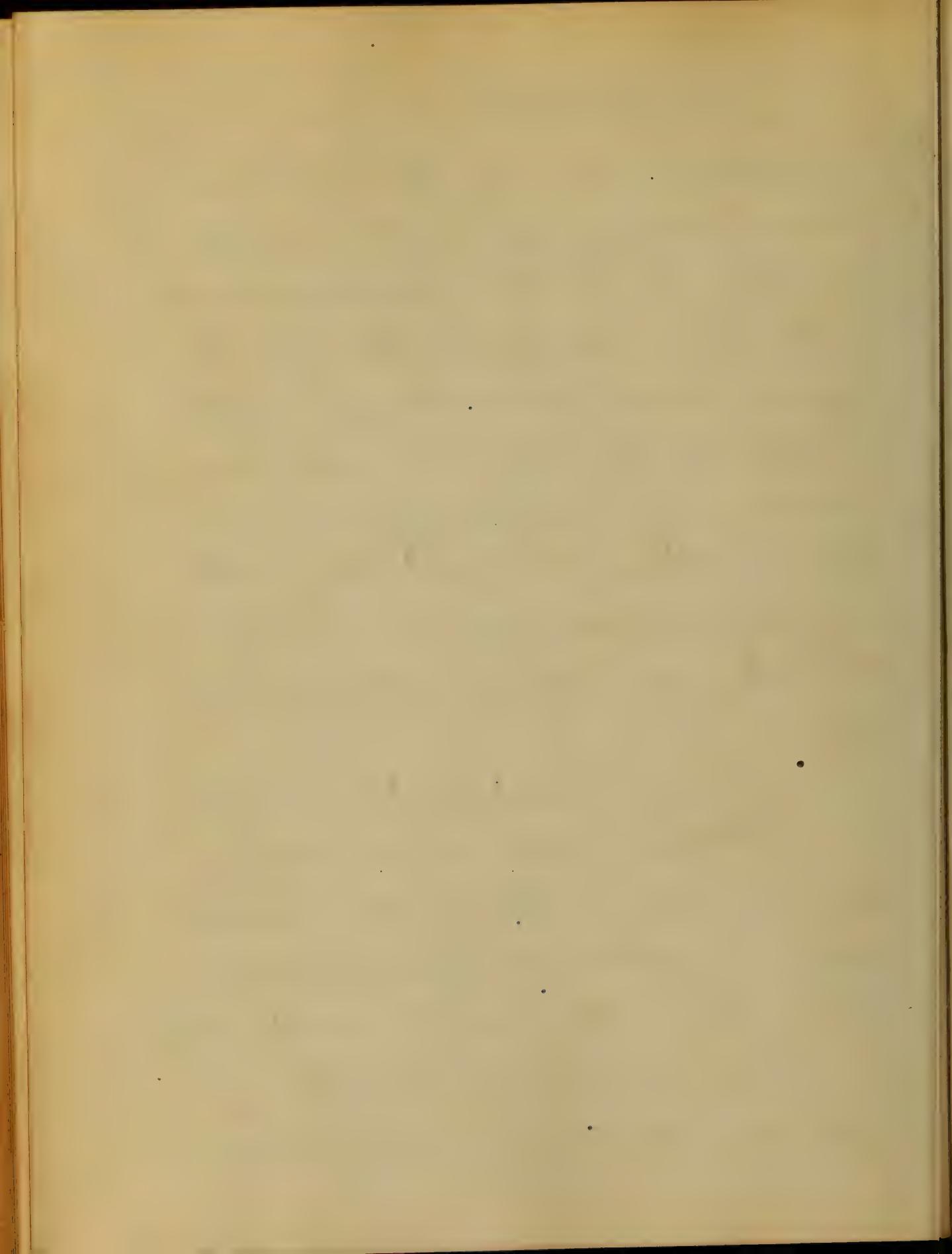
I attribute the success of this case to a great extent to the efforts of his friends, who worked with untiring zeal for nearly three hours.



Rubeola

I have seen during the summer and winter of 1867 & 8 - 20 cases of measles. The children who were attacked by Rubeola usually passed through the regular course of the disease with scarcely any deviation. The rash as a general rule made its appearance at the usual time, the fourth day, with all the forecurse symptoms, such as the watery eyes sneezing and languidness. Etc.

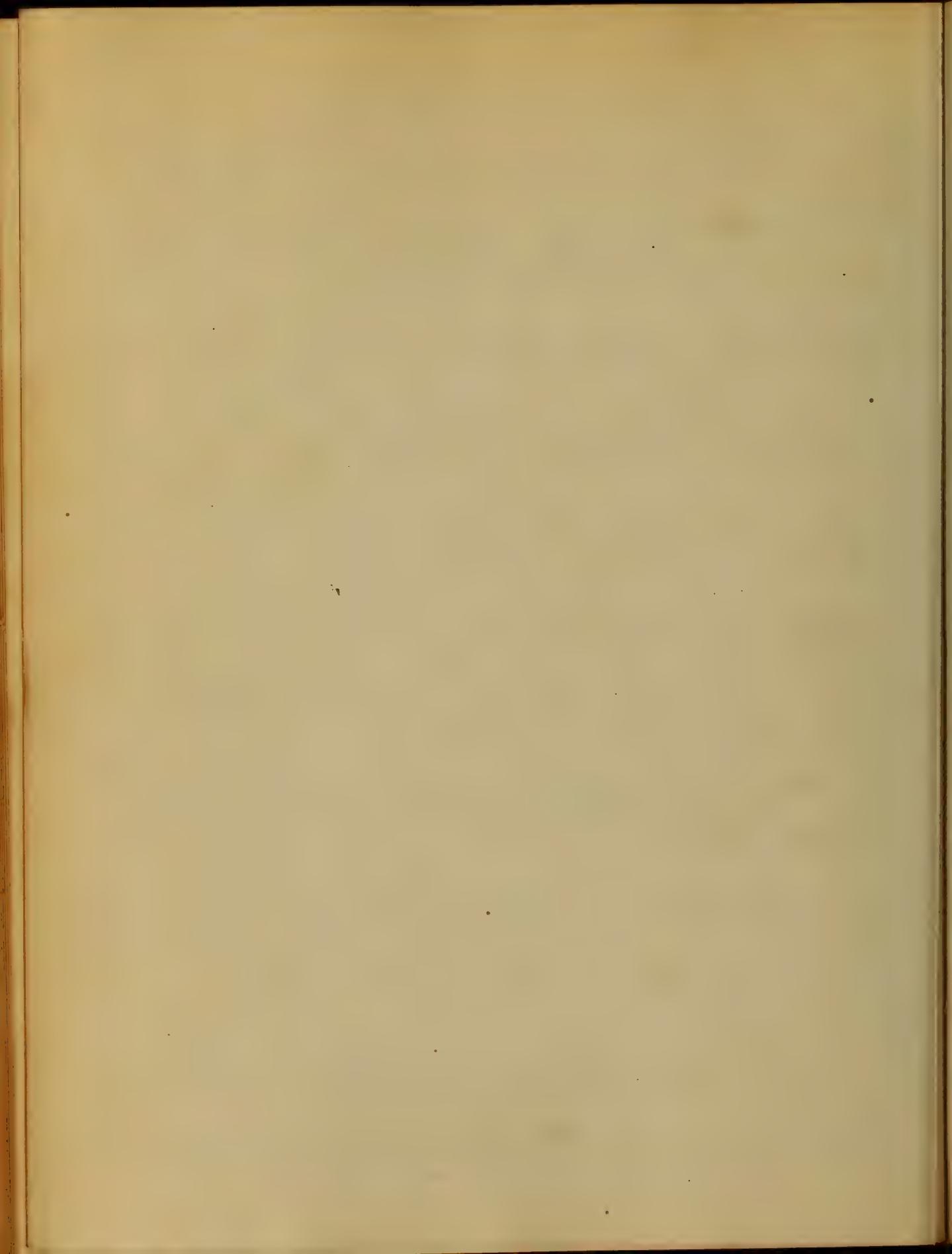
If the rash made its appearance in a bright pink colour we would have but little trouble in treating the case, would simply regulate the diet. If constipation intervened, would administer a mild laxative, and if fever, would give a mixture of Sp. Aether. Sibi. Lig. ammon. acelutis. ynnuk



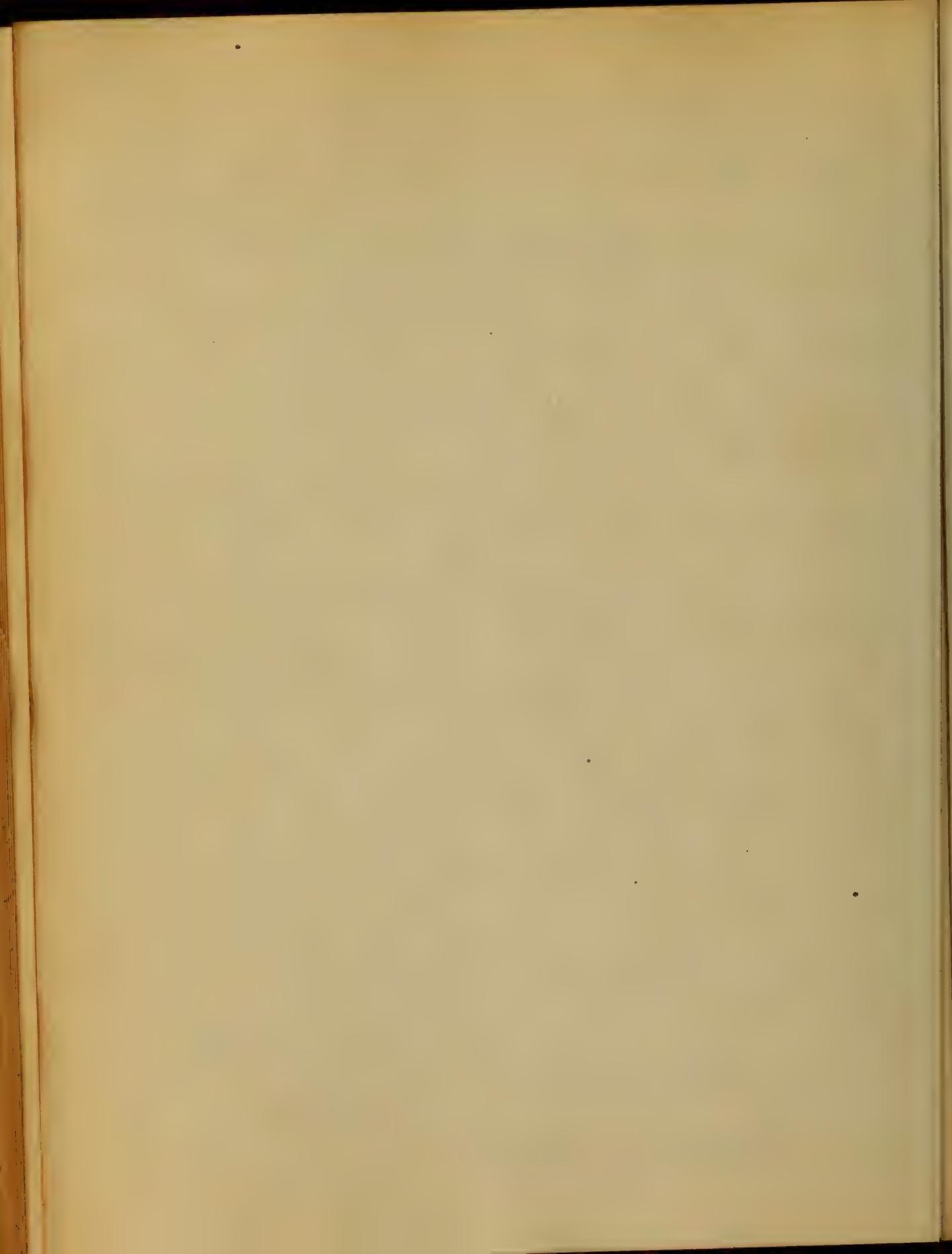
Ipecac or Yecillae, with very good effect. Frequently the chief symptoms were Cough and Diarrhoea; and they were generally ameliorated, by giving Tinct. Opii Camph. and small doses of Sub-nitrate of Bismuth and Pill. Ipecac. Ext Opii. alone or in combination. At times would add Potassa Chlorat to allay inflammation of the fauces, and mustard or mustard poultices externally to the chest, which would often be beneficial. Under this course of treatment I would meet with the happiest results. The children as a general rule, would make good their recovery in about 8 or 12 days.

I

I also distinctly remember five cases which differed from the other group in many respects.



These Children would be taken with all
the precursory symptoms of Rubeola.
The rash would make its appearance
about the fourth day, or a day later but
very scanty, and the colour of the rash
or eruption would assume somewhat a
leather colour. Skin dusky hot and dry,
continually rolling of the head, very cross
and sometimes stupor. Frequent dysenteric
stool with severe straining. Out of the five
cases three had prolapsis ani caused by
the severe straining. Also excoriation of
the mucous membrane of the nose, with
the scattered appearance of an eruption
resembling small boils, which would in-
flame and sometimes subpurate, not with-
active inflammation, but seemingly of a
slow smouldering nature.



In this condition in spite of the application of popular remedial agents, the patient would gradually sink and die.

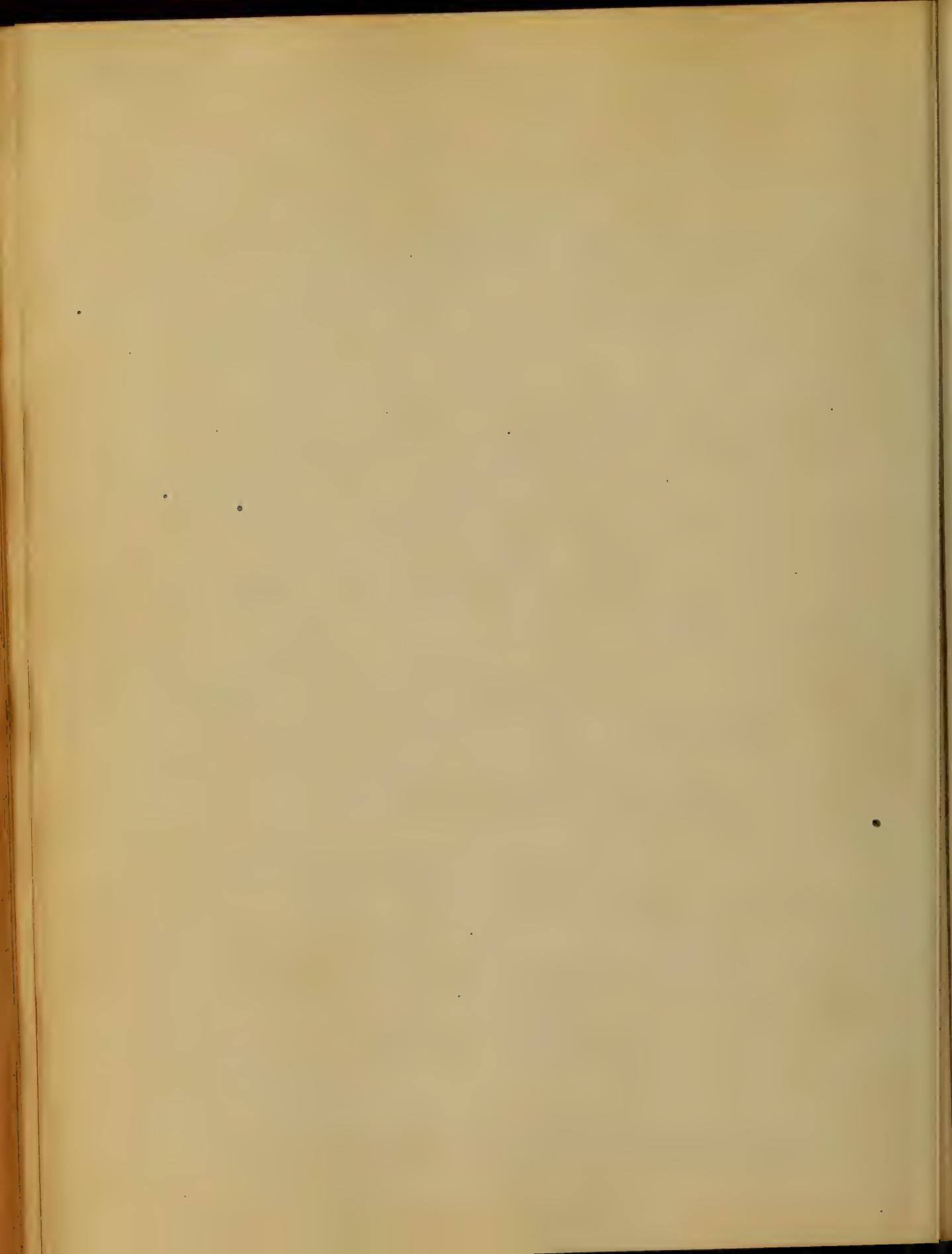
These

aggravated symptoms I would only meet in children who their parents could not obtain sufficient healthy food; and who were greatly exposed to the vicissitudes of the weather.

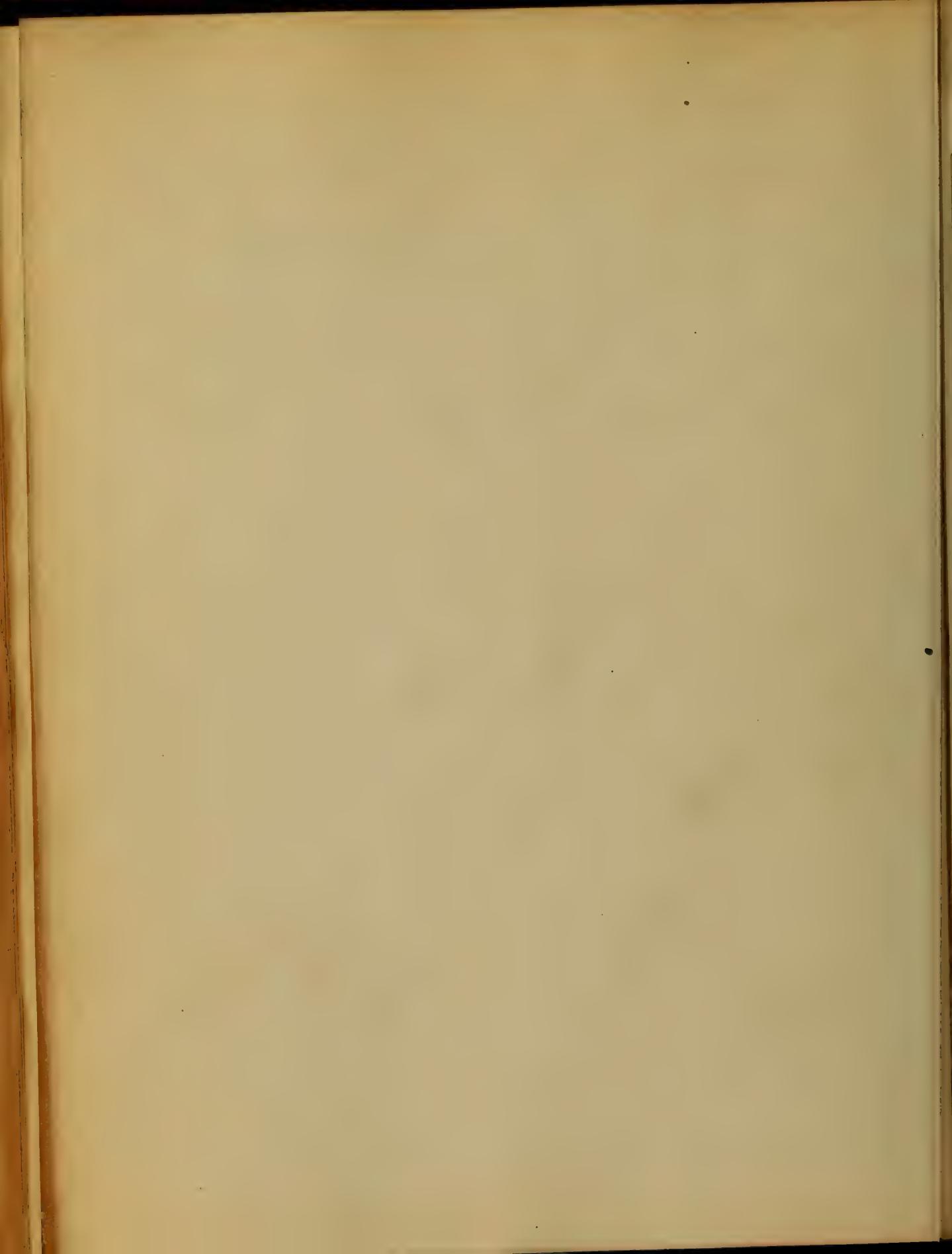
The treatment which I adopted in these cases was principally supporting, with no apparent benefit. The deleterious treatment I could introduce as the patient was generally too prostrated; with the impoverished condition of the blood, made me hesitate to do otherwise than support the system.

All in all

it resembled a typhoid or rather typhus -



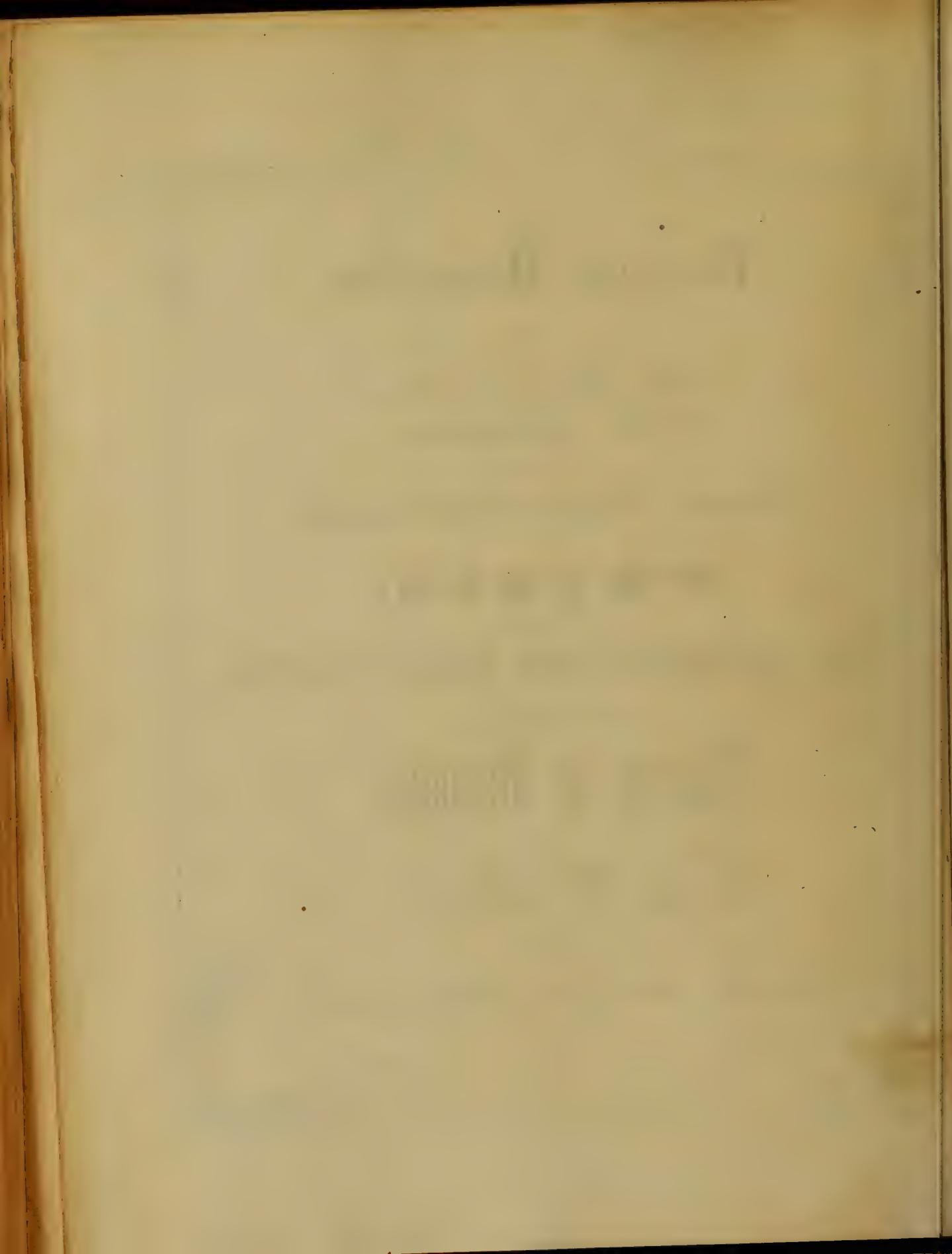
condition of things more than any other disease I know of, a peculiar fetid odor with the accumulation of sores about the teeth, was one of the most characteristic of this low type of fever.



A N
Inaugural Dissertation
ON
Asphyxiation
Submitted to the Examination
OF THE
Provost, Regents and Faculty
OF
P H Y S I C,
OF THE
UNIVERSITY OF MARYLAND,
FOR THE DEGREE OF
DOCTOR OF MEDICINE,
By
George L. Bell
of
Carroll County Maryland.

Session of

1867+68

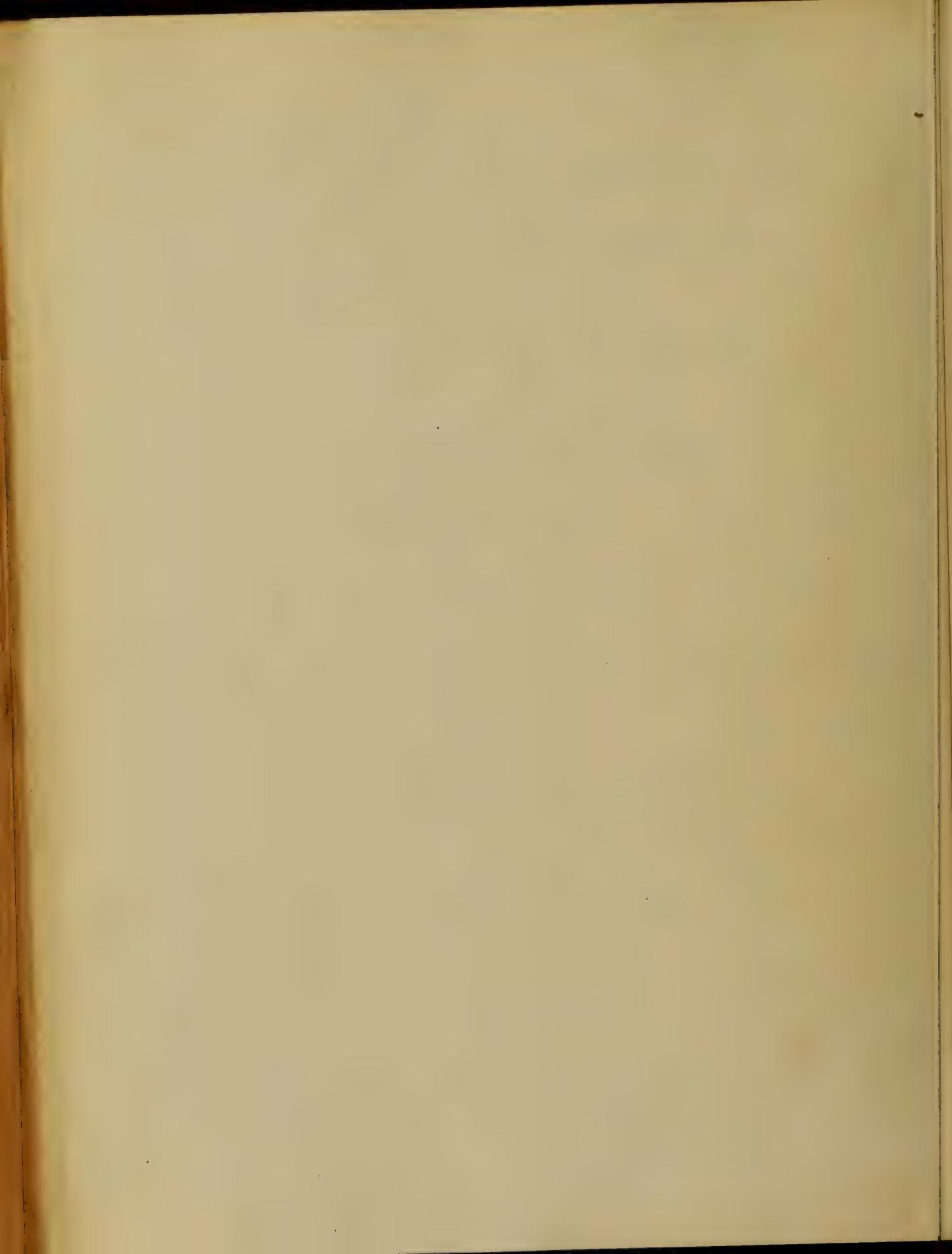


A Treatise upon
Inflammation

by
George W. Bell

Hampstead, Carroll Co.
Md.

Feb. 12th 1868



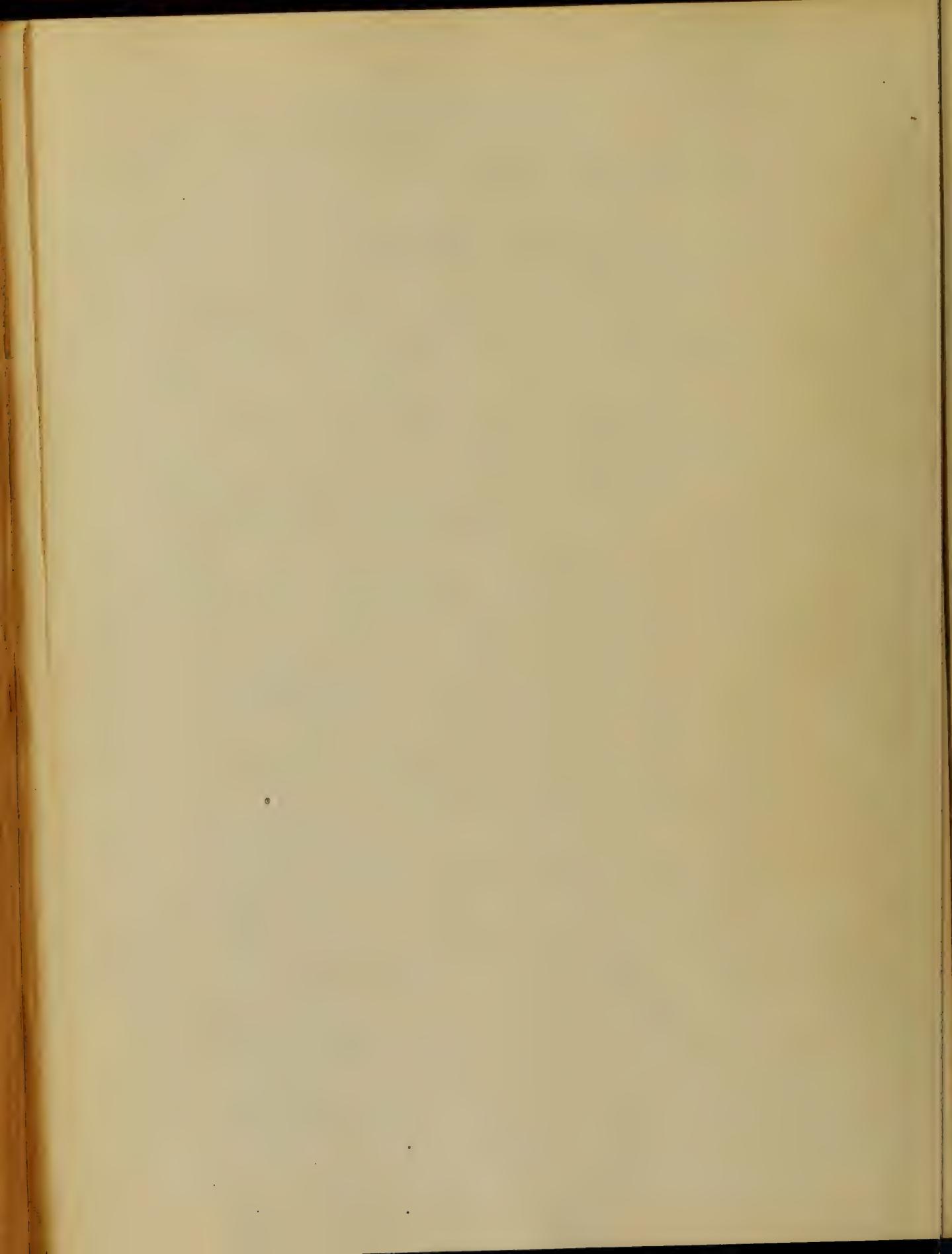
Inflammation

Acute and Chronic

Inflammation may be defined to be a state in which there is a tendency to an acute or chronic disease, and accompanied by increased vascularity and sensibility; or to be a perverted condition of blood and blood vessels of a part involving its healthy function and its normal structure; or better still local depression of nutrition; Ordinarily attended with redness, pain, heat, and, swelling.

Causes and Symptoms

It is liable to inflammation, and, next to fever, this is the most important



Wicks

is surrounded with foliage which

is very dense and thick.

The ground is covered with

small shrubs and trees.

The soil is very poor and

the plants are not very

large or healthy.

Costly Rd is more

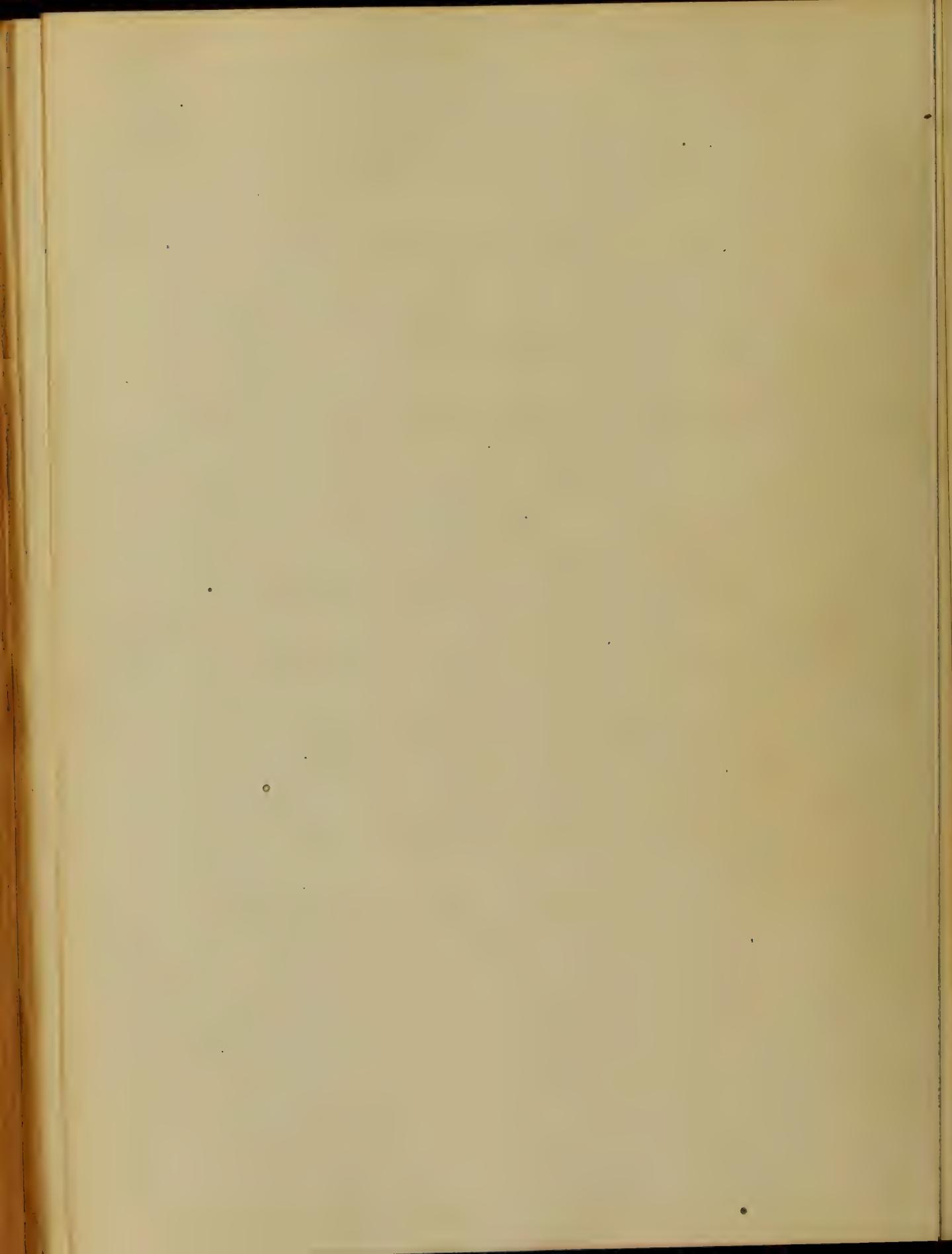
open and less dense than

the Wicks Road.

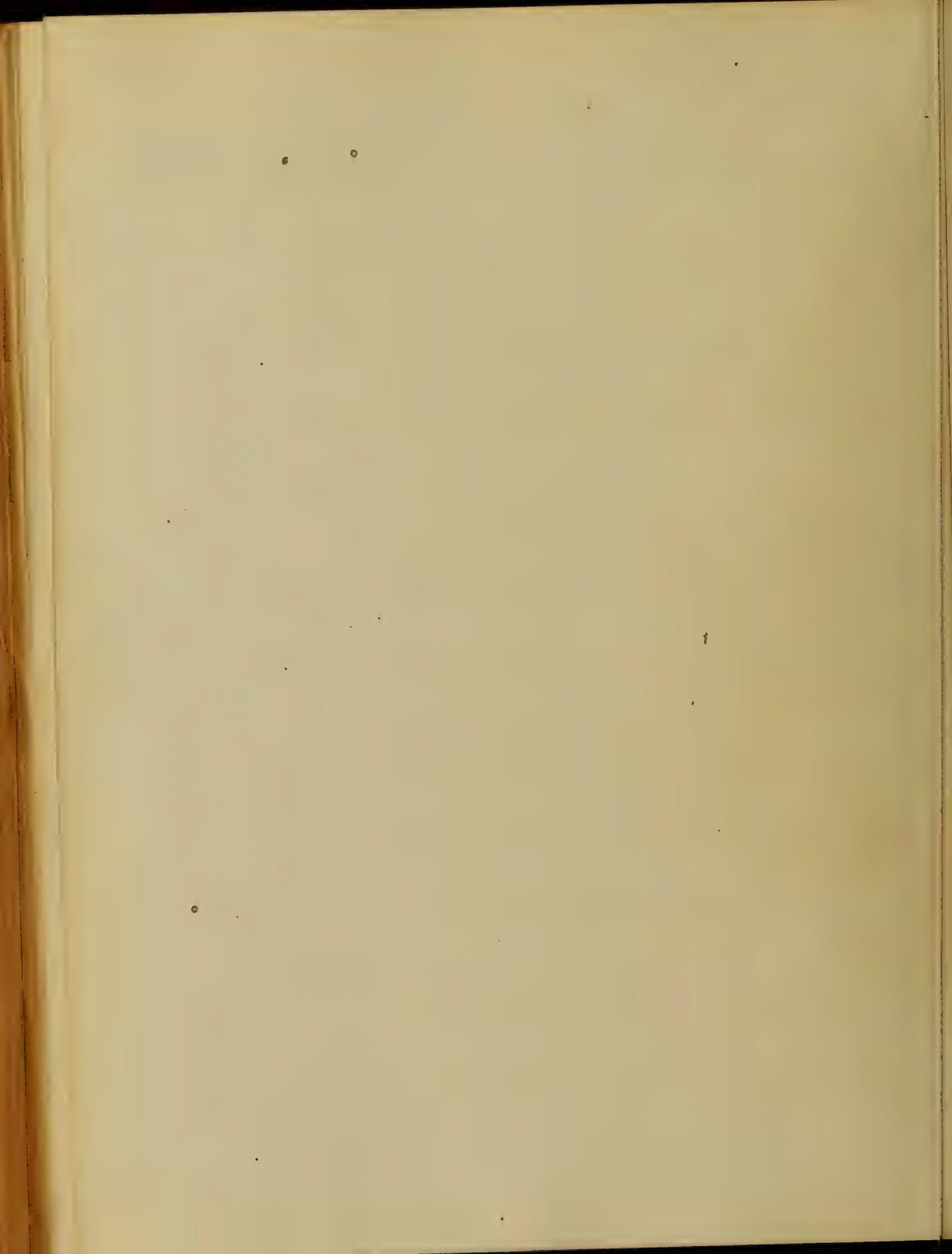
The soil is better here

and the plants are larger

and more healthy.



denotes $\rho_{12} \approx 0$



In the night

and the next morning

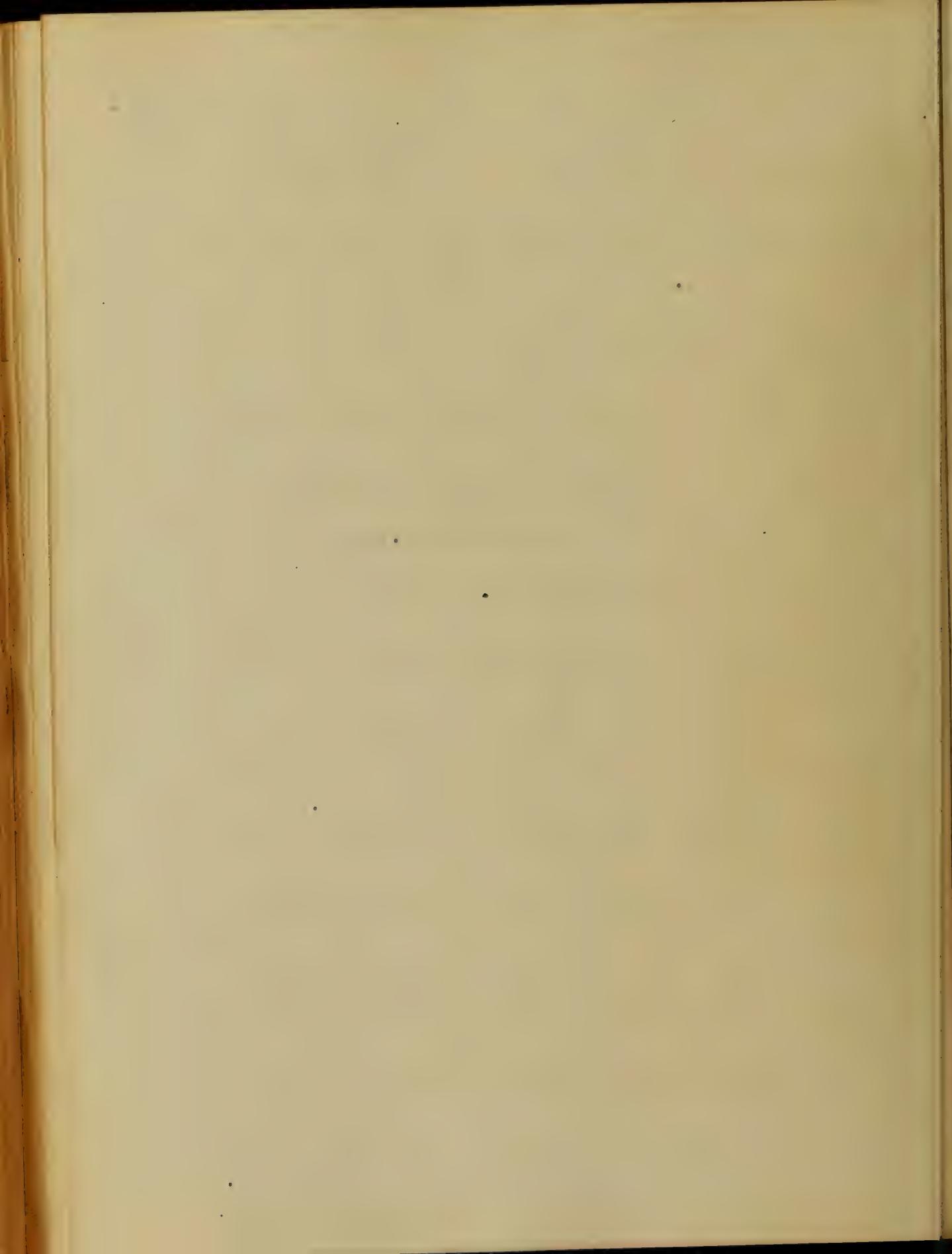
the cutaneous ulcers require inflammation
between the divided parts; in

which is effected by what surgeons call "union by the
first intention"; i.e. union without suppura-
tion, or inflammation.

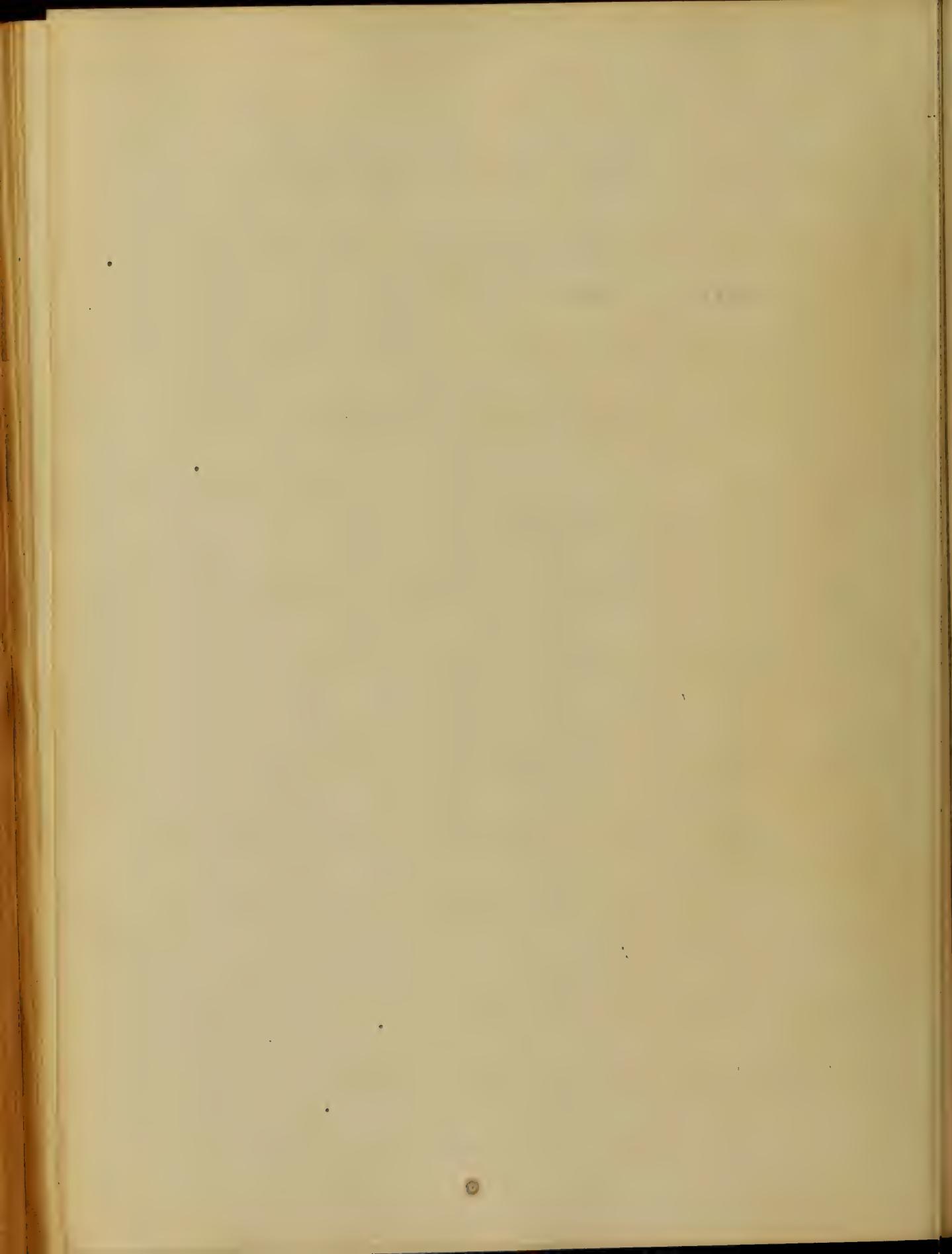
It will be seen that the
anticipated by the knife

will sever the dead and necrotic part
from the sound. If abscesses form in any

of the dead skin, they may
run to the external surface of the skin,
which they always tend to do,



and the blood vessels; so
that it is easily understood
that whatever organ is affected, it
instance becomes adherent to the walls of the
bowel on the one hand, or
easily disengaged from them on the other; and that the
degree of adhesion will depend upon the
how moderate in degree and limited
it becomes, or conversely by
the greater the extent of the adhesion the
more difficult it is to separate the
two parts, and the more difficult it is to
separate them without injury to either.



nature, the surgeon

to control and direct and direct the

care, and there being in a great degree a
want of care. It is not because

of the want of care, but because

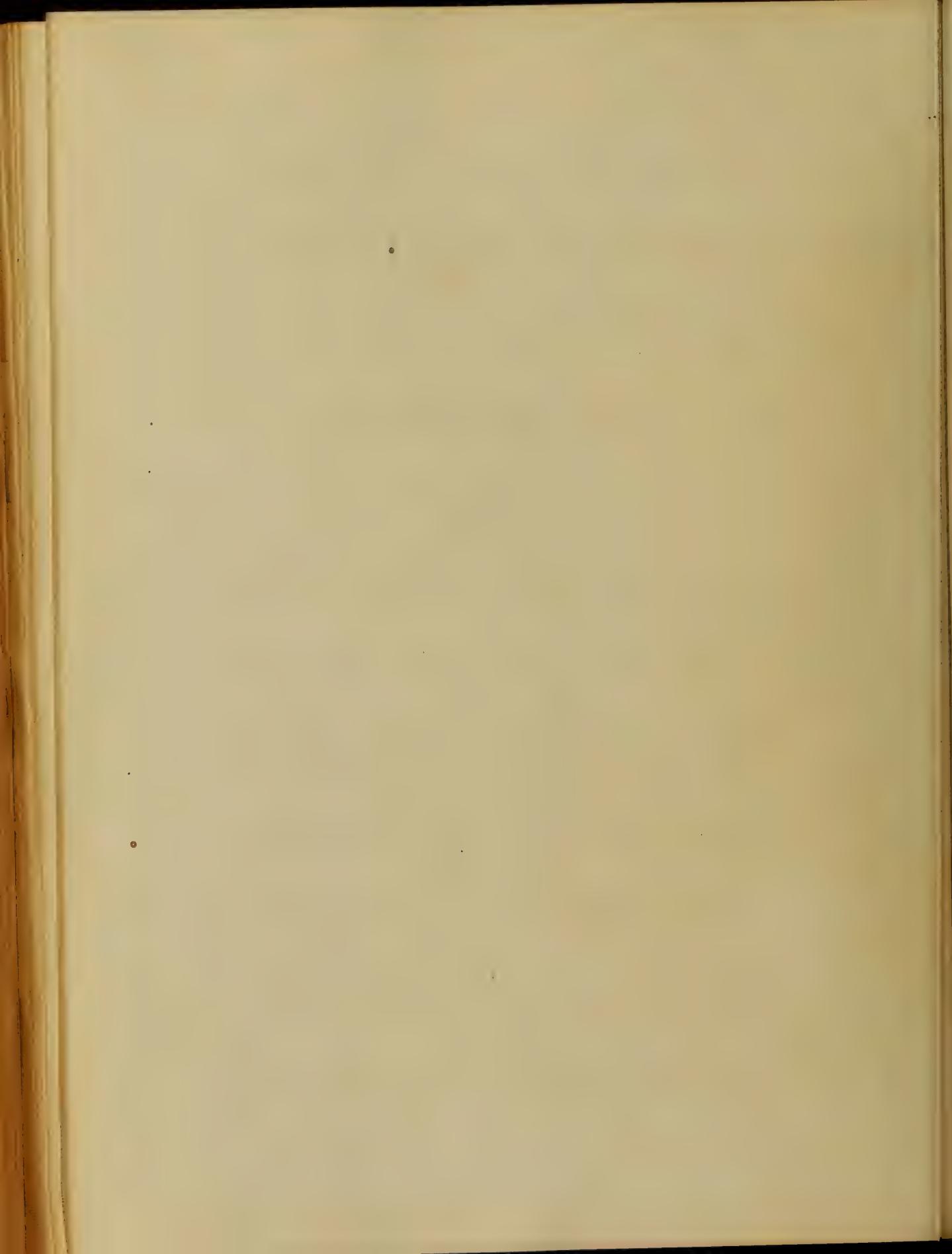
the want of skill.

The water of a hydrocele,

excites inflammation of the tunica vaginalis,
whereby its cavity is obliterated, and
the accumulation of fluid rendered impo-

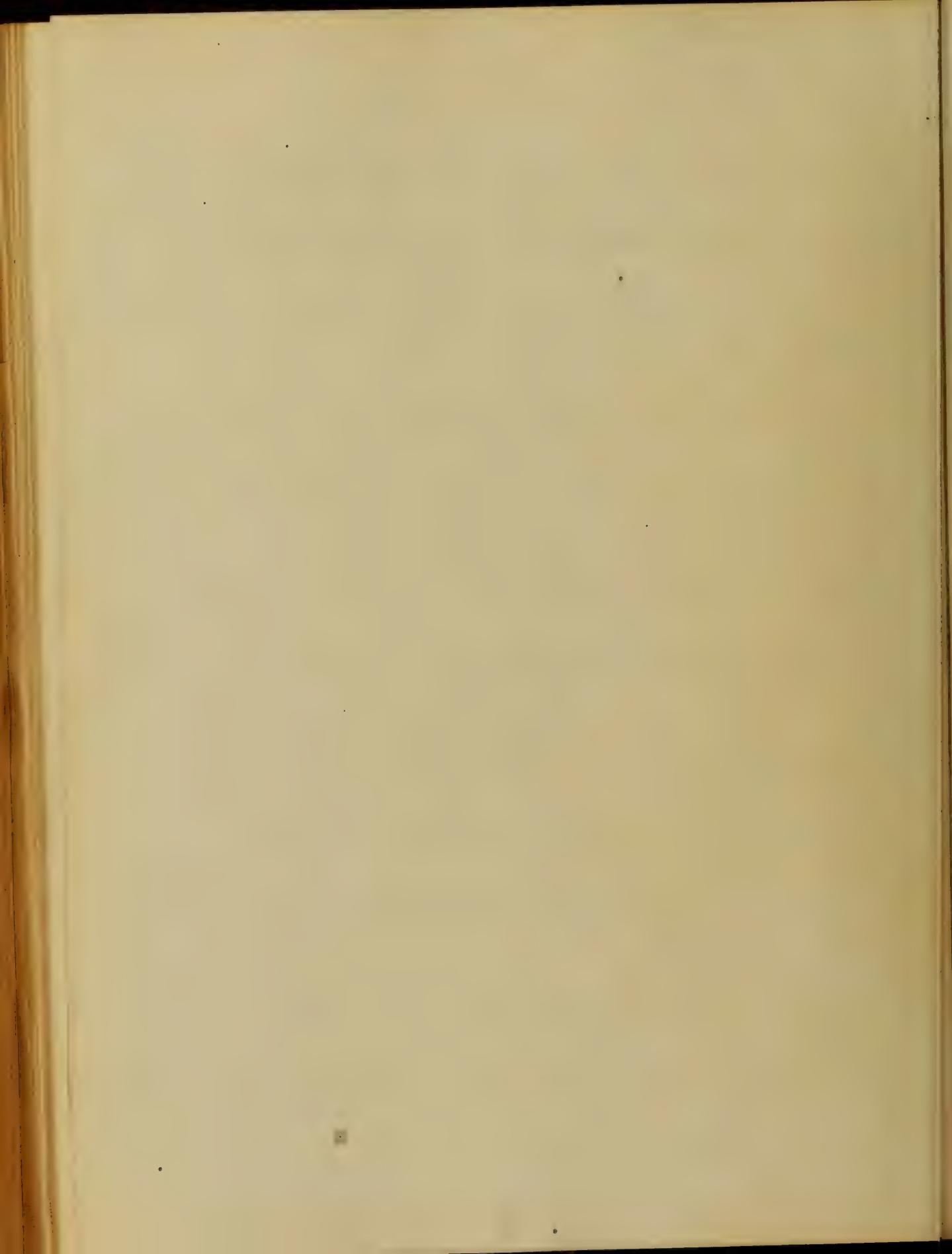
ssible. He is enabled to remedy many afflic-
tions in the same life.

He has also a very
desirous to do so.



it is to set up some or other
instance such as tuberculosis.
This it is that has ever since
given place to the following
statement of disease that is
of less in every respect a high
interest, with a prospect to
No definition, or general description
can be made to embrace all the forms
of inflammation, presents
first become recognized, so
with symptoms, and as it displays
itself in disease.

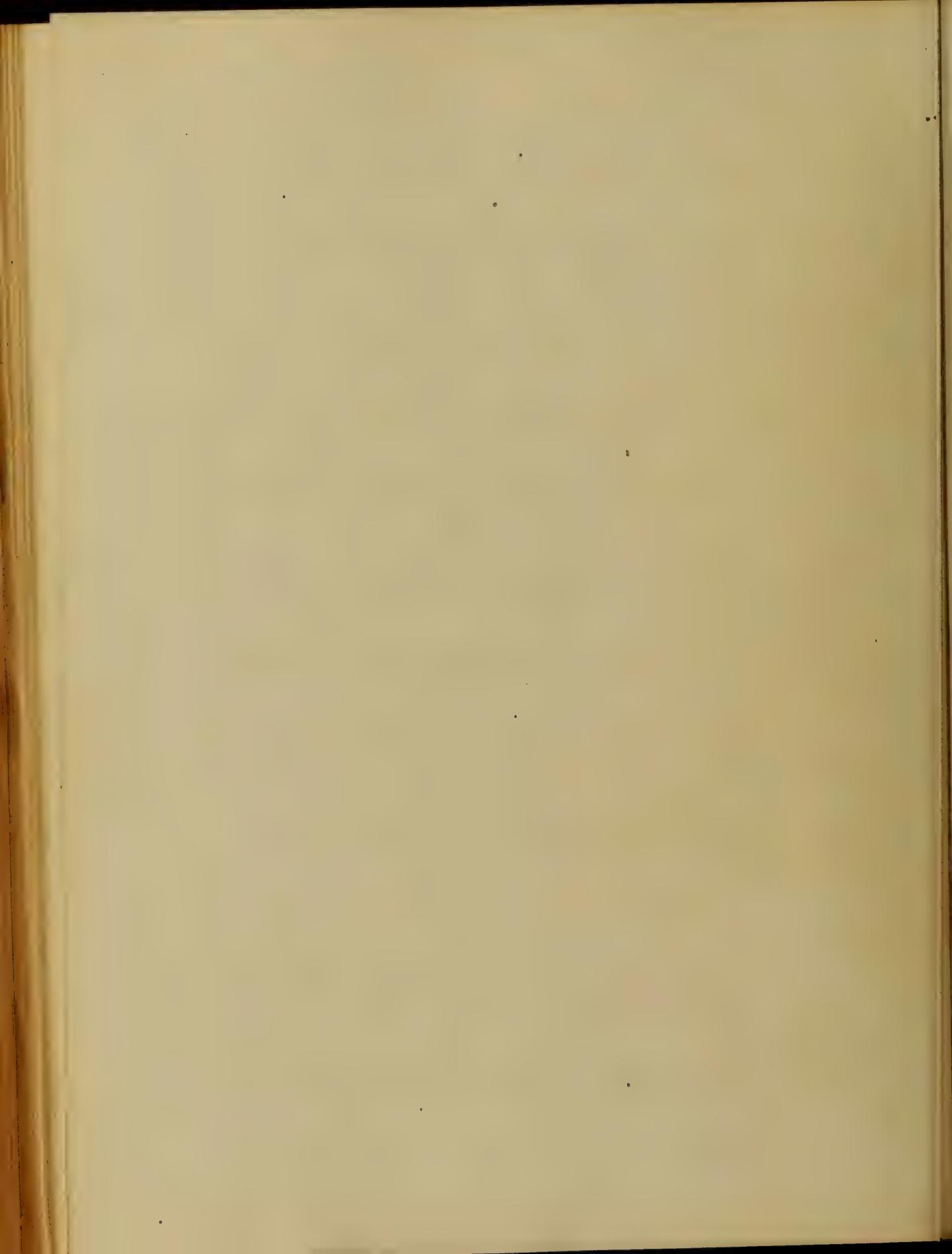
These will be given in
as they exist together



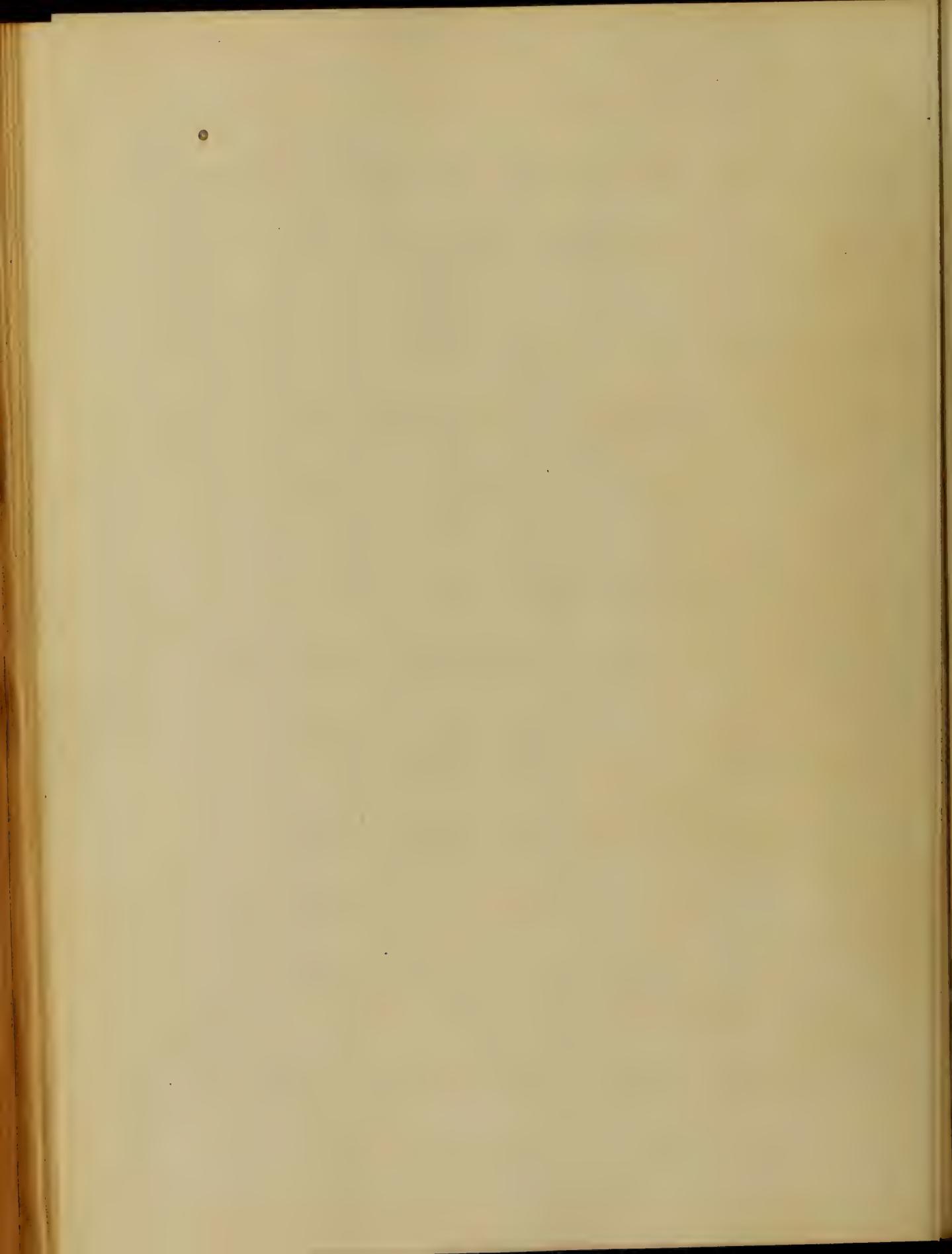
Possible signs

and symptoms of disease
being observed and studied are many:
not any one of them can be taken
as a sign of disease, but their
combination will indicate the presence
of inflammation, or disease,
or painful from distension. The signs
of disease may be external or internal.
The breast may be swollen
with a great accumulation of
milk. To determine how far each
symptom is to be considered
as a sign of disease, it is
necessary to consider the
whole disease.

The whole disease of the breast
itself will be better known
when the signs of disease are
more fully understood.



At some time a sense of pain is felt in
it which is soon succeeded by
heat and swelling. The swelling increases
the skin loses its natural color, and becomes
of a bright red. In the immediate
neighborhood of the part affected it is
warm and hard, and exquisitely tender: whi-
ch parts at some distance are soft and slight-
ly painful. The heat and tenderness shows
that inflammation has begun in the
part. If it reaches the skin, there will
be other signs of disorder, such as



at a distance now.

17. 9. 1870. -

succeeded by

the next day. When

we got the water, we

at dry and parched latitude

and temperature

still we had to go on

like, parched mouth, great thirst and

various diseases. After a while

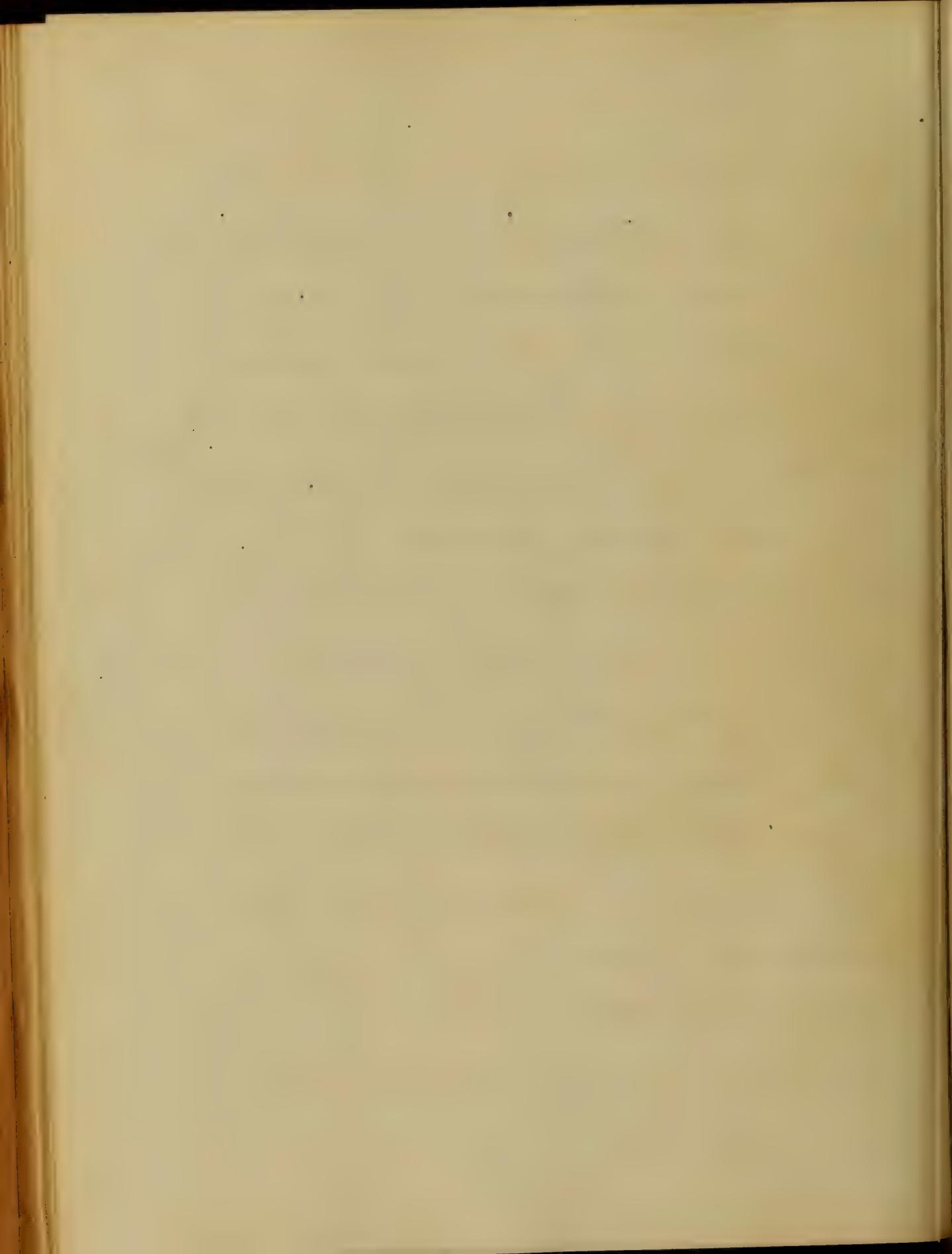
he is unfit for any mental

unable or unwilling to eve

niently. I do not know if he

manifests itself throughout the

time; so he to me.



memories, over 2000 we.

the mind, and the body

employed for substance

but which may be the cause of

the disease, or the cause of the

malady, is often difficult to determine.

It is, however, the result of either

pain, or fatigue, or want of

energy, the heat decline, and the loss

of appetite, which affect all the

usual functions and natural appearance.

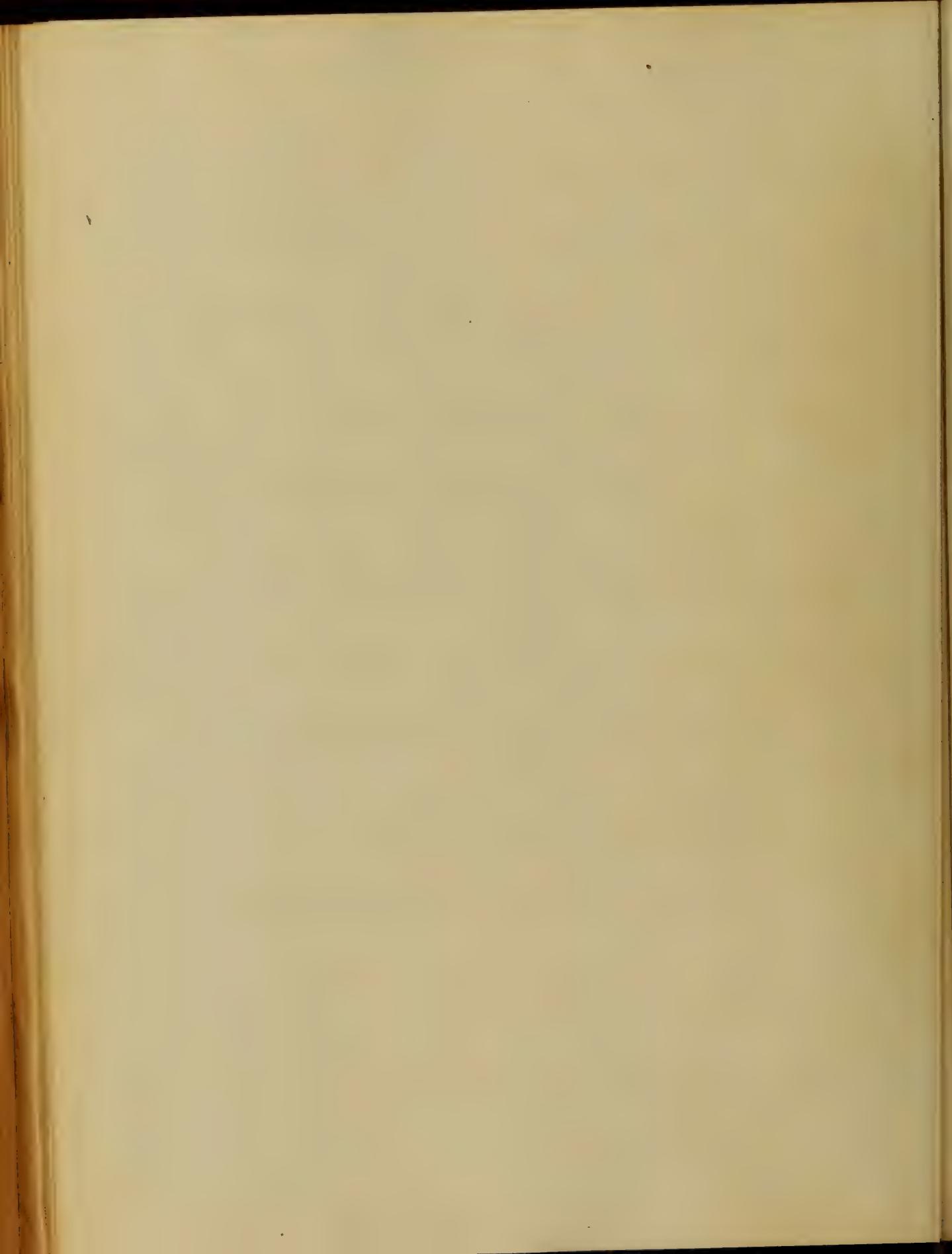
It is sometimes, which is the case with

liver and heart, the result of a

long continued disease, or

long continued debility.

It remains a cause of



original severity of

the disease, and the patient is often
cured. Then the above described symptoms
begin to appear: the skin becomes
red, the veins become distended, and the
skin, instead of a smooth, white, and obscure
color, becomes red, and the skin is observed
to shrink at the same time. It loses
its former density, and becomes soft; there
is throbbing pain in the part: a pulsative
sensation, synchronous with the action.

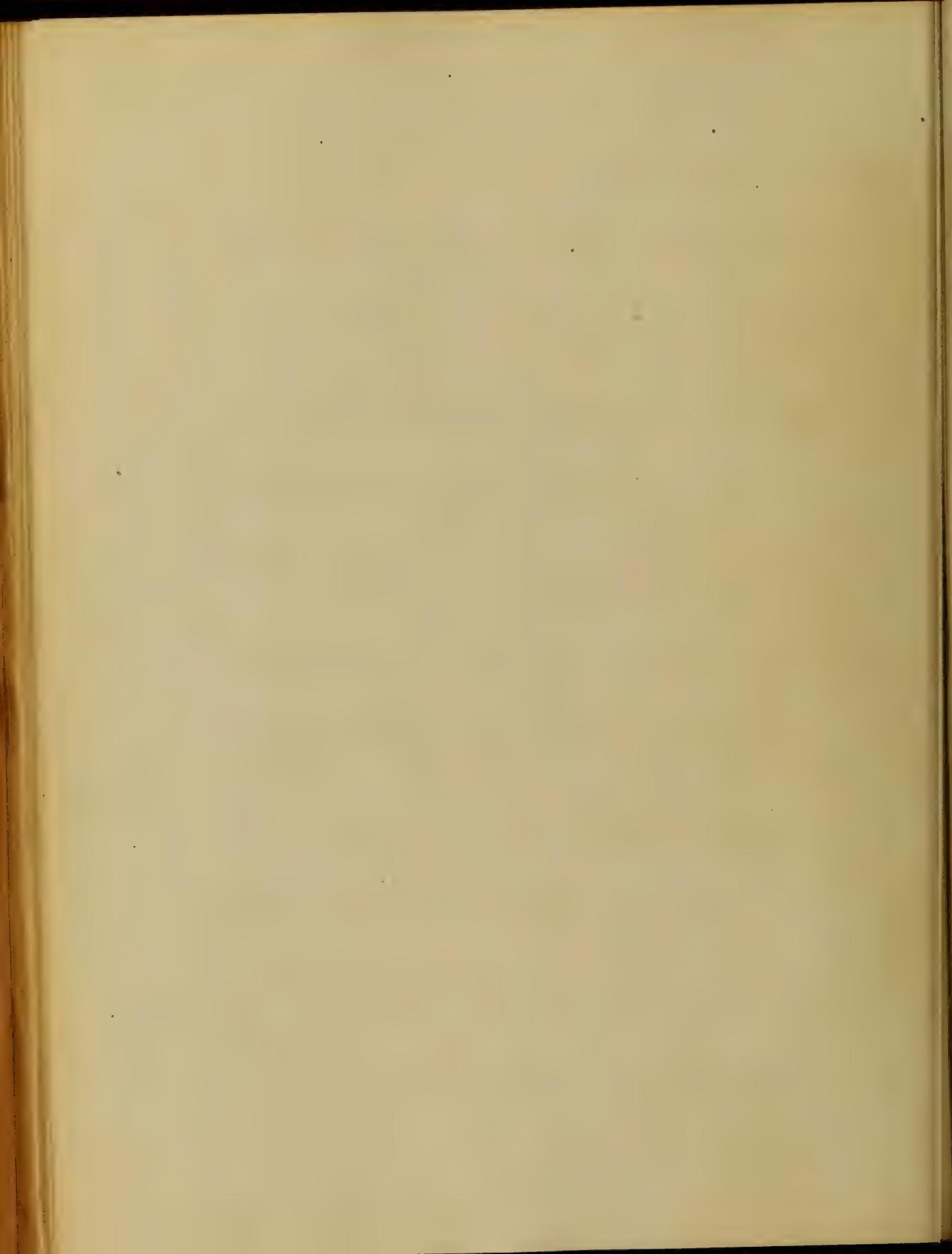
The last stage is the suppuration of

the sore, which follows the appearance of the

itch, and the suppuration.

Place purulent matter

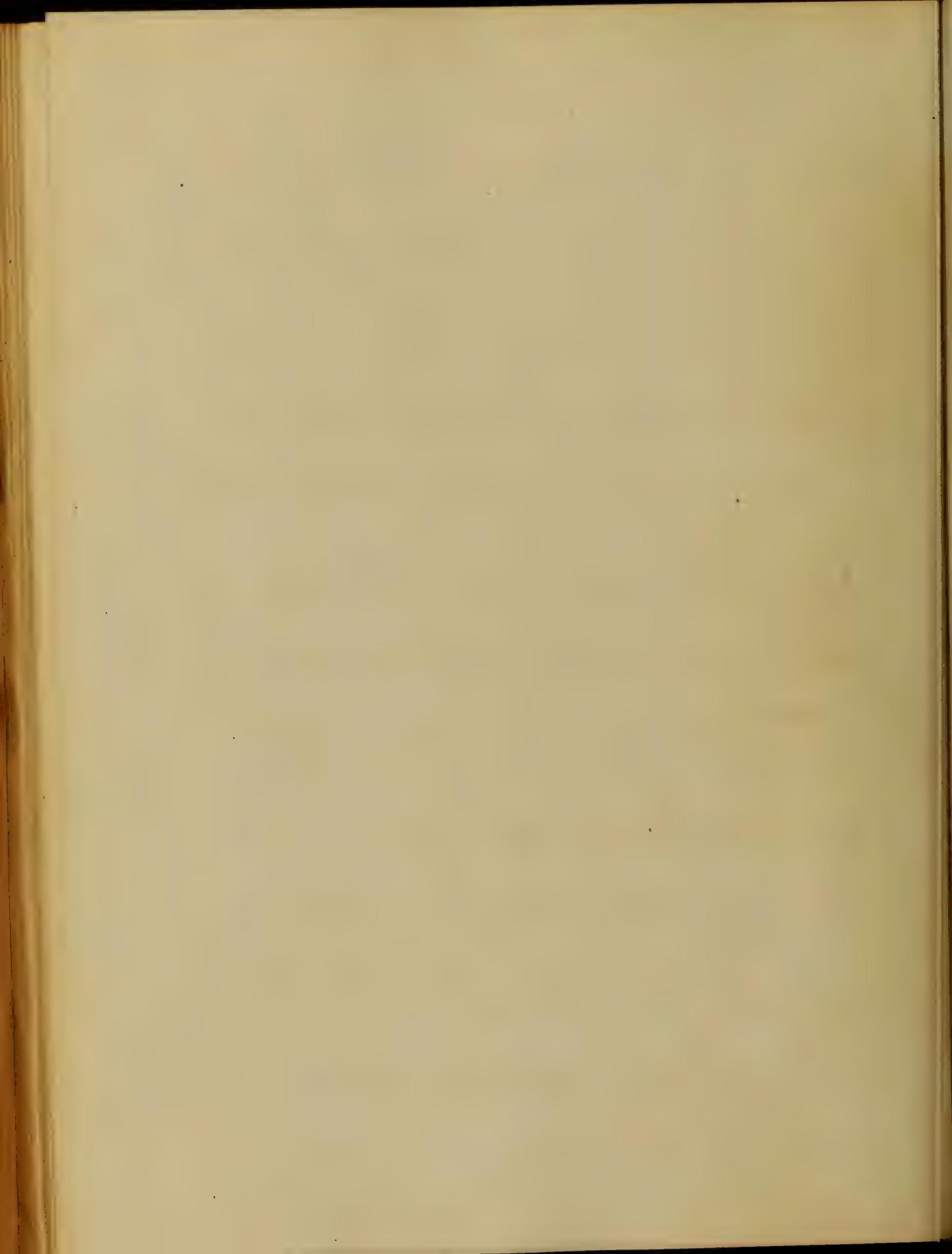
upon its escape there ^{is} generally a



considerable and speedy abatement.

The symptoms of inflammation by
uniting thus it is called suppuration.

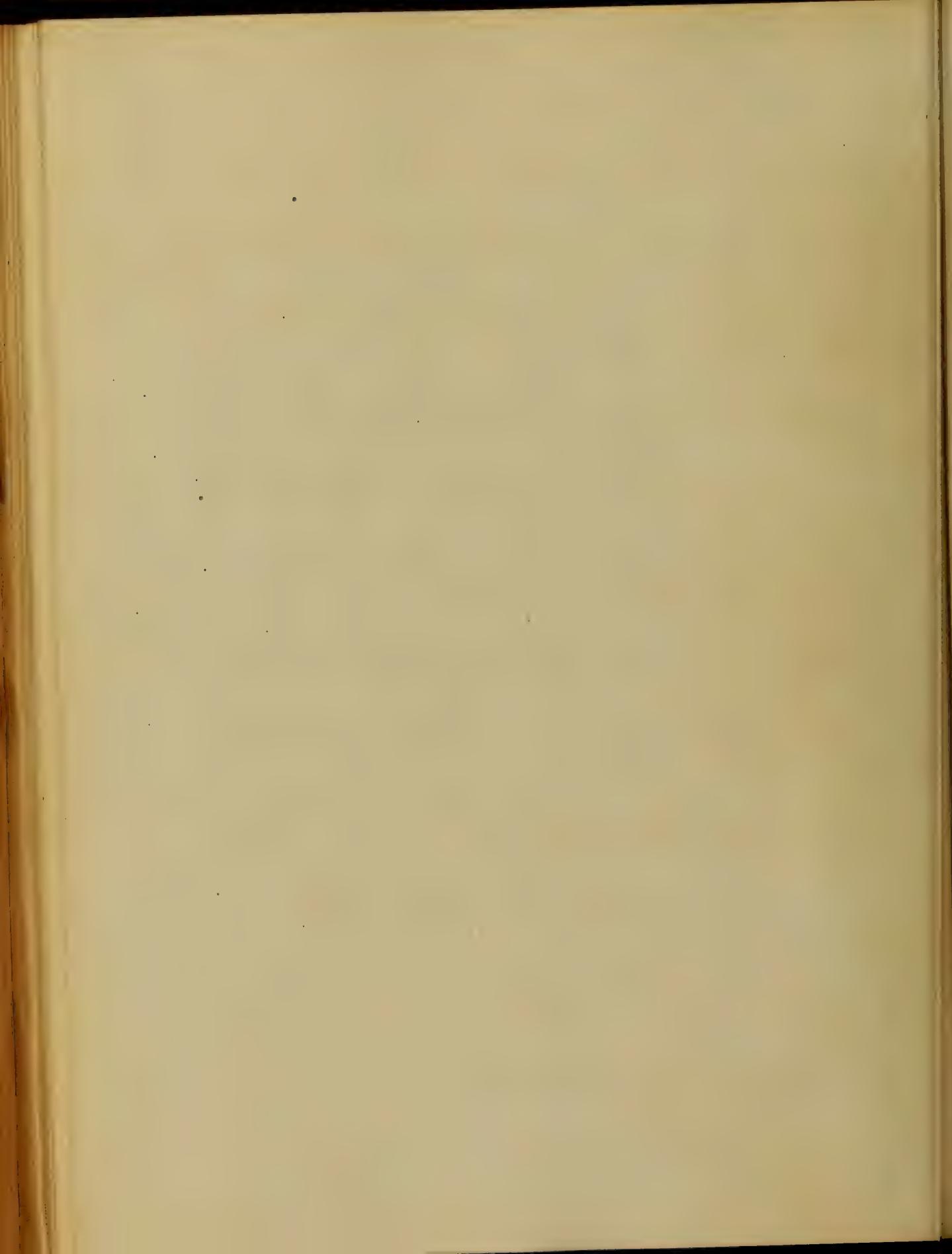
In the early stage the body of the
patient undergoes a change, especially if
he happens to be thin, emaciated, and
weak. After the first attack of
inflammation, the body becomes
more delicate and feeble, and gradually
loses all power of resistance, which
is increased by the violence of the disease. In
such cases, and the following
ones, the body will be unable to
bear the violence of the disease; a
certain tension is set up. In that case the
color of inflammation alters to a



you were well.

The Progress of the Disease

After the first day of the disease, the skin ceases to have its natural color; it becomes pale, and the part is devoid of all heat. The tongue is dead and putrid, and emits a peculiar and offensive odour. Typhoid fever may next set in when the skin becomes more extensive, there a corresponding and characteristic change is again observable in the constitutional feeble disturbance. The patient is now delirious; he has involuntary startings of the body, and his limbs are tremulous; his tongue is very tremulous; his lips are black and

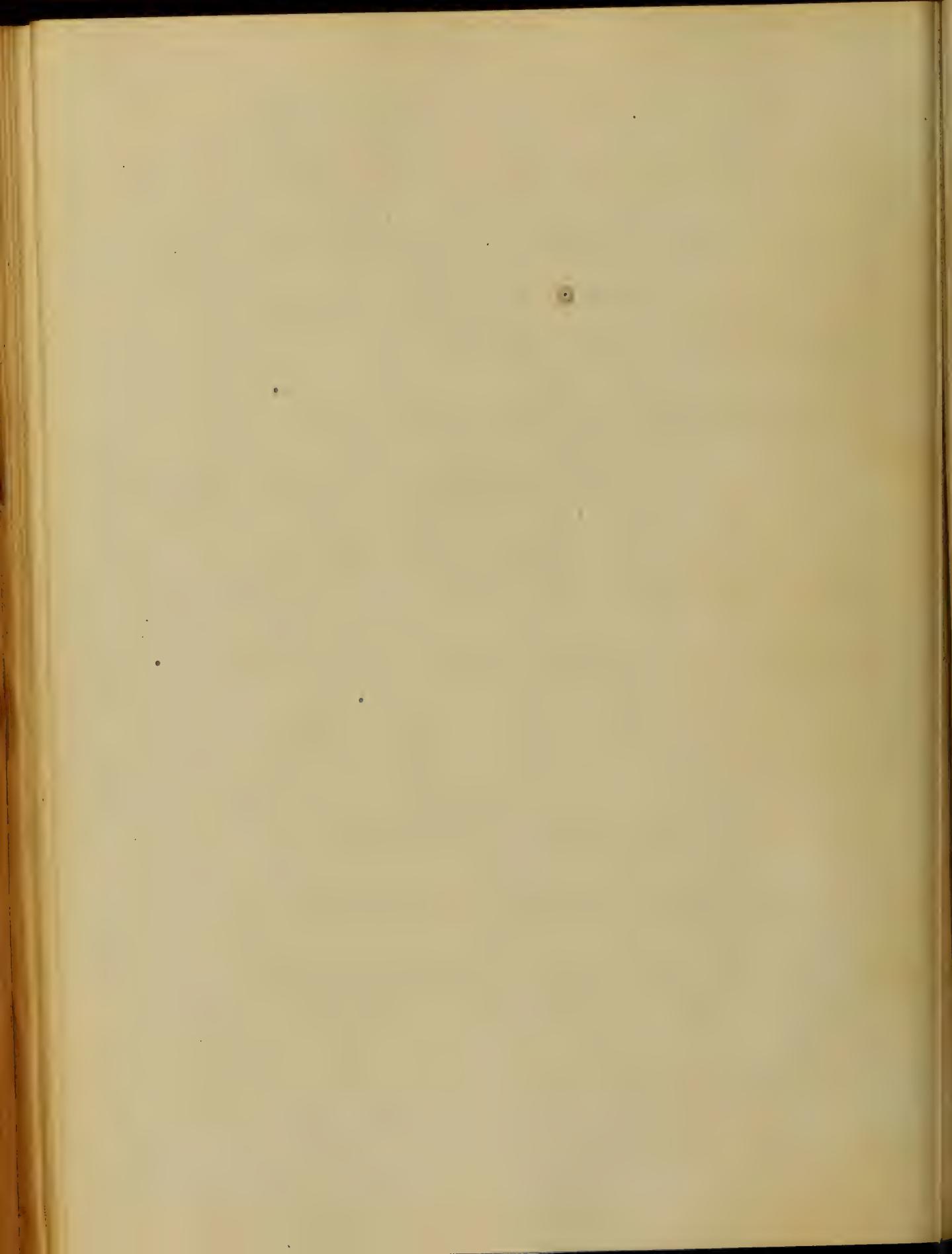


10

Wearing to be conscious that they close, and
forth closes the scene. Under more favourable
circumstances the eye would explore
the living, and leaves a breach of surface.

On the right is a small opening, through
which the eye can see the interior of the
room. It is a narrow slit, and the
light which passes through it is very
feeble. The eye is drawn to it
by the contrast of the dark room
and the light, and requires separate notice.

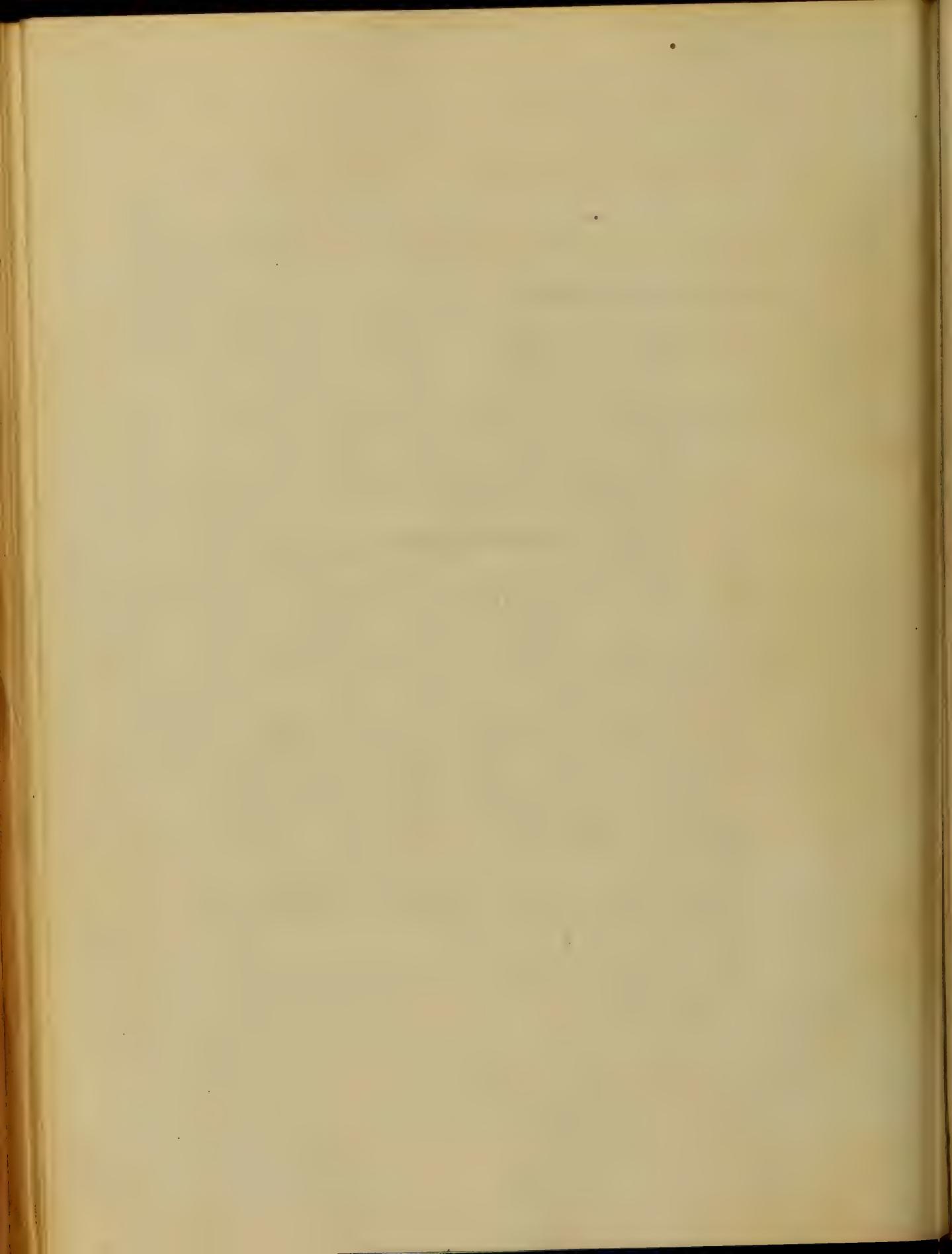
Contributed partly to a stretching of it
is by the distended blood vessels, partly loss
of power of contraction, accompanying the



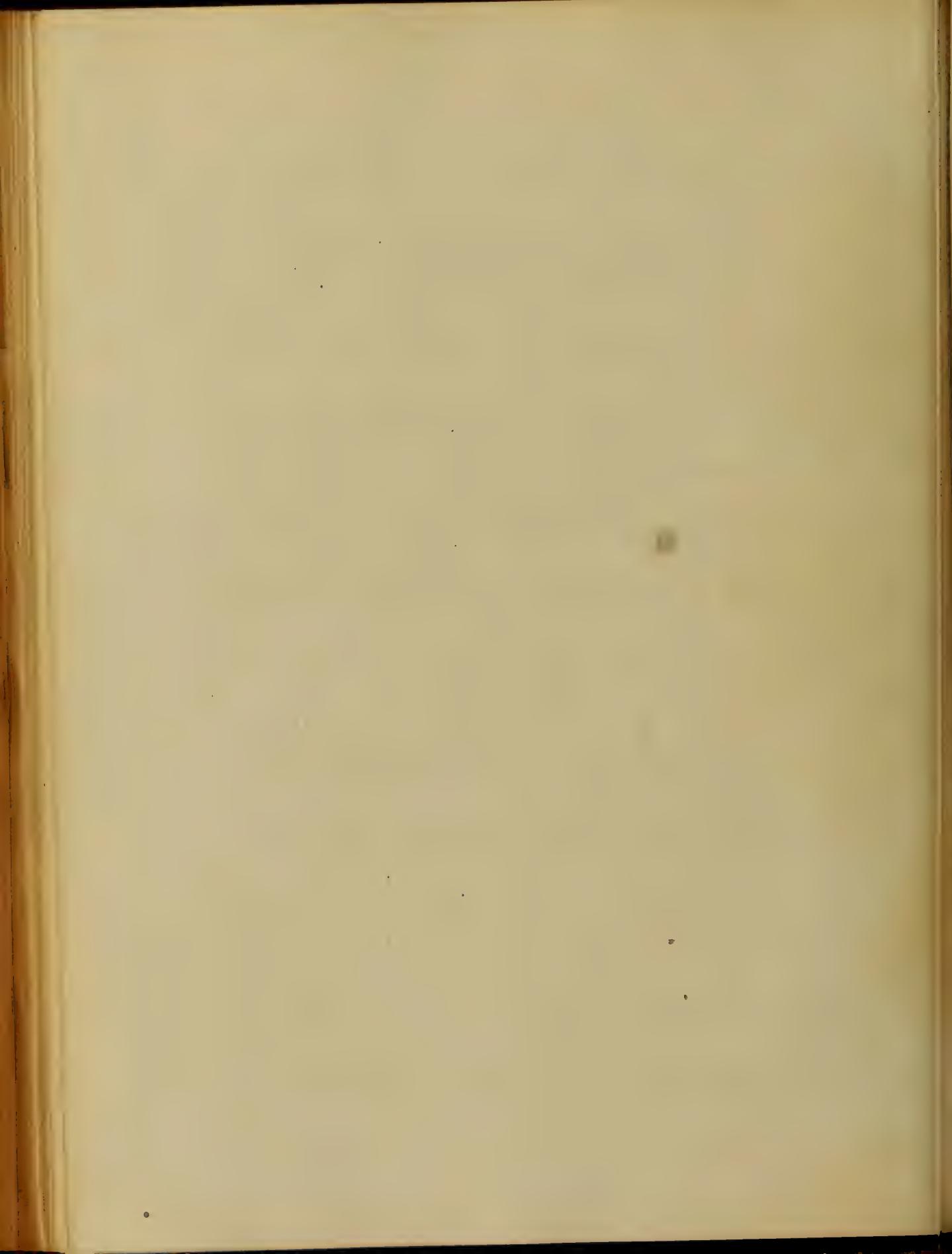
tion present; preceding the existent

immature varies much in different
cases both in degree and in kind.

It occurs ex leius paribus by slight
out persons. It varies from the slightest
to a fatal disease. It is more
acute. Parts endowed with little
true sensibility when sound become often
entirely insensible under intemperate
it differs in its character and intensity
according to the cause producing it, and
the part which is affected. Thus it is a



the body, the glands and skin
and respiration; but the main
and most important part of
the system is the blood and
the vessels with which it is
as the Standard, the gauge of all
things. If the blood is not
unhealthy can escape readily, the
are confined;—and comparative
ease, but when the vessels are
obstructed the Standard often does not
state—such parts as have little
ability in health. It is also in
with the exception of Gout.



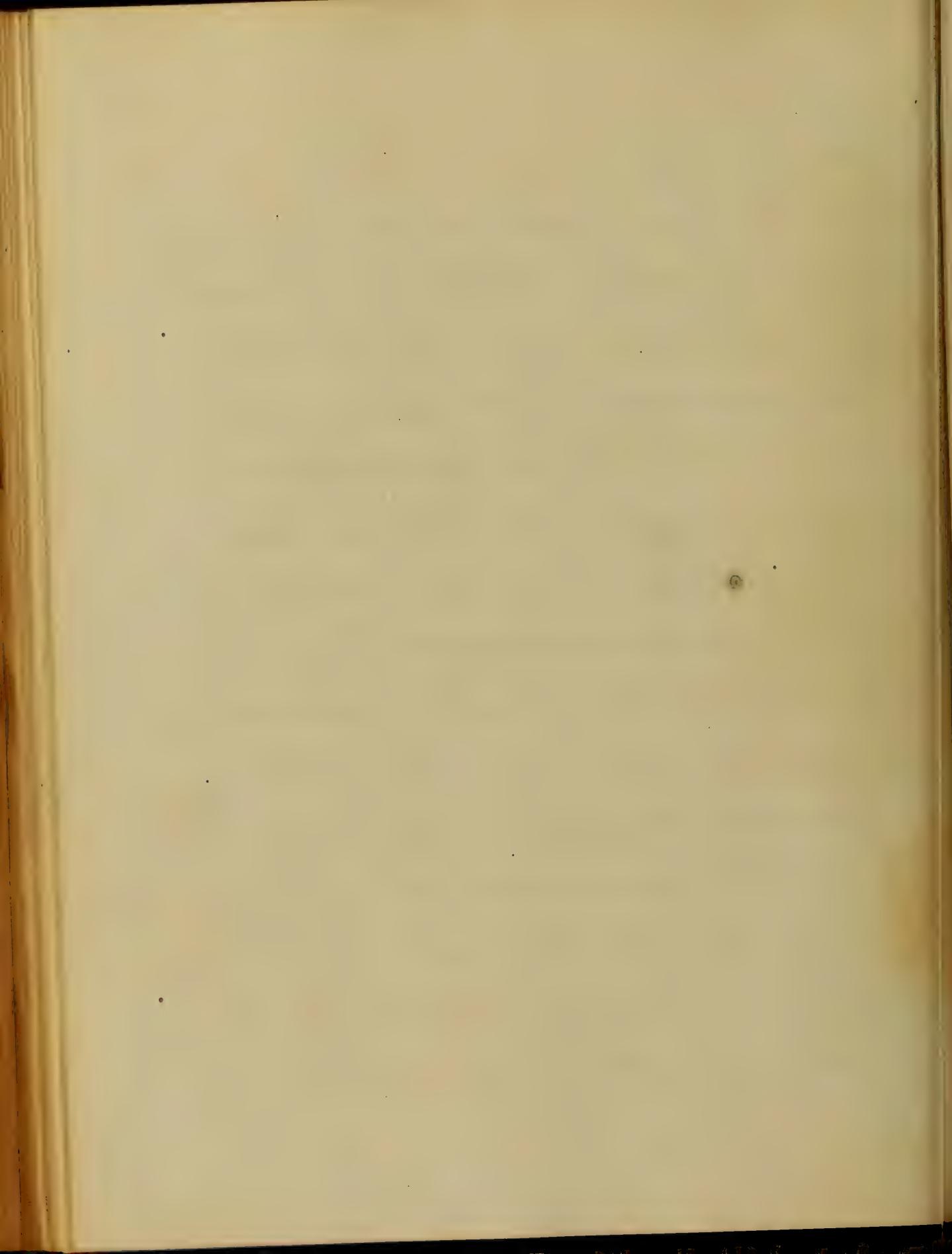
Articular Distension.

In the disease of the knee the first symptom of inflamed tissue is pain in the knee of diseased.

It is followed by swelling of the knee, and the knee is often swollen and merely produces stiffness, and articular surfaces are often found to be smooth.

The following are the symptoms of articular distension.

First, the knee is swollen, and is affected by the disease in several parts. Sometimes the pain is��ed and uniform. Sometimes



10
disease.

Indications. It is important to know

the cause of the disease.

Local symptoms of disease.

Local symptoms of disease.

When the affected part is inflamed, there is pain in inflammation by pressure.

When the affected part is swollen, there is pain in the swelling.

When the affected part is hot, there is pain in the heat.

When the affected part is not inflamed,

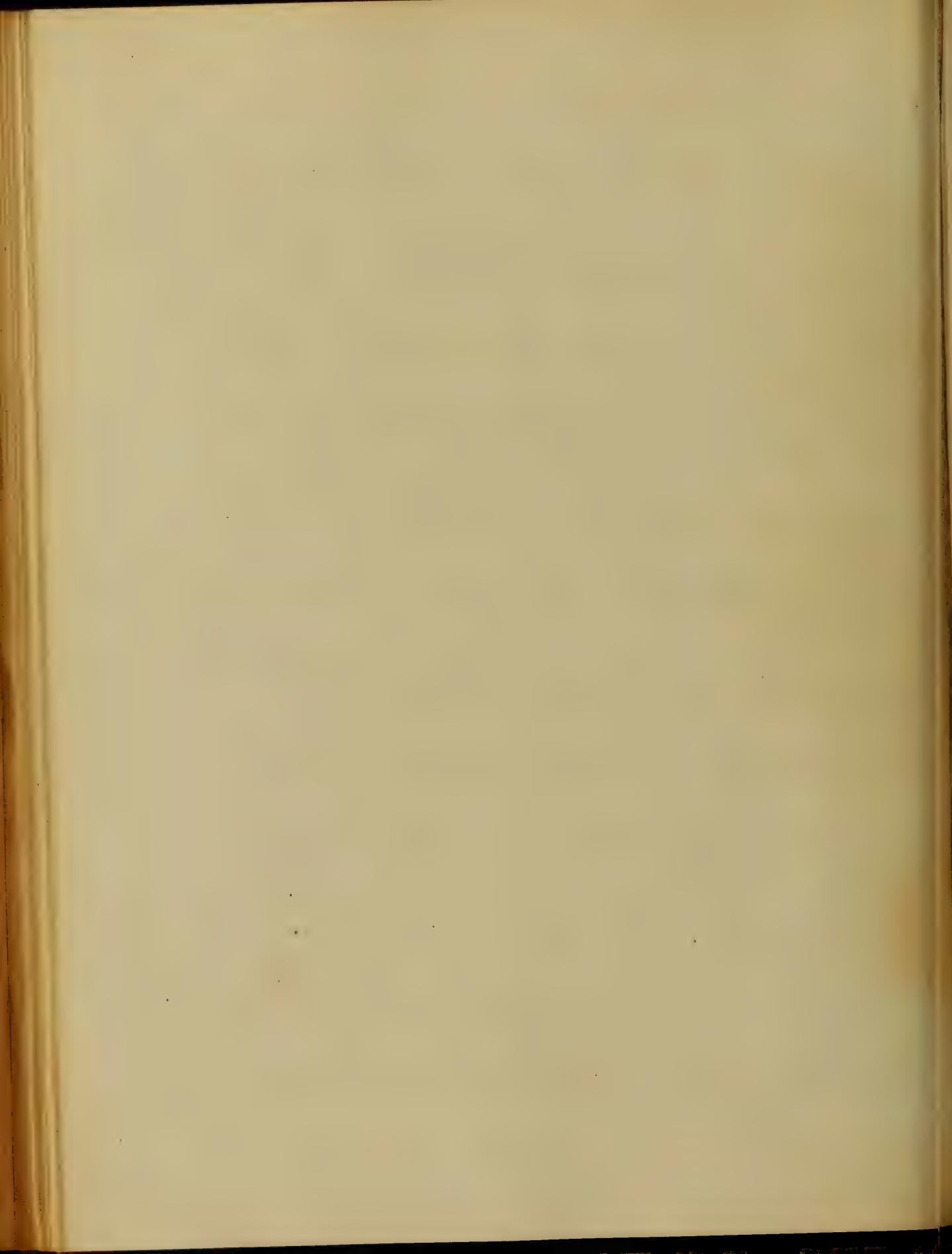
abdomen may result from colic or spasm from a distension of the intestines. During

the disease, the abdomen is hard and

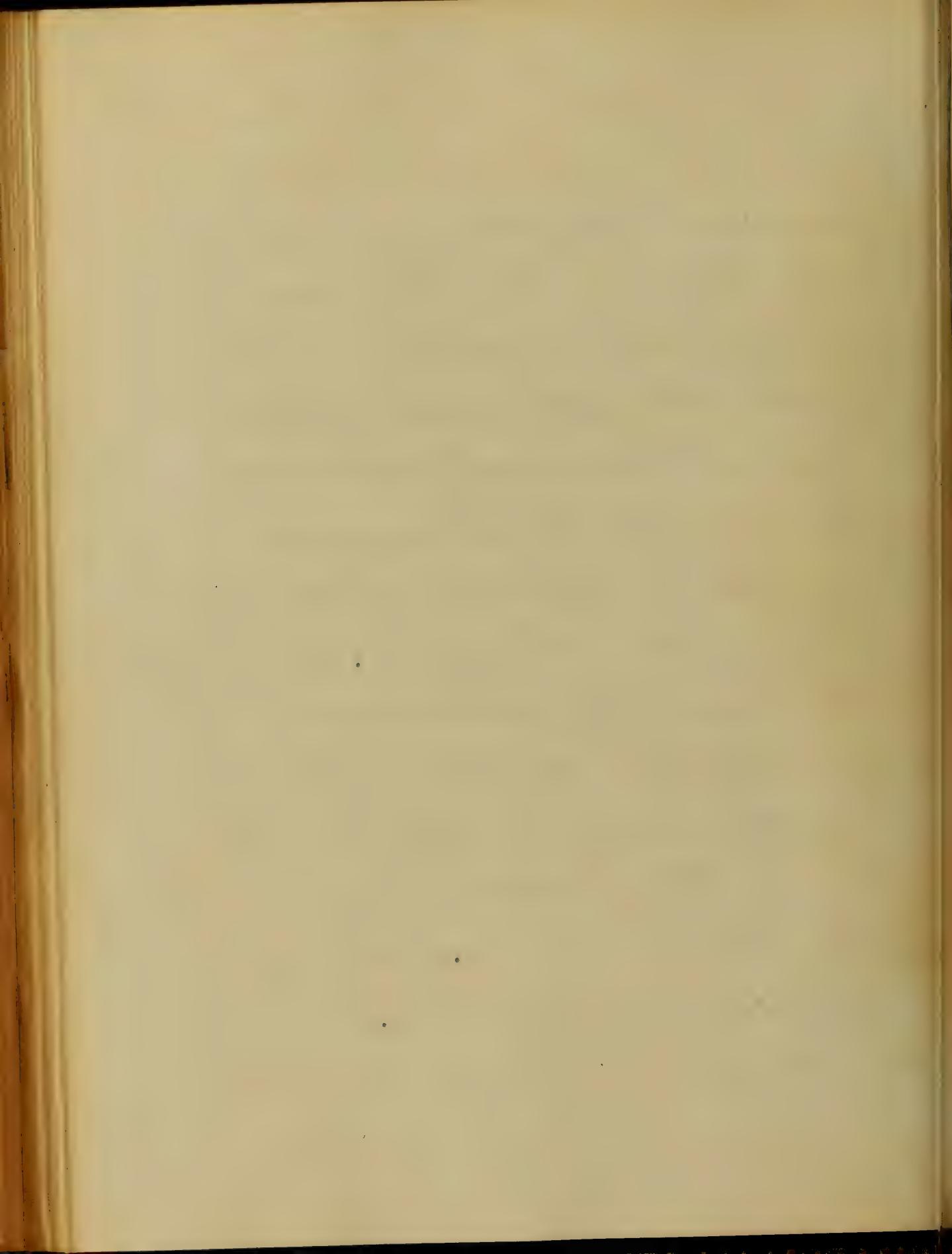
swollen, and the skin is red and hot.

When the affected part is cold, there is

pain and the skin is pale.

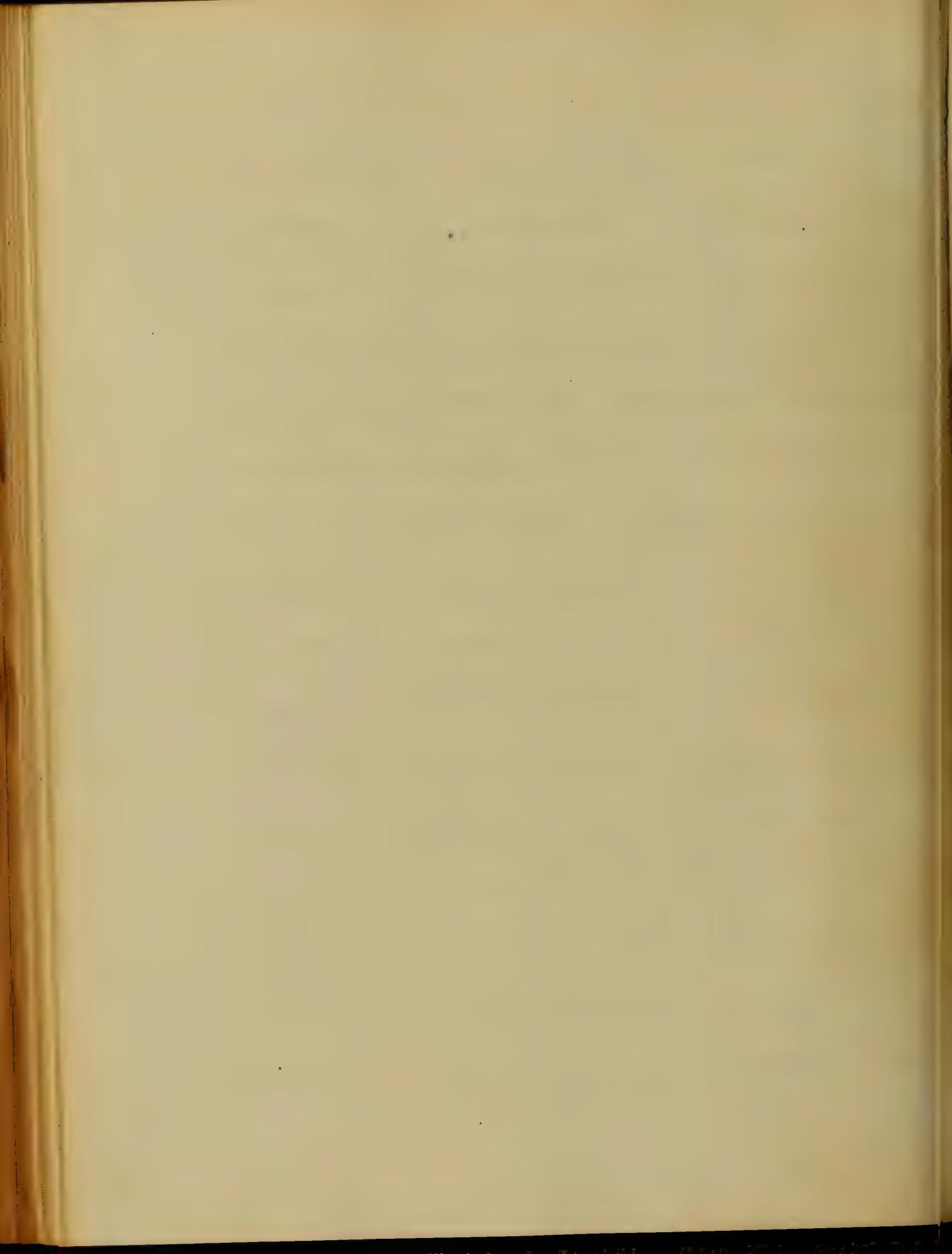


not to cause the severest financial disaster. But the suddenness with which it occurred, and the rapidity and almost acuteness of the falling prices, were sufficient to bring about the collapse of the whole system. The pressure made gradually upon the market by the new immigration could not be fairly. It is important to bear in mind especially when the existence



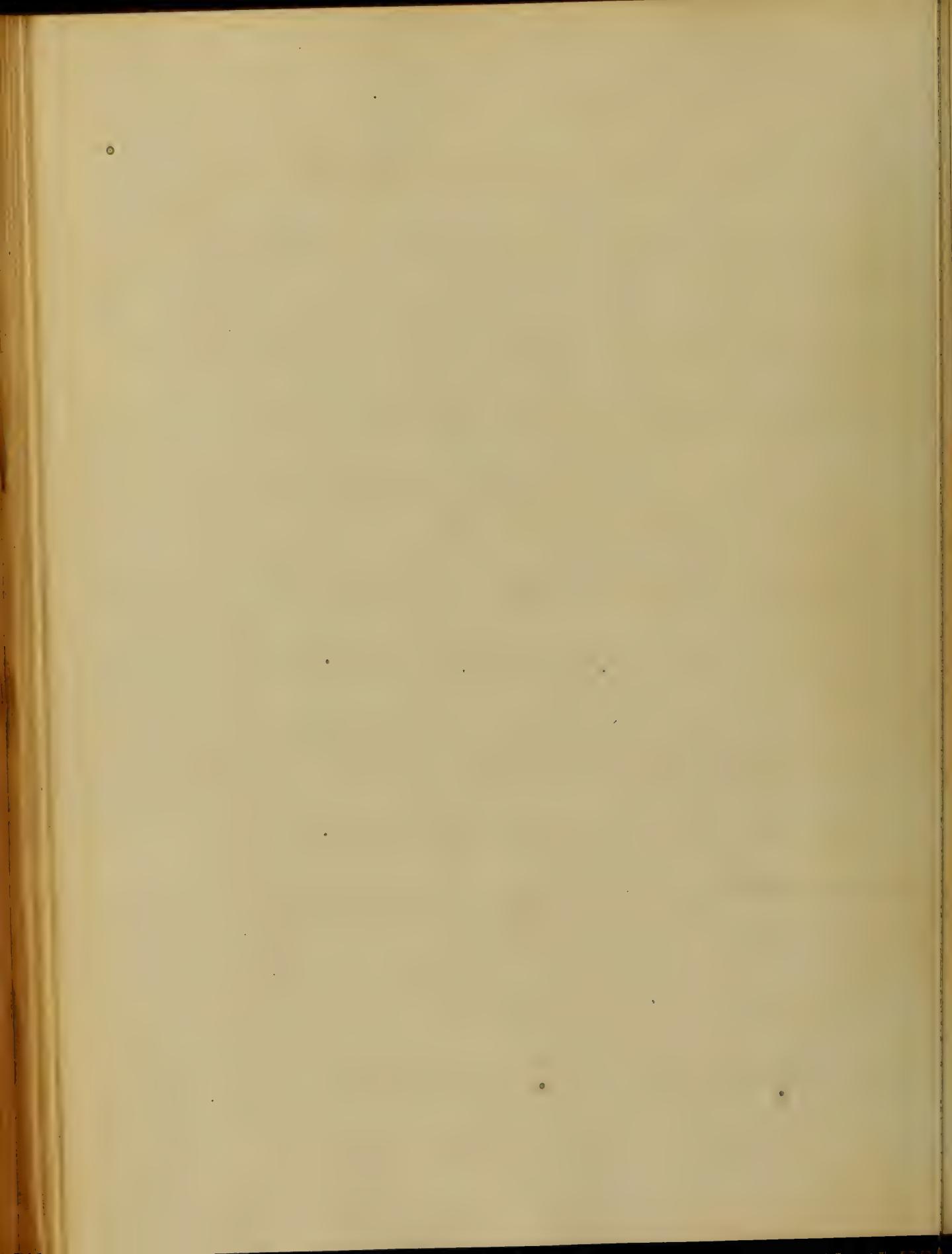
Superior or corona. It also, if the nervous
or sensitive fibres be affected, gives rise
to the so-called "Limb-syndrome".
Limbs in a state of palsy are often des-
titute of sensibility also; and inflammation
causes paresis, &c., but it does not
necessarily follow that the sensi-
tivity is generally described as being
not so much increased, as the sensation
of the patient on his heightened sensibili-
ty would lead him to suppose it to be.

It is the same with the skin.

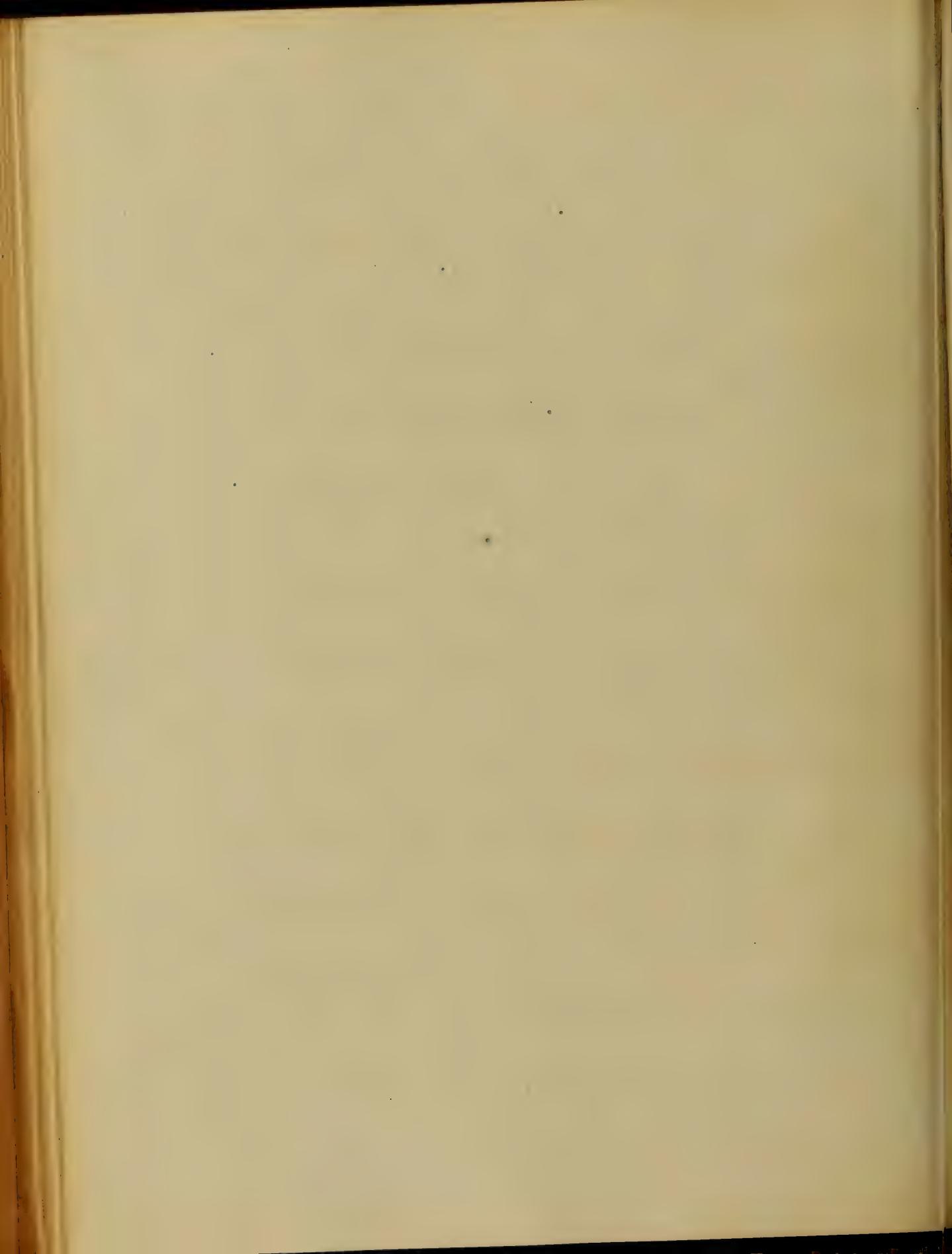


The temperature of the body
and blood of the healthy
man, at ordinary times,
is considered to be about 98° F.
or 37° C., which corresponds
to the temperature of the
air at the same time.

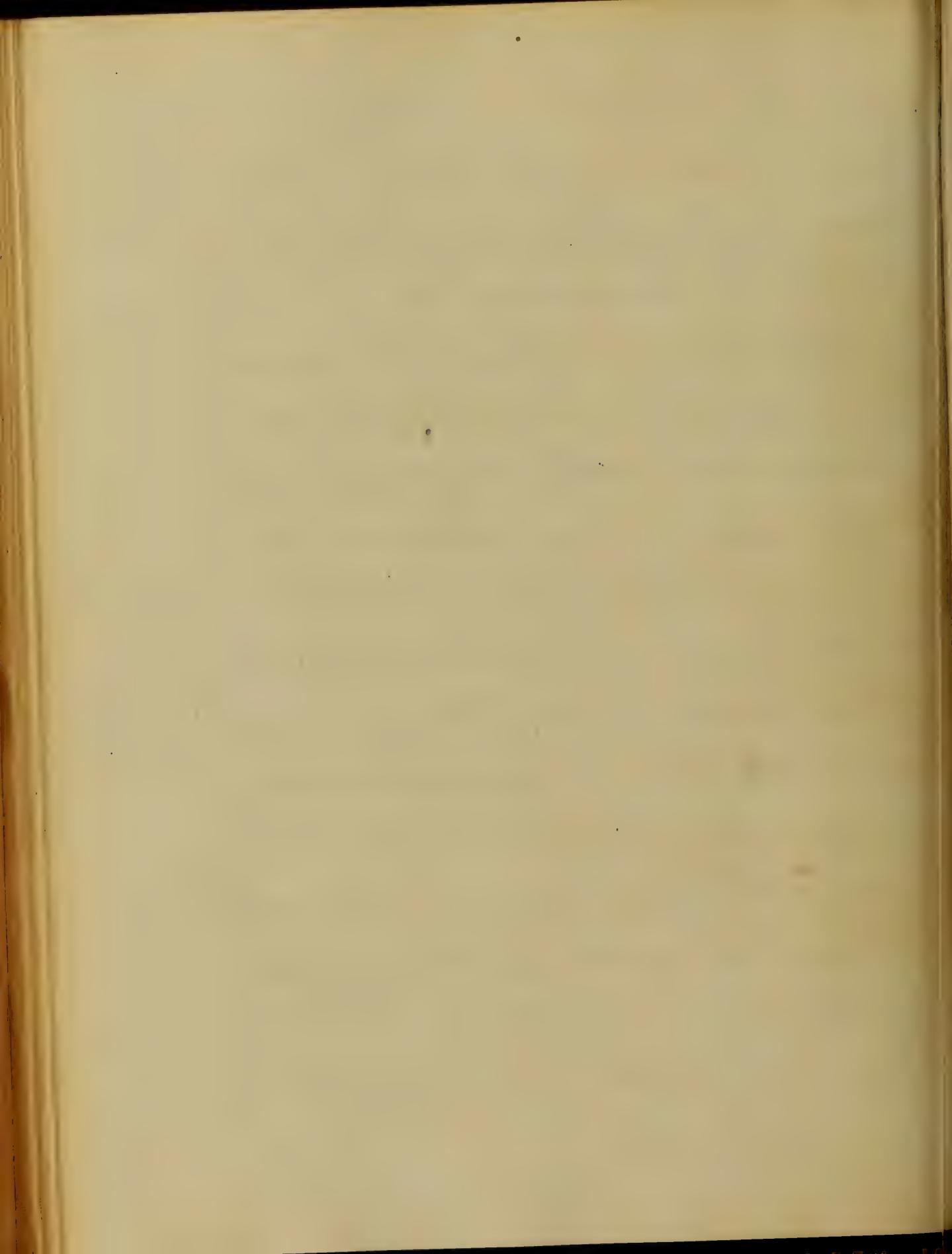
The temperature of the body, in its
natural state, is not quite uniform
as the different parts are exposed
to different degrees of heat or cold,
so that the contrast between an inflamed
part and the rest of the body
is greater in the extremities than in the
body. The increase of heat is however,



od, and therefore
the disease is
not to be cured by
any place between oxygen and
water. The disease may
freeze; the tissues themselves undergoing
many little changes, but the
natural condition of the body, below,
is all that is necessary to health. Heat alone
neither constitutes nor implies inflammation.
Now for parts may be made preternaturally
hot, and the body may be over heated
and exercise while there is no inflammation.
But it is not the heat
itself that is injurious
but another.

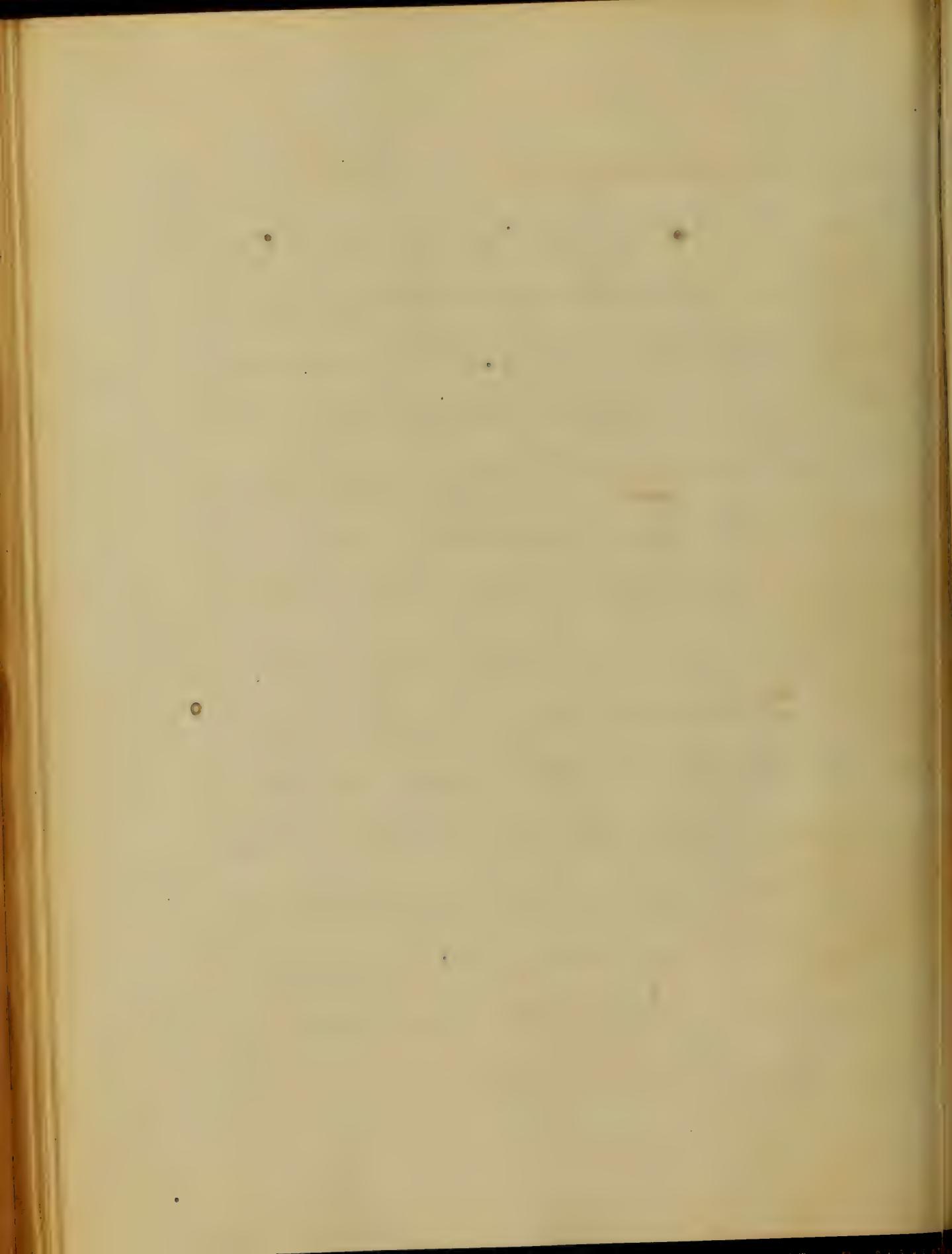


Sometimes the increase
is slight, and may be overlooked.
In other cases, however, it becomes
so great, that it is difficult to account
for it by Leptophilaria. The heat excretion
increased from the observations of the
physician, by the dilution of a
certain number of drops of sweat
with water. The sweating, however,
is probably increased, because of the
increase in the susceptibility of common sensation
of heat, and of the increased
sensitivity. The adren-

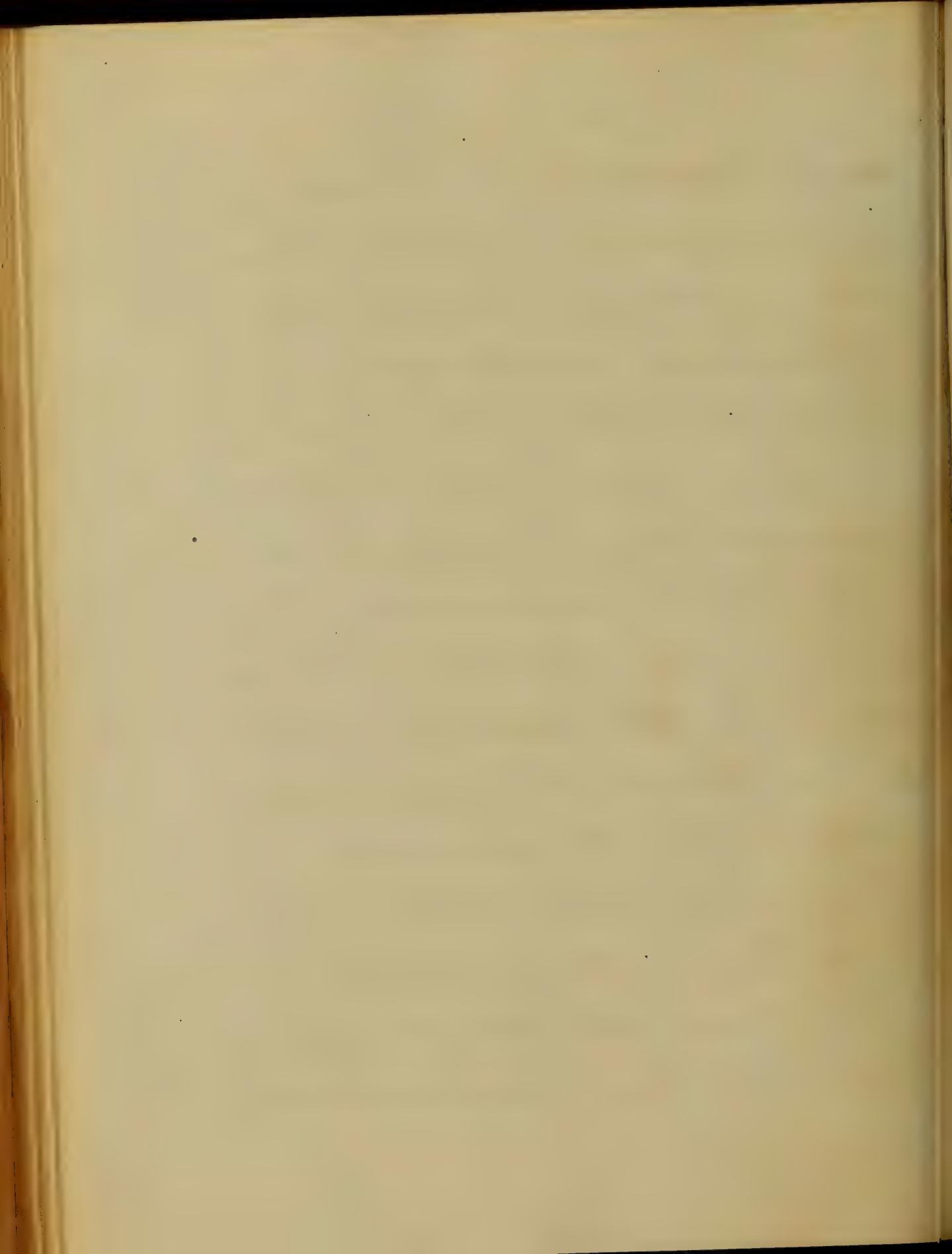


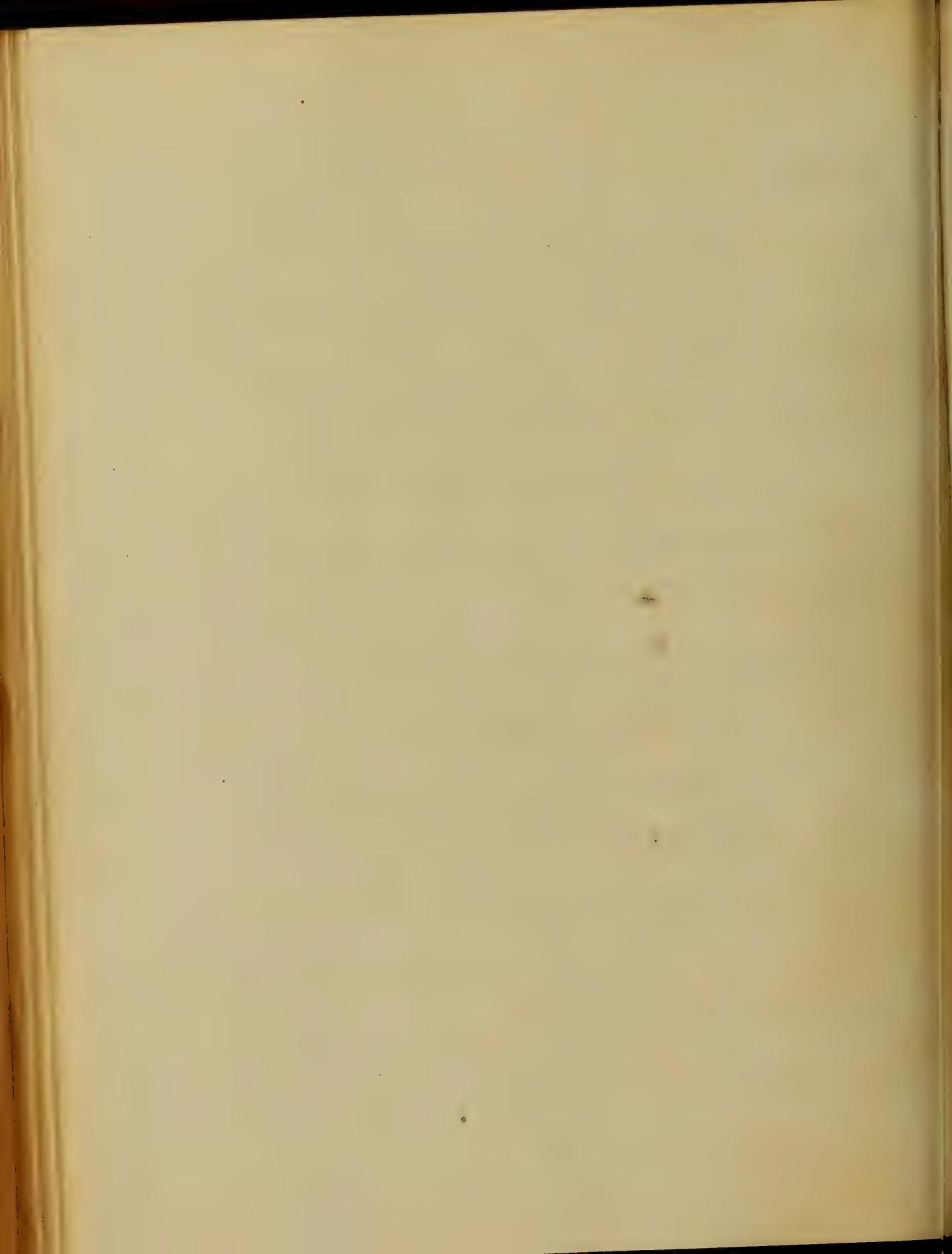
formed. Partly so that the smallest can
easily be detected by the naked eye,
and rendered visible to the naked eye.

Those vessels which naturally carry red
body, red blood, enter the interior
which is the body, with an infinite
number of vessels, which are
only, or which naturally admit so few
of the red corpuscles, that their
size, and the quickness of their motion,
cannot be seen. There is a great vari-
ety in the size of the redness of in-
terior vessels, the size
in degree, and on the nature of the

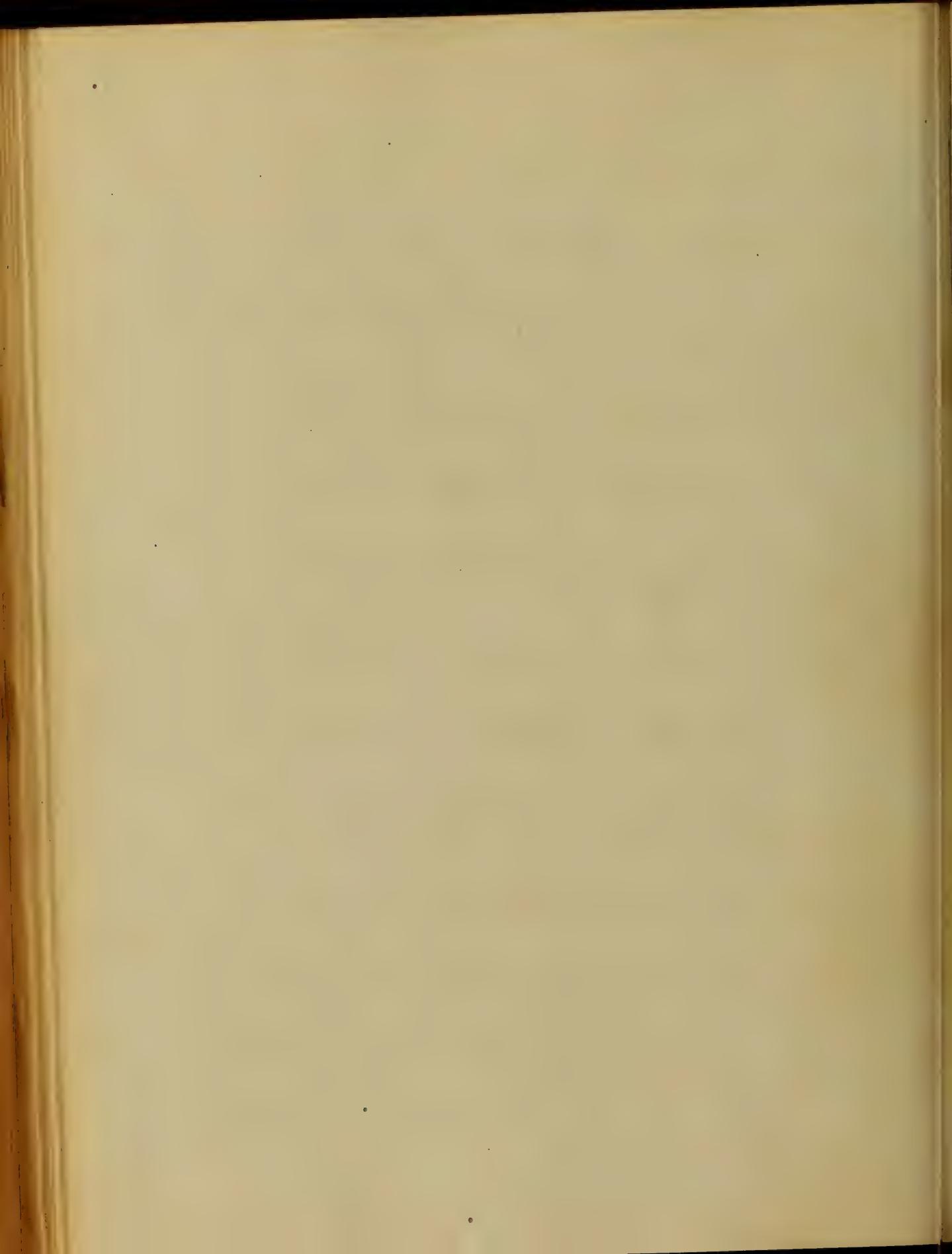


in the affected limb. It is
not always the same.
It may be acute or chronic,
or it may be in different
stages of inflammation. Sometimes
the redness is dark, or livid or purplish
and will appear over a large area.
At other times there are small
open, or plug-like forms of inflammation
which may be scattered over the limb.
Or it may be confined to a few
nodes; and sometimes it is diffused, in
which case the skin is often hot.
The
drip may and often does, remain after
the inflammation has ceased. It is also



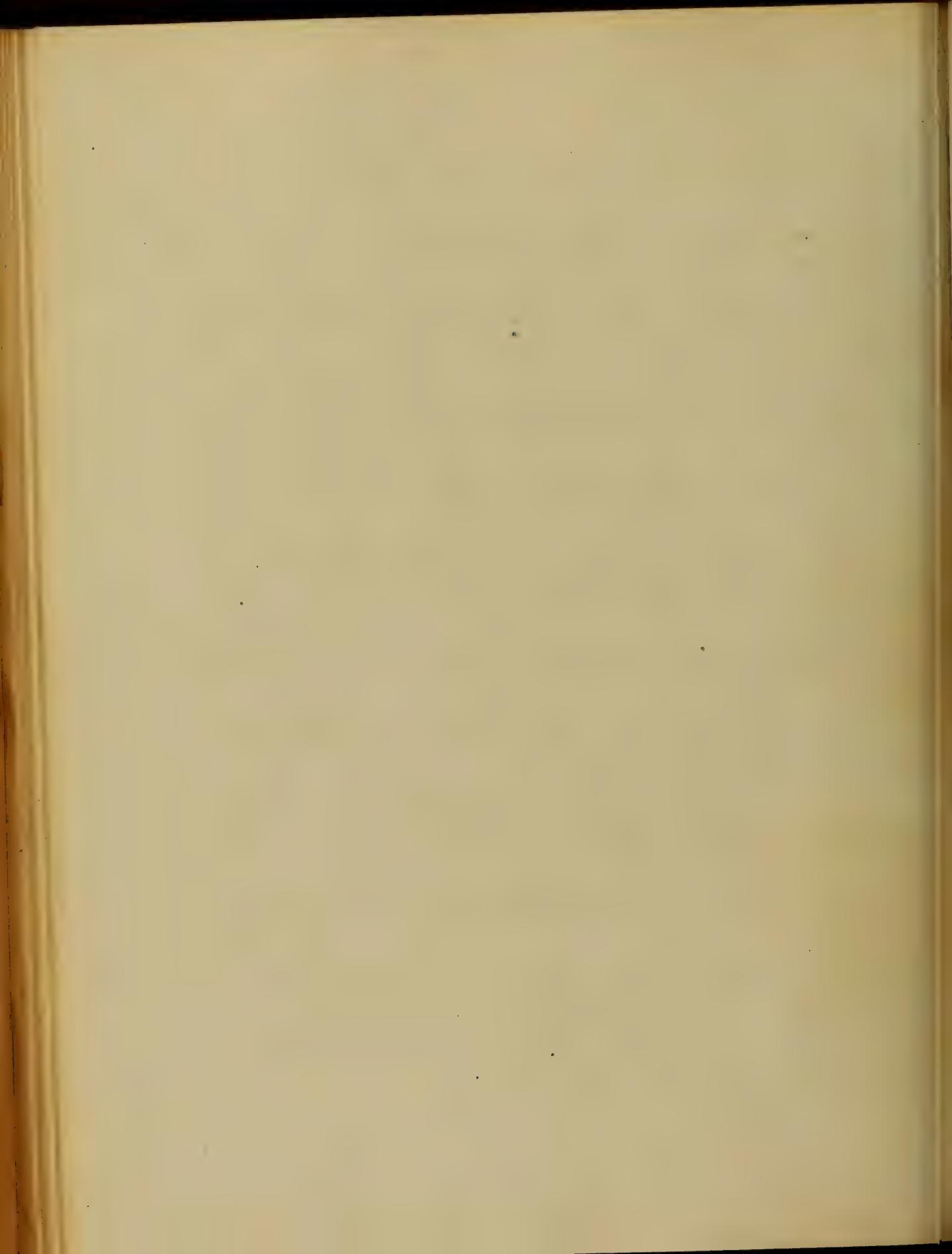


of the same liquid the blood. The degree
of swelling in different cases depends
partly on the intensity of the inflamma-
tion, partly on the amount of heat of
the part or substance affected. Generally
after a severe blow or violence there is great
swelling there is most pain. Swelling
is often a symptom of disease. There
are also simple anaerous enlargements
of parts, occur in the body, called
swelling that have no necessary connec-
tion with inflammation. The hand
has not suffered when there is no
appreciable swelling. Inflammation
is not always accompanied by
swelling. It may be present without any swelling

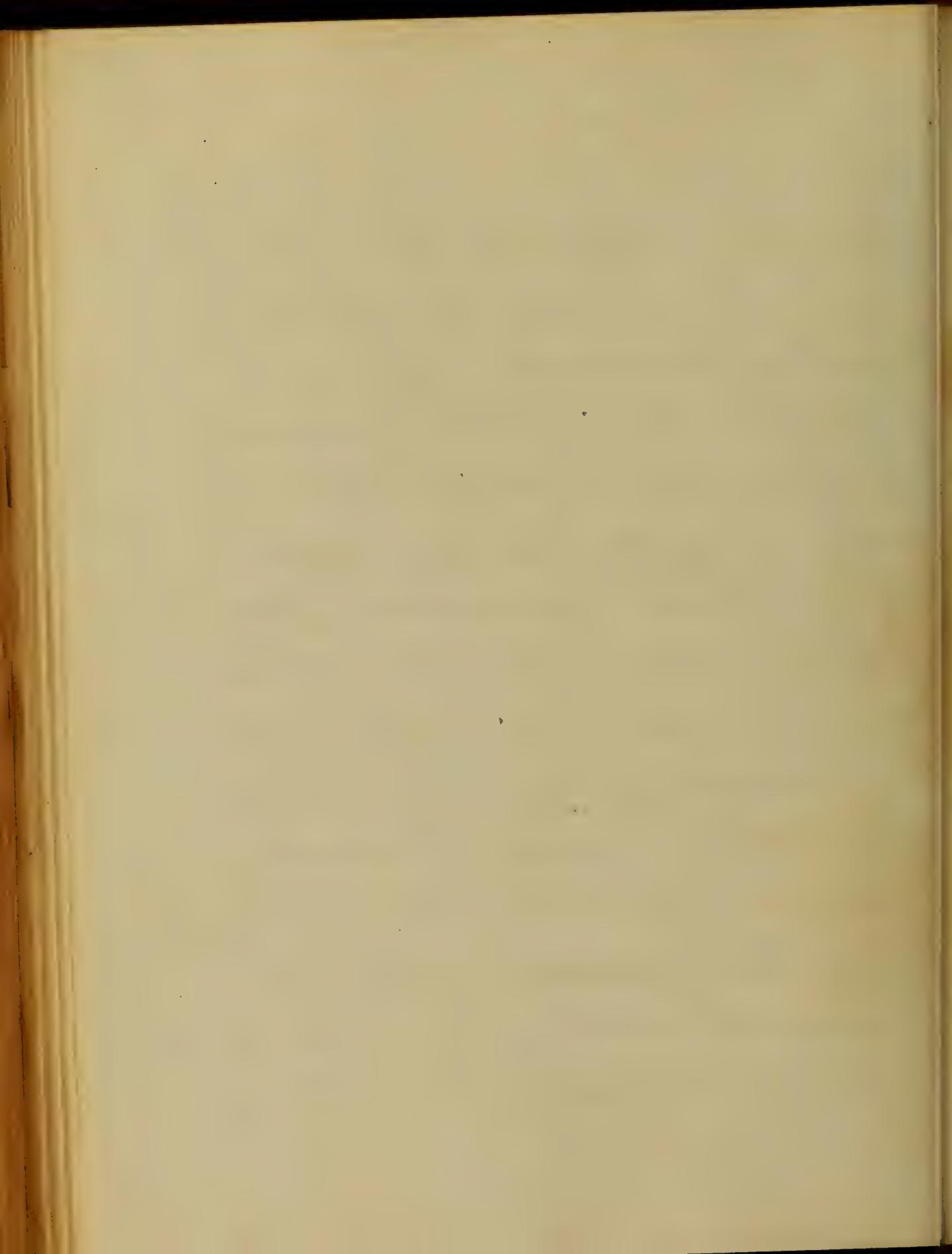


Ruffy coat of the blood

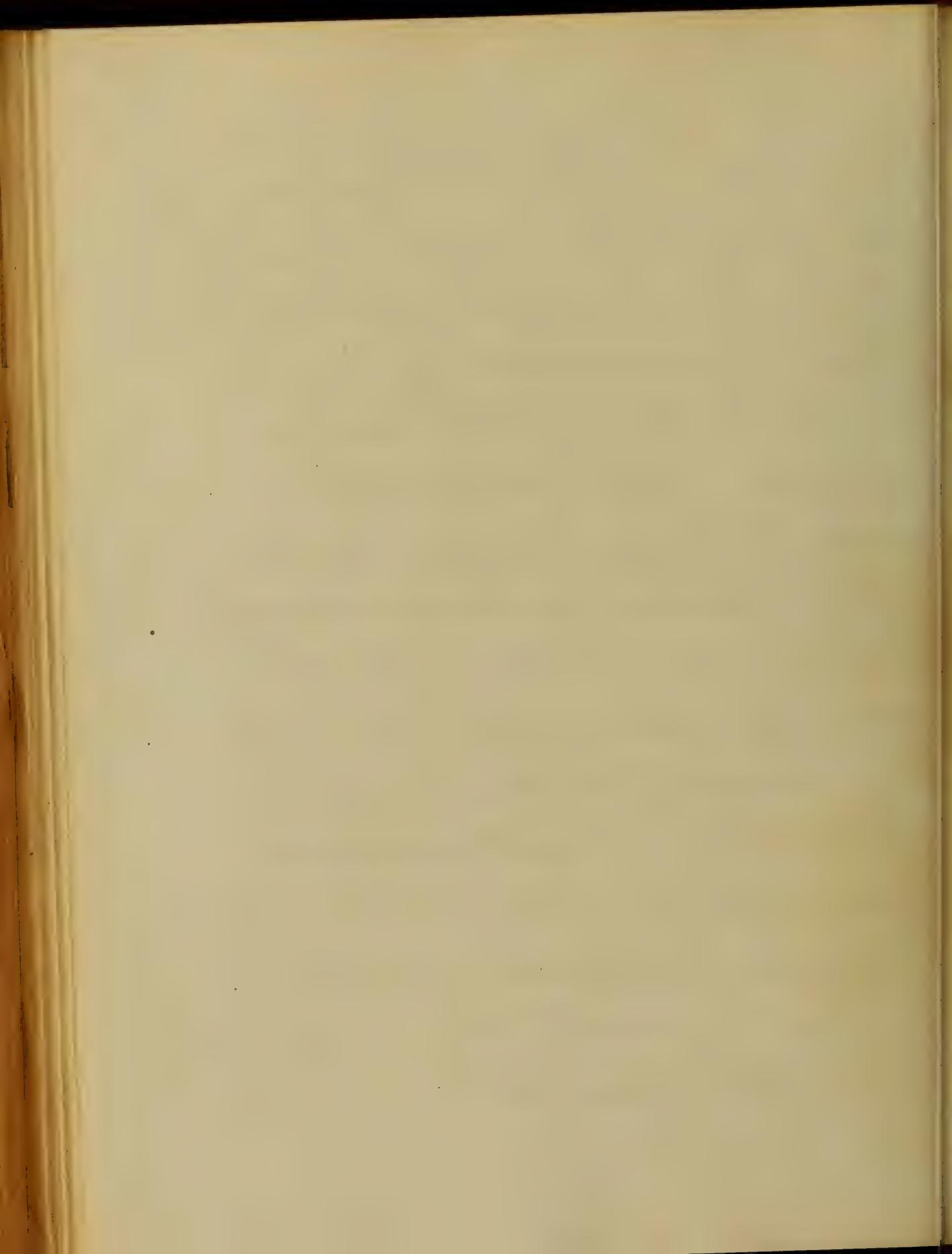
In the case of the ruddy clot there are very remarkable and important circumstances which is not often absent in cases of internal hemorrhage. The ruddy clot is composed of a few surface of the coagulum parts with coloring matter; so that upon the deep a clot there is to be seen a layer of yellowish, or sometimes of a bluish white varying in thickness from a line



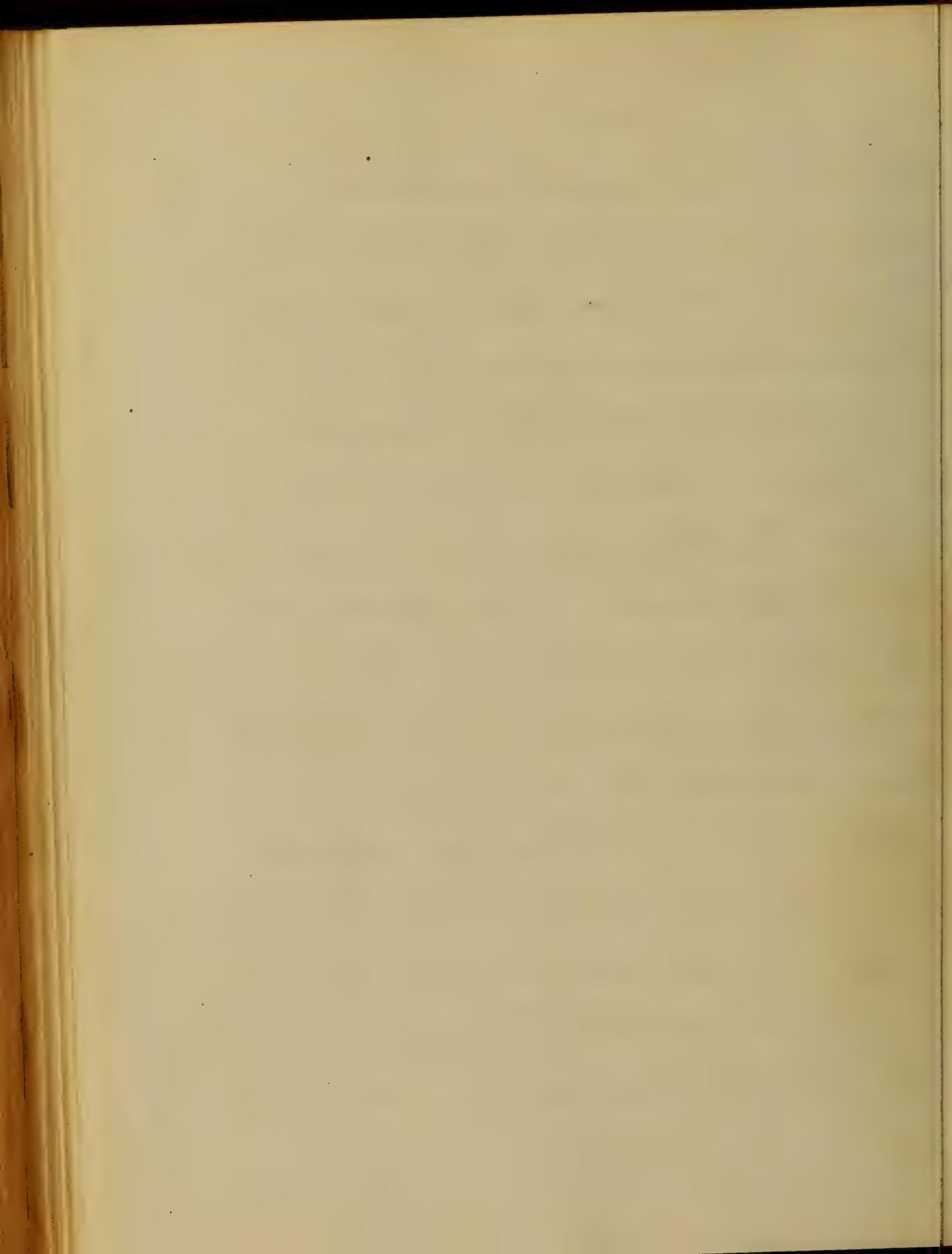
The uppermost whitish layer of the coagulum is the buffy coat of the blood. Sometimes the surface of the coagulum is flat and even; at other times it is undulating and concave, i.e., the diameter of the bubbles which form it is less than the diameter of the coagulum itself, and it is so concave that the surface becomes convex. In this case, the blood is said to be botiocapped or sanguiniferous. The portion of the allantois which is covered by coagulated serum is called the membrane of the fetus. The disease under which the person may be labouring; such as the state of the fetus, &c.



in certain conditions of the system; and
it belongs to the body to have it during
inflammation, that blood having the buphy
part upon it is often spoken of as inflamma-
tory, and in such a case, will be injurious
to the body. This is the case in all
acute diseases. Inflammation may be in
the body, and buphy blood sometimes occurs
without injury. The former is
however upon the whole a very valuable index
of the nature of many cases of disease, and
an important guide in their treatment.
Various and great has been the



speculation among pathologists as to the
cause of the difference between the
two types. But surely there is nothing
so with its formation, that the red corpuscles, leaving the colourless fibrin before
it becomes solid, become converted into
white corpuscles. At the earliest stages,
which are 'occasional' by their nature,
the fibrin, which appears in the lumen,
is not to be explained upon that principle.
If it were, then it would follow
that the cause of the separation of the
fibrin from the corpuscles is to be found
in the nature of the fibrin itself.
Decidedly, would be the bumpy crust
and it used to be supposed that this is in

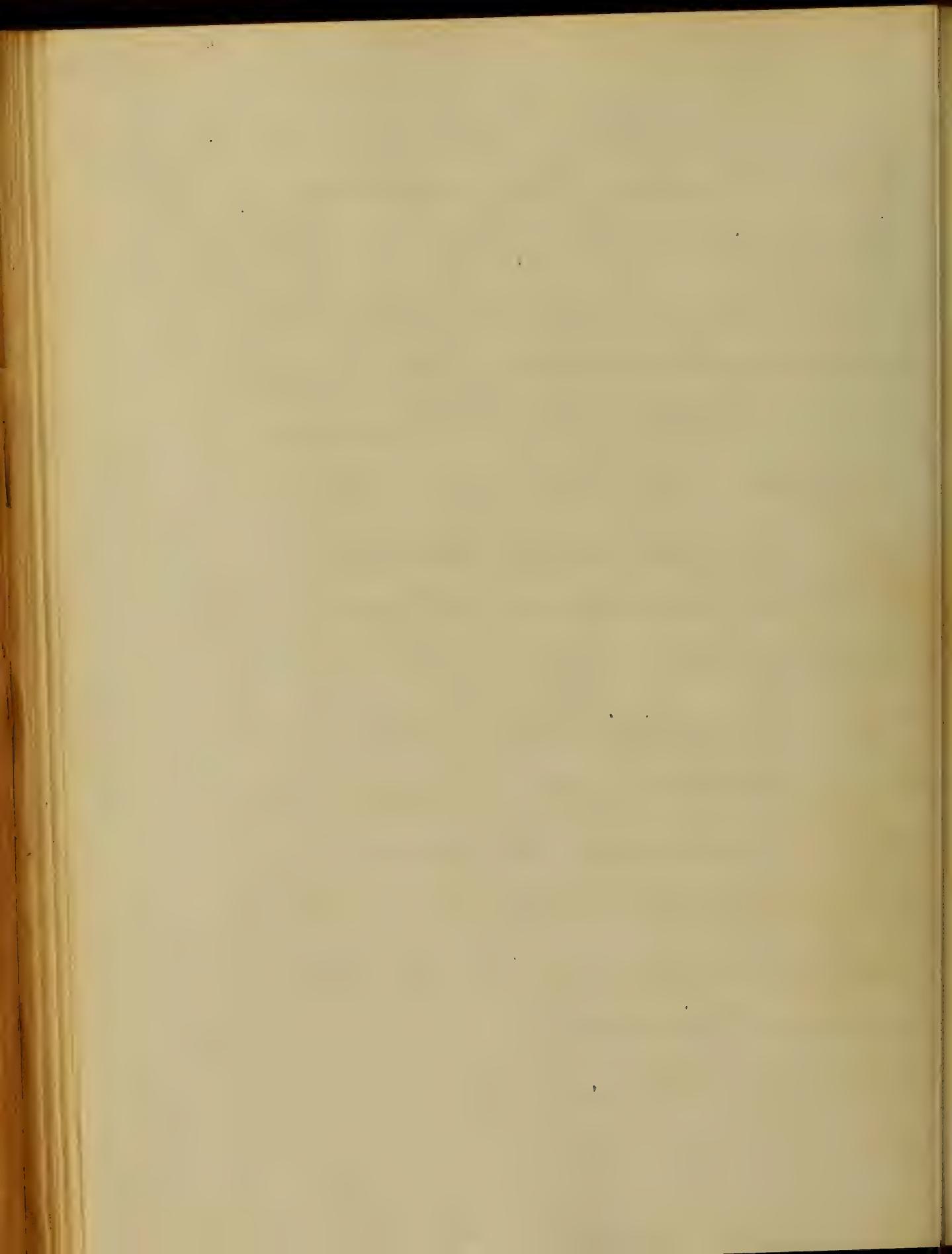


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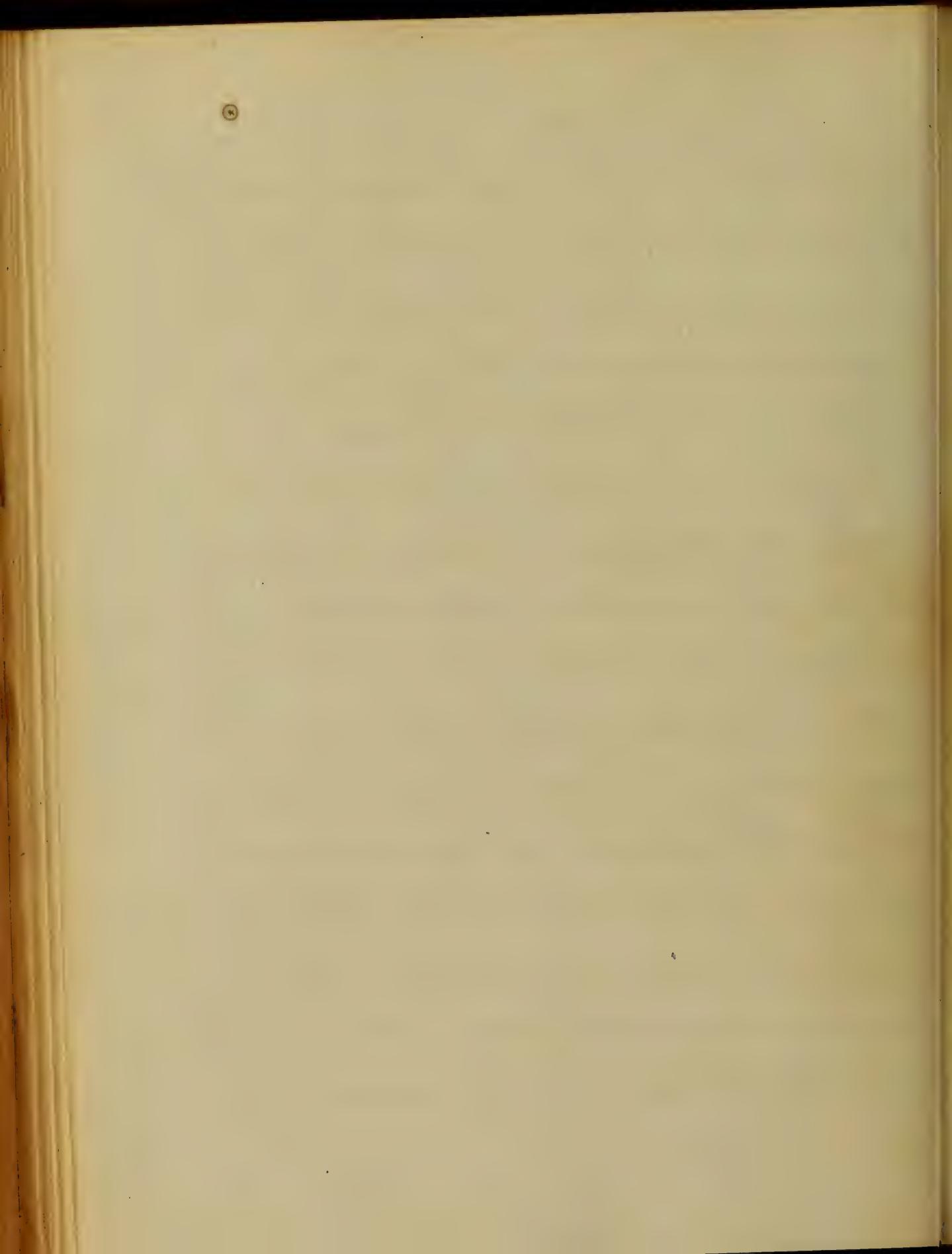
The true explanation of the phenomena.

There also the coagulation was
unusually rapid. Dr. Davy and Mr. Gentlin
both state

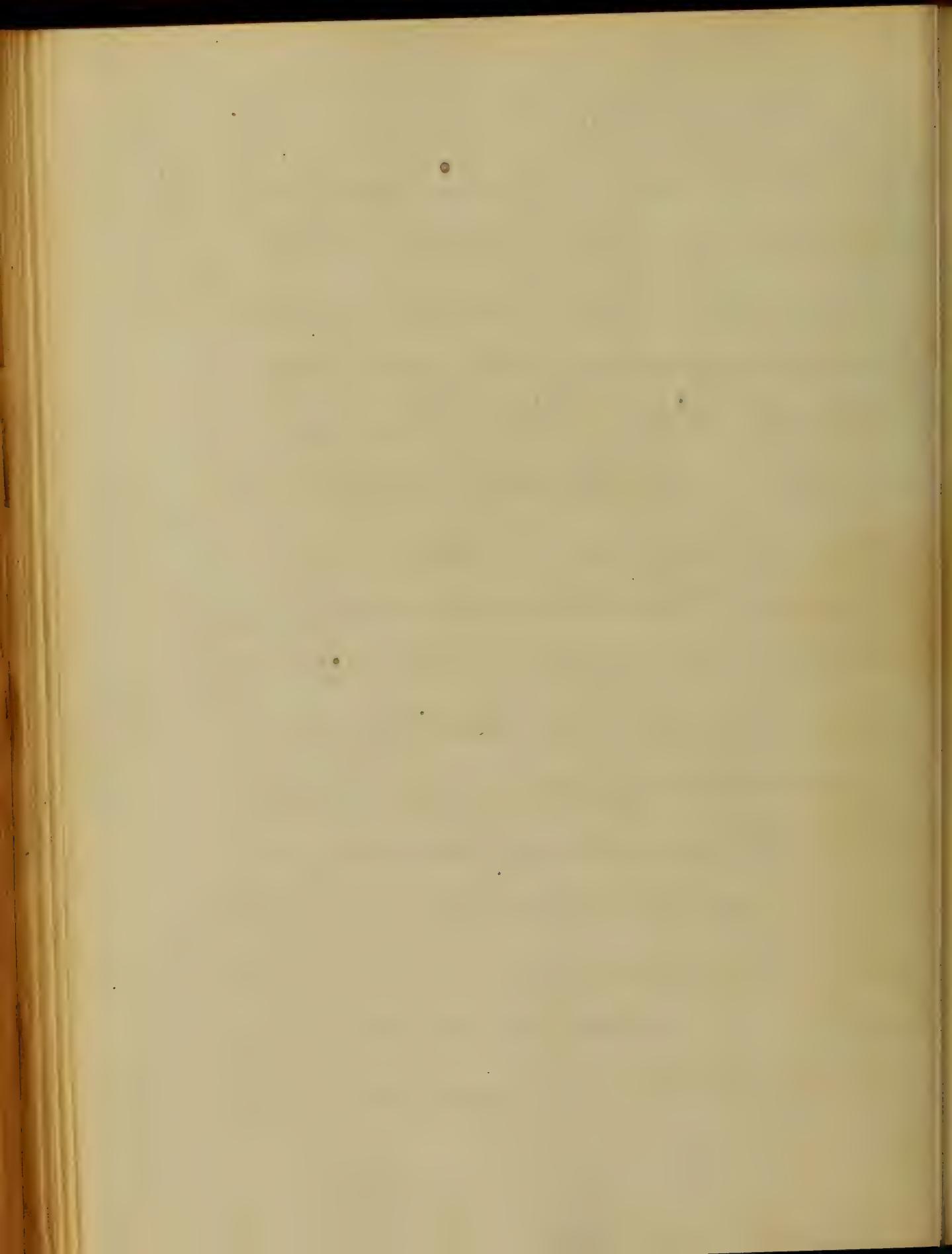
the subject, that the coagulation of the
blood may have been more rapidly
completed, than that of healthy blood, But
as no observations made and published on
this subject have settled this question. We
will now see if the same result is
presented itself; in twelve it did not.
In nine of these twelve, the coagulation



of the blood did not coagulate even during
forty minutes, although it was drawn; but
in four others there was no coagulation for
sixty minutes, so that there was
no coagulation at all.
In and subsided,
On the other hand, in twelve
cases in which the blood was
coagulated took place
out in the middle of the first
fourteen minutes. The majority of
not in the middle of the first
doubtless does favor the subsidence of the id.
, which causes the blood to coagulate.
Outside cannot be regarded as the cause



vital change in the blood appears probably
from this - that it will sometimes vary great
in incident forms. In one case
at the same bleeding. This if the blood be
divided into four different cups in success-
ion, it will appear to be clear in the first
and in none of the others; or it will be buffy
in the first and clear in the others.
The first and clear is called the
buff. There are three forms presented by
this name; and we find them
as follows: -
1. The first and commonest form
is called the white buff. There is a complete separation of the
plasma, and a strong aggregation of the



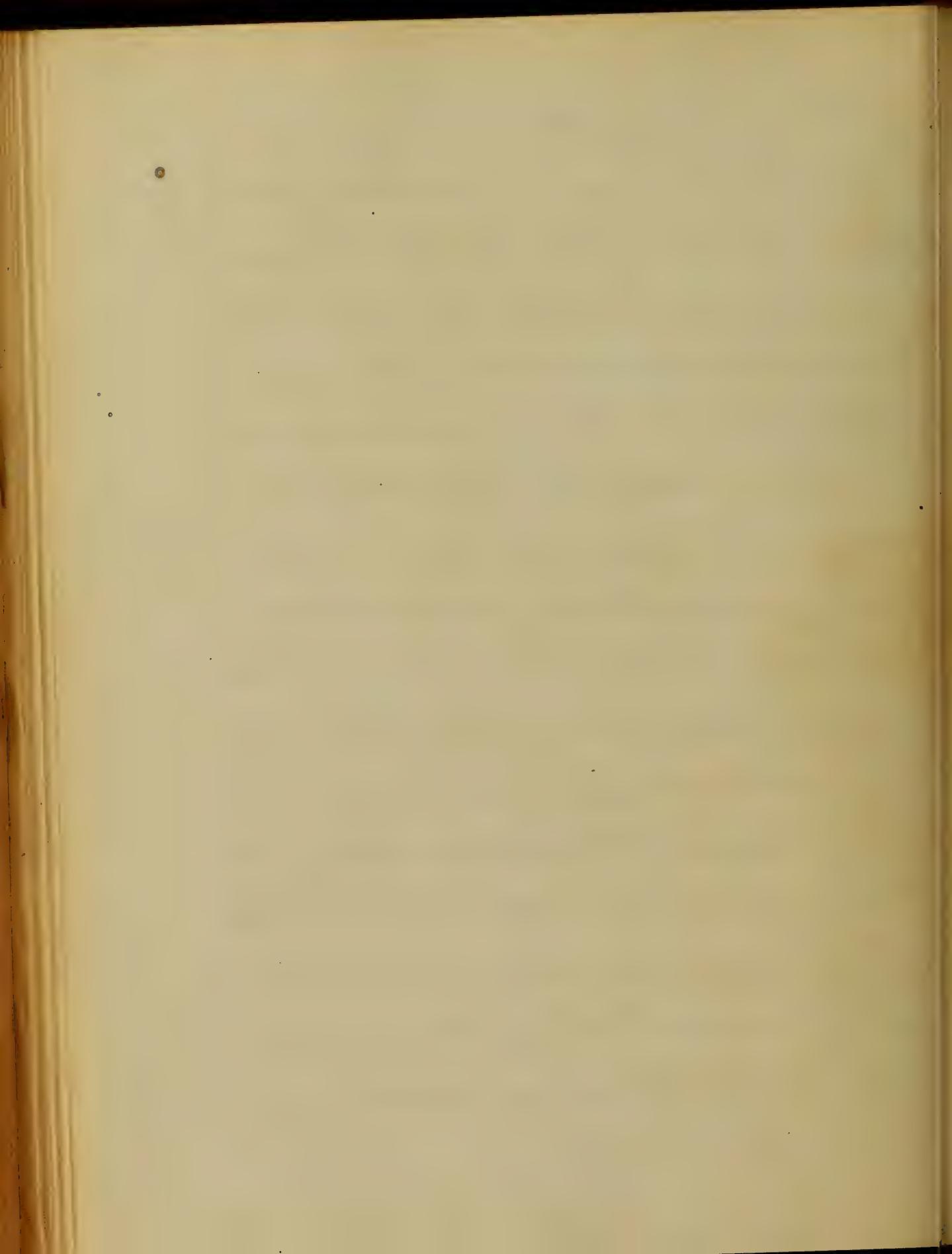
parts of the coagulum, themselves. The red portion of the coagulum is also, with

fine texture, from the sides of the nose, and floating, generally, in transparent serum.

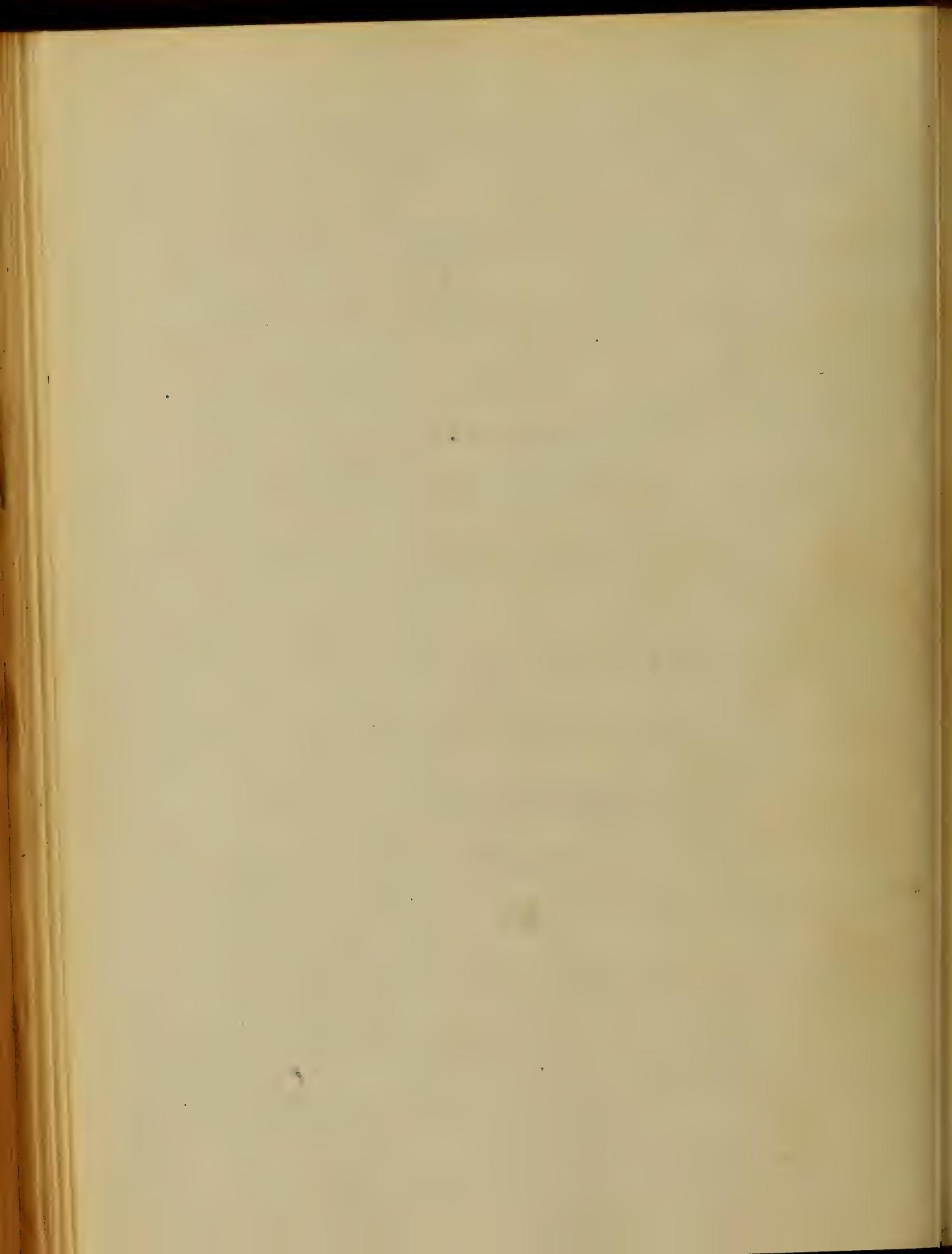
This is usually seen when the inflammation is violent; when it occurs in skin,

it is its seat in certain tissues, infiltrated with serous parts, certainly.

The whole coagulum is like a collection of the pieces of the eggshell, which is not compactly collected into a solid mass, and the stuff, not collected, is very broken. Here there is an imperfect separation of the coloring matter from

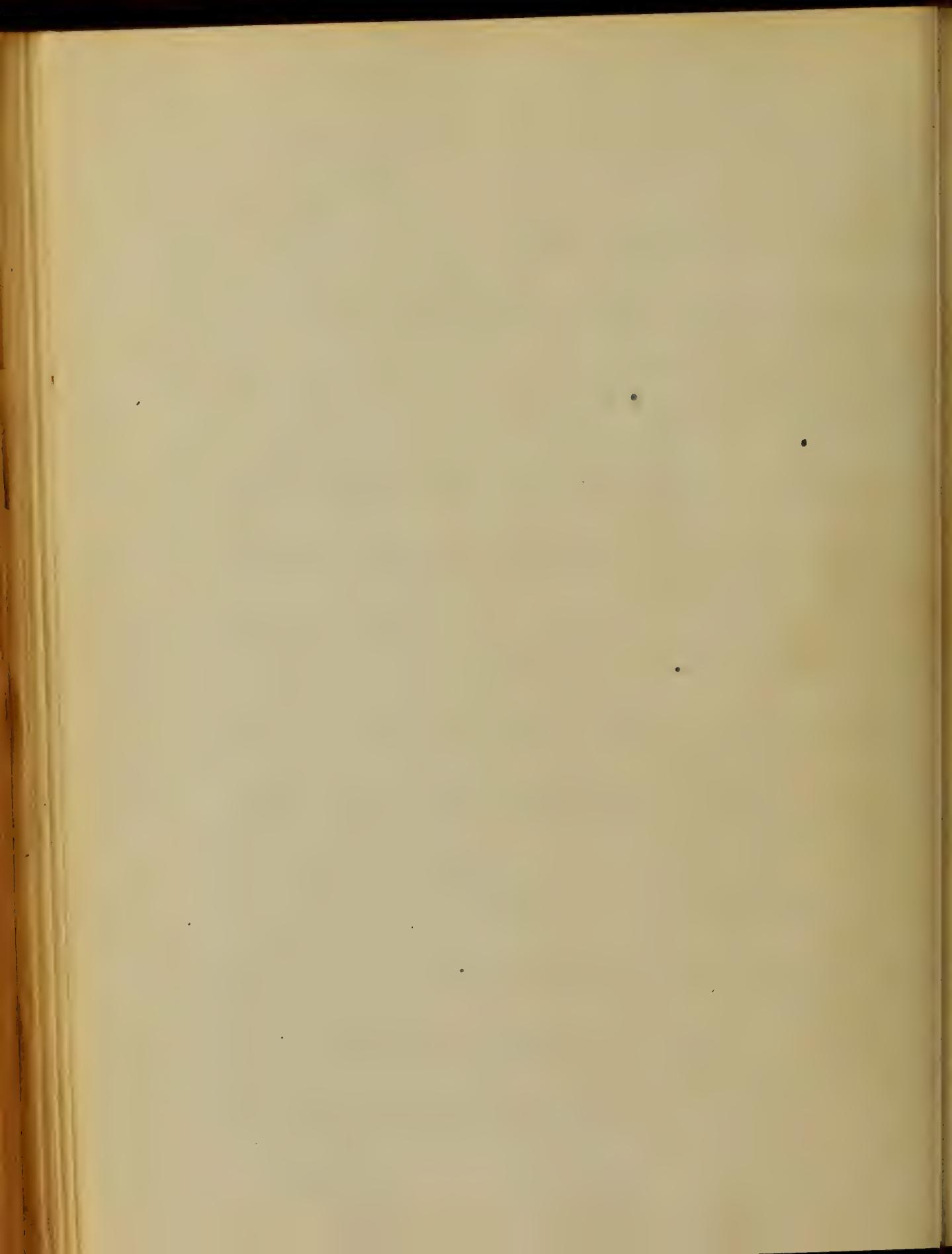


the fibrin, and no great aggregation of the
cells. In the third stage (coagulation)
wholly healthy blood is apt to accompany,
while coagulation is incomplete. In the
third form, the buffy coat is thick and
abundant, but is flat and soft, loose
and flabby like paste; and the coagulum
when adheres by its edges to the vessel in
which the blood was drawn, it has
not been considerably separated, and
but slight aggregation. The serum is
apt to contain a few red particles dis-
tinct from the clot. Such blood is said
to be sanguineous. Some authors state that when
it is observed some other cause of a
disorder of the system usually exists which



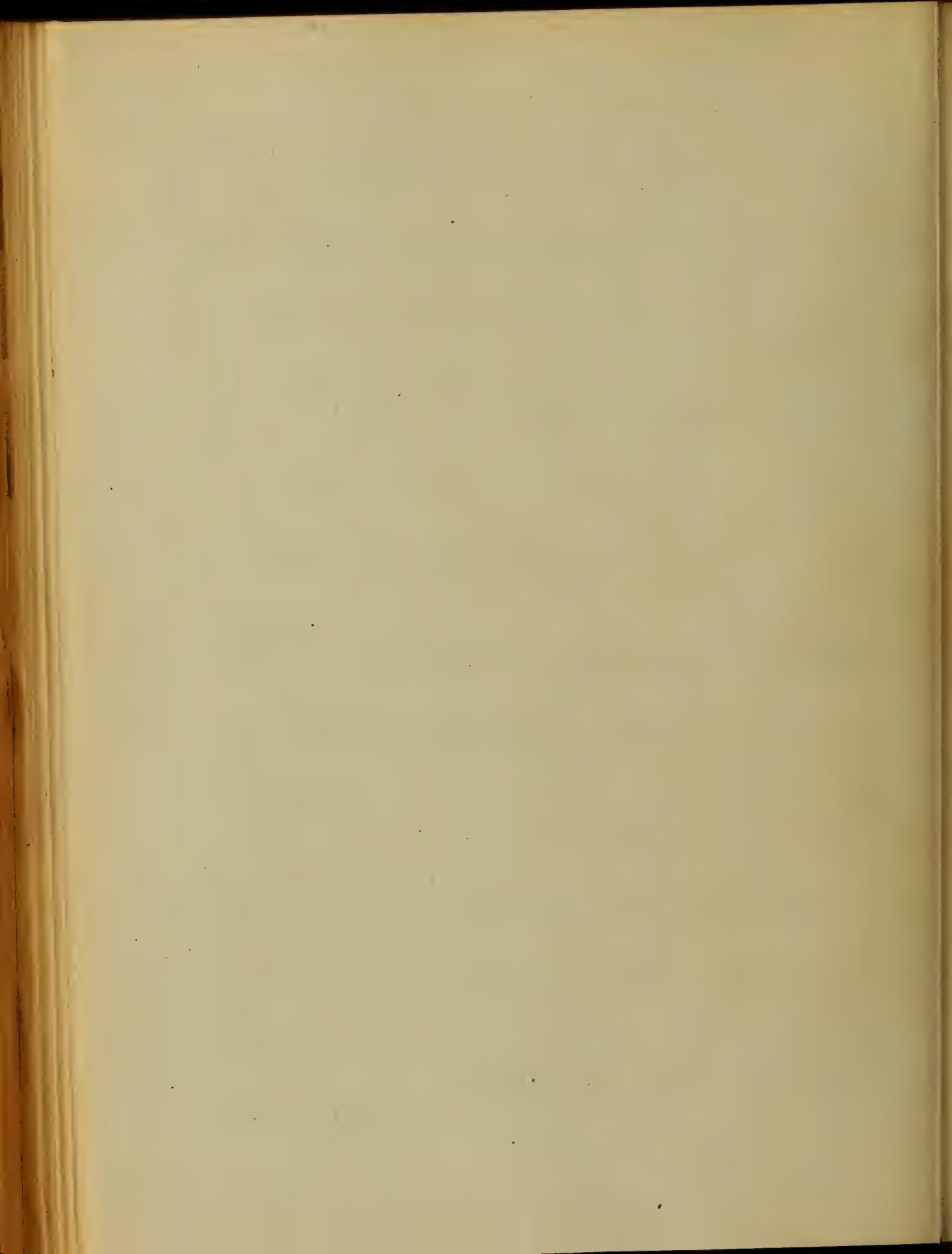
3

In local inflammation. It is a curious fact that local disease so often exhibits itself by effusion. It will not always appear upon blood drawn by cupping, tassies. Arterial blood is liable to the former, coal. Blood is more liable to coagulation when it is made to flow in a full stream, and when it is received in a deep, narrow vessel, On the other hand blood drawn slowly, and received into a large vessel appears slow to form the bark, coal. The buffer, coal 20 grains, and when blood drawn at the very seat of inflammation. Buffer, bark is no compound to cases of inflammation alone. The blood of sanguineous persons and



pregnant woman is often found to present
the buffy coat. Buffy blood is no necessary
measure of the danger of abortion. Rather
is the appearance of buffy blood in the
vagina, by itself, a sufficient warrant for abstain-
ing, more.

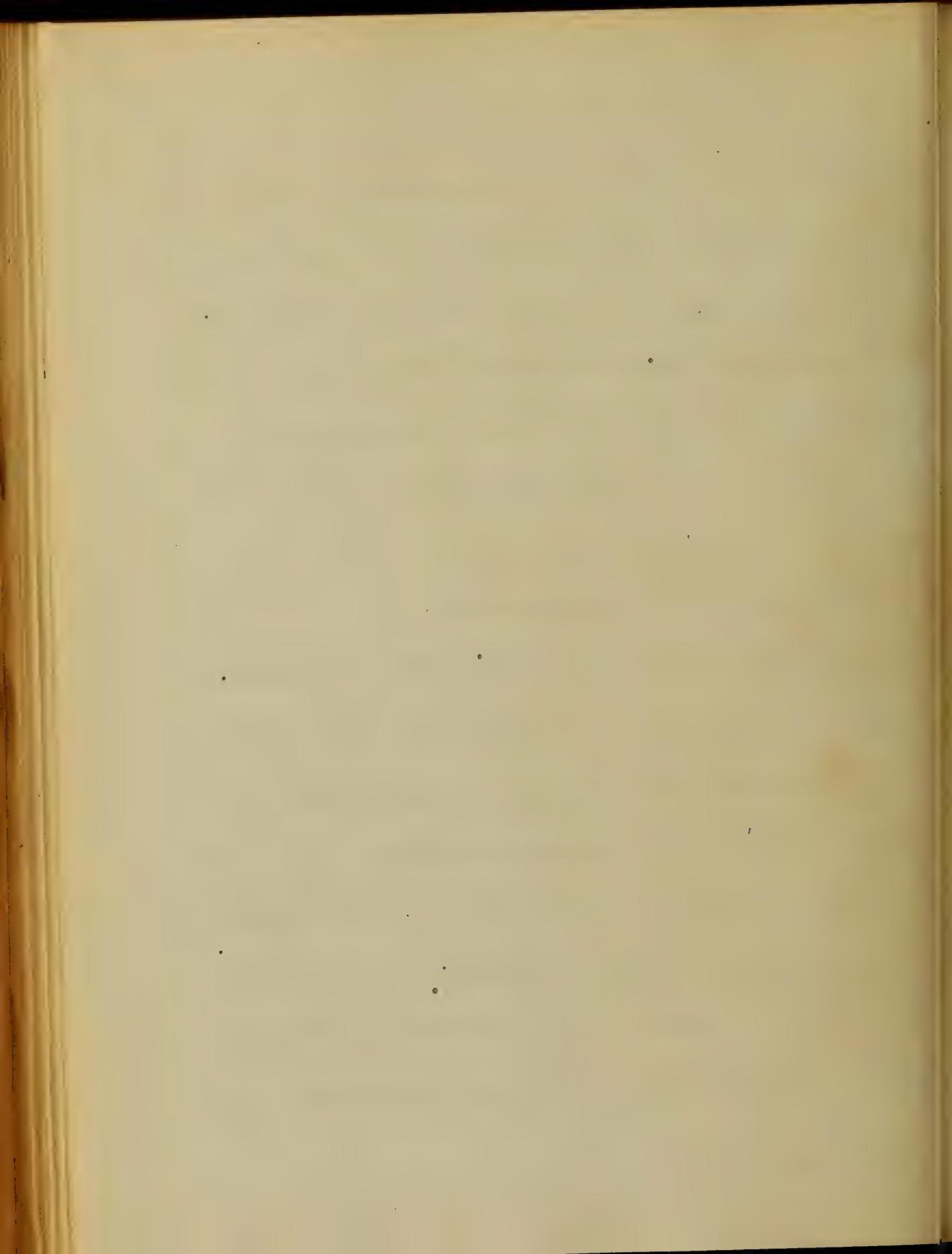
Terminations. Inflammation
has only one general termination, viz.
resolution, or recovery; like in various other
actions, prostration, and sleep, part return to
its former state - but, besides resolution,
it may have either of the following termini-
nations or effects, or consequences, as they ought
rather to be called. 1st Hemorrhage; an es-
cape of blood from the distended vessels.
2nd Expression of serum 3rd Effusion of fluid.



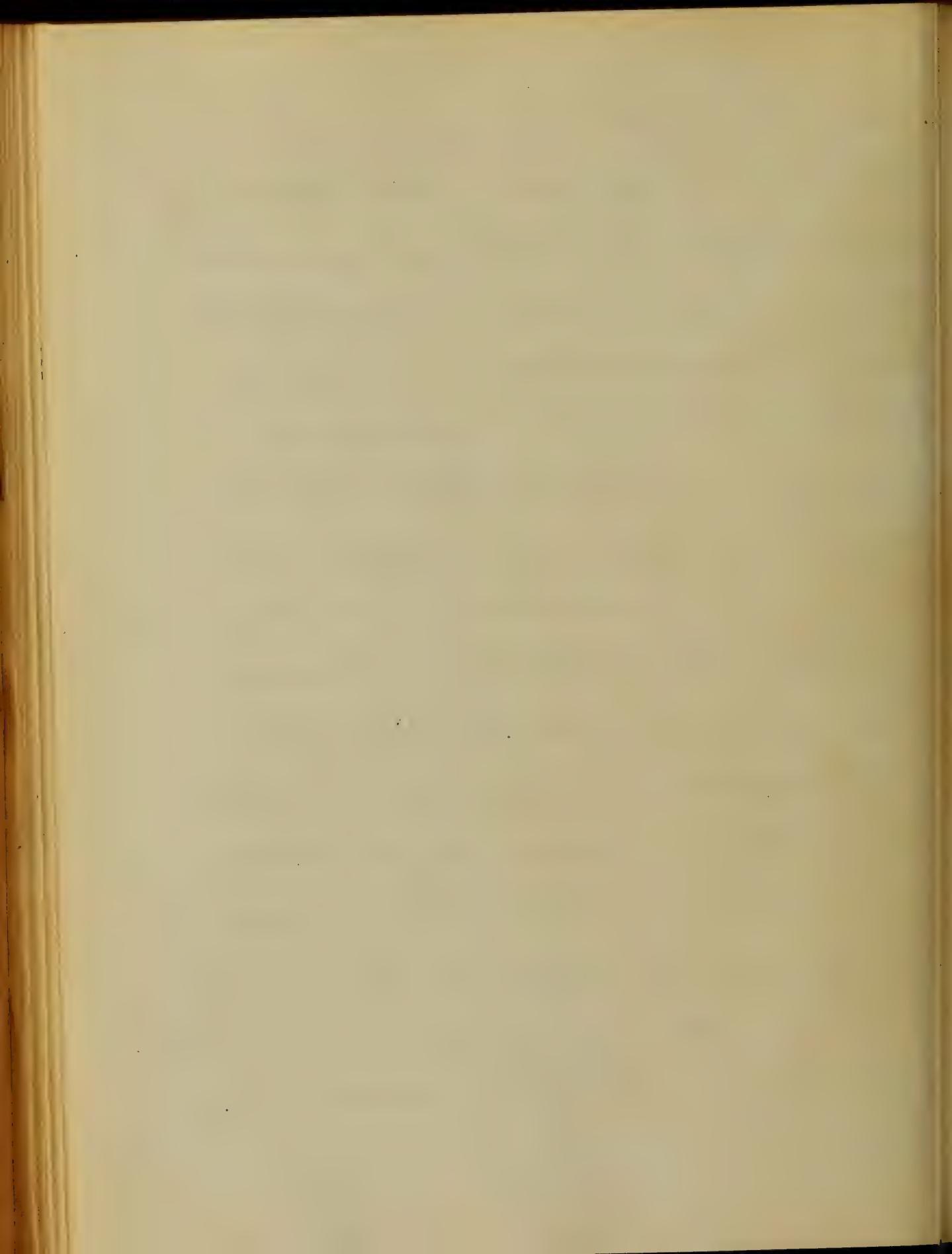
or coagulable lymph, constituting adhesion
4th suppuration, the formation of a fluid
fluid called pus, consisting with which
is the change called ranmollissement or soft-
ening 5th ulceration the disappearance
or removal of the inflamed part 6th mor-
tification, or its death.

Theories of inflammation.

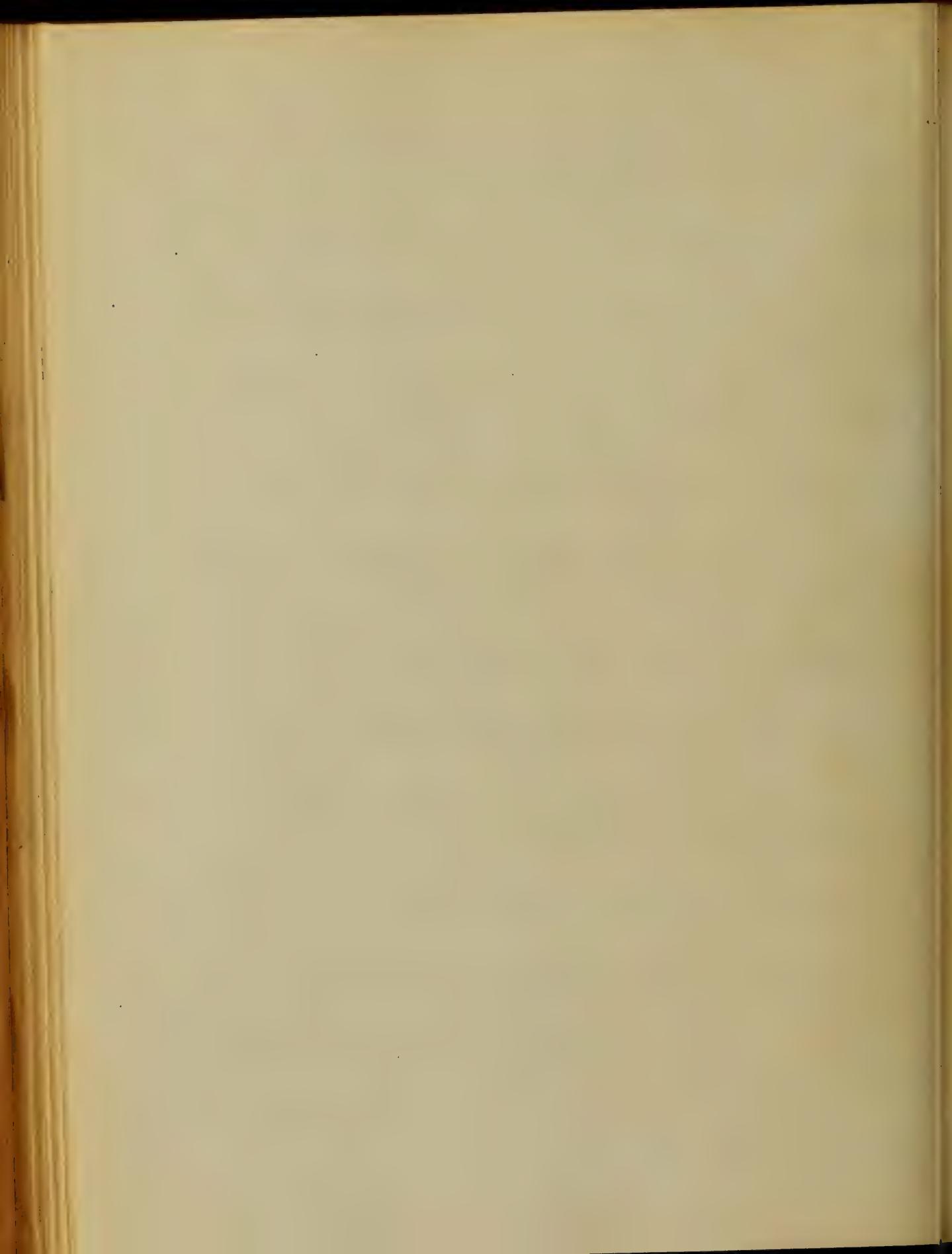
Many theories of inflammation, have been
proposed; many attempts, have been made
to explain the precise nature of inflammato-
ry action. But inflammation is a pro-
cess peculiar to life, & is on par with se-
cretion and absorption; until it is ex-
plained the nature of the nutritive vital ac-
tions, it is not surprising that gathering



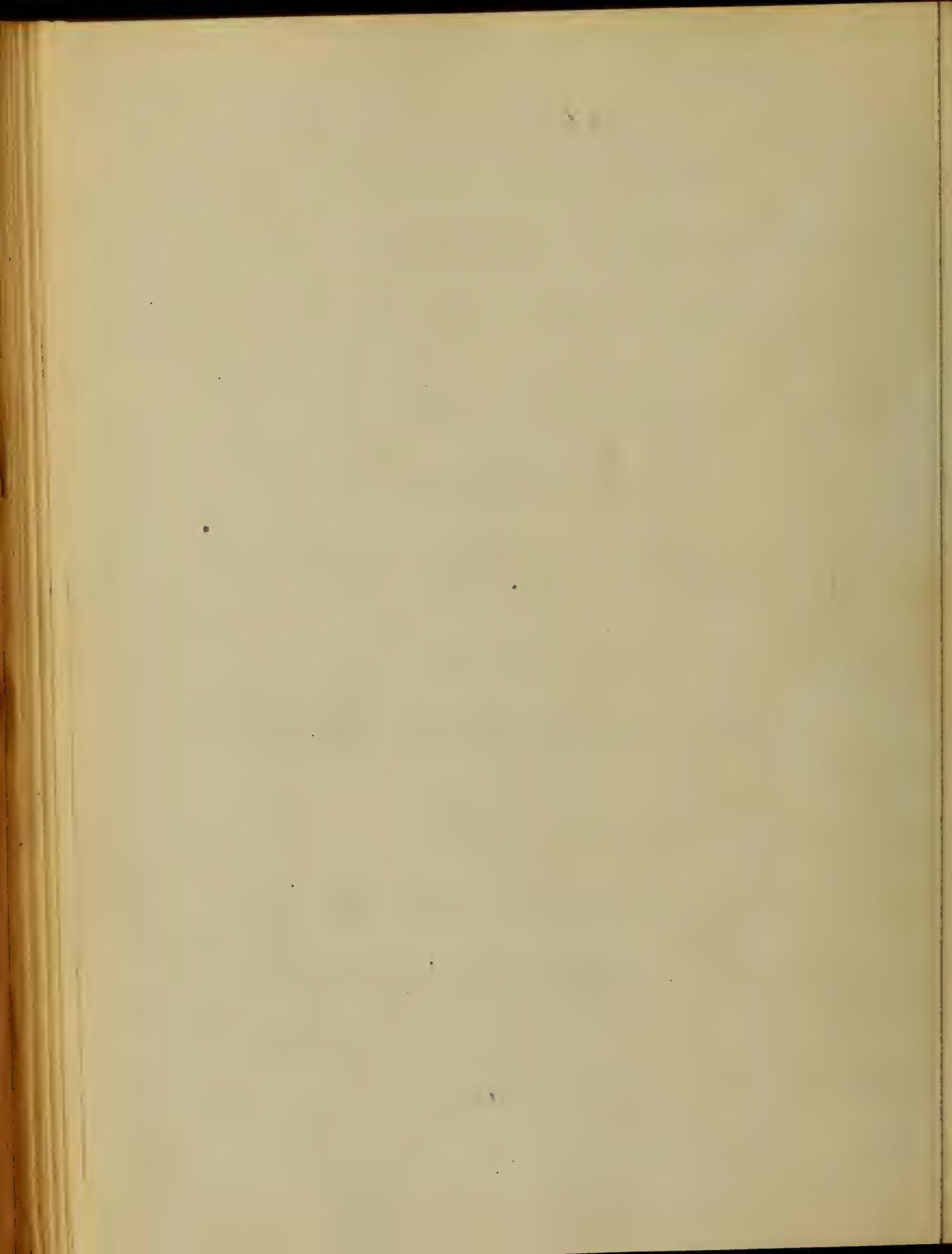
in failing in explaining those which occur in disease. It is pretty well agreed, that inflammation is a morbid action of capillary vessels. This portion of the great circulating system appears to act a very important part in almost all the operations of the animal body. The capillaries are probably the organs concerned in secreting and removing the products of the parts, and, possibly also in absorption; and the whole body, like the vessels of the capillary system, is exceedingly liable to disease. Bichat appears to have considered it as difficult to say whether the circulation is influenced by these considerations, or not. In pulmonary, it is more attempted to determine the state of the capillaries,



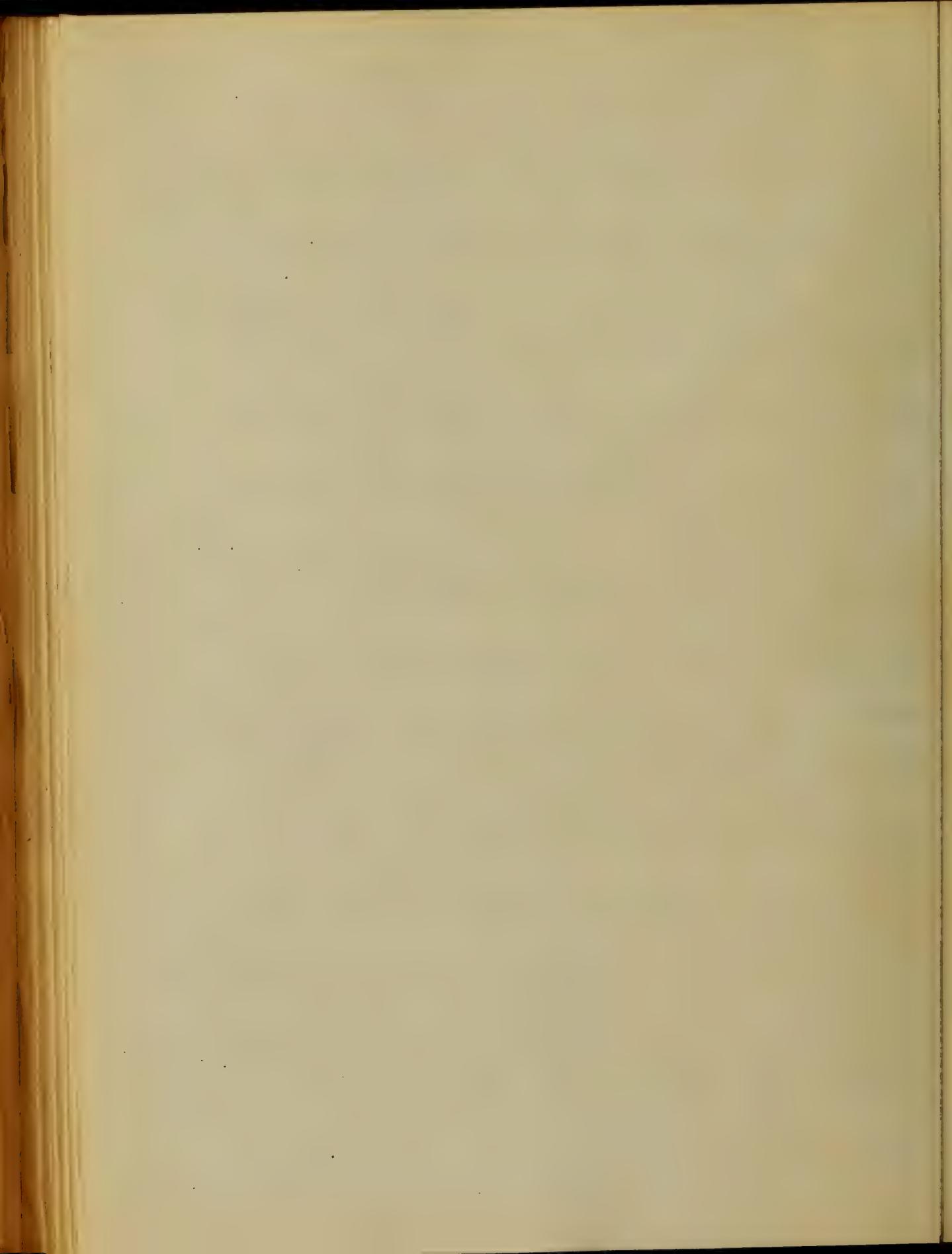
during inflammation. All are agreed, that under such circumstances the vessels of the part carry an increased, or unusual proportion of blood, but some attach to this the notion of an increased action of their coats; others imagine, that in some part at least of their course, there is a spasmodic contraction; while others, the pathologists maintain, that during inflammation, the action of the capillary vessels are diminished. Into the merits of these theories I have no intention to enter, after the opinion which I have expressed as to the almost imperviousness of the skin to the subject. The theory of increased action of the capillaries is upon the whole the



In the common theories of inflammation, everything is attributed to the energy of the blood-vessels. It is, however, deserving of some inquiry, how far the nerves are concerned in inflammatory action. Several circumstances tend to the opinion that a sluggish state of the blood-vessels is one dependency of those ~~more~~ more violent inflammations; but it would be out of place to enter upon the consideration of such an obscure and

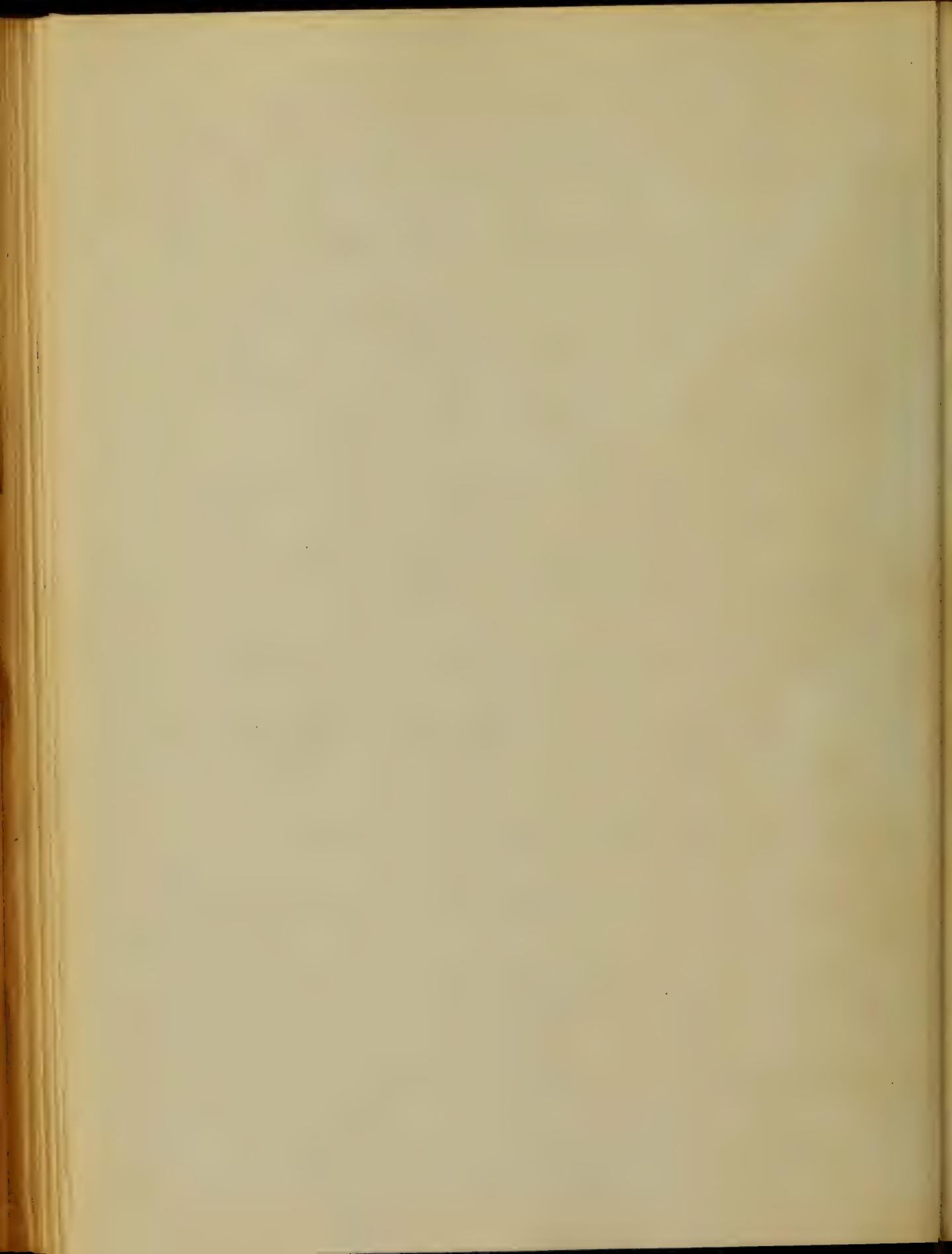


difficult question here. Nor do these comprise the only points concerning inflammation on which pathologists differ. A doubt has been expressed, whether differences of melanoid substance sufficient to account for the variations which we observe in inflammatory action. It has been suggested, that there may be differences in the nature of inflammatory action; that the same set of vessels may at one time be the seat of phlegmonous and at another suppulsive or rheumatic inflammation. This statement however appears to be wrong. The above theory is according to Gregor verified by Pöller — Various other

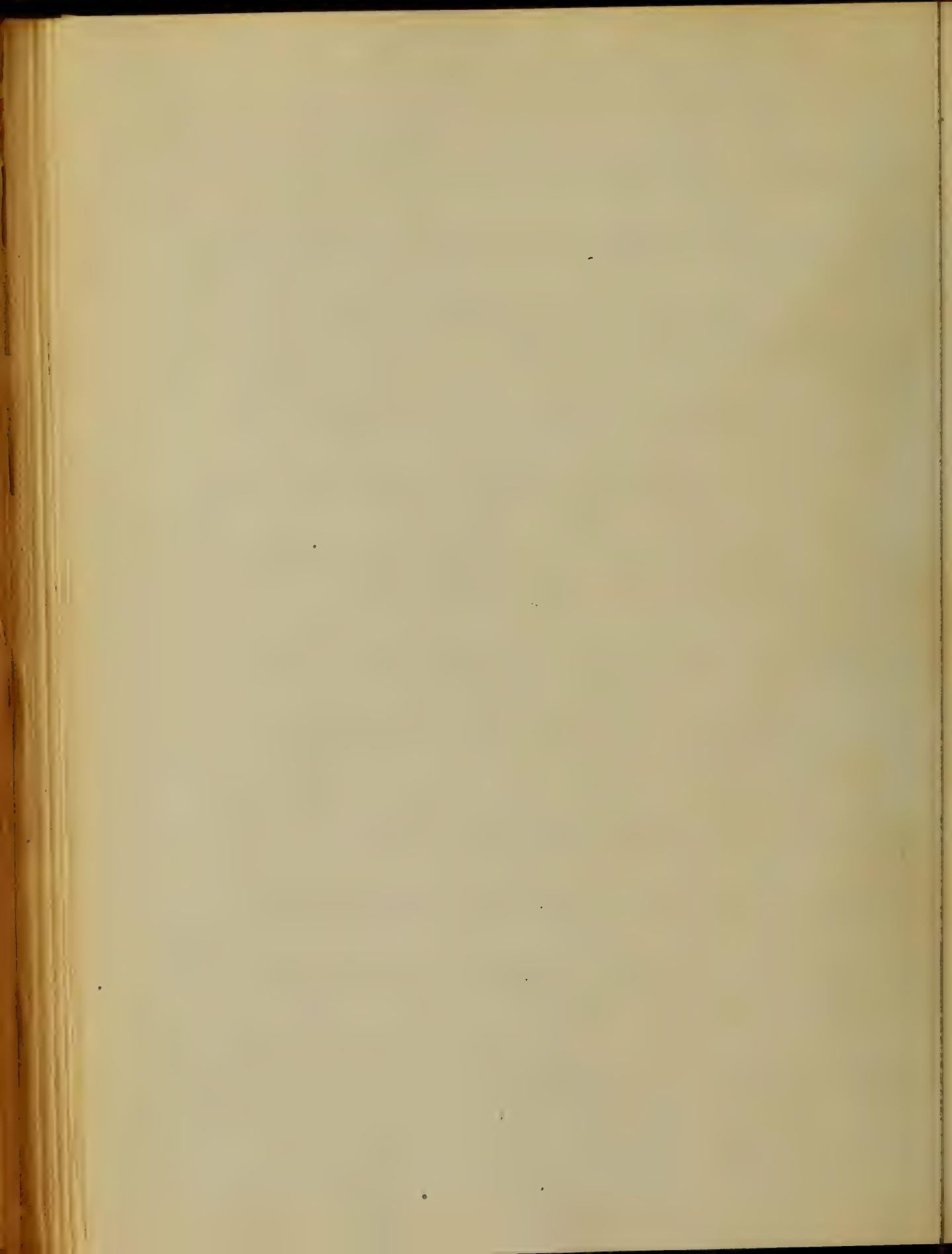


Theories have been put forth by many
writers. Some attribute it to increase of vis-
cosity of the blood; others to increased heat,
that is an obstruction of the capillaries, or
entrance of globules too large to pass.
Lancet, in *Athenaeum Review*, opposed that, &
considered it a form of the extreme disease.
Heenter ascribed it to an increased secre-
tion. Wilson Phillips and Hulley, to ad-
hesions; - Bence to coagulation; and, Earle
to an obstruction of the capillaries.

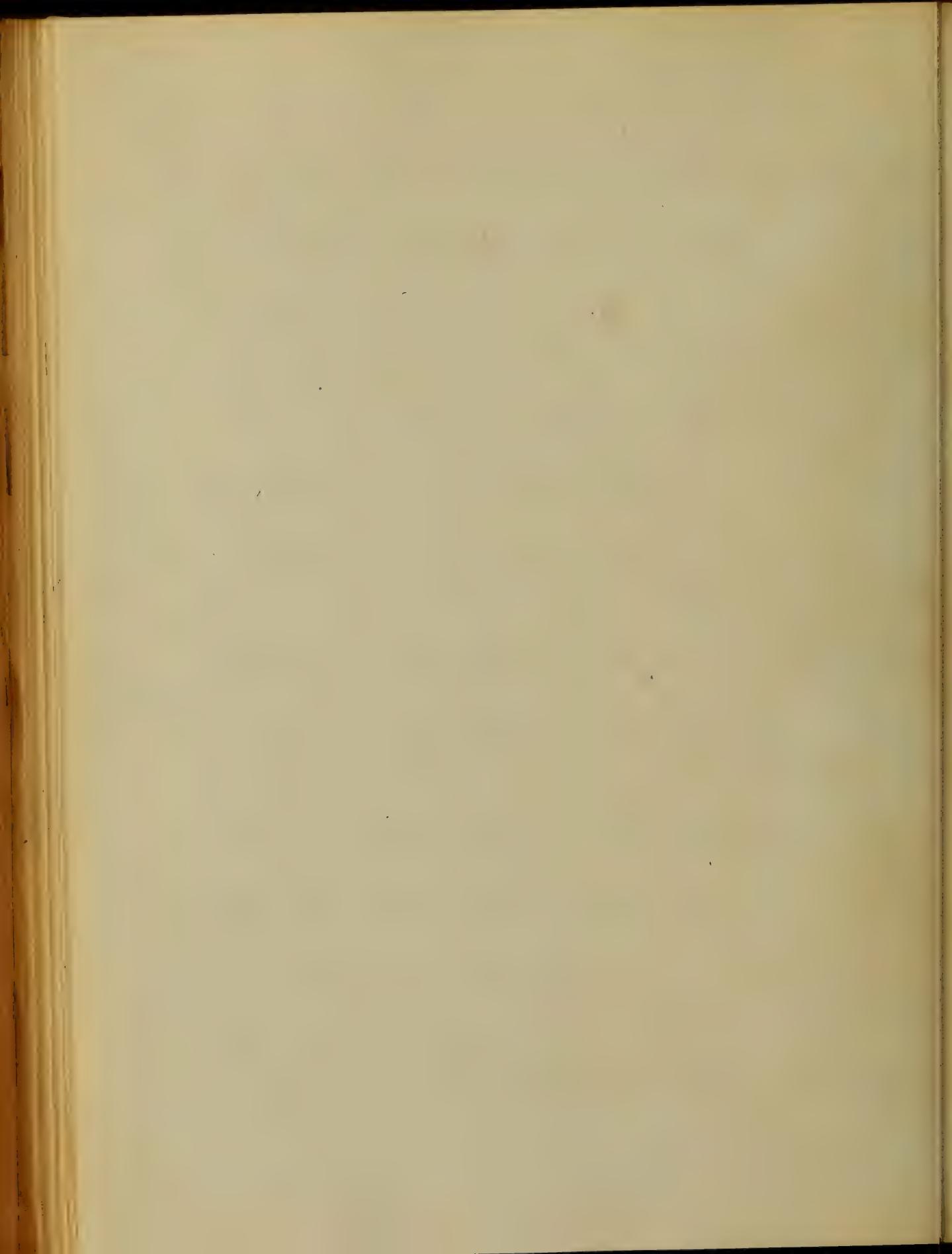
Dr Macartney considers that the im-
mediate cause of inflammation is a sense
of injury felt by the organic mass; and
shows that inflammation often occurring
may often be prevented, by soothing,



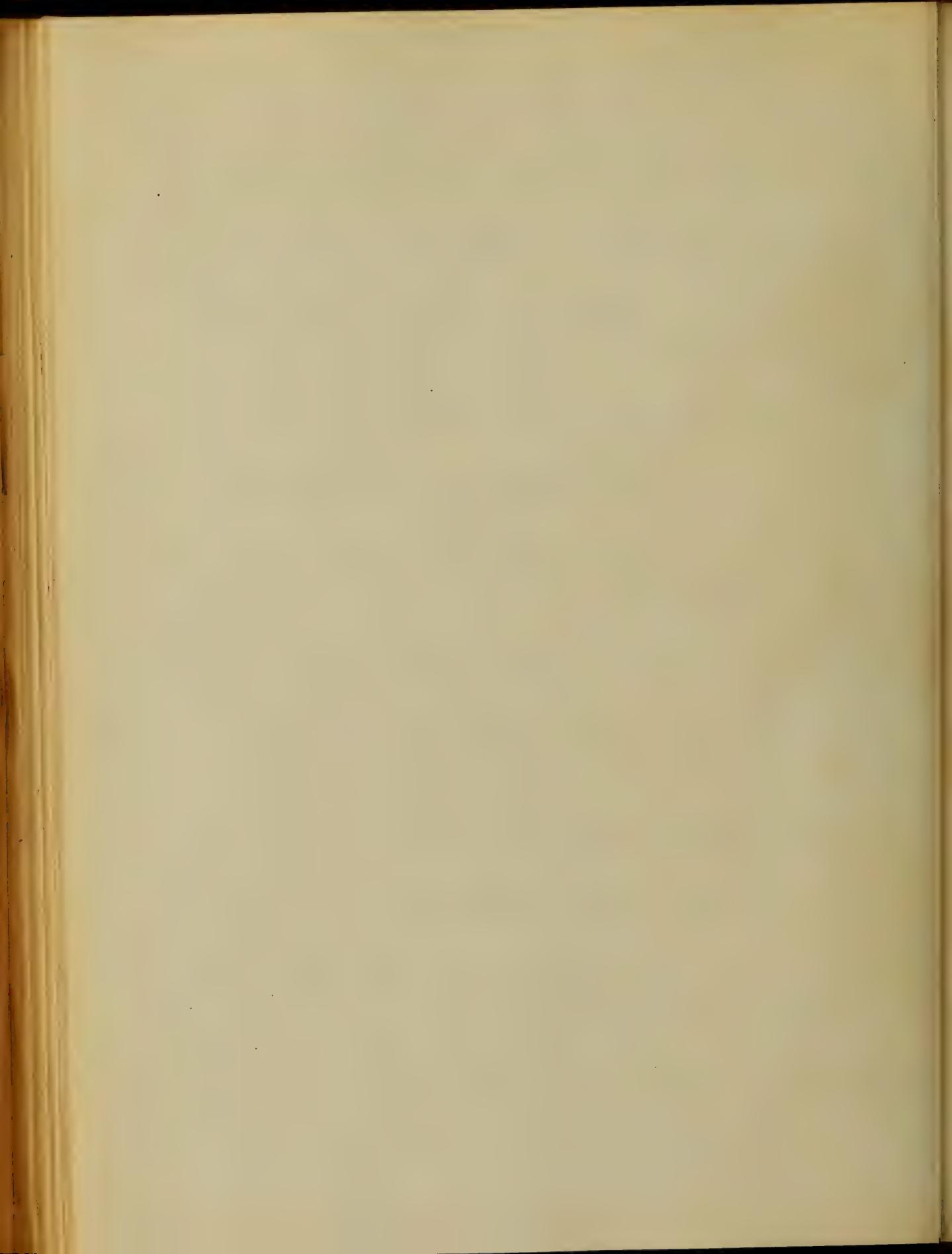
and stopping, it's power is irritant,
and inducing comfortable sleep. Dr.
New Wharton Jones, believe that the
red globules have an mutual affec-
tion for each other, and for the sides
of the capillaries, Now must we omit to
mention Liebig's theory, that there is an
unusual rapid union of the tissues of
the inflamed part, with the oxygen
carried by the arterial blood. But so
far as we are able to find, Liebig's theory
has made one step towards the solution of
the mystery by considering inflamma-
tion merely as one mode of deviation
from healthy condition, and consider-
ing what separate it is from the pro-



in health. He shows that respiration
the air we breathe, contains a large
proportion of the lymphatic
vessels, the vessels of the body,
which contain the formation
of cells which may be developed into
new muscles &c:- So in inflammation
the tissues distinguishable either directly
from the skin, especially the epidermis, or from
basalna or formative fluid for the
development of morbid cells; in some
cases the small organisms called epithelial
cells, which are found in parenchymatous
organs when hepatalized; - in others the plas-
tic cells found in the adhesive matter; in
others, pus corpuscles; others again, the inva-
sive cells of cancer and other morbid



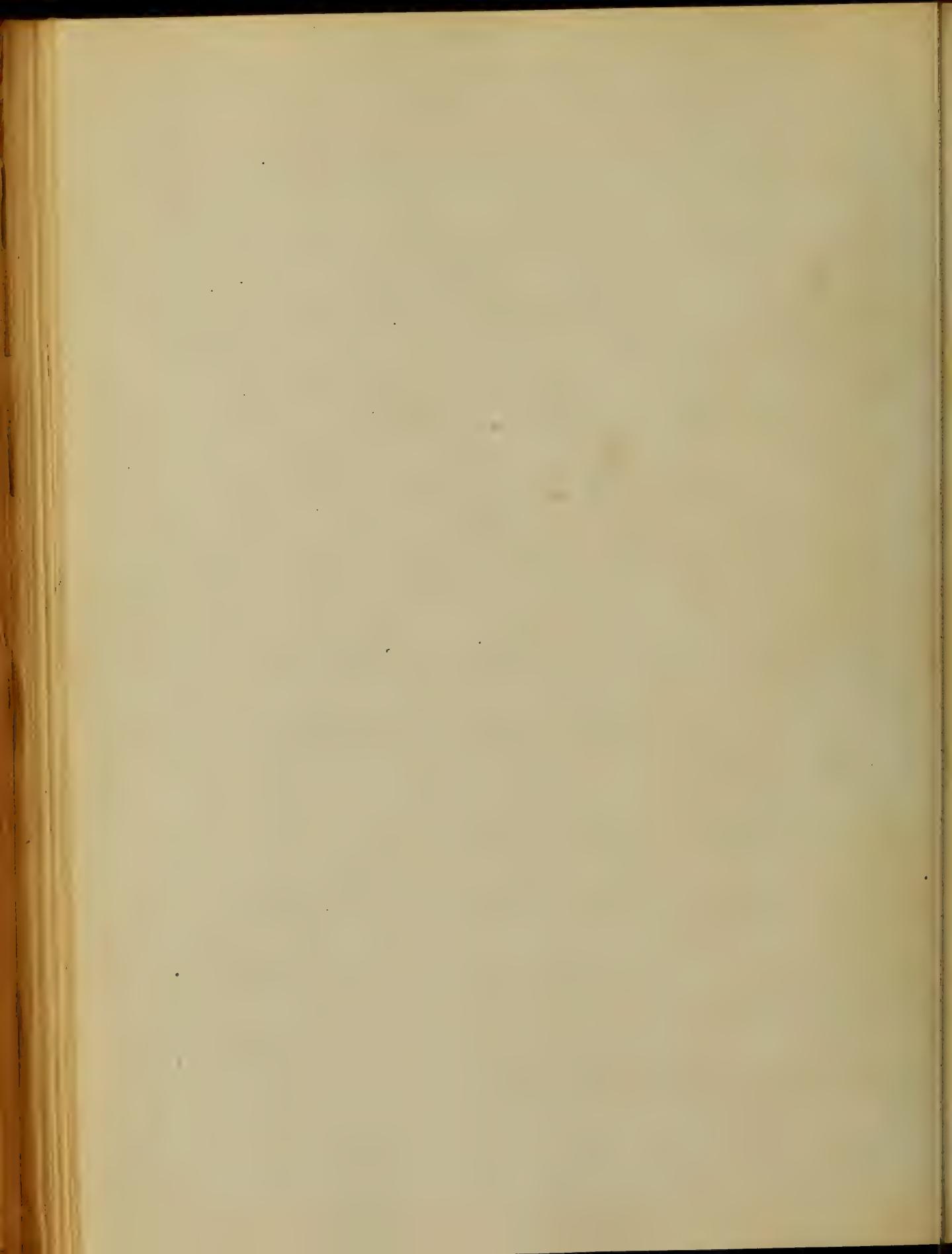
growth. He considers inflammation
as only a part of one great
disease which may be called abnormal
nutrition; and more especially that species
of it which is accompanied with
a flow of liquor sanguineus; and shows
that there are three different
forms of inflammation, viz., heat, pain,
and redness, and that the last
is the evolution, purely of the in-
organic which precedes it. With regard
to processes that result from an
injured part, many statements have been
formulated that appear to be totally con-
trary to facts, and to have arisen from inde-
pendent microscopical experiments. It



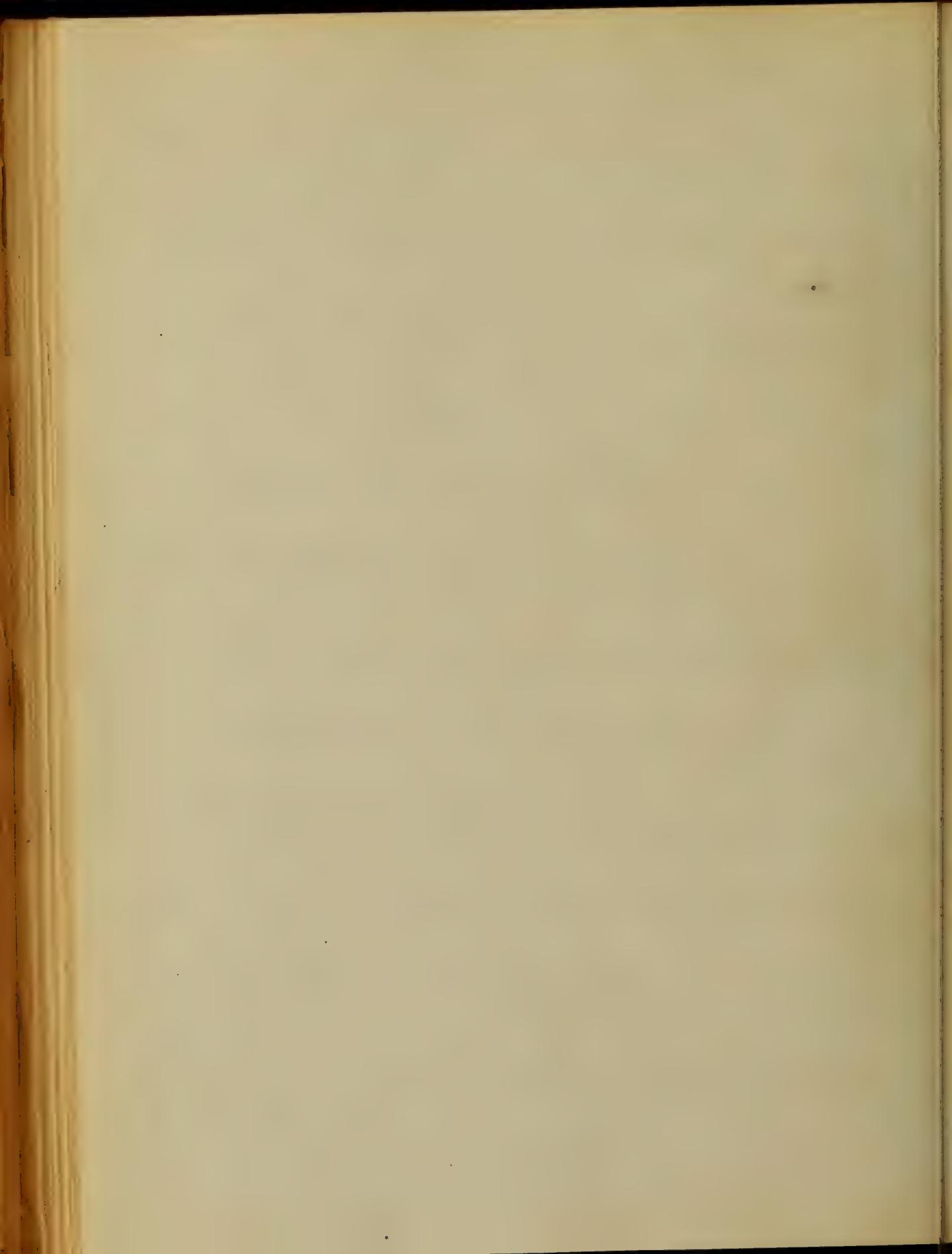
11

is known that the application
of the red hot iron to the skin
causes, in the first place, the vessels
may be seen to become dilated and bursting
with blood, which however, does not
but at last coagulates and becomes stiff, and
it has been concluded that these phenomena
are inflammations, and consequently
that the coagulation of the blood is an
essential element of inflammation.

In Galen's time it was believed
that this coagulation is merely the
natural effect of the heat of the
irritating matters employed to create the
so-called inflammation; and besides
such writers as Oliverus, Macer, and other



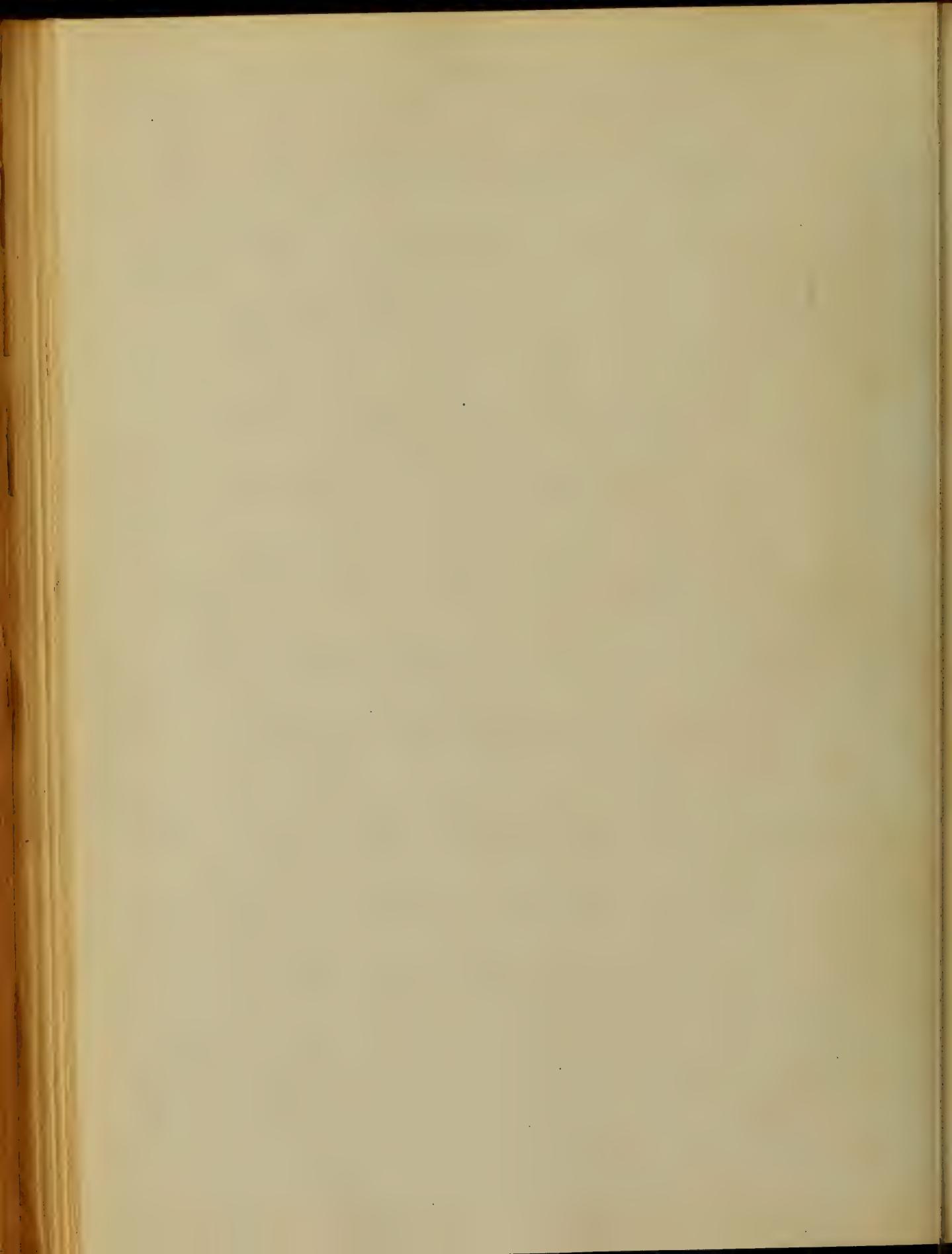
late authors of good credit affirm most
positively, ~~that it is impossible to find~~
inflammation in locally cold-blooded
animals at all. The facts that have
first established are the following:-
That in the capillaries of every part of
the inflamed part, and the larger vessels in
its vicinity, the blood is circulated
with extraordinary rapidity, ~~and when~~
~~sluggish~~; that this vascular excitement
is followed by exudation of serum or
lymph through the capillaries into the
intervals of the part; or perhaps by the
expulsion of the exudate and ~~the~~ conge-
tion of blood; that subsequently in the
course of the inflammation the blood stagnates



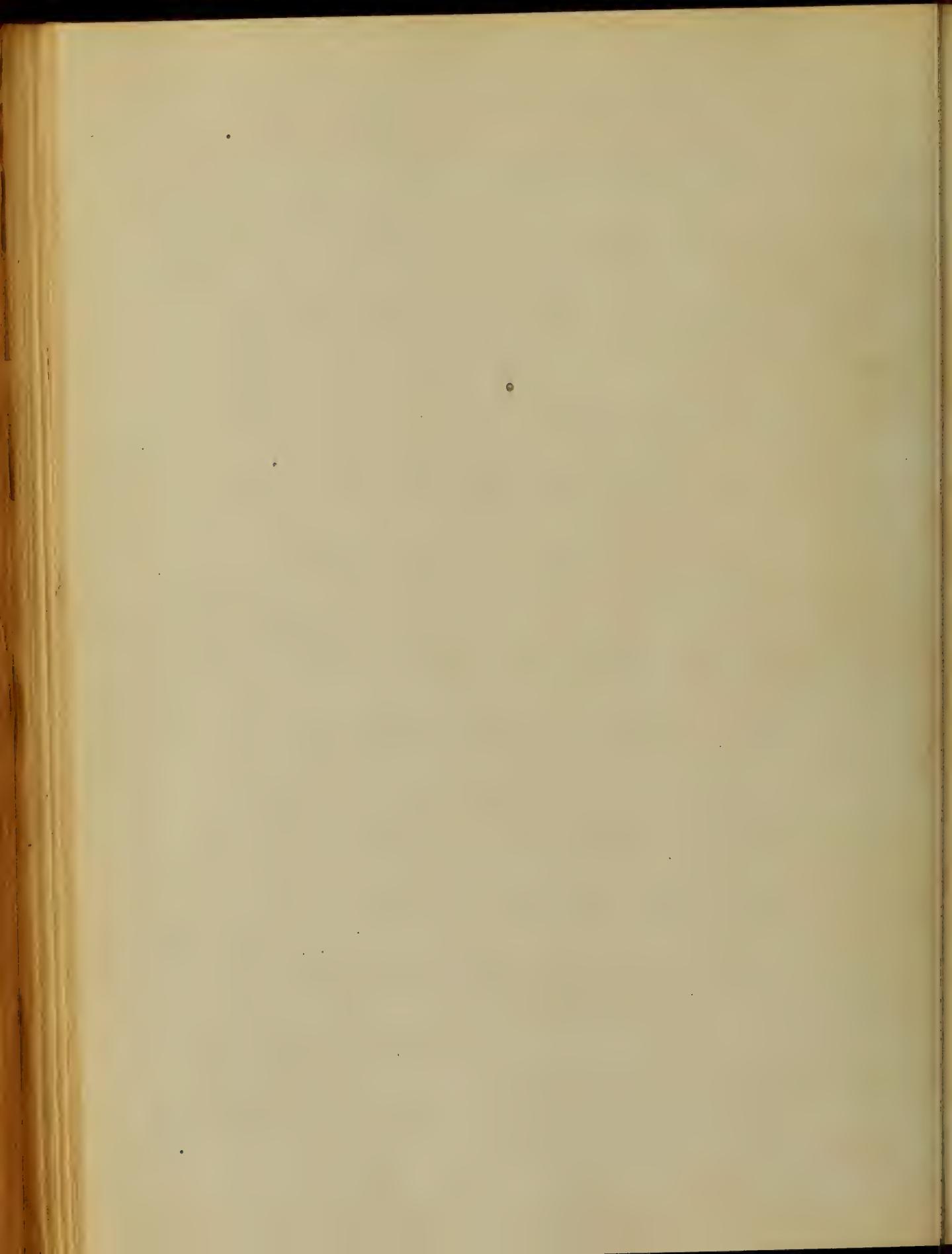
and the red globules adhere to each other,
and if the inflammation continues, the tissues
become completely broken down and dis-
organized at the points where the inflam-
mation is most intense, and that pus is
formed; out of the exuded lymph; or if
the inflammation increase in severity, th
pus does not circulate in the vessels, the
tissues become soft and flaccid, and
in fact mortifies.

Treatment of inflammation—acute.

In the treatment of acute inflammations
and its attendant fever the indications
are, to reduce the increased action of the
vessels; to relieve pain and suffering.



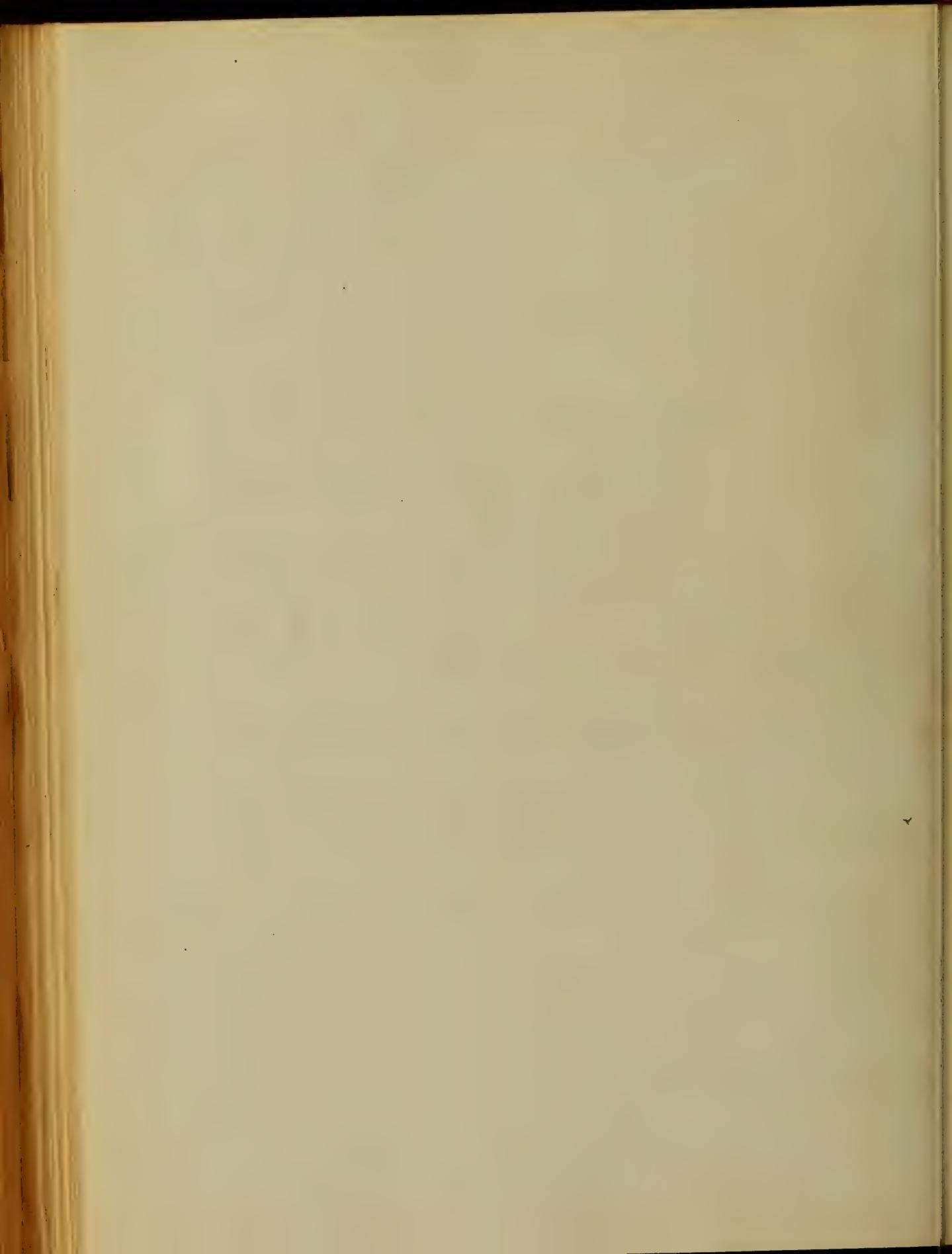
selement, and to restore the secretion, in
this case, to a state of
nerves anodynes. The first and most
important method of action,
should never be carried so far as to produce
syncope, or fainting, but only far enough to
produce a perceptible change in
the action. Now it required to be
understood, that this suspension of
depends upon two causes: first on
lack of its natural stimulus, the blood,
secondly, and principally, on a peculiar subtile
influence transmitted to it from the brain,
which the latter does not receive its due
supply of blood. The
more it is of blood people may be service



- when the blood is morbidly increased,
in quantity or quality, - and
it will be well to remember the effects of bleeding in inflammation dependent
upon its ^{deleterious} ^{destructive} effects upon the tissues.
and I would say, that it is better
would it be necessary to bleed a debilitated
patient, the ^{effete} ^{dead} should be prevalent with
the ^{alive} ^{healthy} ^{parts}.

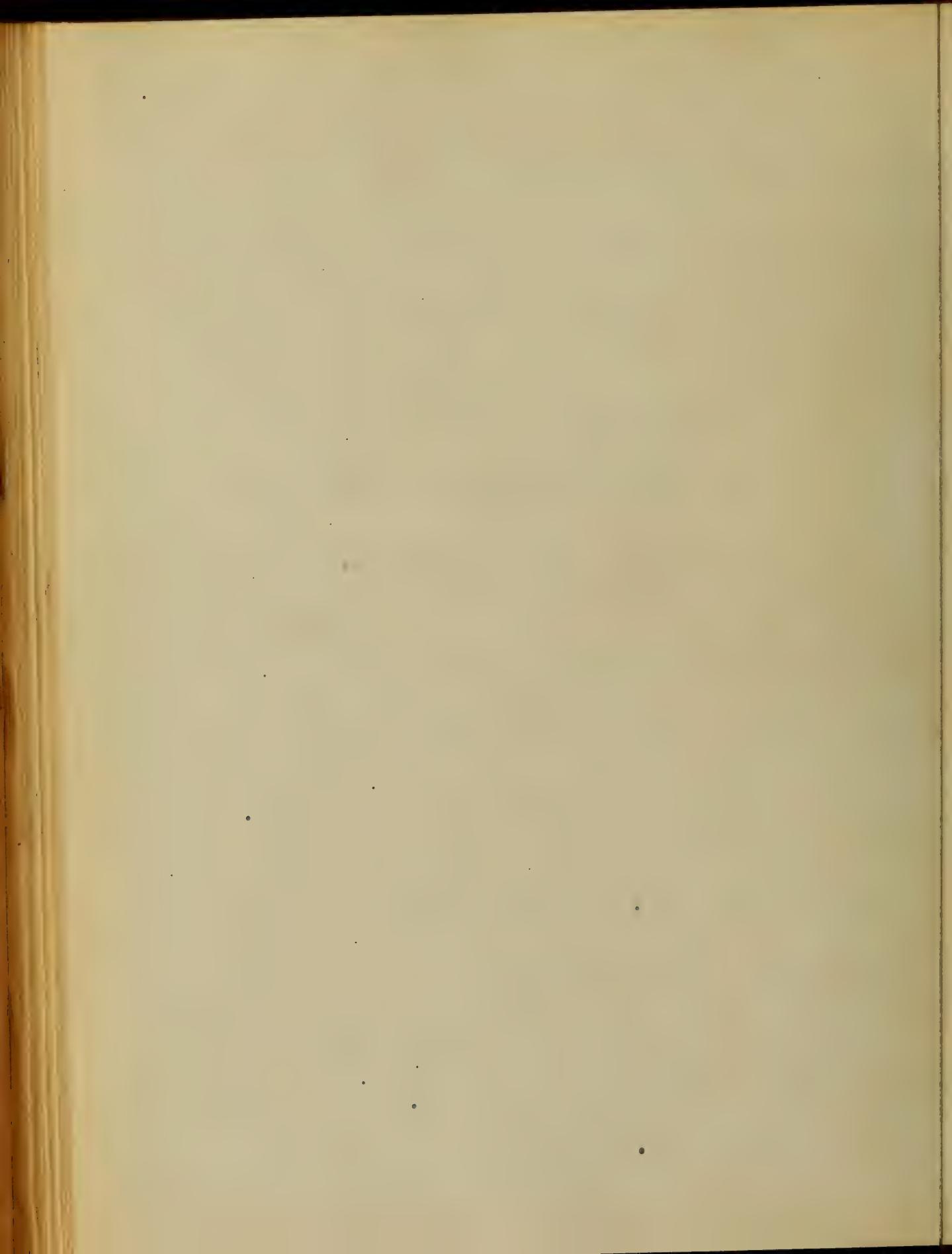
Manner of bleeding. To this purpose
the blood should be drawn from a large
vein, and then with sufficient speed to
that effect. Now if the vessels are drawn
slowly, so that the vessels have time to contract
and gives to their diminished contents.

The following are the methods of bleeding:



ways to assist the cure of the disease
the doctor may call upon the services of the
surgeon, physician, apothecary, & others.

Quantity to be taken. As a general rule
the dose should be given either in powder
form or of the lips lividity about the eyes
either in decoction, water or strong
wine, or in oil, or in the form of a poultice
but full syrups should never be used.
In case of bleeding without pain
one according to the age, sex, and temper-
ament of the patient. If the patient
young and old have in the middle-aged by
the time of life, the quantity of the dose
is to be increased. In old age
there will be no increase of power, the dose



tolerance is increased by the exciting disease, effecting a
cessation of bleeding in certain parts, & even in others

the hemorrhage may be stopped.

and the patient may be saved.

venesection is not to be resorted to in case of acute inflammation. There are three

types to be considered: viz. First, the patient

is not yet affected. Second,

First affected, but the disease

is not yet so far advanced as to cause death.

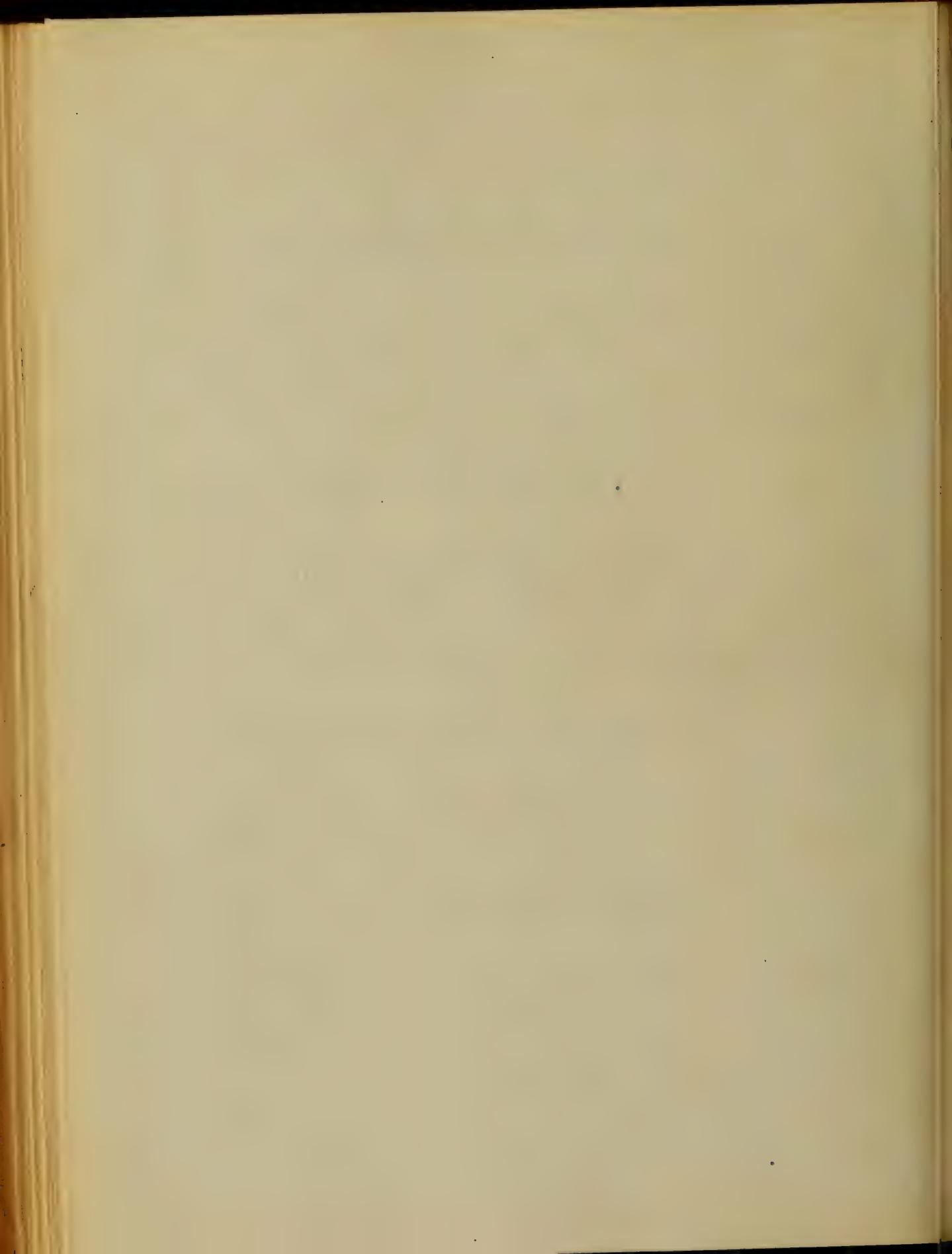
Secondly, the disease is

so far advanced as to cause death.

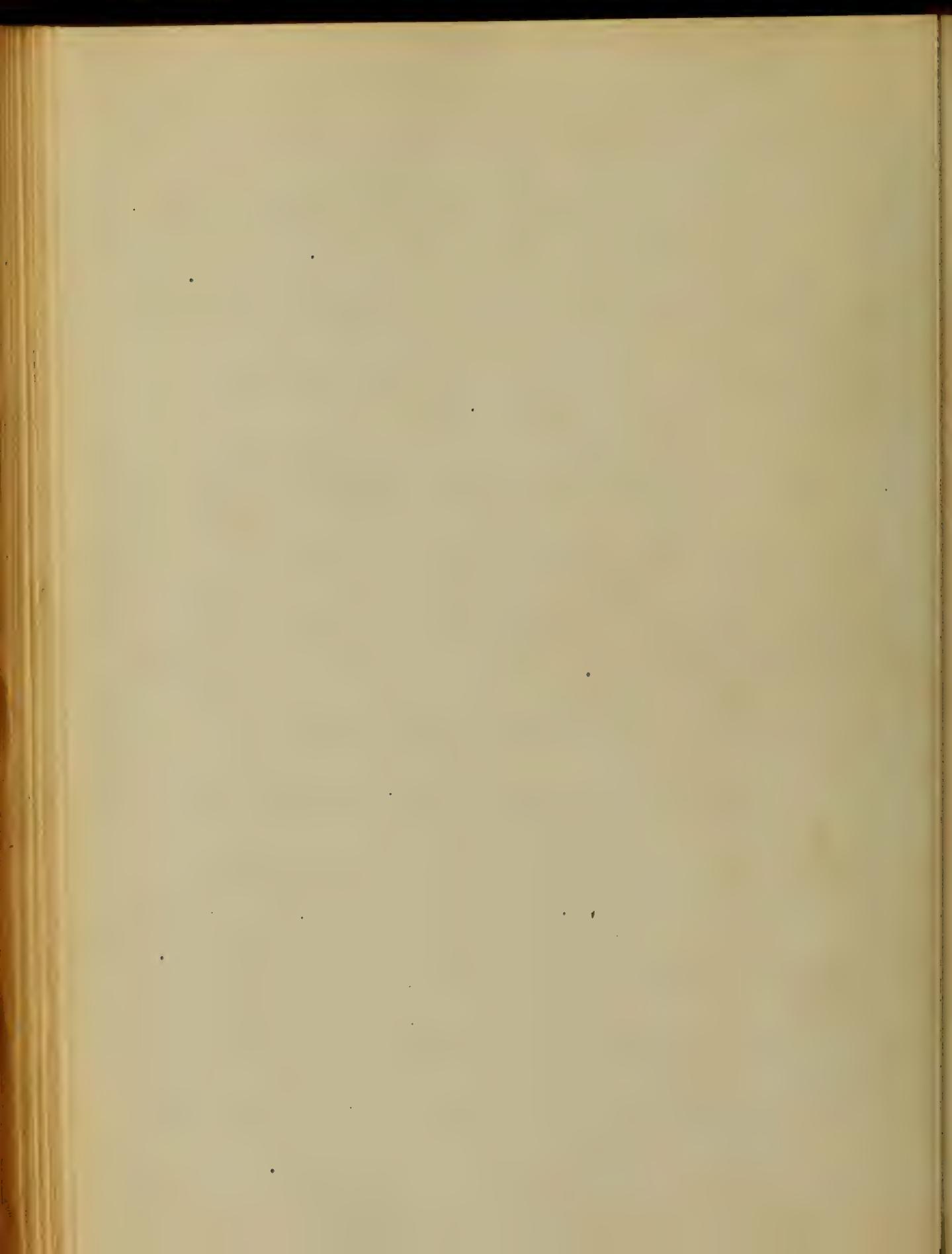
Under the first heading there

may be included a number of antiphlogistics

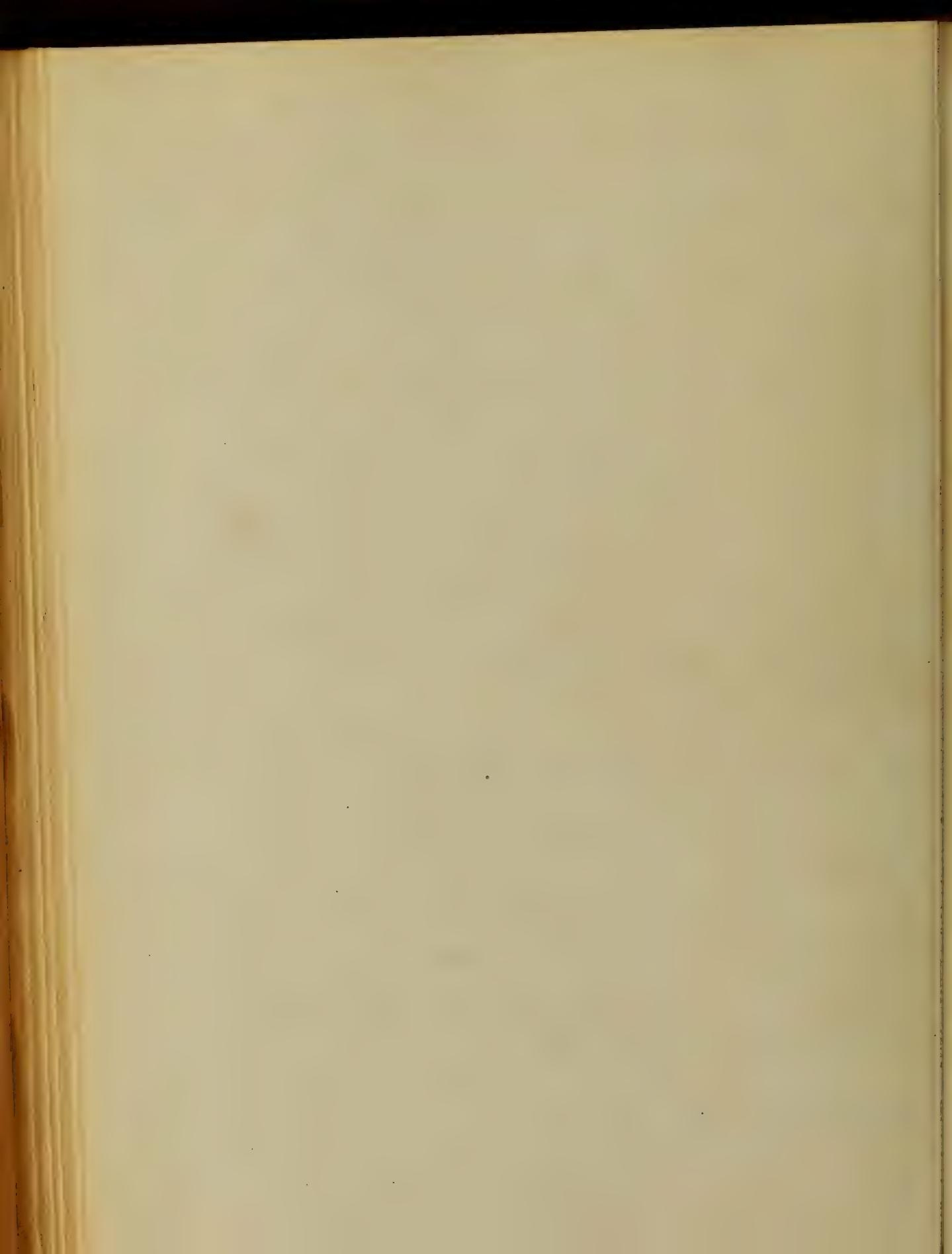
which act by increasing certain secretions, or by



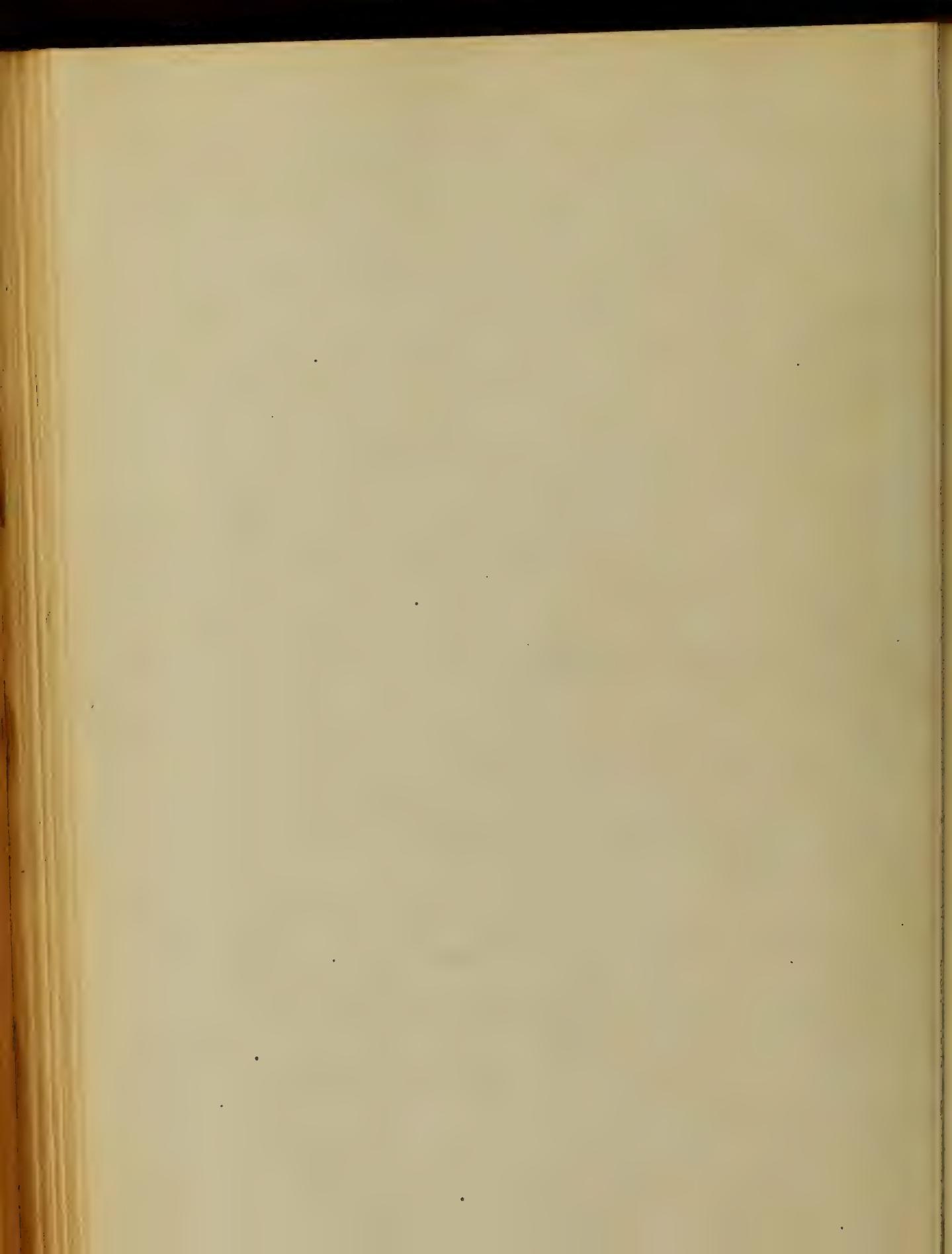
an specific lowering agency independent of my crea-
tions, — most of them being capable of acting
in both ways. Practitioners should
at the commencement of all cases, except where
they consider an infection is either known or
diseased or infected person, except following the
wounds of the alimentary canal, and in ea-
siness and safety. These should be kept under
water-free secretion from the liver and intestine
and evacuate them rapidly: such as calomel, fox
and other black draughts, mercury, &c.
Mercury by many writers is mentioned as a
but does not at all times produce the desired
effect; nevertheless it is spoken of by
all authorities and no use their remedies
without in excess. So patients often - rest, &



The secretions, and excites the absorption of
excretor products; it is chiefly advantageous
in ulceration in any kind of disease, par-
ticularly, with a leathery or adherent, or when
the nature of the disease and the state of the
body demands bloodletting, money cannot
be regarded as a subsistence, and may even
auxiliaries; and if employed to no purpose,
its availability will most certainly do more
harm than good. The best, confirmed
ministering it is in the emetic form,
of which one to five grains may be given
at intervals from four to six hours, until
such a portion of it, as is practicable;
but all violent induction should be
avoided, as it is a great evil. The calomel should
be combined with opium, & the emetics.

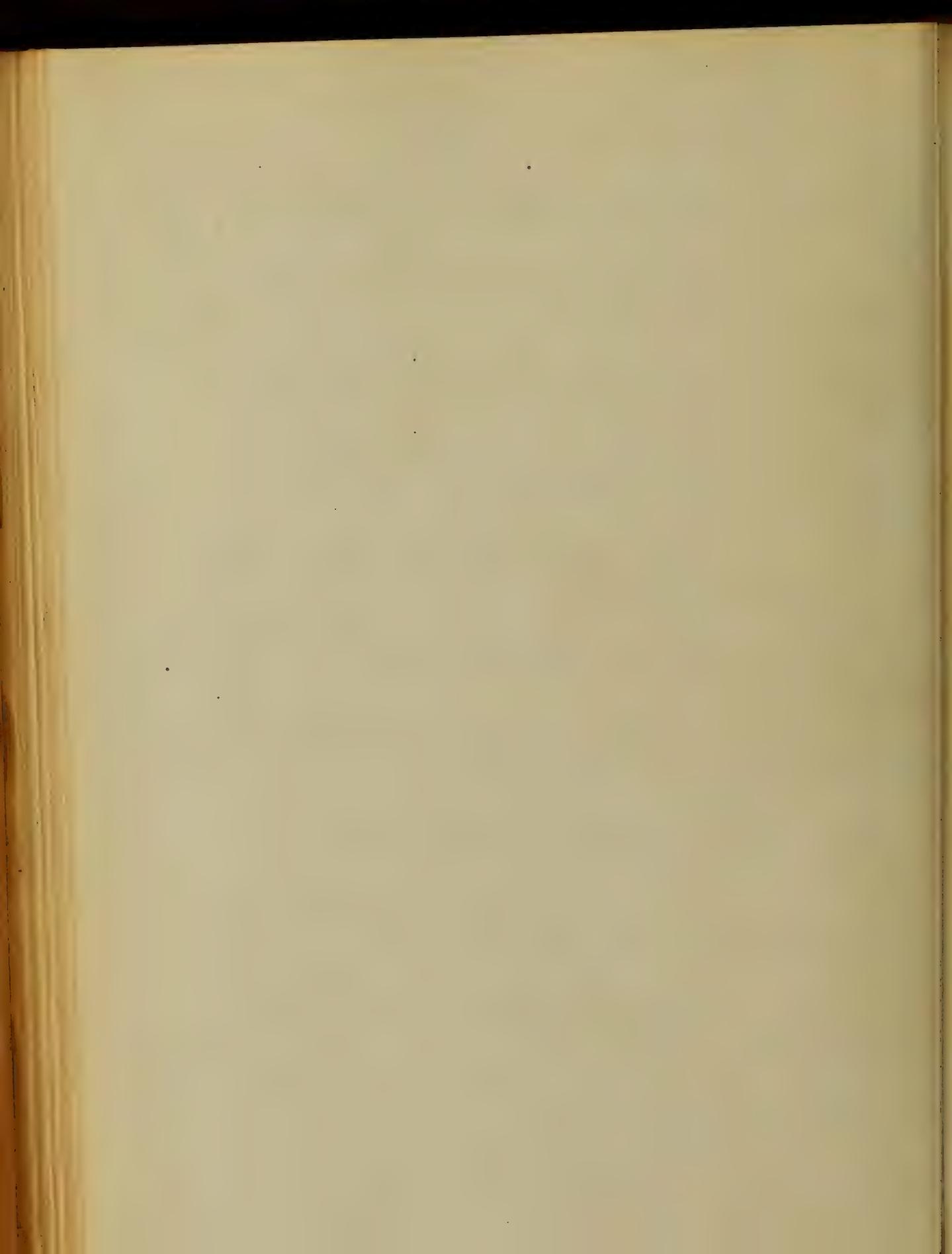


prevent it purging too freely. Antimony can
other direct antiphlogistic; it may be admin-
istered in doses of $\frac{1}{2}$ to $\frac{1}{4}$ grain, with each
dose of external sal volatile; in larger doses
such as two grains it is a most potent
remedy especially in pneumonia; it does
not cause vomiting after the first few doses
but uses its sedative influence without pro-
ducing an evacuation. Iodineum is a remedy
of precisely the same character; it is most use-
ful in gouty rheum, rheumatic affections.
It may and does frequently produce bilious
stools; but it is a better medicine to
and they are indispensable to its good effect.
Aire and other saices may also be in-
convenient and disadvantage, their abuse may
and easily purging in those, and indeed

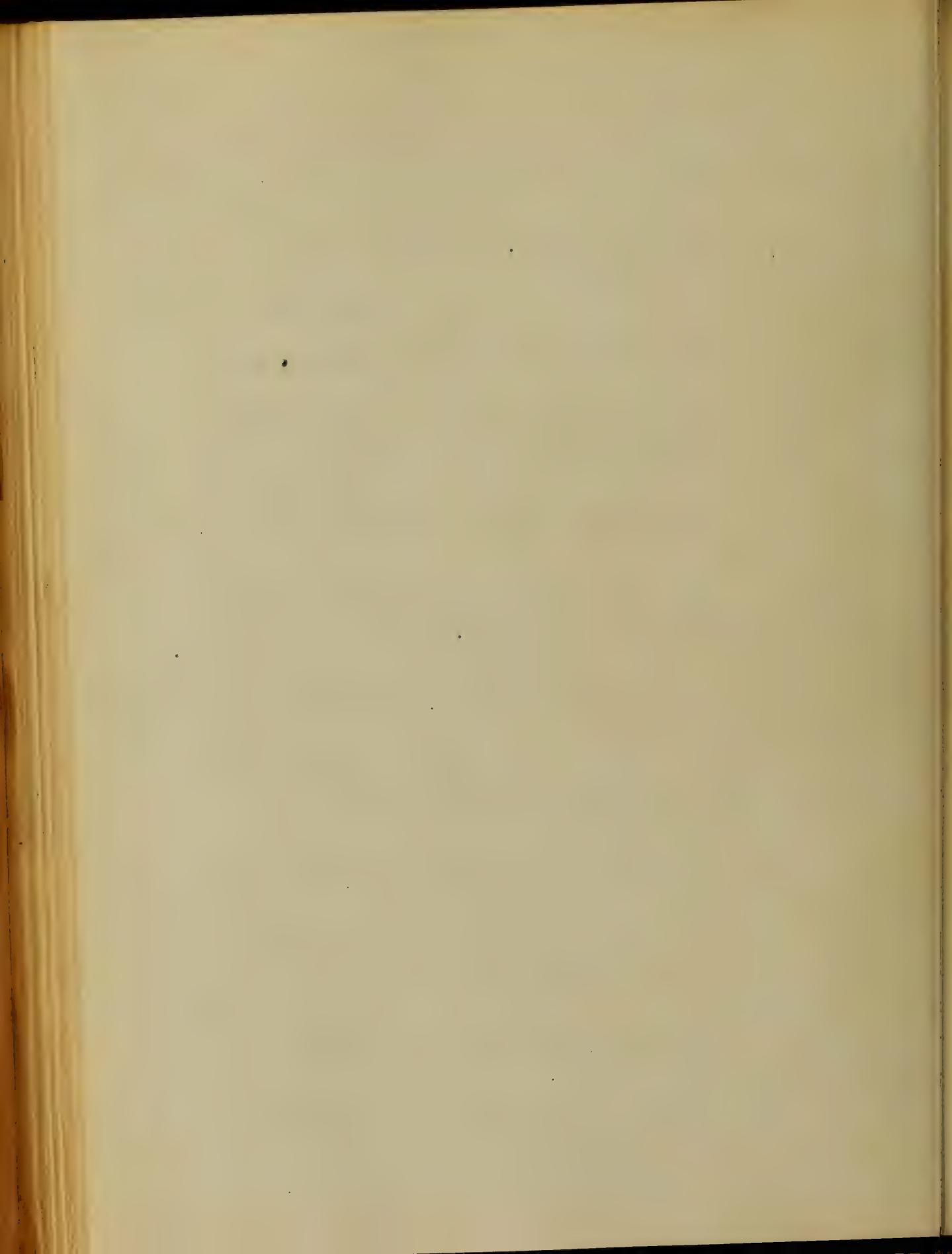


Salvia officinalis, *Sedatives not sedatives.*

These remedies reduce, & control pain, heat, dryness, &c. in the nervous system, increase the sensations, & the mind becomes, calm, and digestible, the two first of which, in particular are of eminent service, when combined with opium, quieten inflammation, allay irritation and soothe pain, in cases attended with great nervous debility. Narcotic, opium principally decreases the sensations, and increases tension or excitement; hence it must not be given in acute inflammation till after bleeding; but then a large dose two grains may be given with a few drops of saline to prevent irritation. But it is the same *qua non*, and may be given in inflammation occurring in debilitated natures, such as persons ill from purulent & other intestinal diseases, &



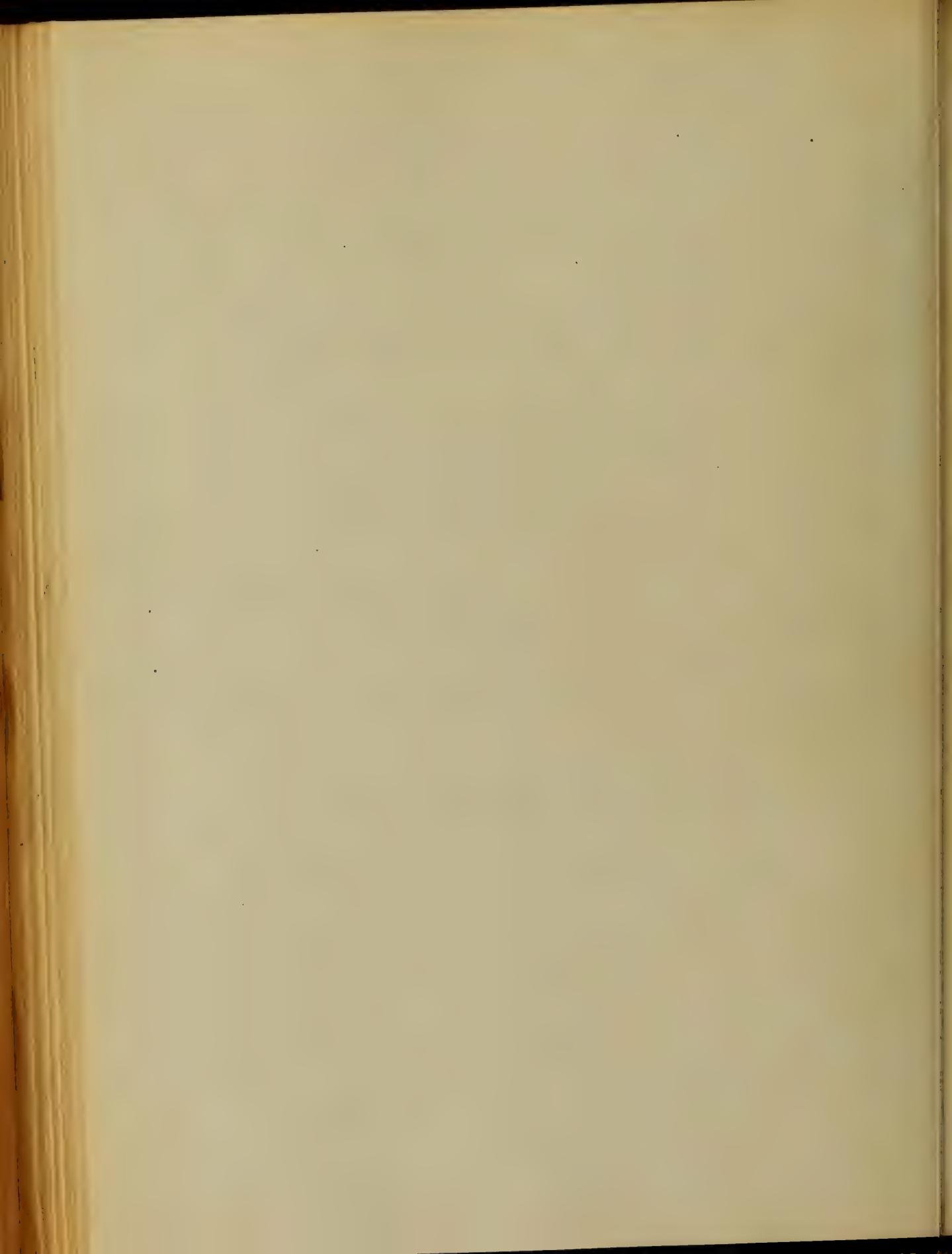
acute is the condition in all cases of hemorrhage. The warm bath acts in every instance, and so does a cold bath. The same precaution: viz., as it stimulates it too much, it must be preceded by incisions of the rectum, &c., &c. The proper temperature is 87° Fahr. and it must be continued long enough to produce relaxation. Diet. The diet in acute inflammation should, as a general rule, be of the least stimulation, nutrimental, & digestible, good as possible, and two might perhaps suffice for the robust and healthy. This diet, again, however, must not be inflicted to children, & to the old, & infirm, &c., &c. In the contrary, their strength must be supported by good nourishment, & a well



and whey and other stimulants if necessary.

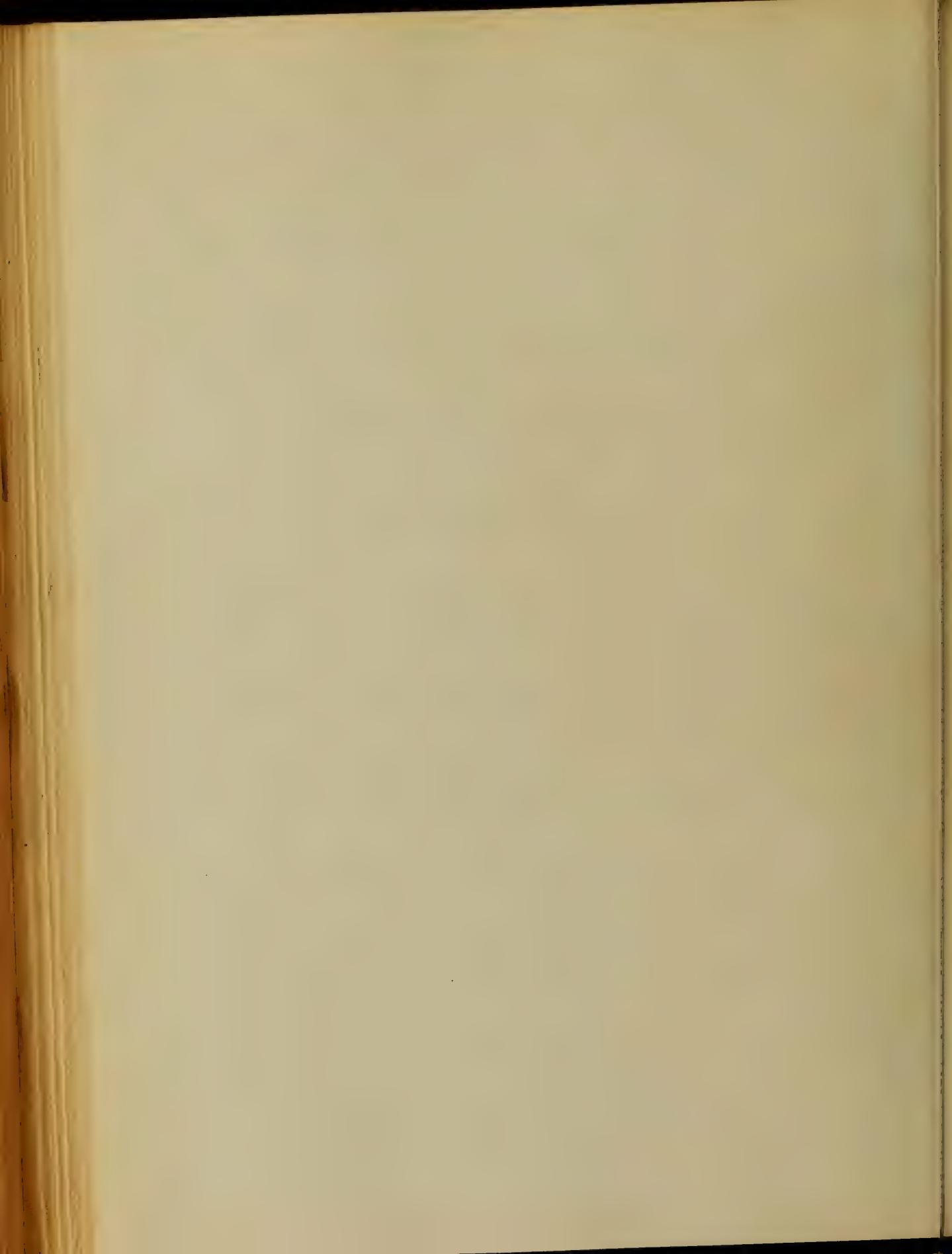
Regimen. There must be a total avoidance of every thing that would irritate mind or body. Perfect rest in the recumbent posture and in a position as easy as it can be made - cool air - free ventilation - the exclusion of light and sound - with mental consolations to allay doubts and fears, and in dire resignations of cheerfulness are most potent aids to medical treatment, which without them would be in utter fruitlessness.

Local treatment. The first thing done is to remove all exciting causes, if possible, and to place the part at perfect rest and in an elevated position so as to favor the return of blood to it and to diminish the morbid heat and afflir-



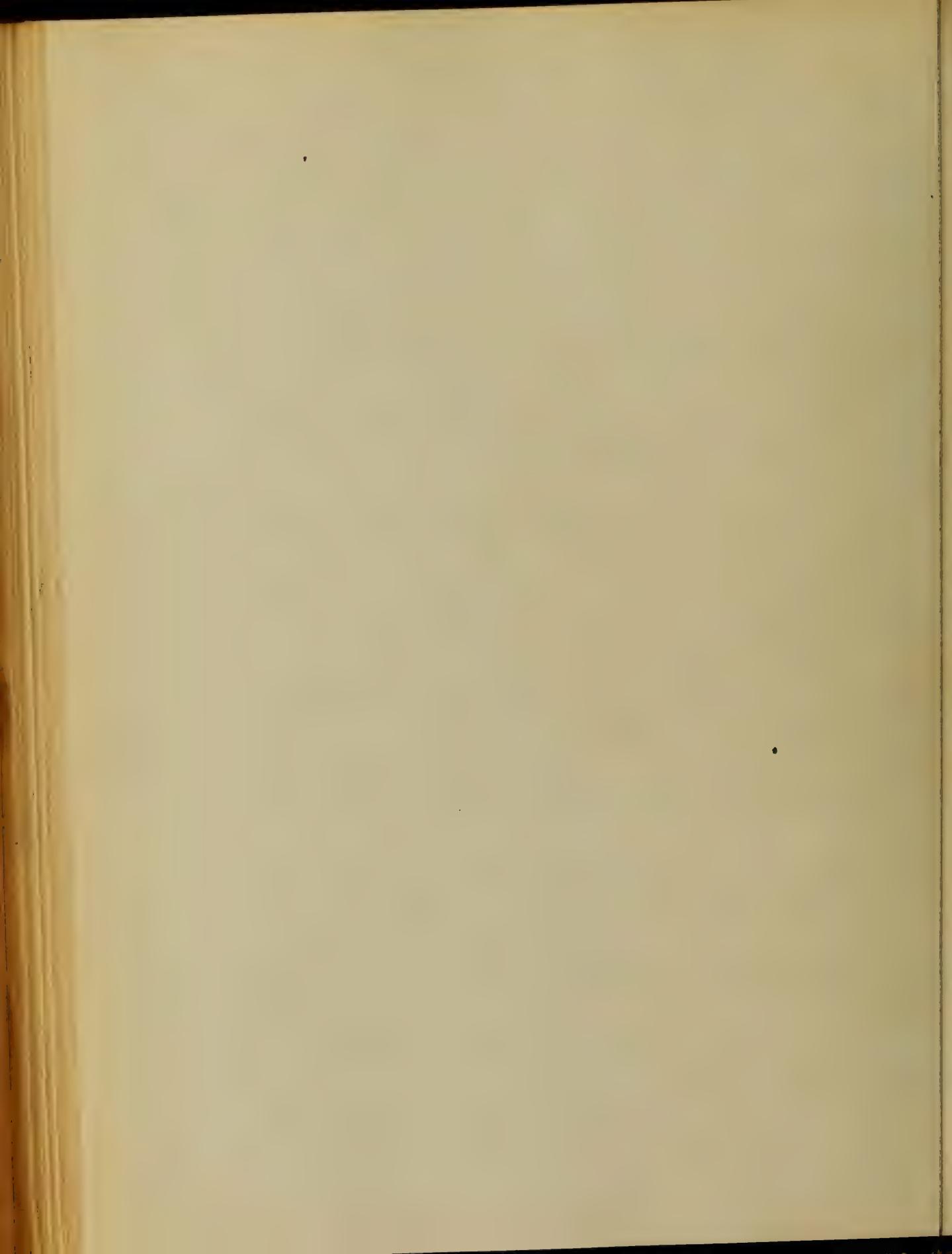
a firm and tenacious

cutting and scarification. They
will not stick if you do not
use if they will not stick, apply with blood
or paint, so that it cannot
be easily removed. If the membrane
is not dipped ⁱⁿ fine Grass or finely sharpened
leaves, & some caustic, like alum, when
it is well dried, it will not stick
at night. If they remain during day, rub
with salt, never to be removed forcibly, and
then, when you can, wash them off,
so their bites might be followed, oedema, re-
niform, & suppuring, when it will be
most active measure and relieves pain sooner
than leeching. Scarification or incisions are of



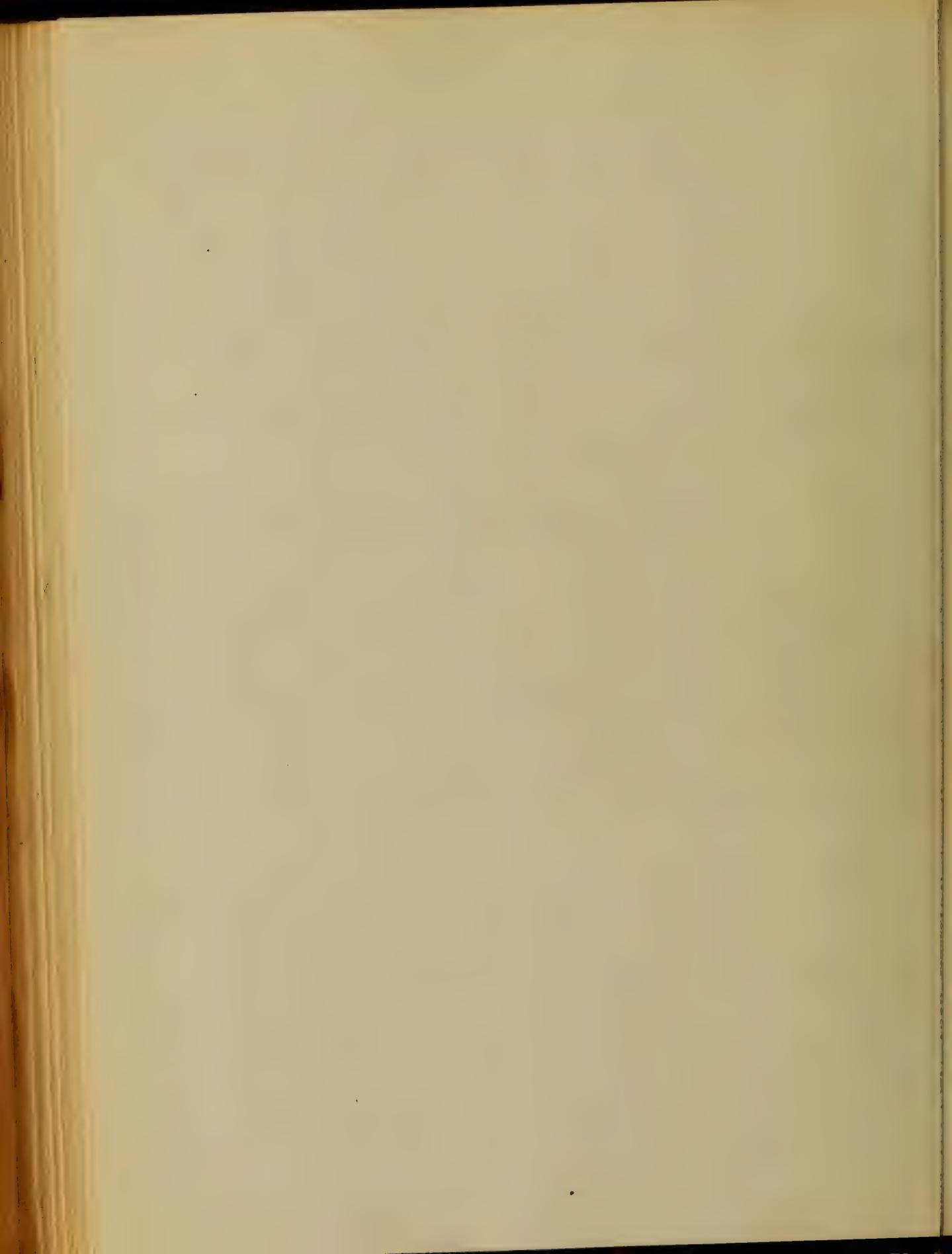
as when inflamed parts are covered
with a thin skin, there is no great tension as no phlegmonous exsudates,
so when the inflamed part is infiltrated with
viscid fluid, as no extravasation of urine, or
with unhealthy matters as in carbuncles.

Hot fomentations are useful to cause contraction of capillaries, but they
should be applied carefully, otherwise the
part will be aggravated. Cold fomentations
are good baths perhaps best, for they do not stim-
ulate like heat nor cause painful reaction
like cold, and are more directly sedative than
either. Warm fomentations are useful by
relaxing the skin, relaxing, and promoting
infiltration, with the exception of those used
in the action of dense tendinous parts. But in

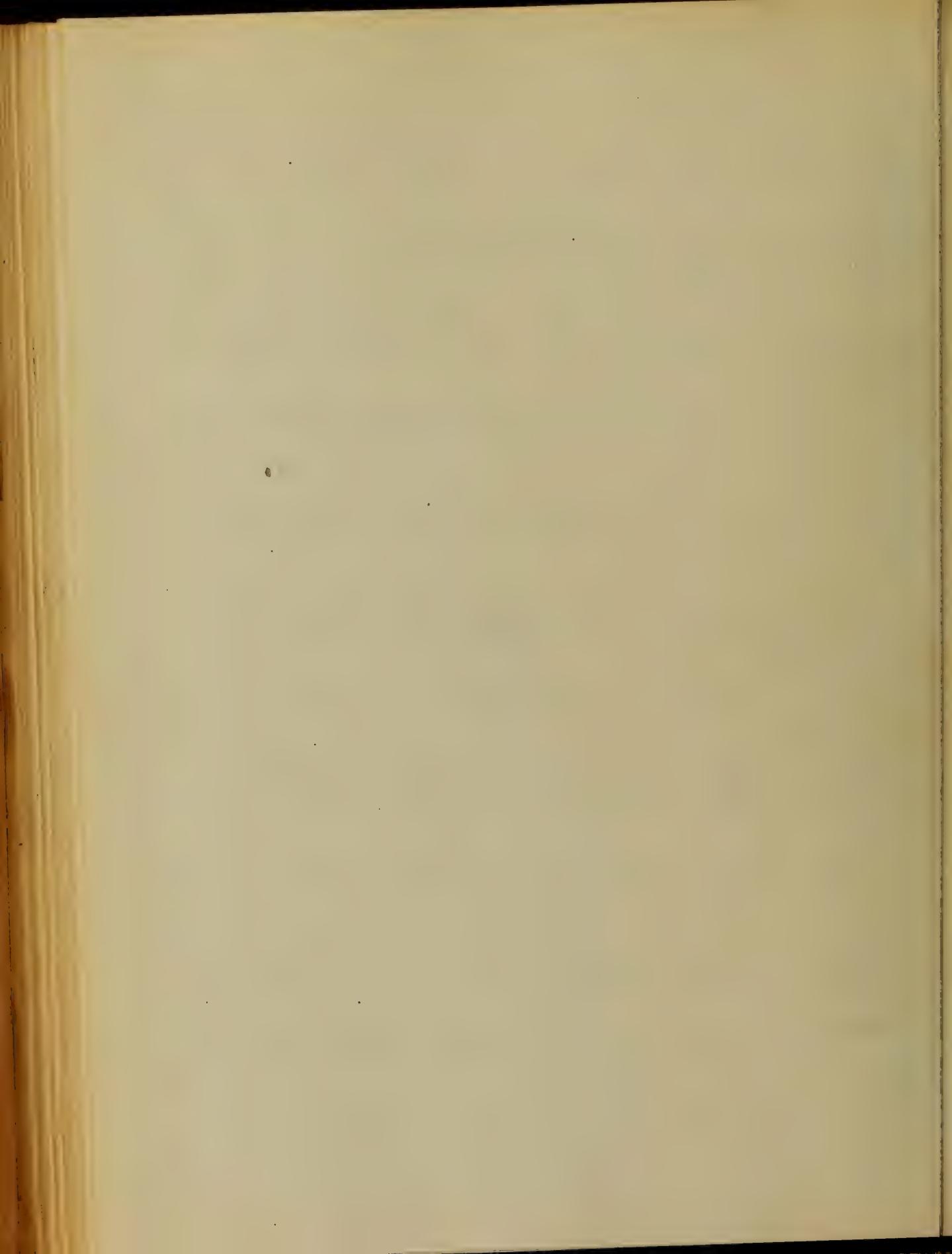


Chronic inflammation

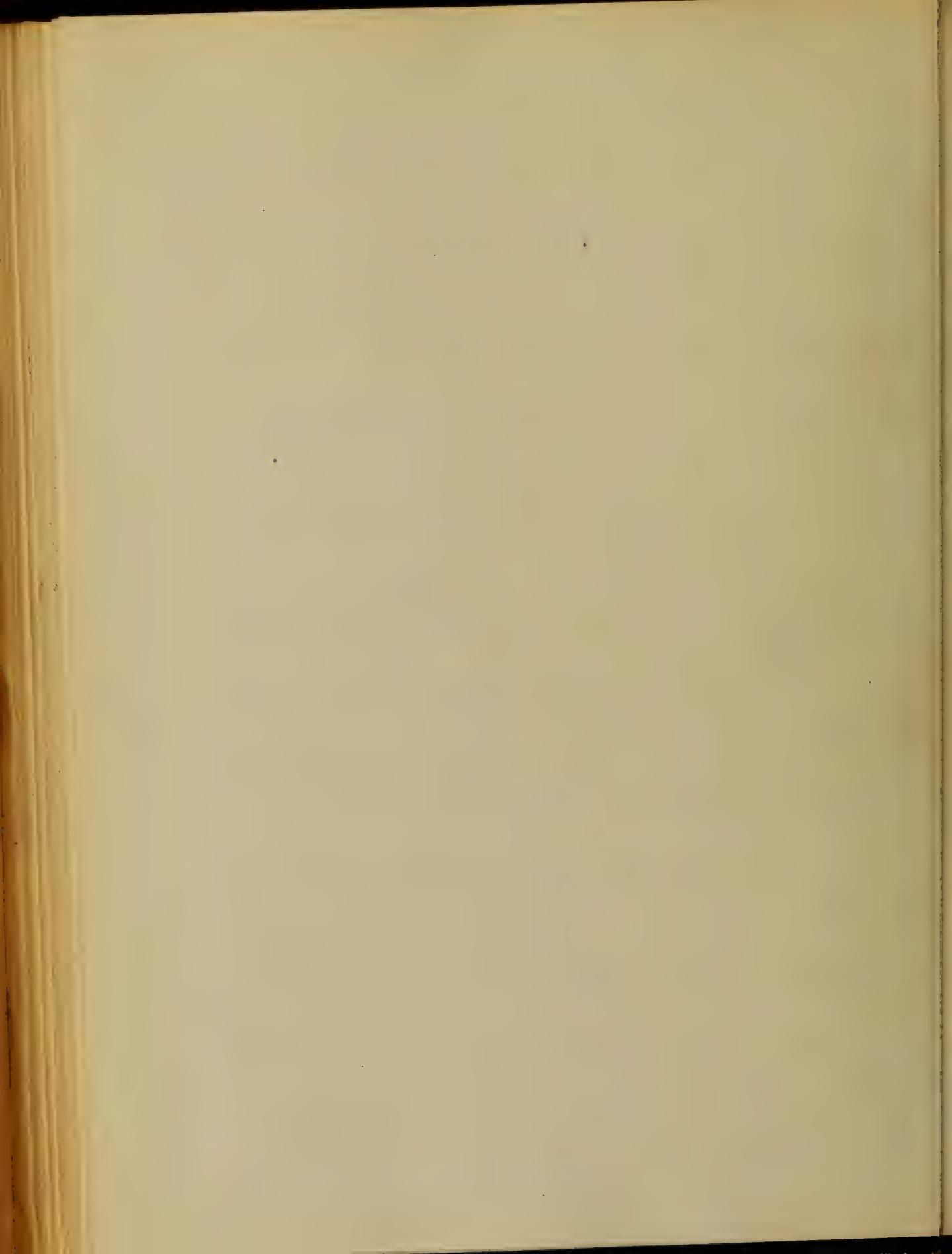
Inflammation is chronic when it is slow in its progress, and tends to last long or indefinitely. Its consequences may be adhesion, thickening,



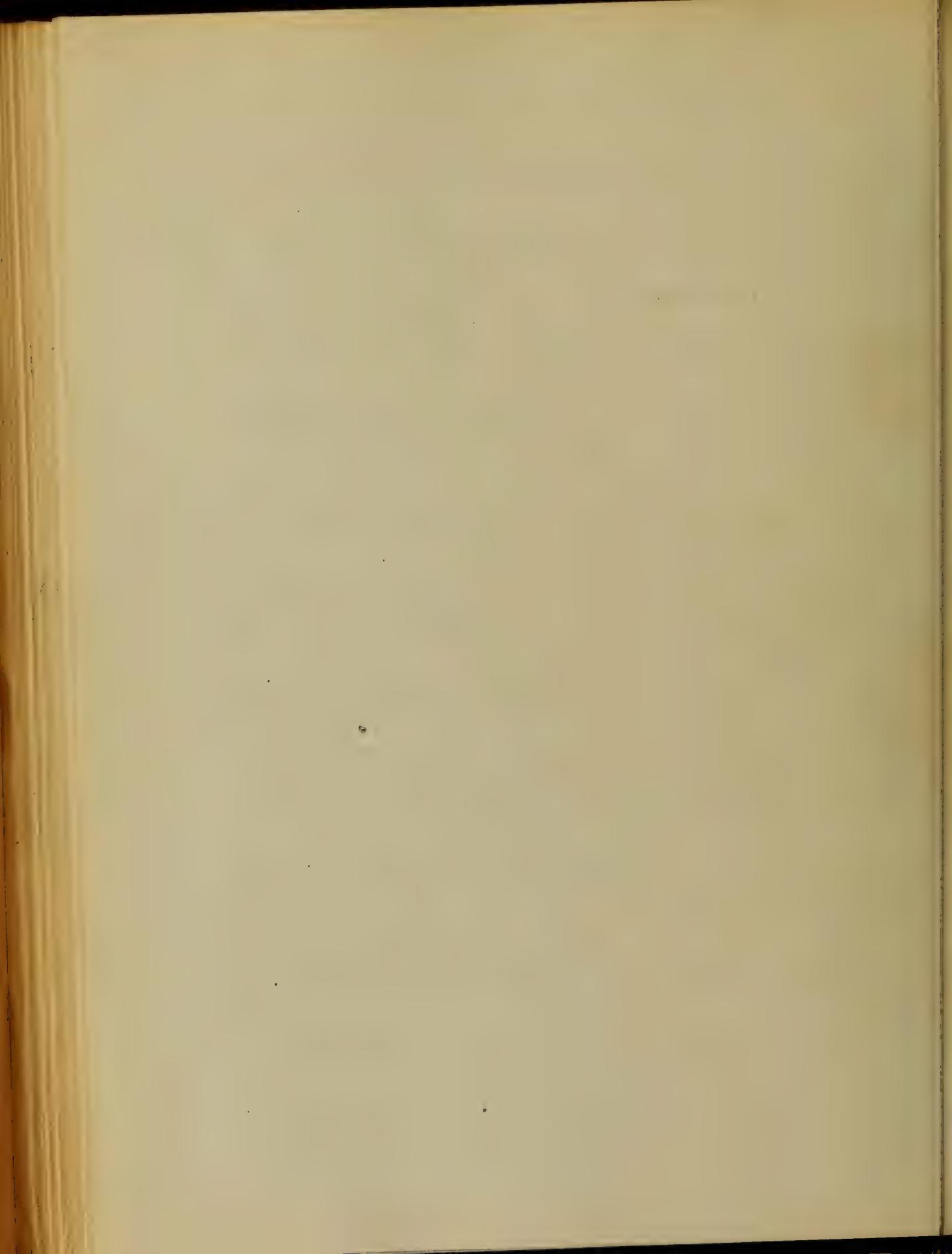
inhalation, respiration, or, by, i^r recession. Its
causes may be constitutional or occa-
sional; in the latter case, the
constitutional disease, or condition,
must restore the tone of the intended vessels.
The remedy is to cause a free excretion
of the solids, or excess matter. If the patient
is fatigued and plethoric, and indigestion prevails
in time elapse, and the drinker is not
unimpaired digestive organs will not be
concentrated, and in case of violent diet,
it must be lowered and restricted chiefly
to vegetable substances; free exercise should
be taken in the open air, and then a course
of alternative medicine should be commenced
in order to increase the excretion, and to
rid him of its superabundance of material.



with saline aperients in the morning, as
the first mentioned, Flummers pills at
night in five grain doses. It may be nev-
er necessary to bring system under its influence
altogether. It is to be used however
in small doses nevertheless, as most desirous,
as it may combine with mercury,
but if chronic inflammation occurs in
an unfeebled and irritable constitution, a
nutritious and liberal diet must be adopted;
wine and tonics should be administered;
in order to improve the digestion and vigor
of the circulation; irritation and pain must
be relieved by cathartics and purgatives
the practice of the former being indicated
by the most practiced of the physicians.



is red and red at its tip and edges, and
there are heart-burn & flatulences, pain at the
stomach, &c. when the patient is upon
the middle stage of the disease, the first
air of the plainer and most easily digested
biscuities, and small doses of alkalies may
be given them and some time before
their bowels to be kept open by some aper-
ient medicine; when there are signs of
indigestion & flatulencies, a dose of
blue pills with morning aperients. When
biscuits are administered it is always ne-
cessary to have a glass of water
otherwise headache and feverishness will
occur. In cases of violent inflammation
we suggested by Dr. C. administration of
iron, also of common salt, the hands



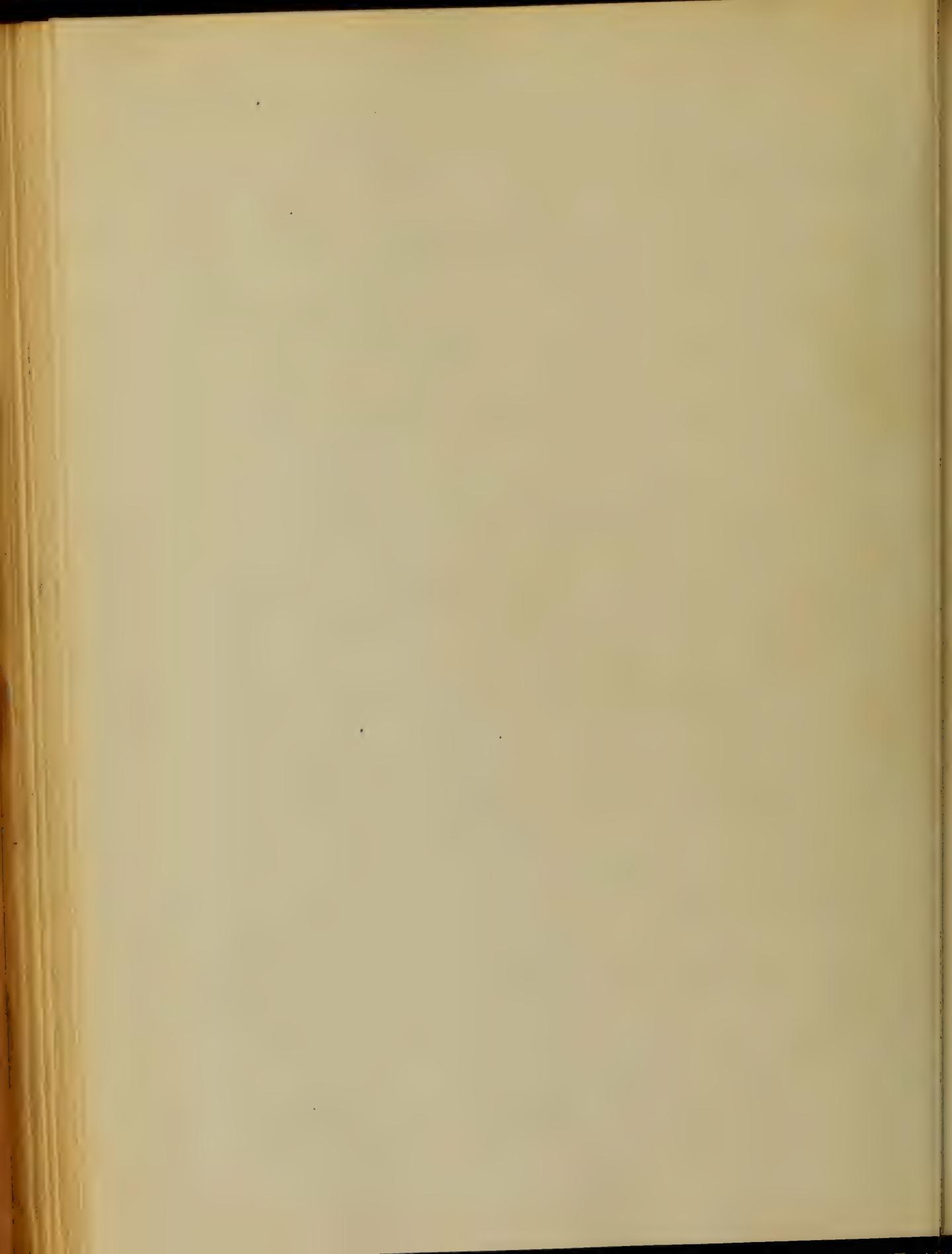
nenagogues if necessary. Of the different
tinctures I have found no good service in
inflammation, besides the common anti-
septic, is the Tincture of Sassafras.

In combination with Tonics, Sedatives, anal-
gesics, iodine or iron, as circumstances
may direct, according to individual cases.

As of other tonics I prefer the
extract of camomile and mint, Cham-

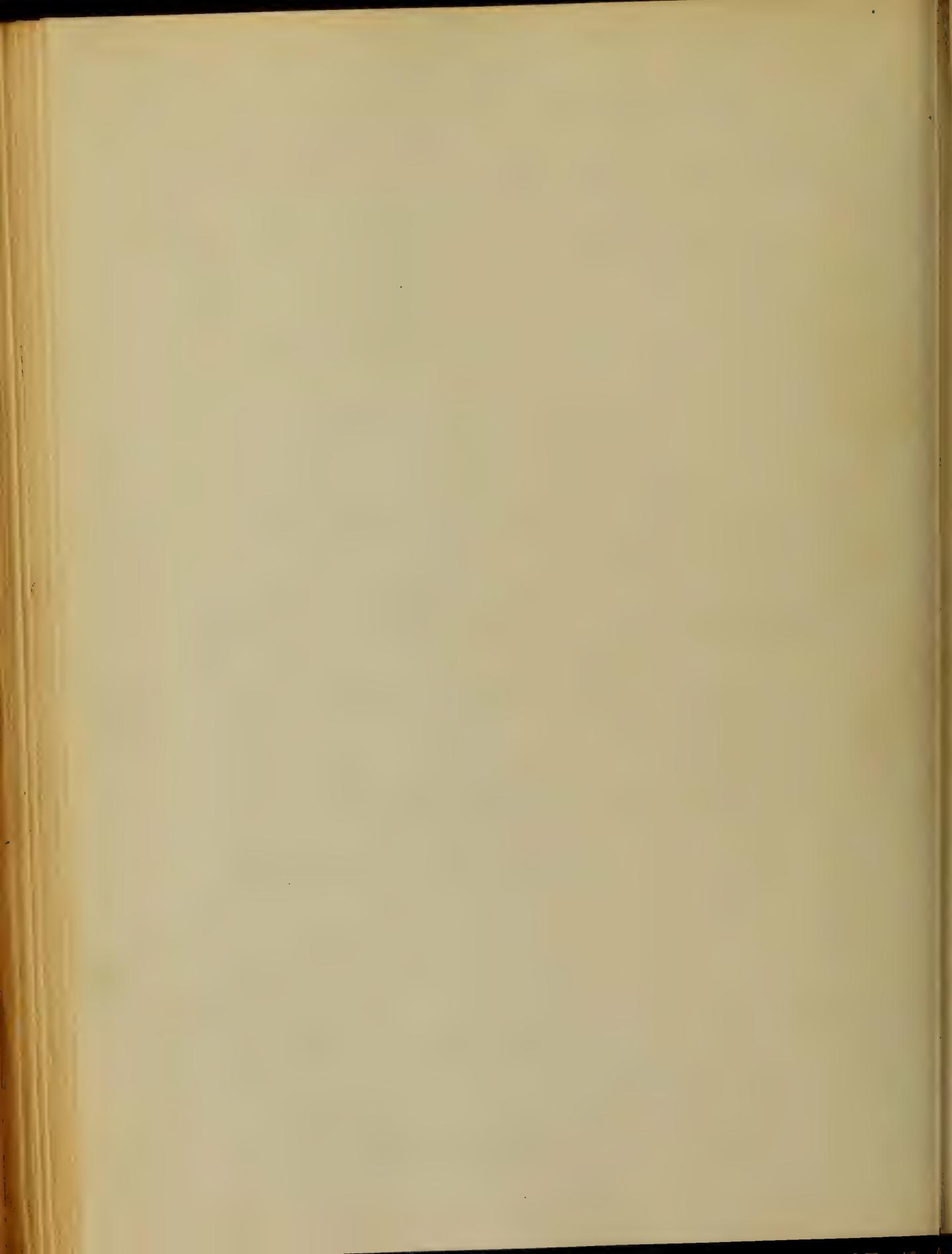
omile ale; and the liquor of arsenicalis
is also useful in certain cases, but
they should be employed with great
caution and care.

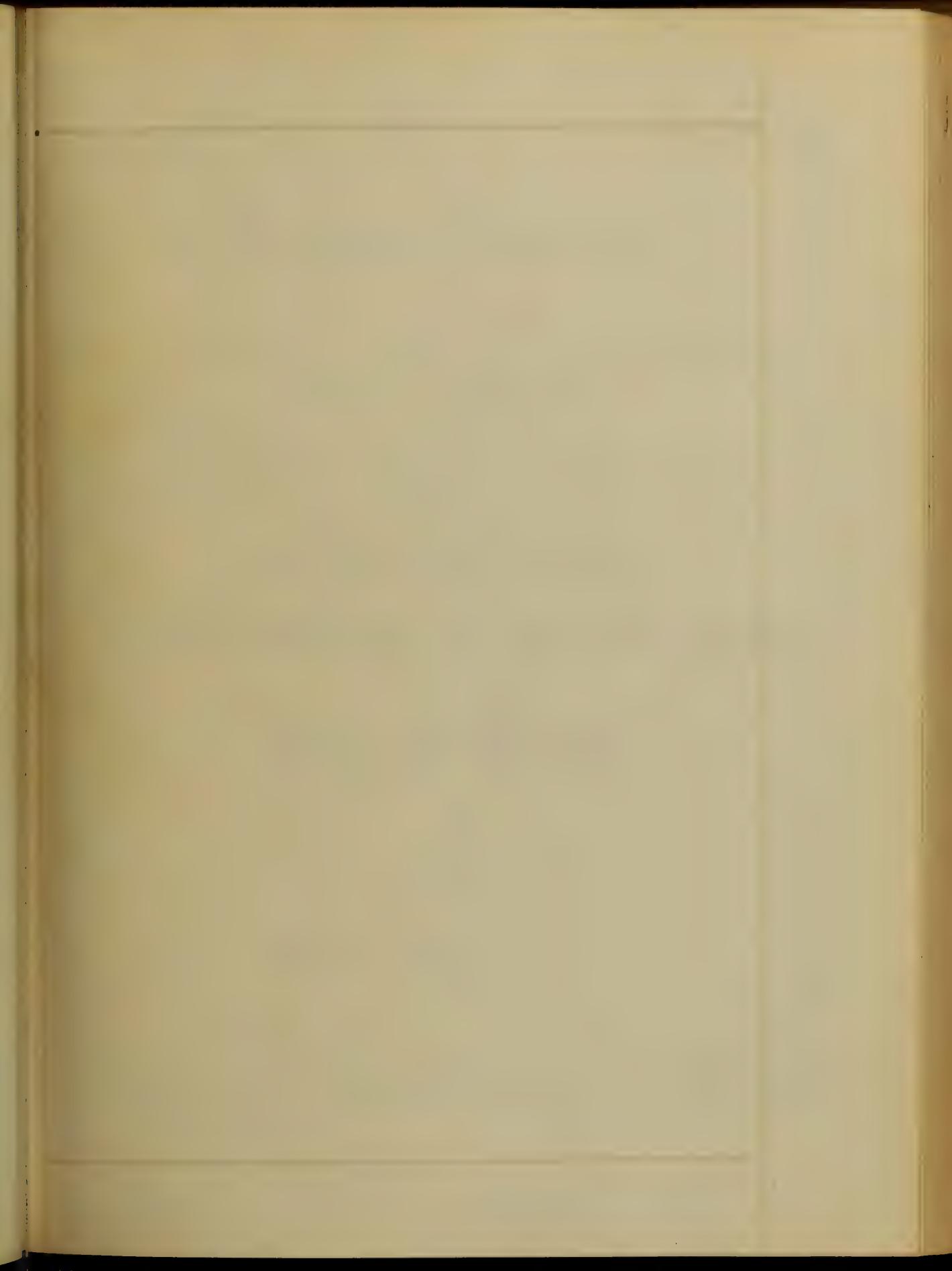
You will find it difficult to procure
the above drugs unless you can obtain
intended vessels and make them con-
structed by their own hands.

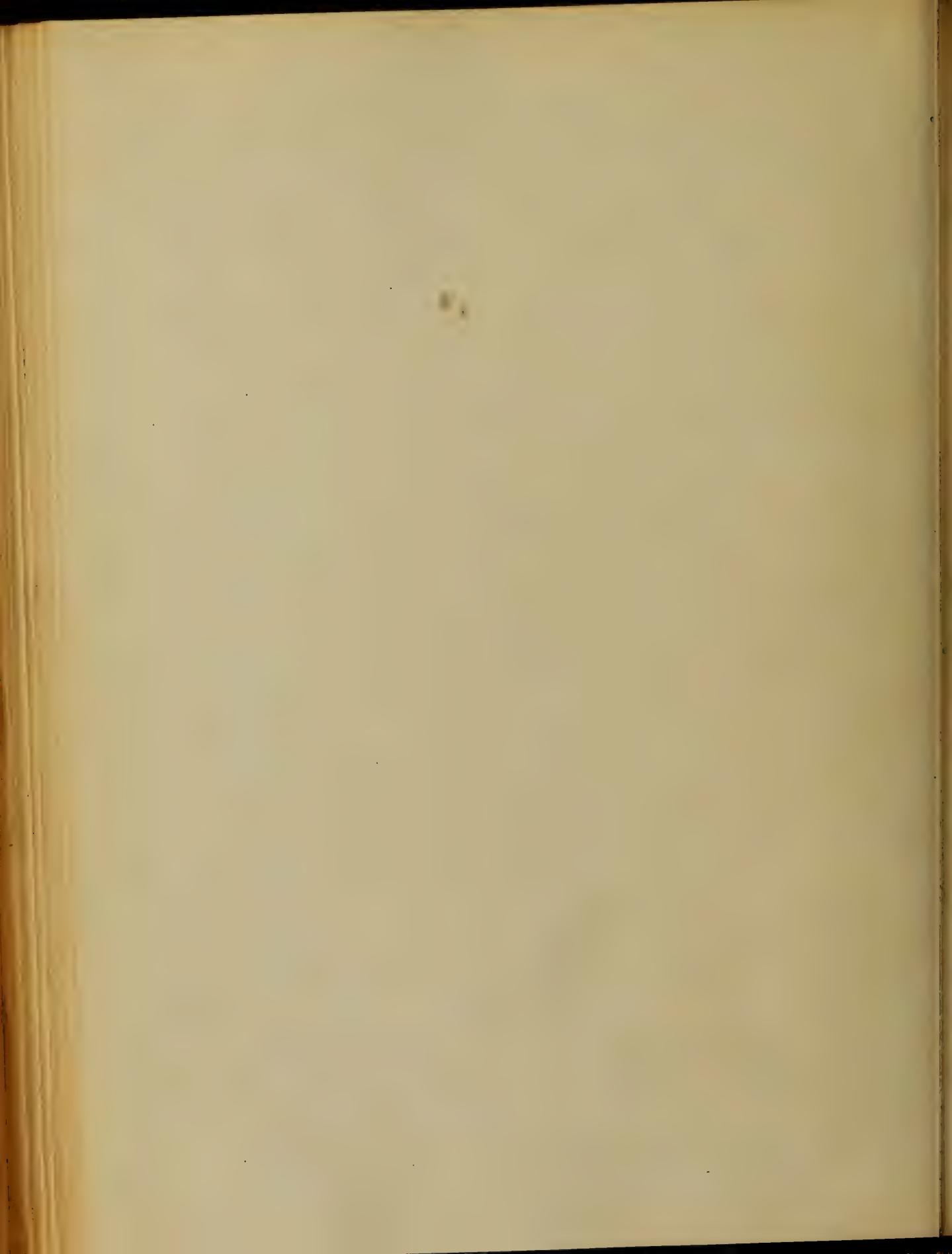


exercise the part in its proper function
and in every collateral function.
tions and sensations of health.
real bleeding must be em-
ployed to dilate the vessels
which may be contracted by
various stimulants and astrin-
gents such as the sulphur of hem-
atite and alum, nitrate of silver, salt
of mercury &c. Counter irritations are
also useful in the cure of inflammation
but in the acute especially those
which establish a permanent suppura-
tion are most serviceable.

With these imperfect remarks I leave
the subject for the consideration of
George D. Breret-







1868

A N
Inaugural Dissertation

ON

Alcohol Its Use + Abuse

Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

P H Y S I C,

OF THE

UNIVERSITY OF MARYLAND,

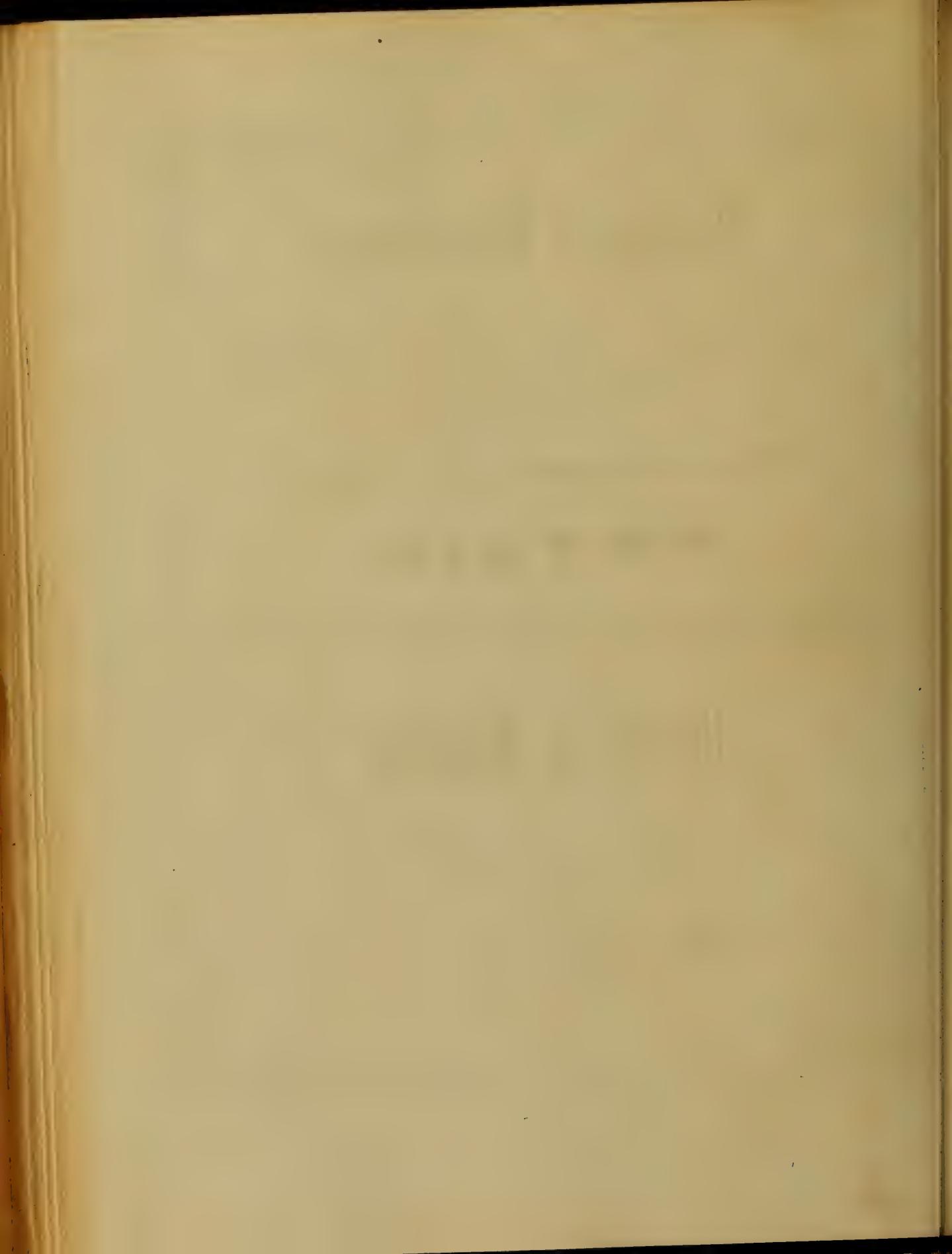
FOR THE DEGREE OF

DOCTOR OF MEDICINE,

By

Lee Scott
of
Missouri

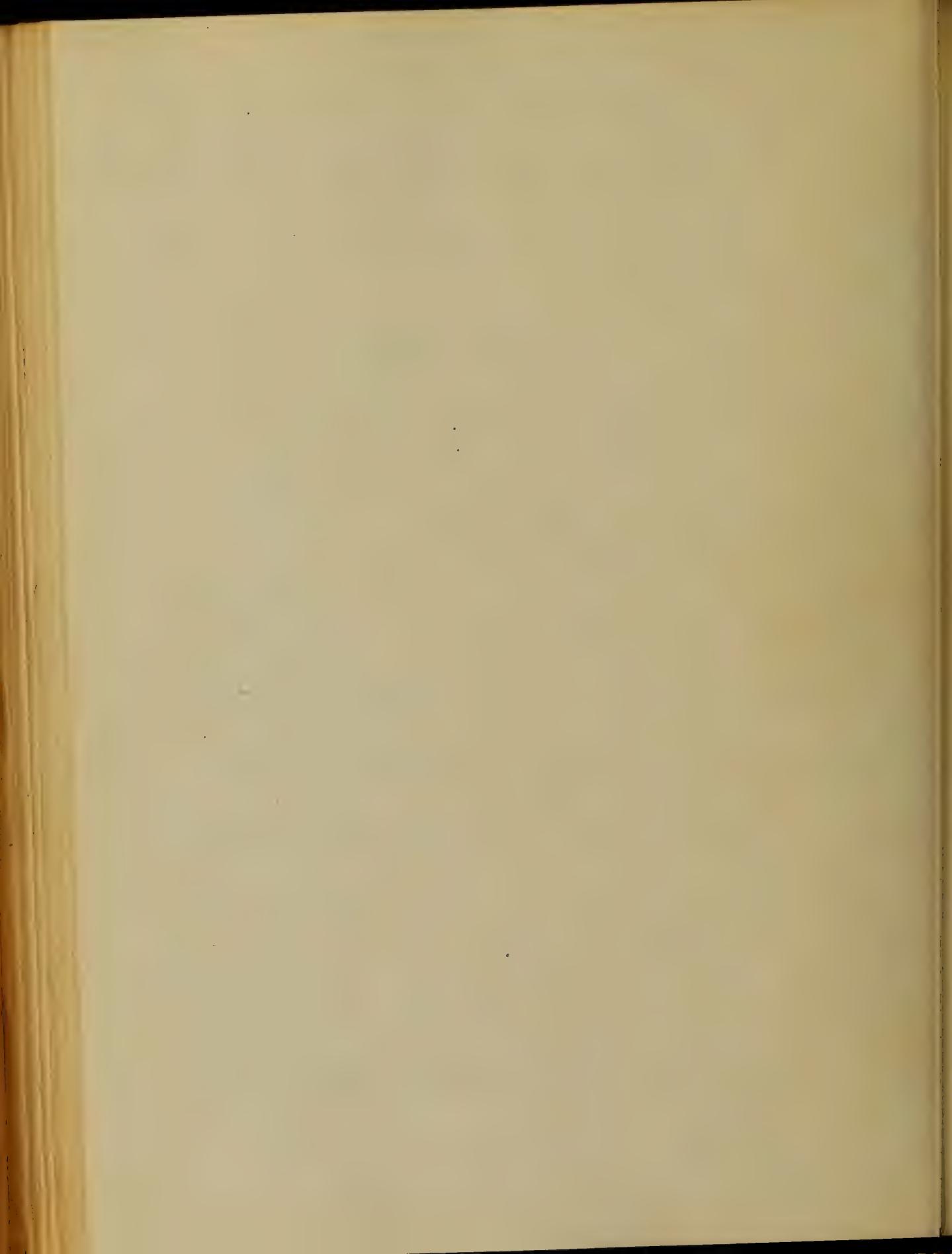
Session of 18



Chippewa Vesuvius

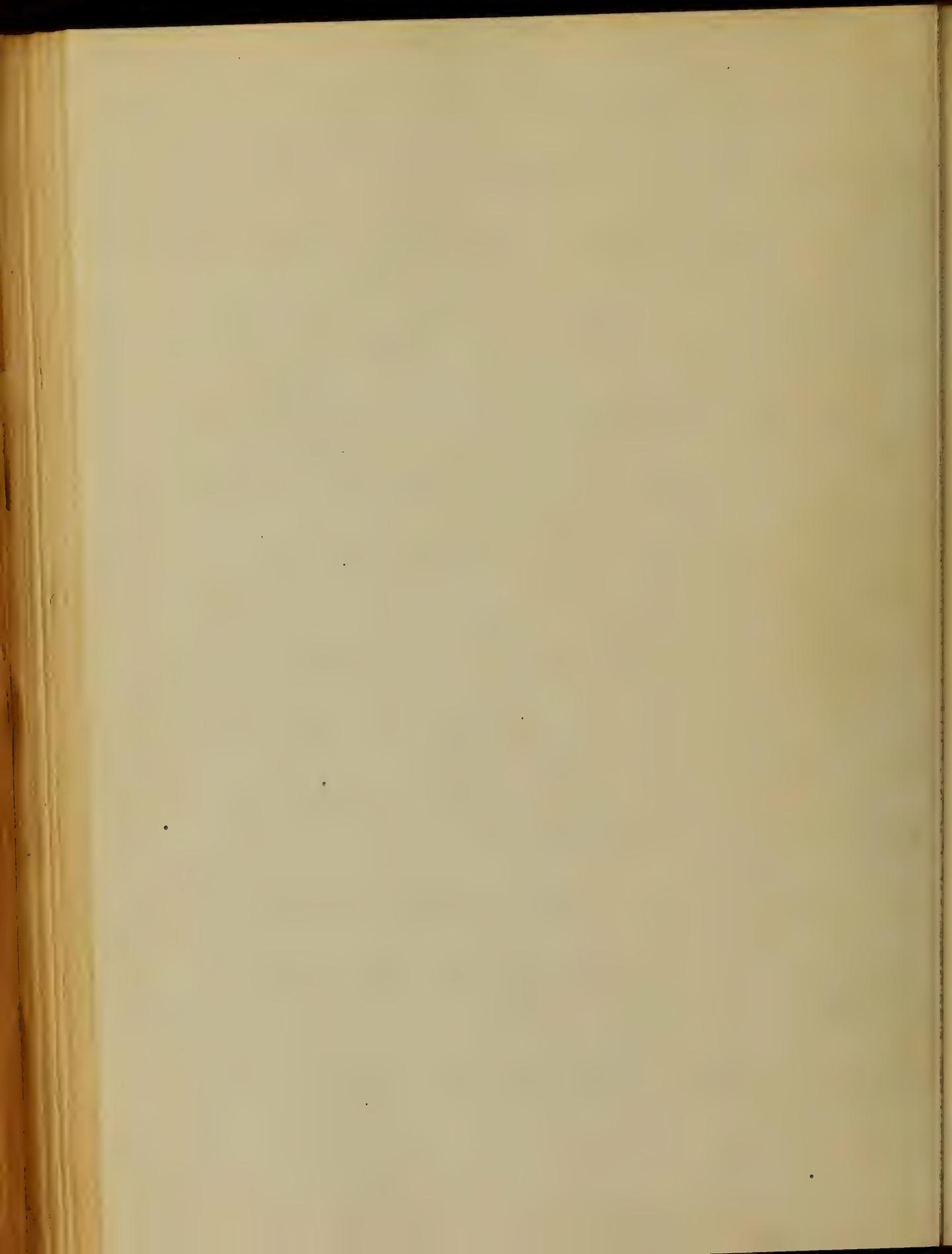
Continued.

In selecting this subject, done perfectly well more of the almost endless number of arguments, which have been offered - yet when we look over Statistics, as produced by Mr. Todd, and others, of the Company, very many cases which have been effected, a demonstration of this powerful - both good and evil - remedy, it will go with establishment. It will not be far from me - especially



Young ones - to branch out in life
with any set, ~~any~~, either
"pro or con," regarding the use
of "tobacco." Then in the treat-
ment of "Diseases," he should find
that the power of ligature grad-
ually subsides, & that ~~the~~ ^{the} "stimulus" or
"soft" stimulants must be resorted
to, in order that we may accom-
plish that great end for which
"Physicians" were placed here viz
"Nature's Assistants."

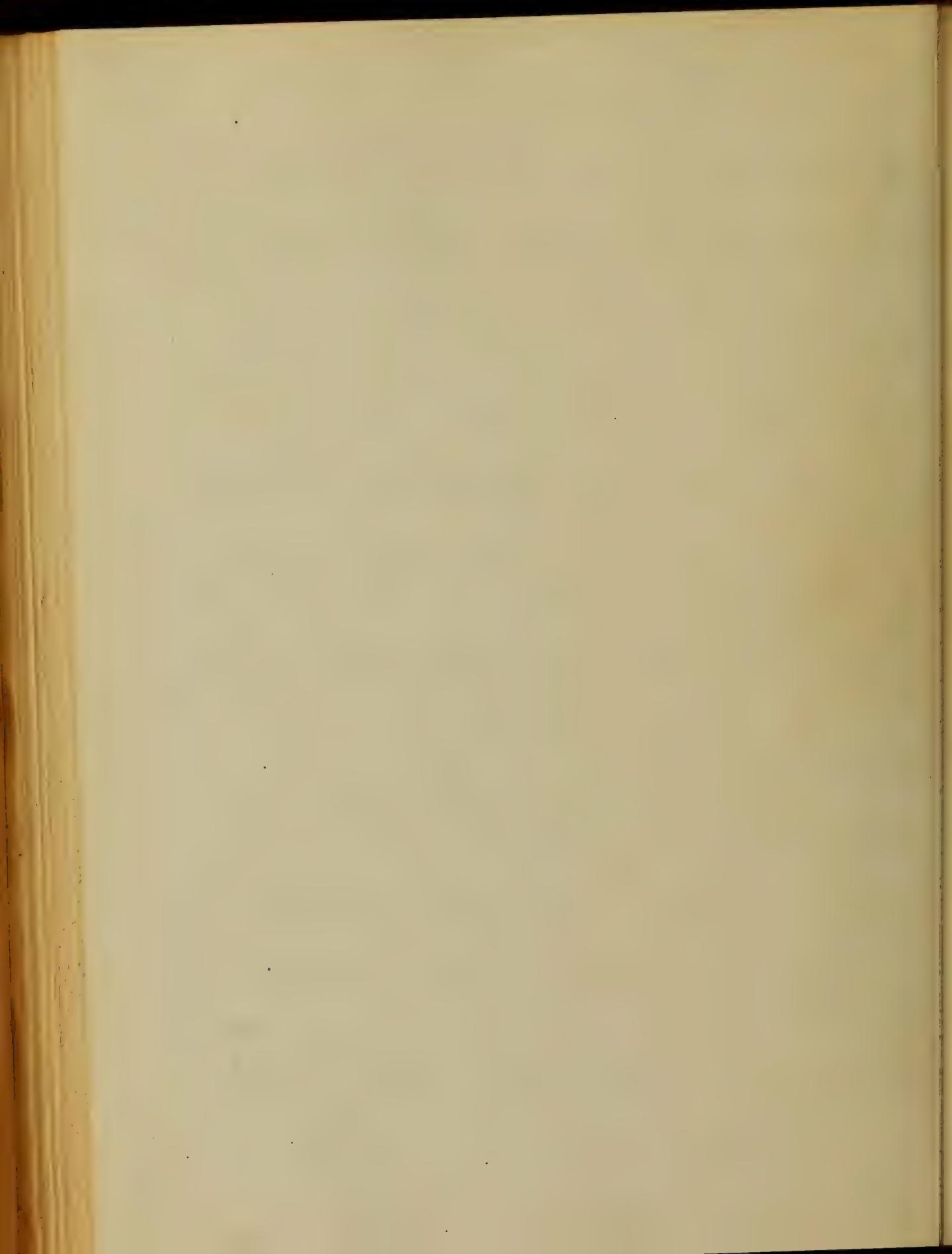
From the manner which many
have spoken, and written, we
would imagine, that we are
not the "assistants," but the



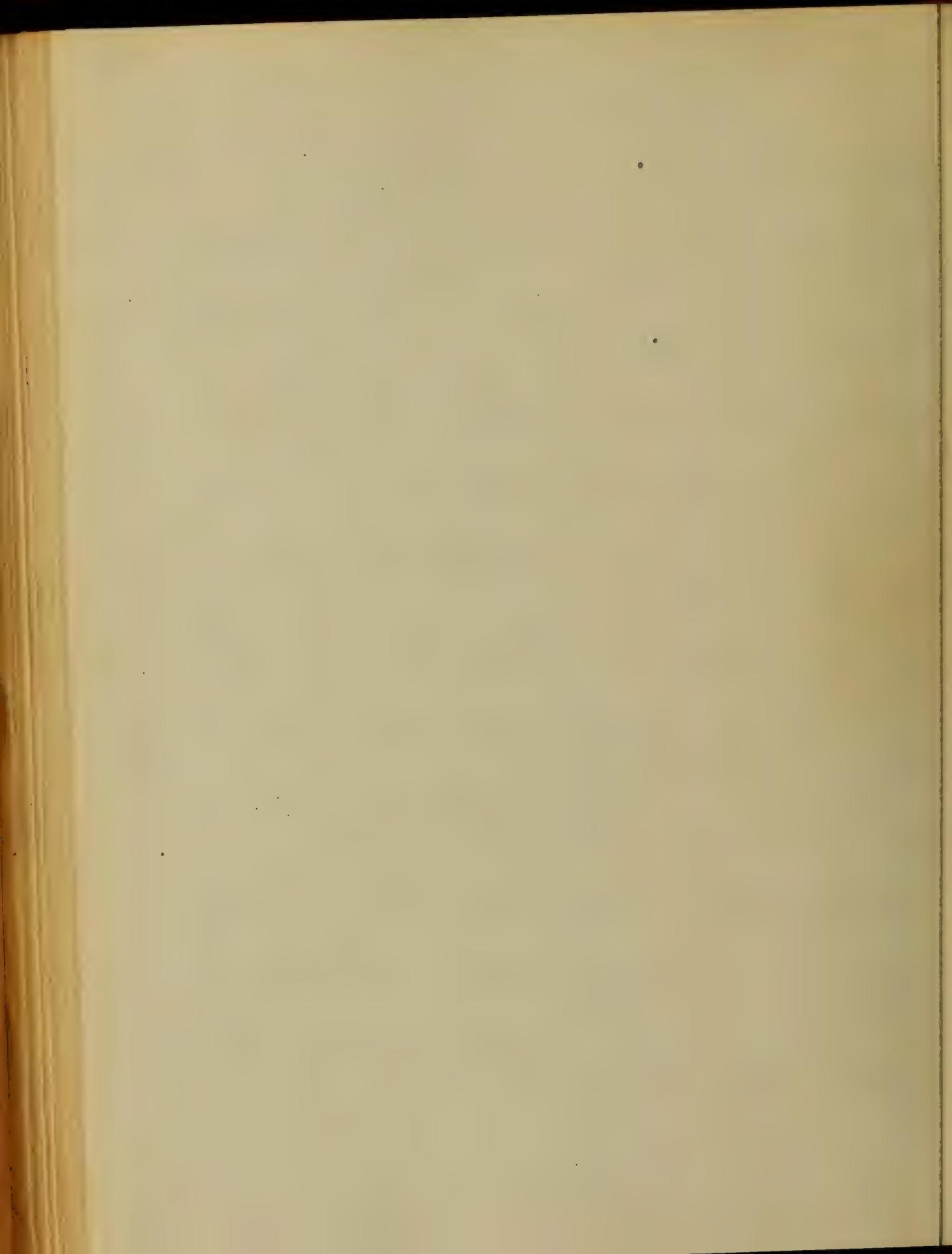
prime movers of all which is
good, and to our own judge-
ment is due the grand and
good results which might follow
the application of such ideas.

In speaking of "Cocaine" I shall
only do so under two heads as
a "Medicine" and as a "Poison";
in this I follow the late Prof-
Beck of New York.

"As a Medicine" it is powerful,
yet not by any means a panacea;
it can and does accomplish
great results— In treatment of
four Fevers, it cannot conveniently
be dispensed with— When it is



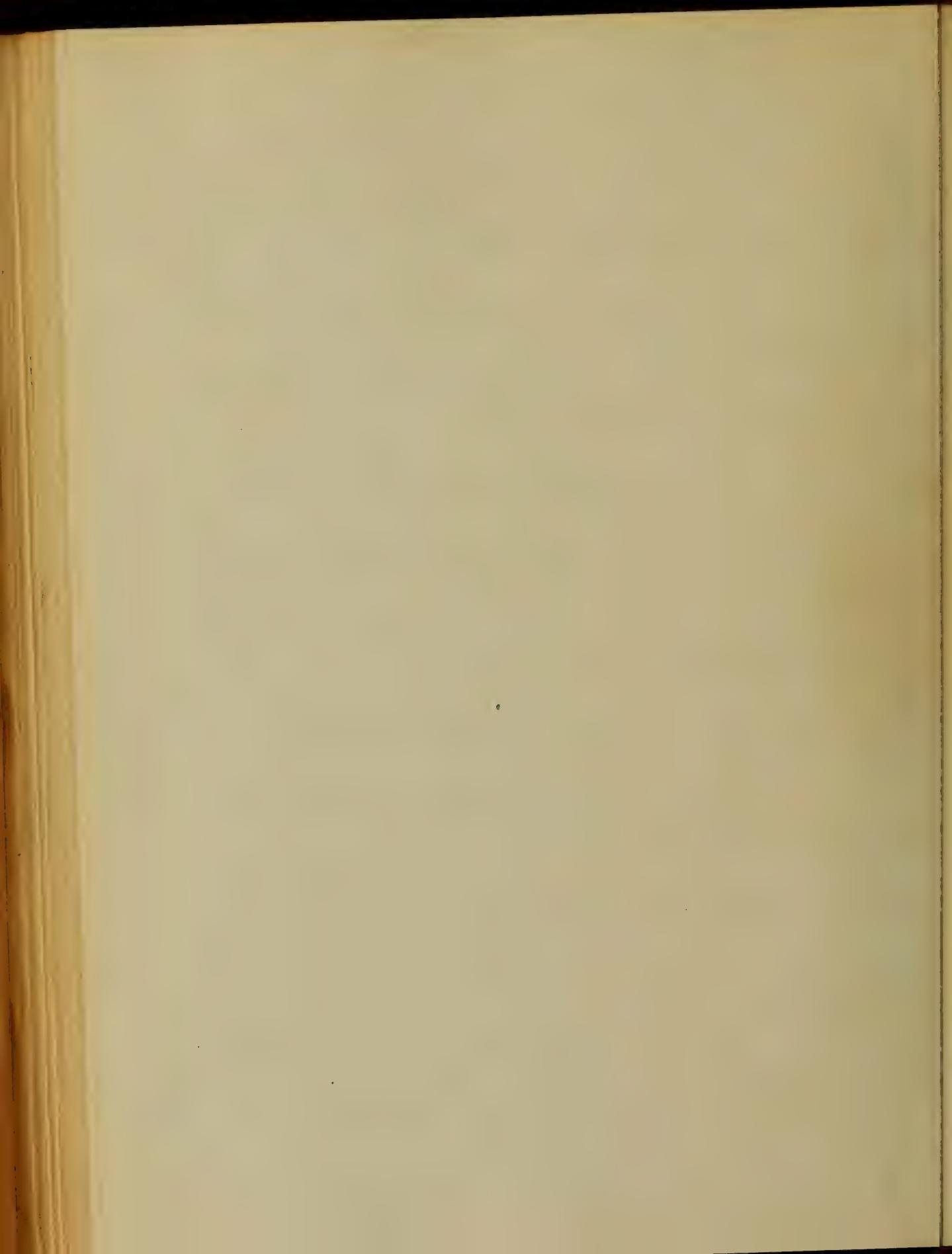
poison is circulating through
the system, covering the action
of the heart, and reducing the
powers of the brain, wearing
away the constitution, "Death"
must be the result - unless we
can keep the powers of life to
such a standard, as will enable
the constitution to battle with
some hope of success, against
this fell destroyer for this pur-
pose we use "Iodine" - Yet in
treating fever we find great
difference of opinion, By some
gentlemen - shining lights too
of the profession we find it



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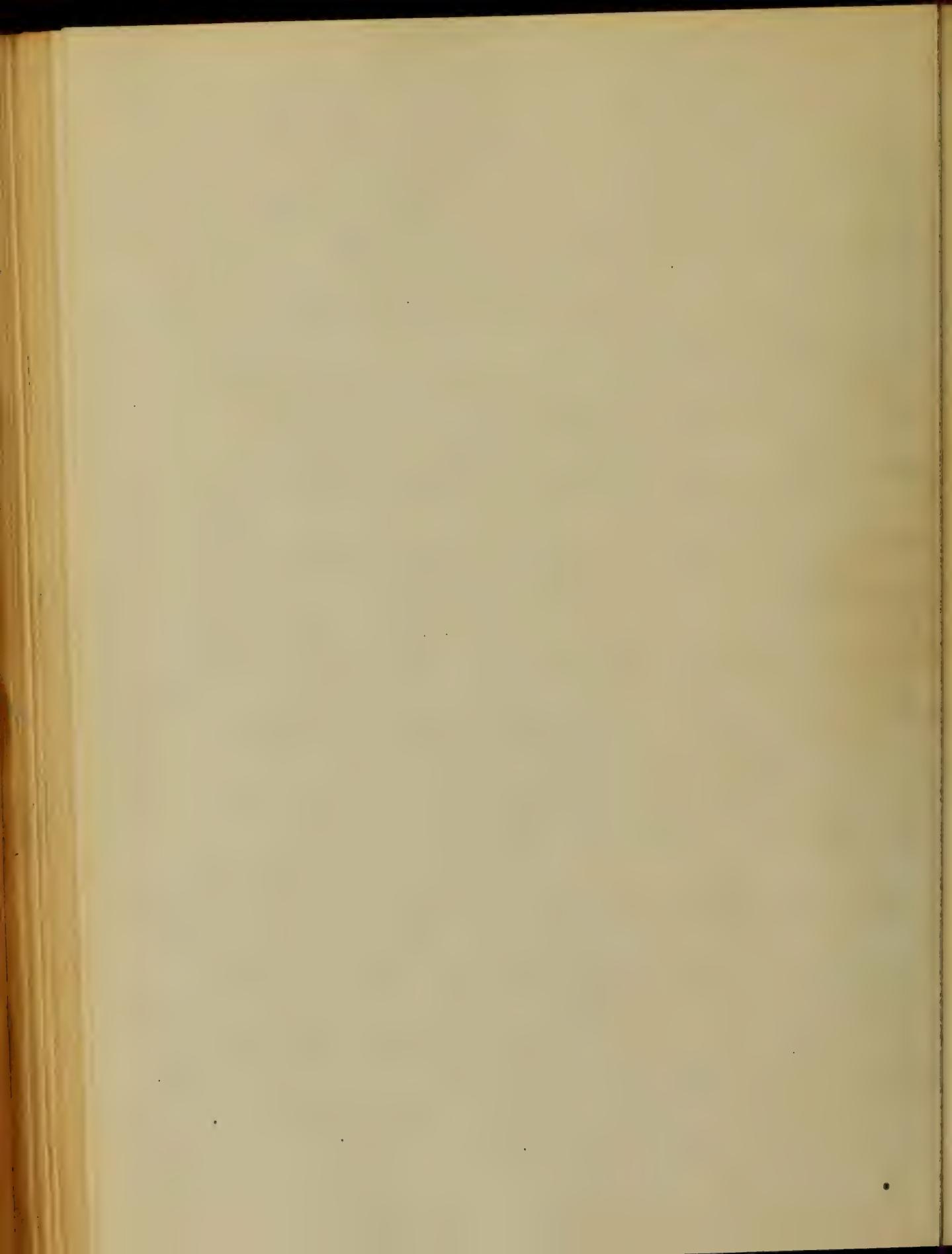
, as been carried to an enormous extent; whilst by others it has been pronounced as evil and worthless - powerful reasons have been brought forward by both parties - many disciples following each; What the effect has pro-
duced upon the public mind
regarding our profession as a
science or experiment, I am un-
able to say - That opinion has
been carried to an unwarrantable
extent; on both sides, there can
be no doubt.

Dr Beck looks upon Fever "neither
as a disease of pure debility, nor



as originating in local inflam-
mation, and yet in the dif-
ferent forms and stages of
it both these may be present"

"I am called to a case of Fever,
and find the patient laboring
under disordered secretion,
greatly increased action of
Heart and Arteries, heat of
Skin, and all the other phe-
nomena attending the advent
of Fever - to use "Alcohol" in such
a case would be highly impro-
per, and exceedingly dangerous
for myself I should positively
decline administering it two-

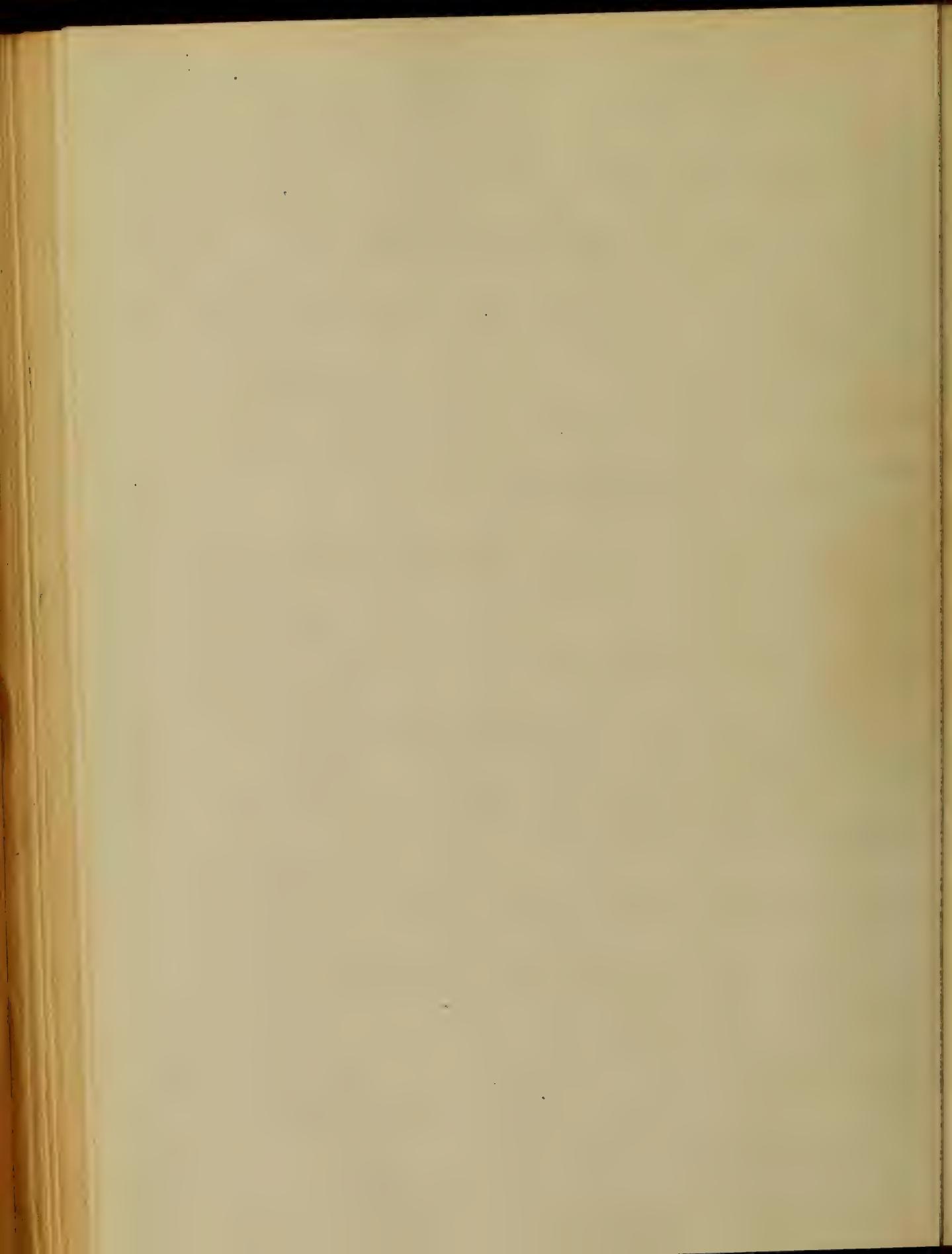


-n't want to be they what not -
under such circumstances.

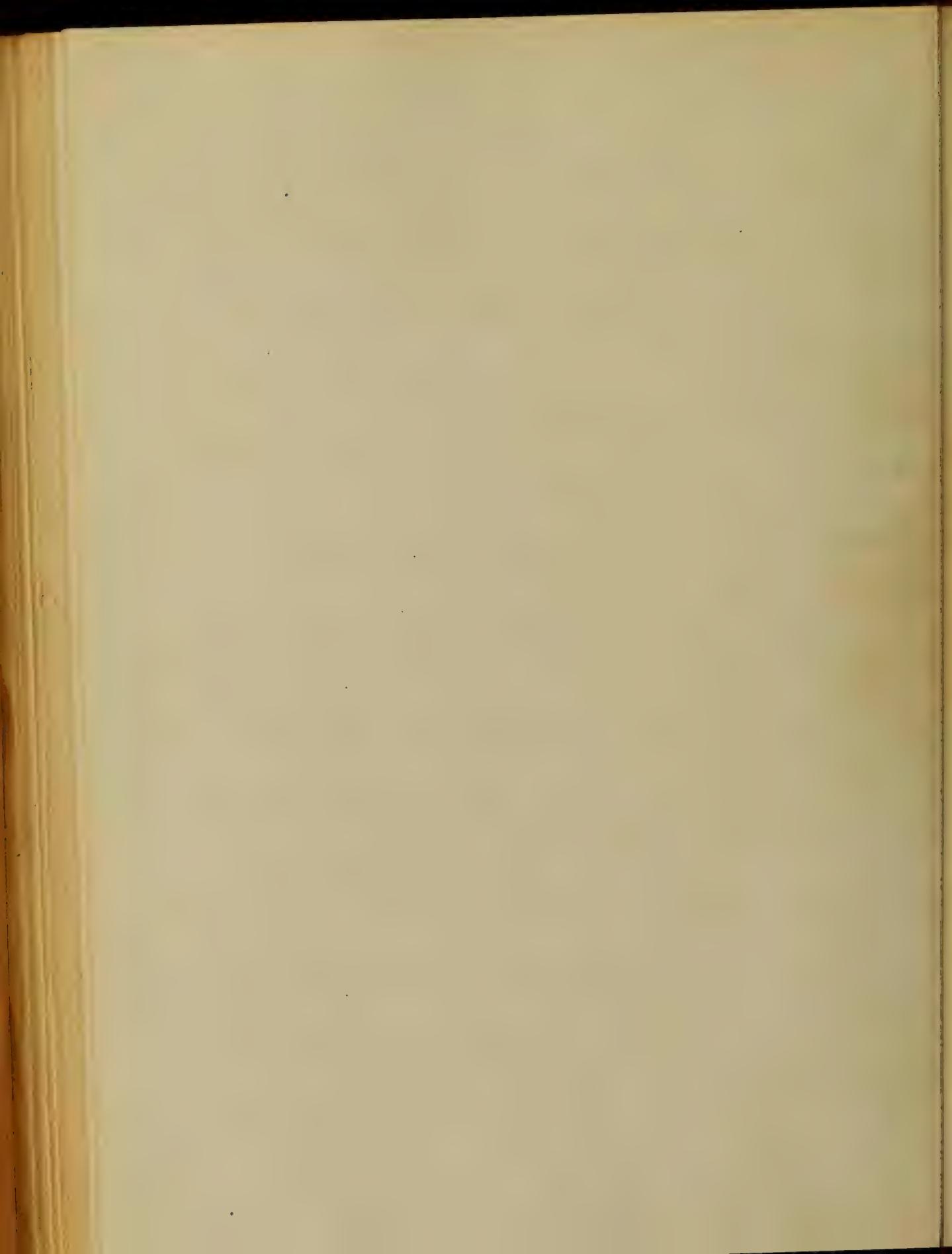
Believing as I do, that I would
be held accountable for my
patients' life, not only by my
God but "the Profession."

It is for this reason that I say,
no young graduate should
start his professional career,
with set principles or dogmas
of either "Brunonian" or "Brown-
sonian," but trust to his judge-
ment and the opinions of
gentlemen most learned upon
such subjects.

Some Fevers do well - indeed

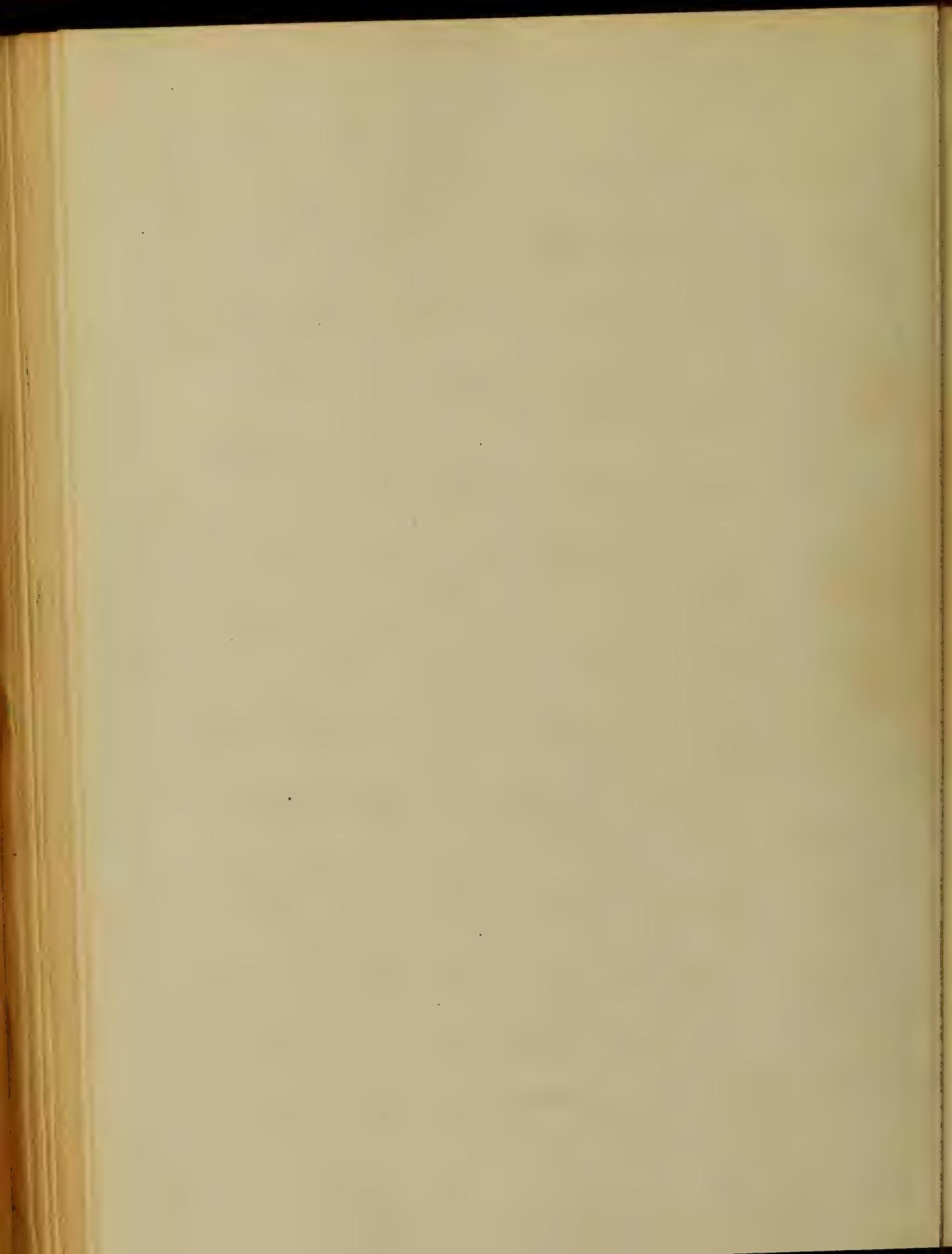


progress better if stimulants
are not used at all, Intermitt-
tent and Remittent, which,
abound to such an extent in
our own country, are given
examples. I have seen in the
"Hospital" attached to the
"University of Maryland," grand
results from the slight and
guarded use of "A. what," yet
notwithstanding this I should
be exceeding loth to depart
from the use of "Quinine"
and give the preference to any
article which might be br-
ought forward and tried.



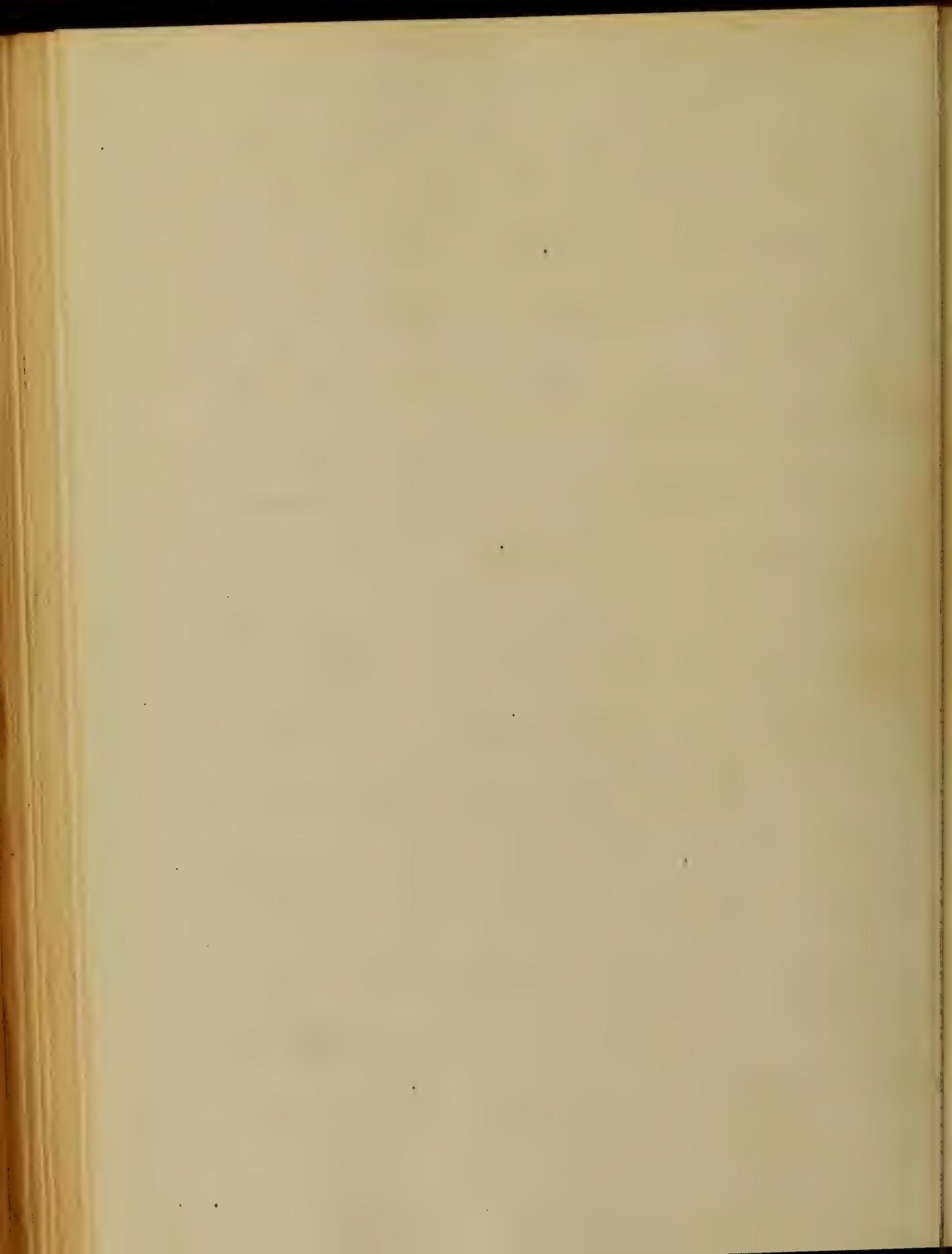
to the skin as a poussard.

There is a vast difference between Remittent and Intermittent, Typhus and Typhoid, in the two last we can use Brandy or Whiskey from their very commencement and in the latter stages of both immense quantities especially when there is great prostration - it has been done successfully, moderate doses will be borne well, and produce results which are truly wonderful, resuscitating patients as if were from the very jaws of death.



For the use of "Aecohol" in the
four fingers we cannot lay down
any rules with safety. Everything
must be judged by the ef-
-fect - if there is improvement
continue the remedy - if none
enlarge the dose.

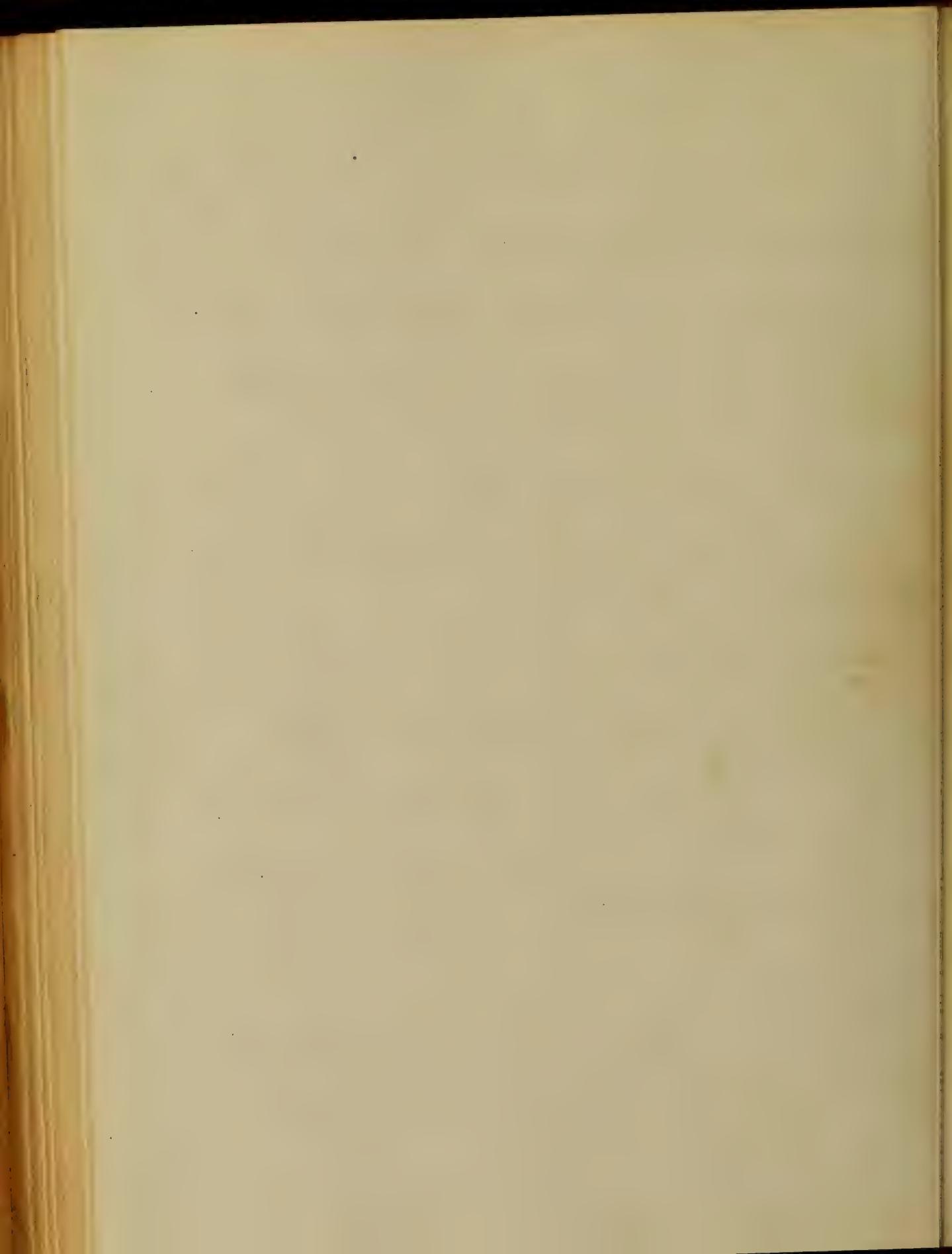
Men of dissipated habits
are much less liable to be
brought under the influence
of "Aecohol," than those that
have lead temperate lives, the
reason of this I am unable to
say; yet to me it appears, that
by the constant use of stimu-
-lants, the system becomes



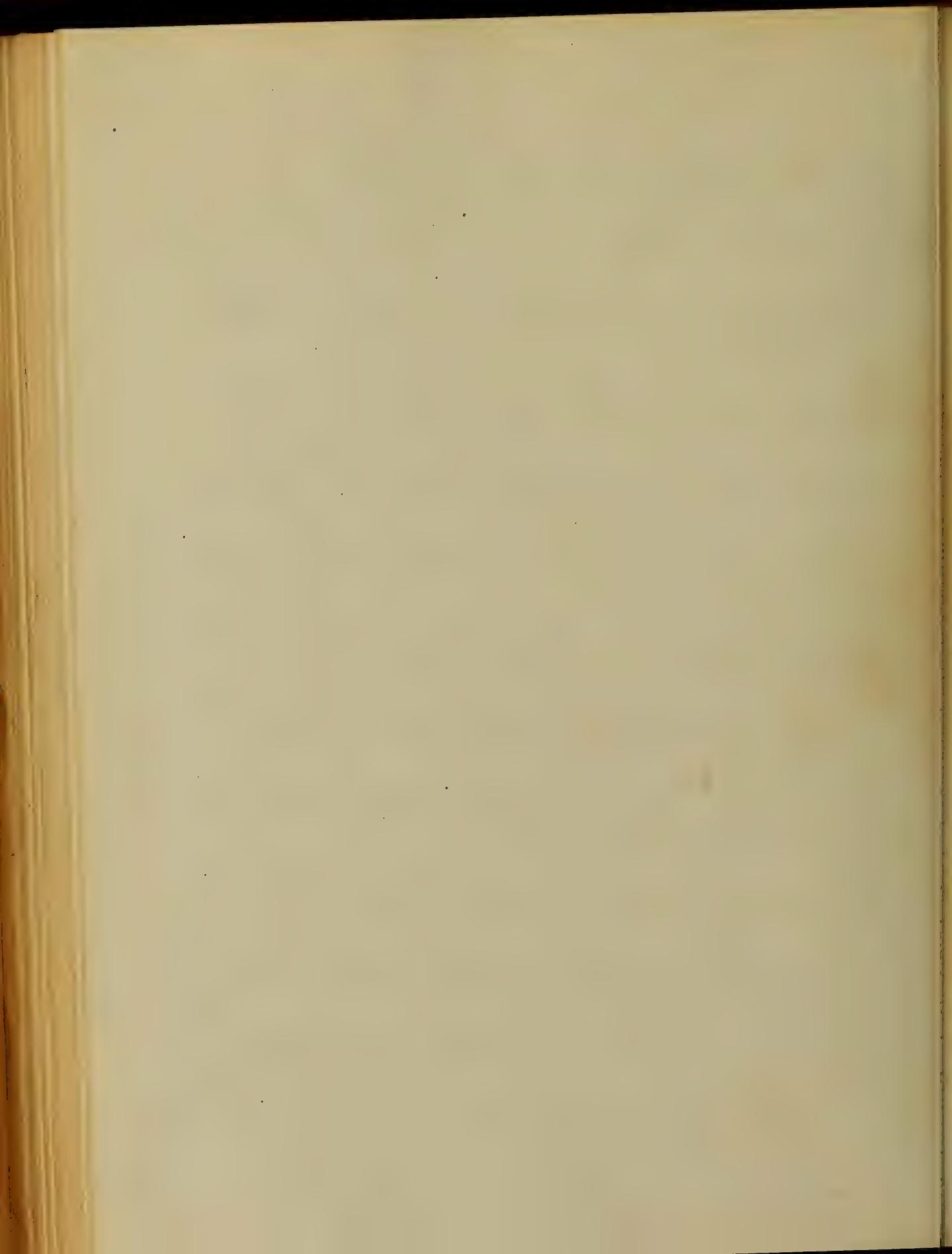
in a manner accustomed to it,
and will not reach to more
than in ordinary instances,
unless unusual quantities
are administered, for this
reason Drunkards very sel-
-dom recover from Typhus or
Typhoid. Even when we have
as our patient a strictly tem-
-perate man to deal with.

"Licohol" can be used to such
an extent as to overdo its Me-
-dical qualities, and become
a Poison

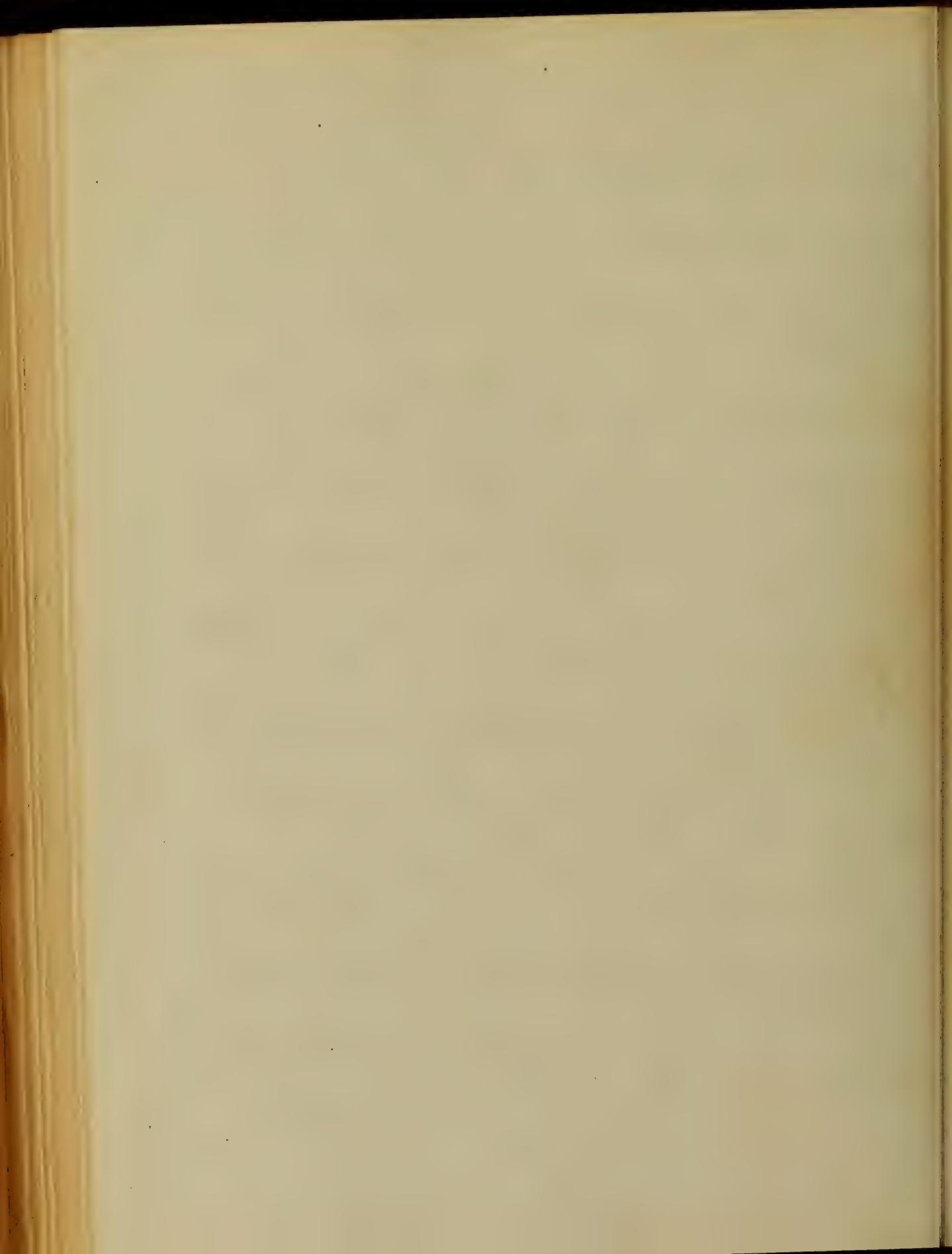
"Lyspepsic" - Disease arising
from a disturbed condition



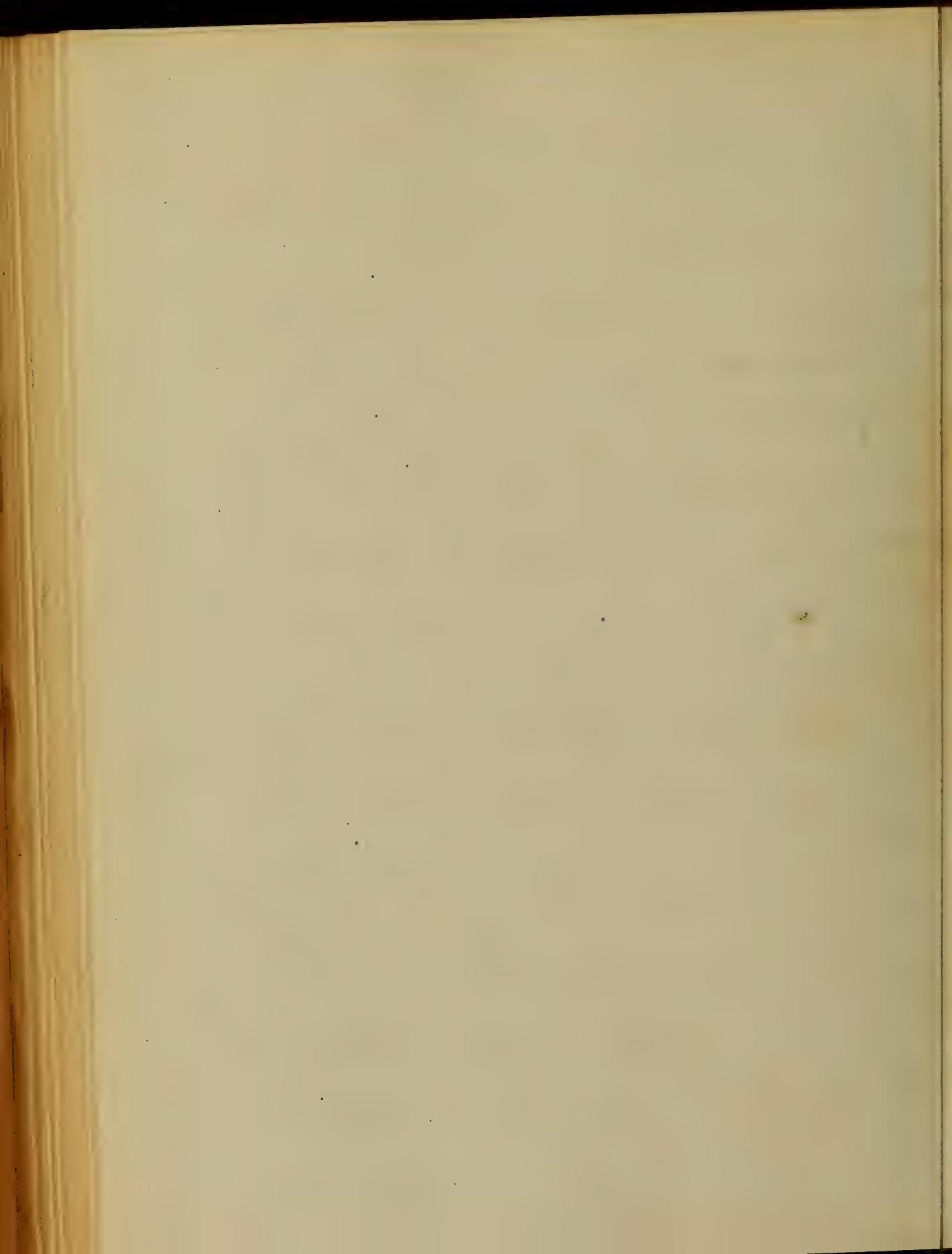
of the stomach, either com-
bined with some disease of
minor importance, or with-
out the presence of other dis-
ease at all" — In this affection
"Alcohol" has been carried too
far, indeed the patient's feel-
ings, are of such a nature,
as to force him to the use of
Brandy, Wine or Whiskey, no
matter how much he may be
opposed to their use — The tem-
porary energy which is imparted
to the stomach — The relief they
feel after having it taken.
The liquor, really inebriates



to think, that it has an immense influence over their disease, and it would be almost impossible, for them to do without it. In this manner the habit becomes formed and ultimately may end in ruin, to mind, body, and happiness for this reason - I mean the dread results - we should be cautious how we use it. If we are to implant the seeds of disease in a man, which may eventually prove his wreck - in order that we may conquer or some other, which might p

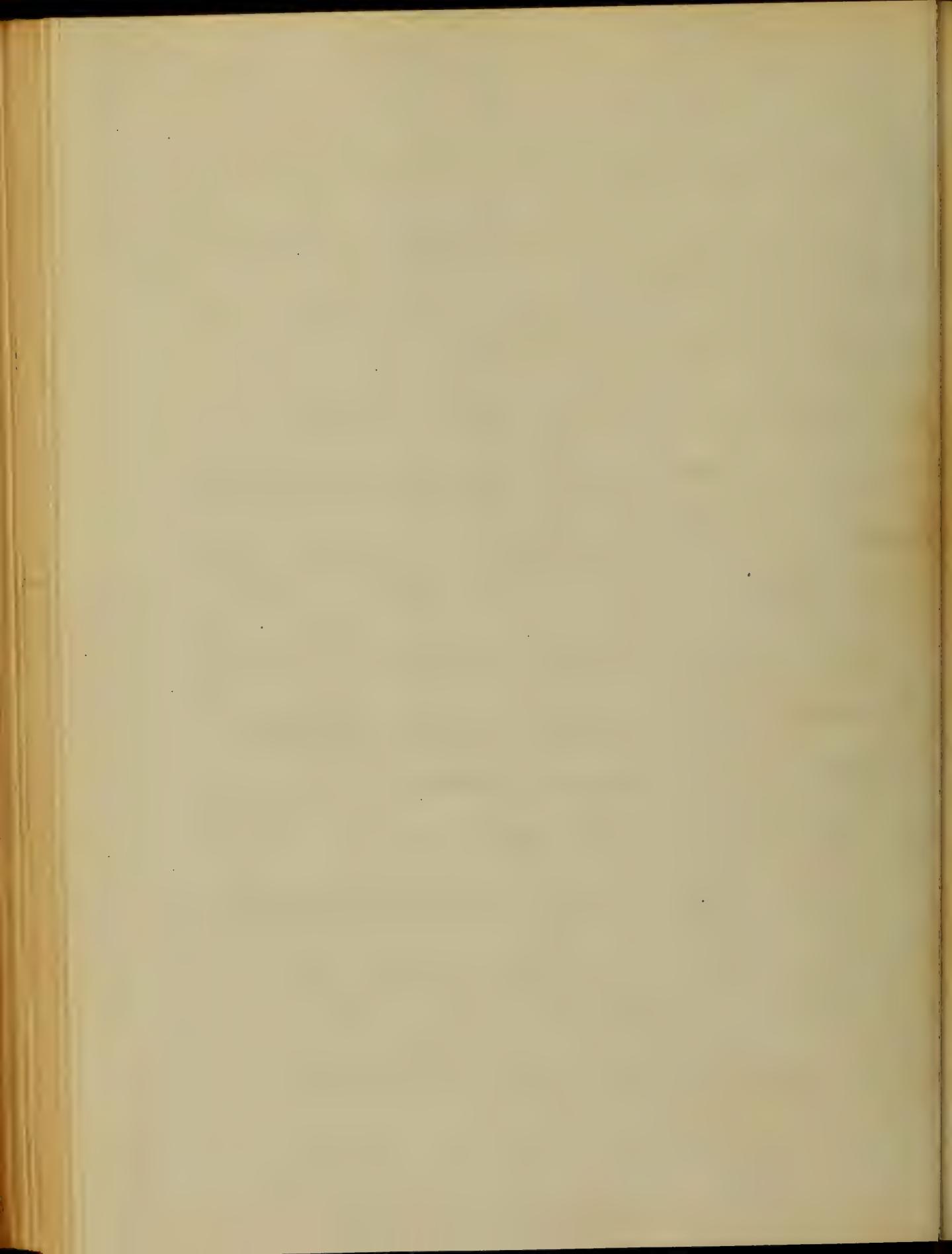


have been overcome by other
mildis, we are indeed cul-
-pable, and lay ourselves open
to censure, from all honest
minded men - Yet I would
not say it should not be em-
-ployed, it would be foolish,
but when it is used, and we
find that our patient no lon-
-ger regards it as a medicine,
but looks forward to its re-
-petition as a pleasant drink
only, when he can again enjoy
that delightful state, in which
the mind becomes exalted, and
wings its way through life.

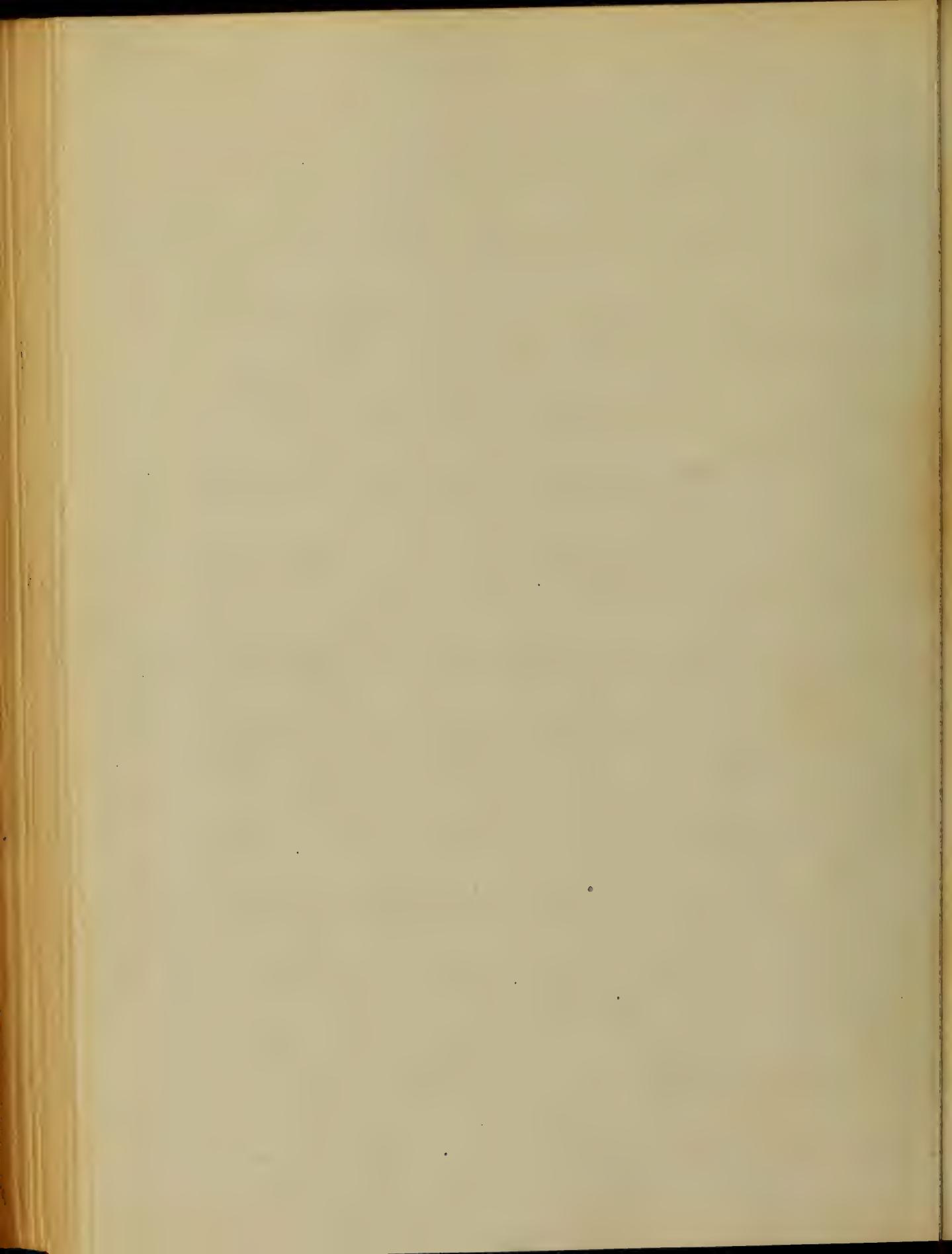


the lightest path of fancy - It
should be stopped, and some
other in the long catalogues be
substituted, in this manner
we can counteract the first
impressions, which if contin-
ued, will surely prove a harder
matter to handle, than the
original - at least more to be
dreaded than its predecessor.

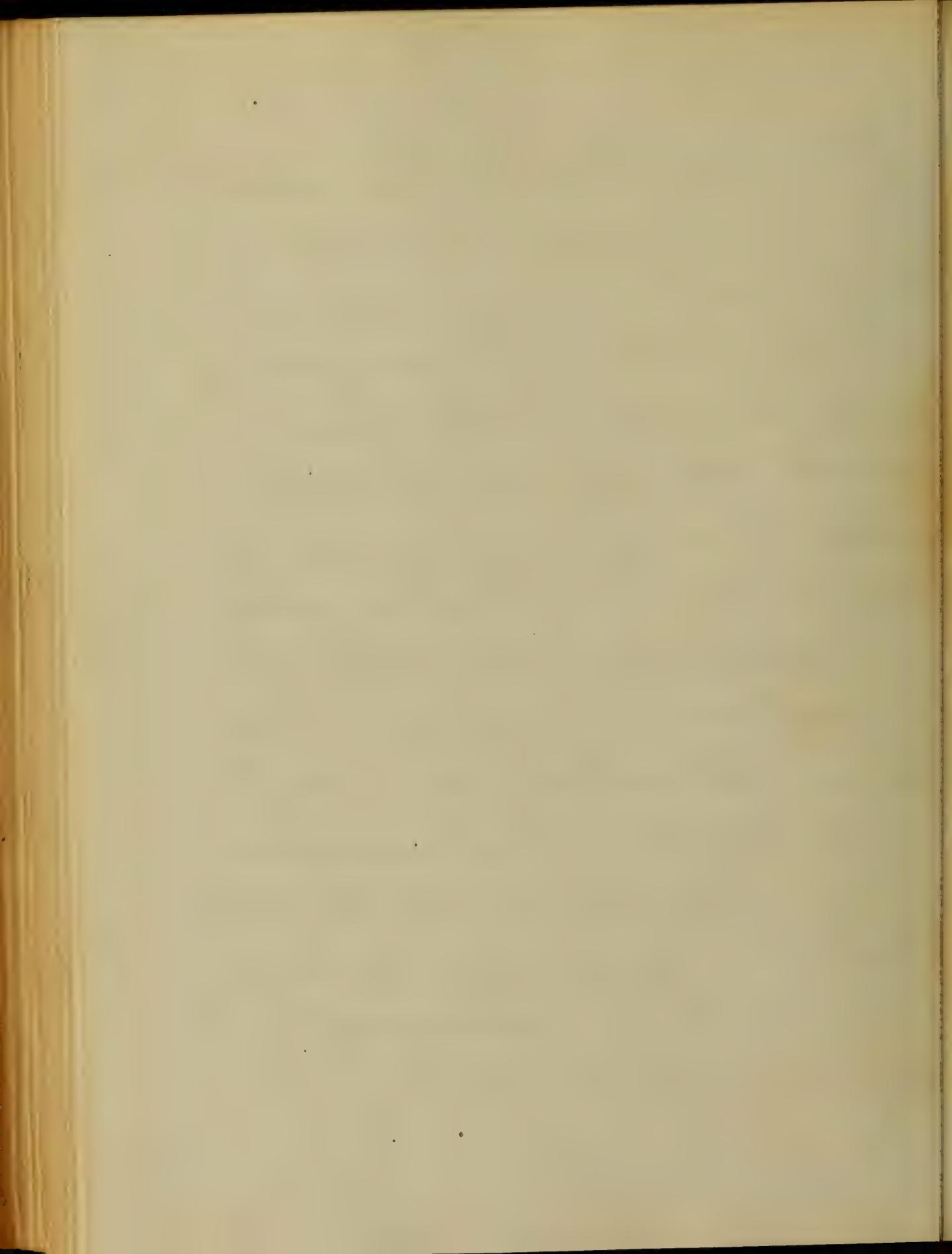
Dyspepsia never yet I presume
caused the loss of a soul, but
"Alcohol" most undoubtedly has,
many are the physicians that
have been the cause - Indeed
so mixed is dyspepsia with



other organs, we find great difficulty in telling which exactly was the first affected - It may be caused by infections of either bowels or liver - Our remedies therefore should not be directed to any particular organ, but be directed in such a manner as to operate upon both the stomach and liver - In this manner, we may counteract in them all and produce results of the most satisfactory nature. "Ipecac" should be used only in simple debility of the stomach and intestines.

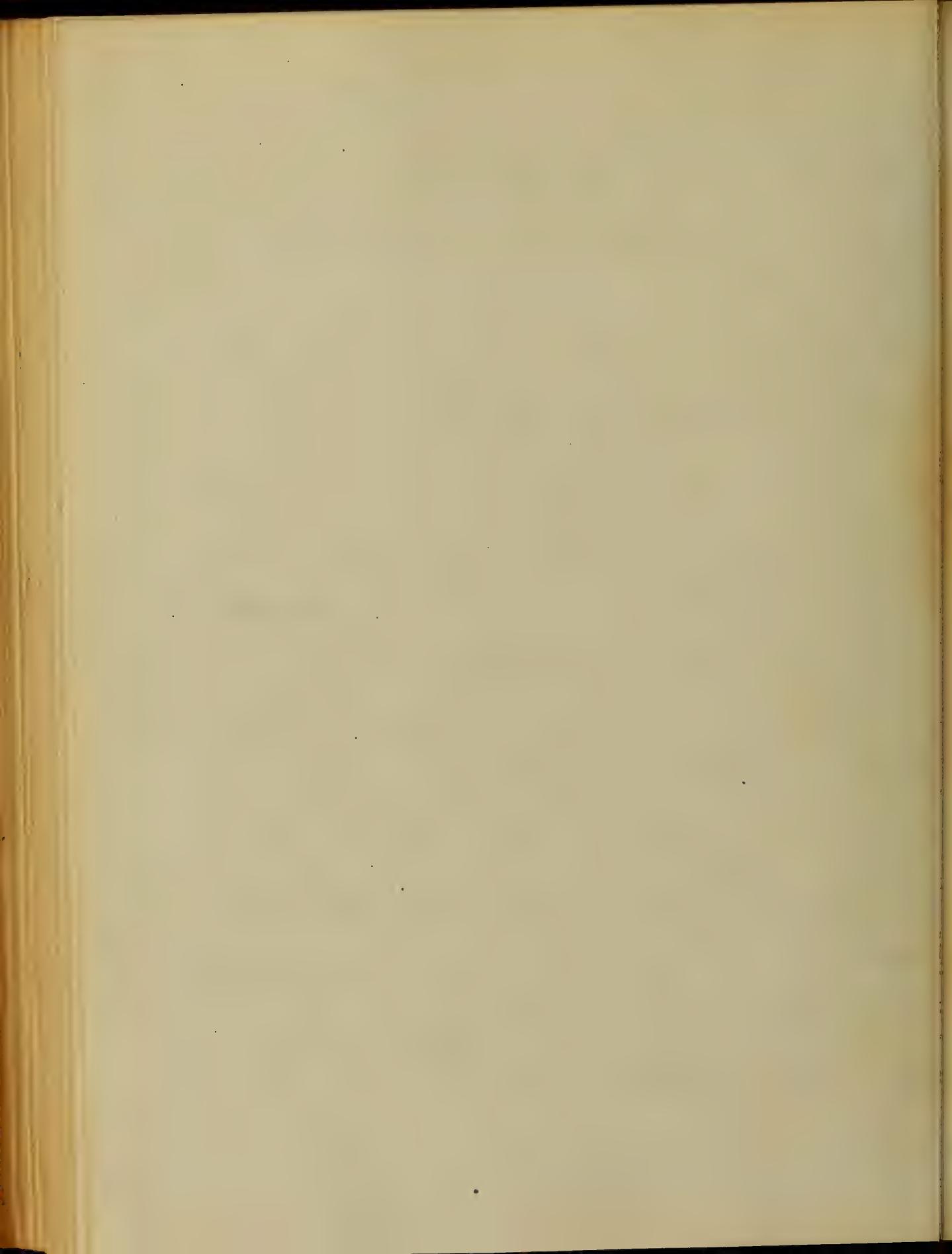


(Dr' D'Arcy). Nor I to enumerate
all the diseases in which "U-
-nicohol" could be used with ad-
-vantage, I should be imposing
upon myself a task, which
would almost be endless; be-
-sides placing myself in a lab-
-aryault, from which it would
be impossible to extricate my-
-self - I could not tell in what
manner it acted, I only know
it would be of immense ben-
-efit and that would be all.
I am not specifying your id
acts, but of its "Use and Abuse"
consequently my task is not



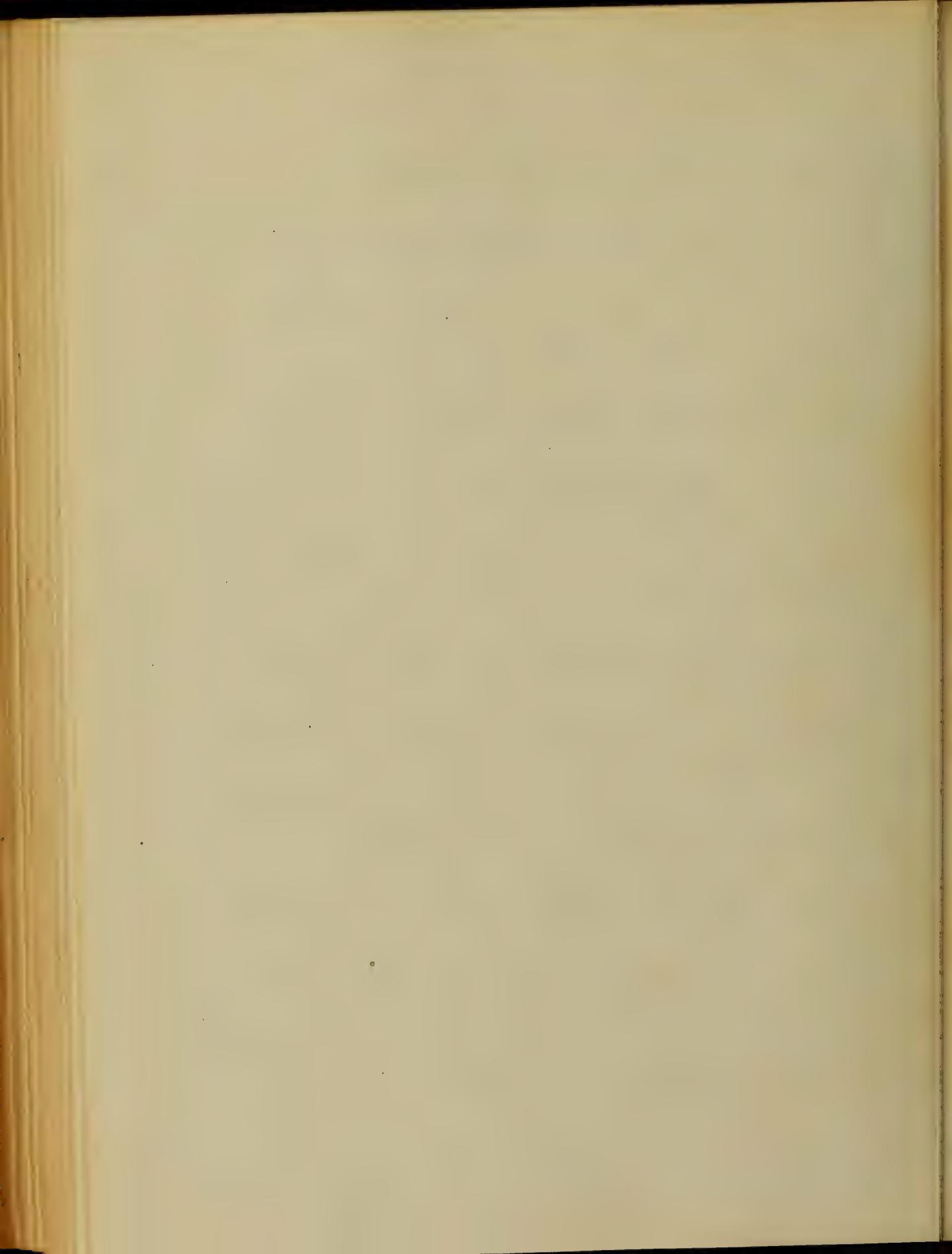
diseases in which it has proved useful, neither in what manner it acted.

There can be no doubt, but that the first stages of intoxication are truly delightful - The mind is free from all care and trouble, one feels as if Heaven itself was open to him, and he enjoys all the pleasures of the "gods" - the imagination - if the man having - has full range. The second stage is not so delightful - The mind becomes cloudy, wandering never remaining steady, for any length of time upon one sub-



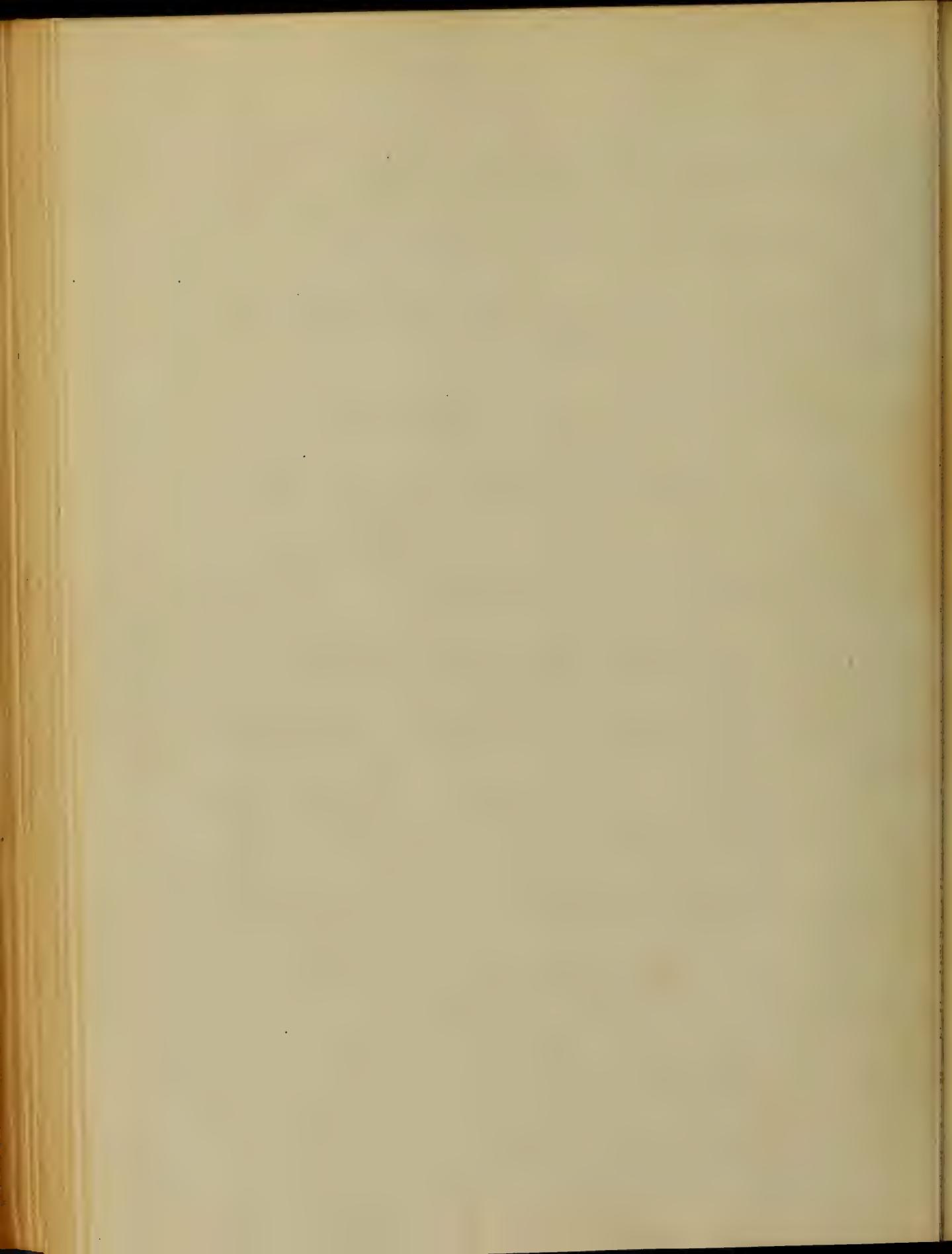
ject the head is dizzy - Every-
thing appears double - tongue
thick, and general dizziness
finally sleep - This stage of in-
toxication comes on almost in-
perceptibly, and, as the man is
aware of it, he is in the most
leathal stage of drunkenness.

During convalescence, if we con-
tinue in the use of "Alcohol,"
dissipated habits are exceeding-
ly likely to return. Moreover,
having contracted the habit
is hard indeed to stop it, for
the reason therefore, we should
substitute some other drink when



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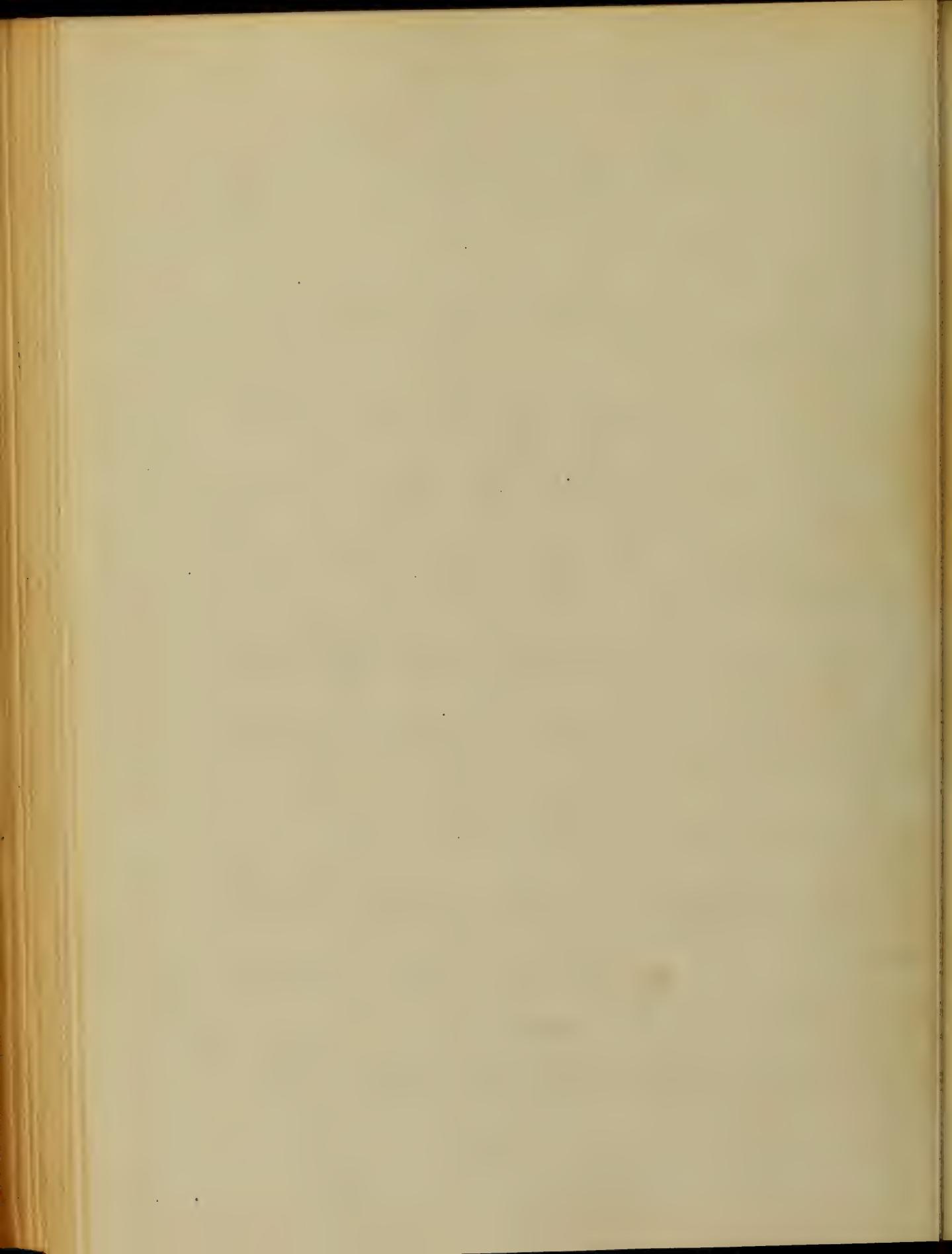
Our position from the public
it seems, is doing this, we not
only become benefactors of so-
ciety as professional men,
but their benefactors as Mor-
alists. After disease has been
conquered we can withdraw
Vine, and substitute, - Ginger
Cannomile, Calomine, indeed
a dozen things which will act
almost as well, and leave no
bad habits behind, family
happiness in this manner can
be preserved, and we, have
the sweet consolation of know-
ing, that to ourselves is due all



2

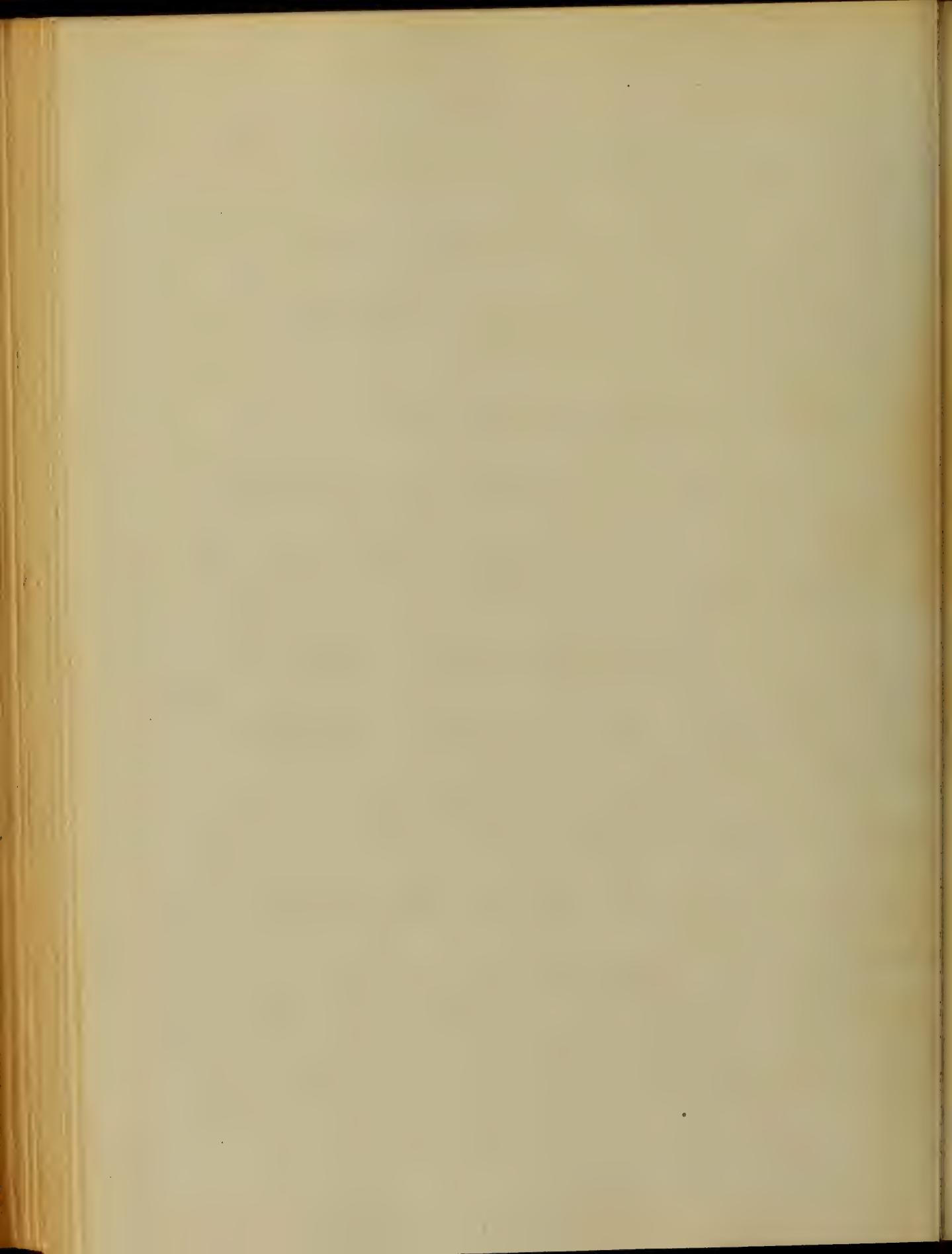
The credit of it is mainly
achievement.

If the bad effects of "ivilization"
would be useless to speak,
we see it every day upon the
streets of this City - their number
is "Legion" - Yet it would be well
to mention, what we may ex-
pect, if he follows closely the
laws laid down, by men, whose
nearest and dearest has been dis-
sipation - It has been said,
and I believe it, that there are
men in the world that when
free from artificial stimulants,
are the most stupid creatures,



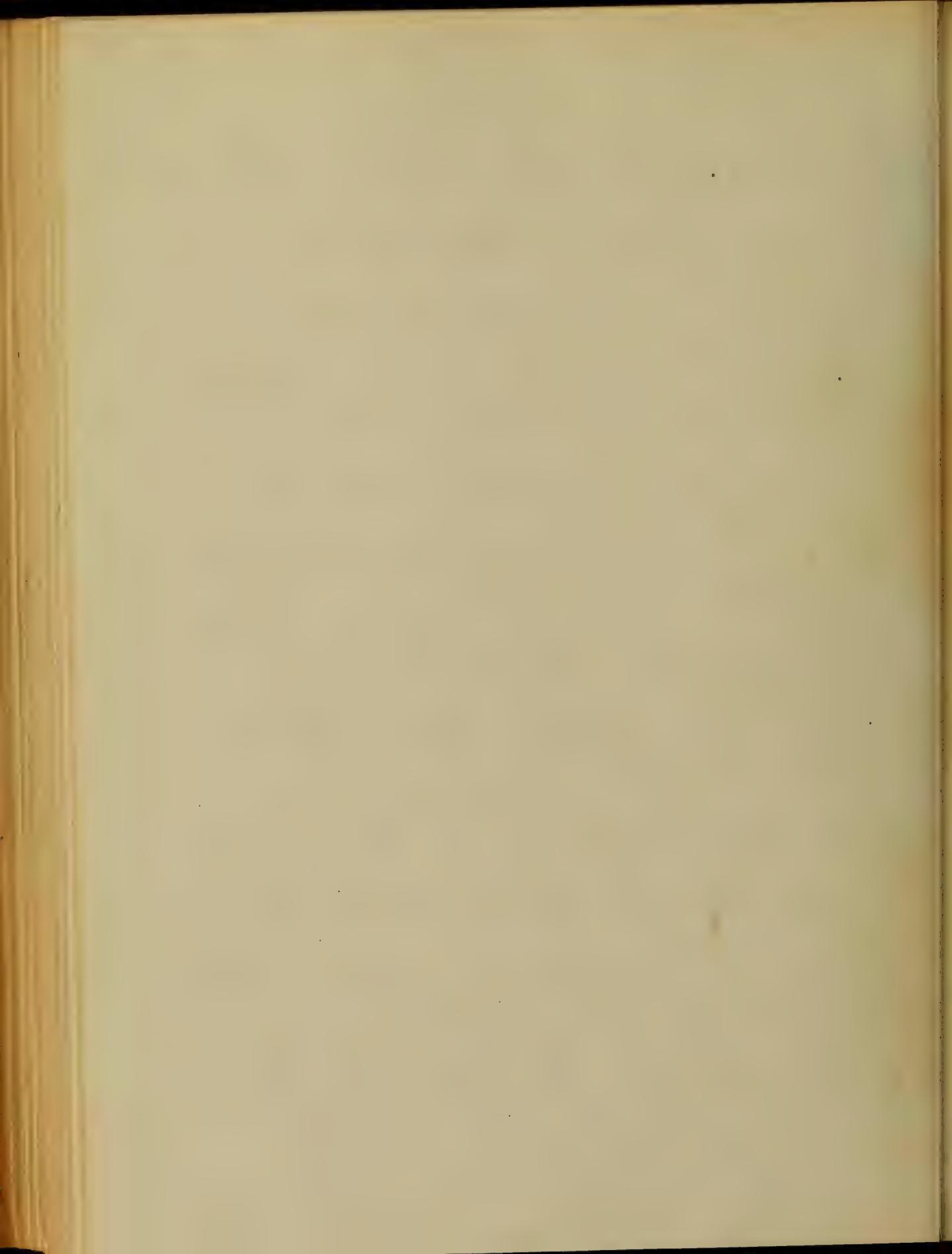
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that can be imagined - In order
therefore to render themselves ap-
-pealable and fascinating a "re-
-tiring must be taken, which will
stimulate, and urge them on
to attain some end; at least
to attain the end they desire.
Above all things one should
bear in mind, that if he or
she, has not an imagination
to stimulate, they had better
not use it, for if it does not act
in one way, and render them
brilliant, it acts in another and
renders them more contemptible
before - off God did not intend,

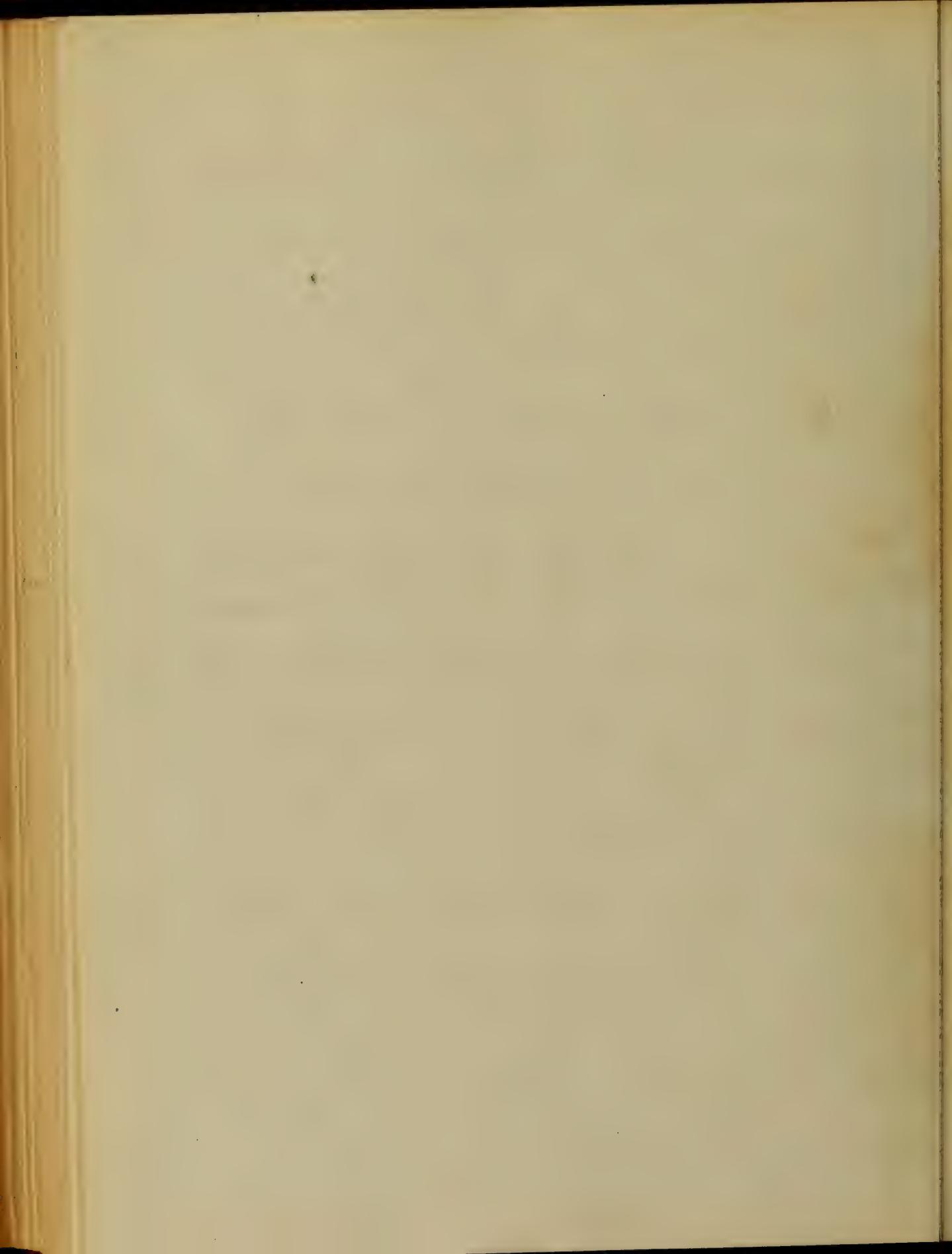


But a man should have an
imagination, which could be
brought to such a point, as to
impress all, with the beauty of
his thoughts, all characters
in the world would now, but
quite to contrary, consider
him perfectly ridiculous. The
old adage of "Poeta mancitur
pro p[ro]p[ri]etate" should still
be people practice upon it.

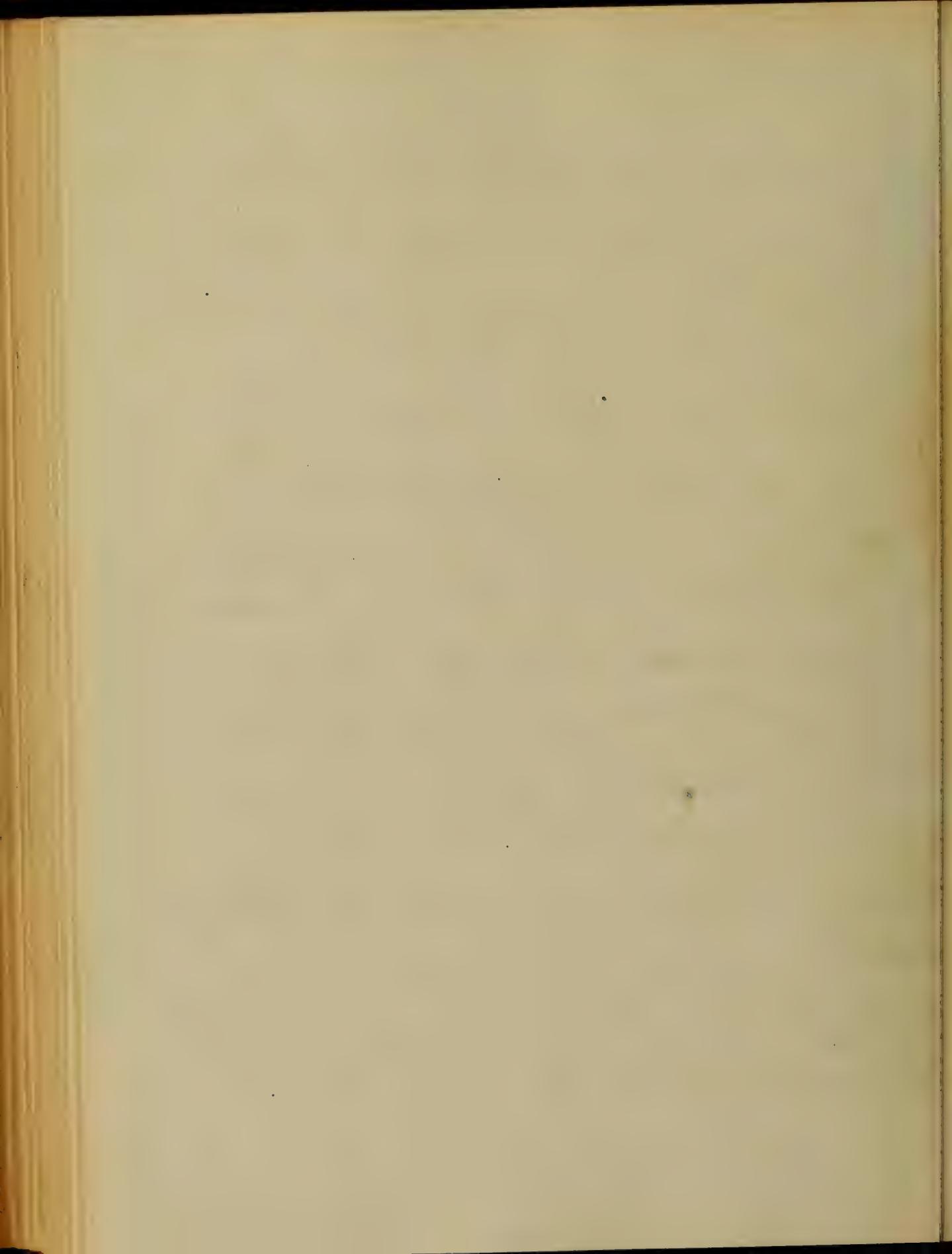
"Mirum forensis" — which fol-
lows, if the use of "fiction," is car-
ried to great excess, is one of the
most terrible sights to look upon
which can be imagined, & I



Lights, and millions of jingling
reptiles crowded upon the dis-
ordered vision, the poor mortal
with eyes protruding, suspended
from room to room in the
vain effort to escape from
fancied injury - Every here and
there, there still are the bearded
creatures - Men with this intent
are pictured by his friend's
brain - With wild and terrified
looks he crouches in some cor-
ner, perspiration dripping in
large drops from his fore-
head - He calls loudly for
help, implores those in the way

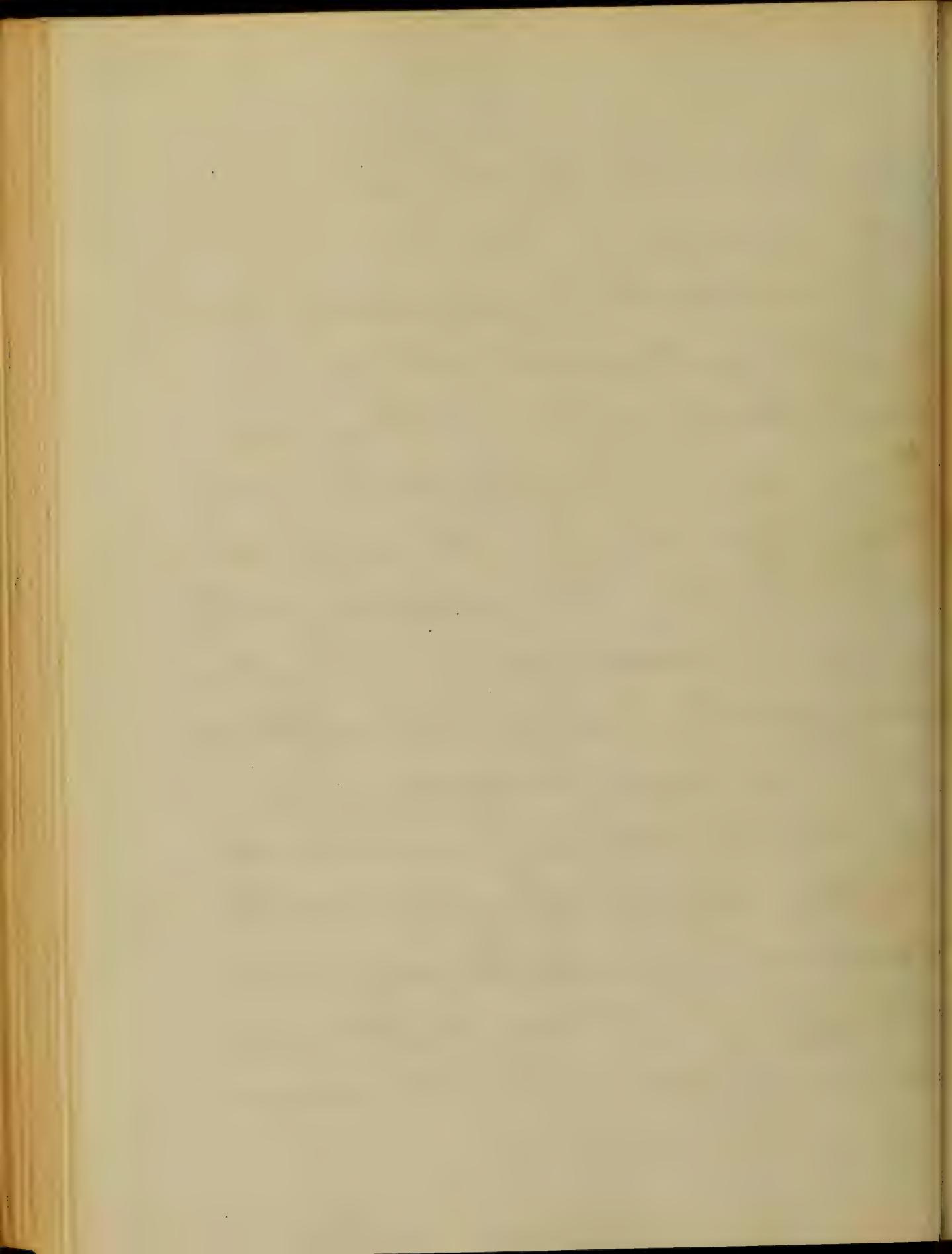


be patient to a dangerous person,
the friend who is only waiting
to drag him down, and place
him among the "lost" - sleep is
impossible - What then can
be done? Unless the system
can be quieted, Death must in-
evitably follow - Opium is re-
commended, & Brandy, or some
strong drink similar in its
action, in such cases will be
found very advisable - The sys-
tem is debilitated which if allow-
ed to go on and the patient
not sleep - will be exhausted and
then comes that long languor



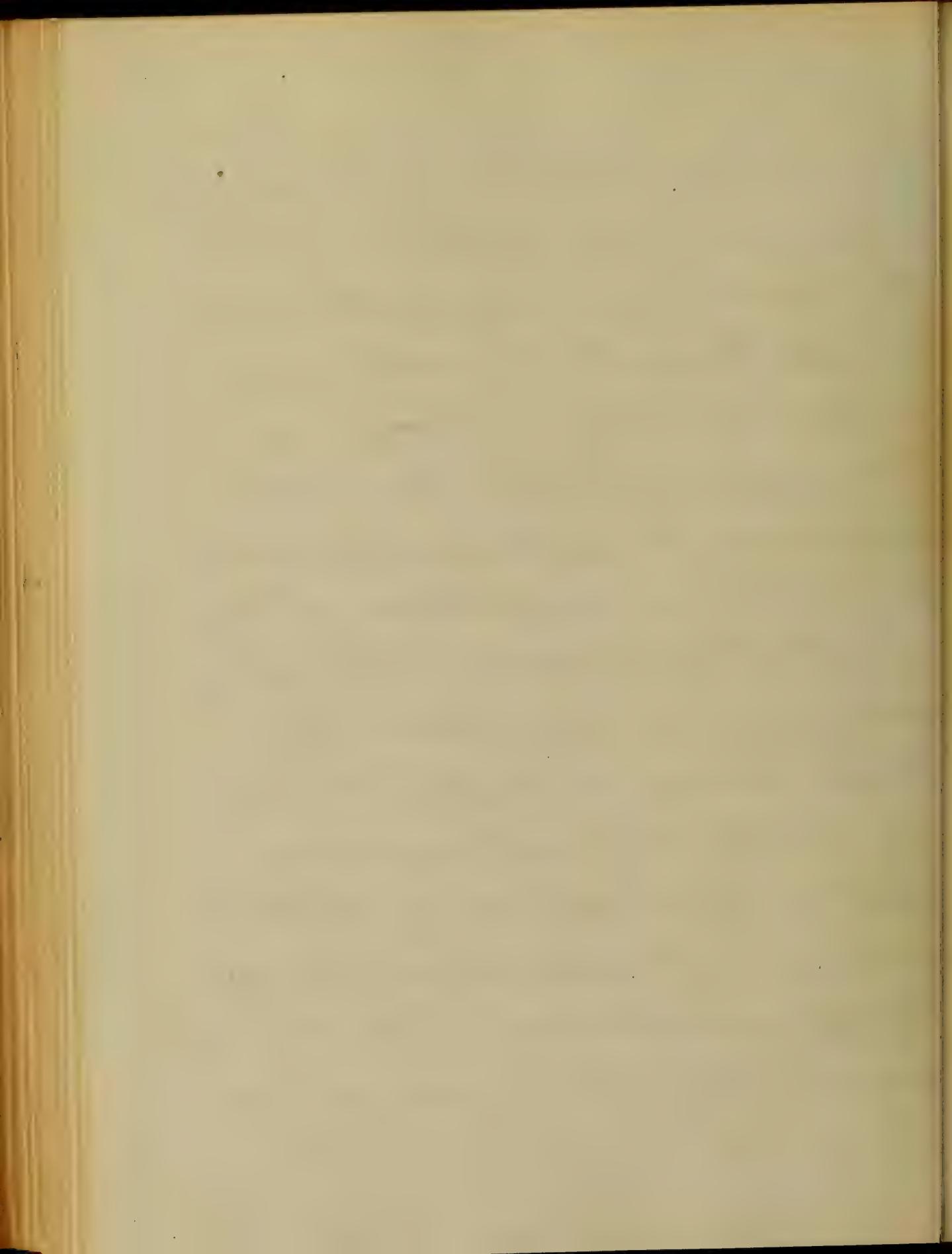
sleep or even which there is no
wakening.

Yet notwithstanding all the
suffering through which one
has to pass, so soon as they recover
from one attack back again
they fly to old haunts, & companions
and habits; till following the
same course which will eventu-
ally put an end to their existence.
Men who have once formed
the habit seldom if ever abandon
it. It is a habit strong even to the
last - all remonstrances, & in-
fluences, be it ever so powerful
has no effect, down they sink.



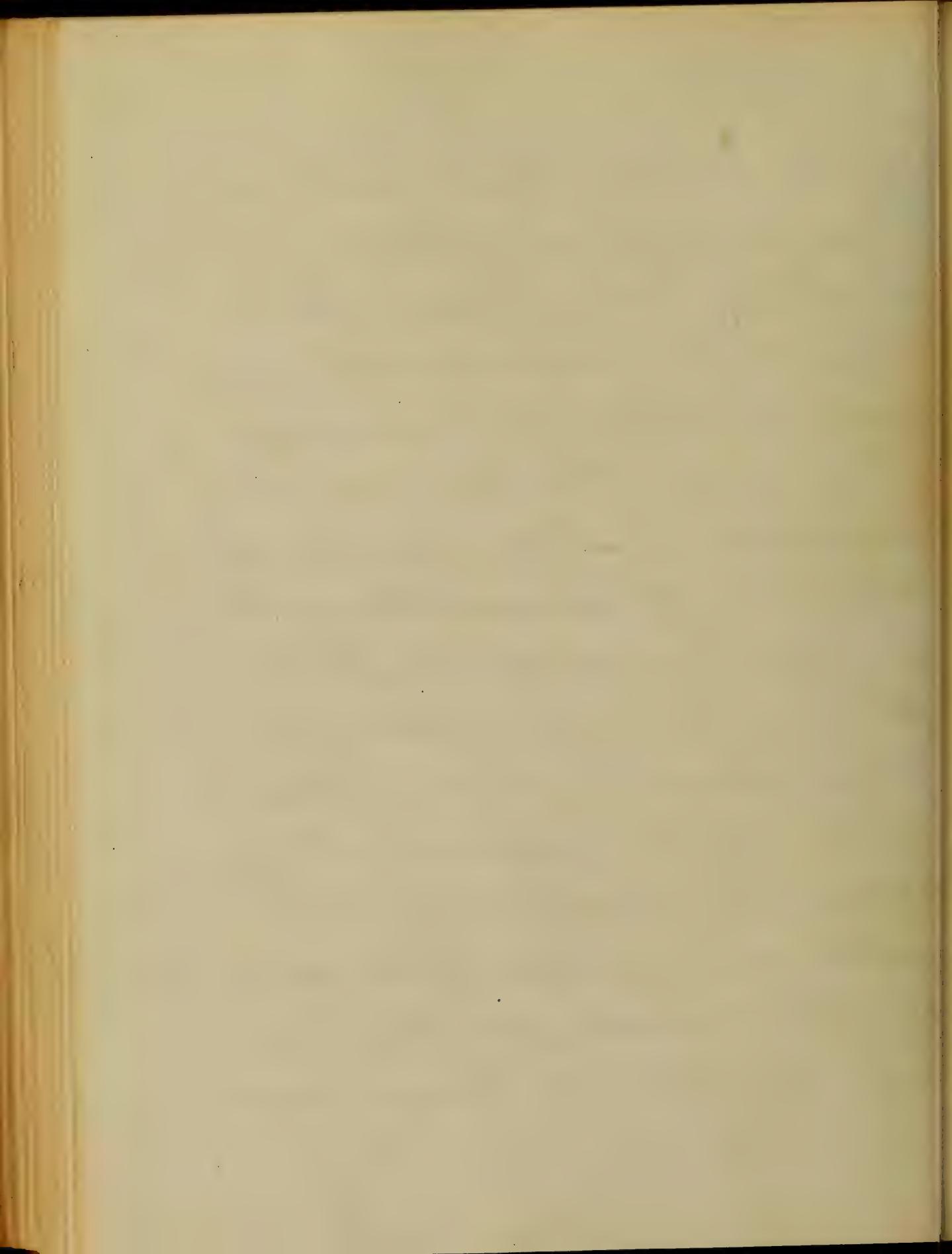
till death claiming him for his own,
a man which might have filled
the world, now disgraced and
buried beneath the sod "unmet
unhonored and unsung."

Nowhere on the globe be man
savage or civilized can we not
find some substance which
exerts this baneful influence
over man - No matter how
timid a man may be "Mescal"
has the effect of making out of
that basiful shrinking creature,
a man with some slight courage.
"Apoplexy" is also one of the
results - One little knows when he

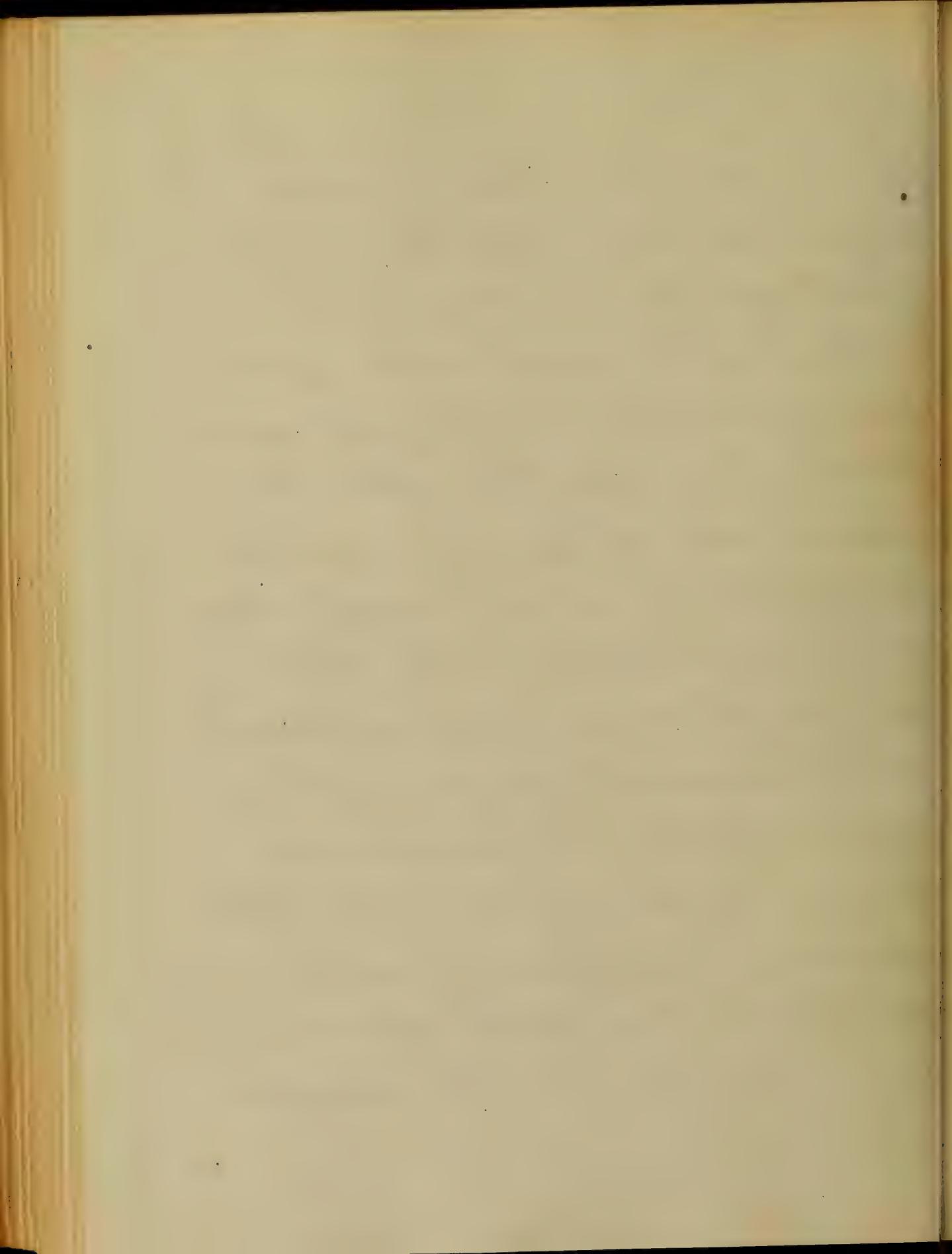


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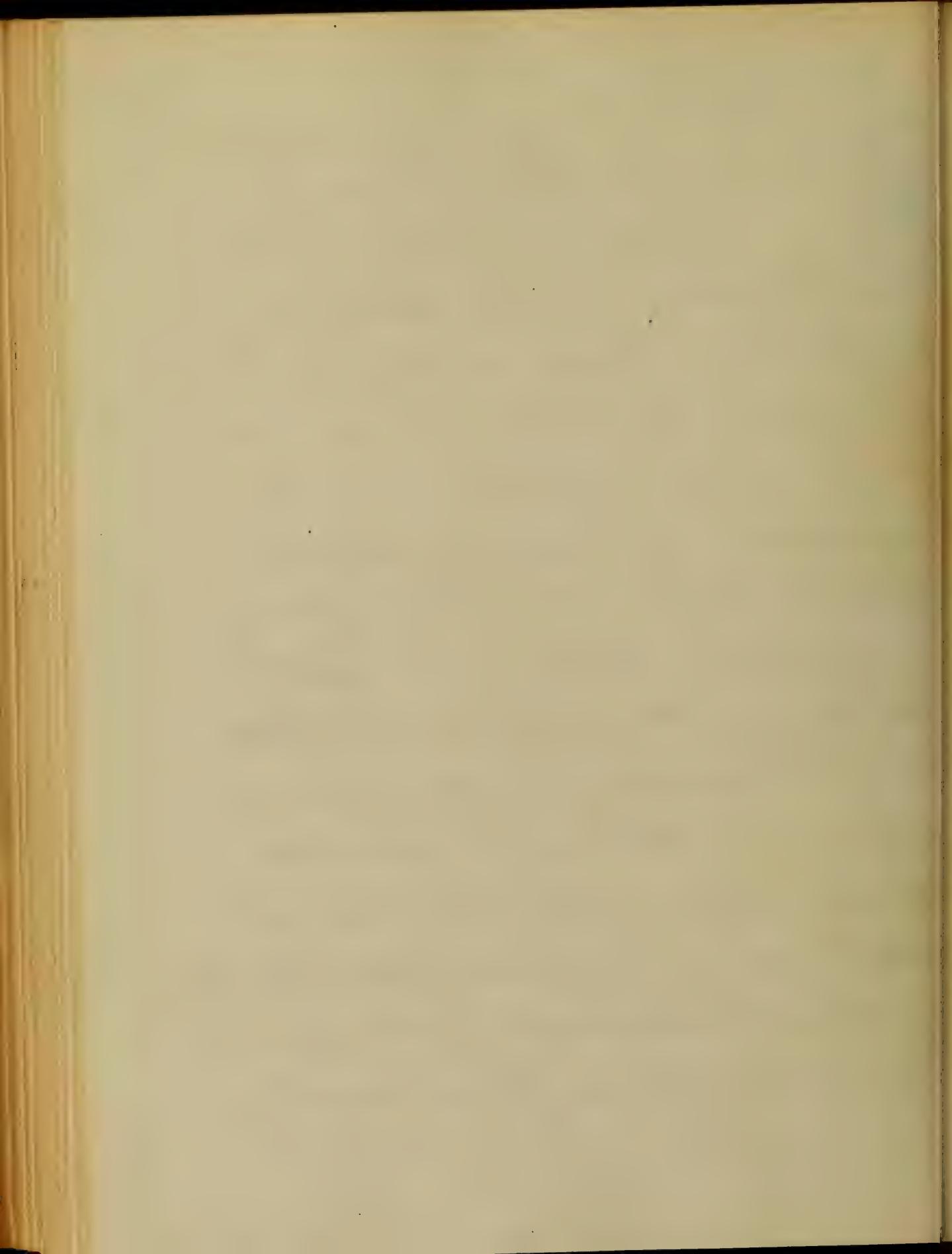
is to be stricken down with either
mania or apoplexy - It comes
stealthily like a thief in the
night - The first intimation we
have of its presence, we are in
its power - little time has one
to think - The Mania comes
the force of imagination - It
is indeed urged to its highest
power - The living wished for
fancy has not yet been obtained
the mind conjures everything
which is horrible, and our
patient is mad - There is no
cure medicinally for it is horrid
and most unfortunate habit.



If any good end can be accom-
plished it must be done by ap-
pealing to the mind - all the med-
icines in the world will not be
productive of a single good result
if the man is so thoroughly de-
based as to be willing only to be
happy when under the influence
of artificial stimulants, etc.
must the case be abandoned
the disease is beyond medical
treatment, the Physician is no
longer required - the man is be-
yond redemption - To continu-
e plait the terrible wrecks which
man can make if himself is

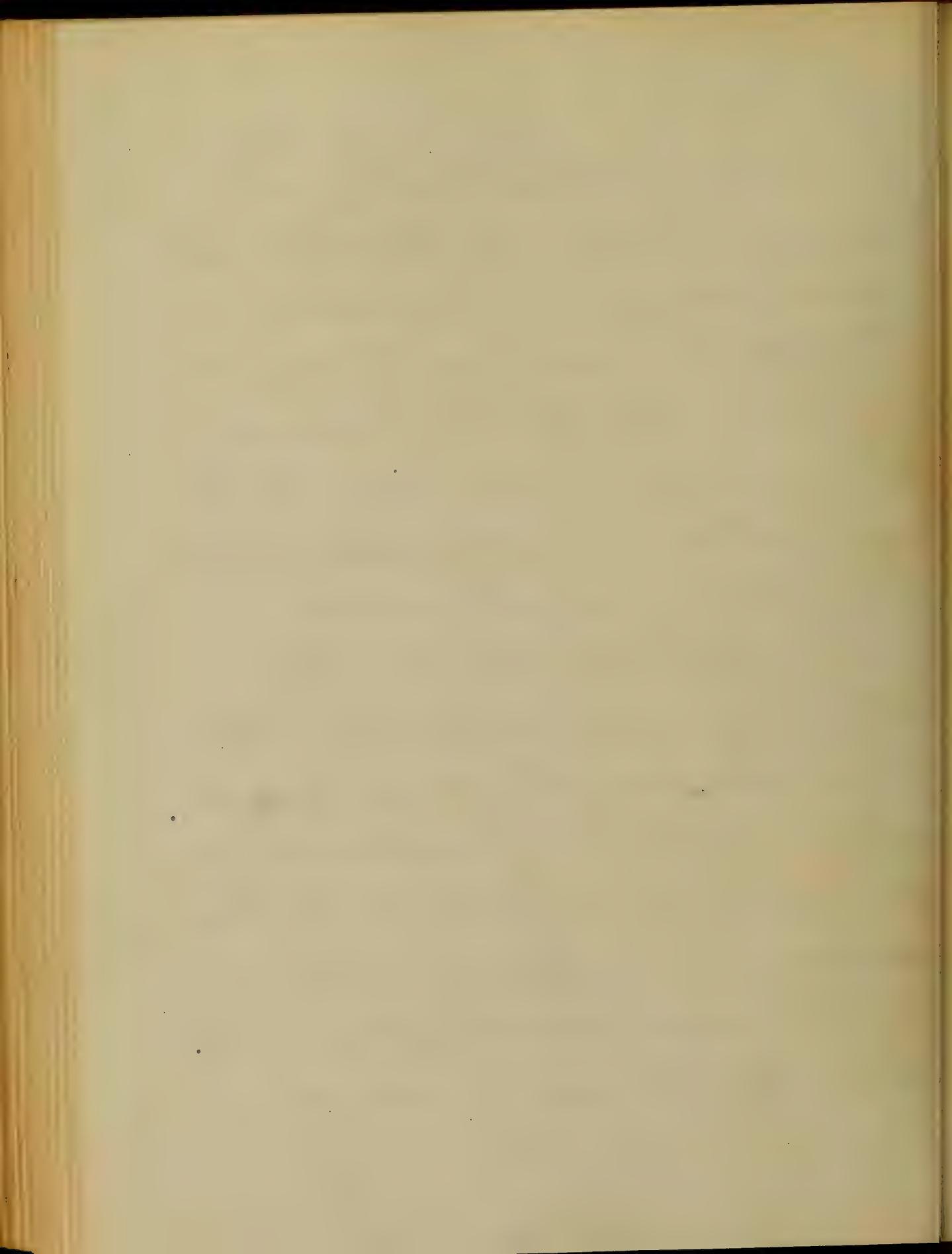


placed in the "extreme".
Alcohol" as a poison is in the
end -Deadly equally as much
so as any other named in the
"Nativer-Medicis" - If we have
more time to correct it than is
allowed in poisoning by Hydro-
cyanic acid - "alcohol" is gen-
erally slow - yet in some instan-
ces, it is quick and does its work
most thoroughly, such is the case
when men through a mistaken
ambition, wage Native such
a time they will accomplish such
an object - In such instances
"Coma" is sudden, face becoming

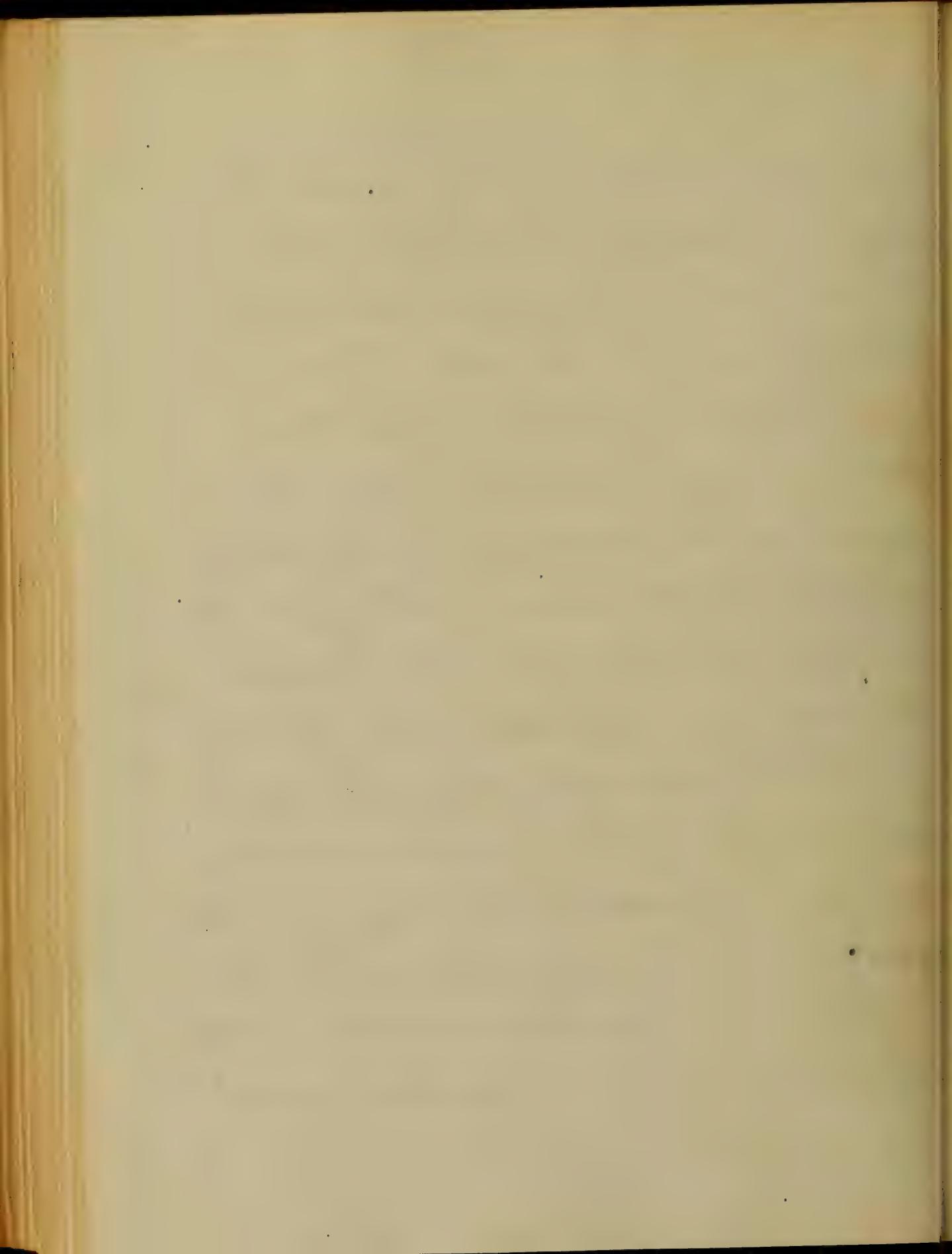


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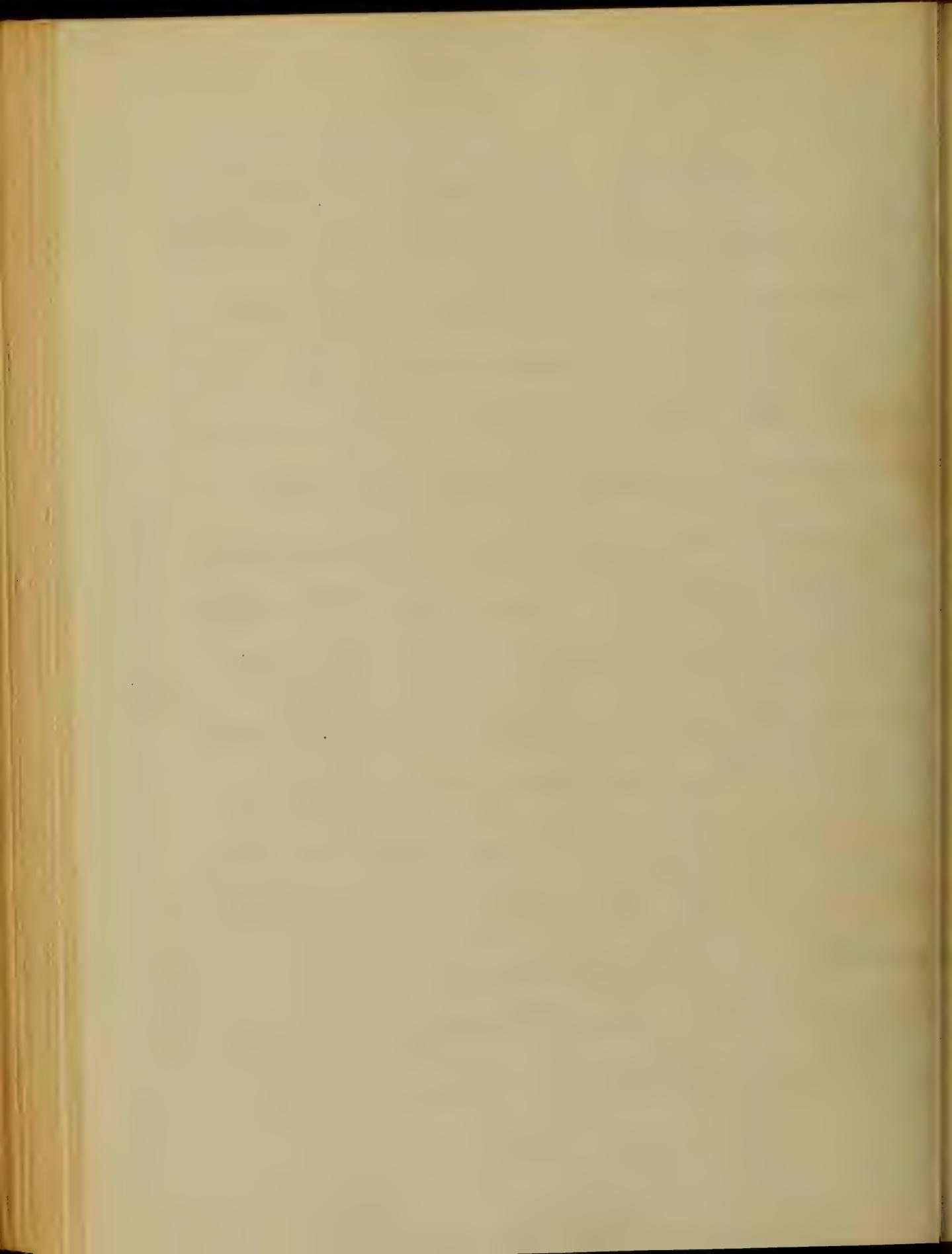
which, no matter, readily passes,
puff'd dilated or contracted off
Speedy relief is most demanded
Death banishes the patient into
eternity - the hemorrhage when
the system has become very much
debilitated, by constant loss of blood.
"Alcohol" or some stimulant is
absolutely required, to sustain
the flagging powers of life - The
Physician is in such a case as well
as in all others no matter what
his opinions on the value of "Al-
-cohol" may be - so even if his
opinions are based on prejudice -
is in duty bound to use it.



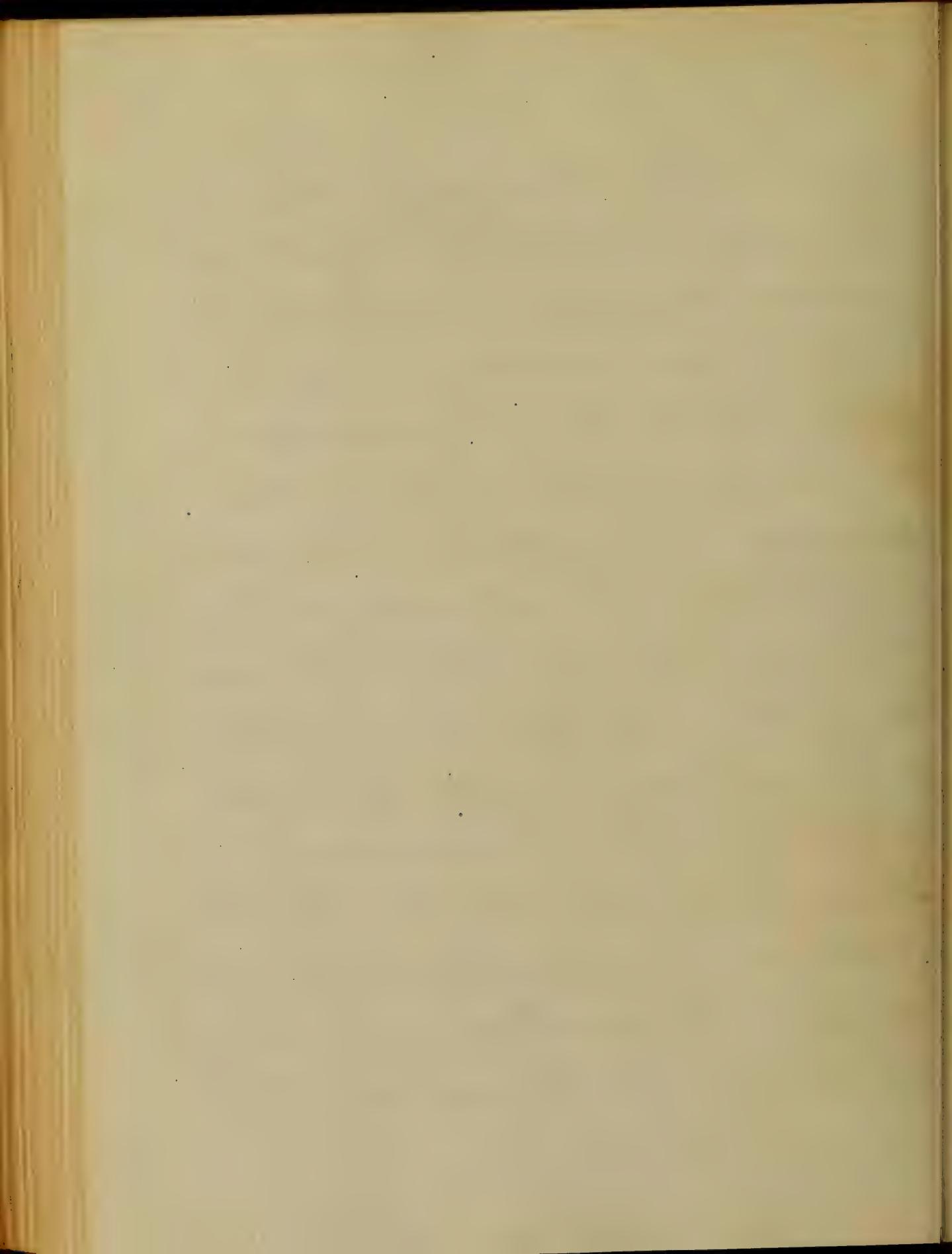
The physician is the man to
heal the body of its ill - The pa-
tient with the assistance of the
clergy will improve after the welfare
of his soul - Our business con-
cerns only the mortal part of
man - This conscientiously being
opposed to the use of stimulants
is carrying of tenacious principles
to such an extreme. so to under-
-stand - which all physicians who
are guilty of this, most assuredly
must be sacrificing a great and
powerful remedy to conscience -
What would medicine be with-
out its most powerful agents?



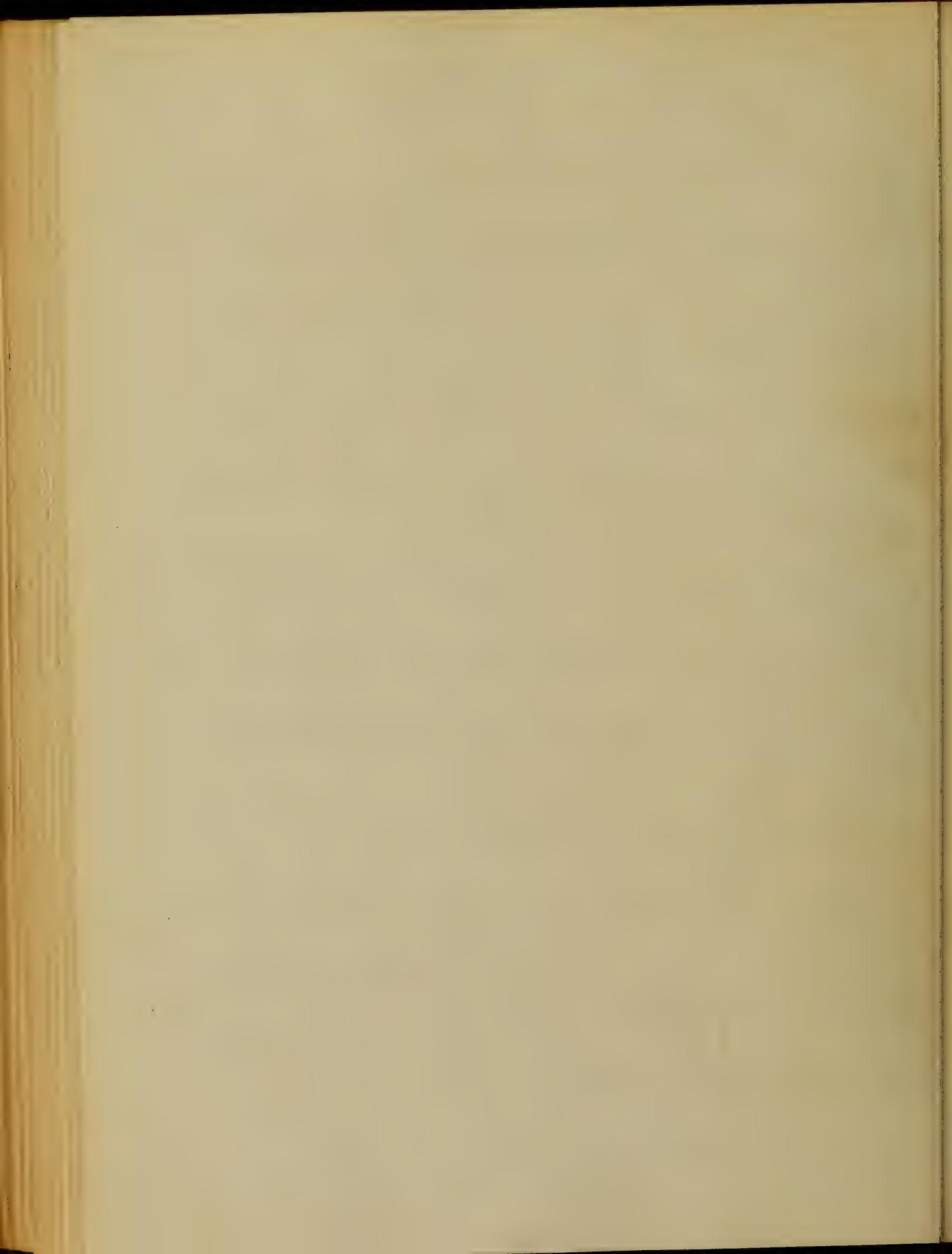
How could we hope to con-
tend successfully with such
diseases as infect our marshy
countries, if it were not for Lin-
min? Without Linmin we could
be quite a patient who was dead and
almost exanthematized, is informed
differently. If we contemnate
the folly which we may be guilty
of in absolutely rejecting this val-
uable - I might say, a sovereign
remedy we follow if gross injus-
tice is done, not only to ourselves
but to the patients.
Of course, gentlemen I am
not expected to argue this



point with those who have
made the subject ^{the study} of a lifetime,
yet our most learned Physicians
and Surgeons all use "alcohol,"
if others I can produce so many
names of eminence in sup-
port of the position which I
have taken, & most assuredly
there must be a vast deal which
cannot be confuted by the most
powerful arguments advanced
by the disciples of "Brownson's"
that which has stood the
test for years most certainly
must be true. It is no longer
an experiment. We are certainly



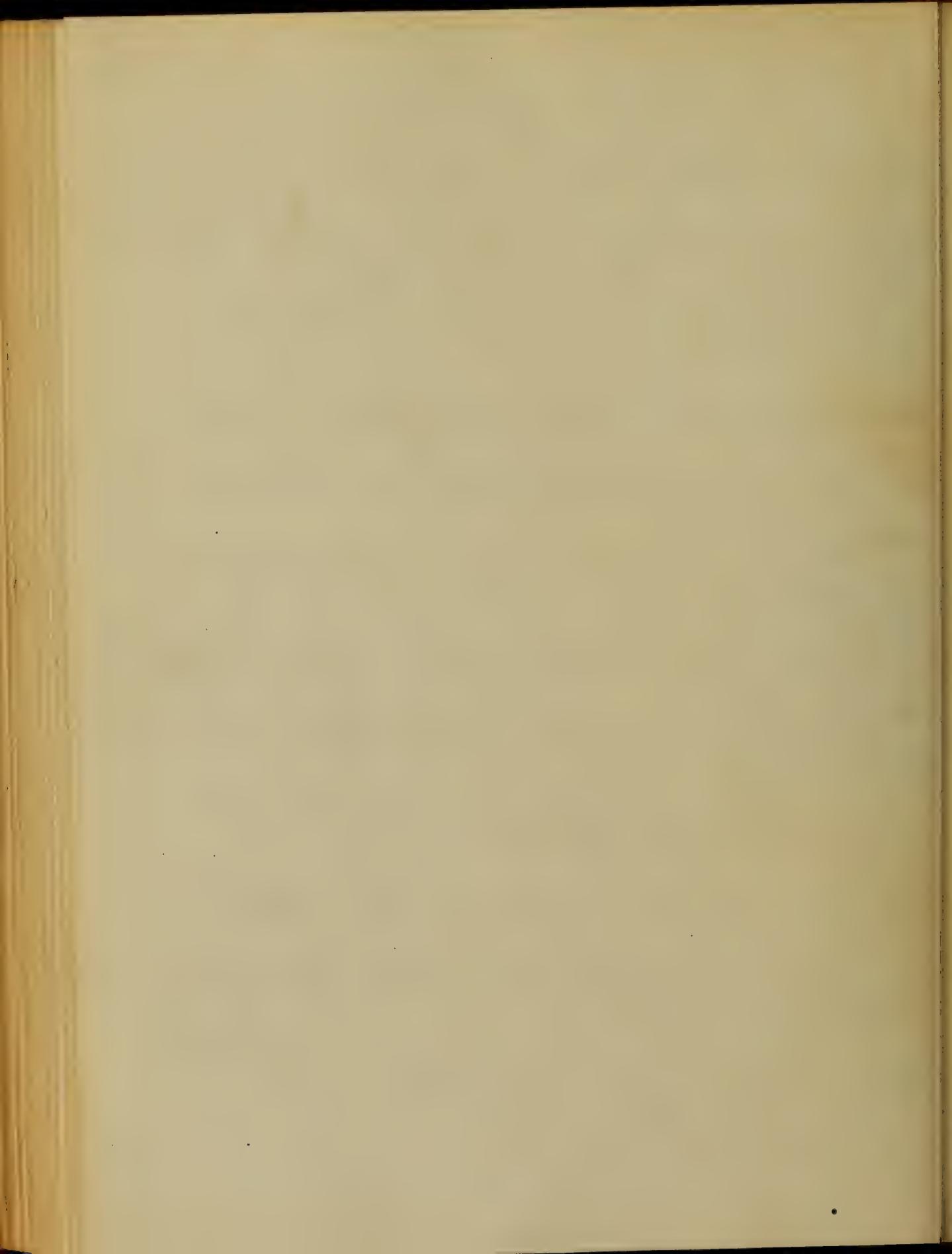
It has been advanced by quite a number of whose names I can't remember, that by treating disease with "ice cold", we lay the foundation for dissipation - this may be true, by using "cold" we may induce death if carried too far. Yet could we cut it off altogether from practice and substitute anything else which would act as well? What would anyone do without it? Never have I seen in my reading, where "cold" in surgery or practice could be abandoned. Why then should we



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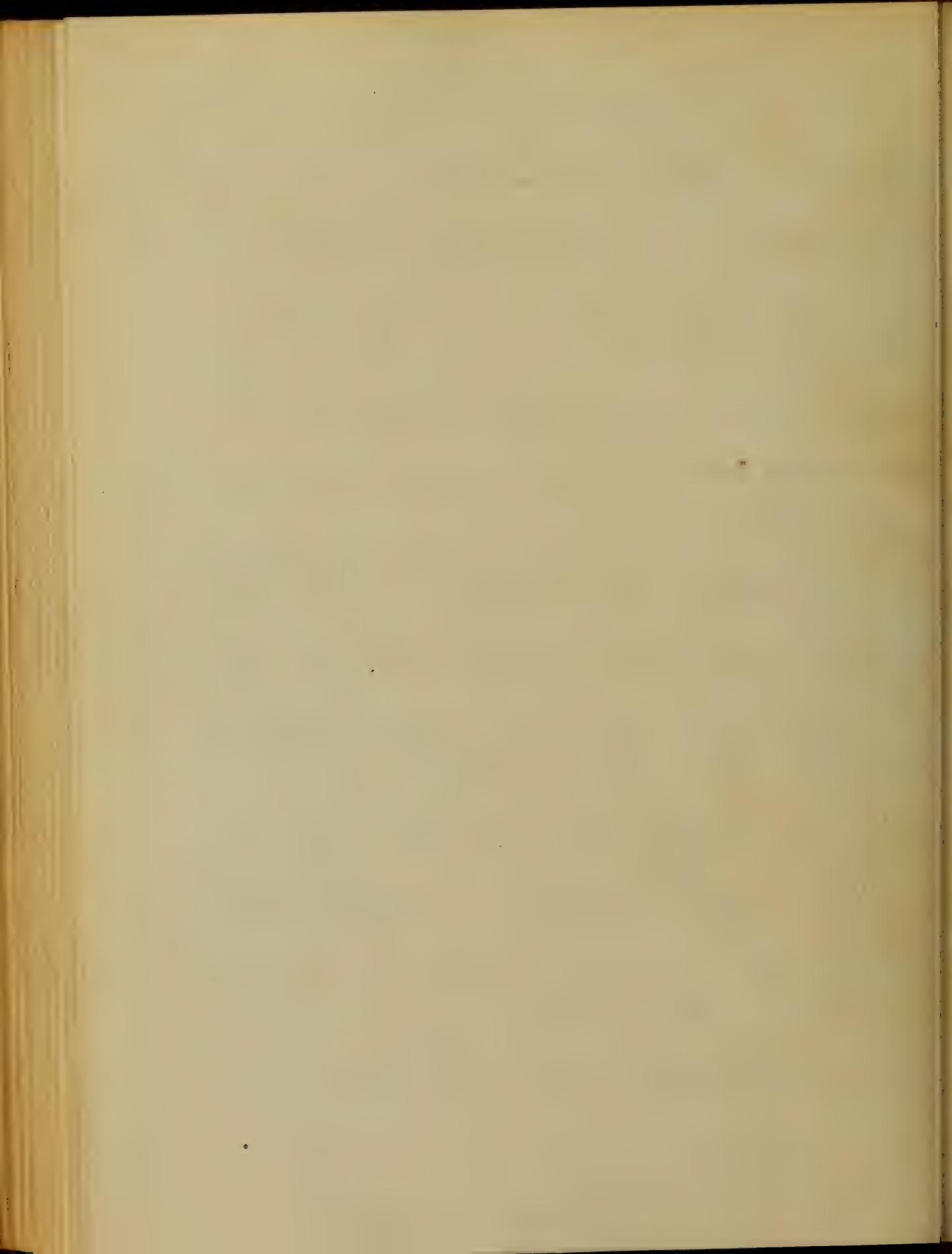
now after argument be ad-
-ved? Can it be possible to con-
-tradic^t an "Axiom"? We cannot
reverse that which, it is known to
be sound and make it appear false.
My object yesterday in select-
ing this subject was not to advance
anything in favor of the use of
"block-hal" but to express my honest
convictions as to its utility.

All my reading has been of such
a nature as to convince me
that equally as many powerful,
and in many instances much
more powerful reasons can be
produced in a support of its im-



37

- mere benefit. In my own practice - should I ever have one - I shall follow my own judgment in its use - When the system needs support, I shall most assuredly give it. In high fevers when the poison which has been circulating through the blood makes my patient in danger of losing that which is most dear to him "His Life" I shall use "Alcohol", but not to the extent as to lead to alcoholic poisoning. In Hemorrhage, when the system has been debilitated by excessive loss of blood again should I use

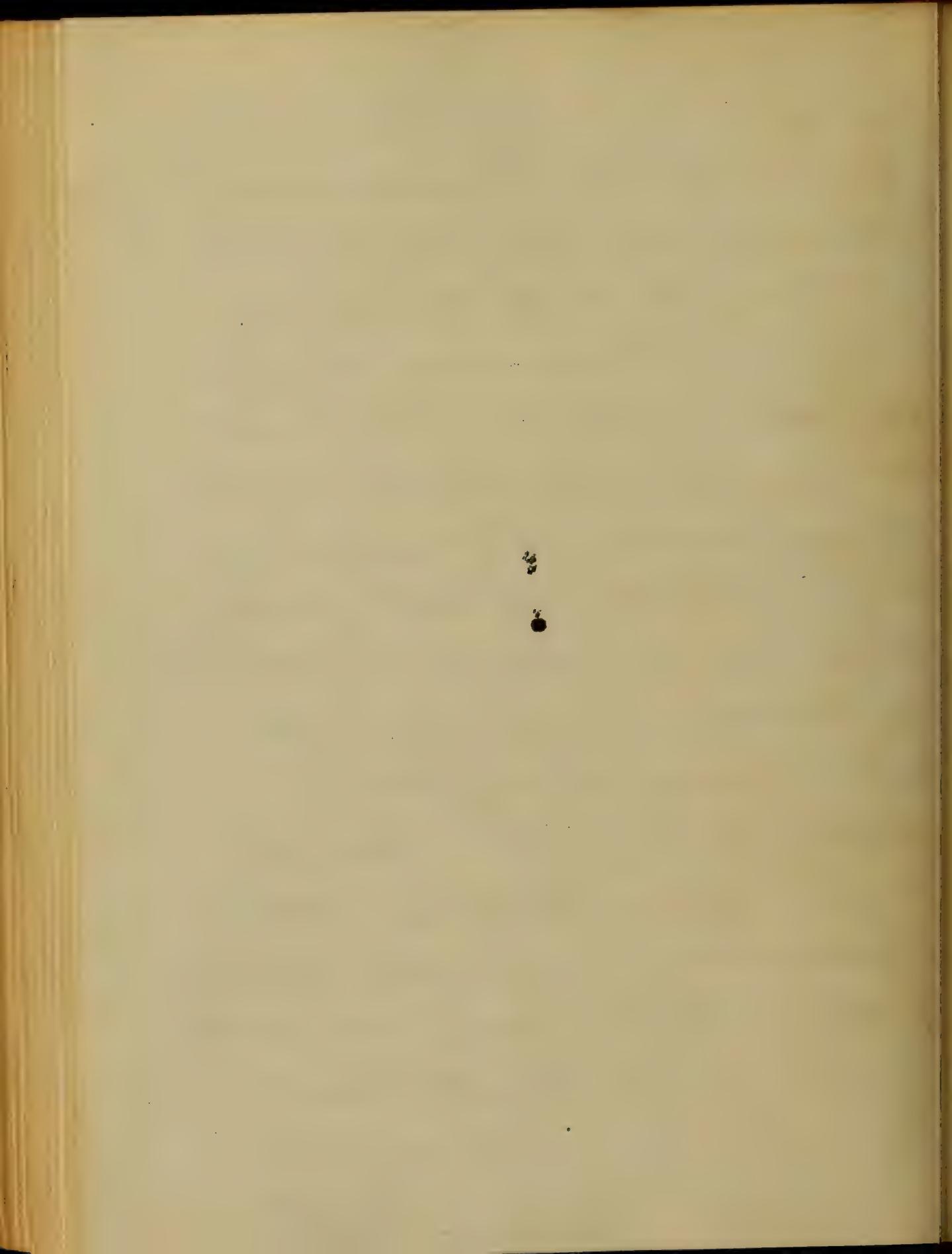


3.

it. No matter what has been said
upon the subject, my patient's life
is to be my first object. In treating
our patients we are bound in honor
—or to do all for him which medi-
cine can possibly allow, if we fail
then do we know that we have
done our duty both to the profes-
sion and our fellow man, there-
by fulfilling the great object for
which we were placed here.

Hoping gentlemen that these few
desultory remarks may meet your
approbation, and I have sincerely
of graduation I have the honor to be

Your Obed Servt
Lee Scott
Missouri



A N
Inaugural Dissertation

ON

Inflammable Matter
Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

P H Y S I C ,

OF THE

UNIVERSITY OF MARYLAND,

FOR THE DEGREE OF

DOCTOR OF MEDICINE,

By

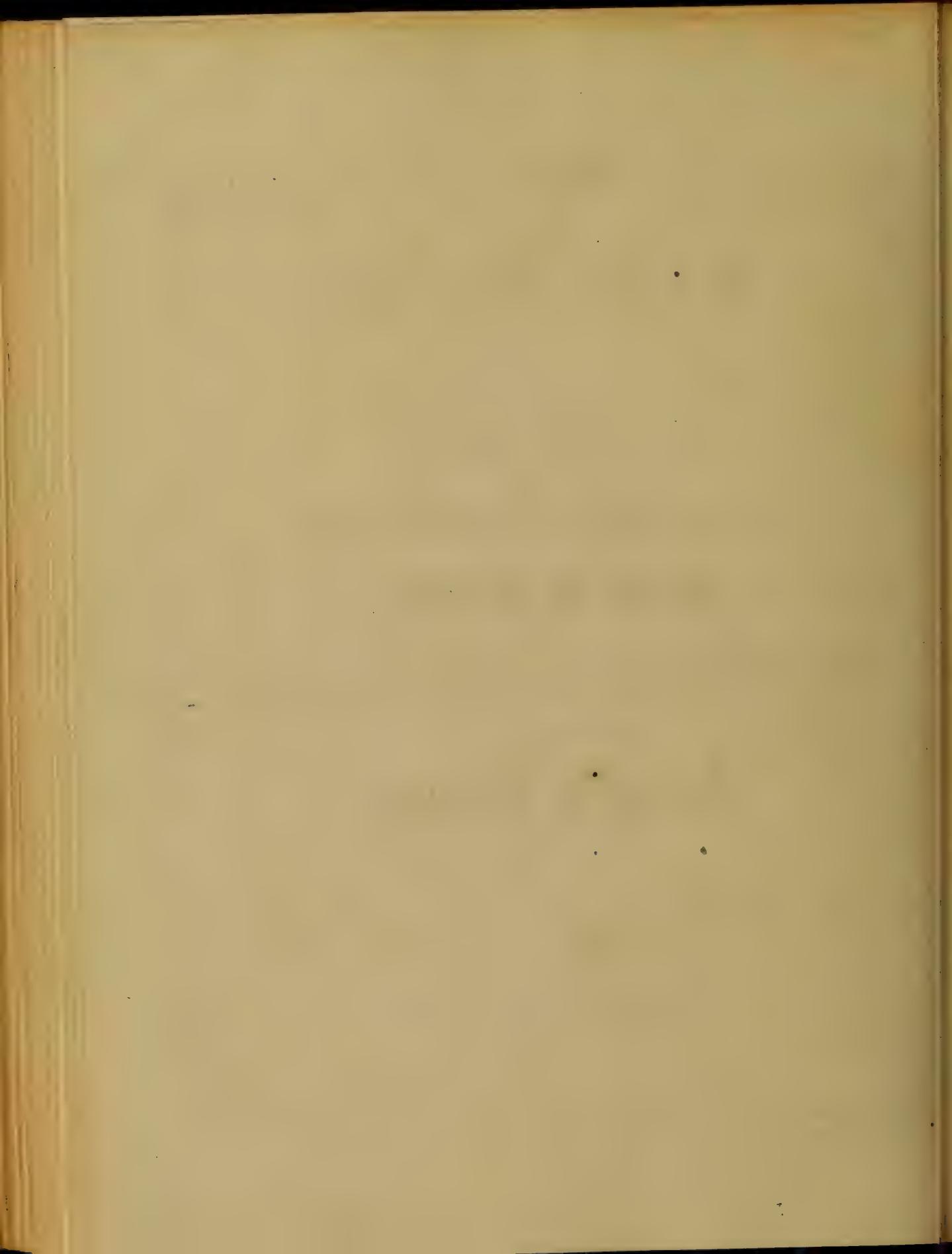
Sam'l L. Grimes.

of

Ocean Island

Session of

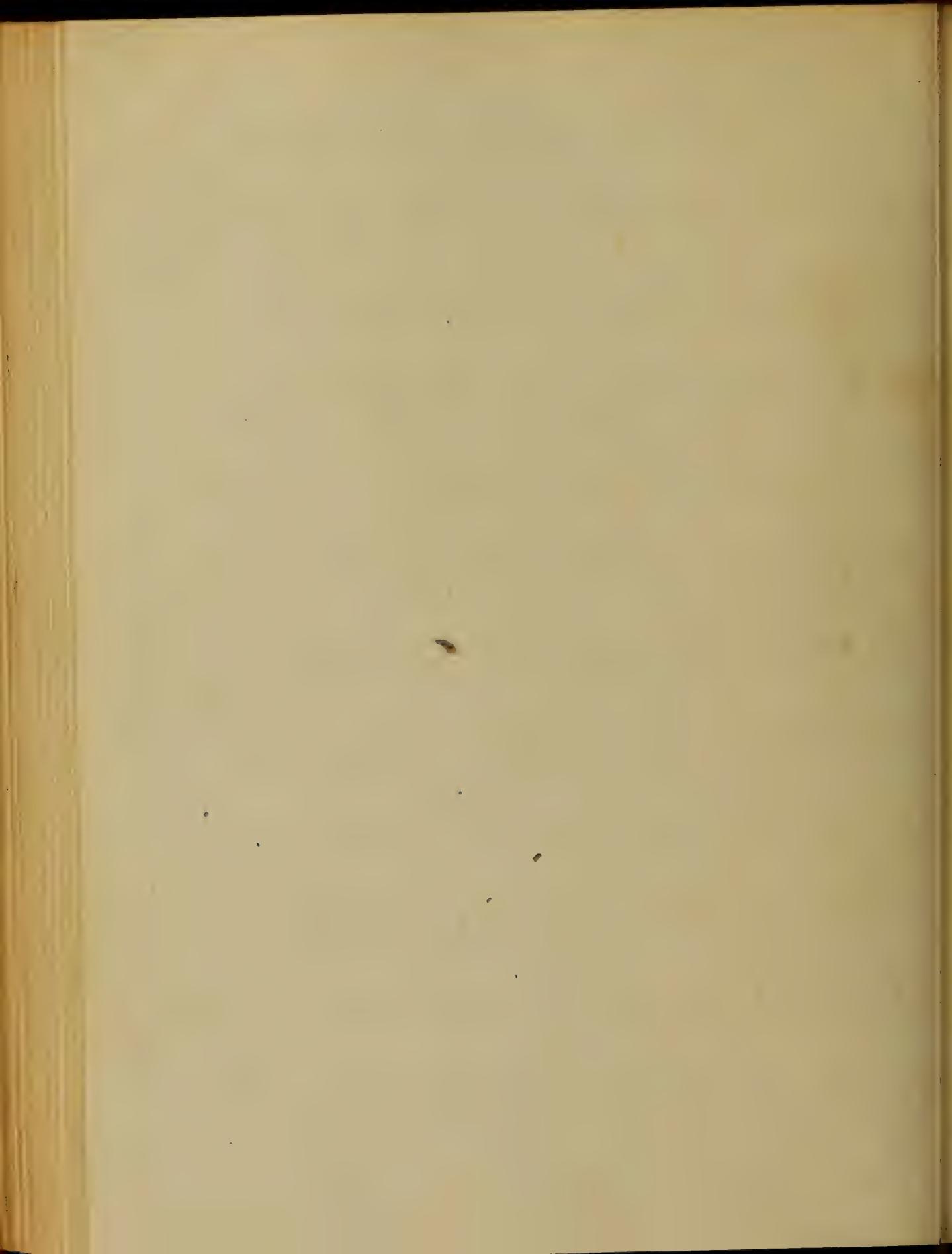
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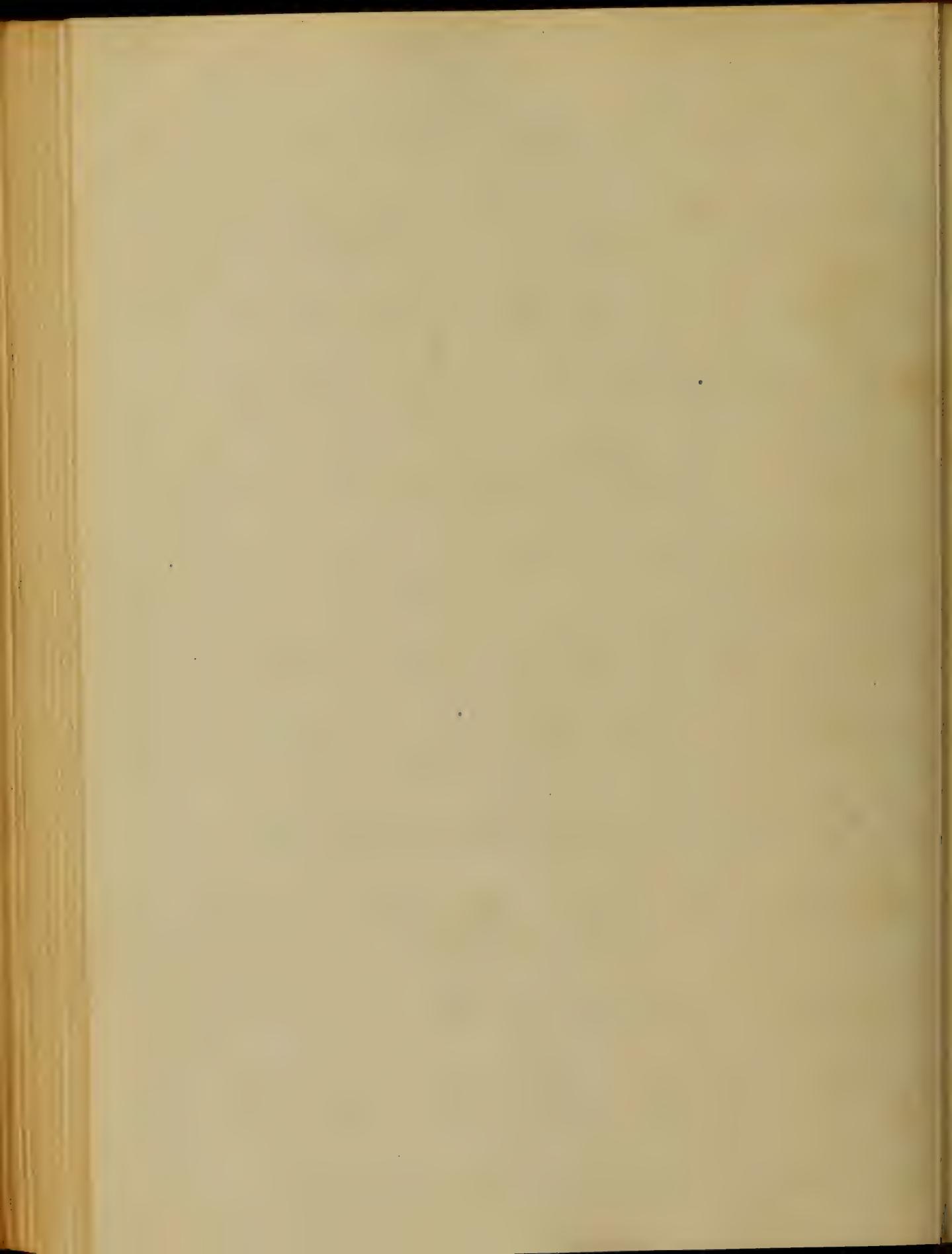
Cholera Infantum

This fatal disease vulgarly known
as Summer Cholera, or mayhap
it almost indigenous to America
as European authors give it
no special notice & merely class
it among cases of ~~extra~~enteritis
inflammation or excretion
peculiar only to infants or rather
to which instance it subject.

But in this country its fatality
is so universally known &
varied, that it has elicited

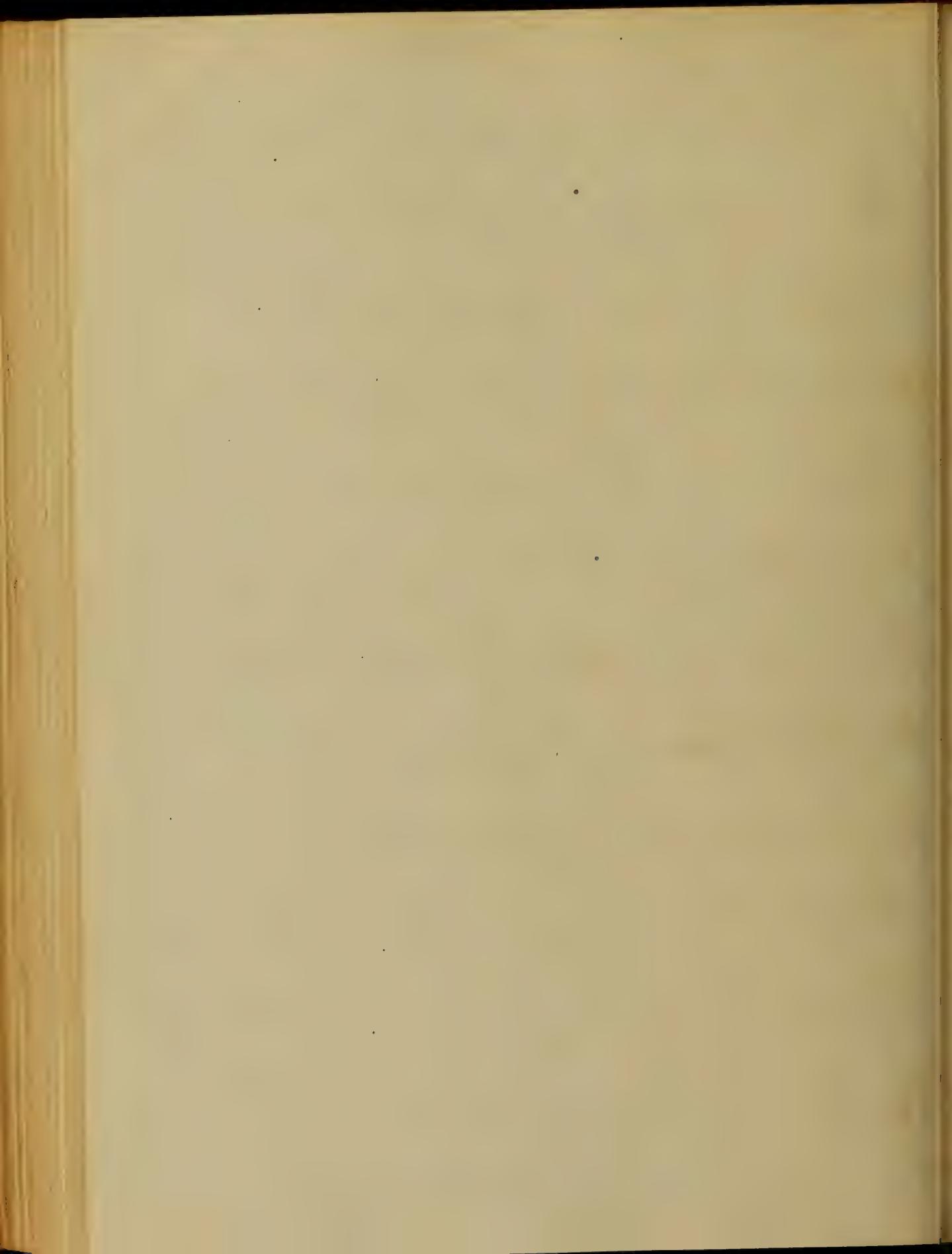


most astonishing interest, both
among the profession & people
generally, all of whom conclude
that it firsty merits a distinct
designation. This fact is more
fully corroborated upon observing
that at the ill, prevalent
among infants, the principal
is the one herein alluded to.
This trouble usually affects
children between the ages
of three months & two years,
though it is liable to occur from

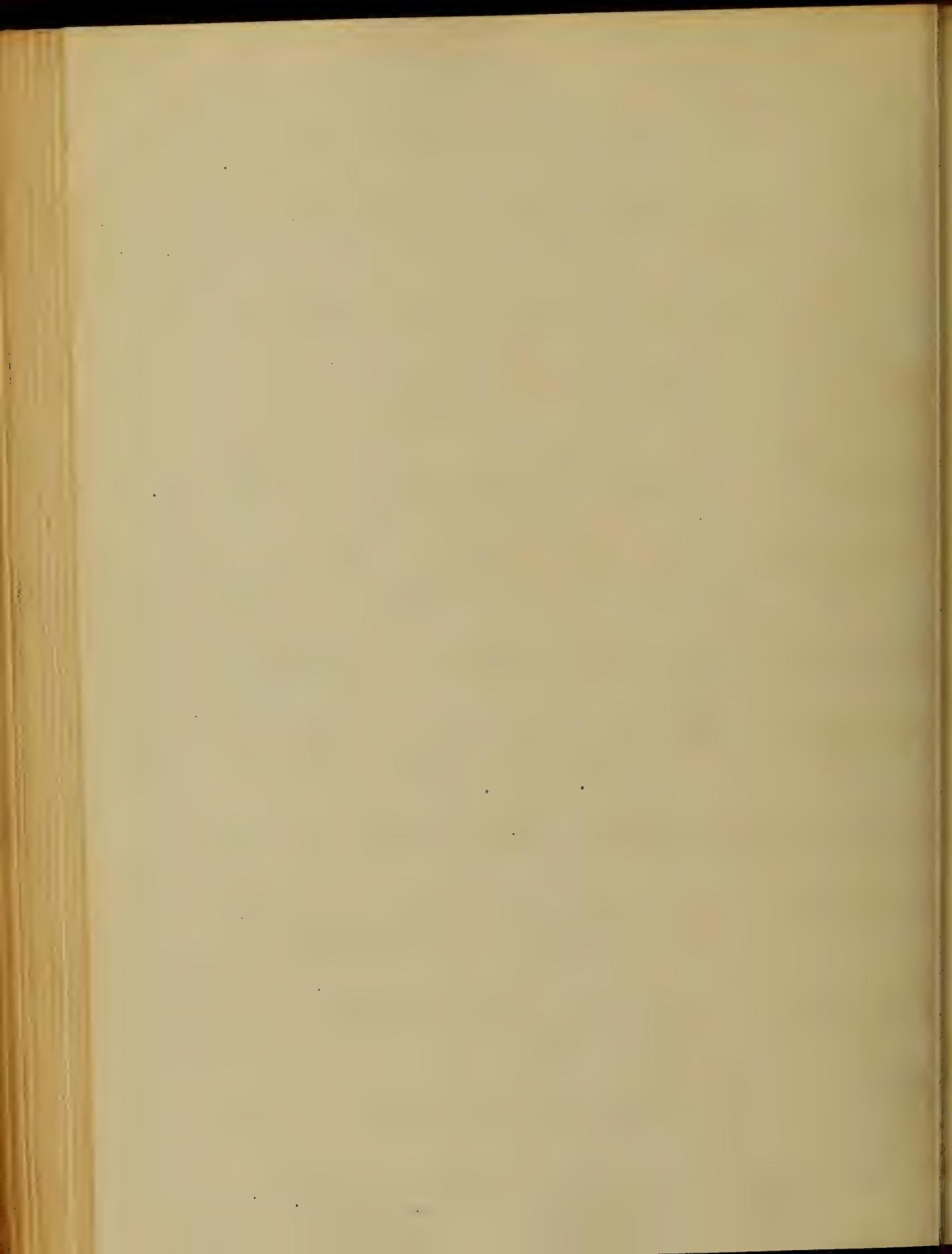


at a time than periods. It is exclusively a disease of the warm season & usually appears & disappears with it - the favorite haunts are cities & densely populated places where it generally prevails with distressing results. Yet the country & less populated places are not exempt from its fearful ravages.

Diarrhoea is frequently the usher of this disease

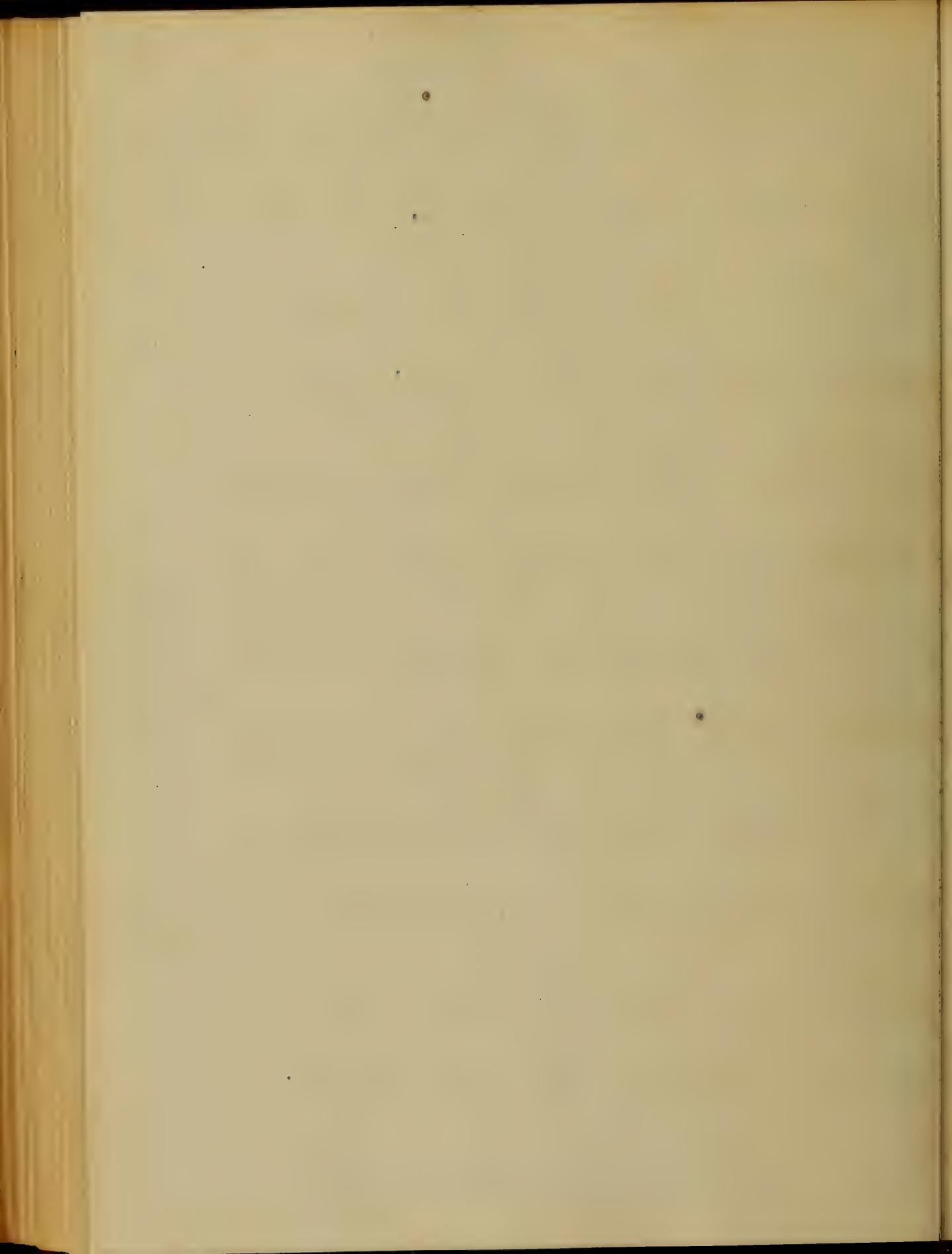


& sometimes precede the cholera
two or three days, yet at times the
vomiting & purging commence
simultaneously - In fatal
cases of short duration the
vomiting continues to the end
but when the disease is much pro-
tracted or terminates favorably it
frequently subsides considerably
or ceases entirely leaving only
the diarrhoea behind. Occasionally
the disease is incurable by violent
& rapid the vomiting & purging



5

inexpanso, the stomach becoming
so inflated that it will not return
anything inward even cold
water or any other palliative
agents. The intervals are marked
by great languor & prostration with
more or less spasmodic pain of the
stomach & bowels & it is but
now afforded the little sufferer
from collapse into a state of
perfect insensibility, amounting
at length to coma, with a
cold & clammy skin, shrunken



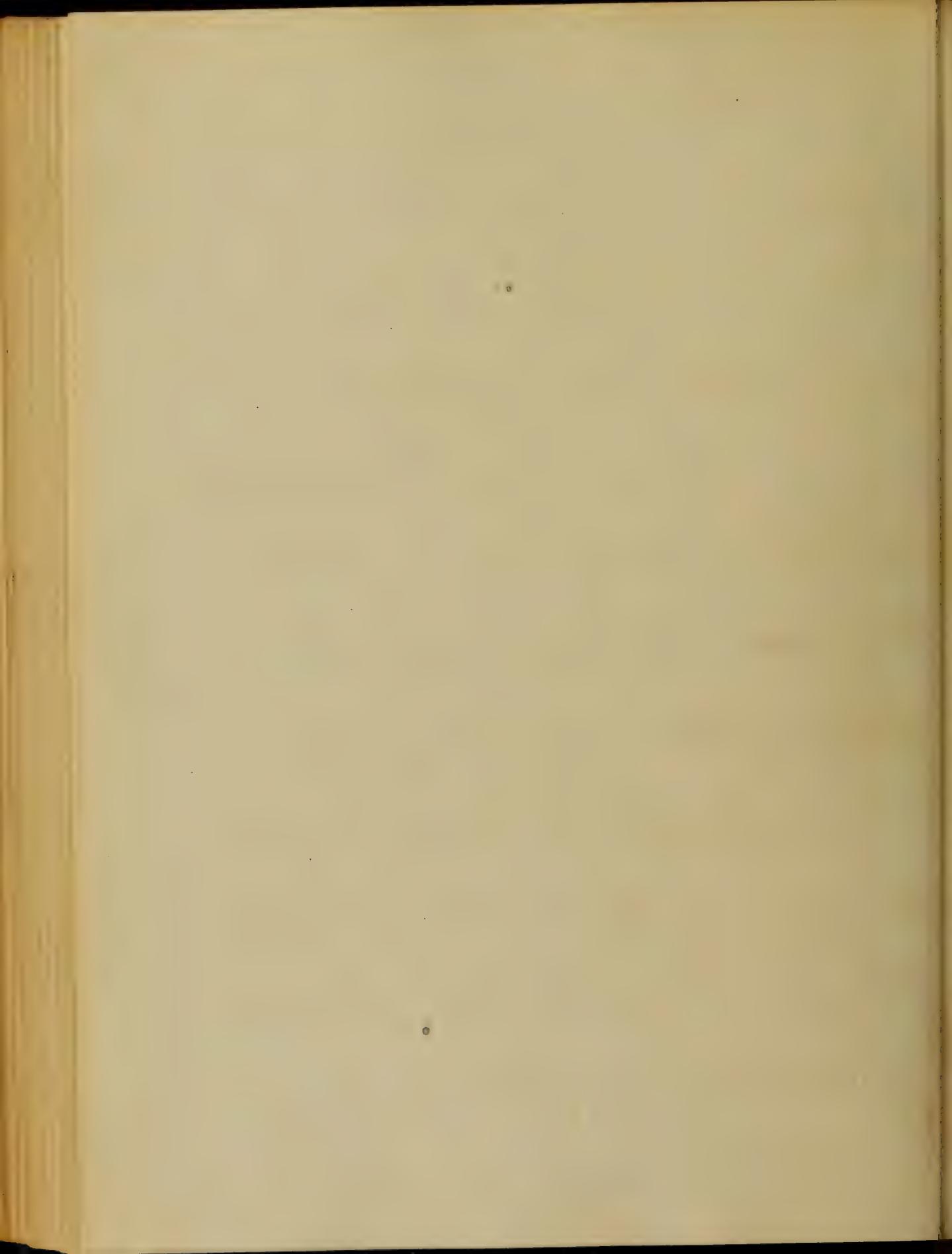
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Faintness, half closed eyes with
breath in thru or Fawn drops

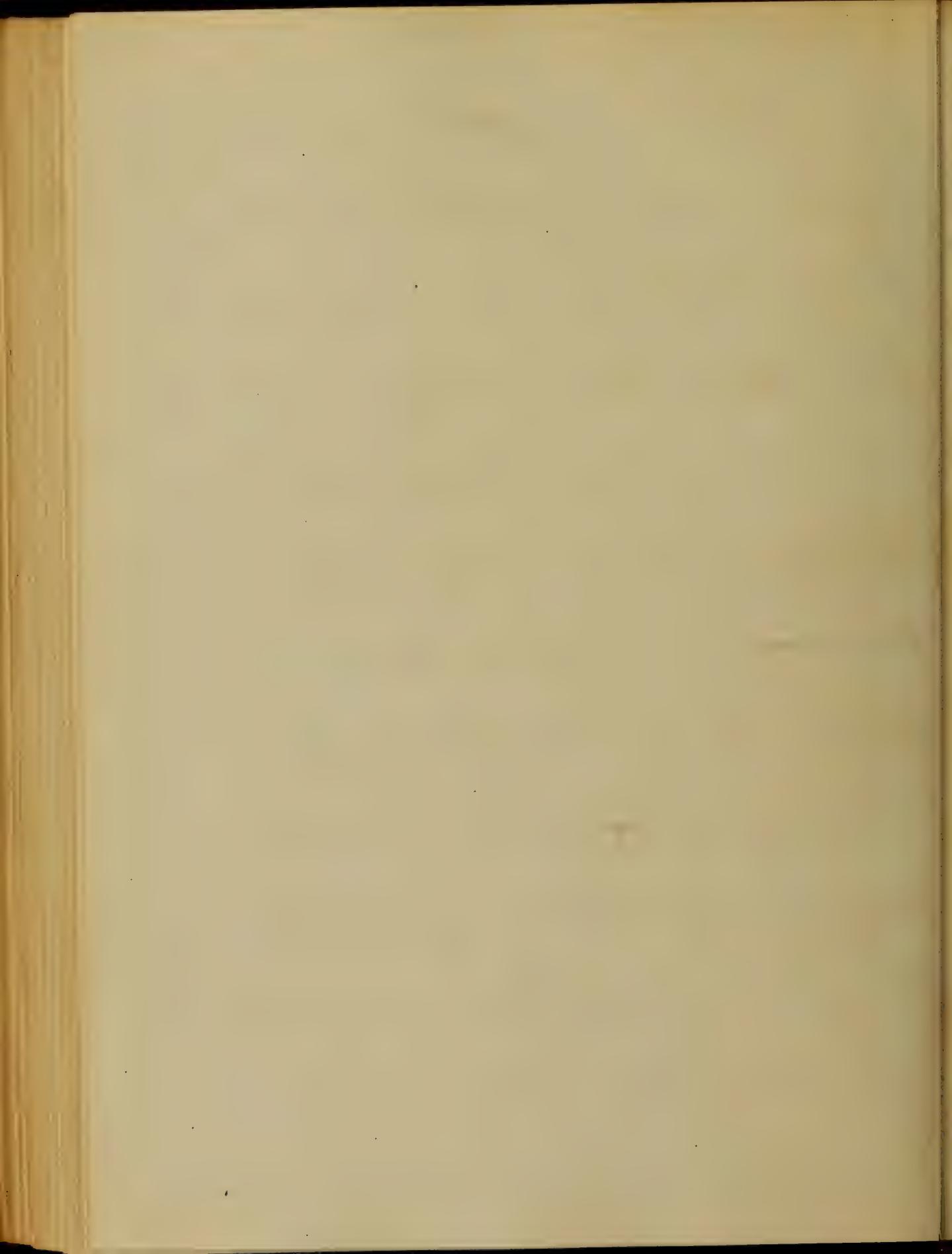
sometimes soiree - now

Frequently however the attack
is accompanied with symptoms
of fever & the disease protracted
to two or three weeks. Then

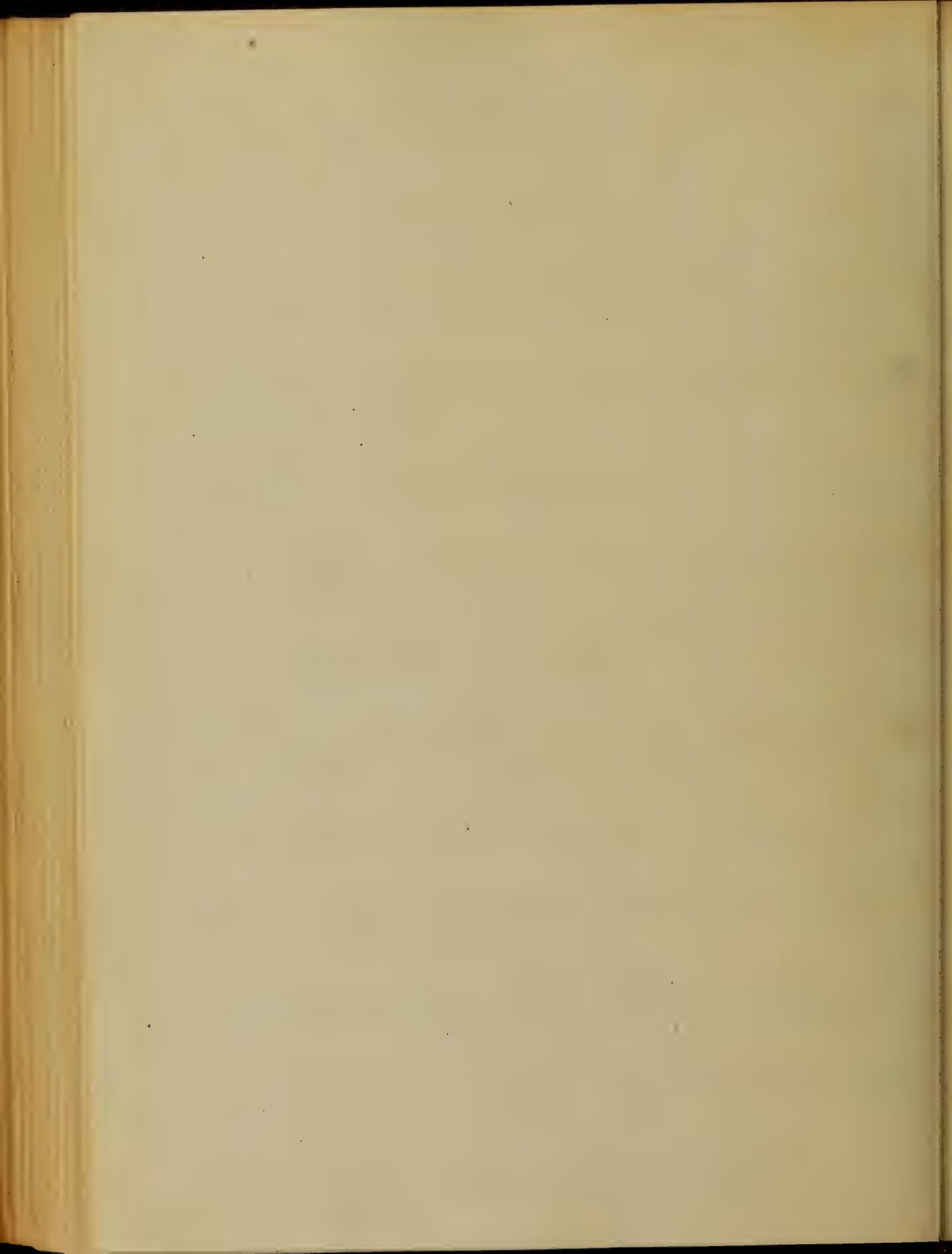
such is the case, the general
weak small & multi frequent.
The mouth is hot the tongue
somewhat furred & the surfaces
of the body alternating from
one temperature to another.



While the extremities are cool
the fever abates rather the
remittent form & is more viol-
ent in the evening. This generally
occasions delirium or stupor, in-
dicating a morbid state of the
brain — The abdomen is not
always collapsed as we would
naturally suppose, but it sometimes
swell & painful on pressure.
The vomiting after continuous
emaciation until the close of
the attack is now frequent.



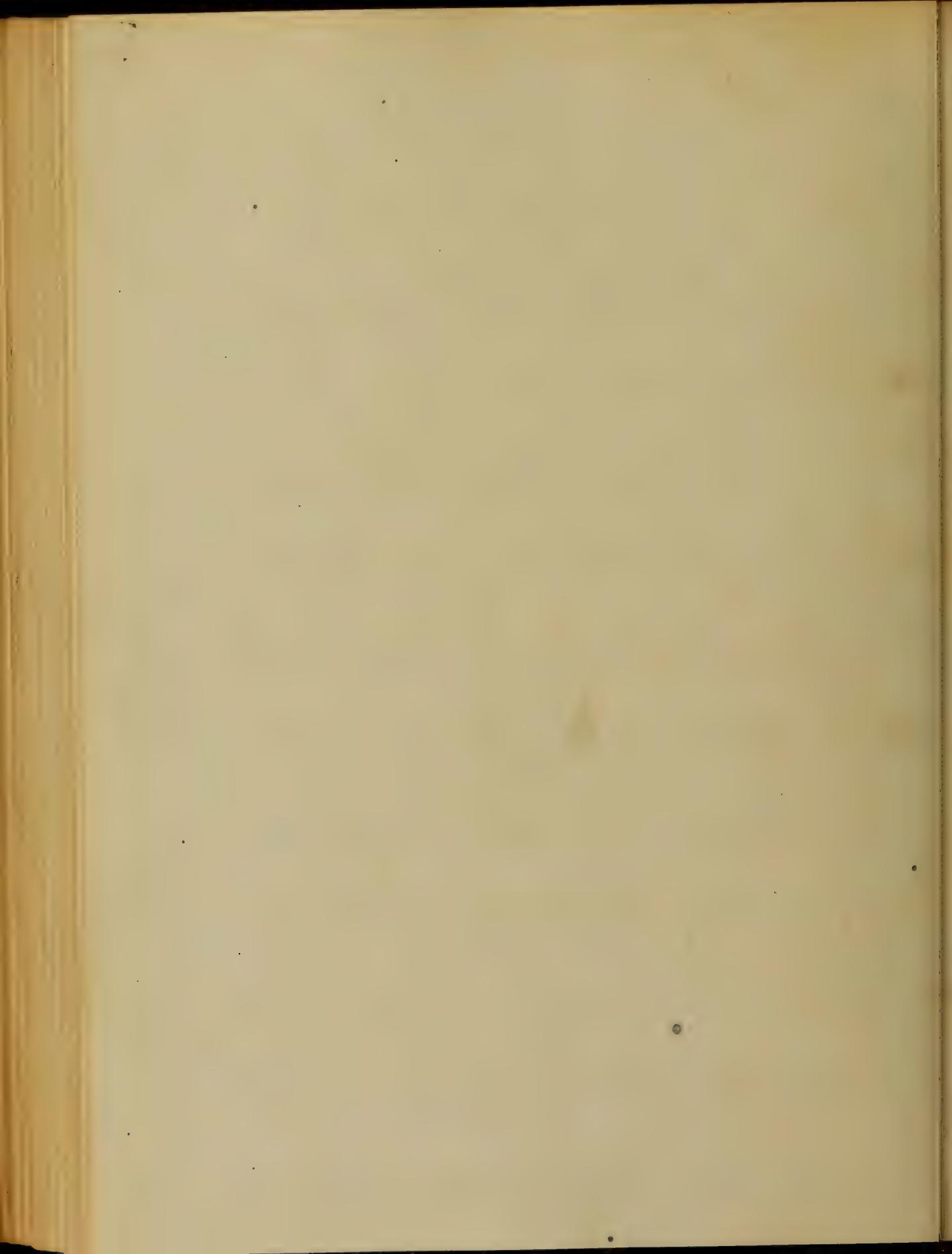
cases having a diarrhoea which
lasts for several weeks, & finally
wounds and the patient - During
the attack the little patient
emaciates rapidly, & the skin hangs
loosely about it, particularly its
neck & the whole surface either
cool & clammy, or much & dry -
When the disease runs a protra-
cted course, other phenomena
are presented - The tongue is dark
colored, smooth & shining, & covered
as well as the walls of the mouth with



after that - the flowers becoming dry,
cause a sudden & overwhelming;
which action induces the infant
suffocia to thrust its hands
deep into its mouth as though
to remove some offending body.

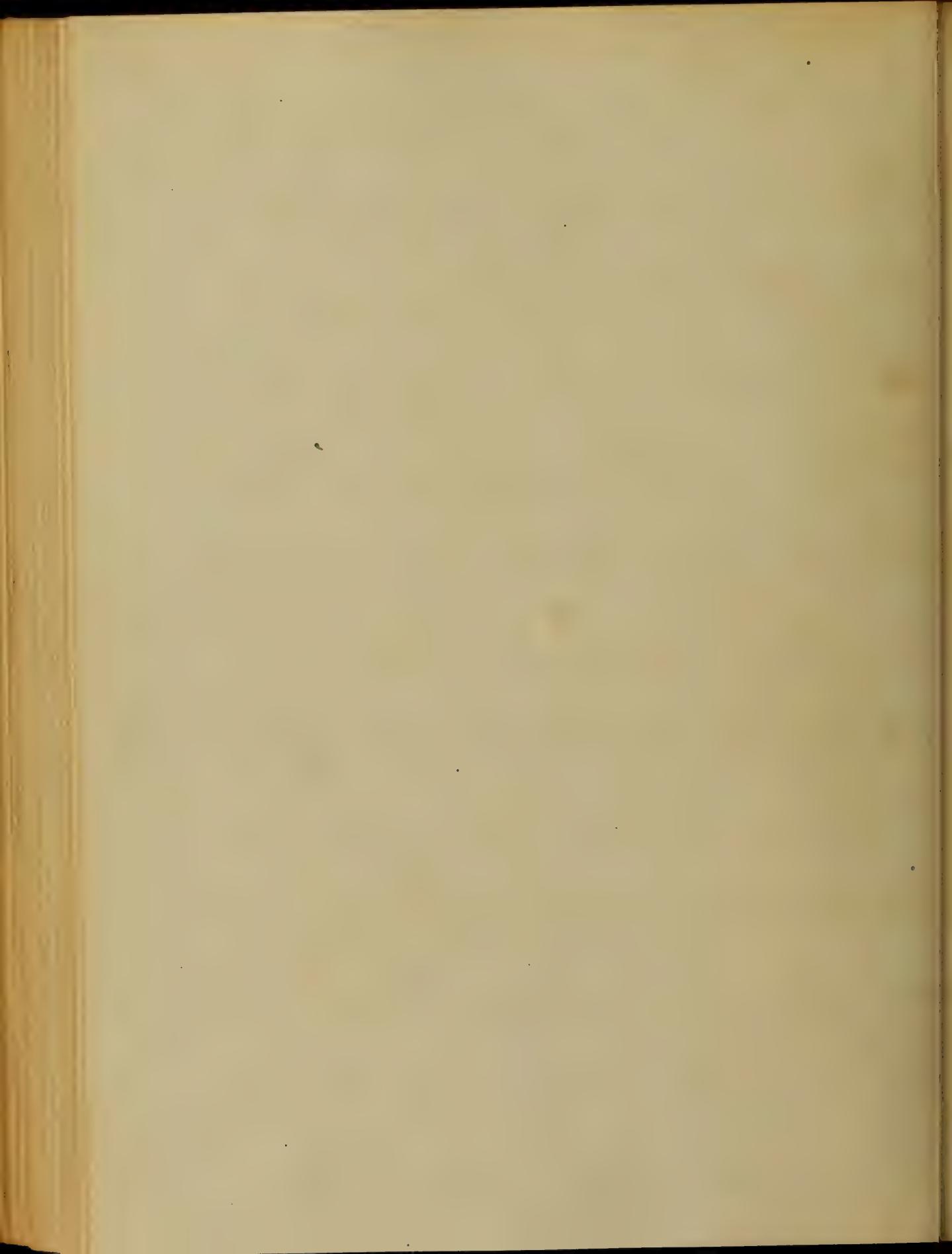
In many protracted cases, an erup-
tion at very minute intervals,

occurs upon the neck & breast.
This phenomenon has been considered
a fatal one, but Dr. Watson
writes this opinion & says he had
seen the eruption in cases when



it had been the most insidious
& distressing - At this stage if
the patient had no relief, the
emaciation progresses rapidly,
and little intermission will find
him from side to side, uttering
constant short & plaintive cries -
He falls at length into a state
of complete coma, & death finally
supervenes preceded by a convulsive
attack.

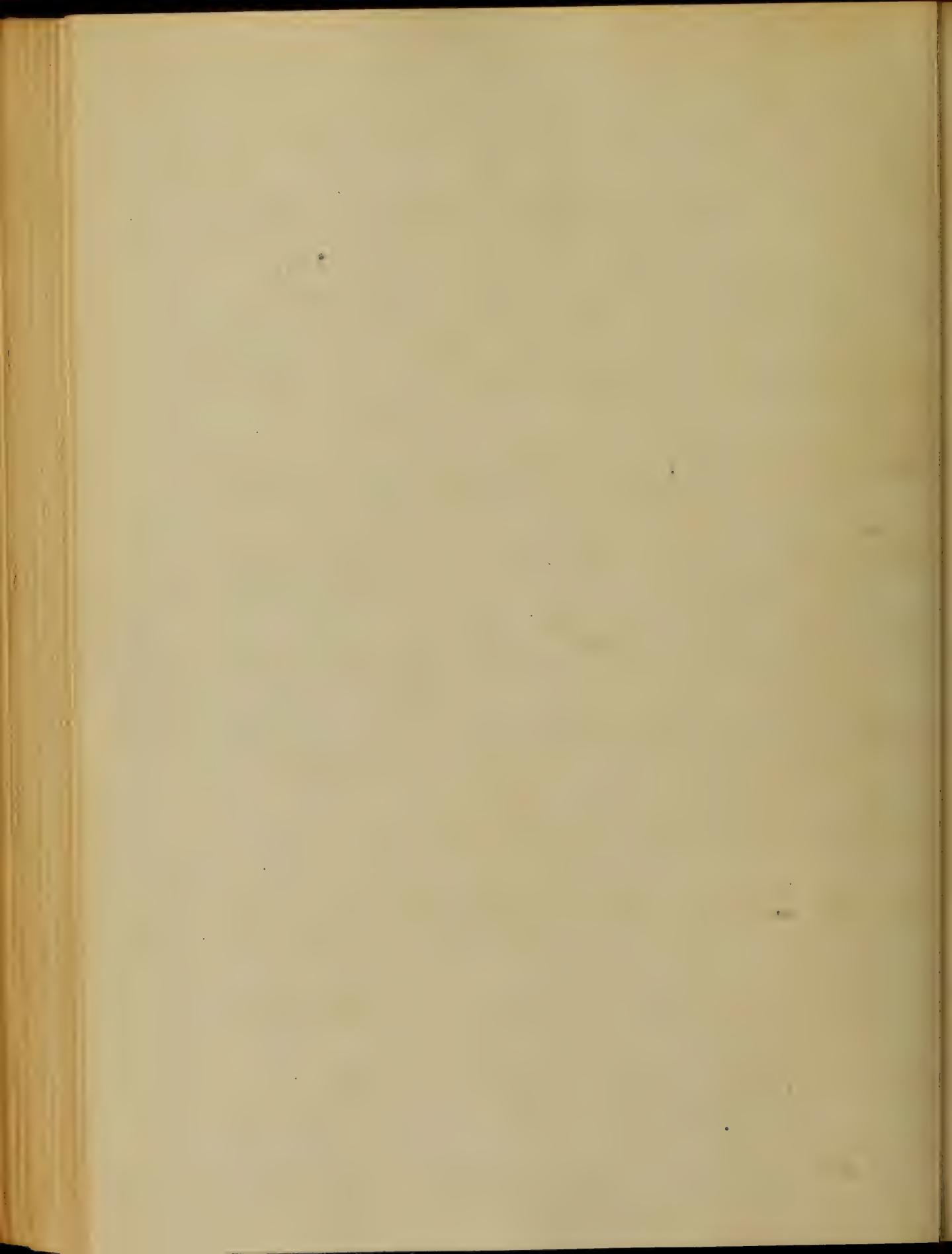
The duration of this disease,
is without definite limit



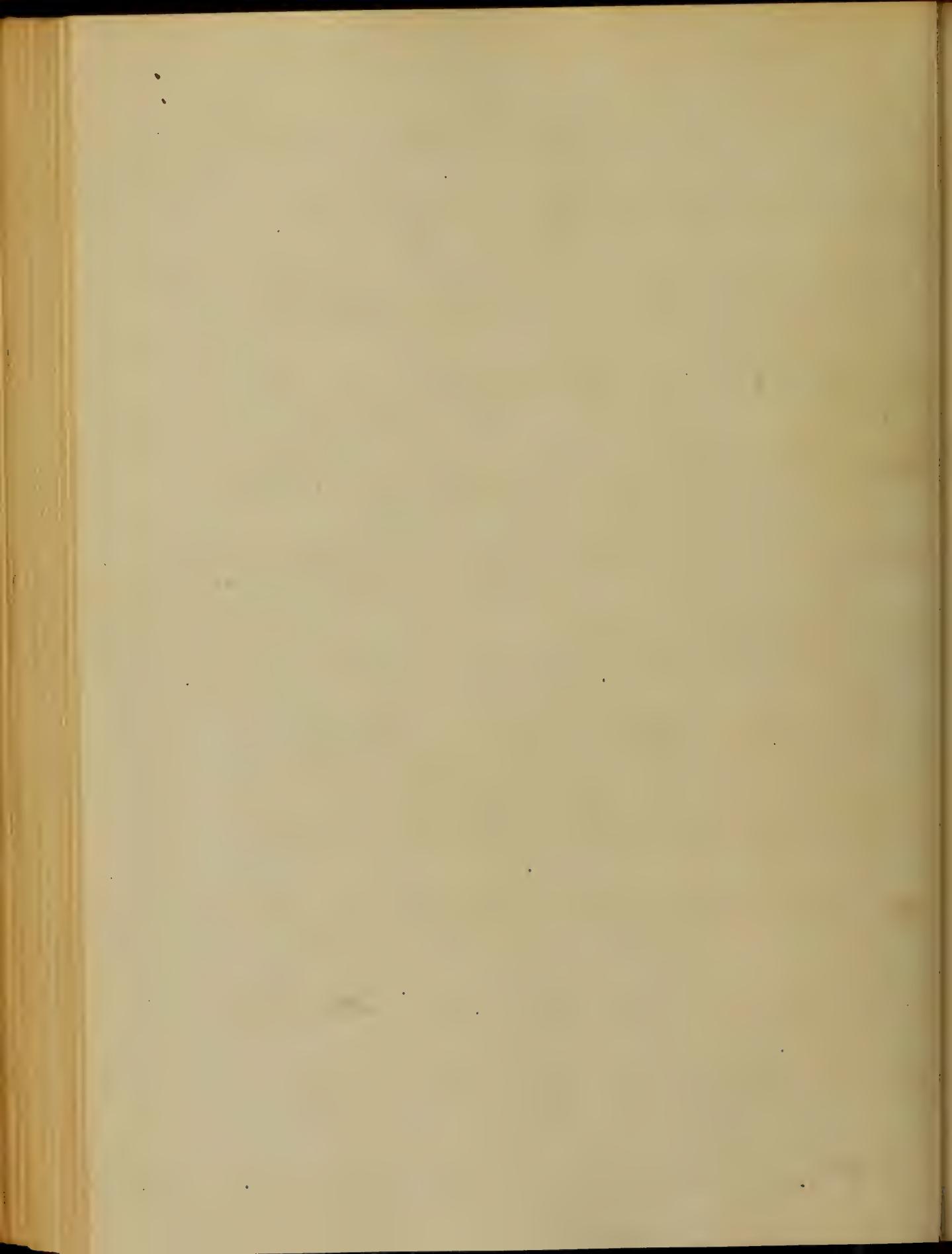
at the attack frequently comes
on so violently & suddenly, & the
penetration so extreme, that
the fever becomes extinct
within twenty-four hours.

Usually however it is more protracted,
sometimes lasting for days & weeks,
& the patient gradually sinks from
pure inanition.

For anatomical vision, observed
by an autopsy at those who have
died from "Polio Infantum"
(if the disease was of short duration)

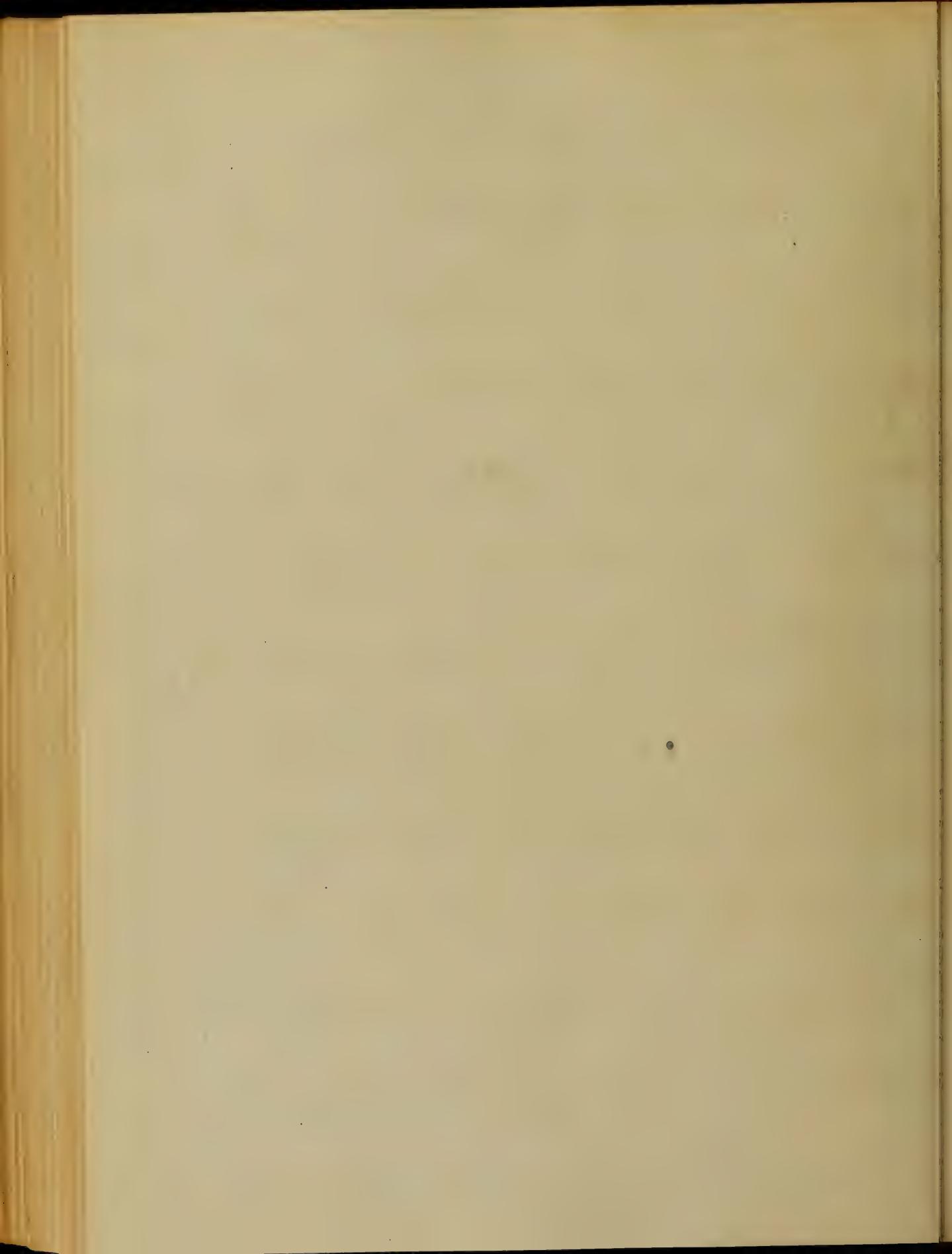


Show a livid appearance of the alimentary canal & the liver
more or less confluent-The structure
of the mucous membrane is often
affected by a softening & thus
var. with enlargement of its
follicles, attended with in-
flammation, & sometimes
ulceration-The intestines are
generally empty, with the exception
of a small amount of thick
viscid mucus-The condition
of the liver has been variously

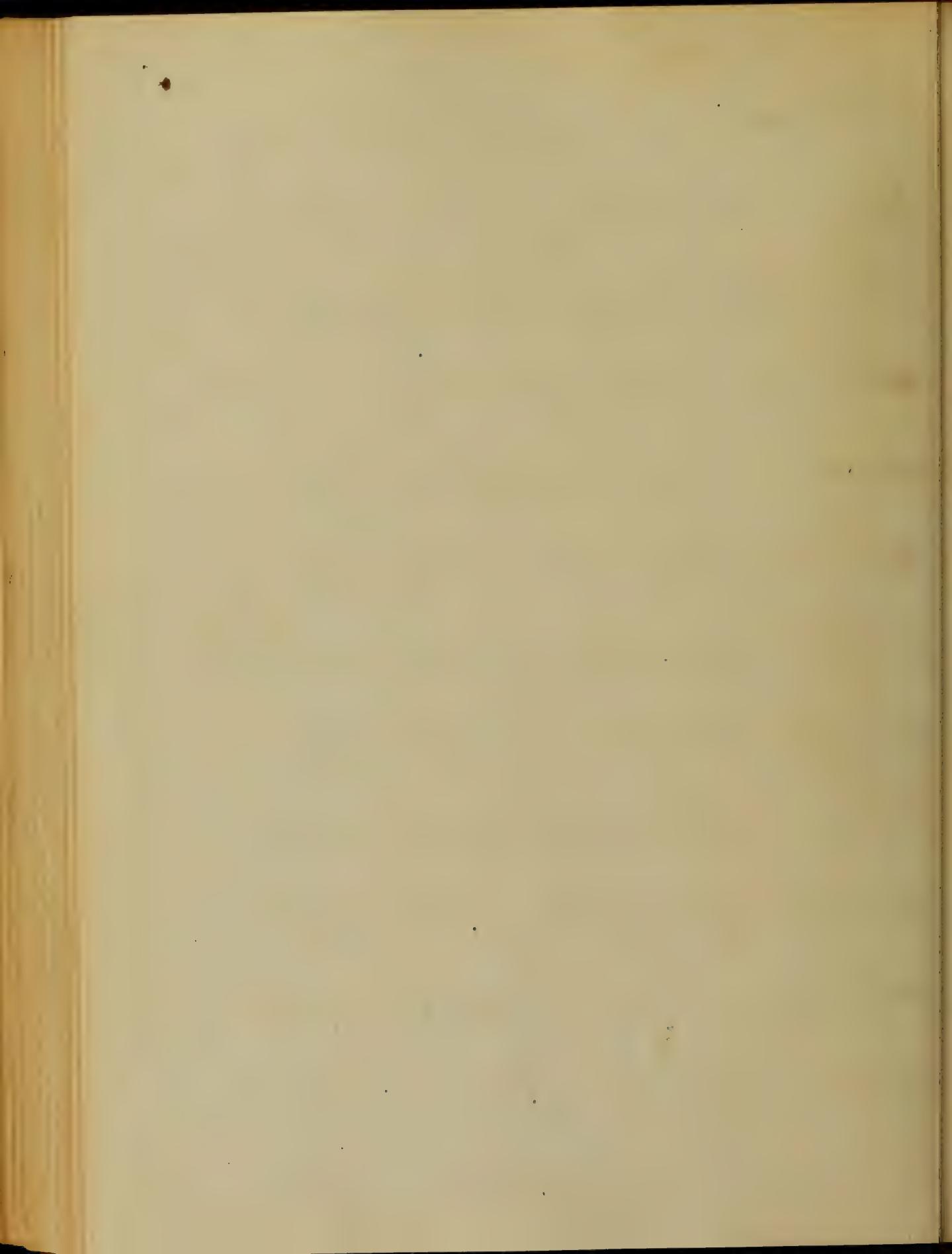


described by different writers
upon this disease. James Speer
of it as being of a bright yellow
or mottled color & abnormally large
while Dr. Ford describes it
as being enlarged & concreted.
The Gall-bladder contains a fluid
which is sometimes a dark green &
sometimes pale & nearly colorless.

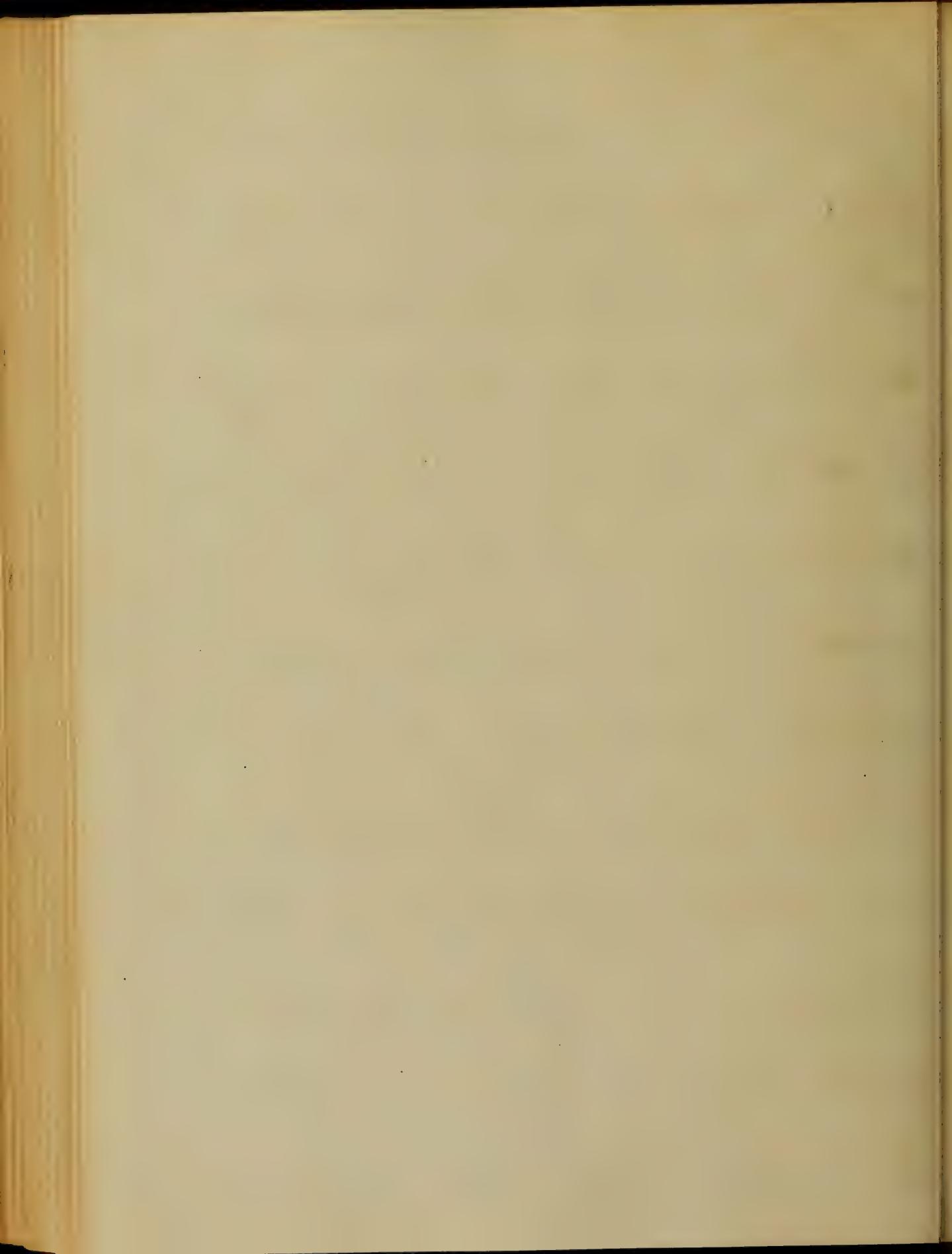
Causes -
Cholera Infantum is evidently
(a disease of) caused by exposure
to heat, impure air at damp places,



& the Atmosphere of cities at a
time. & how the pentruous produc-
tion lead to disease, by the effects of
dustition, & from the increasing
development & activity of the
unperceived & hidden which takes
place at that period. - But I think
it is worth observing however, that
certain atmosphere is peculiar to
the house & chamber & here is the
peculiar & fatal cause of this malady,
as it recorded in our Journals
by members of the profession.



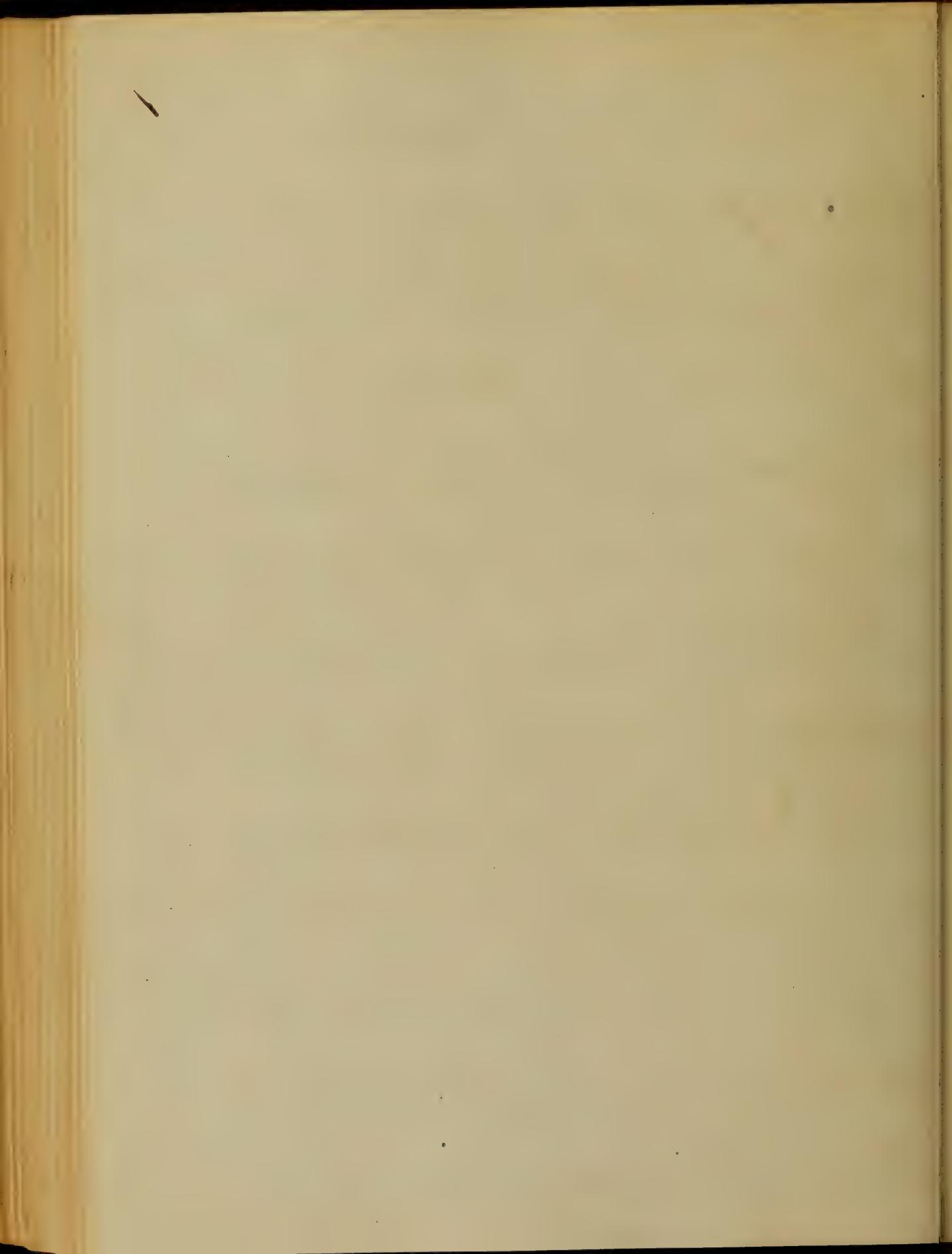
practicing in cities, & densely
populated places. This man
State - that it seldom appears above
the suburbs, but it generally is
in the interior rooms, & alleys of
these cities where the population
is thicker, & ventilation more
impeded. It is considera-
bly the greatest scourge of
our cities. But there are other
causes producing predisposition
to this disease, among which,
adulterate food, various substa-



ness in the stomach, various abdominal exponents call without the
distrust in a relaxed condition;
but there it may be said according to the writings of our distinguished Father in the profession
(Dr. Good, Watson & Athene.)

This often are only slight additions to the disease, rarely
does it only afflict by the
cardinal canes which are frequently
dulition & constipation.

These children are generally

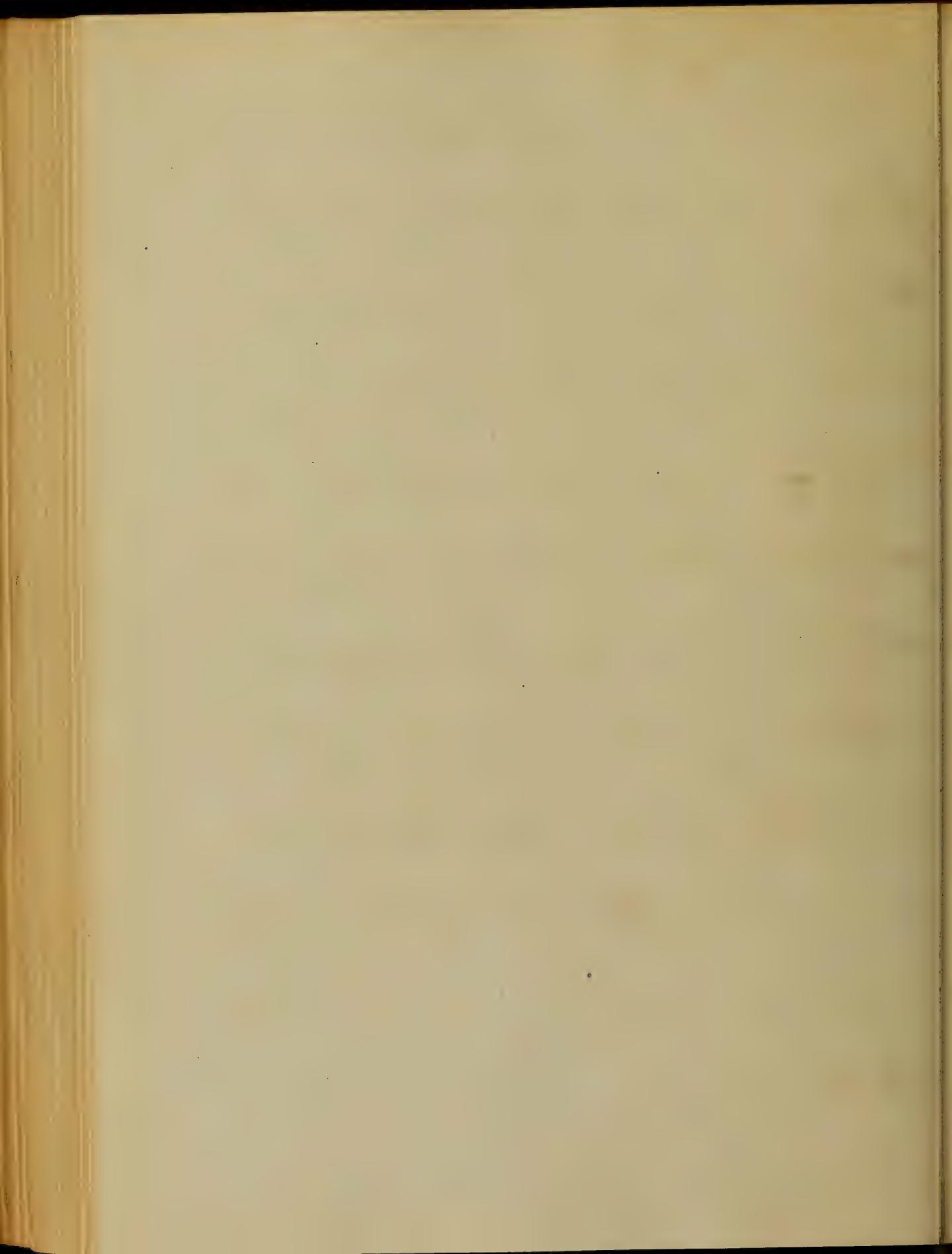


considered as having passed thru
periods of greater danger when
their second summer is over -

This is considered as having
a great influence upon the
origin & severity of this
disease from the fact thus,
Wilson fed with the spoon
or bottle, baby is more readily &
dangerously than those nourished
at the breast -

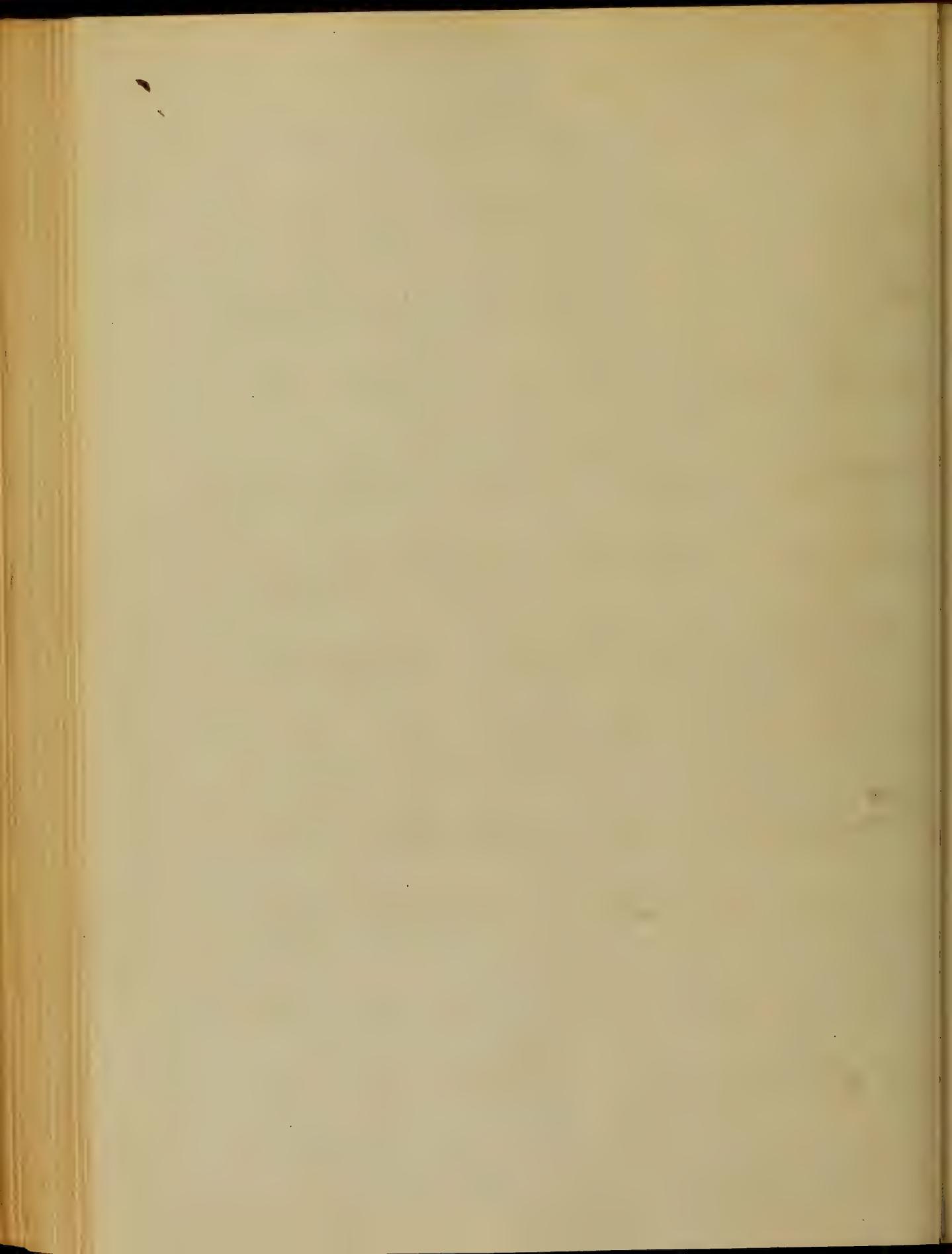
Nature

Now all appearances upon

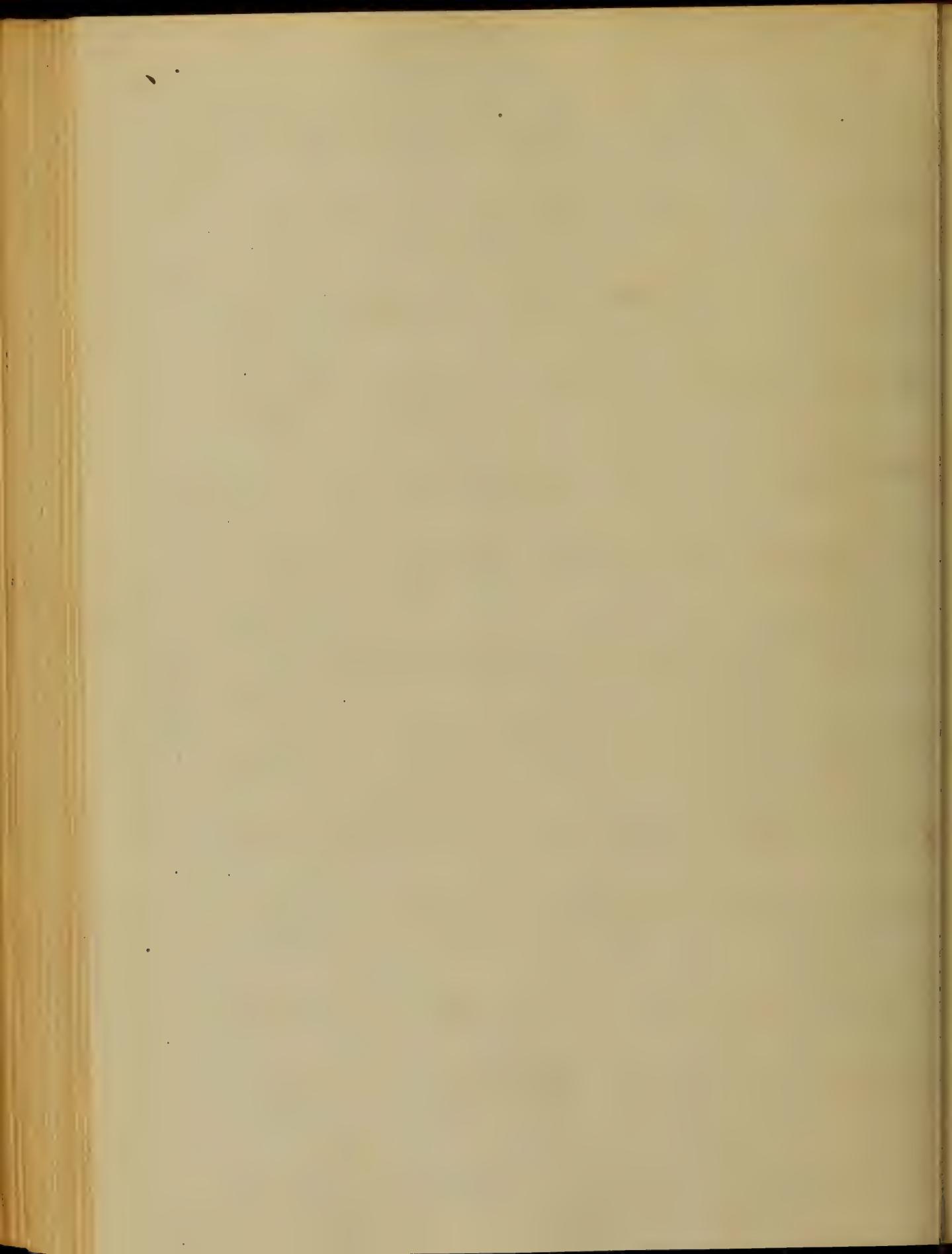


dissection says "Dr Good, it may
be said in intro to come with less-
-tality in an emulsion or inflammation
of the mucous membrane directed
especially to the mucous follicles,
associated with a toxic & congestive
state of the liver probably dep-
ending upon the same cause.

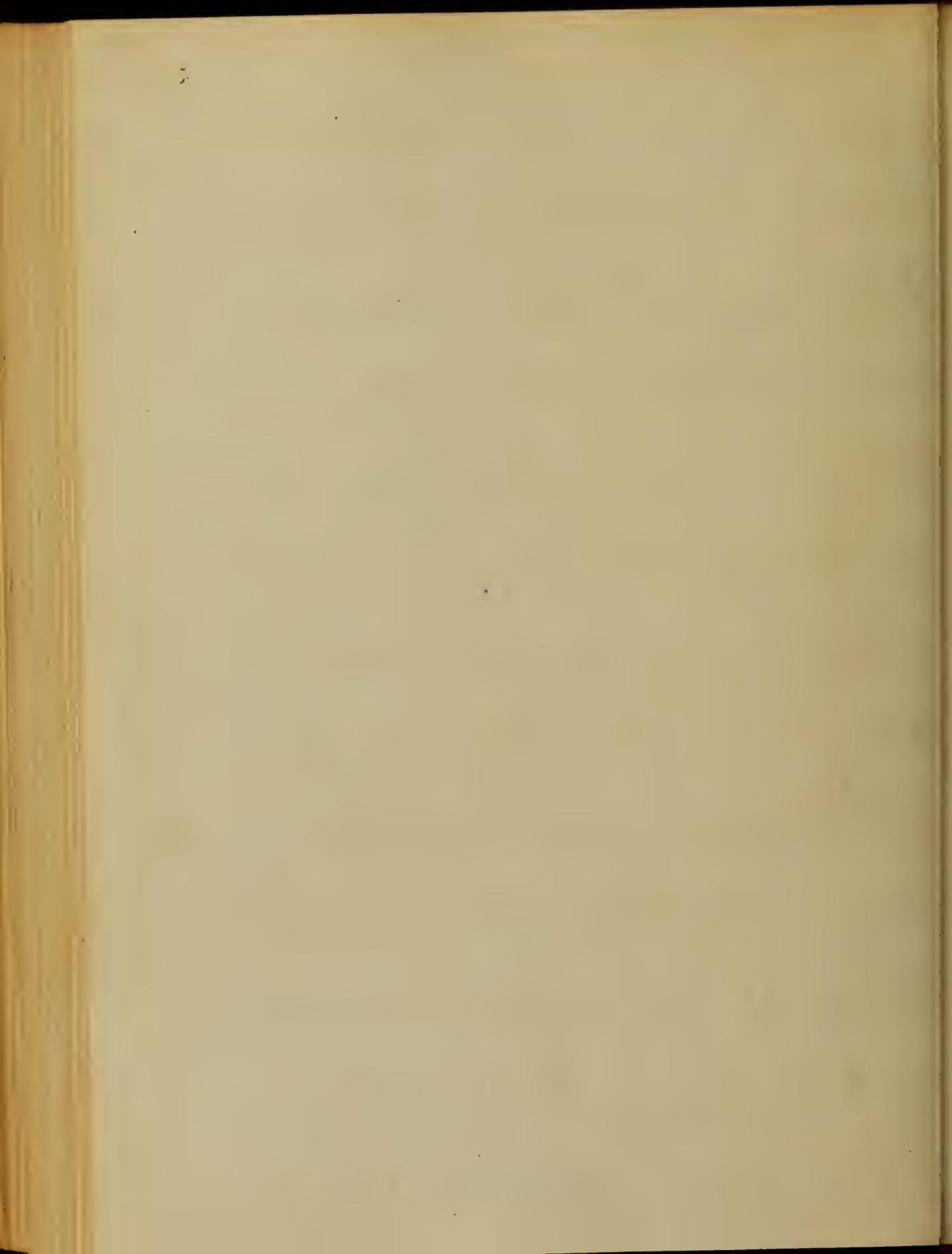
~~Professor Foxton Standard~~
however at the M^c University
claims any abnormal condition
of the liver
in
materna



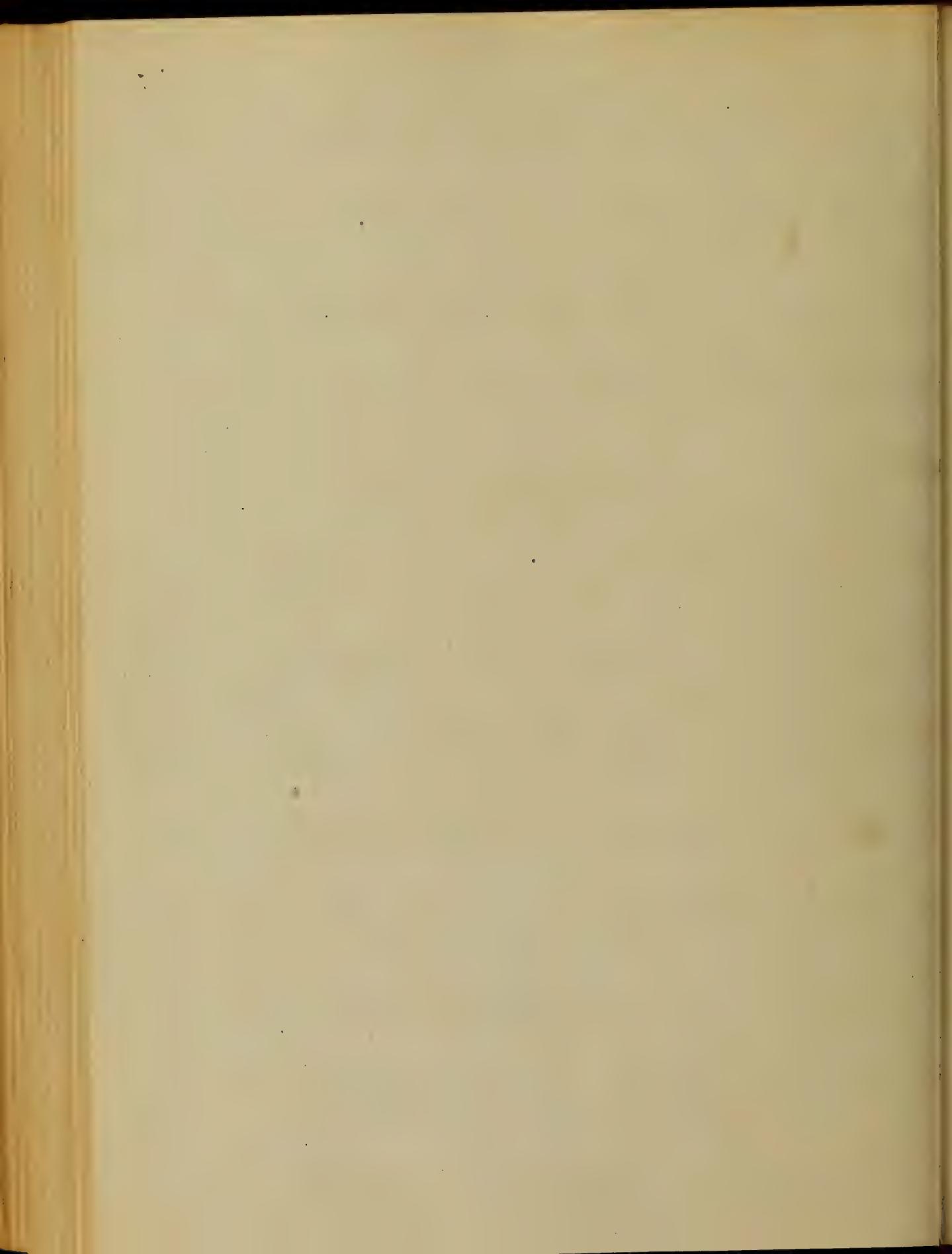
In this disease as in all others
the first thing to be aimed at
is to remove the cause or causes.
With the efforts to relieve the
lungs will be almost futile
In order to know the cause the
lungs must be removed to the
exterior as when it can't have
pure atmosphere & free ventilation
which that it does the more
judicious efforts of the practit
ioner to relieve the suffering will
be almost entirely fruitless as long



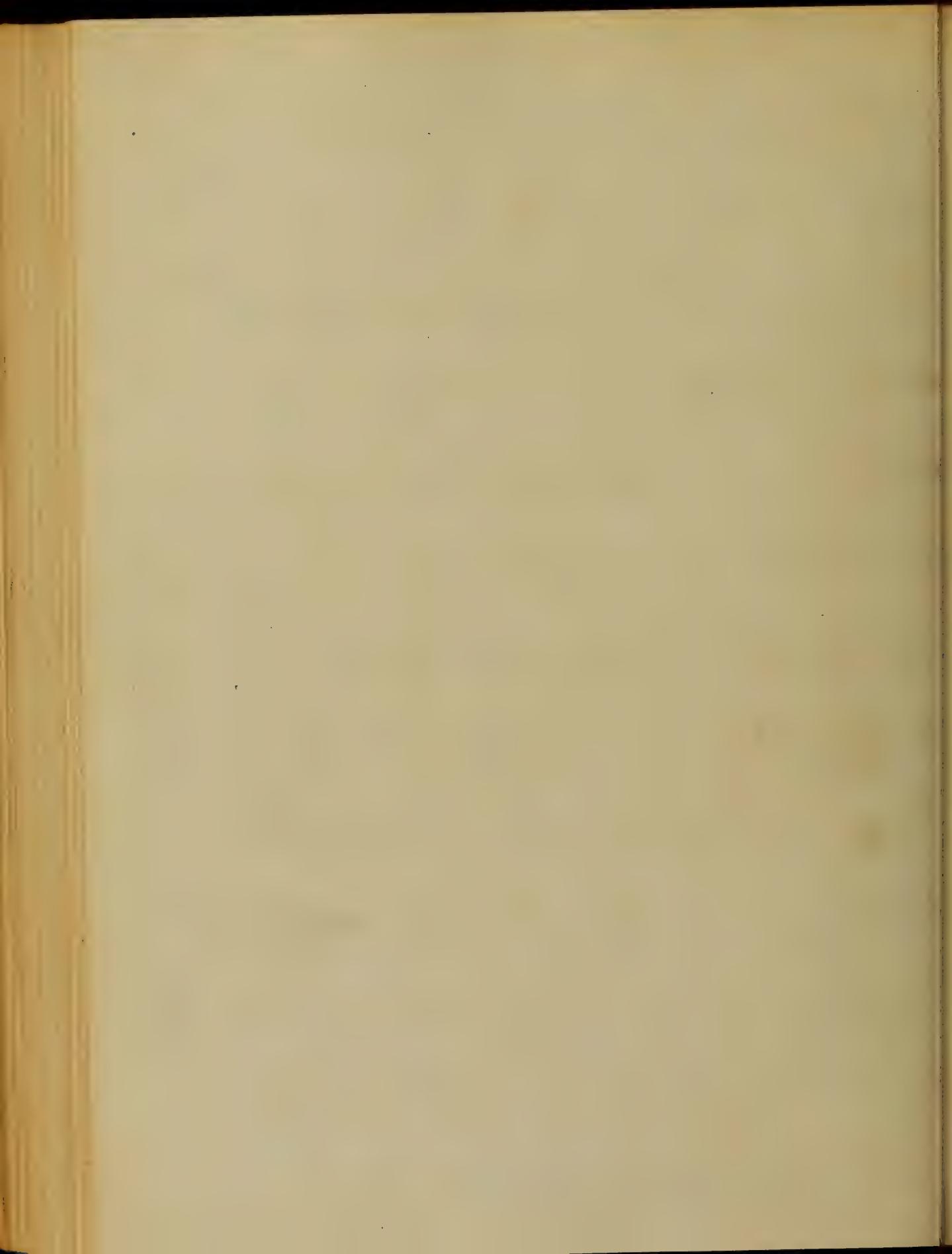
partially & Giaciane - The patient
was apparently sum improved yet
the disease will again return in
a more malignant form than at
first & another restoration ap-
-parently effected. Still another
relapse may occur yet or until
the power of vital resistance
is so reduced as to render the sys-
tem unable to sustain further visi-
-tance - Yet again it is protsector
in this way until the return
of cold weather when the infus-



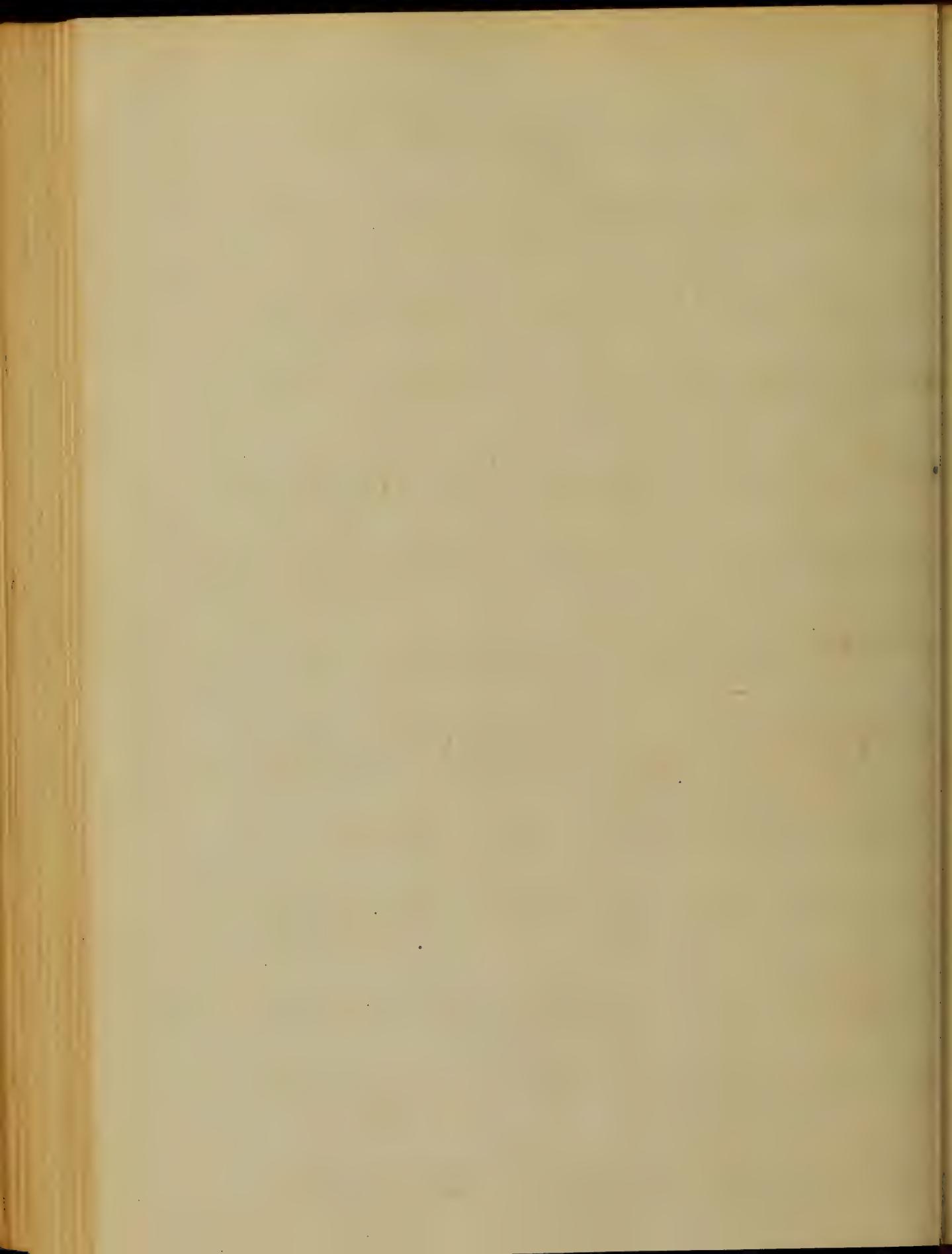
is rescued from the deadly grip
of the child is removed to a
pure atmosphere & circulated
freely in the open air either in
the arms of a nurse or in a
carriage, the linings beneath
it generally made from fine
sea air is also highly beneficial
when it is acceptable — With a
proper attention to diet & hygiene
the child will almost always
recover, it is said, even without
medicine as a very small quantity



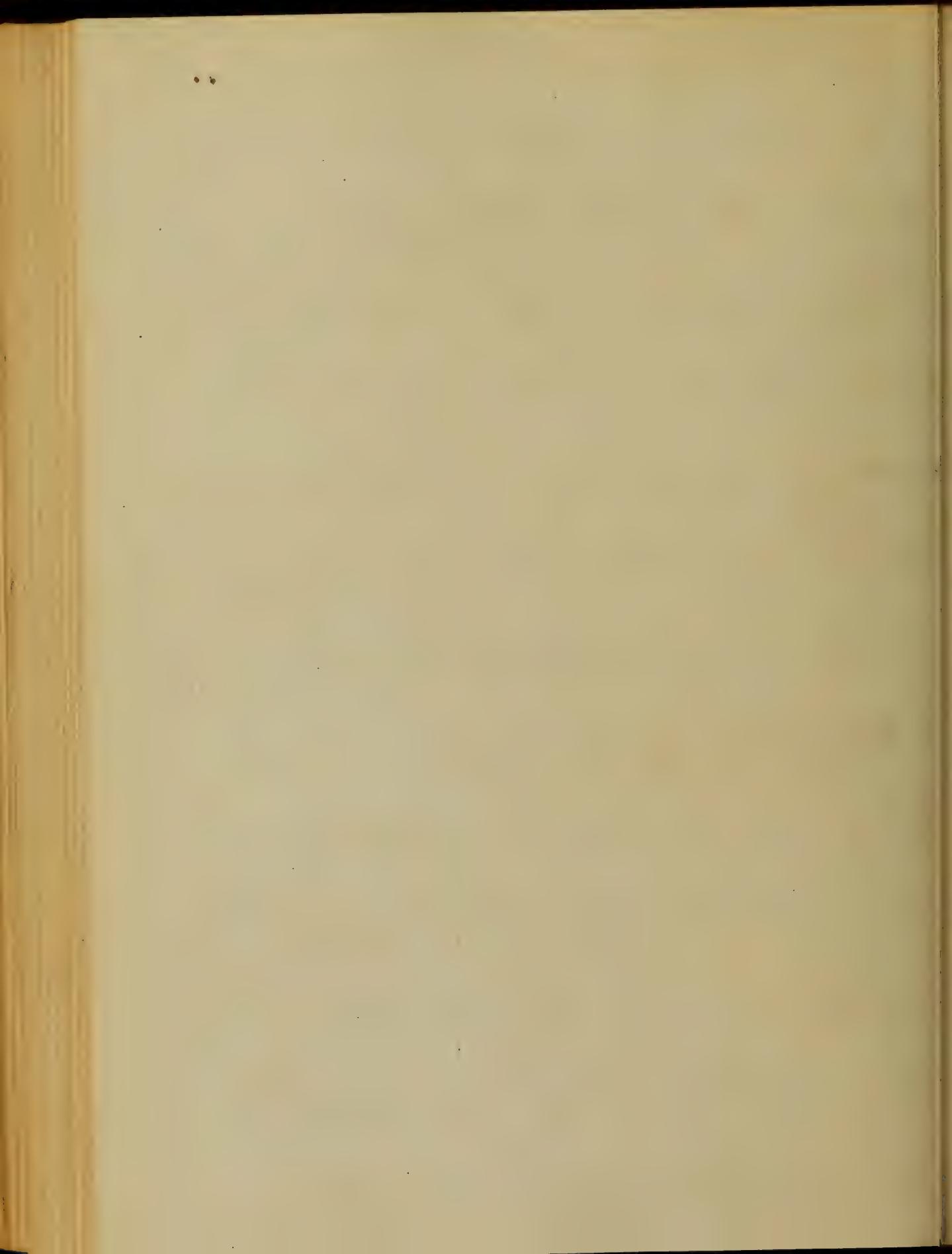
at it- This has been the practice
of Dr. Good & his second line
are easier to give a Atmosphere
than that in which it contracted
the complaint, in which this
Treatment proves unceasal
But if the case is at long stand-
ing & the irritation had time
to run into inflammation, this
Treatment would probably prove
less efficacious, yet it would
be well to remember it- & in the
city the patient should it



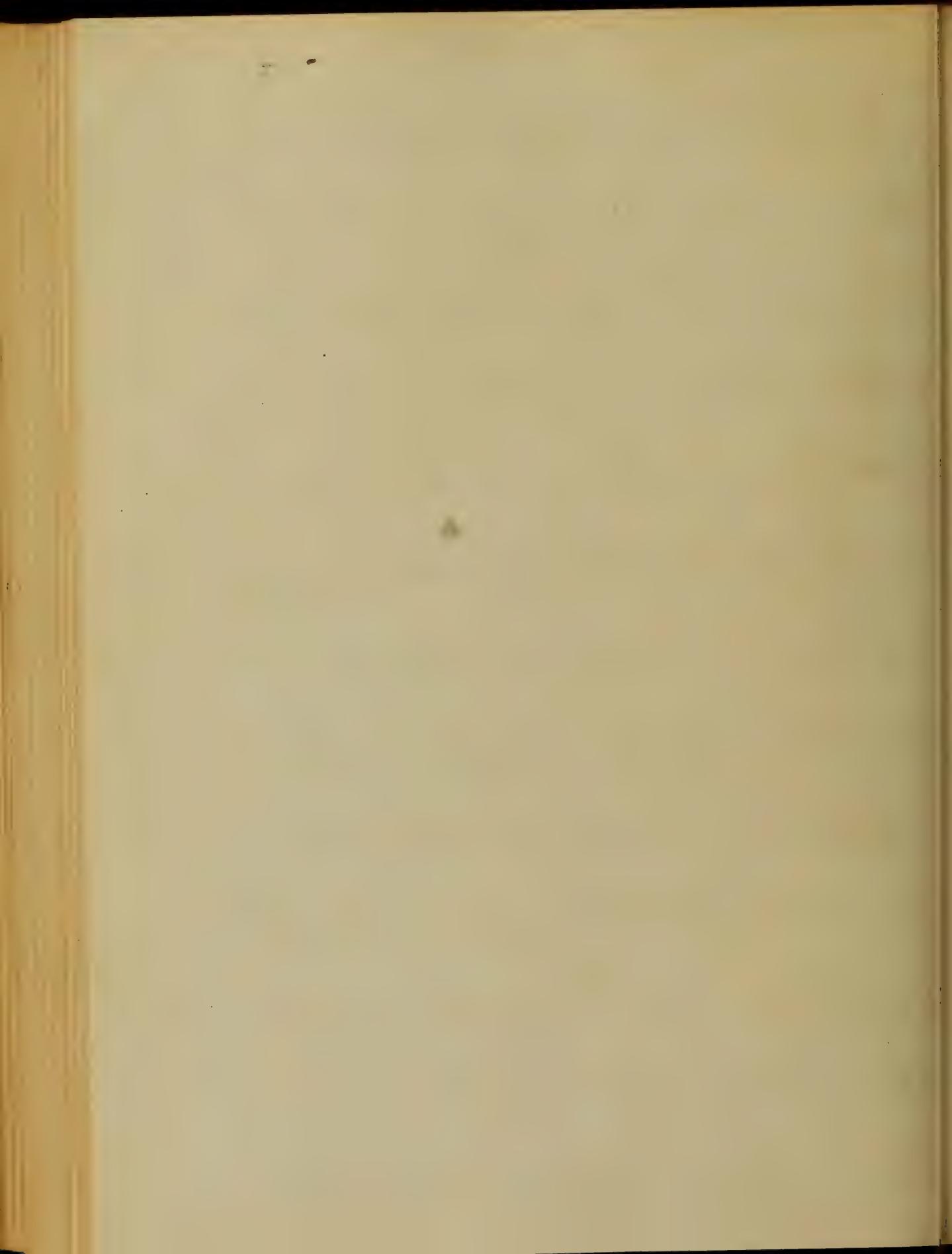
practicable be carried into the
open Atmosphere & places where
its own pure free ventilation & the
adjustments in which it is to continue
should be well aired & kept per-
petually dry & clean - If the disease
is attributable to or aggravated
by dentition or should they ever
together attend should be imm-
ediately directed to the gum & if
they are torpid & inflamed with
the perforations & perceptible
to the touch they should be freely



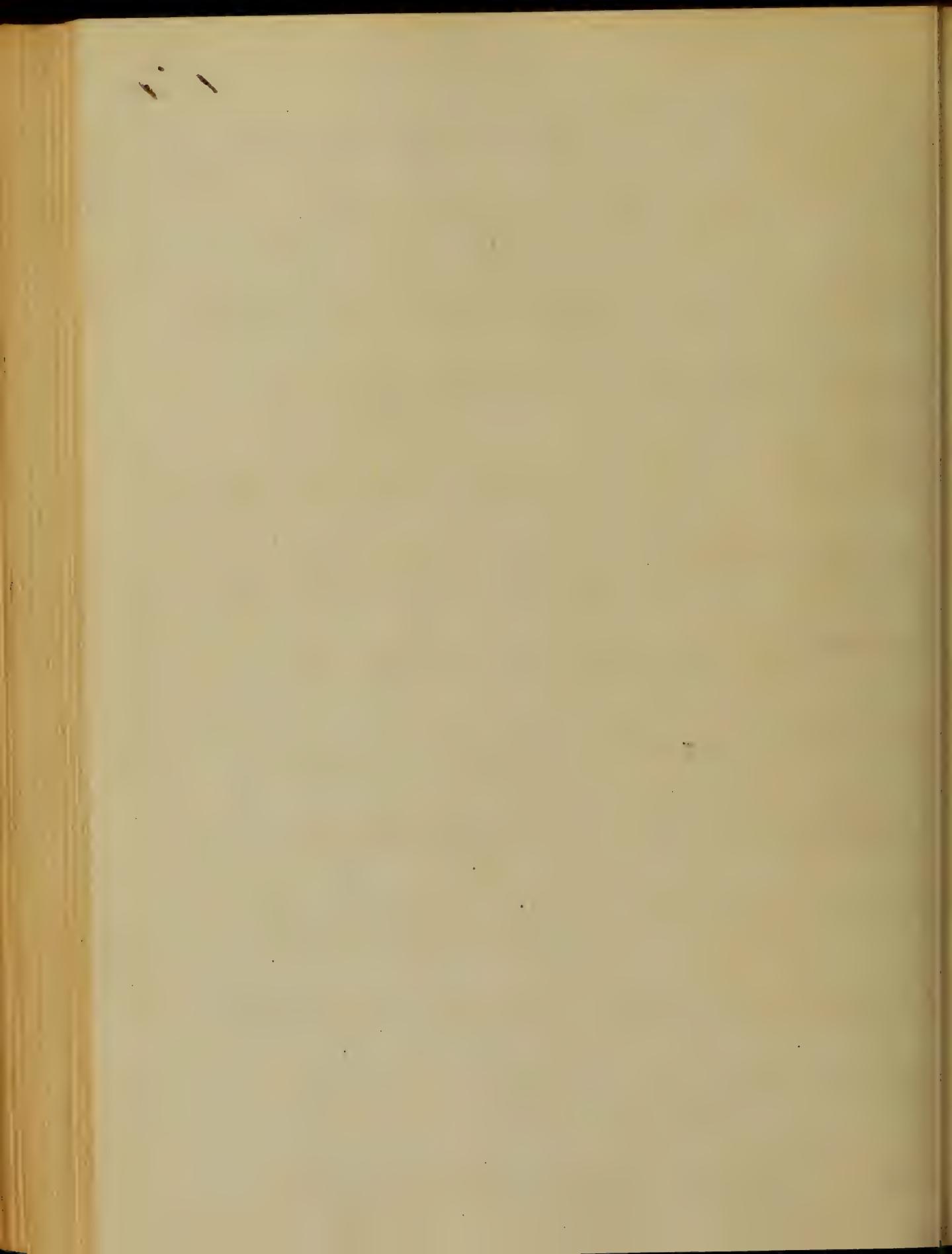
I am not bound to inflammation
or the cause will be extensive & same
The pressure of several teeth
will be applied to the child
& oblique placed behind the ears
From the attack was brought
on by simple diarrhoea a
warm bath once or twice a day
Followed by gentle friction still
proves efficacious In conjunction
with mucilaginous drink & a
combination of one grain of Sal
volatilata & four grains of Imperial



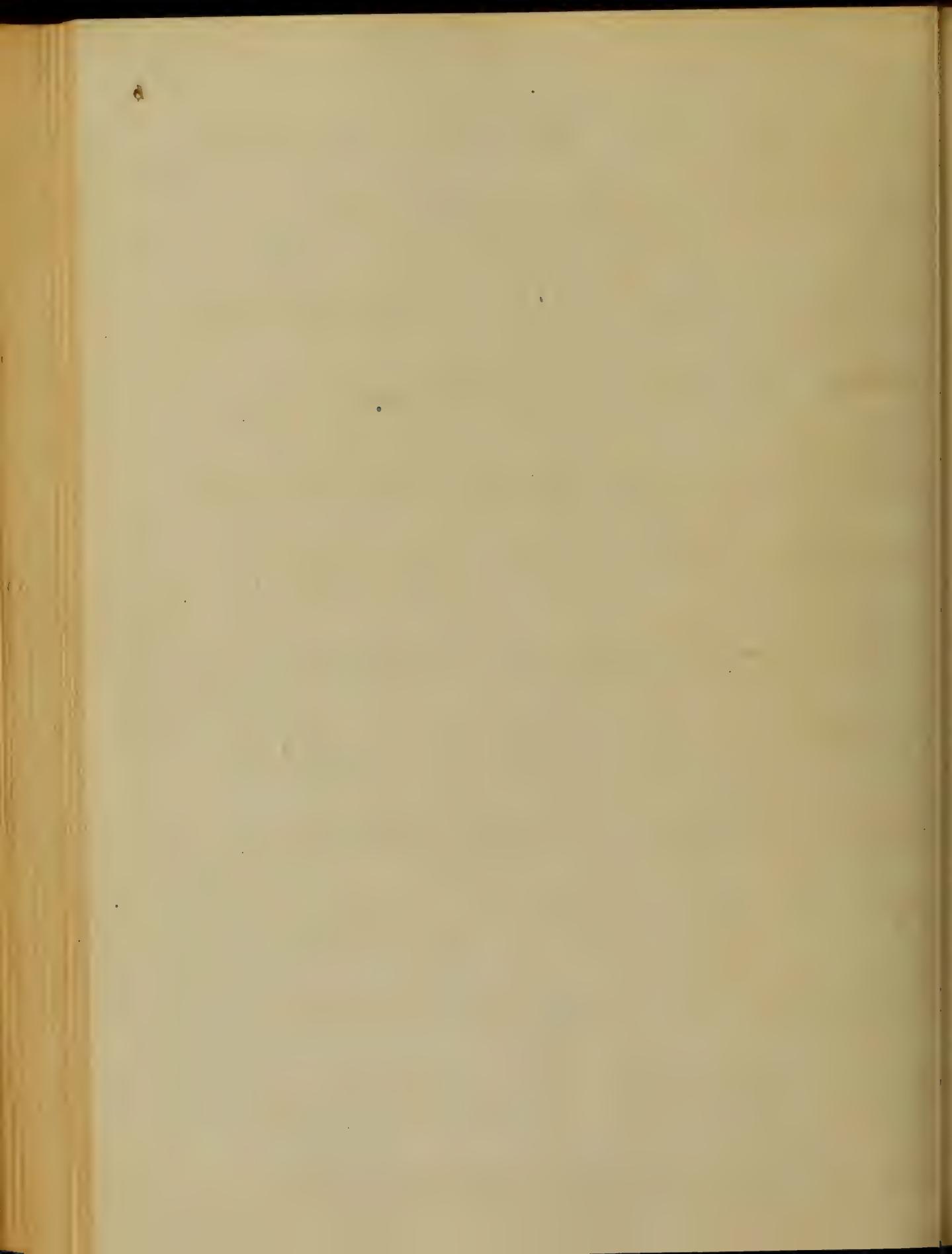
Half a grain of the
Acetate of Soda, given every hour
I have it also highly recommended
Attention should also be given
to the diet & dress & the patient
is neglected in this particular it
often ends at the exciting cause
at this trouble the food
of the infant should be the
mother's milk or if she is dis-
abled procure a healthy wet nurse
& the child retained on the breast
during the existence of the



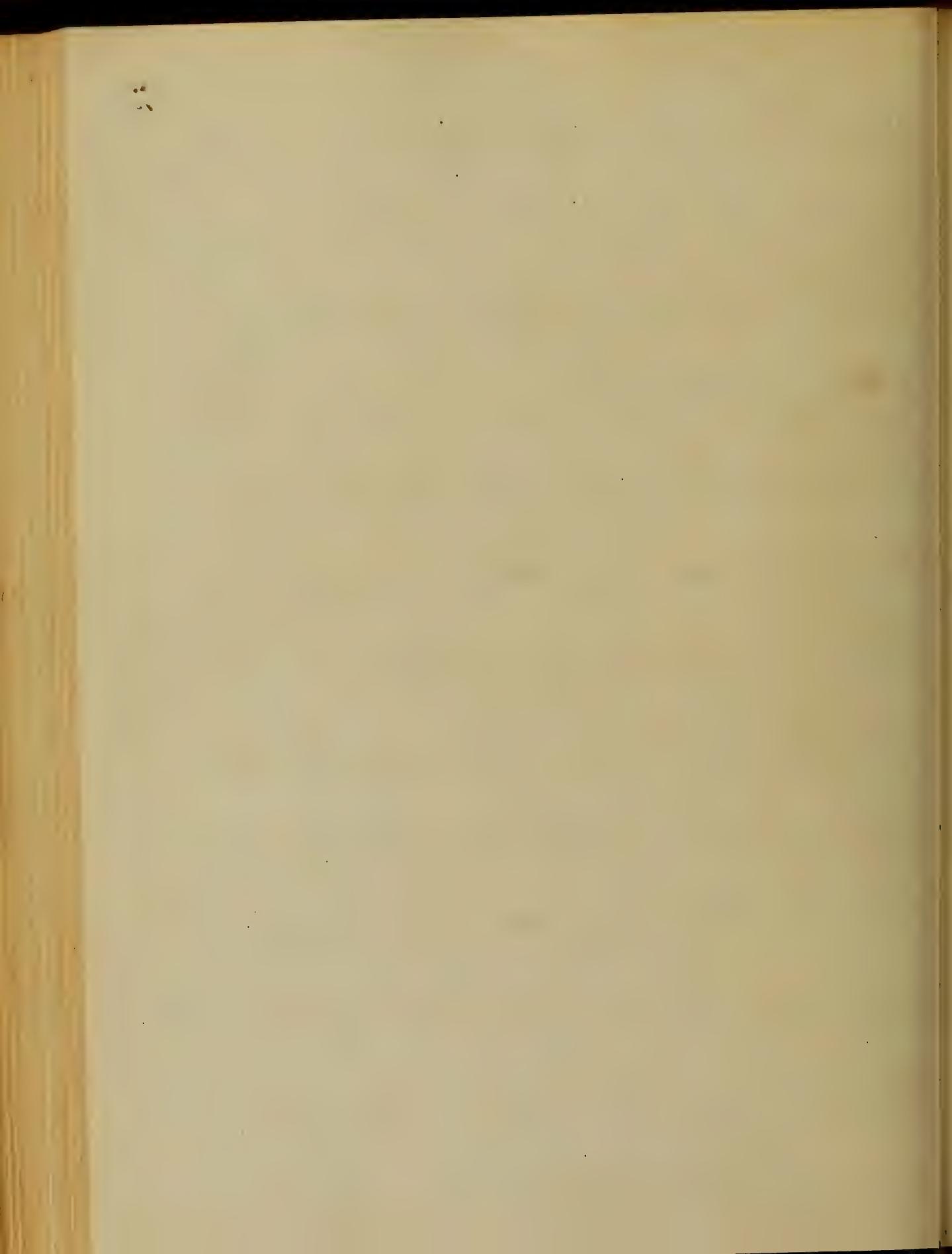
complaint - if this diet cannot
be had, the best substitute for
it is perfectly pure cows' milk
diluted with water - Saupi made
from farinaceous substance
such as Arrow Root, Tapioca, rice
water Crackling &c may be used
but should be known to be perfectly
free from impurities -
All nutritive drink should
be given in small quantities
so as not to irritate the stomach
& the inclination the child



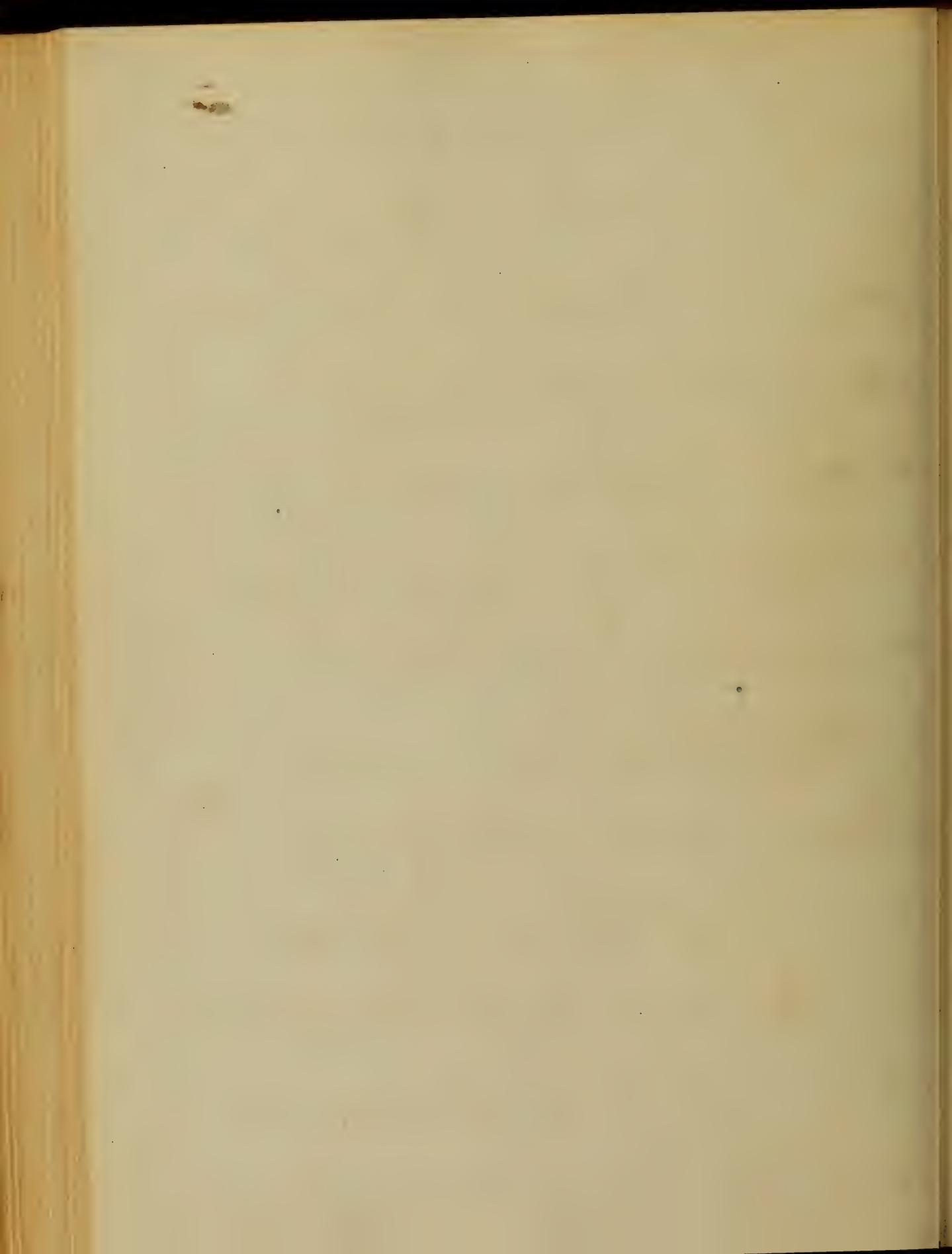
vinegar & drink much by restraint
In order to quench the thirst
which is so characteristic an
cold solution of Gum Arabic
or cold water in small draughts
is preferable to nutritious drink.
Crushed ice confined in a piece
of Linen or gauze so that it com-
mors be swallowed undissolved is
of great service to the patient
When the disease has advanced
to a more critical stage & the patient
manifesting great debility of the



Sixth. Some of the animal broths
may be given & allowed to suck or
peice of Lam or dried Saltbut
it doe not increase the trouble
The bathing Should be such as
to insure an equable temperature
to the body without oppressing the
child. Light Flannel Should
be worn & the Face & Legs covered.
The alimentary canal Should
be watched closely in order to
remove all sources of irritation
that may drive the child sweating.

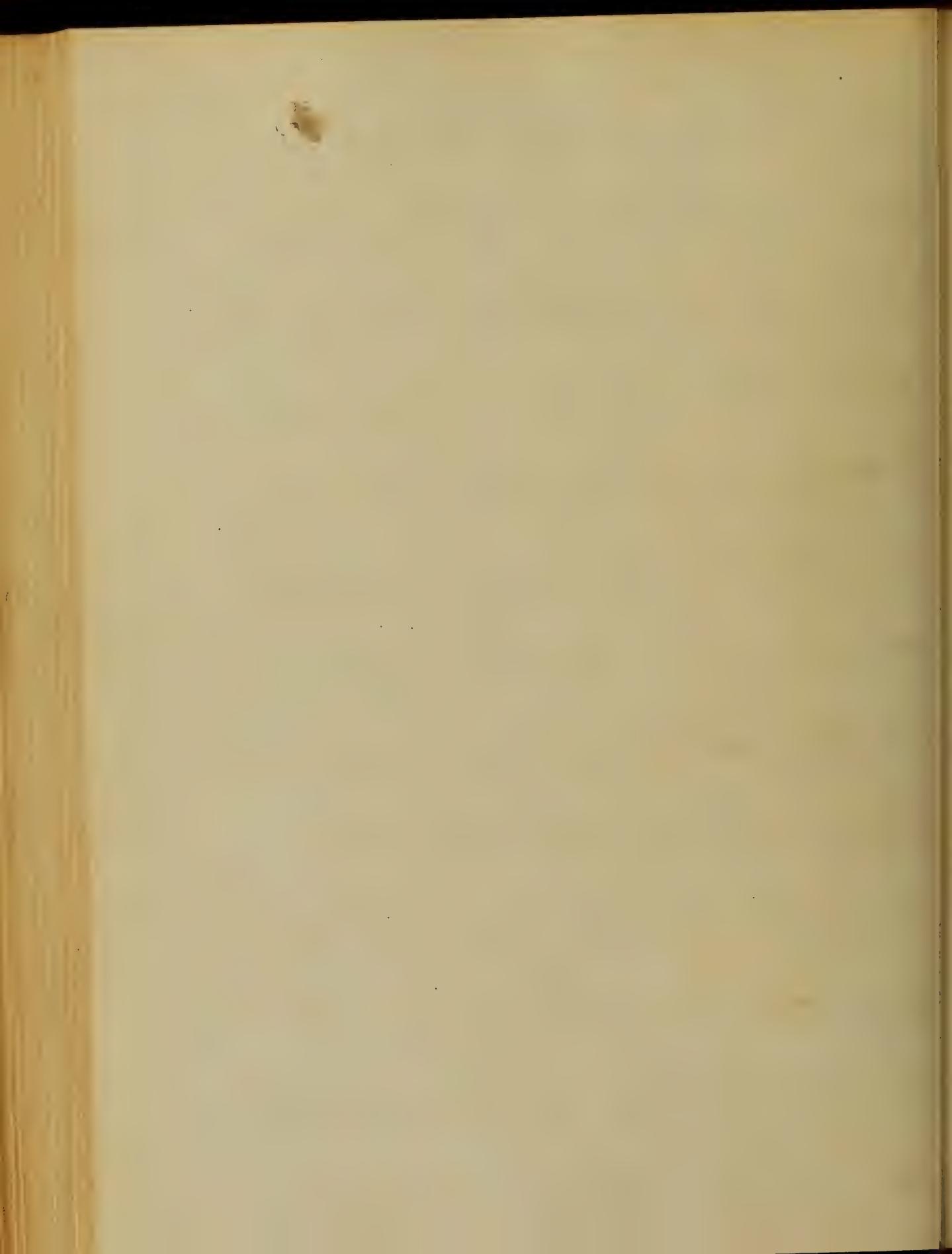


Tan & acide should be given to
promote hepatic secretion & relieve
postal congestion. Saline &
some other alternative should
be given to the patient monitored
much gain on another should not
be neglected. And to check work
in evacuations in the advanced
stage astringents as a pelasann
wine should be administered
& the patient will be supported with
stimulants. When the gastric
irritation is increased it is some-

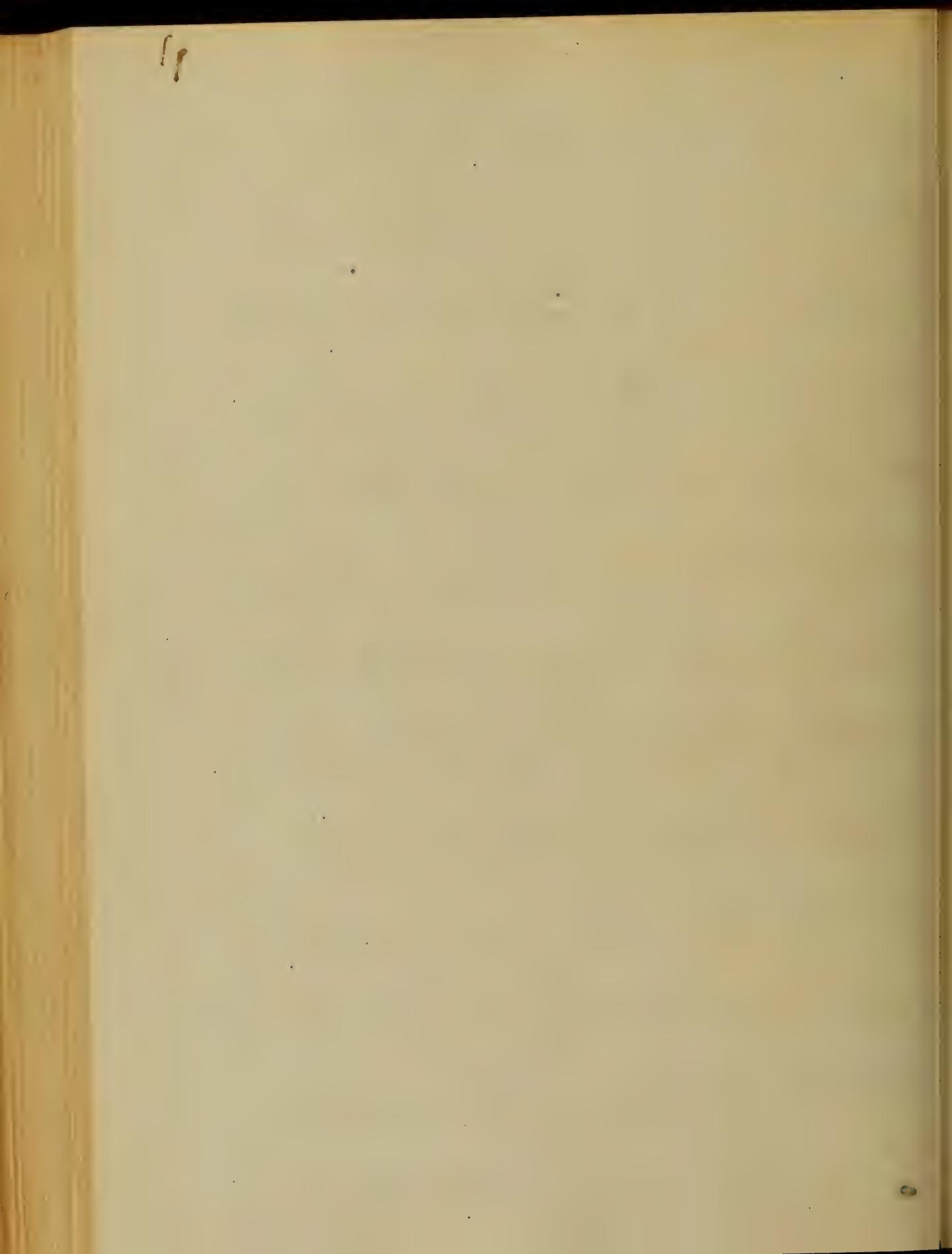


Times allayed by sprinkling about
the mouth of a grain of
calomel rubbed up with a little
dry white sugar upon the tongue
If this should fail now mix a
few drops of spirits of turpentine
or a salution of Camphor in
Sulph Ether repeated at short
intervals will often succeed -

Rub Saline applied to the
epi-gastrium so as to cause counter
irritation for this purpose I usually
combined with sulphur it abates



The best application of the vomiting
is prevention with pain & ten-
-derness over the abdomen. Few
strokes over the stomach followed
by a light emollient poultice or
warm fomentations to the abdomen
have been prescribed by Dr. Wood &
others - the patient should have
at this stage of the thirst
pervades & the vomiting continues
about a teacupful of cold
water which often arrests the
escaping irritability of the stomach.



From all other means I have
Failed to check the vomiting
an Anodyne injection may be resorted
to containing from three to six
drops of fine opium in a little
starch water but if there be any
symptoms of cerebral disease it
would be proper to omit the
opium. When Anodynes are
given it should be at bed-time
as they would be useful in enab-
ling the patient to rest & assist
in relieving the peristaltic action.

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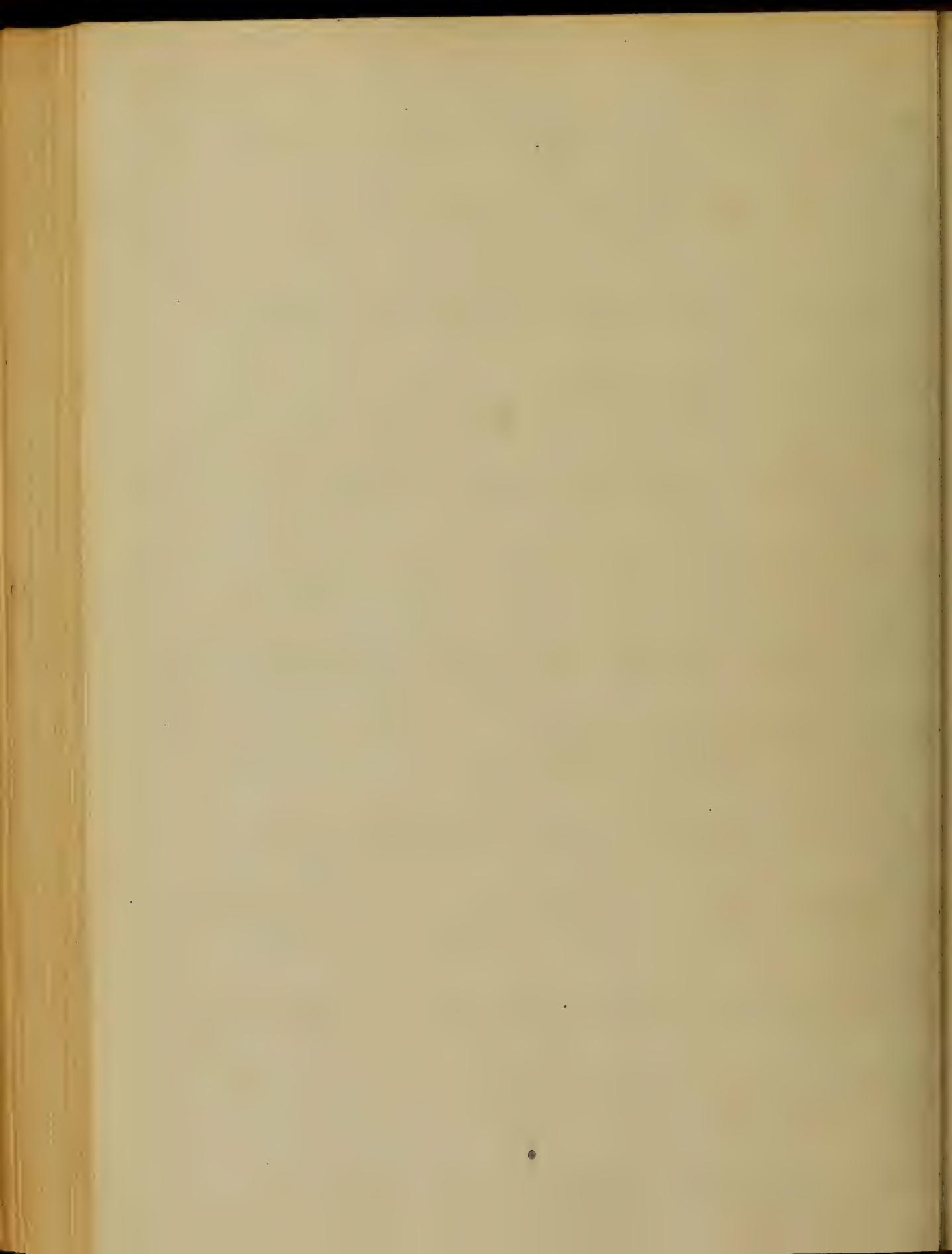
of the bawler-Green cure should
however be taken so as not to give
too strong a dose at any one time that
we may deem necessary to employ
particularly opium as it might
cause cerebral trouble -

When the disease has come
it has abated with purgatives
Should be given so as to evacuate the
bowels Rhubarb & Magnesia are
excellent for this purpose Magnesia
is particularly indicated when the
stools have a sharp smell & garnish

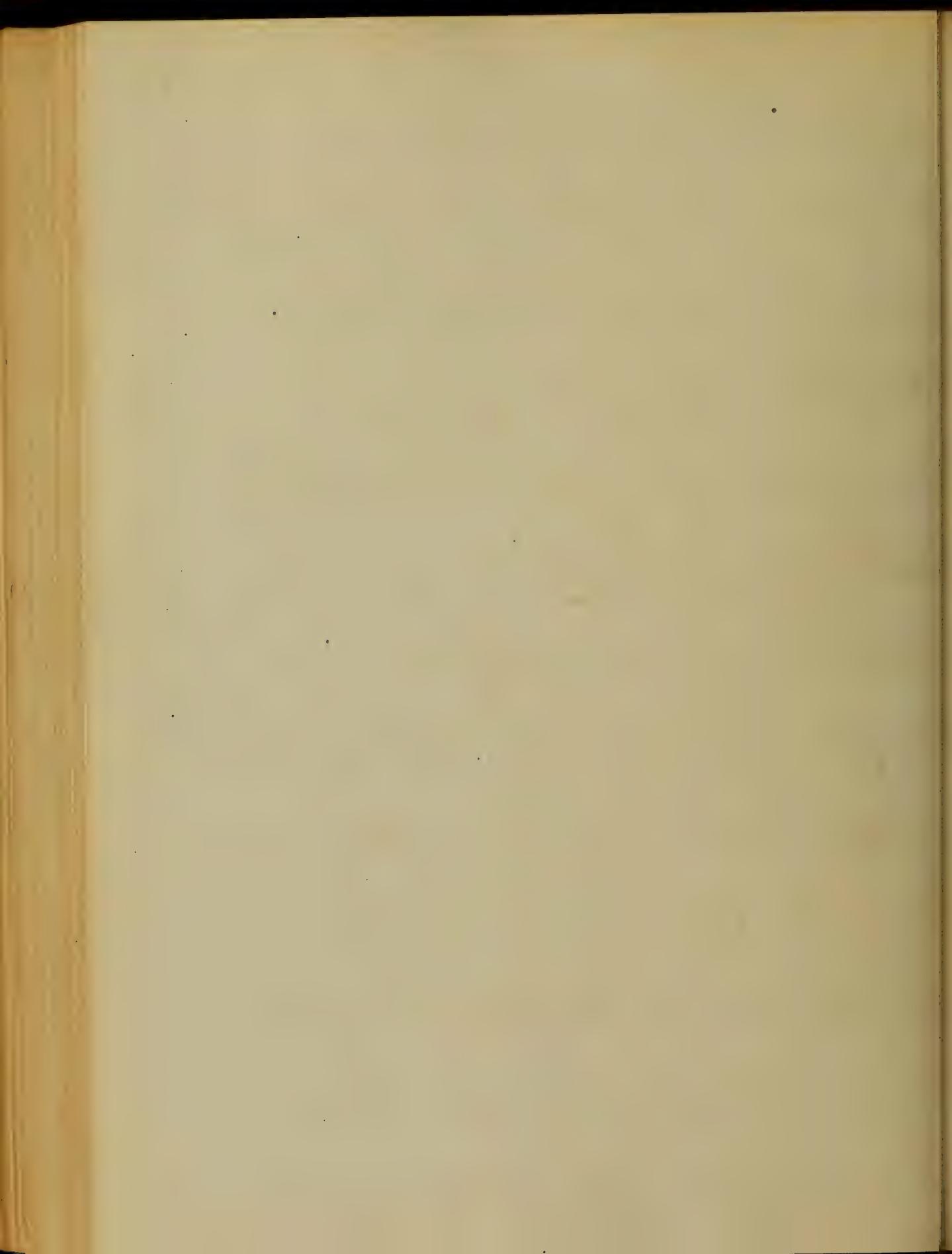
24

color - Then the evacuations are
 small & blended with green tallow
 - due with much pain. Castor oil
 Should be Substitute for Rhubarb
 & Magnesia These medicines should
 be mingled with some aromatic so
 as to make them less offensive to
 the little patient -

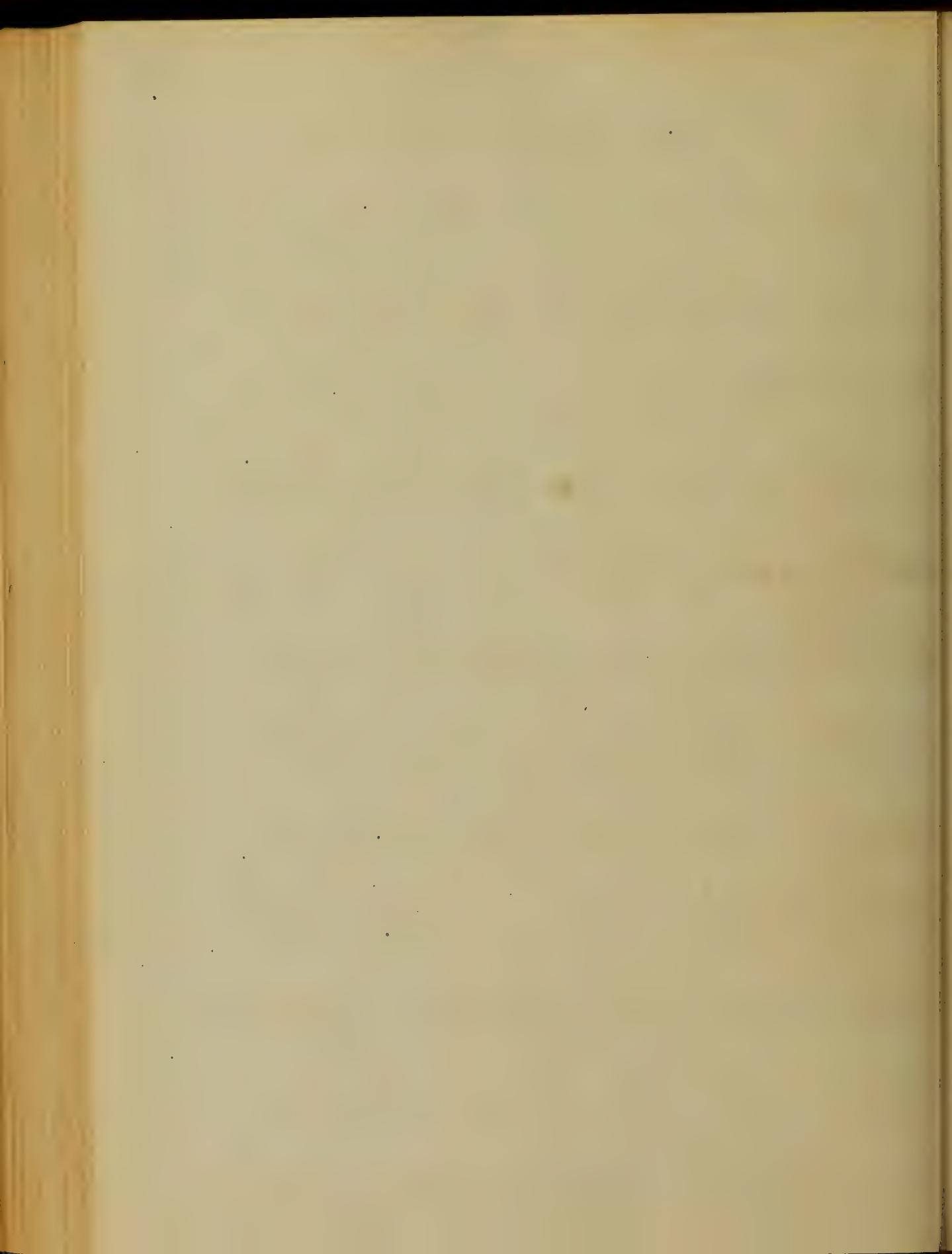
In Haban dierhoes at this crisis
 of the disease a combination of an
 Fumath at a grain of calomel - this
 grain prepared chalk an grain
 acetab of lead van fumath at a



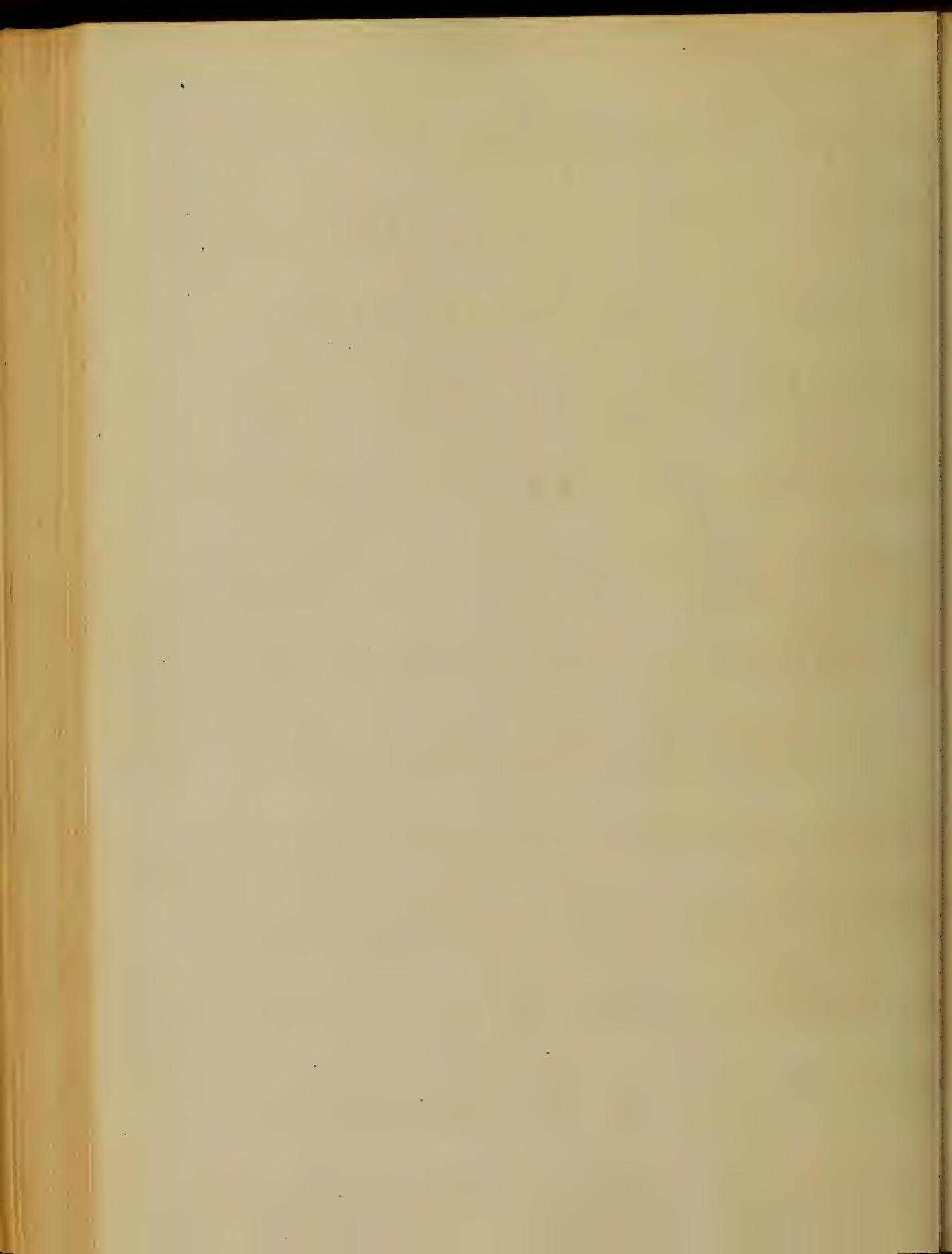
Grain & I appeared with him giving
every three hours under this precep-
tive so large the discharge will
soon be suspended & replaced by
natural stool - As the
patient gradually returns again
to health the greatest care must
be paid to his diet & clothing
& be moved about freely in the open
air - In the more advanced
stages of this trouble when the
evacuations are ~~less~~ to ~~less~~
it becomes necessary to employ more



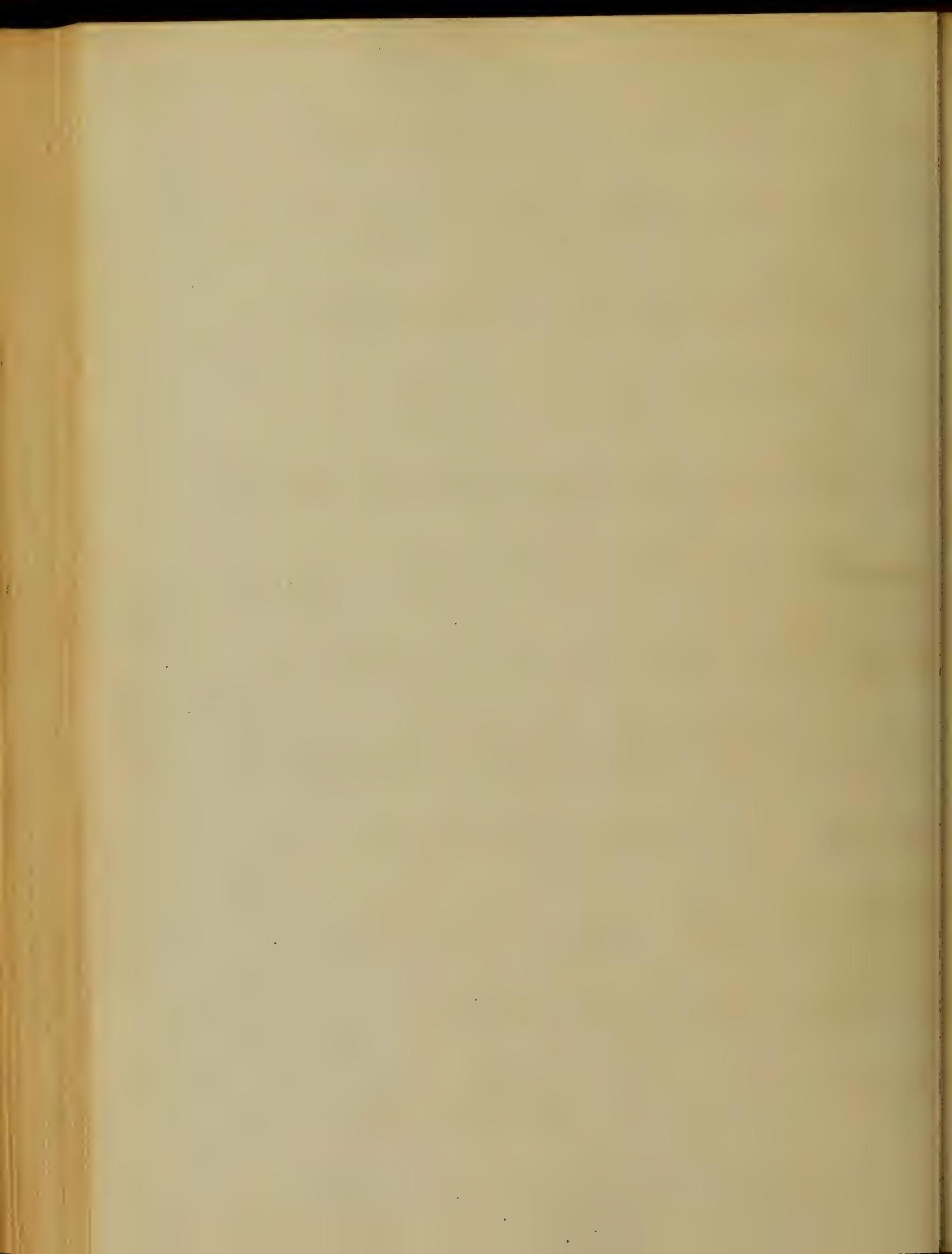
Silicium attinguente such as Soda
Cathartes & port wine. Their agents
act probably as much by their an-
algesic impression upon the
inner membrane as by their
attenuant properties. The mineral
acids are sometimes used
with very happy results, those
most frequently employed are the
"Iro-Bunial" & "Silice acid" which
latter to exert an attenuative influ-
ence over the diseased mucous mem-
brane - When there is great debility



the patient should take a
little wine-water & if convales-
cence is commenced, the time
is at the physician's administration
of "small" quantities of nutritious
aliment or a gruel with suitable
twigs - from a watercress which
should be used with
a view to a direct impression upon
the mind & when there are
much fear of the head, injected
appearance of the eyes & epiphora
with delusions as other symptoms

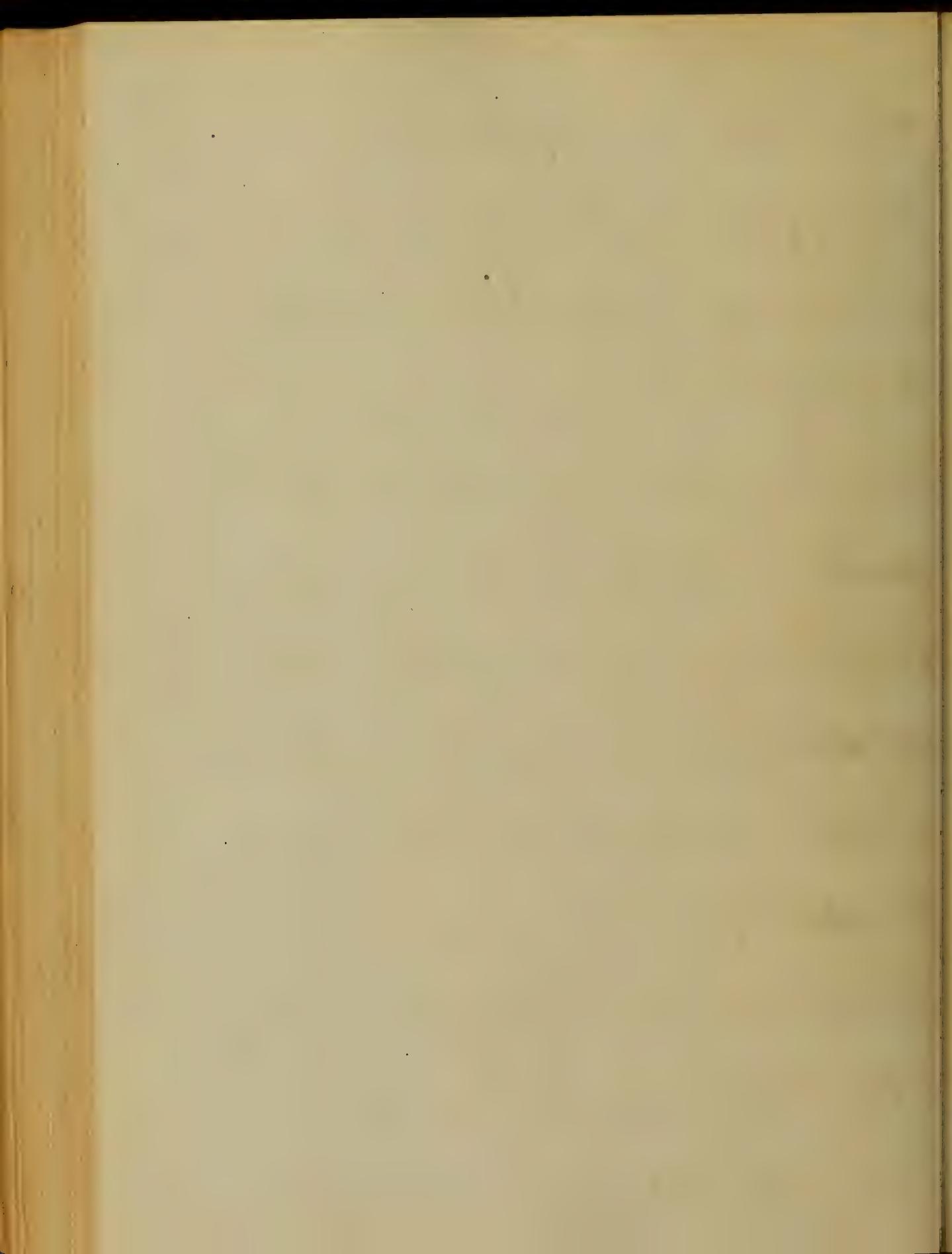


of cerebral disease such should
be applied to the temples & brain
the same evolutions to the
scalp & warm empiem. Foot
bath or some other stimulating
enunctions to the lower ex-
tremities - In no chronic case
should the salt bath be omitted
for it is universally acknowledged
how valuable service it can
all times acceptable - The warm
bath would also be beneficial
as it tends to relax the muscles

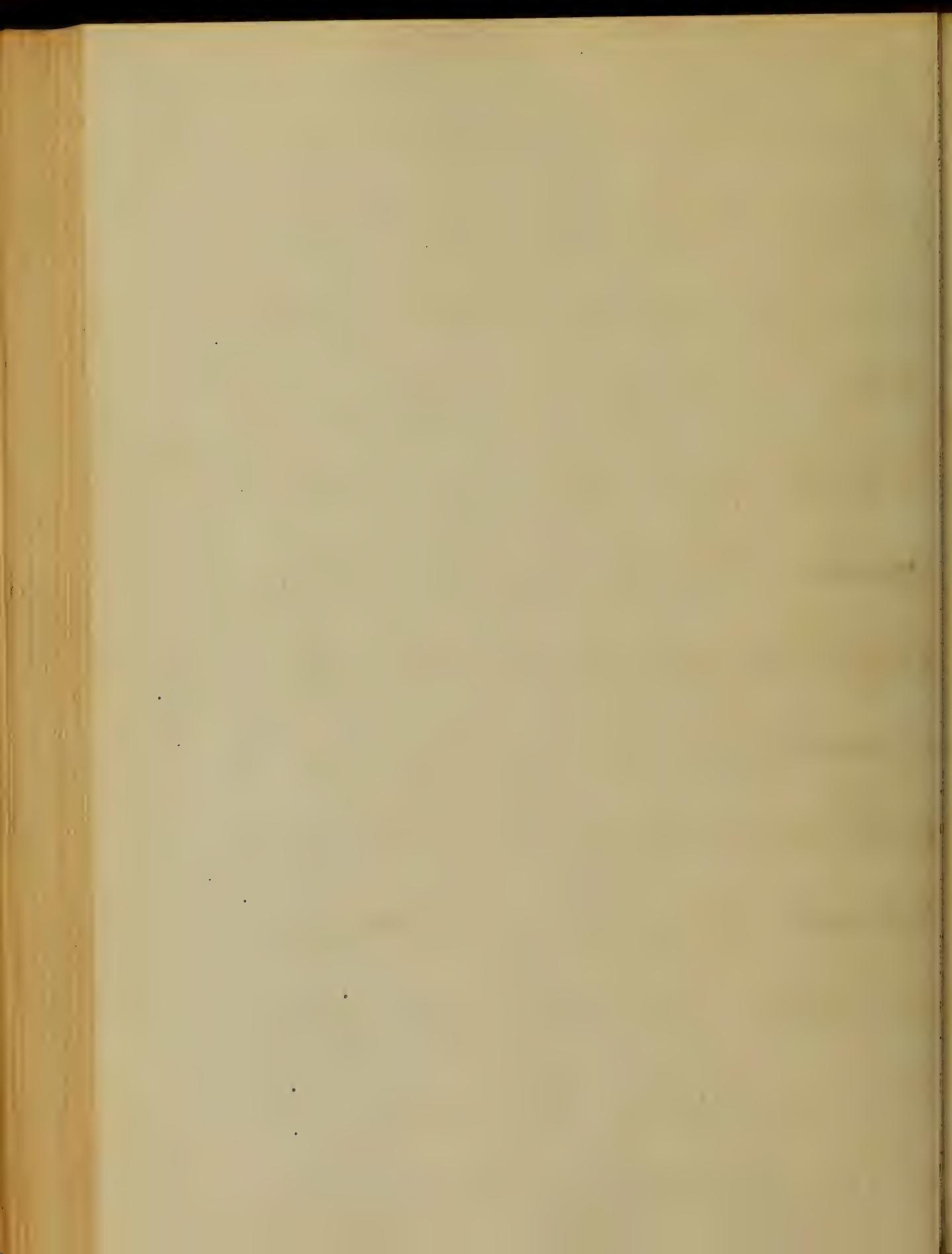


I glands promote perspiration &
dry pain - I find that it deficient
in the extremities Friction
& rubefacients should be freely
employed in order to restore the
parts to a healthy & normal tem-
perature - Oil of Turpentine, Liniment
& Ammonia & Nitreum or Camphor
are the agents generally selected
for this purpose -

Parents with children predisposed
to this scourge of the nursery
chamber would do well to observe

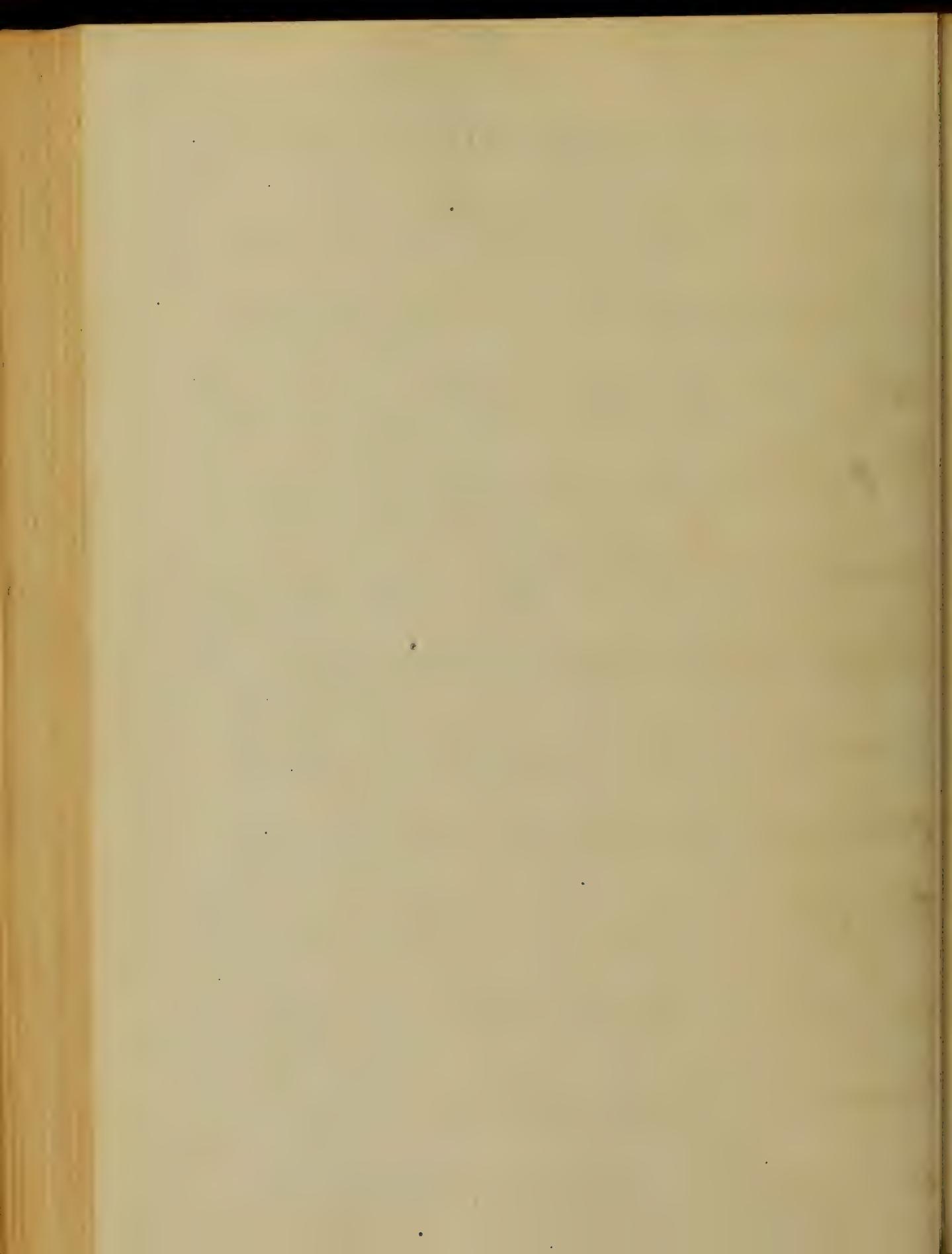


Certain Simpler but vastly important
prophylactic measures such as
Leash as would seem to be familiar
to the mind of even one suffici-
it to say that bear impure air,
and sick & debilitated are the great
exciting cause & require untiring
vigilance in connection with
this There are several medicinal
agents of signal importance
For instance the aromatic the
principal of which is an infusion
of ginger taken at short intervals

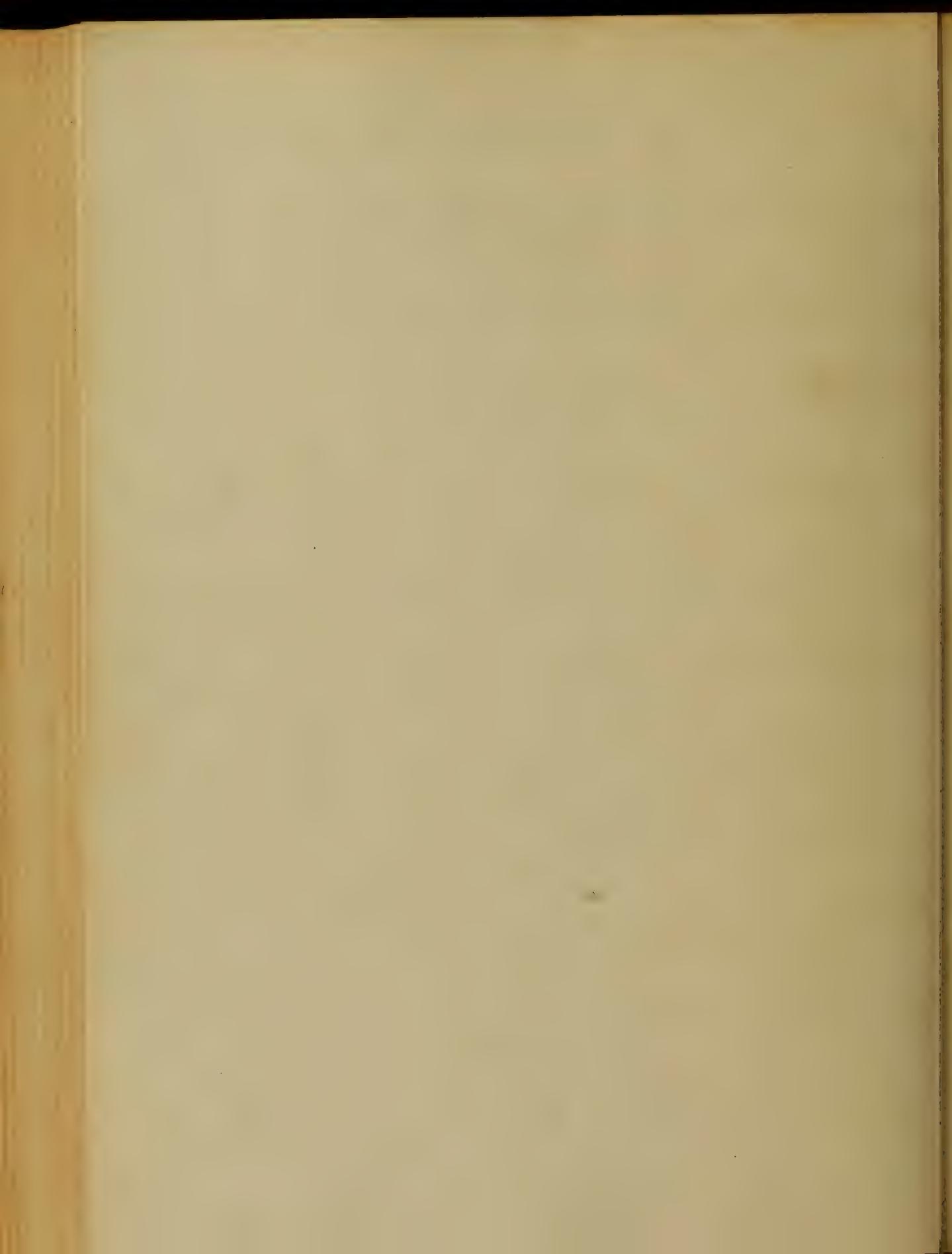


it during the period of dangerous
illness and the efforts of a nu-
merous nature in fortifying the
stomach & intestines against the
attack,
at this vicious malady I have.

Now I said all this my verant know
ledge of this disease can suggest
to me less would say before closing
this futile dissertation would be
God thus with it carried I witness
the eternal extinction of this
disease, at no stalked as it were
through air unsimil snatching



From our dolls & brats the
beautiful objects of our admir-
ation & affection -



A N
Inaugural Dissertation

ON

Alcohol

Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

P H Y S I C,

OF THE

UNIVERSITY OF MARYLAND,

FOR THE DEGREE OF

DOCTOR OF MEDICINE,

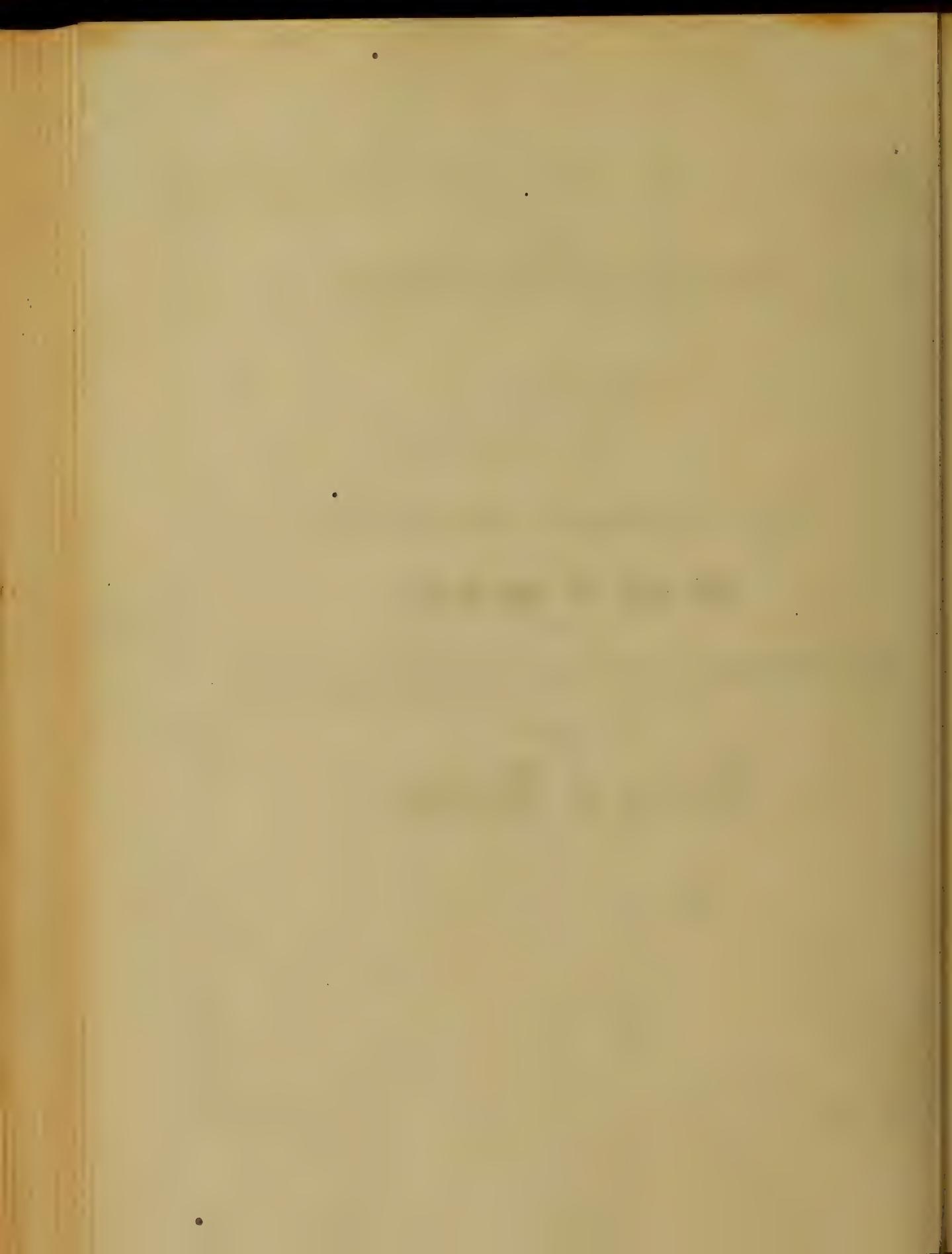
By

W^om^en Thompson
of

Virginia

Session of

1867 & 8



Cyrus

Mr. —

much consideration for my lot

possible medical and body of men.

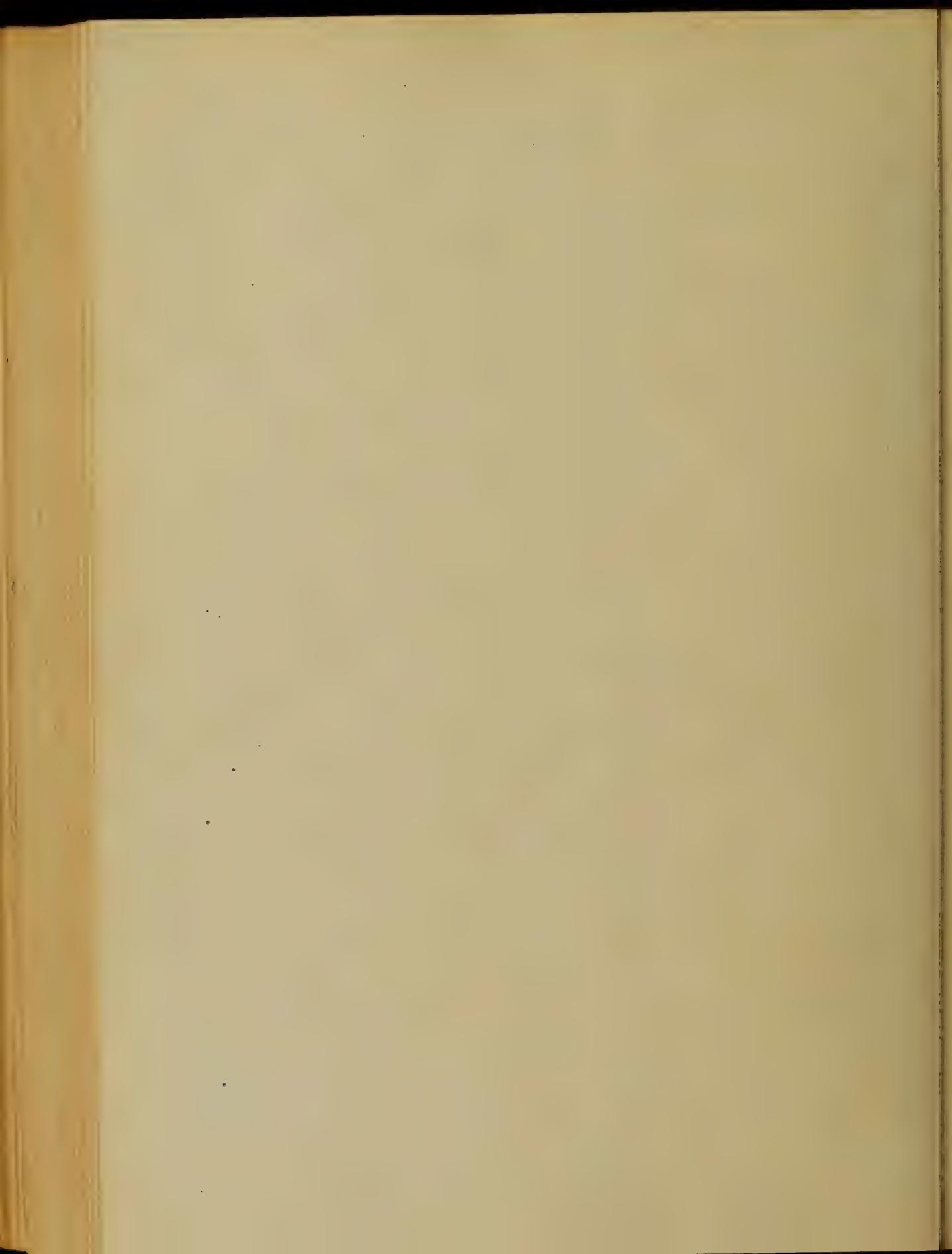
Mr. True belligerent the march

and — The less a dangerous, when I have sent

— I propose first to give a general

account of this article, its effect

and consequences.



is called luciferin

and luciferase

material called yeast or yeast-sugar

contained in certain vegetable pieces or

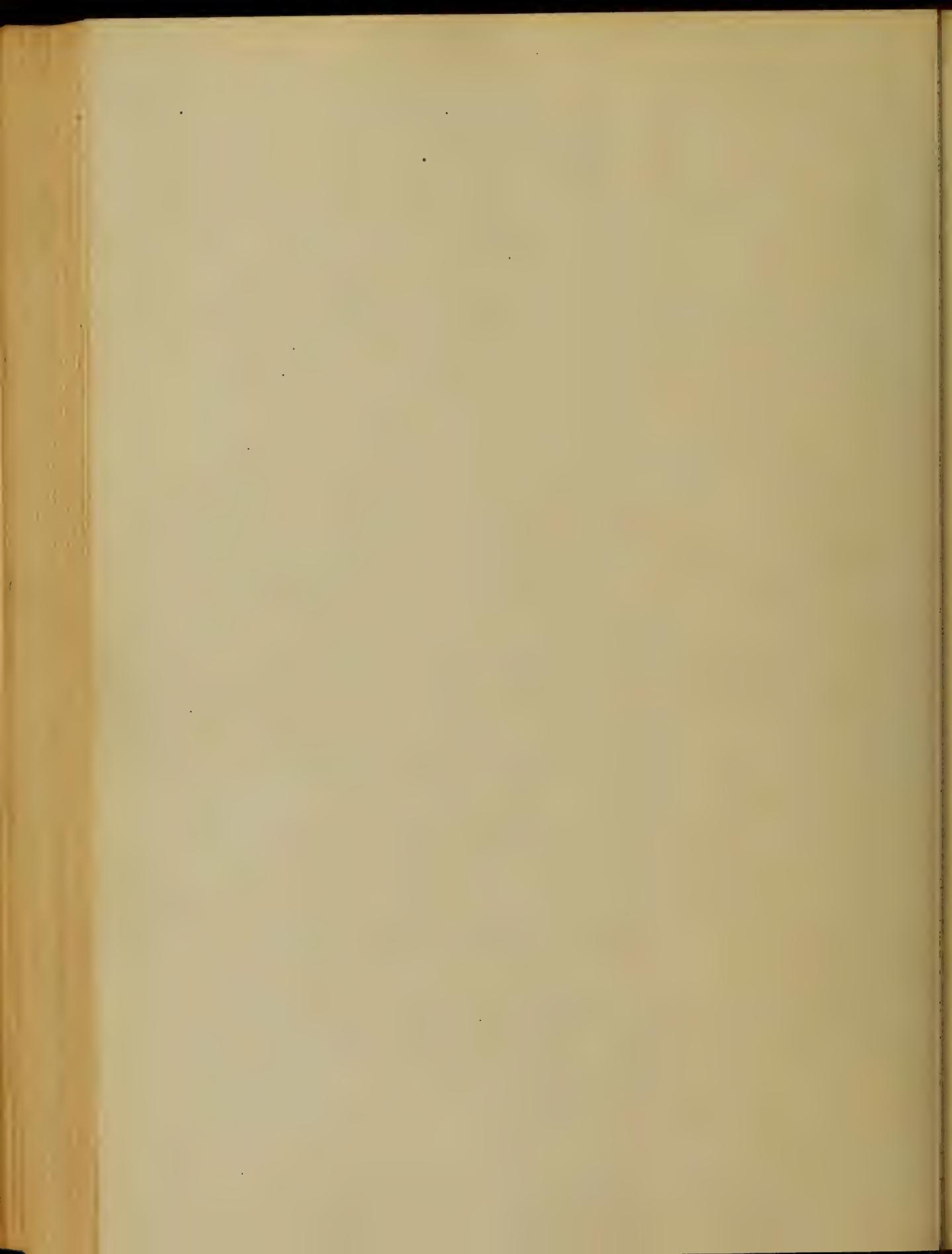
fruits or dissolved in water is ~~not~~ ^{not} broken

into acetone and carbonic acid

which reacts with oxygen to give

an insoluble yellowish-green mass

and called luminescent mass



and the smaller contained in the Scutell

and the Scutell is full of small

and spirits of which there are numerous

and various kinds.

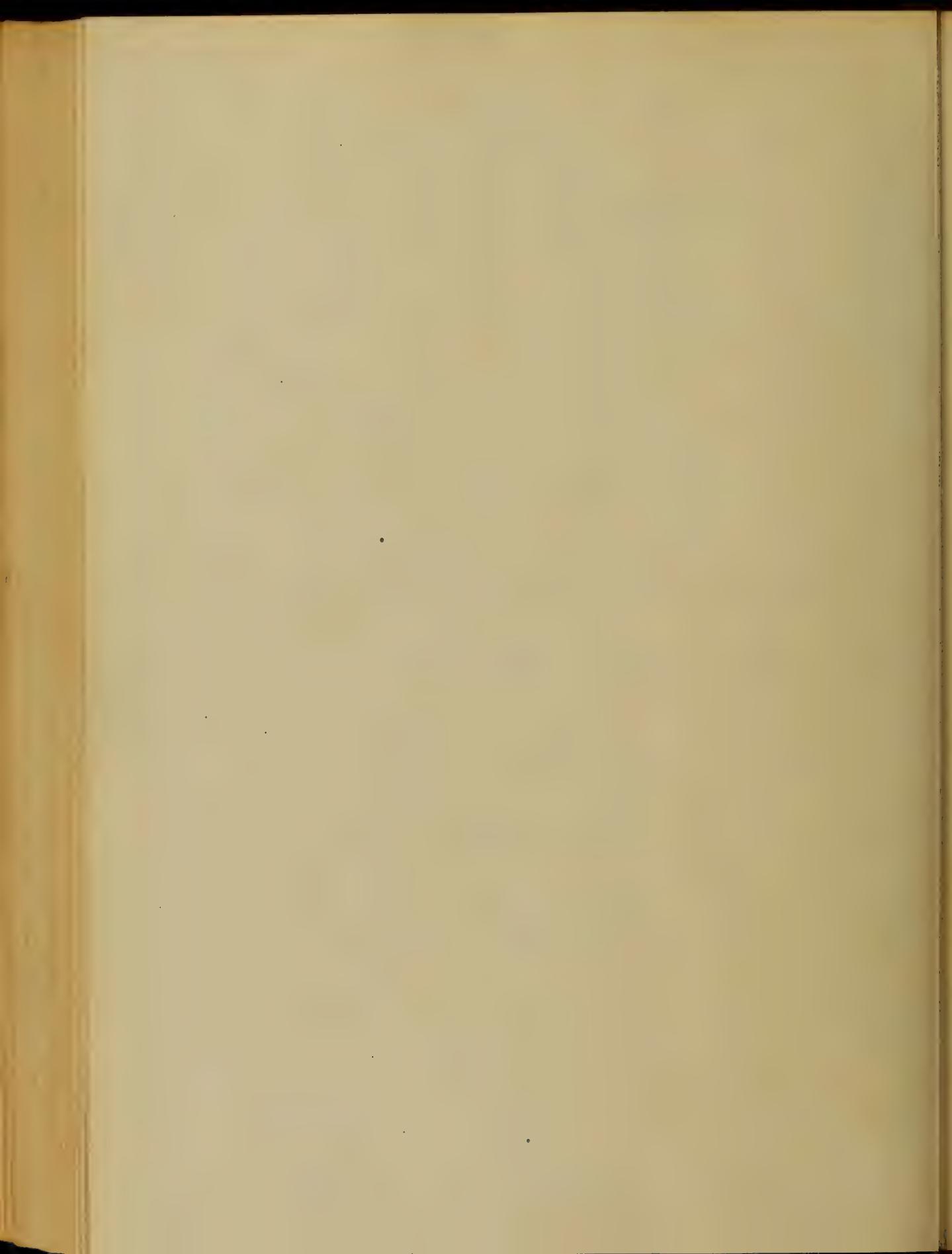
and the Scutell is full of small

and spirits of which there are numerous

and various kinds.

and the Scutell is full of small

and spirits of which there are numerous



chemical alcohol.

is used in similar diseases.

alcohol constituting what is known as

absolute alcohol.

must be noticed however that this is

true chemical alcohol, but will con-

tain a little water, having the savor of

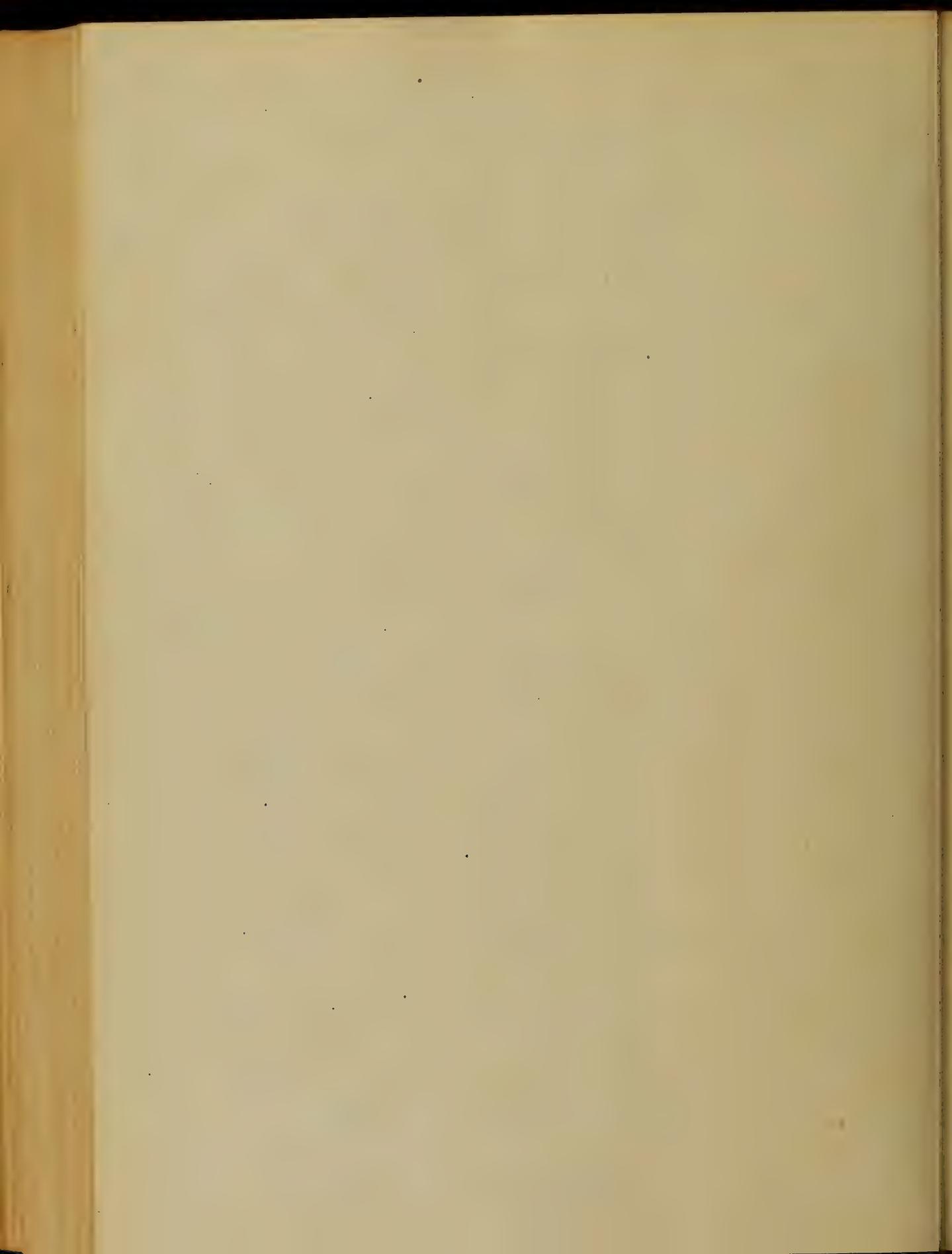
spirit. This is the strongest alcoholic liquor

recognized by our official code, and there is

need for some control over its manufacture

in order to be a chemical agent however.

If it were to be used as a medicine



and a white candle produced by

further distillation and it continues to

add to the liquid before it is dis-

Tilled all the water is retained and

acetot - comes over quite free from

that acetot. This is called benzyl alcohol,

or methyl acetate. It is colorless

and necessary to say that it is a color

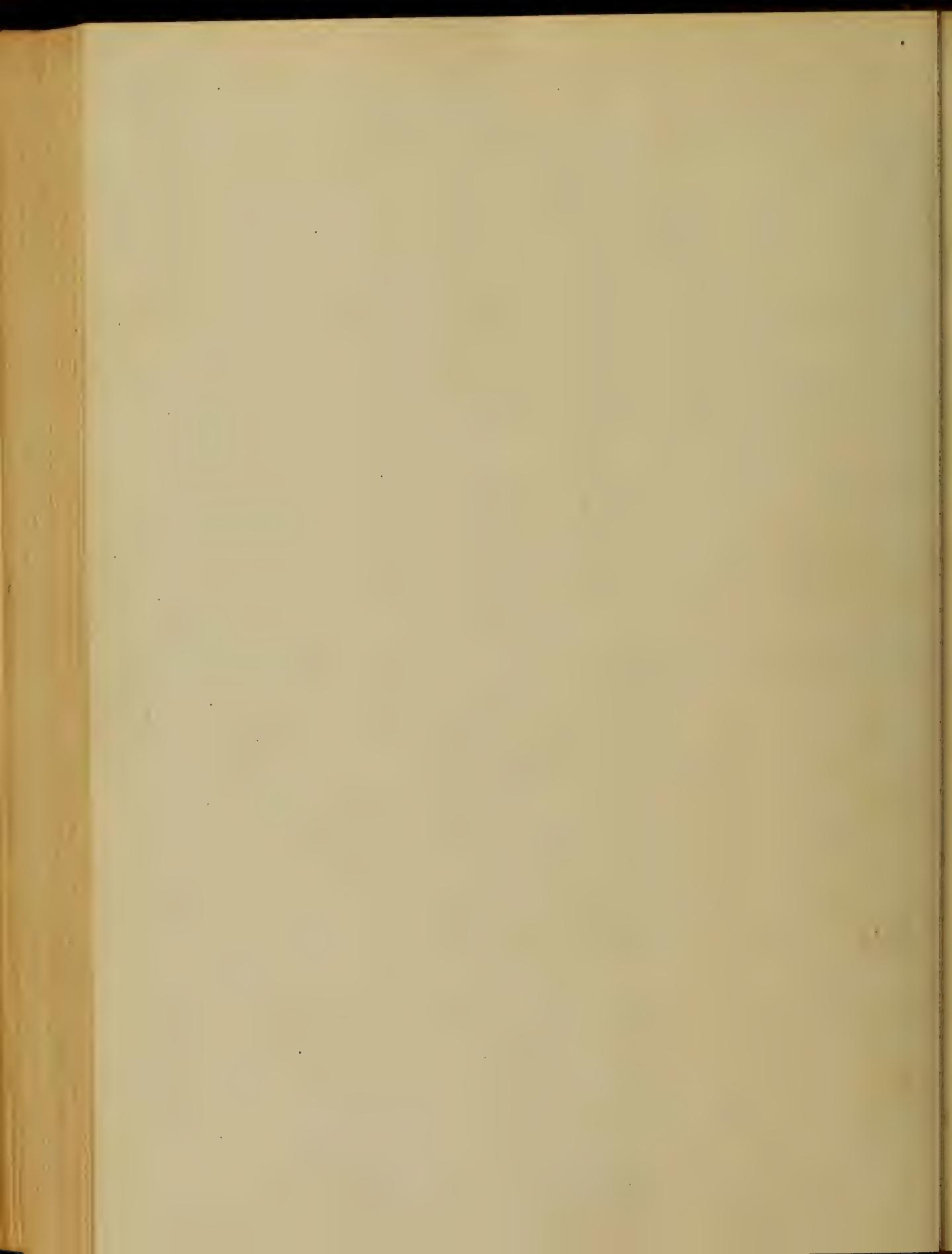
insoluble & inflammable liquid o.

ppm. 0.794 at 60° Fahr. of an agreeable

sugary odour, a burning taste, capable

& combining with water in all proportion-

ates, and with zinc, copper, &c.



4 - 5 days. - Inflammation.

2nd - 3rd day.

First exanthem - Rash -

3rd - 4th day. Rash -

in which it will be

circulatory and nervous p

nostril, mouth & oculi.

and nose and oral cavity.

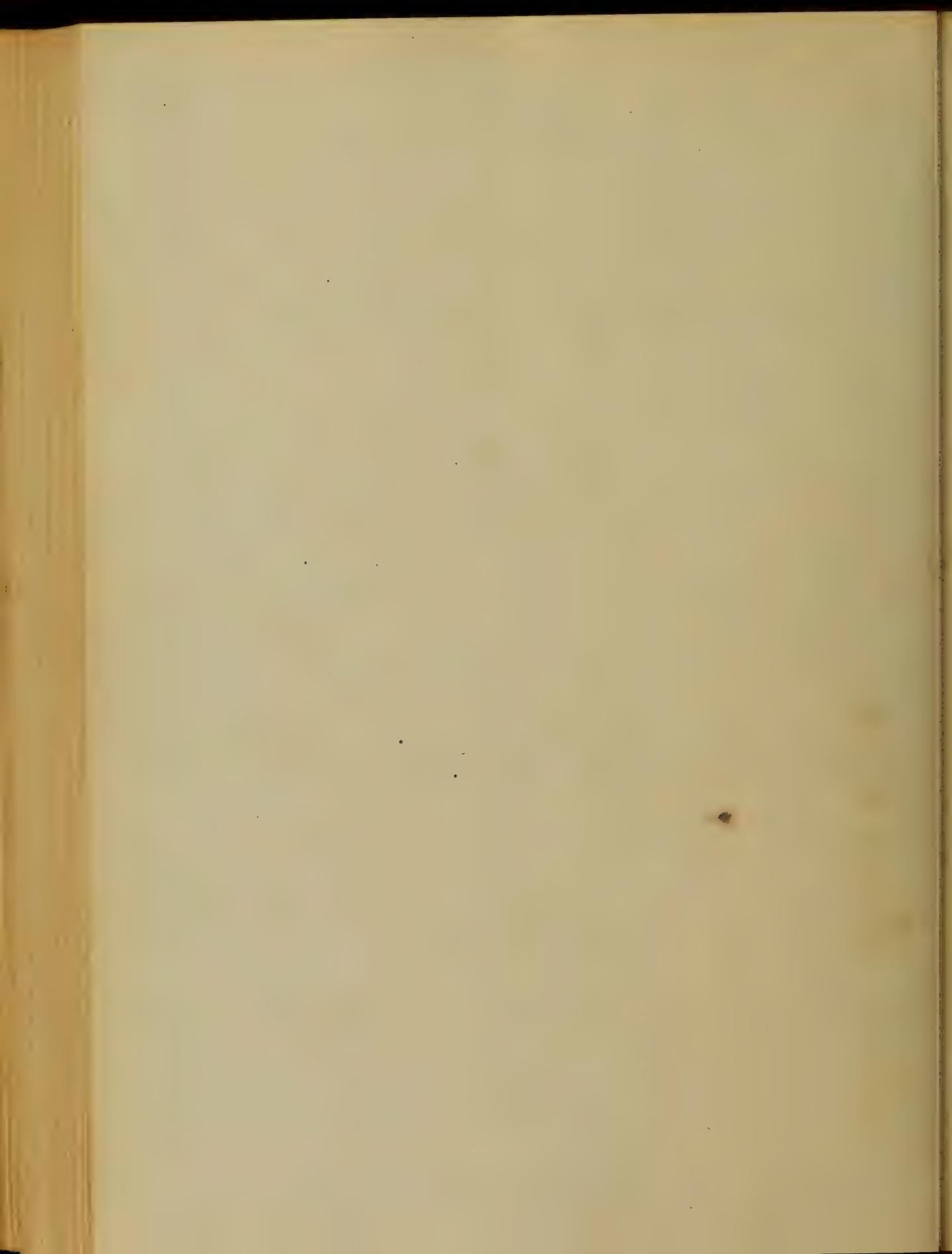
In circumstances the various types

not the most powerful & characteristic

feats are those produced when the virus

is applied to the skin or mucous

mucrae in a sufficing amount.



... and practices. —

... and the alcohol is applied to the part to which it is applied, after which

The blood vessels expand, heat and redness

are induced, and sometimes, if inflammation

exists, the application is persisted in.

In due time the tissues stretch and be-

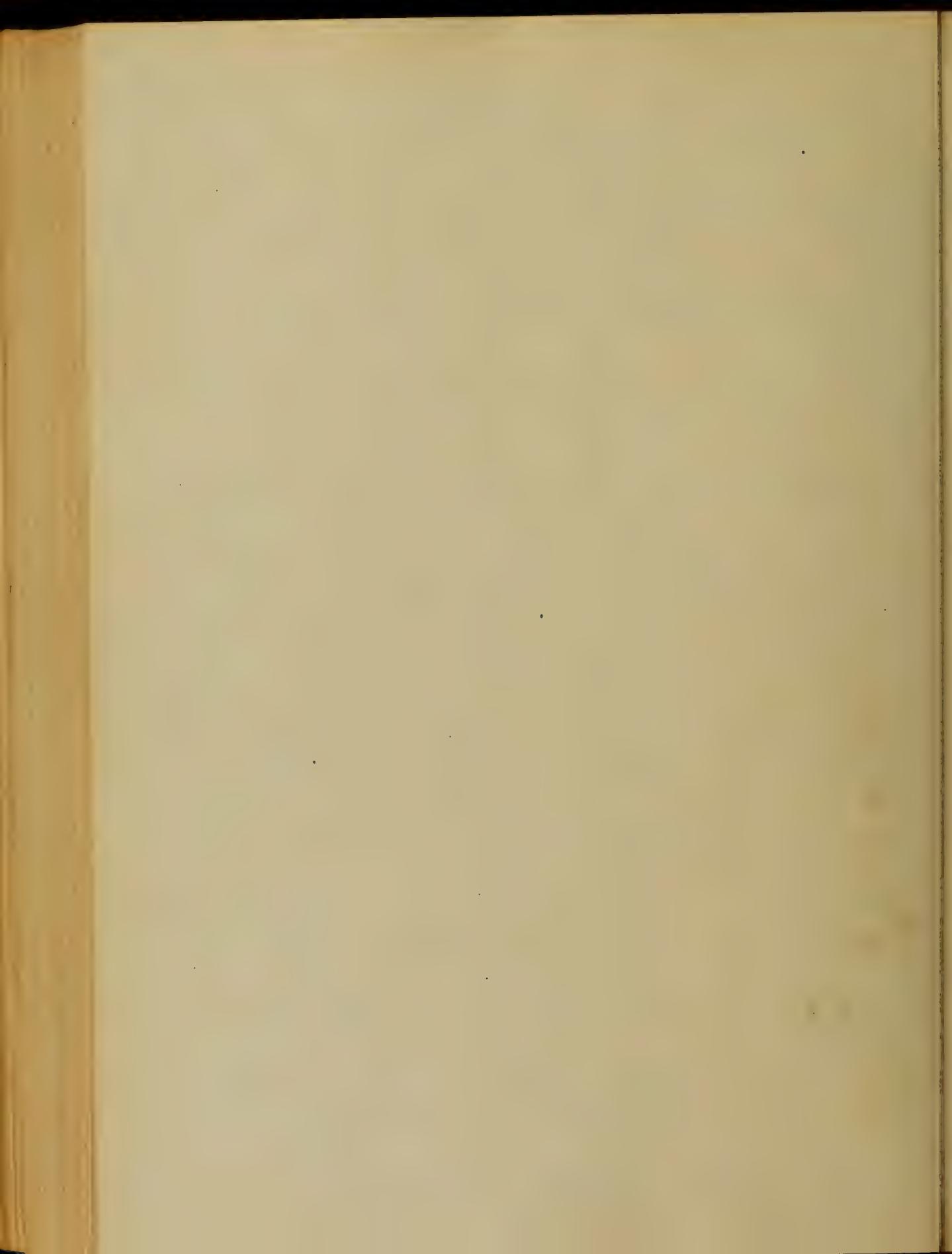
come dry. The heat and redness are

removed, due to some suppose to be

simply which the alcohol has far the

power which it is thought to obtain

from the action of the



~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~

~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~

~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~ ~~the~~

injected into the veins in sufficient

quantity to coagulate the blood,

and injected into the collecting veins

produce the same effect.

in the living blood vessels, in the same manner

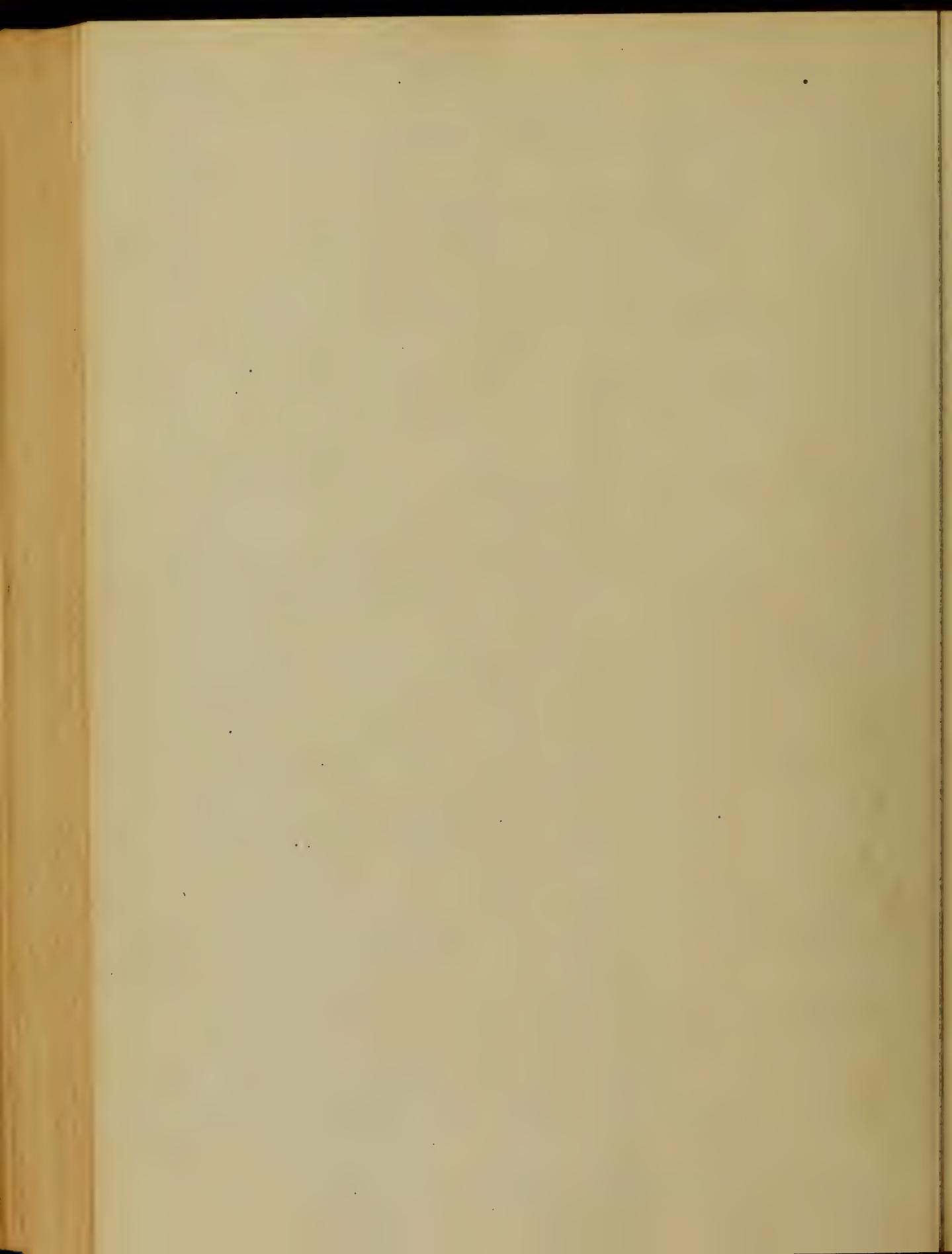
as before, since it is brought in direct contact

with the blood so as to exercise its action

upon the same in the same manner

mixing that fluid, and in the same manner

as before, with the same result.



will & the sensible

and the insensible.

Consequently,

the sensible & insensible

and in general death in the one

and local death in the other are

The consequences. But in its concluding

or exciting action on the skin we

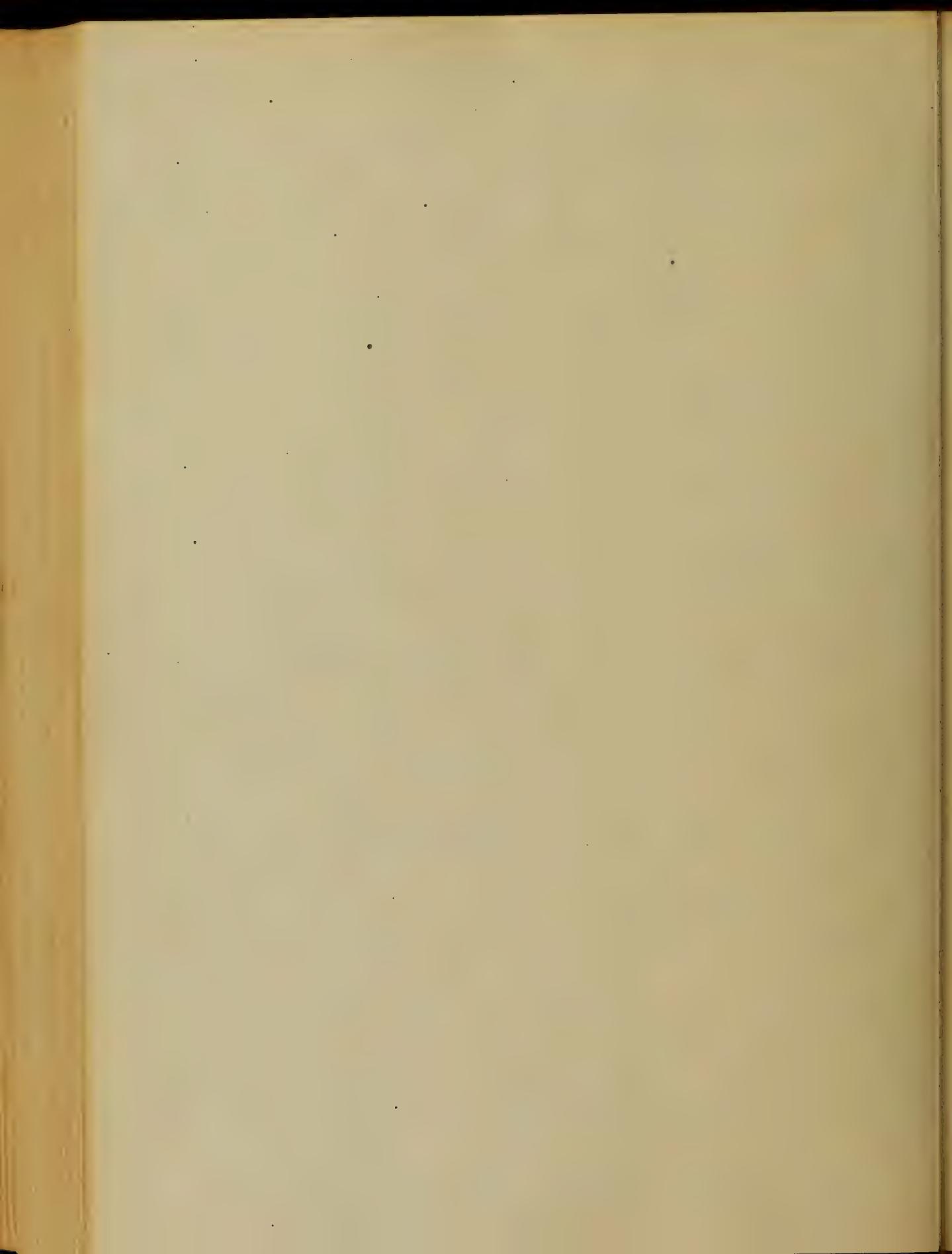
find no proof of any chemical

action. It probably simply increases

the vital excitability of the tissue in

The same manner as the action of

It is a common mode of preserving



and then to wash the parts before
reassure frequently.

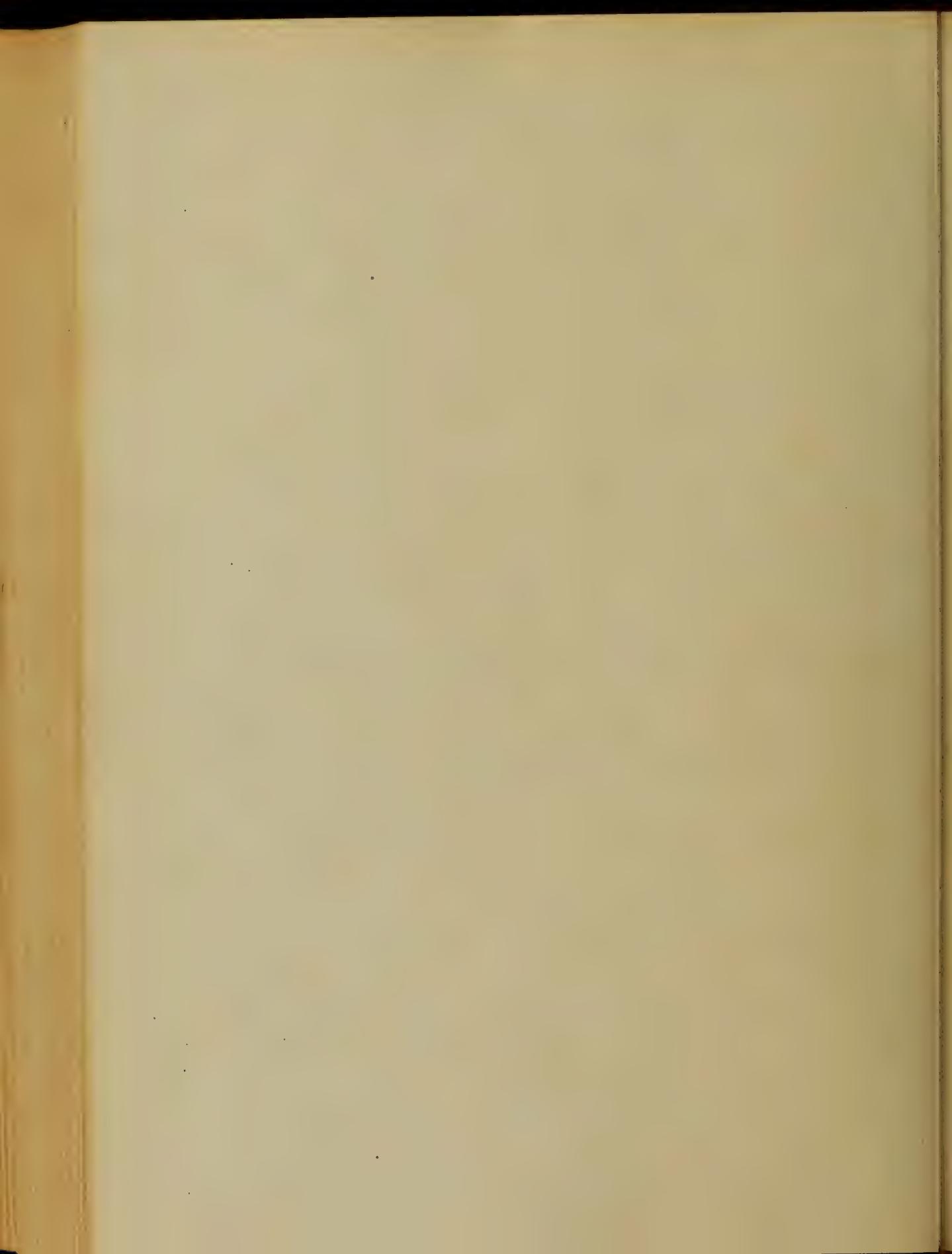
Other forms of ardent spirits. Then
we apply laudanum to sore nipples if
rubbed around it sores the part.

It is weaker as it has a tendency to
dry the skin on the part to which

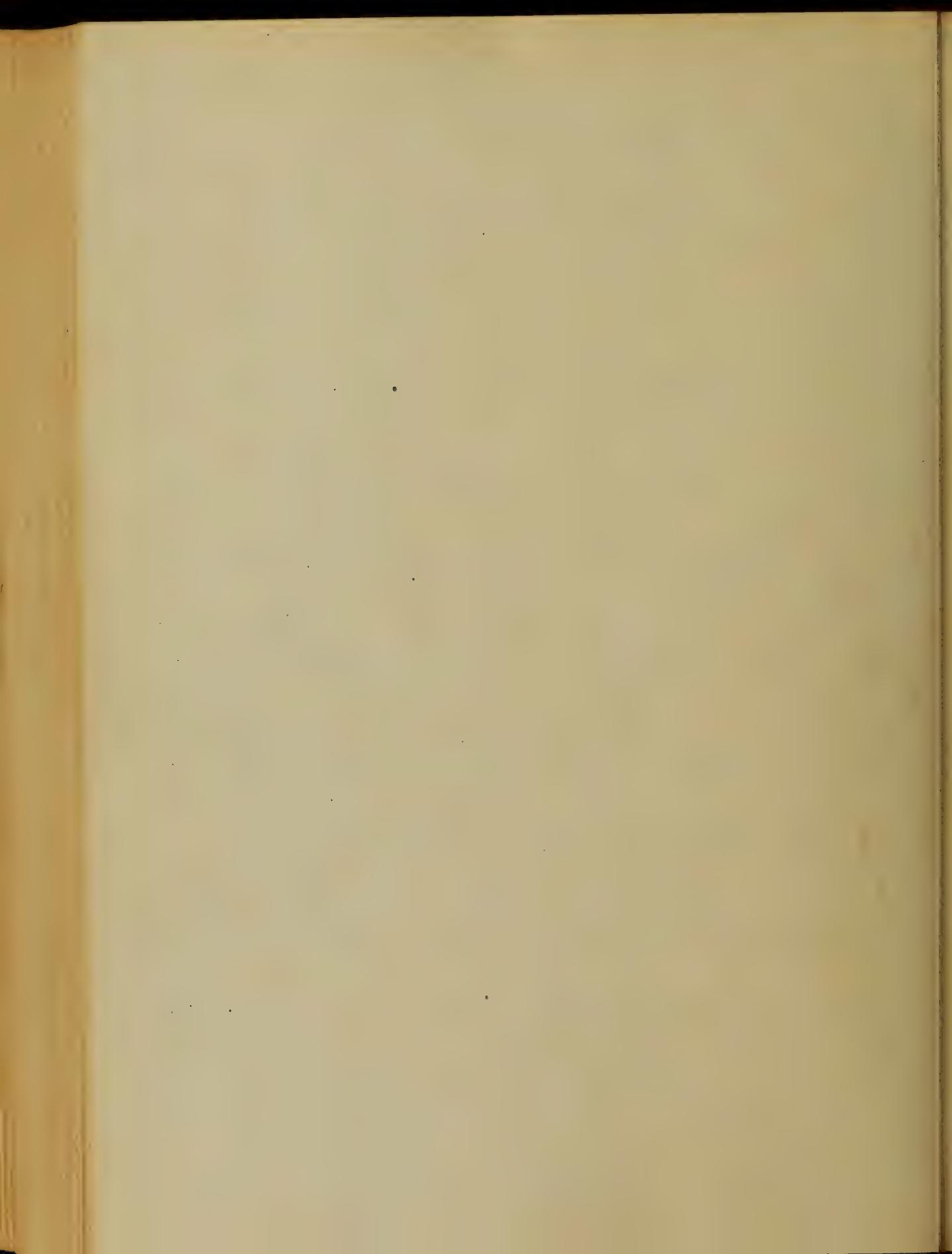
it is applied. When taken into the
mouth alcoholic drinks produce a feel
of warmth in the esophagus which is
more rapid than that produced by

heat in the heart and fleshing of

the body and a desire to



11



and will continue to do so.

and I am sorry to say, that he has

nothing to continue the control over

judgment is lost and latent feelings are

aroused, or rather those which are long

and creditable. Persons however are very

generally affected. Some are cheerful

and genial; others are gloomy

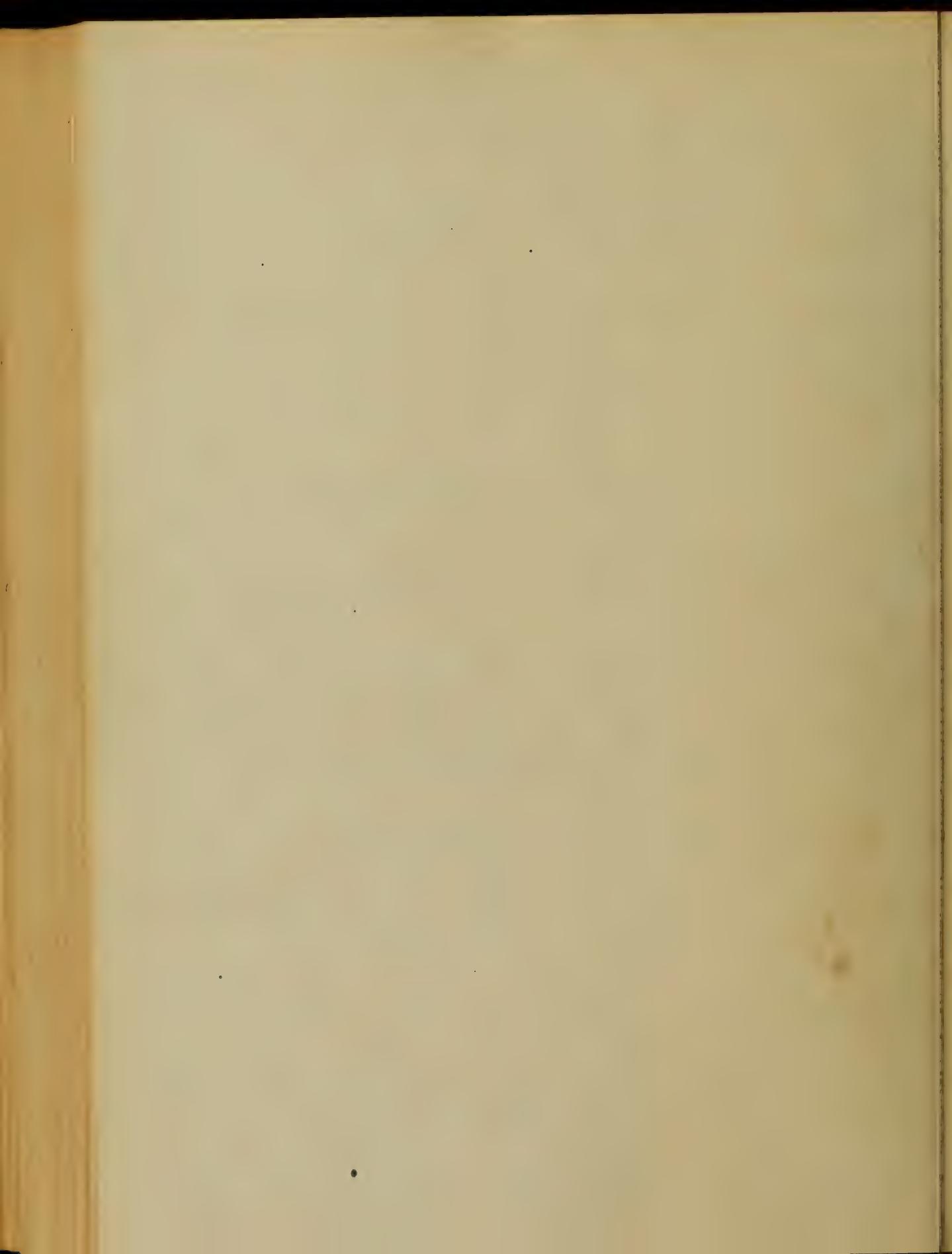
and sorrowful; others again huffy

and querulous and suspicious

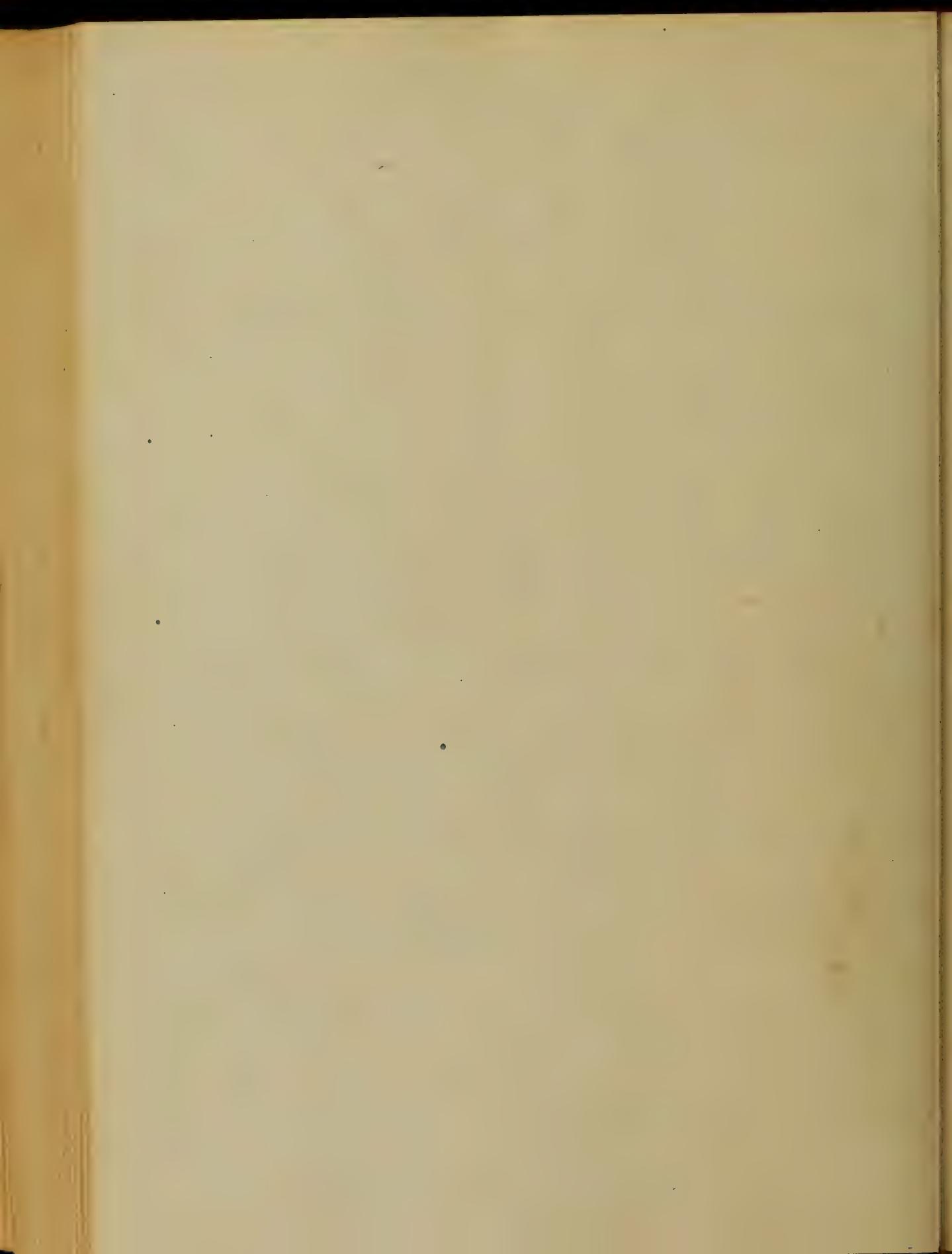
and querulous, and others are like the

old man of the wood - who at

first had the most sad results



The thoughts seem now to be - to be
scattered. The ideas become confused; fancies
areapt to collect & dominate others
so often occurs which often
is singular. It is in this state that the
animal feels itself to be threatened
by the hostile with which the animal is struck.
In the species of *Antilocapra* mentioned
the development has now come on - as in mammals
and the individual is struck, first one
of the eyes will be paralysed at this stage
and double vision is one of its well known
characteristics. This is the result of



silence. There is no noise or
disturbance. The secretion of urine is generally
discontinued and the sexual prop-

rietary is often suspended.

At the commencement of intemperance

the control of the will over the muscles is per-

haps impaired and after a time it is quite

lack of control over the body.

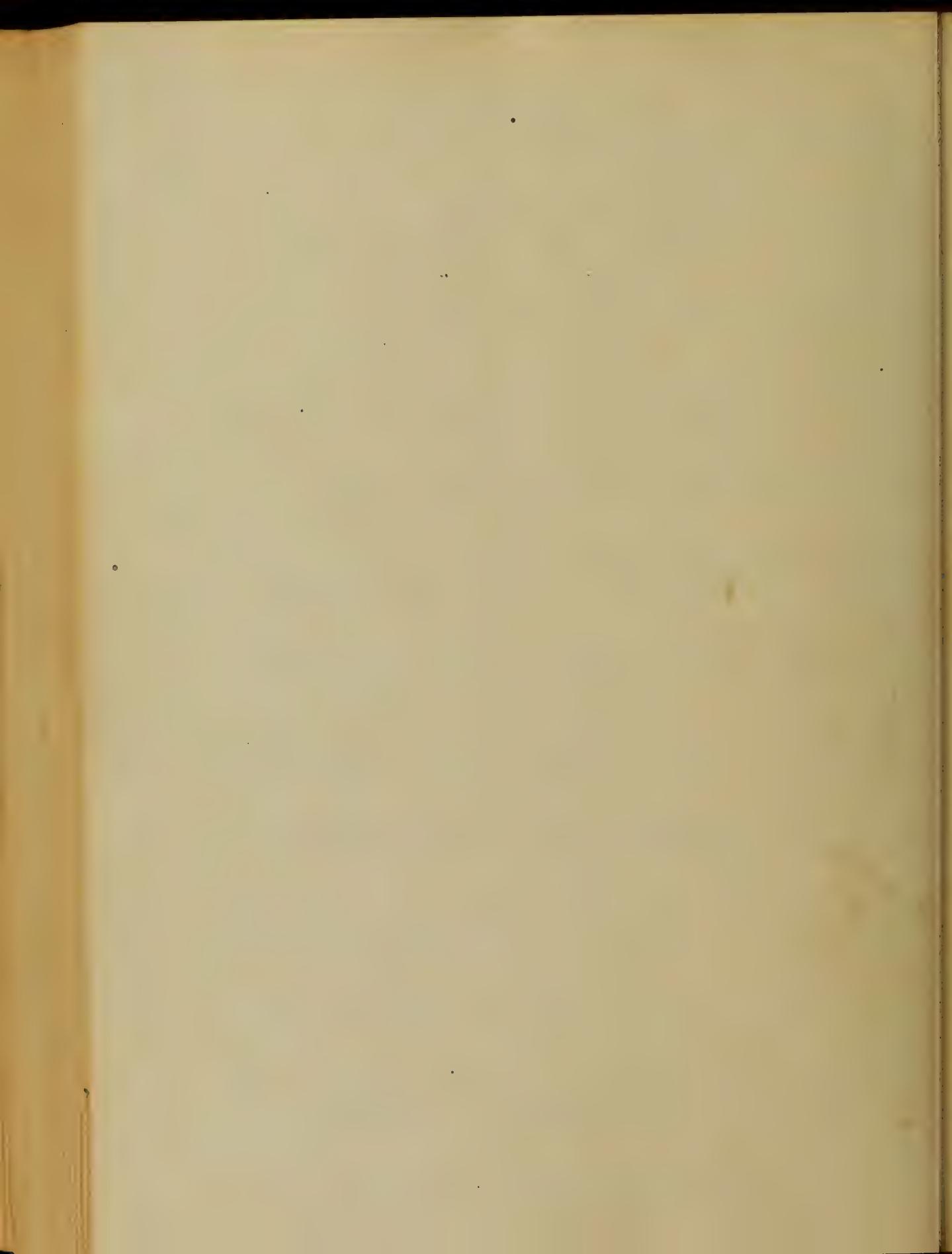
But the mind is not always so easily

plummeted. Any particular object or

act is commanded. Hence the playfulness of

the mind in the zigzag movements of

the body and other involuntary



With their heads at length the inmates

are led to sleep as falls into insensibility.

First, heaviness and vacuity of expression

comes. This is followed by a blushing

and sleep as a sort of coma follows.

The patient may

less completely, if not he is willing,

to be dead drunk. The pulse

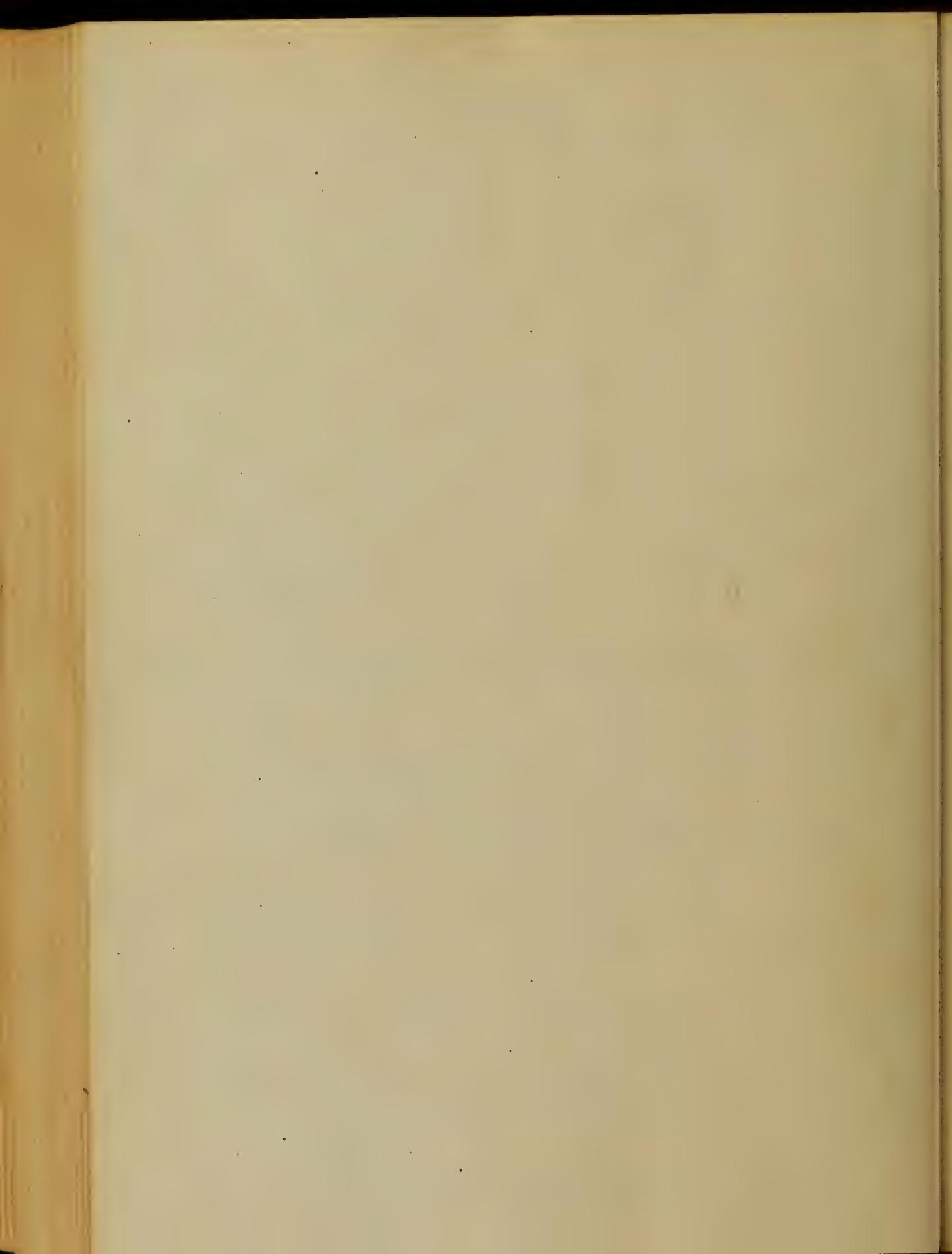
is slow. The heart is small and weak.

The skin pale and of a certain strength.

This is a characteristic confusion of the

mind, which is called the

short sleep six to ten hours, and



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Two days later, symptoms

reduced in number, lessened intensity,

sparingly. Cerebral perspiration taken before.

Morning & afternoons & last night.

General uneasiness, and feelings of languor and

depression; pulse feeble; skin cool and clammy.

and the 3d a week of opium; often nausea

and vomiting, clamminess of the mouth, and

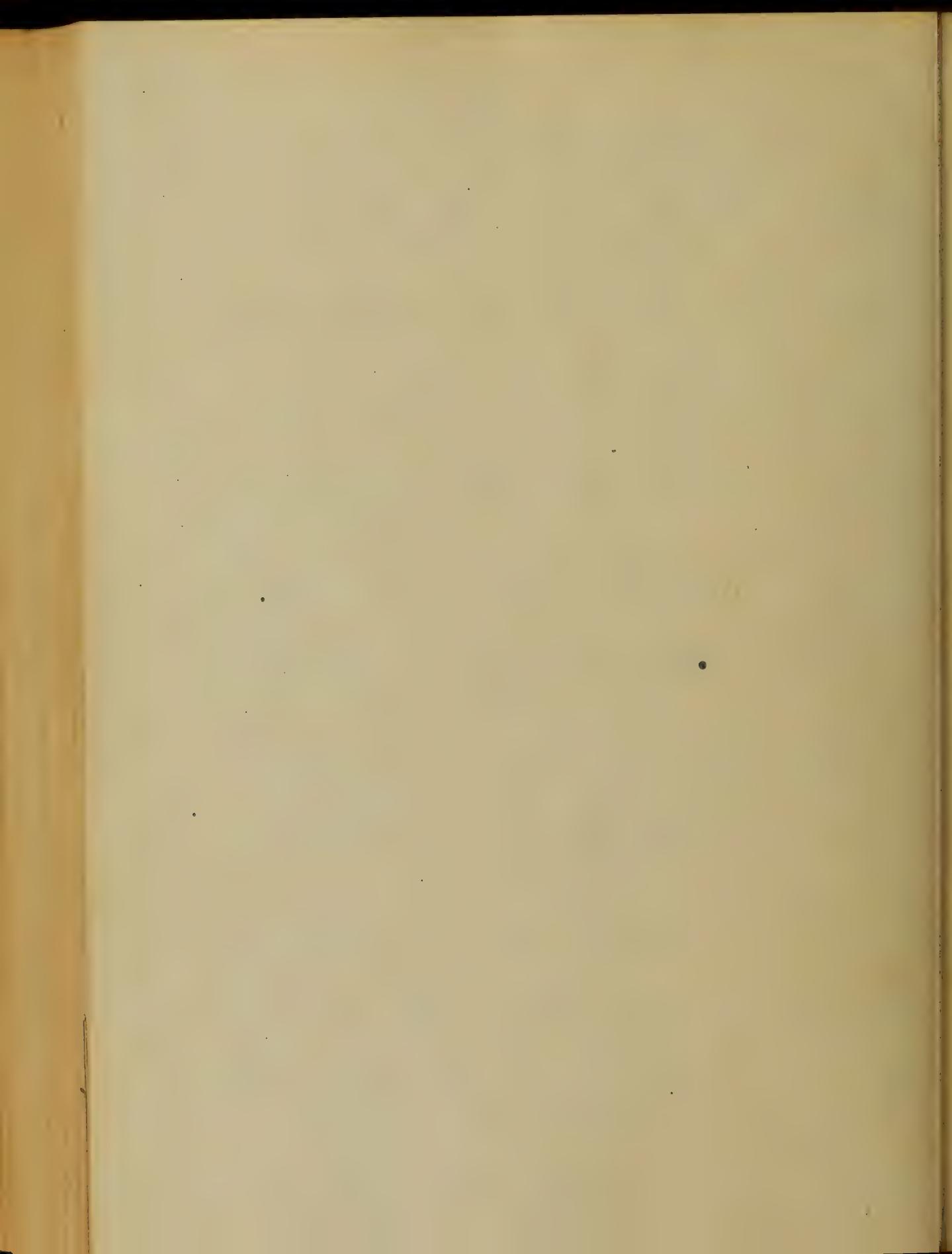
extreme depression of spirits.

Following their great exertment, the

patients became more fatigued

the influence of cool water, fresh air, and

other external influences.



effluvia receives its

day or two

by remains except

nests etc.

desertation. Sometimes instead of the phenomena

the above preceded, nausea and vomiting

comes on at some period in the progress of the

disease, and the further development of the

malady is to be noted. They last 1 or 2 days

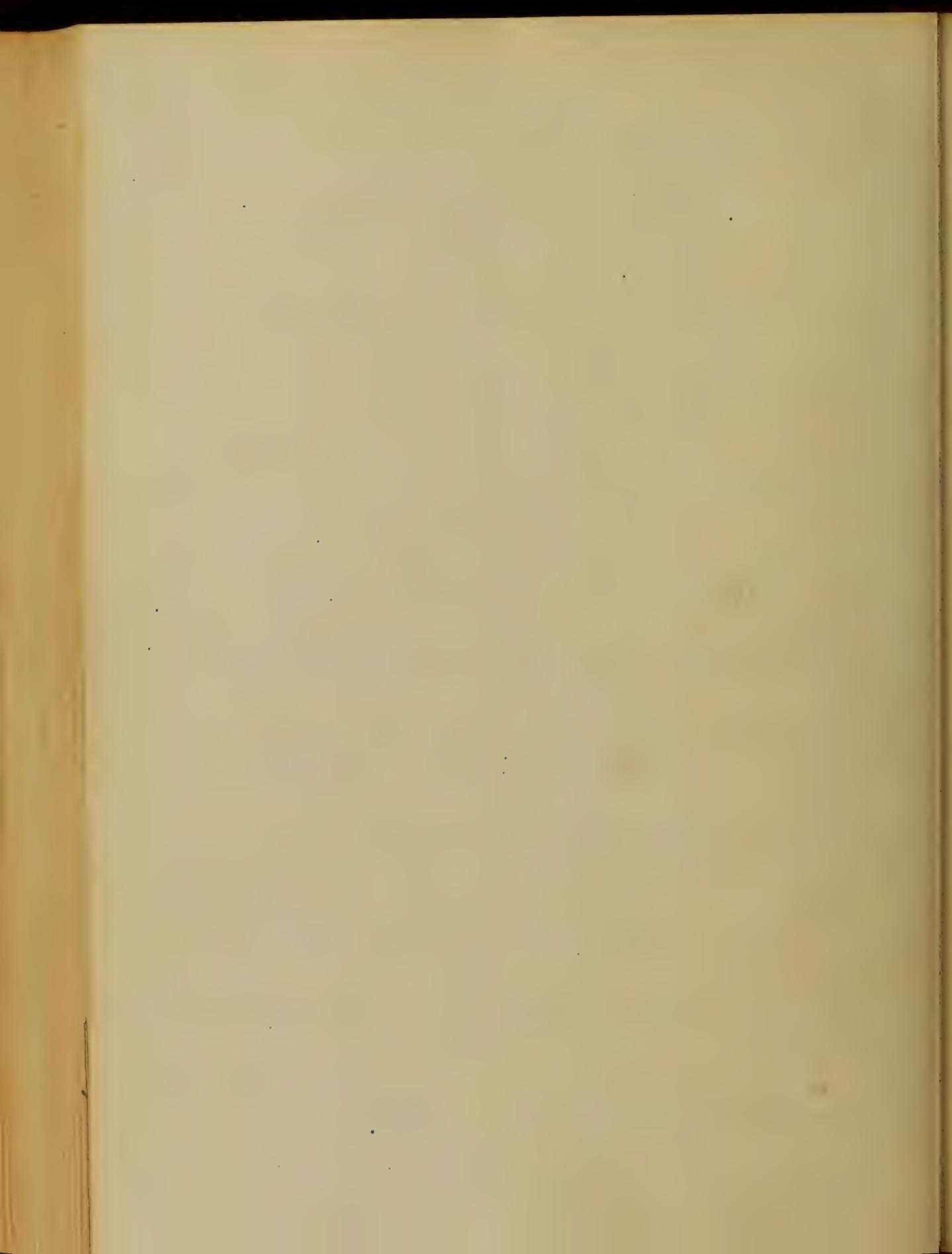
and pass off the 3rd if the disease is not

An intestinal typhoidal condition

does not add contribute to the material, or

the force of the reconvalescence, or only excites

one of its organs to exhaustion action



The office of able and learned

quisitions I venture merely the general

I am to do nothing more than

mention to the Committee, under the

offices of the administration. When there is

any difficulty or inefficiency of the

existing organization, the same will be

the Hydrogen & Oxygen

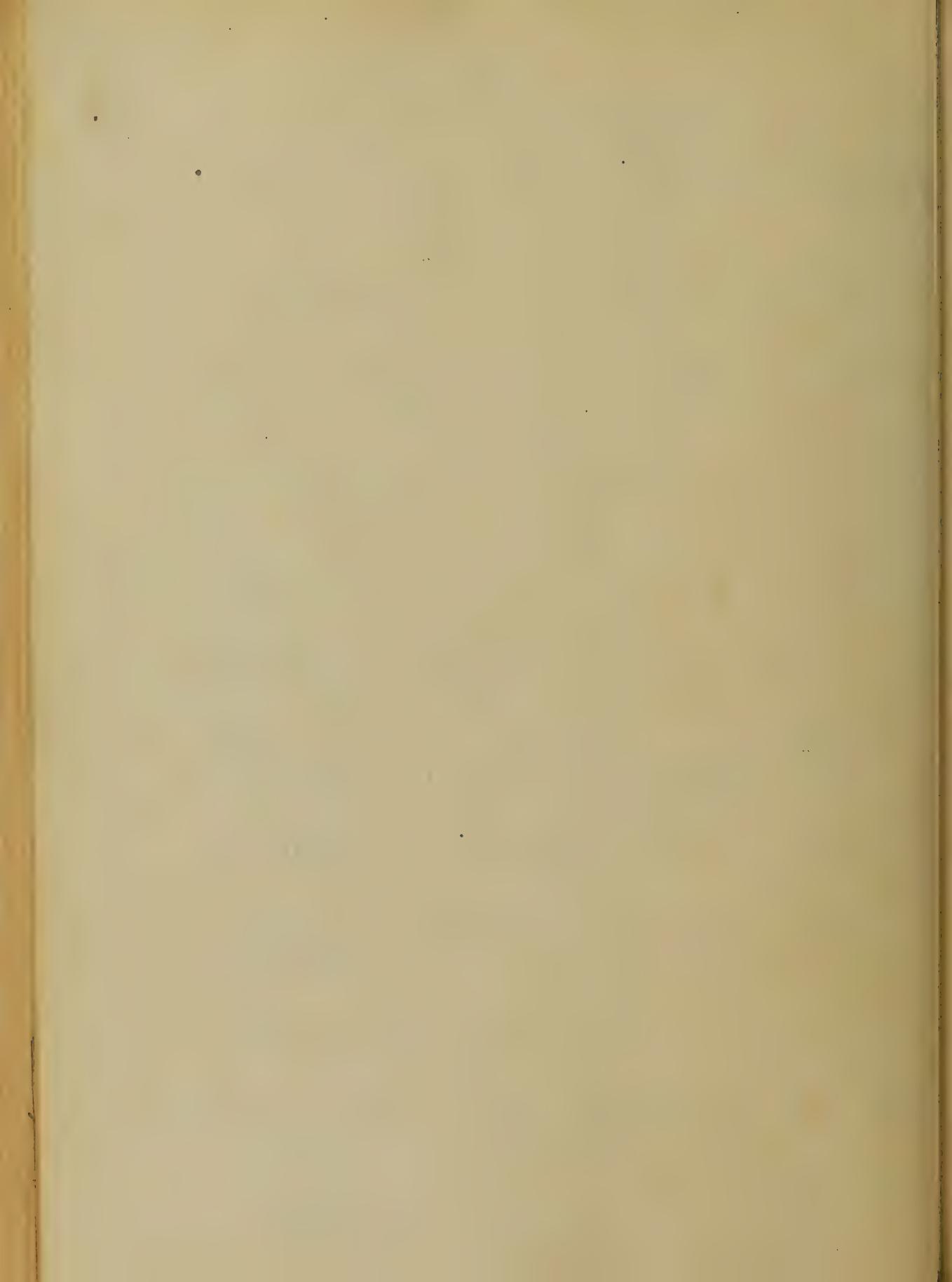
will be issued at least.

The alcohol may sustain the plague

and in it, they can't do

more as with the interperable & excited

which were written in the next motor. For



then the animal becomes

more fit of material its

less degenerated. In a word there's necessary

for a happy and. Other unnecessary as in

well both the alcohol is injurious to the body

as well as to the quantity used, and the animal

will die in disease, that's really good.

and especially alcoholic stimulants

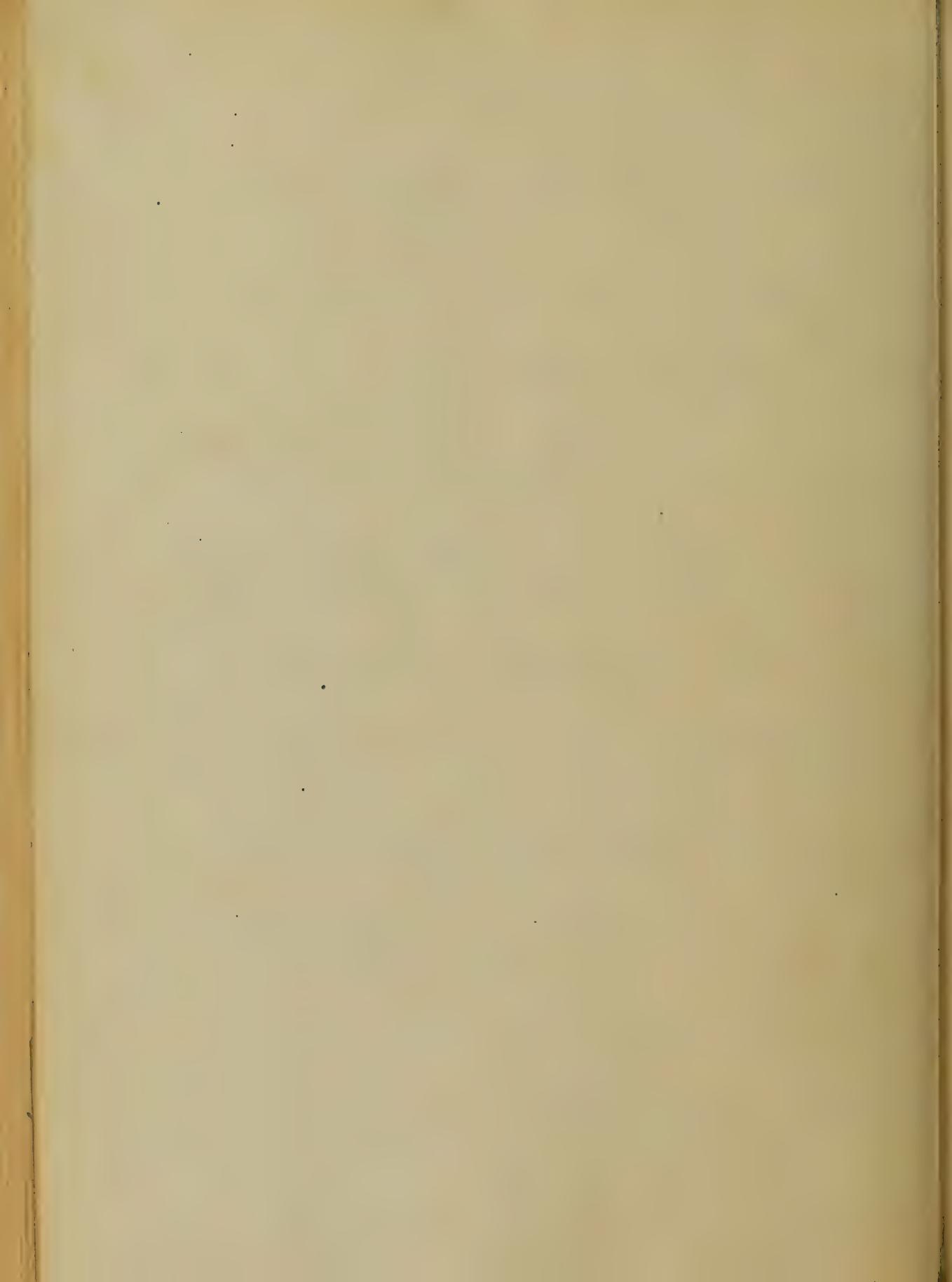
will never be taken in quantity, which

produces either fatigued or cerebro-nervous

disturbance or super excitation.

If this rule be observed not only will it

be a durable superfluous agent in this disease



and other medicines

vorbid thirst for

able disease

on this principle, it is very liable

to occur in cases of ordinary debility, or
unstable disease, continuing, especially

in old age. Alcohol in advanced or
evening consumption, in less fever and

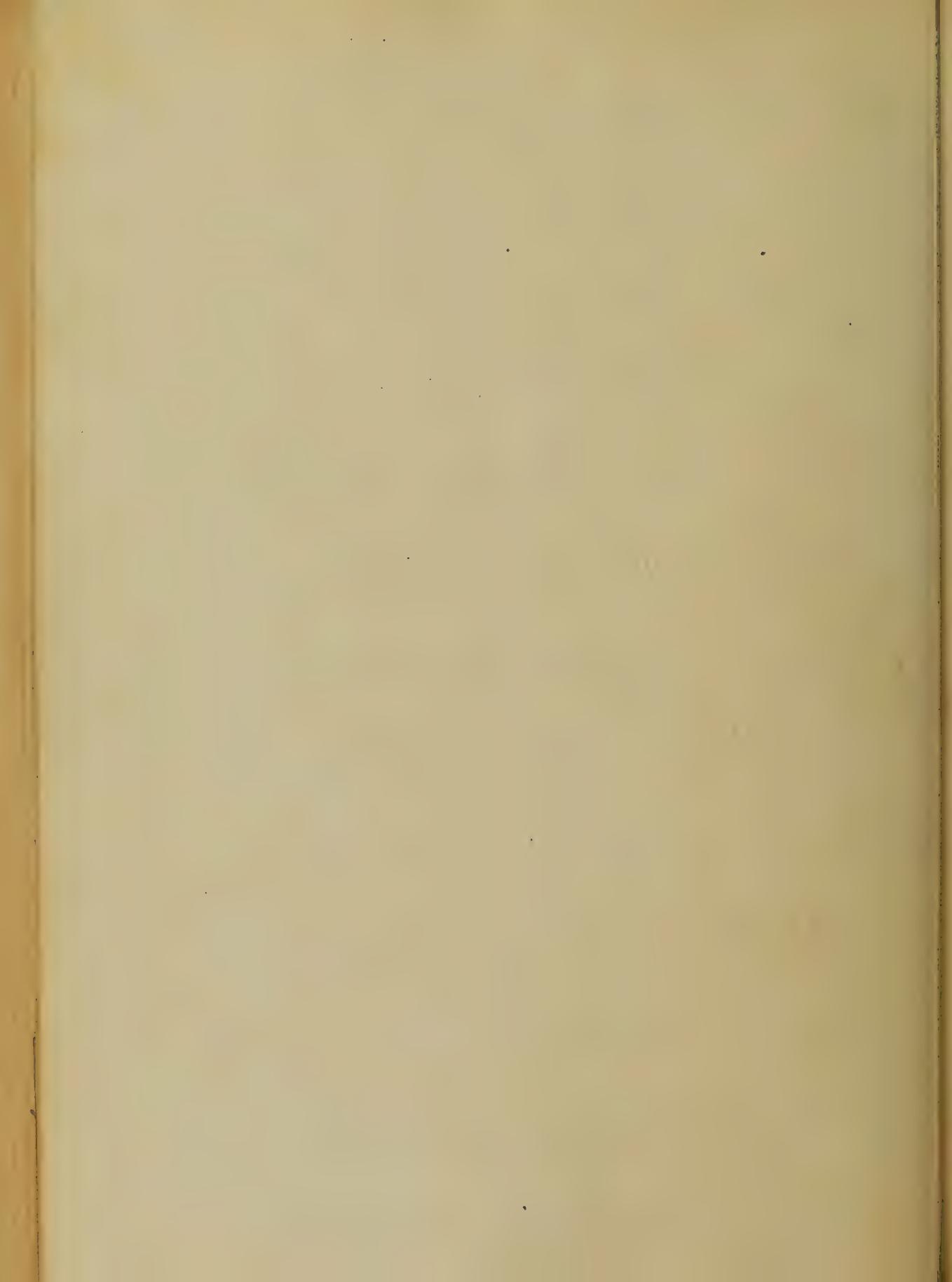
in the analogous case, when used in

the above time, is useful: Firstly, its di-

stinct supporting power. Second, its use

in the enfeebled stomach, to digest a large

bulk of food. Third, by leading to a



28

True acute borbheüs.

is & poisoning by Alcohol.

Not every intoxication is due to
alcohol, either from a temporary debauch

or other than a temporary debauch

or the habit of drinking alcohol.

It must however consider as falling

under First & shall treat of the acute

and second of the chronic poisoning;

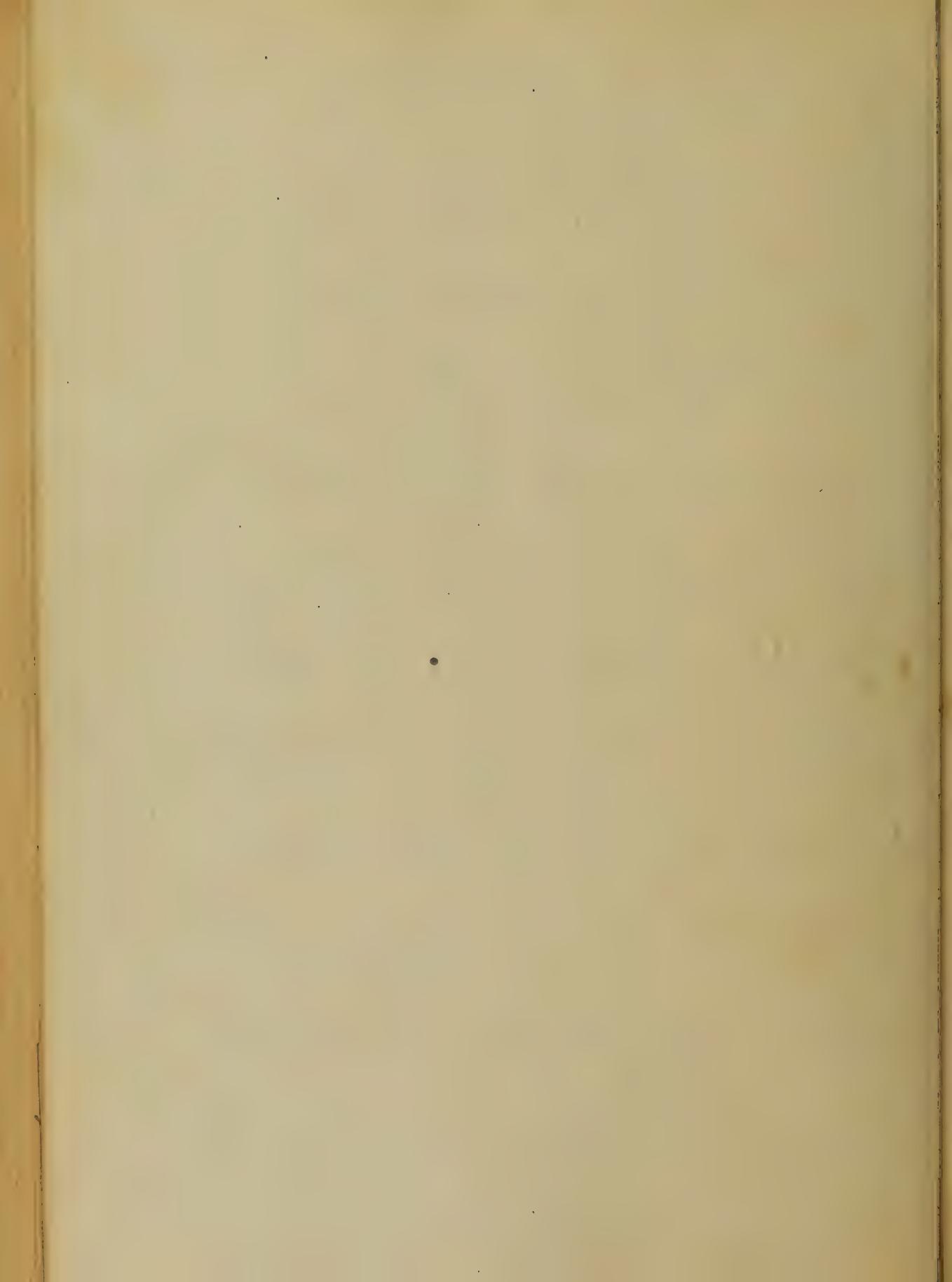
acute alcohol poisoning is that in which

it is produced by large quantities of

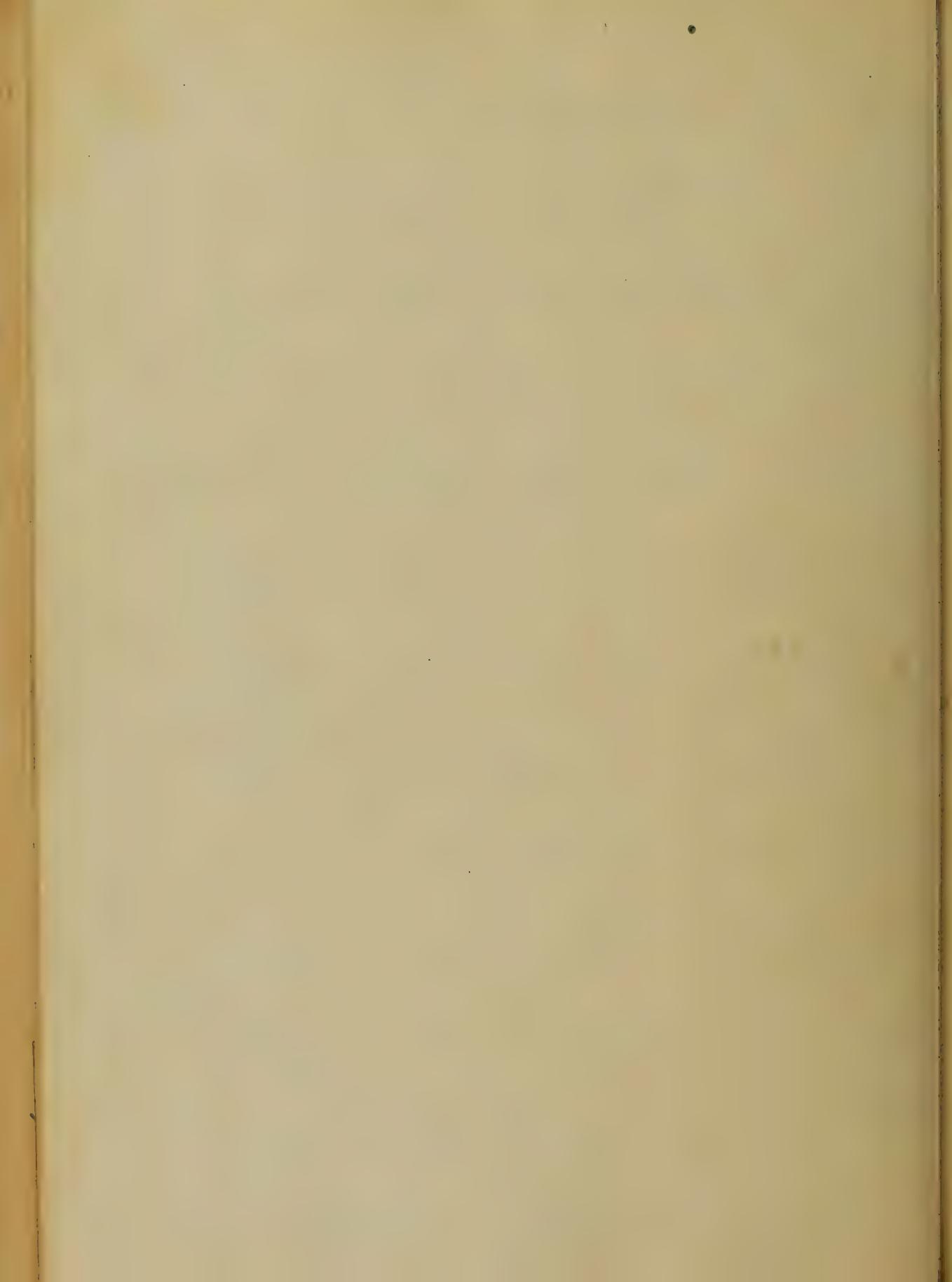
the stimulant being taken at once, or in

successive doses at short intervals &

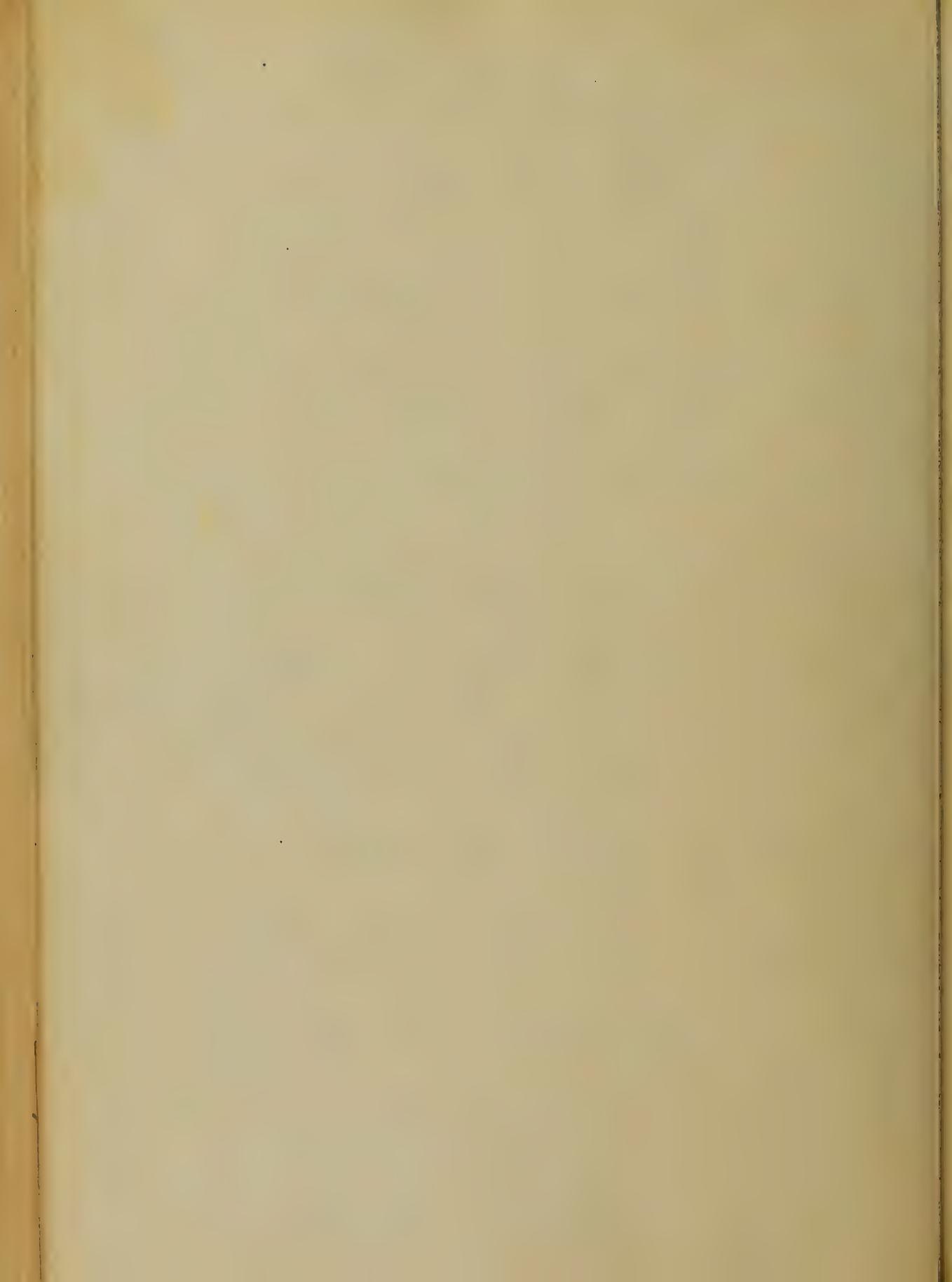
that the morbid effects are felt at once.



since time. Sometimes in such cases
there is almost instantaneous, the fact
is that in such cases death occurs from
an overwhelming circumsion in the stomach
involving the brain sympathetically and that
the symptoms are those of syncope, & death
in the field. But such instances of this
are very rare. Generally there is a
little excitement followed shortly by
which when the result is fatal, death
takes place at a period varying from a few
hours to days. The syncope is
considered to be the cause.

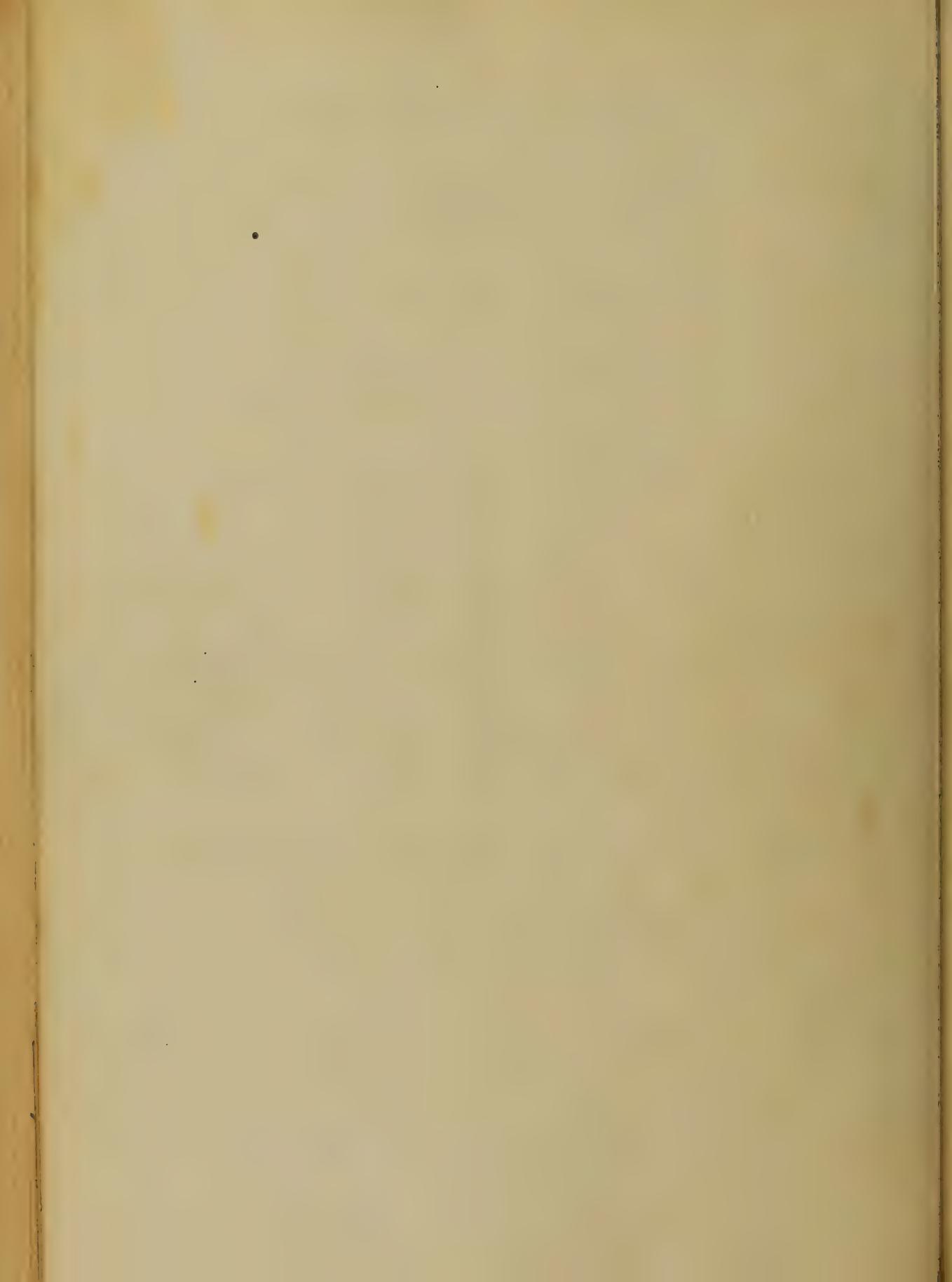


the disease will be of short duration and
the hæmorrhage will be rapid and
profuse. This may occur even when
it is confined to this affection. In such cases
the hemorrhage may be sudden and profuse
and may produce this effect by determining
either to the brain or the result of the
stroke into the brain, it causes a sudden
congestion of the organs, and sometimes
so sudden a dangerous effusion takes place,
the patient may recover from either of
these conditions; but in the latter paralysie
is generally associated with the hæmorrhage.



and may produce by the con-
duction of inflammation of the brain
the meninges. This condition is the
first stage of the disease. The
second stage consists of the convulsions
or convulsions. However, at the second
stage there are delirious convulsions,
the contraction of the flexors muscles and
the extension of the extensors, the
laminating and bleaching of the skin, the
dissolution of the mucous membranes.

This condition of things however, is most
of the incurable from a continued debauch



it visualized as a state of chronic

and drowsiness.

and a ~~bad~~ ^{bad} position

It is a very dangerous condition.

The patient may die of it after sinking

into a state resembling Syphilitic dementia.

in one month.

Still another mode of poisoning is by

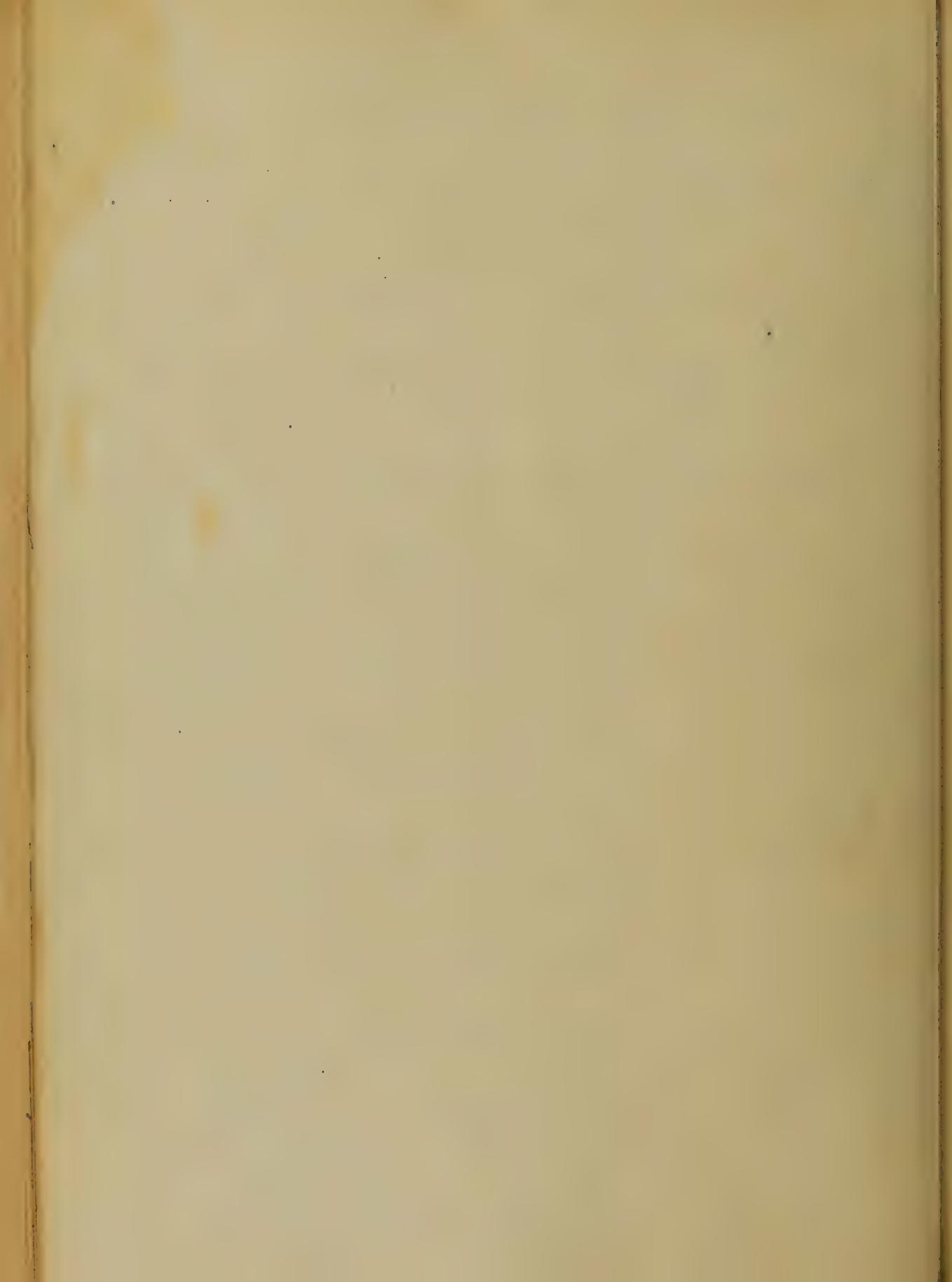
over-ingestion of the

minerals, alcohol which should

never enter in small quantities tends to

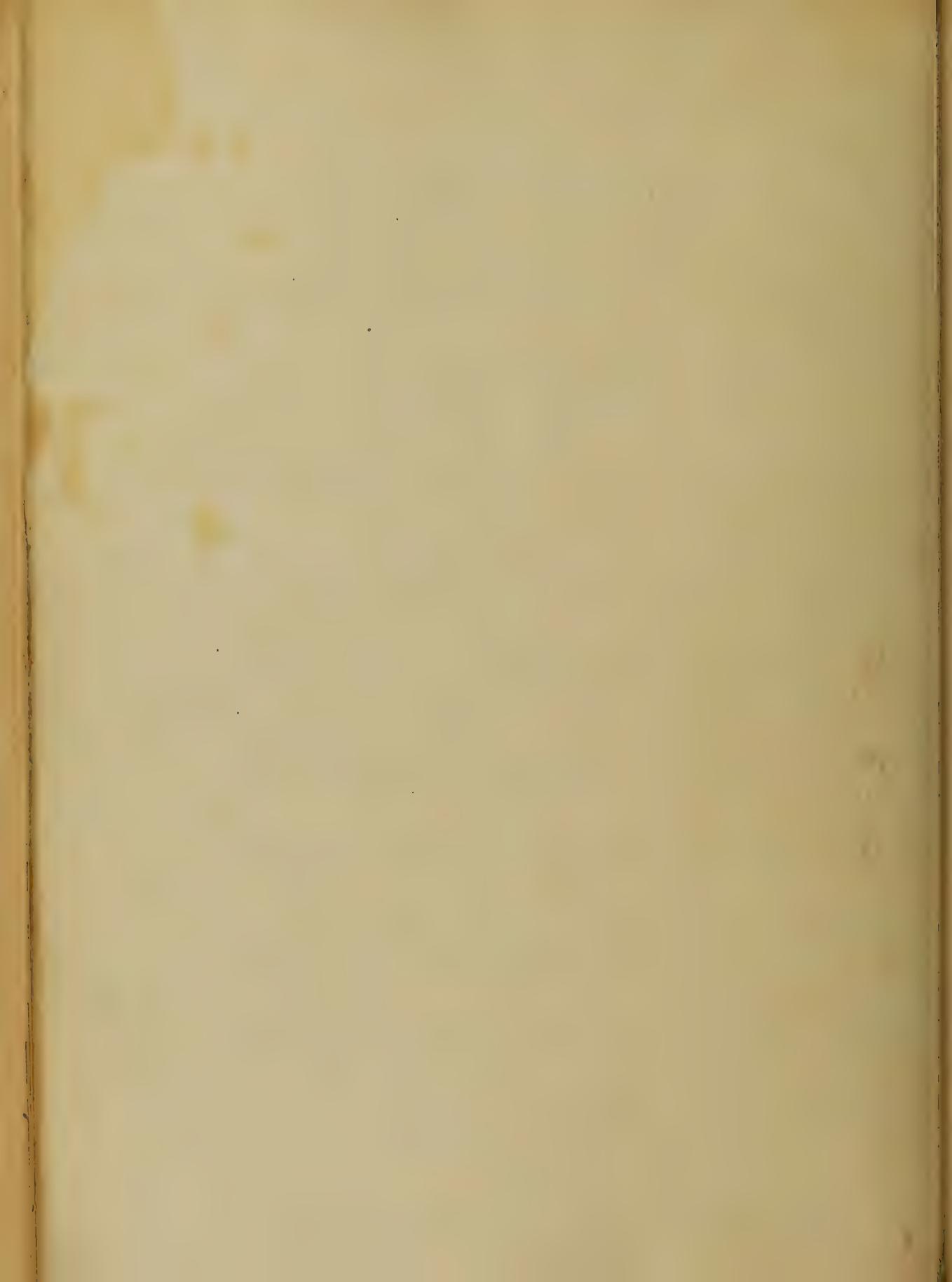
overload the system, and if persisted

in would lead to chronic poisoning, and



It is this practice of alcohol,
the system more susceptible to disease
and less able to sustain it. The author
The effects of alcohol on the system
are now well known & all who
it be avoided are not to be surprised
with their short & death like vis-
uals are as a painful lesson to
mankind & eternal. Of him who indulges
in freely. Their works for the Kingdom
will be small, taking & his dominions
will meet a speedy & total judgment.

As per my dictated



AN
Inaugural Dissertation
ON
Pathesis Pulmonis.
Submitted to the Examination
OF THE
Provost, Regents and Faculty
OF
PHYSIC,
OF THE
UNIVERSITY OF MARYLAND,
FOR THE DEGREE OF
DOCTOR OF MEDICINE,

By
Cyrus McCormick
of
Clarke Co. Va

Session of 1867-1868-

Pulthisis Pulmonalis

I have chosen for my "Thesis"
"Pulthisis" & disease which is common-

ly known as "Consumption". In fact

Pulmonary Consumption. Tuberculous

Consumption. & Phthisis Pulmonalis are

synonymous terms. The word Phthisis means

a wasting away. Hence the common name

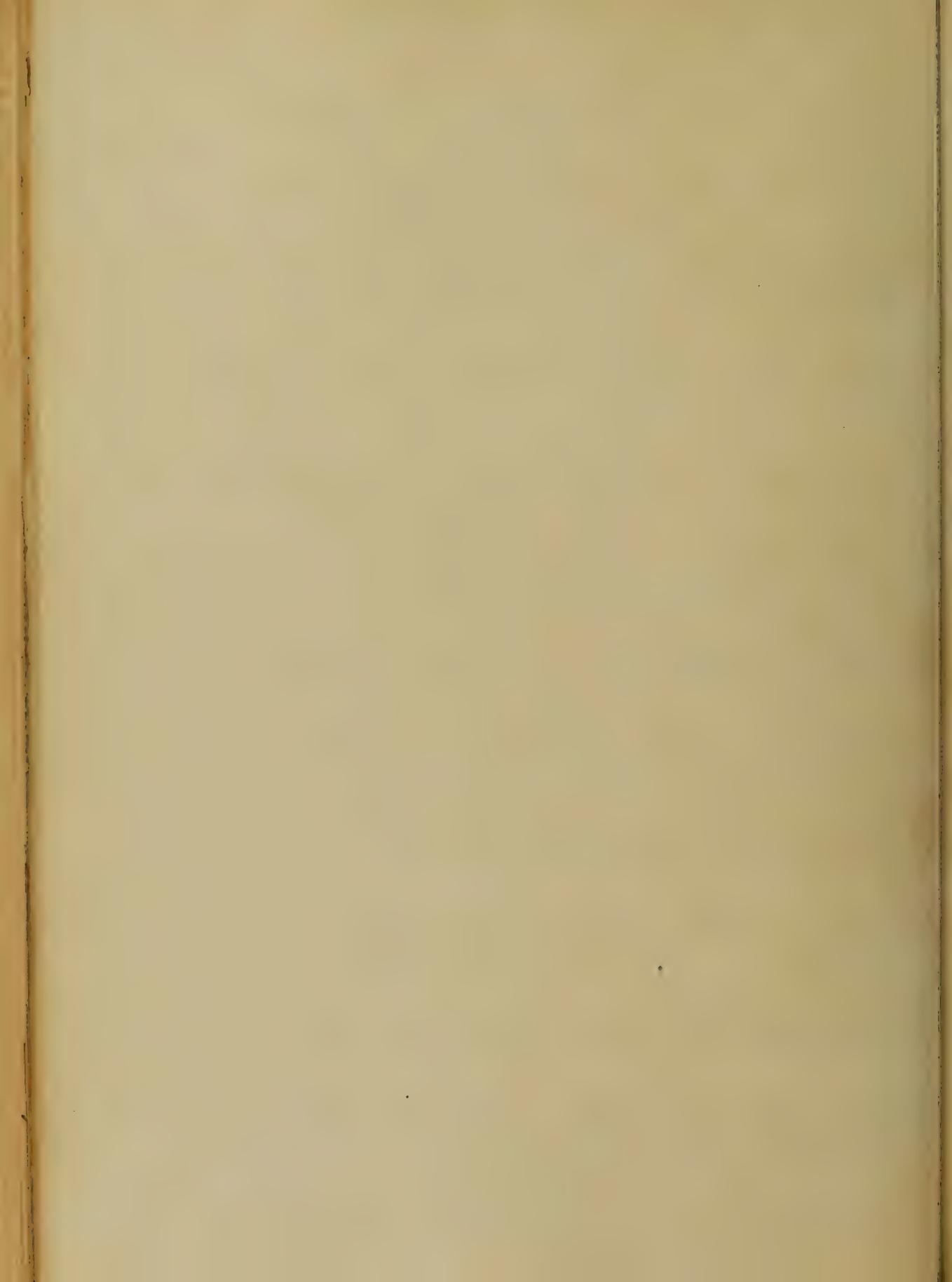
"Consumption." but lately it has been re-

stricted to that species of disease dis-

ease in wh' the lungs are the part pre-

minently affected - I do not mean to say

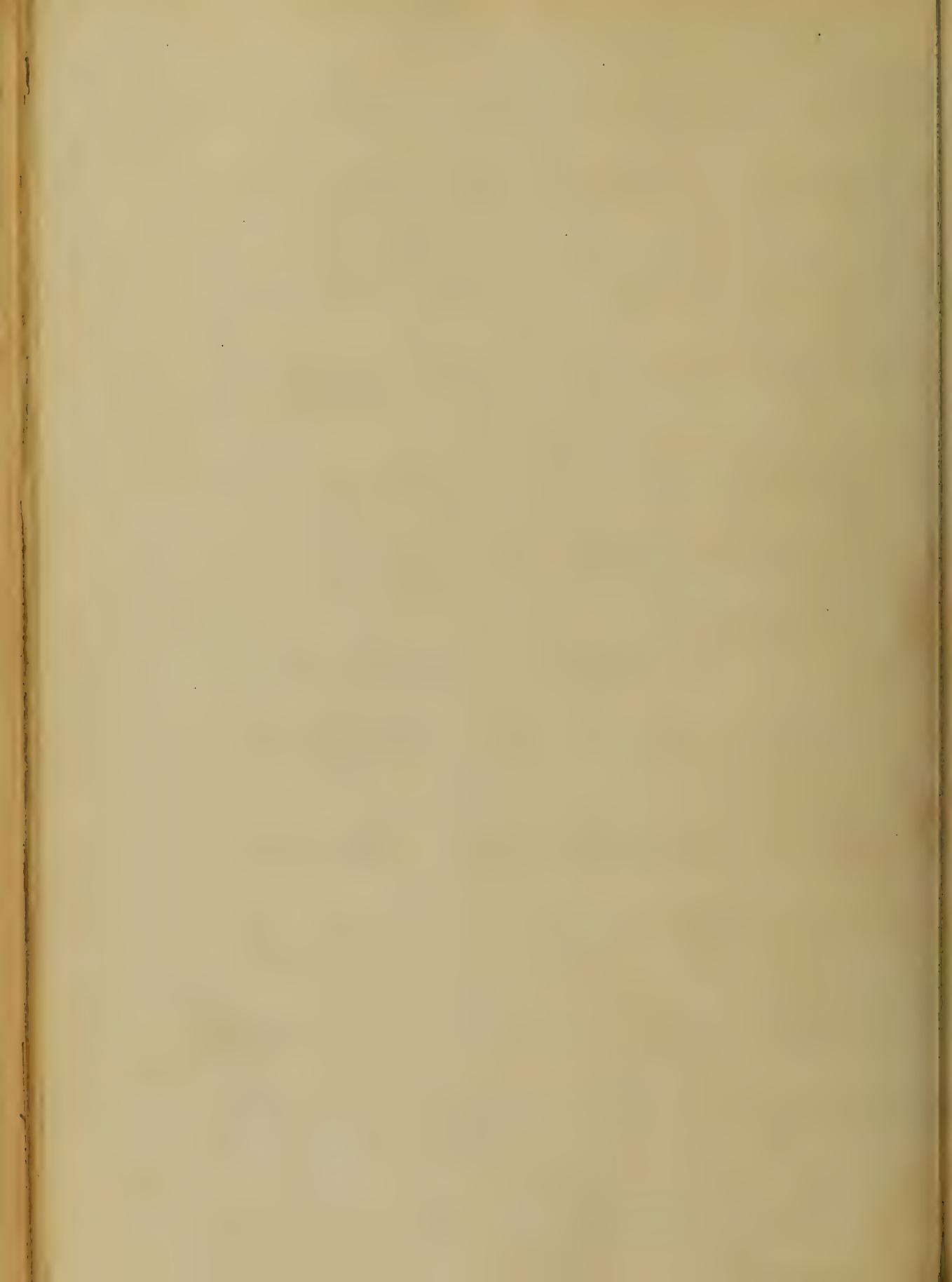
however it is confined to the lungs for



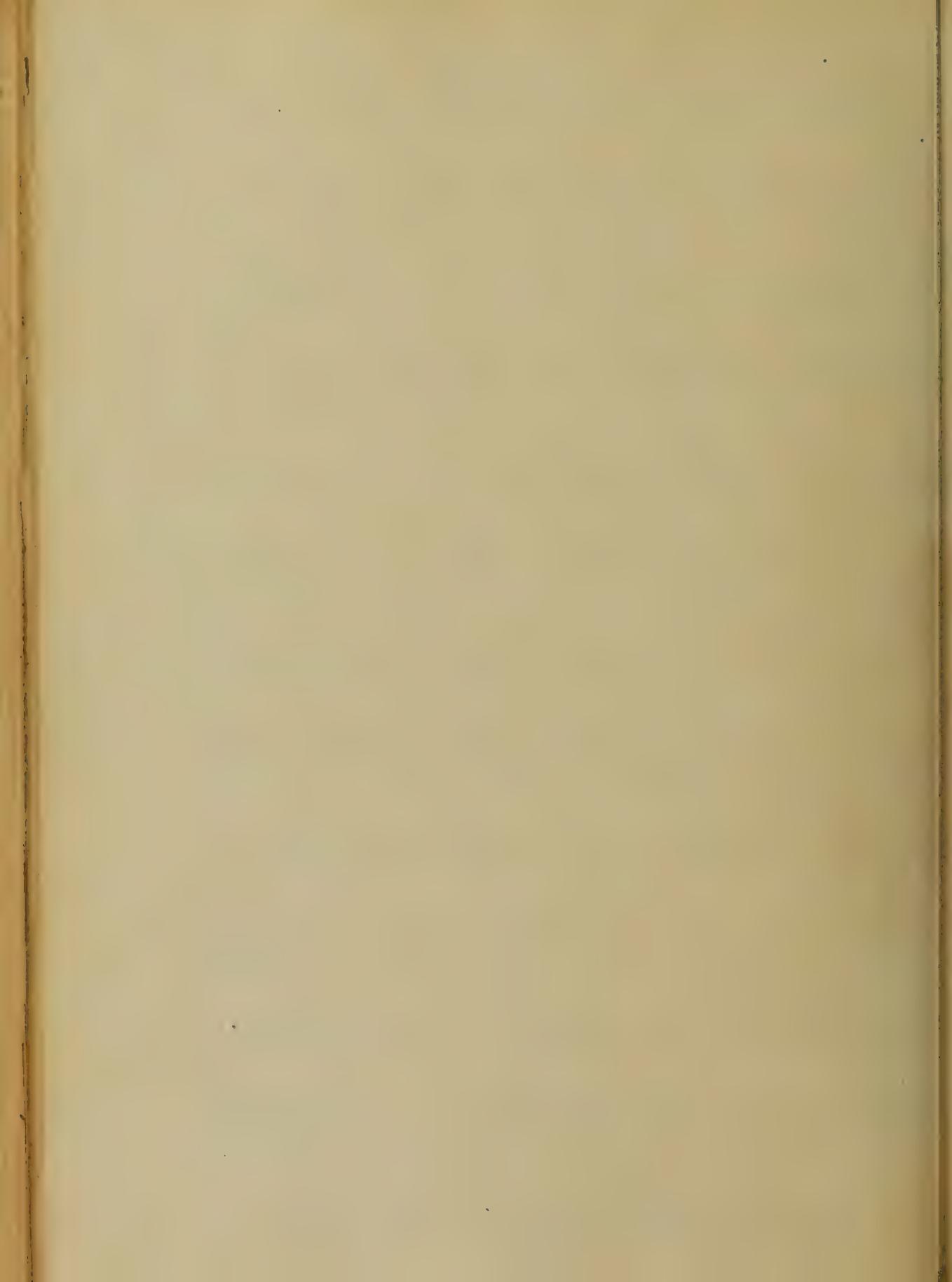
One & all will agree with me that it is simply a form of a malady which affects the whole constitution, but the lungs is the first part of the body that experiences its bad effects. The majority of the profession are men of mind. This is as the distinction between the tuberculous complaint.

"Once put him sloe, that com-
municative persons have of scro-
fulous distempers

(Phasomical characters). The first
process of the disease is to deposit in
the lungs matter of tuberculous

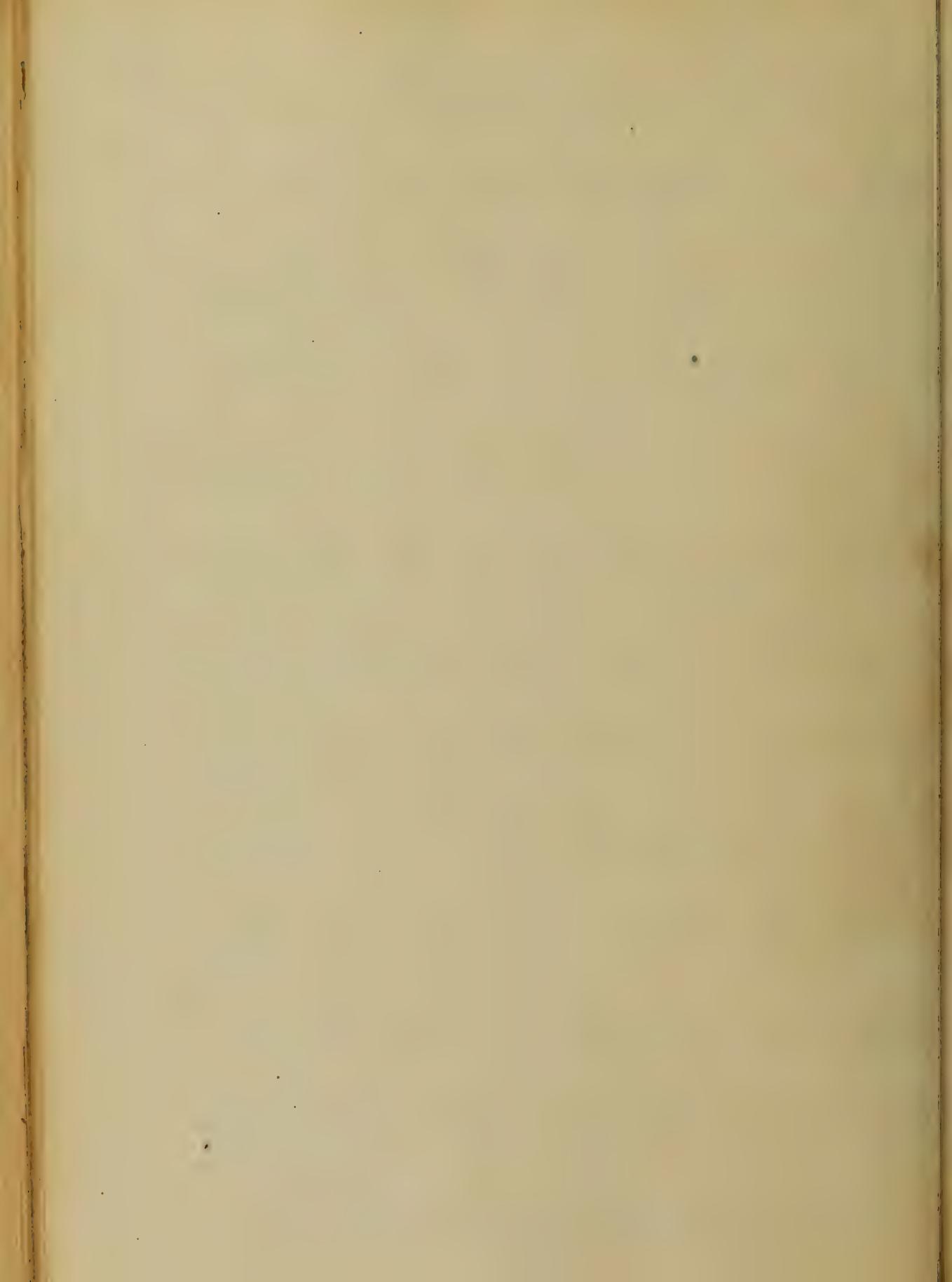


kind - tubercles are composed
of various sized matter which
depends from the blood. They
are of a yellowish color - of one
piece & of about the firmness
consistency of cheese. This matter
is generally deposited on the
free surface of mucous membranes
sometimes among cellular spaces.
They are generally of round shape
though their form depends entirely
upon the fiber in wh^t they
are deposited. According

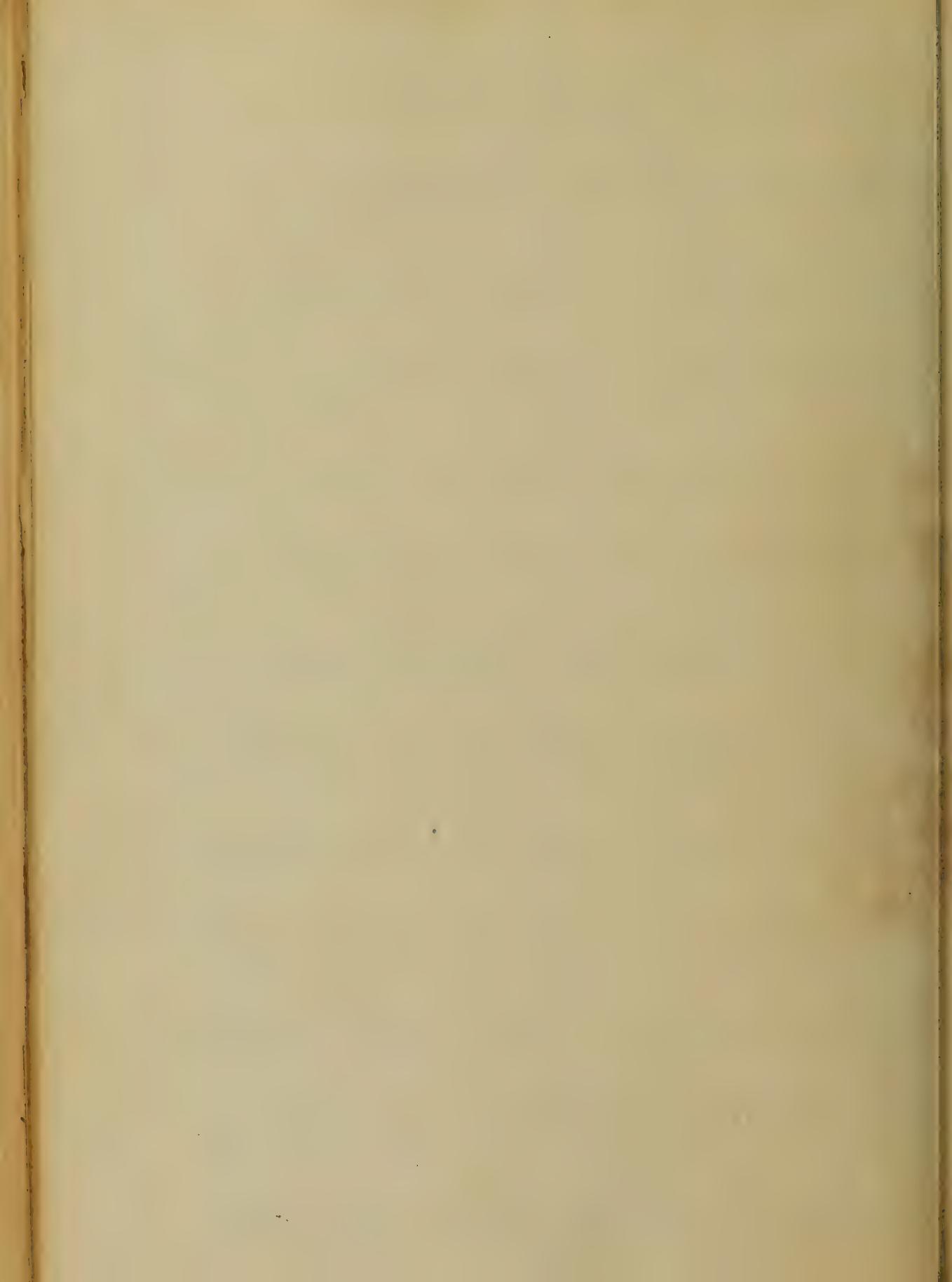


(4)

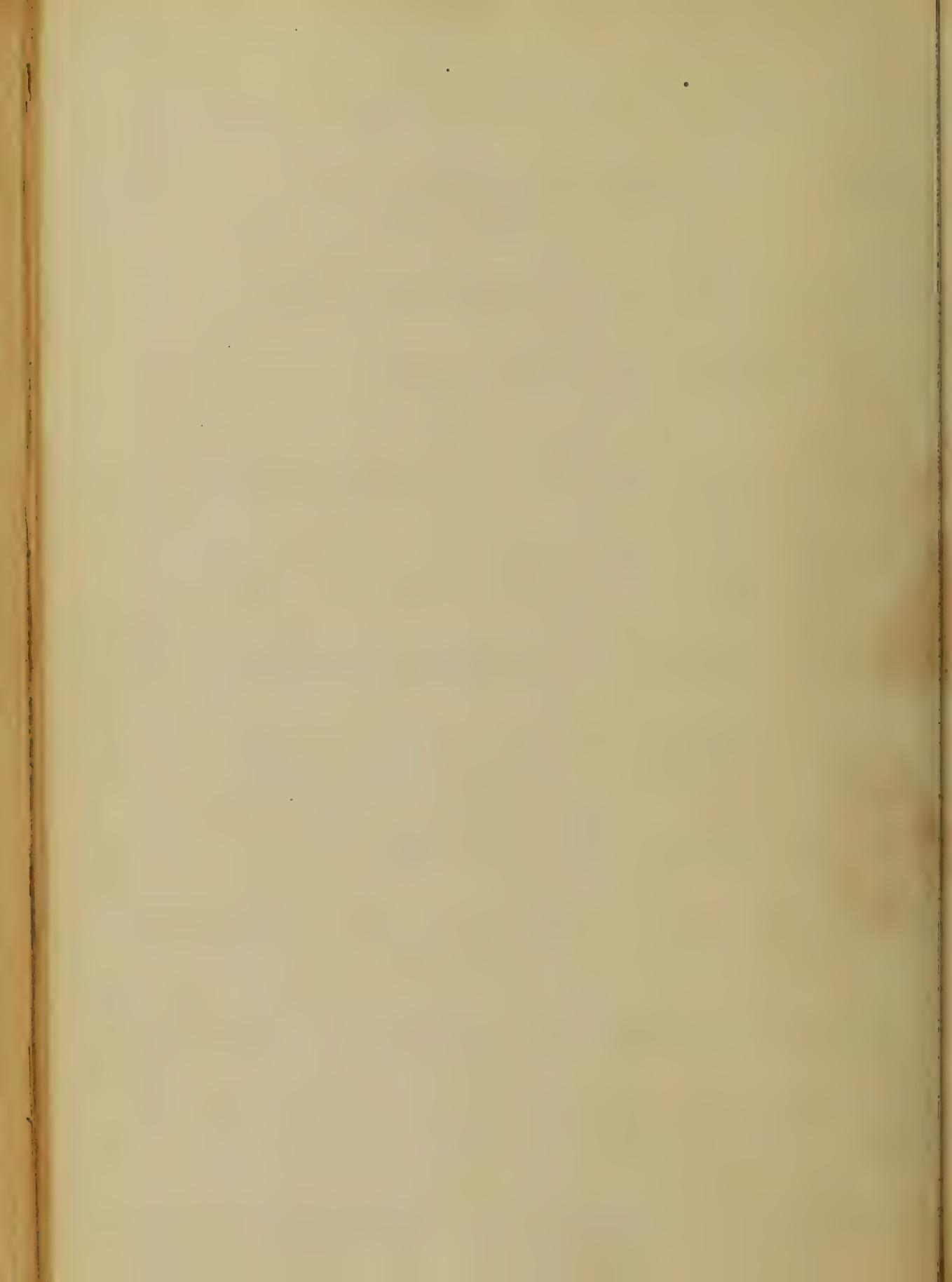
"Cured" - after they have assumed a solid form there can be no alteration except through the heat in contact with it. Beside this species of tubercles often find small, semi-transparent bluish frog granules. These are "miliary tubercles" - The acute tubercle is the result of the transformation of the miliary. The glands gradually increase by new ramifications - even quite modern. It is about as large as after its extremities



from the size of a linseed to a
Lentil egg - the next change in
the tubercles is that it begins to soft-
ten - wh: generally begins in the
center & then soon gradually
thickens & extends till the whole of
it is converted into a soft pulpa-
ceous mass - something like putty - this
substance by a process of solution in the
surrounding texture is gradually吸收ed
up - & expectorated. Schmid have said
before that these tubercles are genera-
ally formed in the upper & back parts

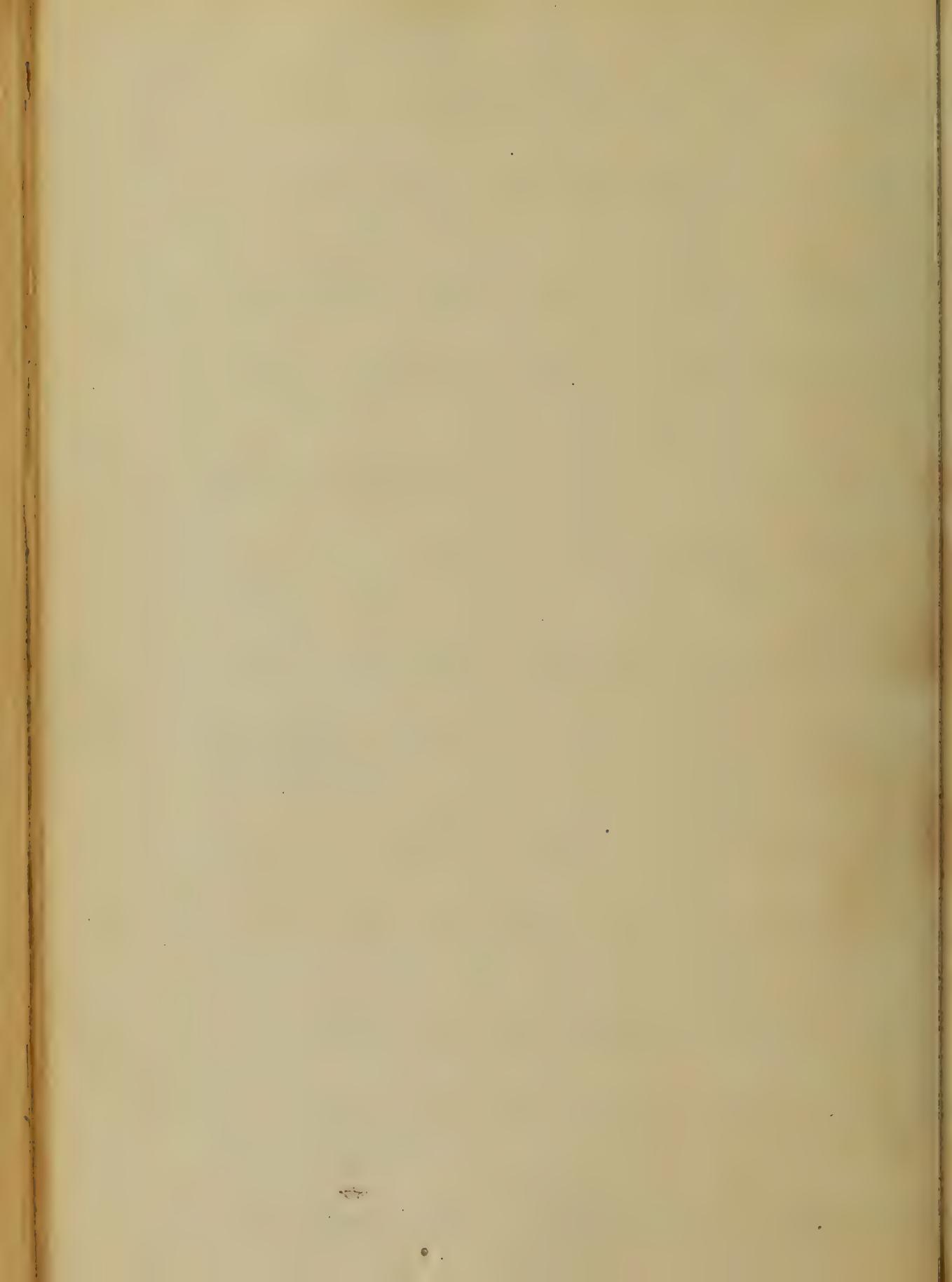


of the ulser i. e. bee - It is very
rare & an expected - after wh.
there is a cavity formed wh' is
technicall called a Vomica. The
number & magnitude of the Vomica
gradually diminish from above
downward. The left lung is pa-
rease. The first more than op-
erated than the right -ough to be
mug be operated at the same time though
in unequal degrees. It seems to have
a preference for the left - This
Vomica vary in size as do the



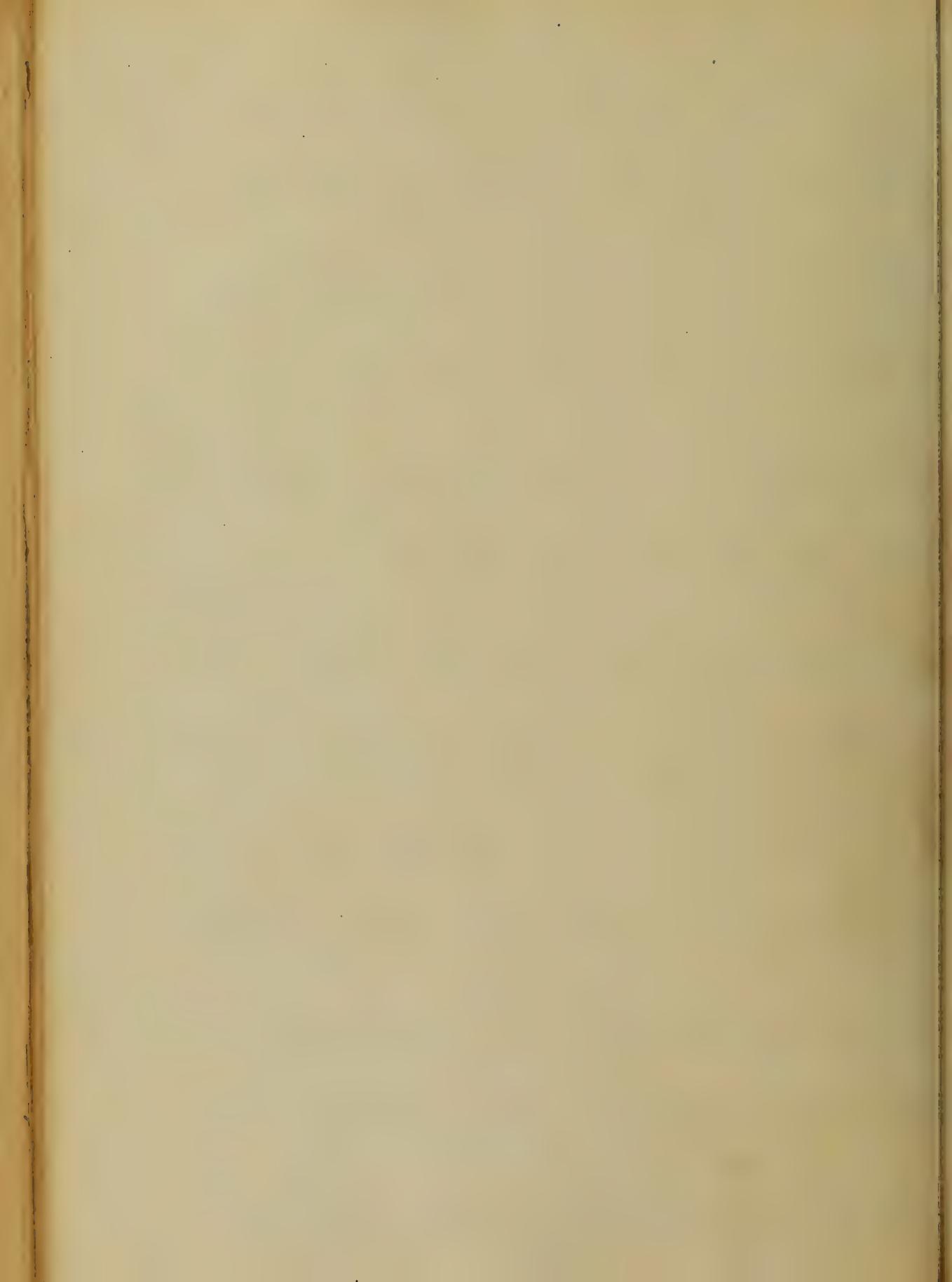
sinus from a fissile lead to a sinus egg - Wilson says "sometimes the whole upper lobe is converted into a bag of this kind, but that three cavities are never wanting in the lower lobe"

Because of several formations they irregular & are often divided into chambers by imperfect partitions. There is always one & perhaps several bronchial tubes sinking into the cavity. but never or very seldom a blood vessel & when they do their blood seeps out inflammous. When this occurs



(8)

Singly and are supplied of their contents, they may become oblique & if this occurs there will remain a cicatrix - Again the morbid fluid may be absorbed & the salts may remain. the whole then is converted into a chaffy mass which may be coughed up or being partially it may remain in the lungs. Occasionally a blood vessel is laid open & there may result a fatal hemorrhage - When the tubercles are numerous and when they lie near the surface the plume of the lung adheres to the sides.



(8)

The bronchitis is now or ~~is~~ inflamed in

the advanced stages of the disease - espe-

cially those that communicate with the tubes.

ulcers ~~contg~~ - occasionally numerous minute

ulcers may be seen upon their mucous surfaces

These are however more frequent in the trachea.

The bronchial glands are frequently en-

larged & loaded with tubercular deposits.

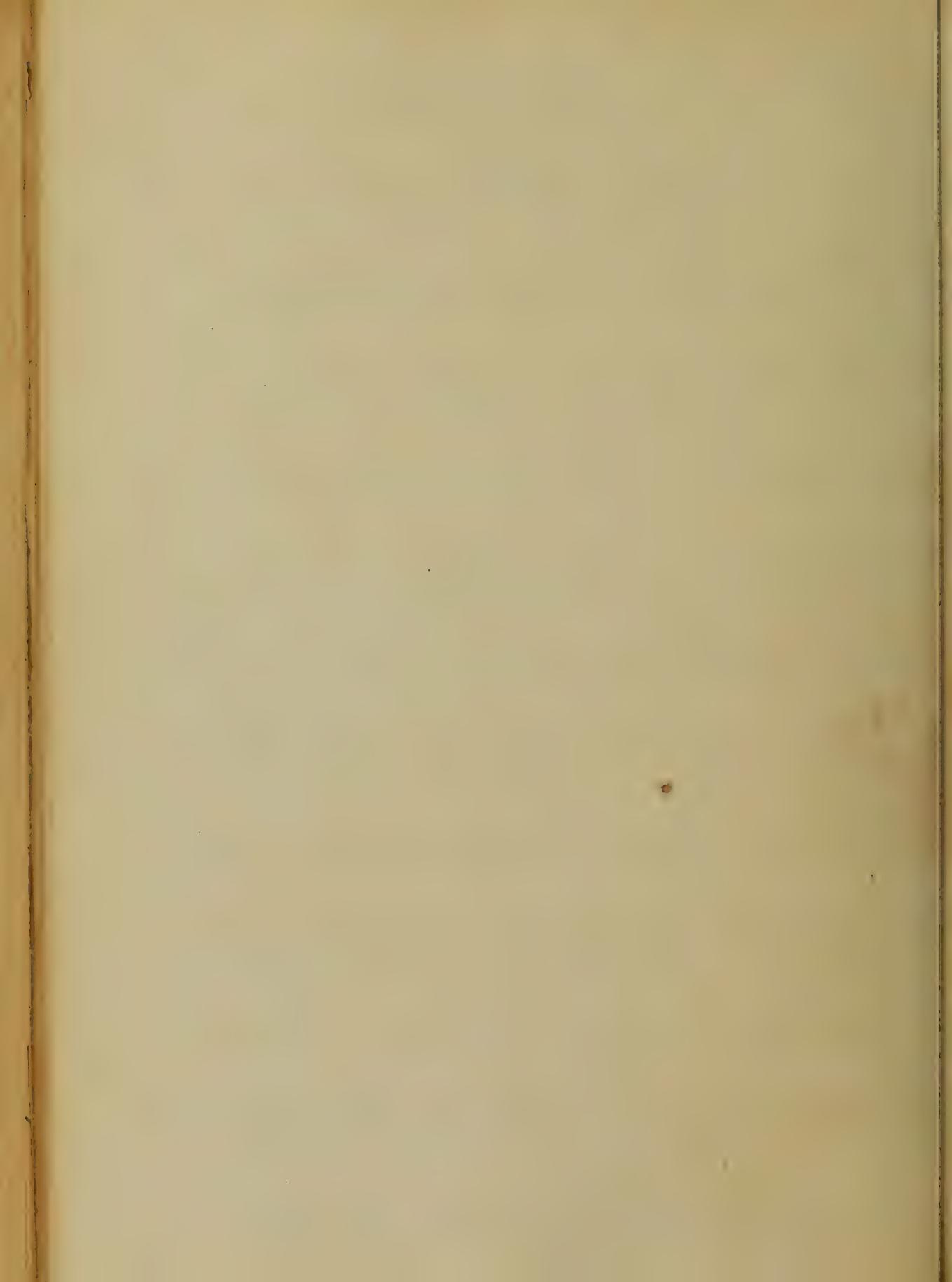
Hepatization of large & continuous portions of

the lungs is not uncommon & when it occurs, it

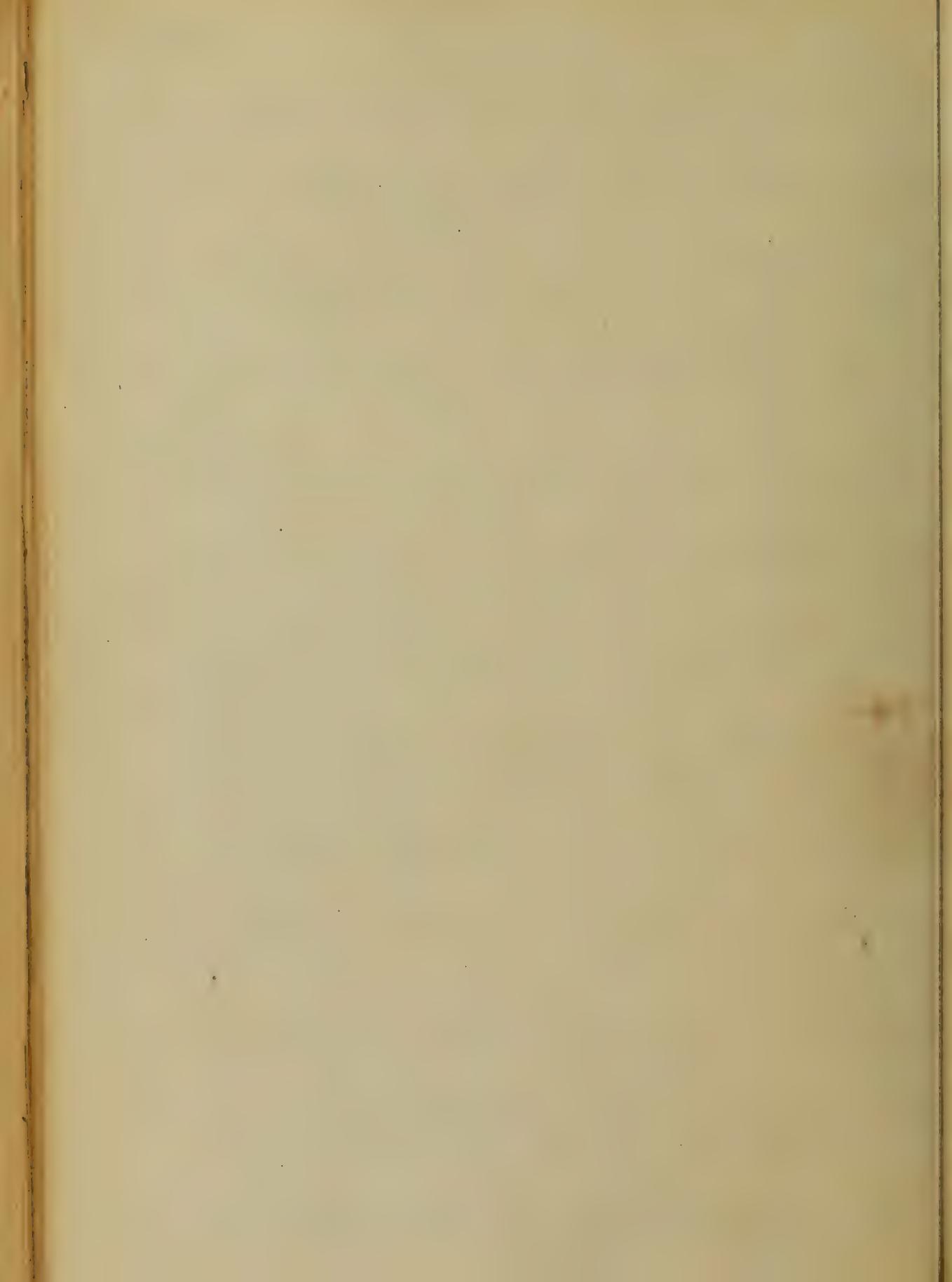
arises generally from incidental adhesions un-

connected at least directly with the tubercles.

(Appearances in other parts of the body -)

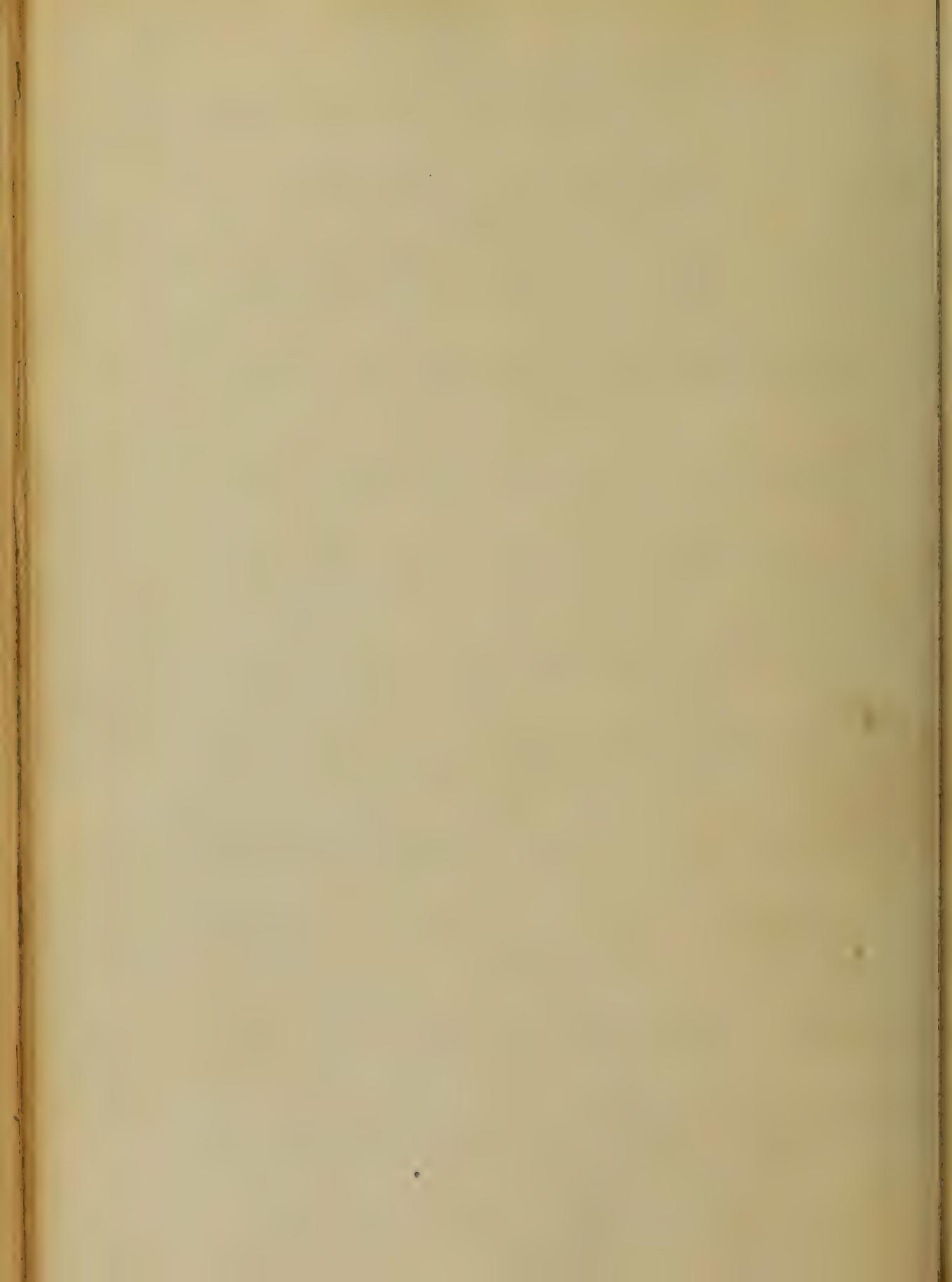


Outside of the lungs the deposition is generally in the form of the yellow & greasy tubercles. Seldom is that of the transverse granules. The stomach after death has the appearance of organic disease - usually larger & thinner than in health - the mucous membrane exhibits all the signs of chronic inflammation - sometimes there is ulceration - there are also similar marks of inflammation in the small intestines - There are tuberculous granules in Peyer's glands as well as elsewhere - there too they undergo the process of softening & discharge & transmute



In ulcerous - Other little tumours. not of
tubercular kind are often visible in the
small intestine. Vonis thinks them
to be inflamed mucous glands - like Tuber-
cles they end in ulceration - Occupying
these tuberculous ulcers penetrate the walls
of the intestines & allow their content to se-
crete into the peritoneal cavities.

When liver too becomes enlarged & becomes
full of adipose matter it yields when brok-
en an oily substance wh' will make
a brown spot on paper when placed in
contact with it - The hand touches its

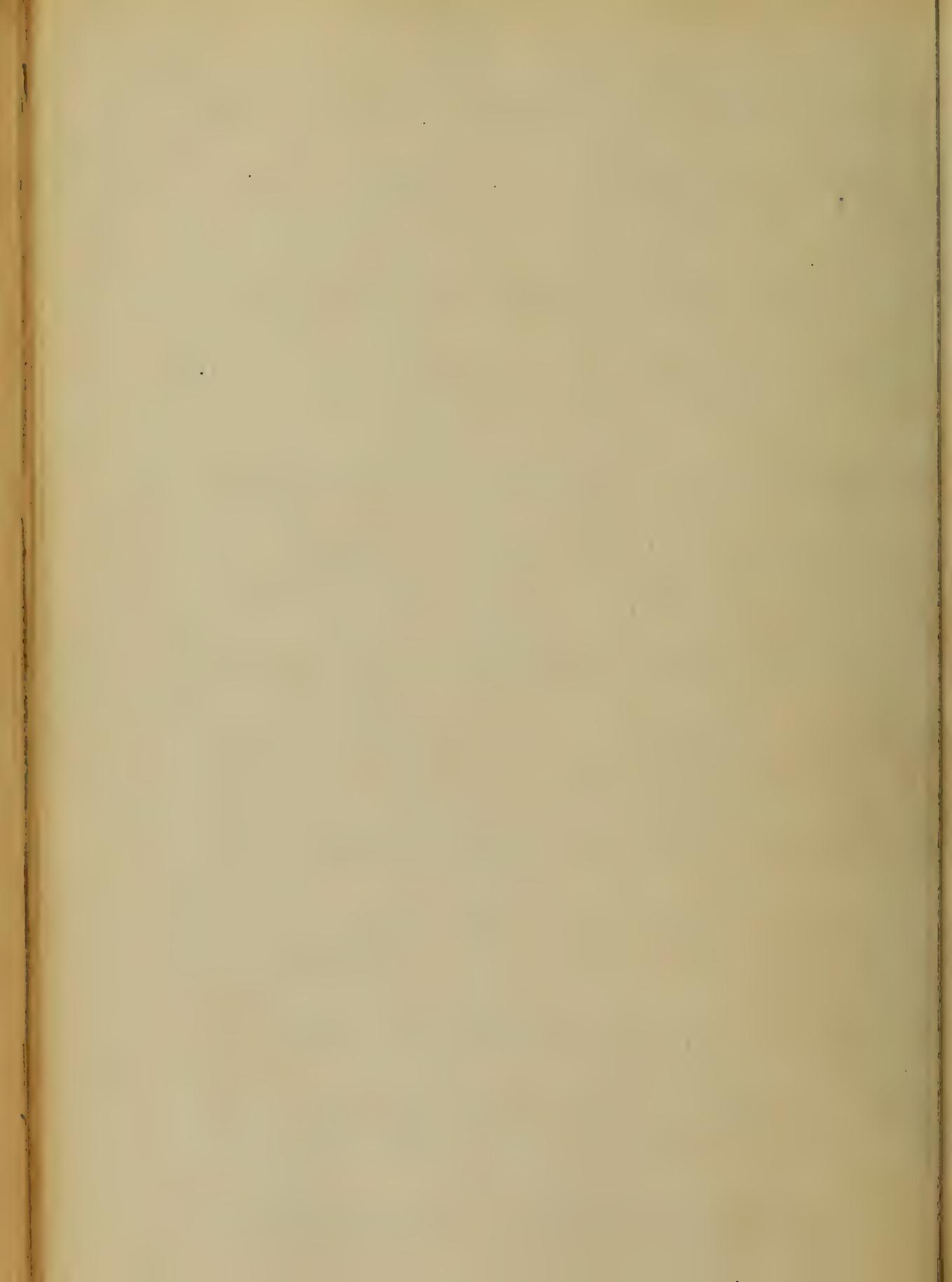


(12)

natural red tint + appears a pale
color. This fatty hue may not be revealed
during life except sometimes by perusion
+ prepare with the fingers -

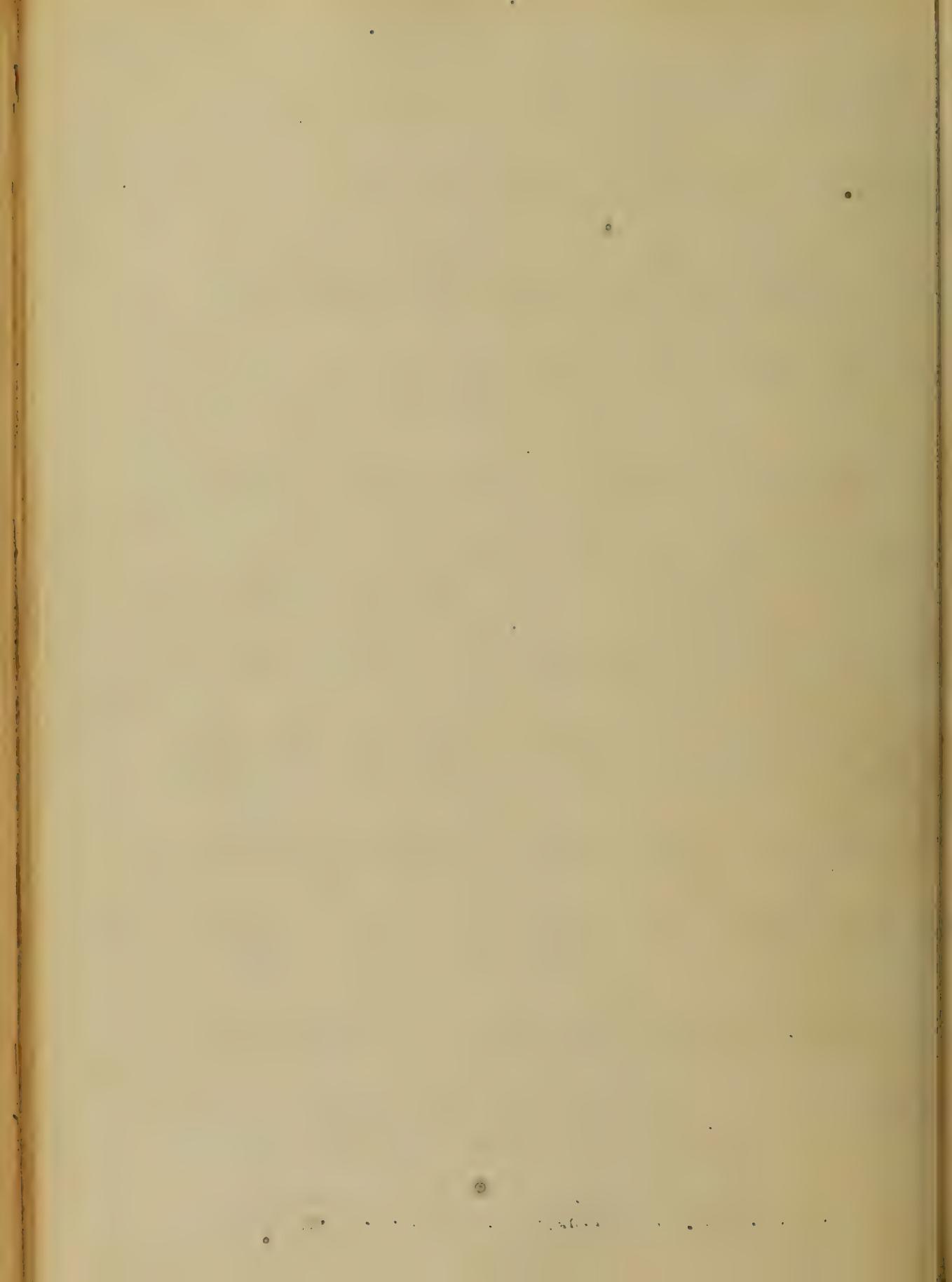
Symptoms. Course &c. There may be
several stages in the course of Phthisis -

One preceding + the other following the period of
the maturation + discharge of the tubercle. It
is often difficult to tell when the first stage ends +
the other begins (1st Stage). Phthisis be-
gins in different modes. Perhaps the most fre-
quently the first symptom is a dry hacking cough
wh. is very slight at first, but grows to increased violence then

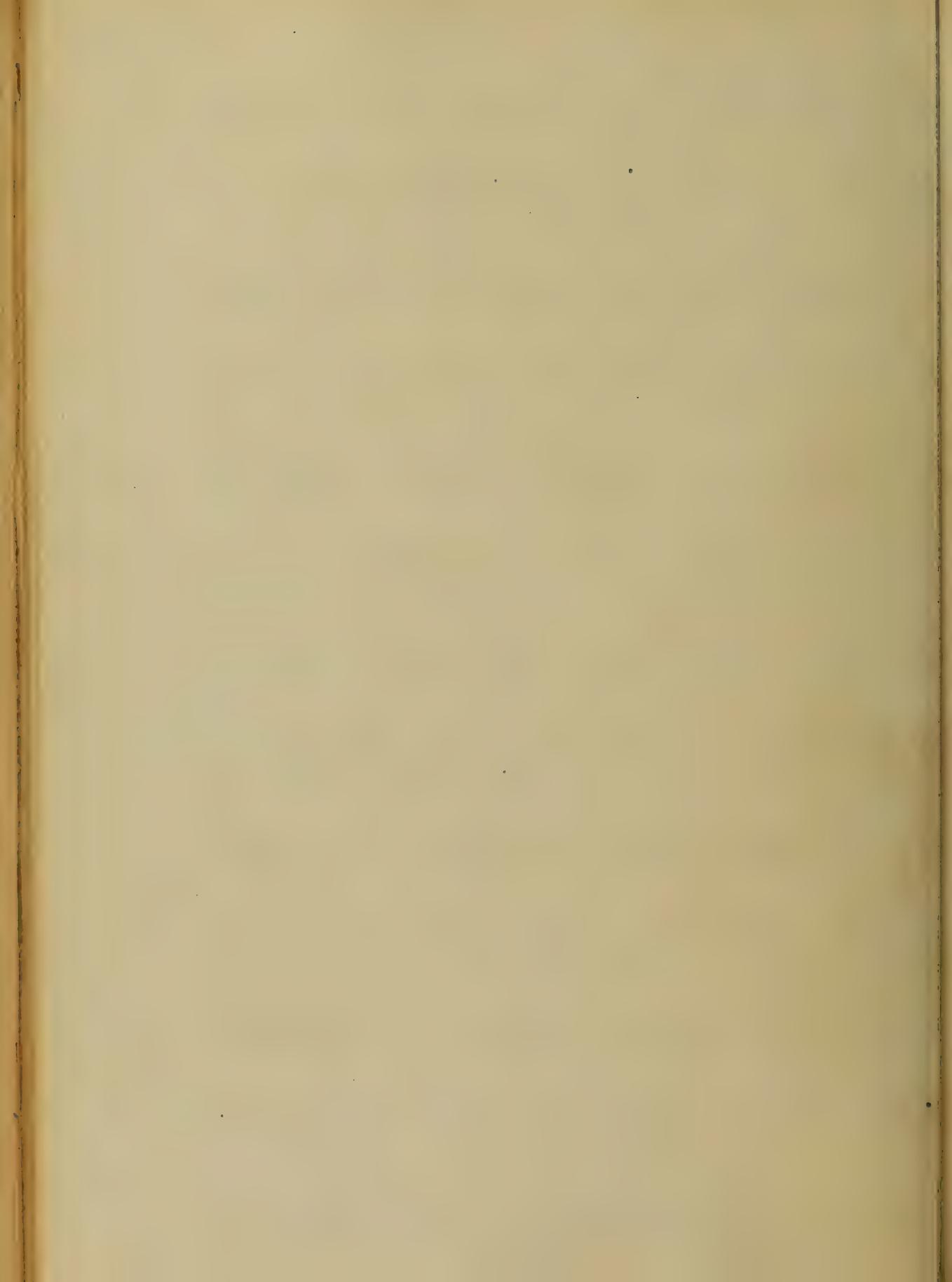


(13)

In expectation wh. contains at first transparent mucus
matter as in common catarrh - the appetite is good. All the
functions of the different organs may be regularly performed.
When the patient exerts himself a little more
than usual there may be a little shortness of
breath & a little more than ordinary feeling of fatigue
plus a little quicker. As the complaint
advances the patient begins to feel ~~sweat~~ ^{heat} exag-
gerations towards evening - with flushing of the
cheeks, heat in the palms of the hands & soles of the
feet. Frequently there are fidgetings about
the helmet & sides. But probably the most
characteristic symptom is sweating.



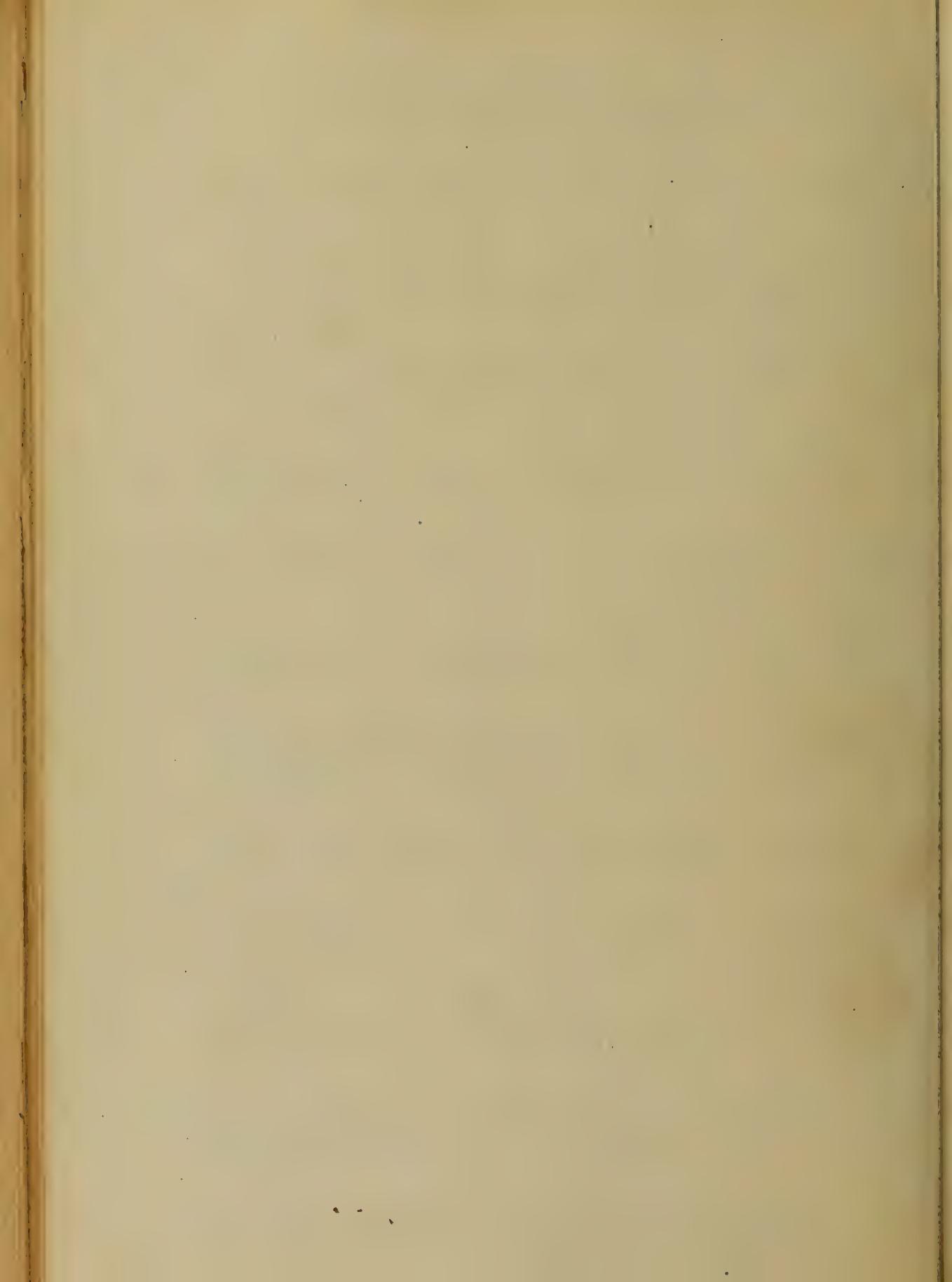
This however is not always an attendant upon the incubative stage: Patient may ascribe his cough to an obtrusive cold, his pains to rheumatism, although his cough is increased like most the pains. & the first thing that warns him of his consumptive state is an attack of hemorrhage. After the subsidence of which the patient thinks himself better, in fact recovering, or it may aggravate the disease & make it to progress the more rapidly. The symptoms advance, the affection becomes more painful. ^I may affect the impaired tongue, ^{II} nerve



Pulse & most frequent - fair flushed &

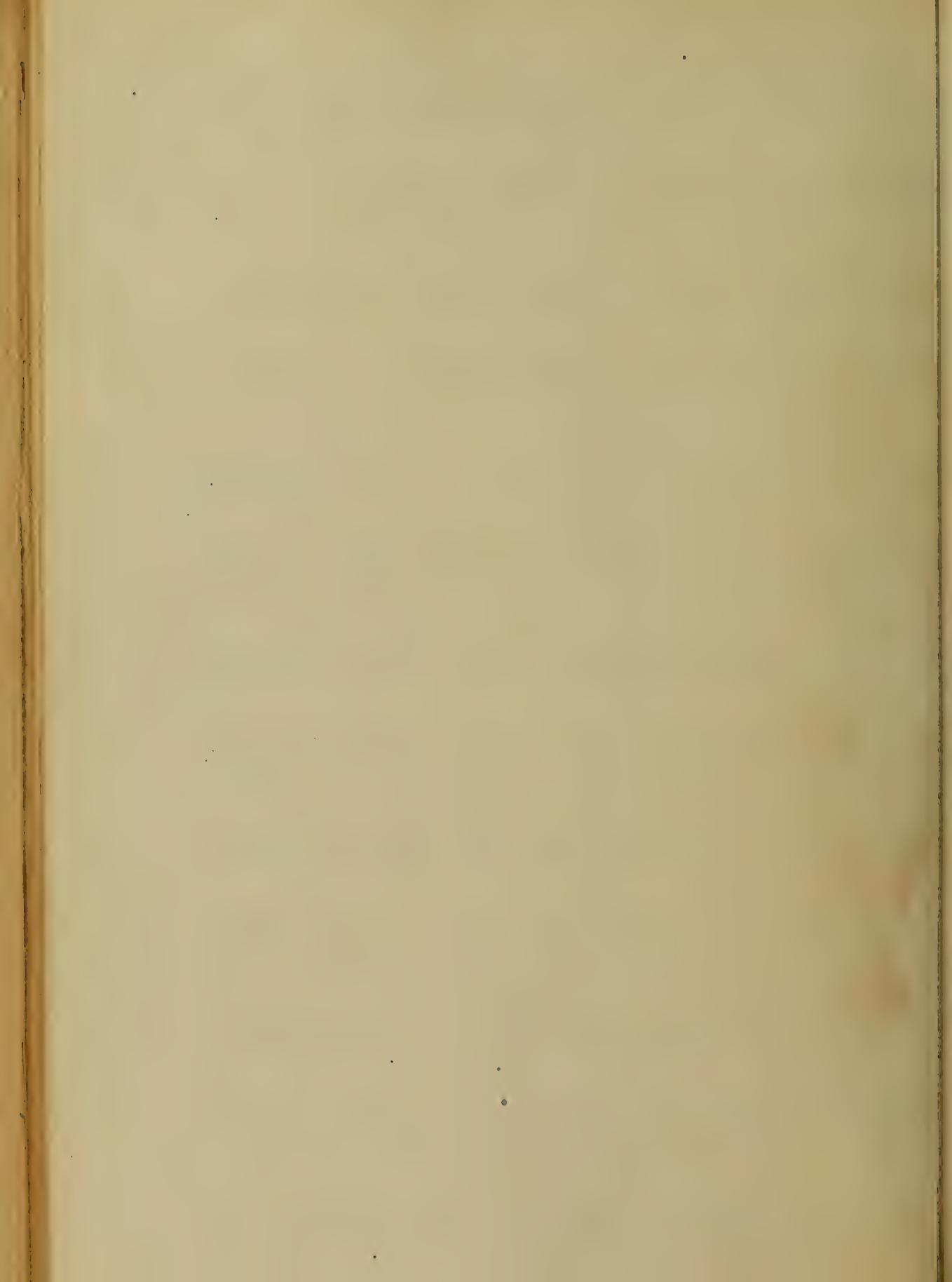
soon the disease goes into the second stage

whi often comes on so gradually that
the precise time of its commencement
can not be fixed. The patient now goes to bed
& suffers with pain, heat, thirst, loss of appetite
& the expectation is now purulent whi
is a good characteristic of this stage. Cough
increased & generally trouble come in
the morning - pulse becomes quicker about
evening - The Conjunctiva is remarkably
clear & there is generally brilliancy of
the eye - The fever is now decided hectic



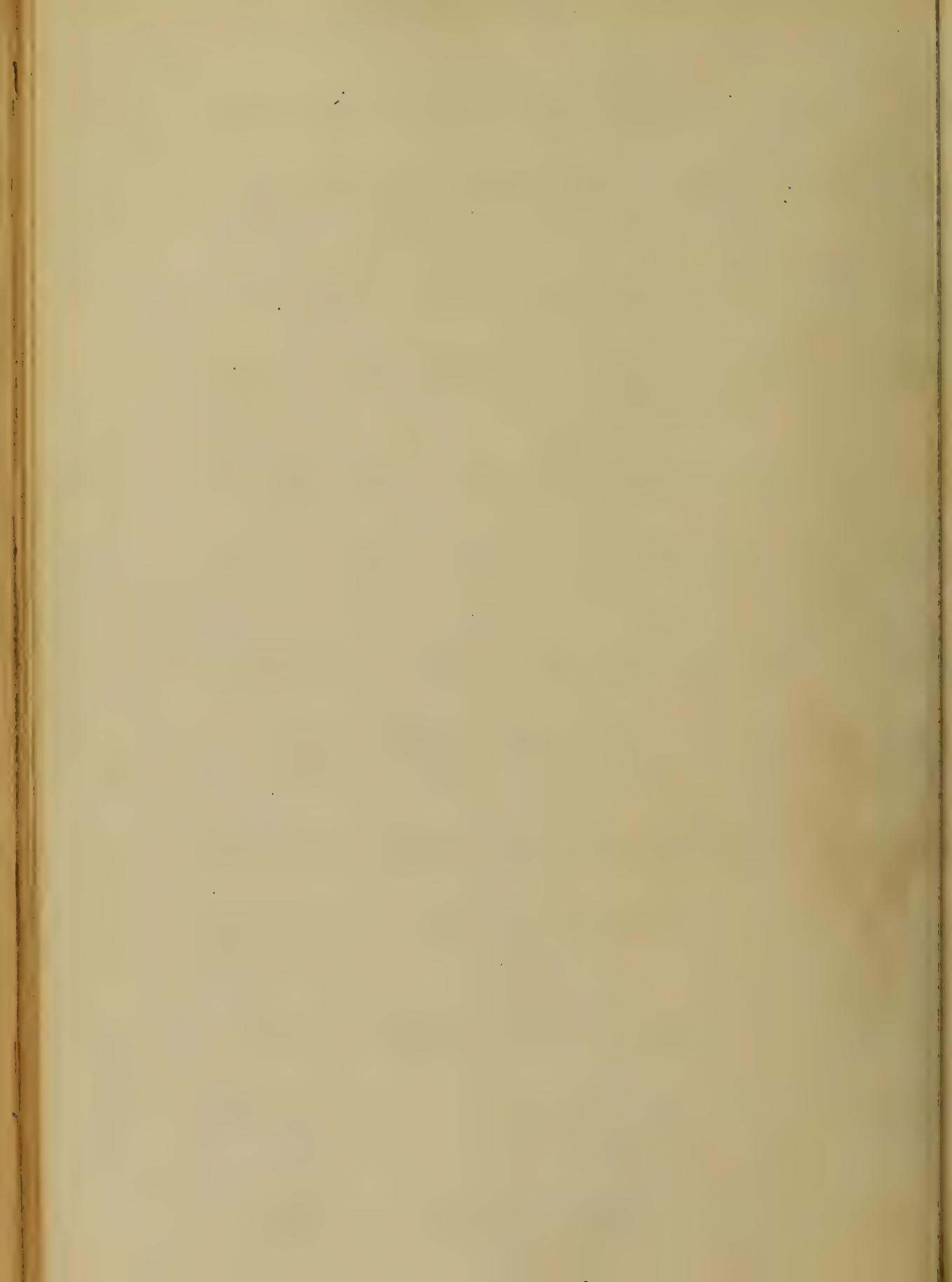
(16)

In character - not unaptly there are
chills, the finger nails curve forward. At
an advanced period there is often diarrhoea,
wh. may alternate with the night-sweats. Loss
of sleep of course not uncommon - dyspnoea
often alarming. Prod. days ^{decreases} ~~Cough~~ is most
prominent symptom. Then haemorrhage
then frequent pulse, night-sweats &c".
(Auscultatory Sounds) - When pus or
vitrified mucus or liquid of any kind
is collected in a bronchia, kept about
is called a "purging" sound, wh. is not
diffused as large crepitatum is - again

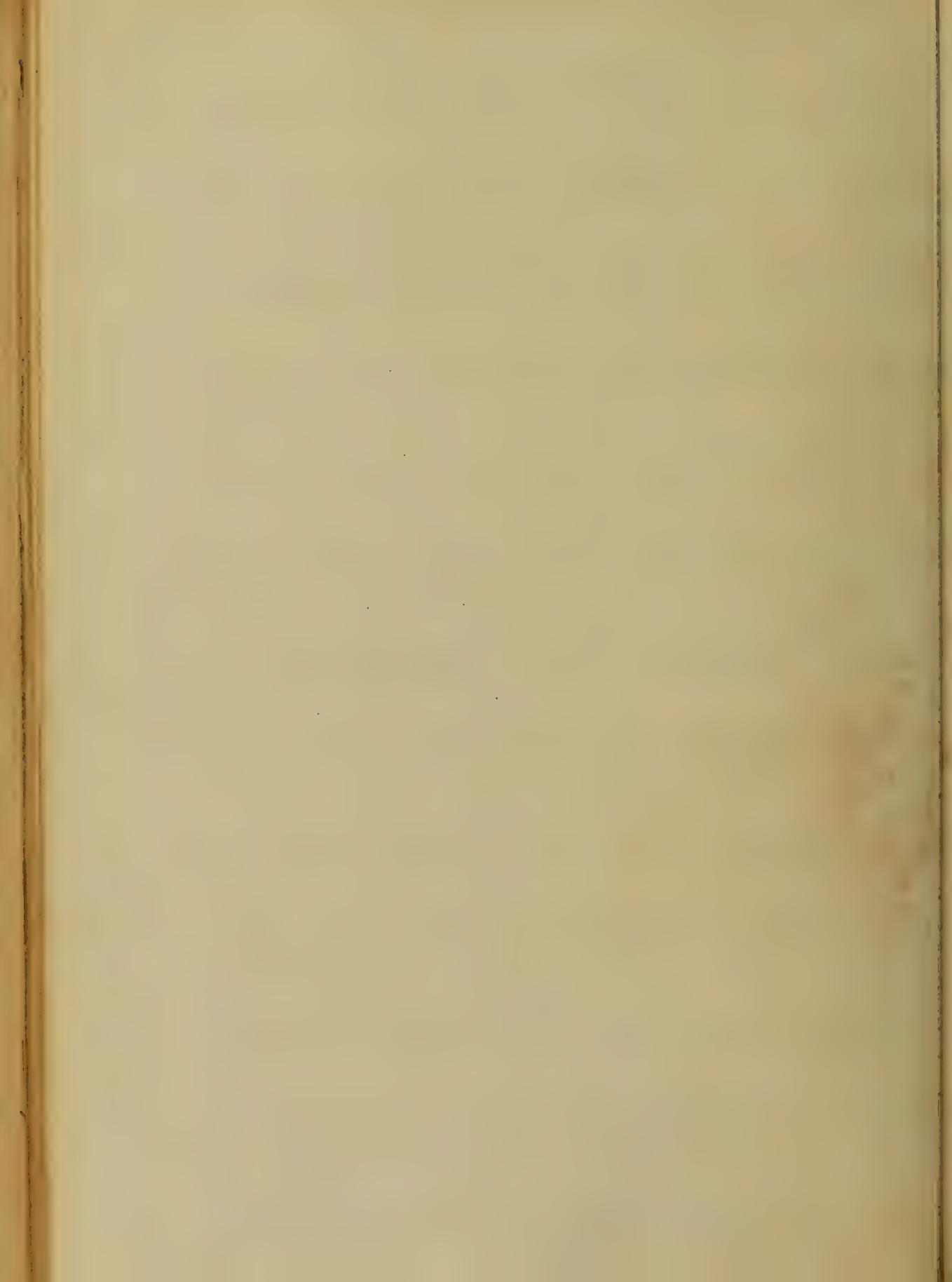


If the bronchia be empty we get a "caw-and-round"
which is hollow, especially if the cavity be of large
size - It may be a chirp or crackling or a click.

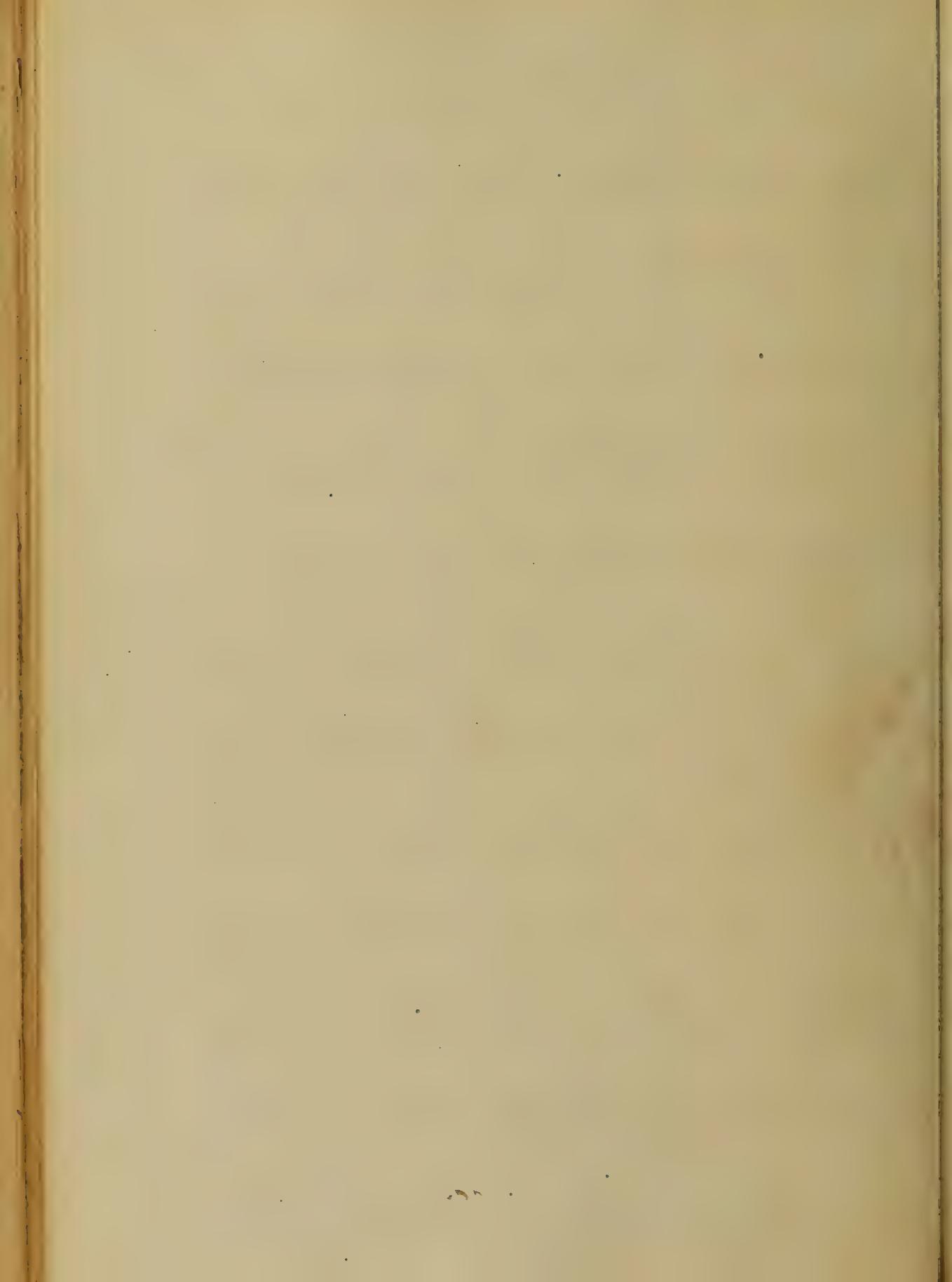
If the cavity be large ^{has} extensive walls & near the sur-
face, we will know when the patient speaks
pectoriloquy - Maelson says that Cavernous-
piration is much more alarming than pe-
toriloquy & that whenever the latter is from a
cavum, then also will be heard Cavernous-
piration, but that the converse of this is not
true - When the depression is considerable
some dullness may be perceived under & before the
Cavicle - Course, Duration, &c) - The



Duration of Phthisis is variable - Some
cases may run their course in a month
while others have been known to continue
for 30 or 40 yrs - Wood says the greater num-
ber of cases terminate in from 1 to 3 yrs -
When the disease is very rapid & it is some-
times denominated "Rush" or "Falloping con-
sumption" - Ordinarily Phthisis undergoes
temporary interruptions though sometimes
it is quite regular in its march - Some times
the ordinary signs of this disease seem
to be completely in a dormant state - &
conclude so far until a short time before
it runs -

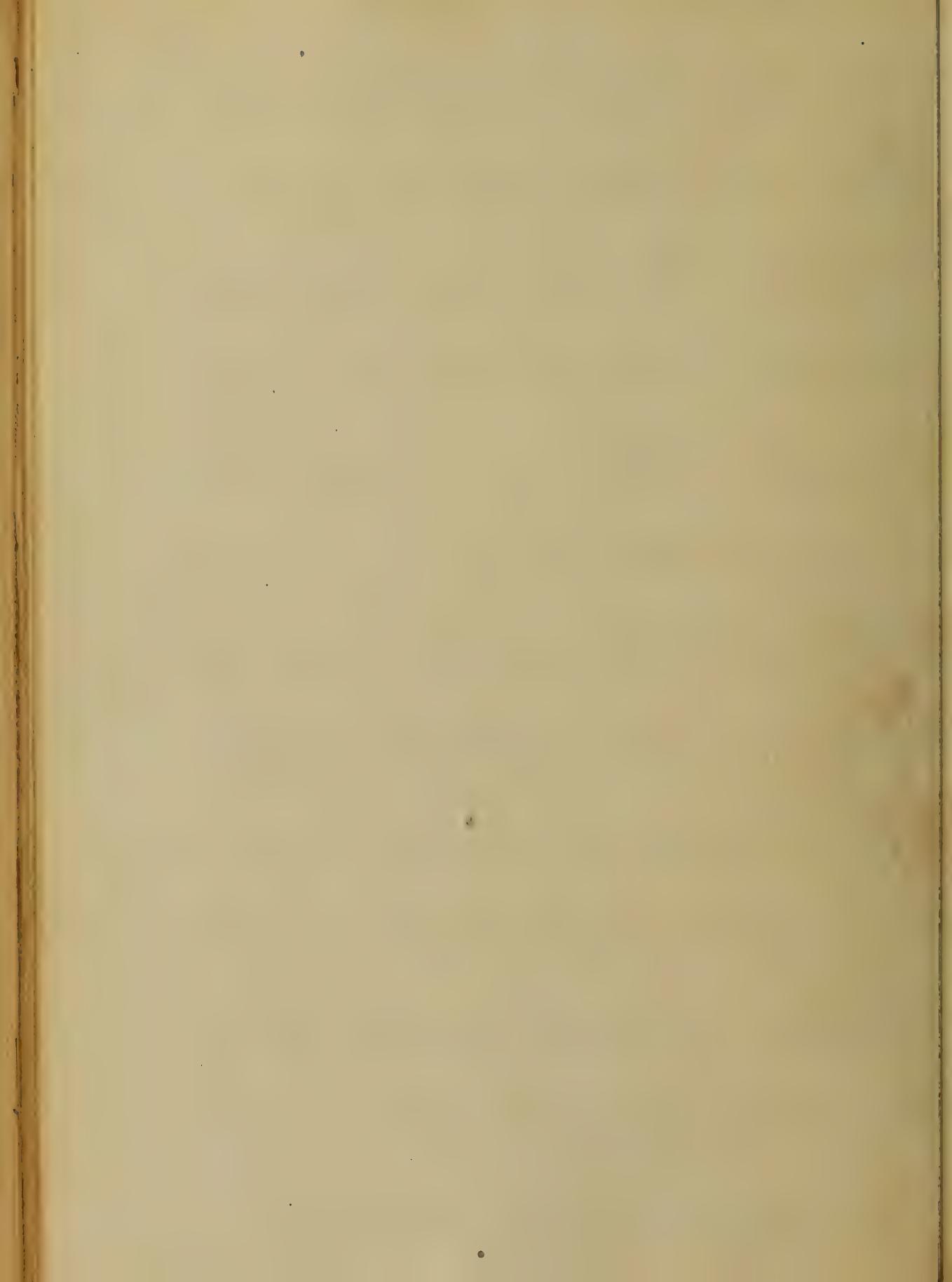


For the tuberculous deposition may take place so
slowly as not to excite sensible irritation in the
surrounding tissue, & therefore undergoes the ne-
cessary absorption without any of those external
symptoms which would make the earliest symptoms
of the disease. Accumulation going on - one or
more large collections informed & when commu-
nication with the bronchia is established the
irritating influence of the pus-spreads from
child to man & we suddenly all the symptoms of
the last stage - (Nature & Disease -) This
does not occur but merely in a tuberculous deposition
in the lungs, for as I have said before, there



(20)

Is a morbid state or diathesis upon which probably depends - This diathesis is the same or else is closely allied to the scorbutic - Its exact nature is not known, it may be owing to a certain toxicity of the tissues from which cancer then is separated from the blood a peculiar product which acts as foreign matter in the living structure. The blood may be in fault though its only defect is in the corpuscles - There is something more than a condition of debility - for it may exist without any production of tubercles - Inheritance is the most influential of predisposing causes but perhaps is cold - dry - according to



Louis persons are most liable to have it between the
(21)

ages of twenty & thirty (Influence of Sex &

Occupation) - According to the researches of many

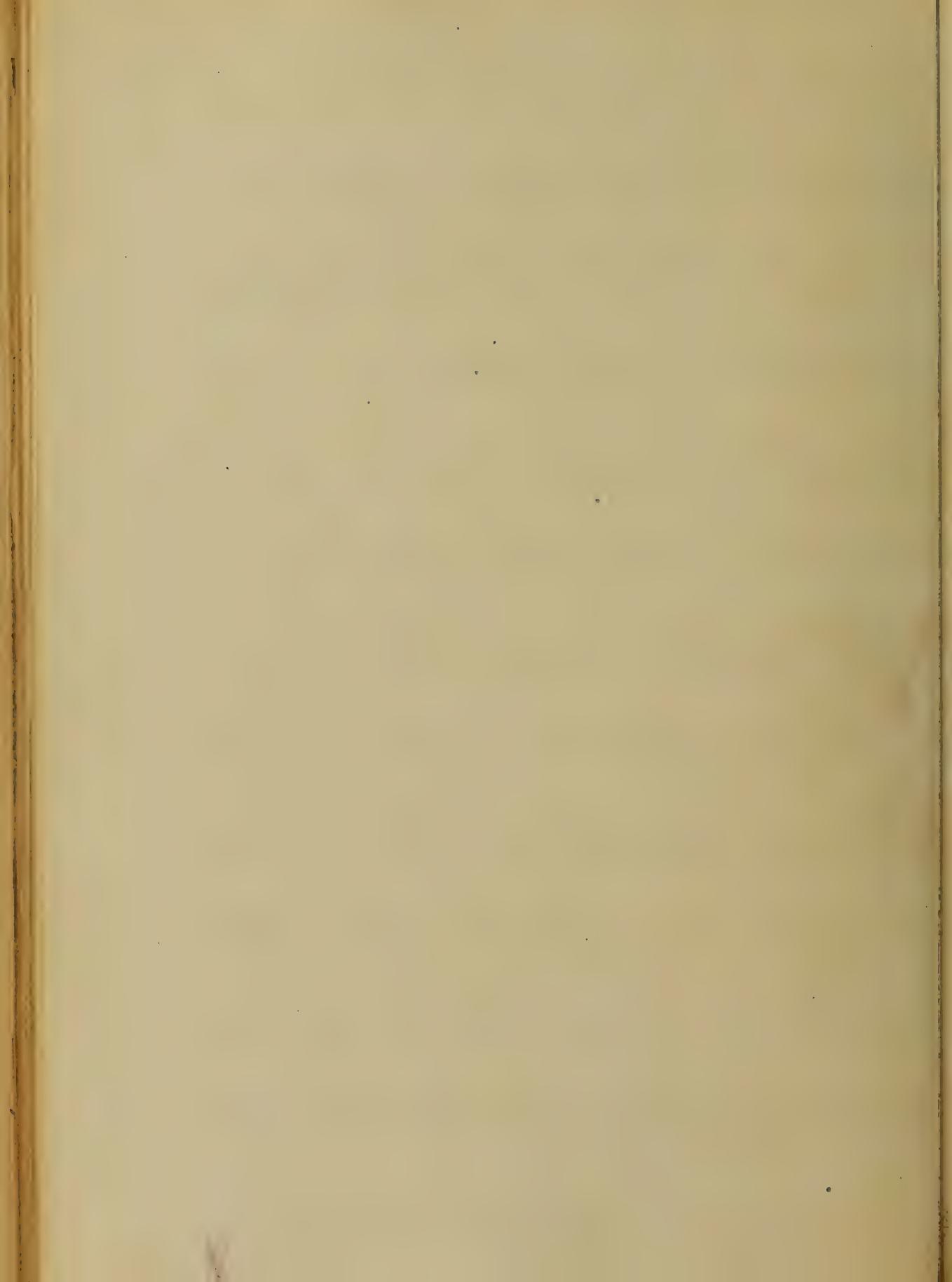
eminent physicians. more of the "fairies" are the
victims of this disease than their opposites. but ac-

cording to my own I find this does not hold good
but I suppose Watson. C. W. S. Lewis.

to authority is better than W. Combe's -

The former physician goes to state that men
become susceptible by the disintaction of lo-
cal irritation on the lungs themselves for their
uncertain occupations in wh: they engage wh:

are actually conducive to this disease - i. e. f -



(22)

Stone masons - miners - metal workers -

&c - most of them never live in towns. have

sedentary occupations & remain in one place

visitors without muscular exertion

On the other hand we have for example

farm hands, butchers &c - who are comparatively exempt from Phthisis - some

ascribe this exemption to the use of animal

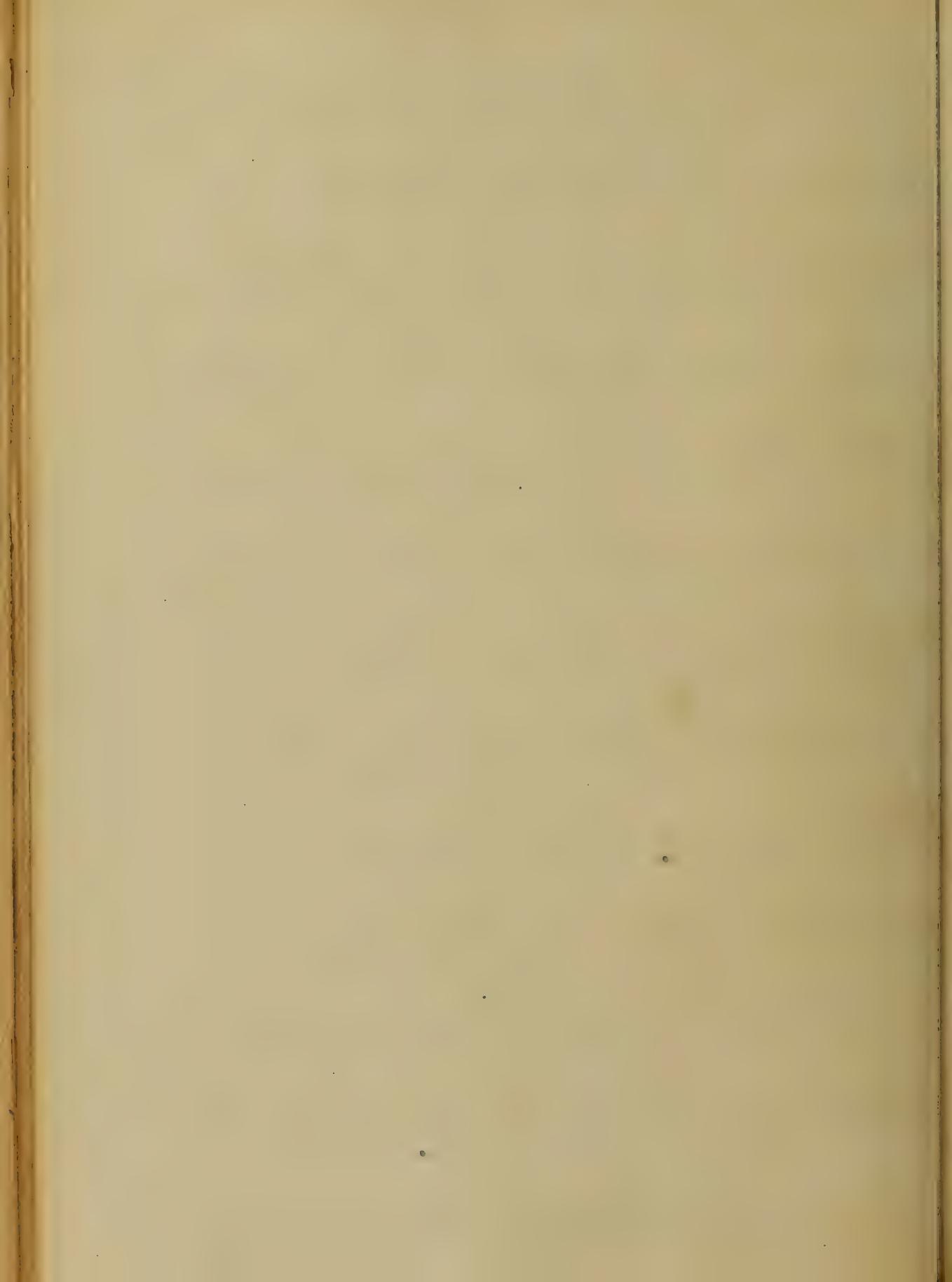
food, but the most popular opinion now is

that it is due to exercise in the open air -

I do not think consumption contagious -

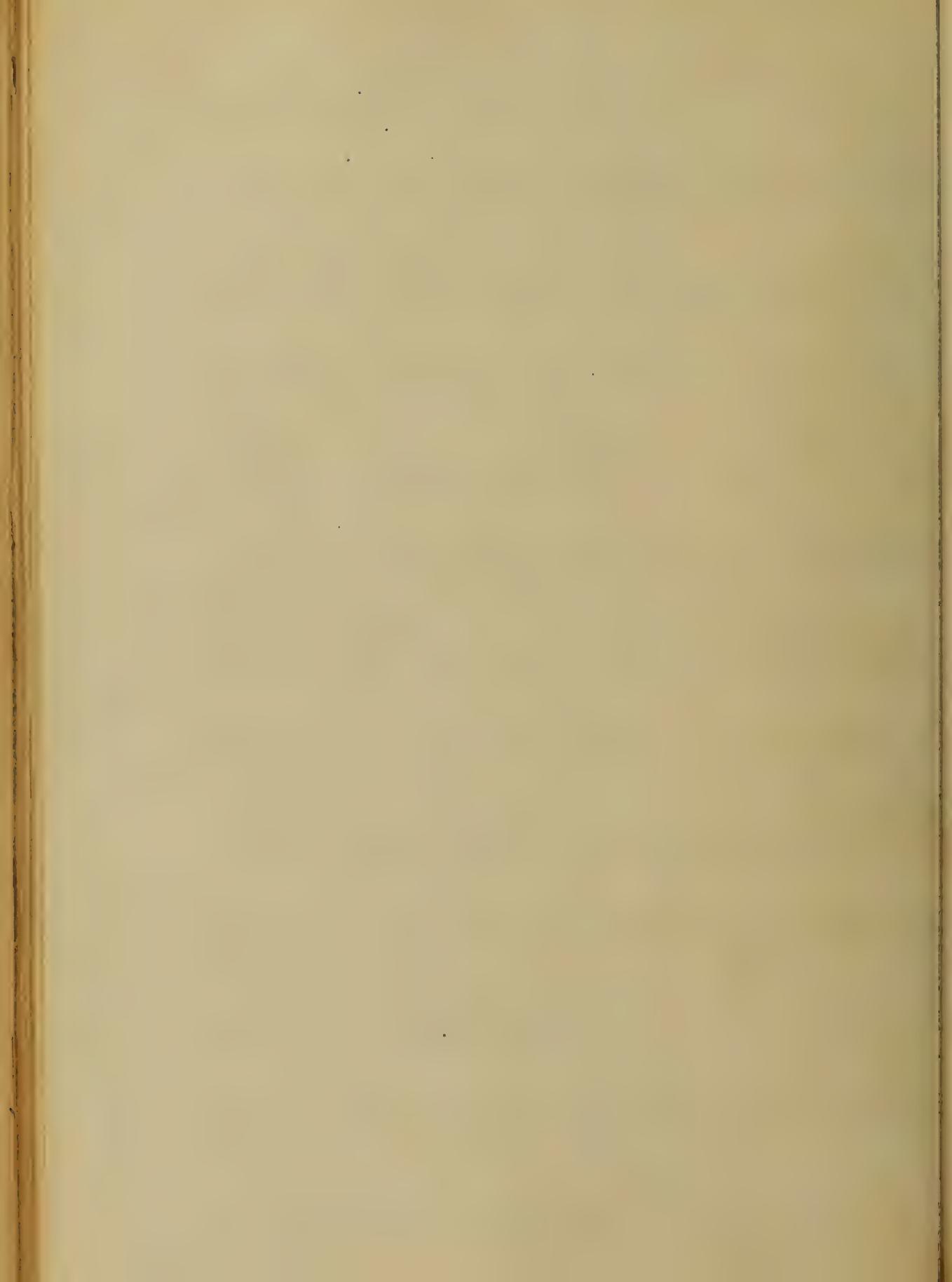
yet there are cases on record where men

die a few months after the death of



The patient become consumptive. They
that are of the opposite opinion - and
gladly avail themselves of this to subdue -
trust them in their opinion - but it
is my humble - nevertheless my firm opinion
that there is invariably in all such cases a
latent dialysis to the disease - (Diagnosis)

Sometimes it is easy to diagnose a case of Pthi-
asis. Then again it is extremely difficult -
Easy when the tubercles are numerous large &
advanced - The fact that tubercles occupy by
preference the upper part of the lung is of
great moment in relation to the diag-
nosis.



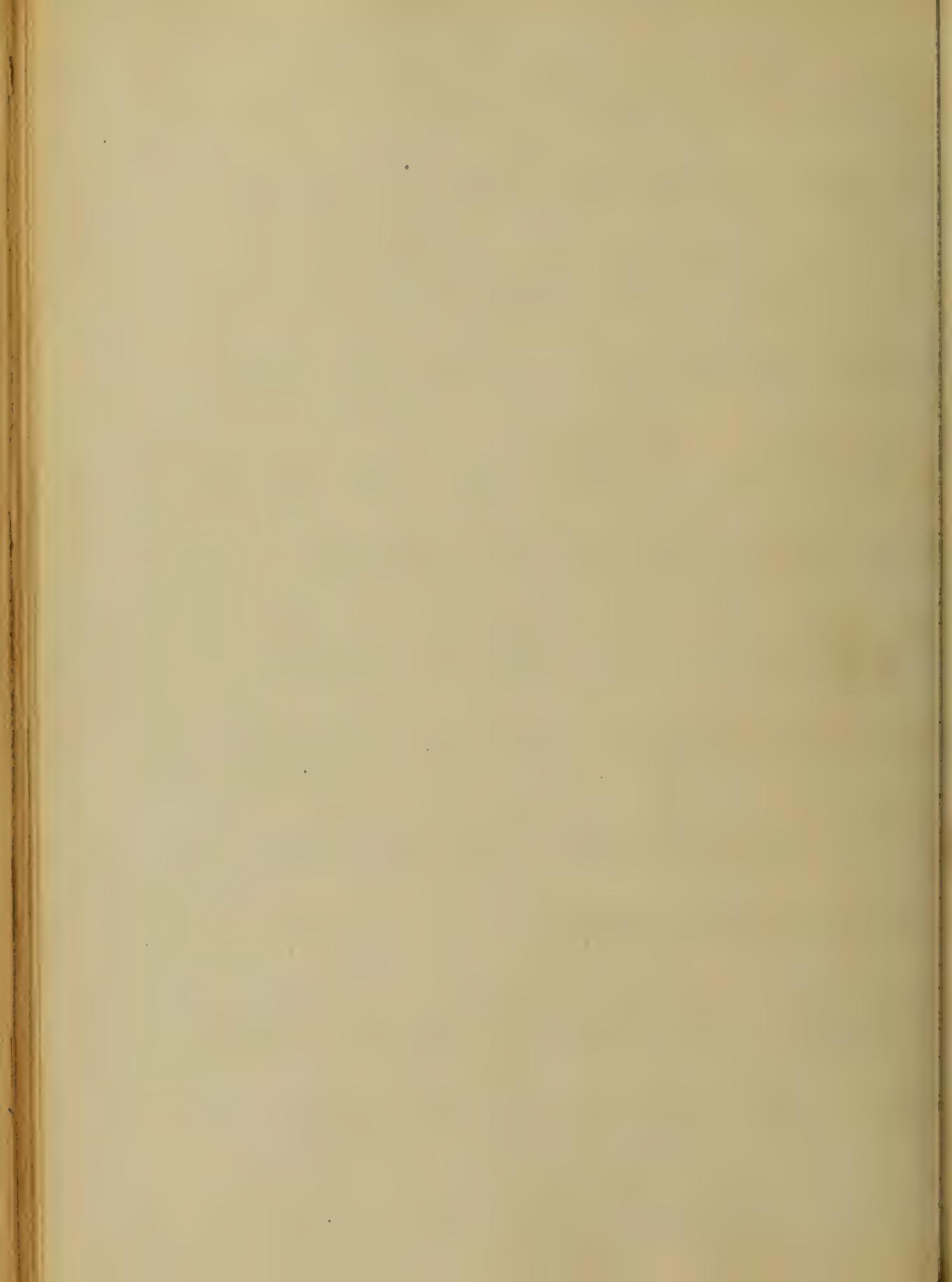
Watson says "it may be laid down as a rule (241)

with but few exceptions, that if you find
dullness or perception, a coarse or insufficient
but breathing, or unaccustomed of the voice,
or a harsh or morbid noise of respiration when
the patient respites or coughs or speaks, if you
find this day after day & always between
the clavicle & mammae in front or between
the clavicle & upper edge of scapula over the top
of shoulder nowhere else & more especially if this
deviations from the healthy sound, be limited to one side,
or greater on one side than the other, or different in quality
on the two sides. You may well consider a case of
tuberculosis pectoralis - "

(25)

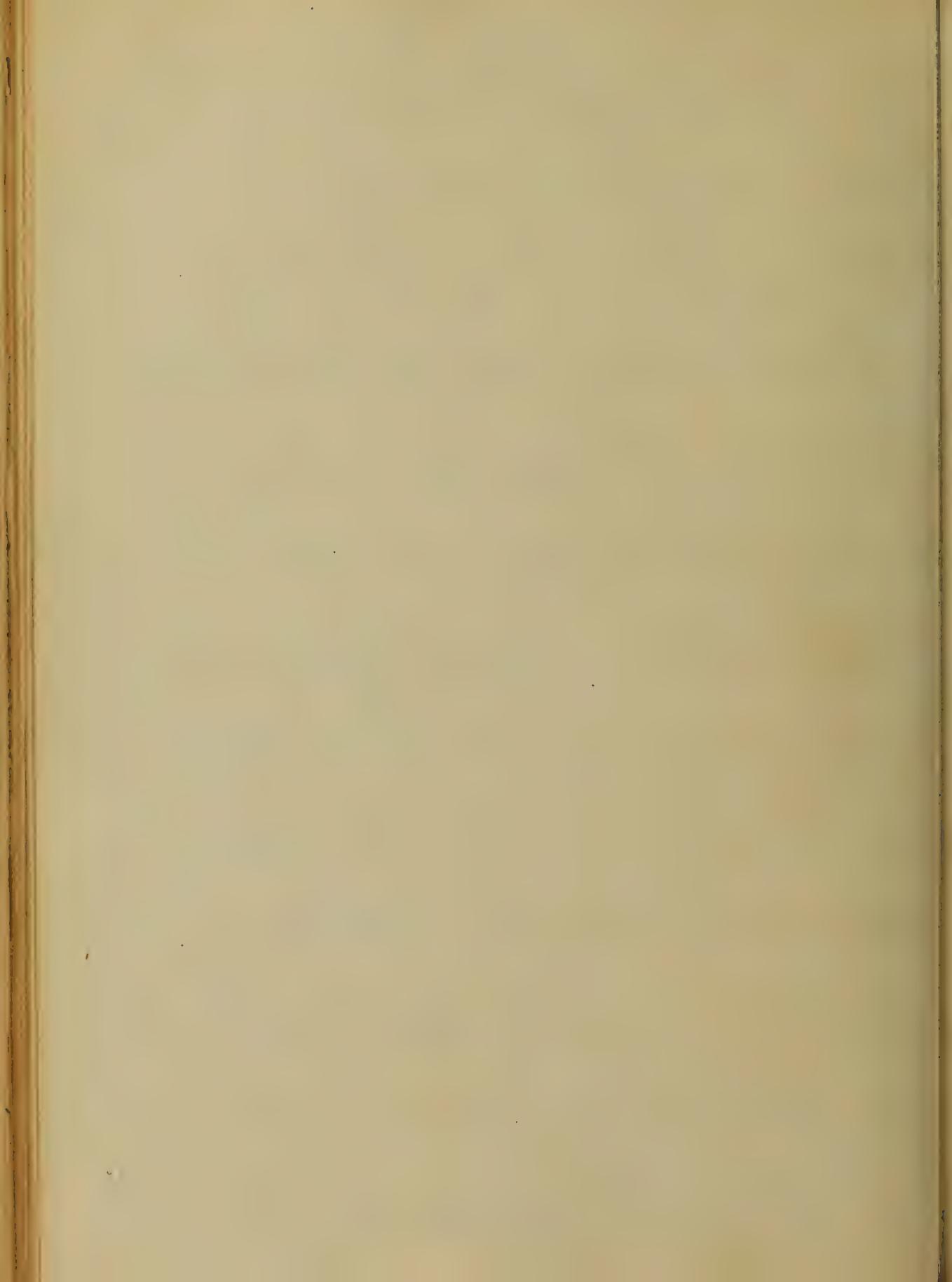
Emphytic Consumption is more likely to be conformed with Bronchitis. we know that in Bronchitis the matria sounds are more audible in the lower lobes & in Consumption in the upper lobes. hence it would be easy to discriminate. The pain that is felt in Bronchitis is beneath the Sternum & in Consumption it is generally in the sides & between the Shoulders.

This is not necessarily a fatal disease. When a limited amount of matter is thrown down & exuded the patient may

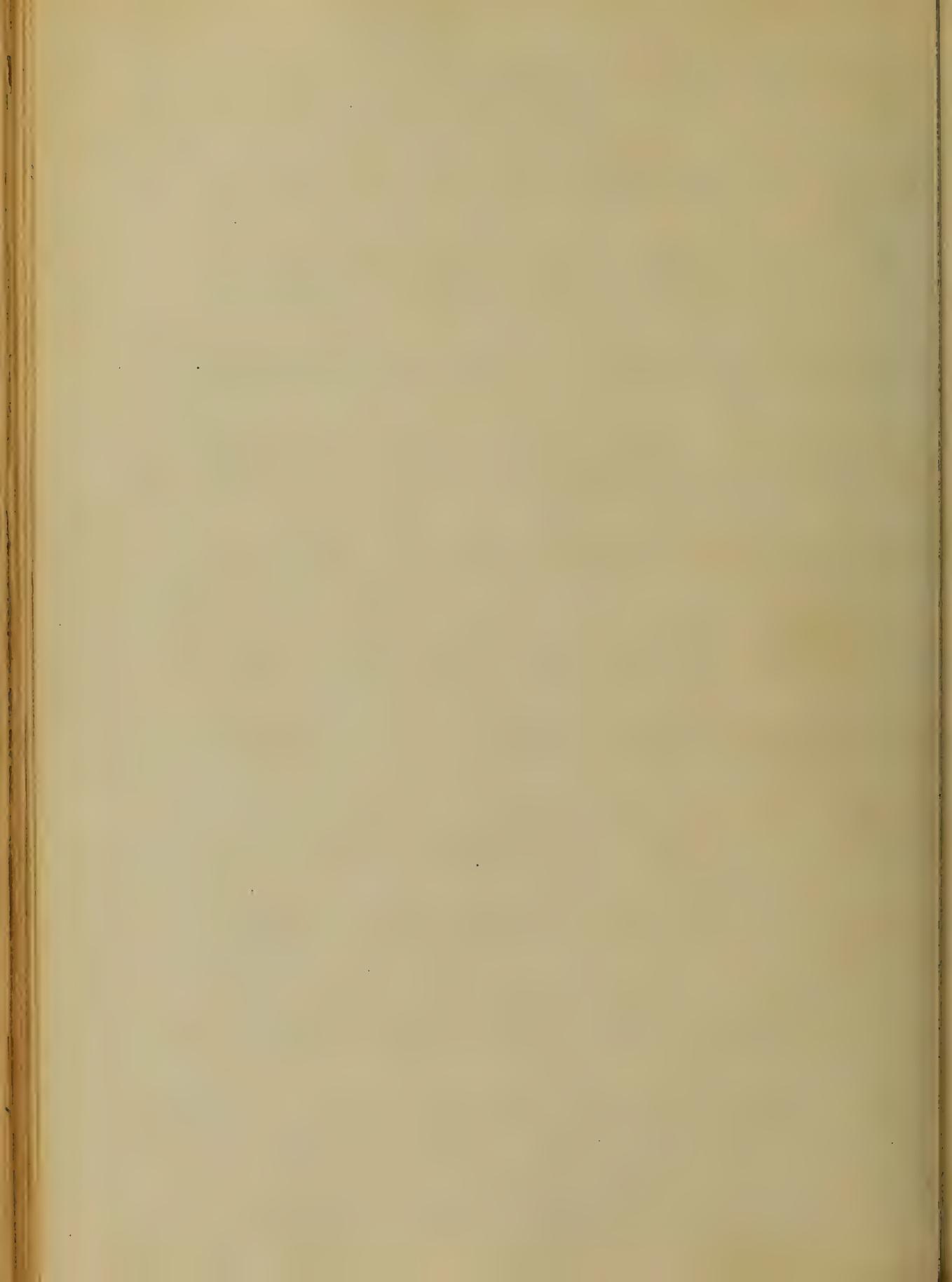


Ortacce, or McSherry). There also are (26)

the views of Dr Donaldson - When Sir Astley Cooper died he requested that a post mortem examination should be made of his body - In making this examination it was found that there were cicatrices in his lungs - showing that he had had the disease & had recovered - (Treatment) - In the first place we try to prevent any further deposition of tubercles - & then to prevent those

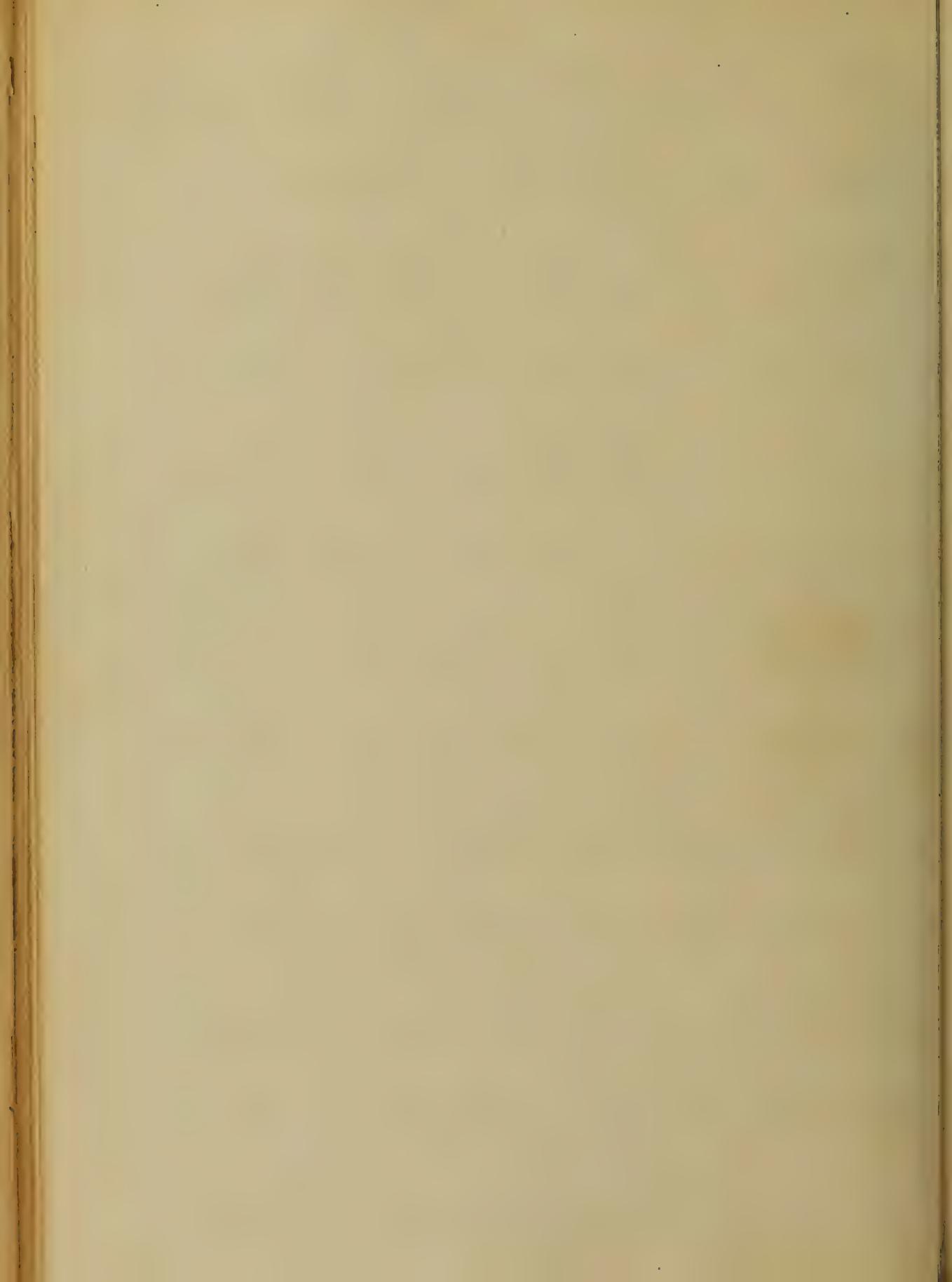


that are already deposited from
wh^{ch} they used likely to
accomplishing their fatal purpose if
not interrupted — arrested — To
accomplish their ends Dr Mc Gregor
thinks Cod Liver oil good — Dr Fox-
aldson recommends a visit to a
cold, dry climate. e.g. — Minotola —
Dr Galton — Madeira — To support
the failing strength. wh^{ch} by the
way is one of our principal objects —
we do not rely upon stimulants so much
as upon hygienic remedies — In fact
Medicines are only secondary



(28)

the value - If there be pulmonary inflammation an antiphlogistic diet would be best - if not a purine free diet would be more proper - Milk because it is both nutritious & stimulating may in many cases be the staple of food - Blistering, bleeding, emetics all have been recommended to perform their proper offices - are important considerations in the proper temperature of the body - Mental anxiety has its influence too - he try to relieve



Cough by the use of demulcents - e.g. (21).
Liquors to be held in the mouth.

Inunction of wild cherry bark &c -

&c - If these fail we should employ

noxious remedies - one of the most pre-

erable of these is one of the salts of

morphia - which should begin with

mucilage or syrup - when there is

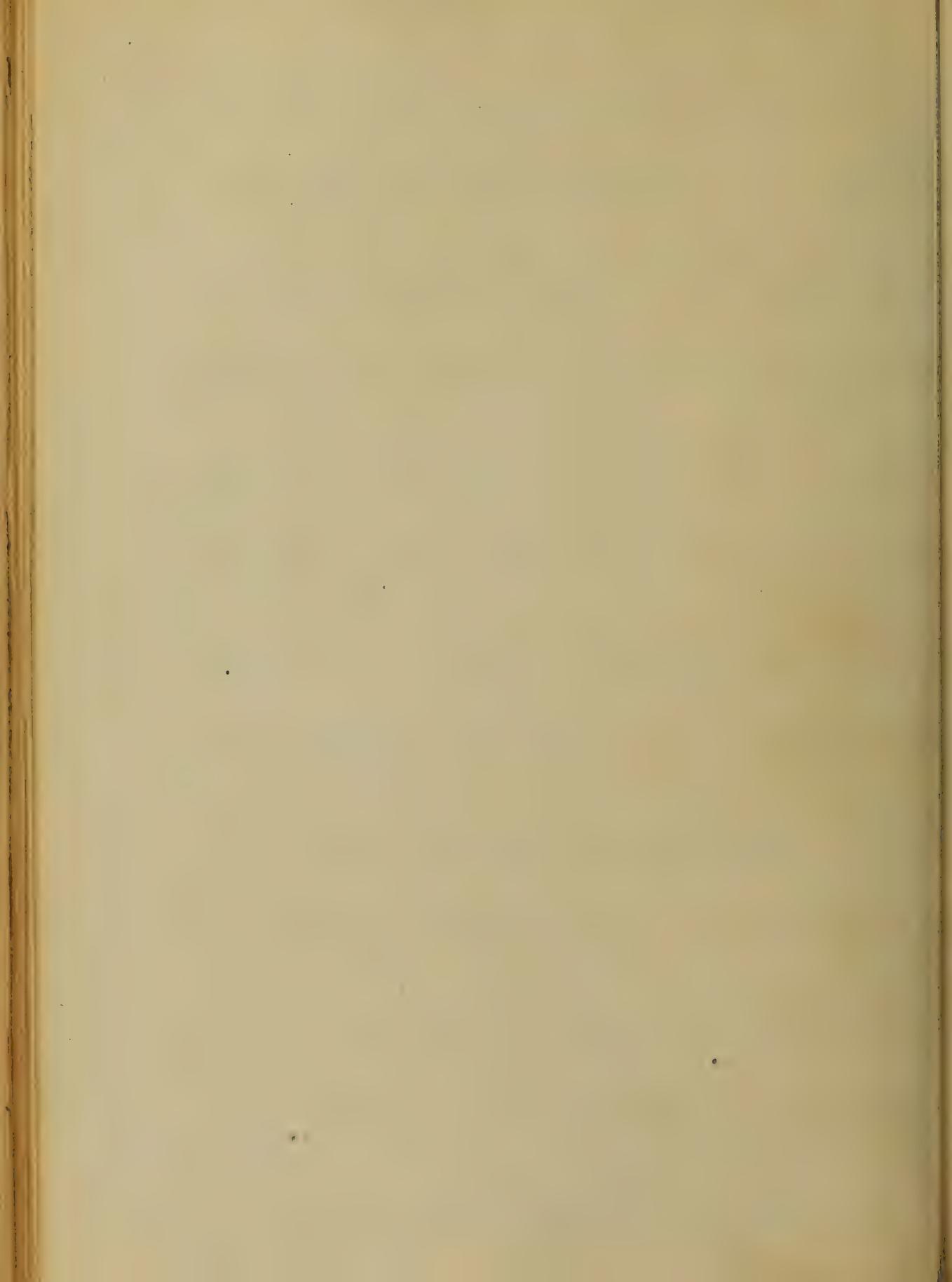
dyspnoea relief may be obtained

by inhalation of camphor. Tobacco

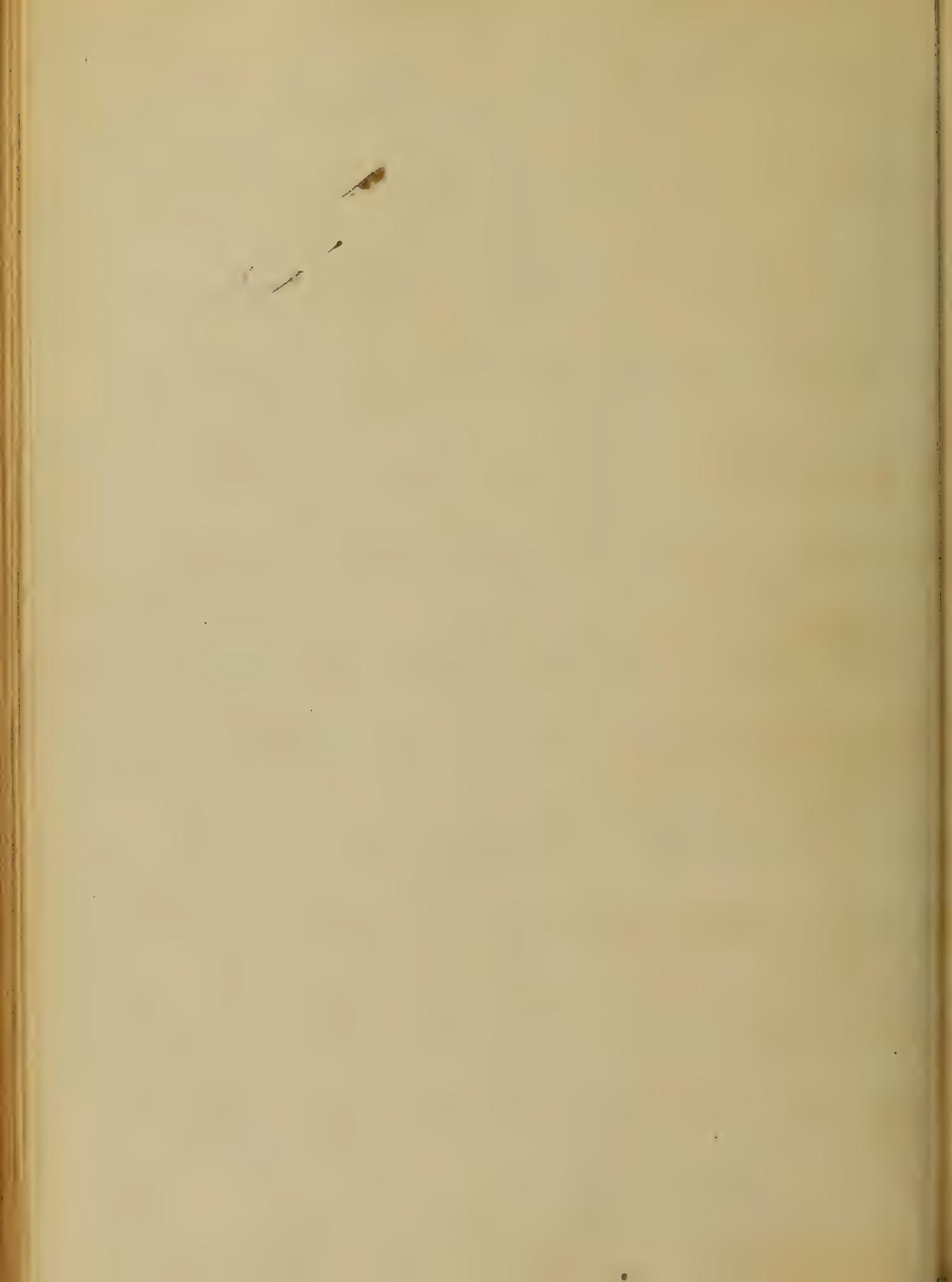
A common & troublesome symptom is

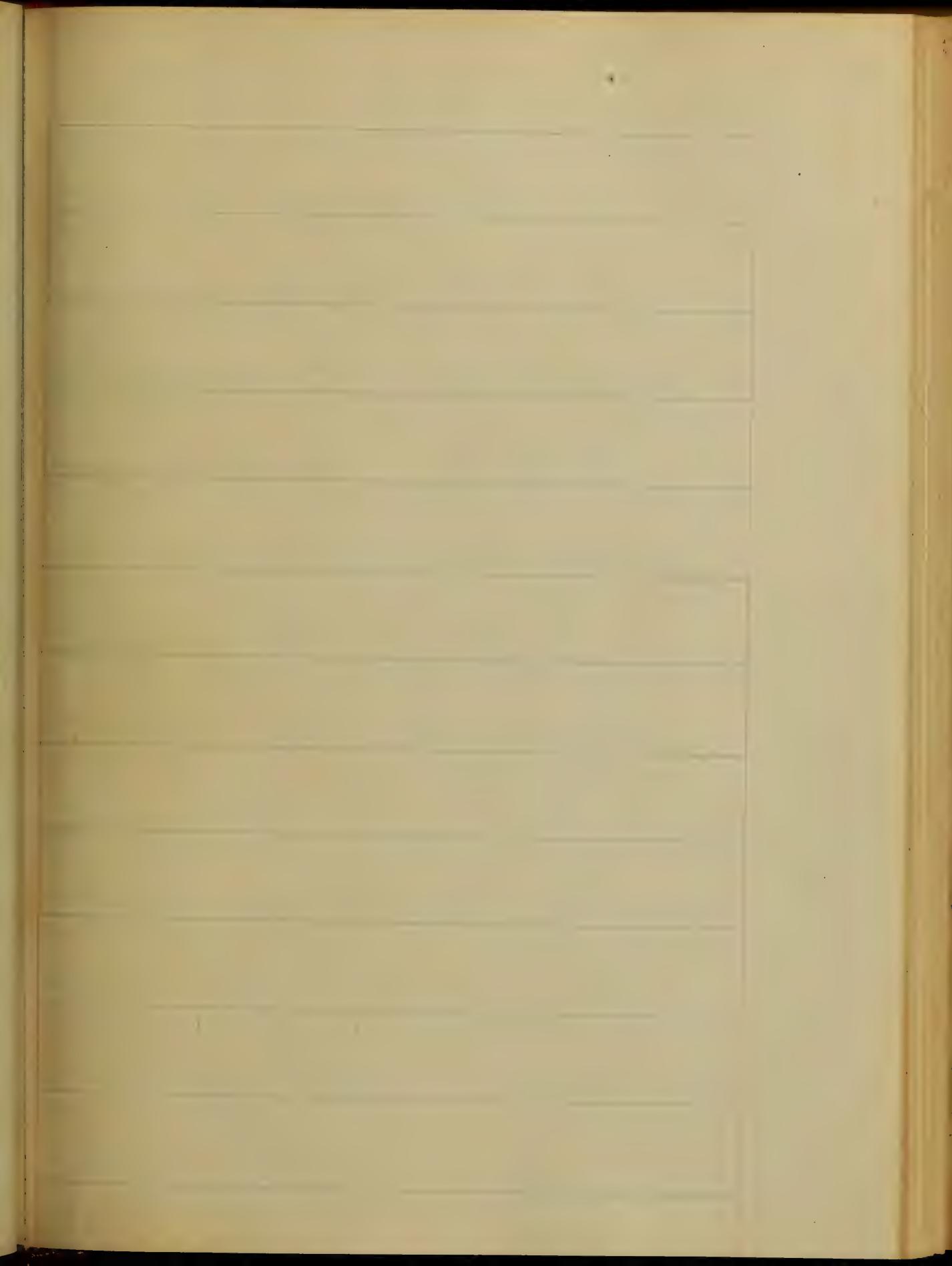
nocturnal perspiration. An admissi-

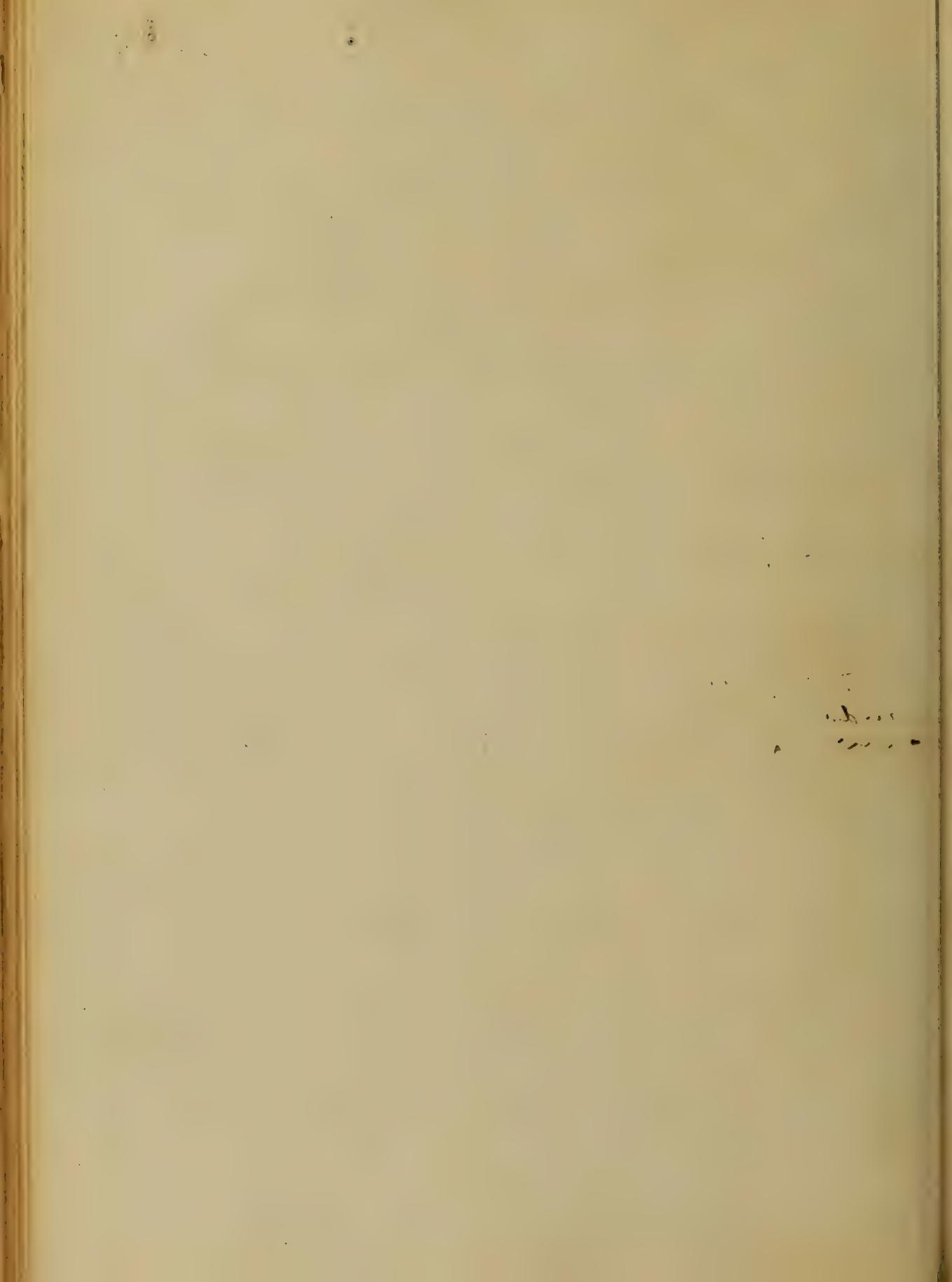
ble remedy for this is dilute Sulphuric acid



This also will be valuable in a cussion
of the bones - It may be given
three or four times a day - in doses of from
12 to 20 minims - I think I have a re-
ady as much upon exercise in the open
air as any thing else - A Gentleman of this
city told me he was a sufferer from this
disease & used iron, quinine & Styrax -
went to the Rockbridge alum springs last
Summer - sojourned there for some time & im-
proved rapidly - came back here & had his lungs
examined, & they are all right - He also says he takes
about $\frac{1}{2}$ oz whiskey three times a day - $\frac{1}{2}$ oz
peel after each meal & during the meal -

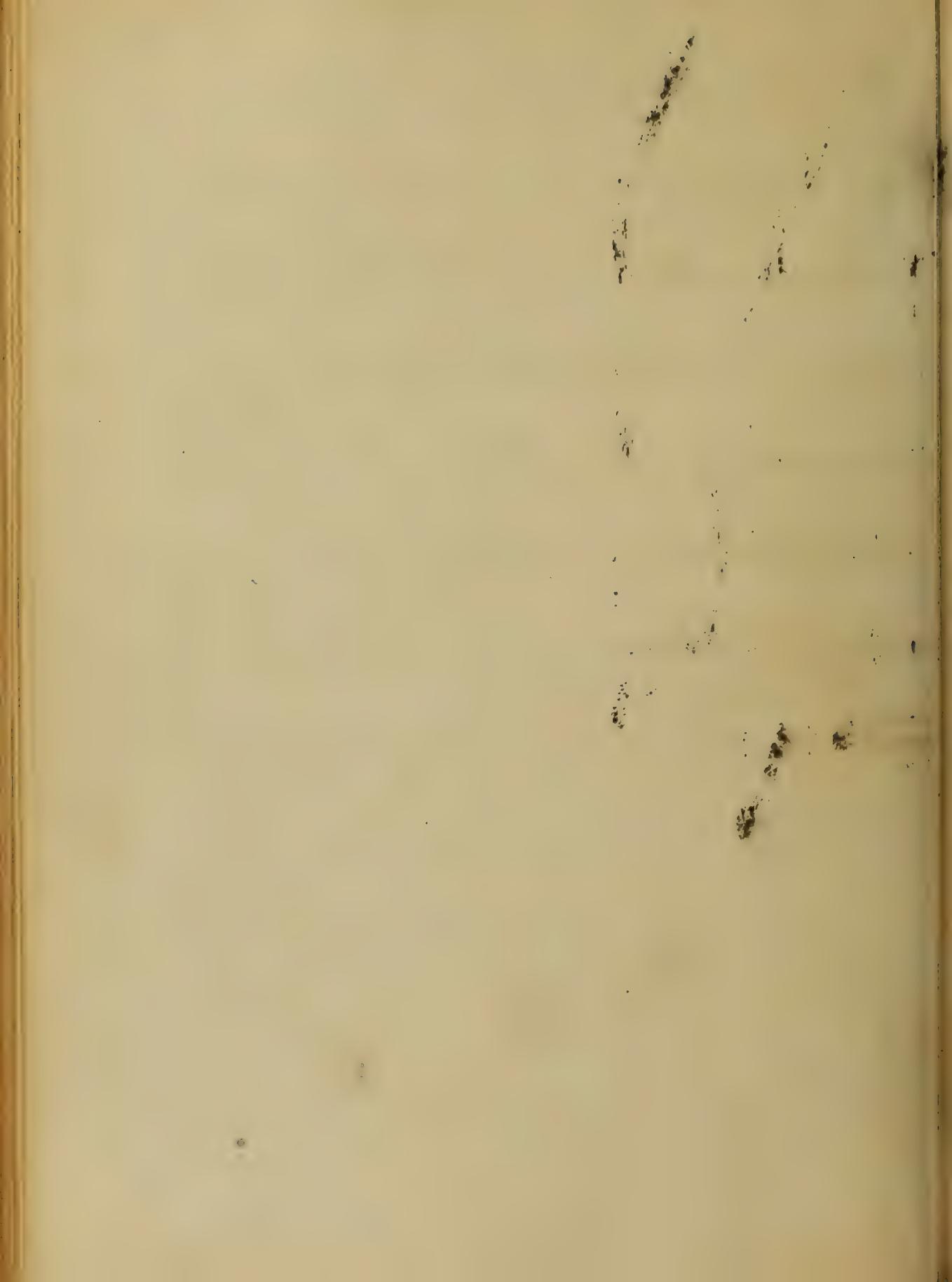






(32)

In writing this my Thesis - it has not been my aim to enter deep into details - for that doing that I would consume more time than I could conveniently spare - Hope however what has been written will be sufficient to satisfy the just demands ^{the faculty of} of the University of Indⁿ -



A N
Inaugural Dissertation
ON
*Thermometrical Nature of the Galvanic
Submitted to the Examination
OF THE
Provost, Regents and Faculty
OF*
P H Y S I C,

UNIVERSITY OF MARYLAND,

FOR THE DEGREE OF

DOCTOR OF MEDICINE,

By
WM. W. Early

Prince Georges Co. Md.

Session of Eighteen Sixty Seven & 1868.

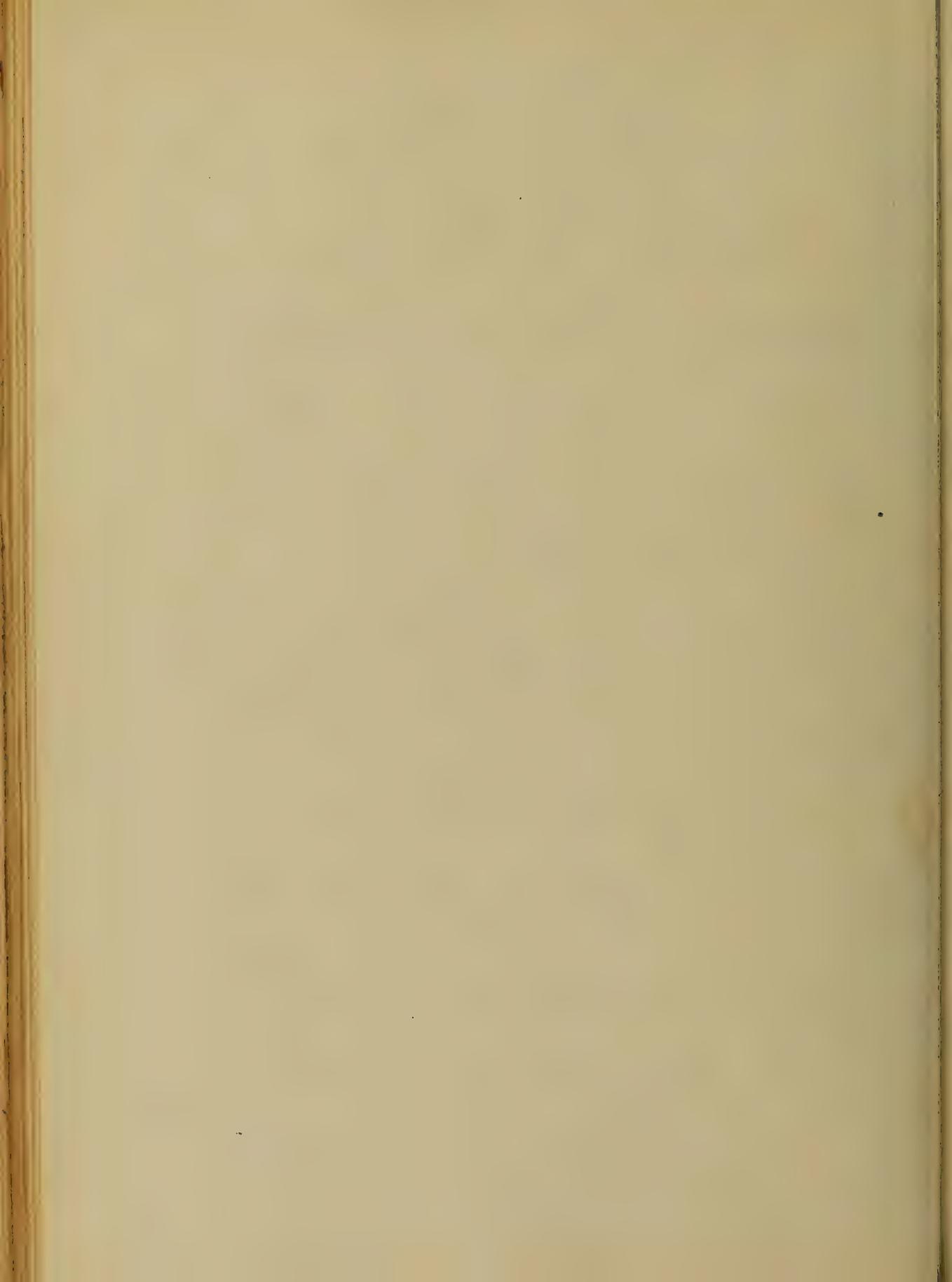
◎ 亂世之亂世

人間一夢，夢如人間。

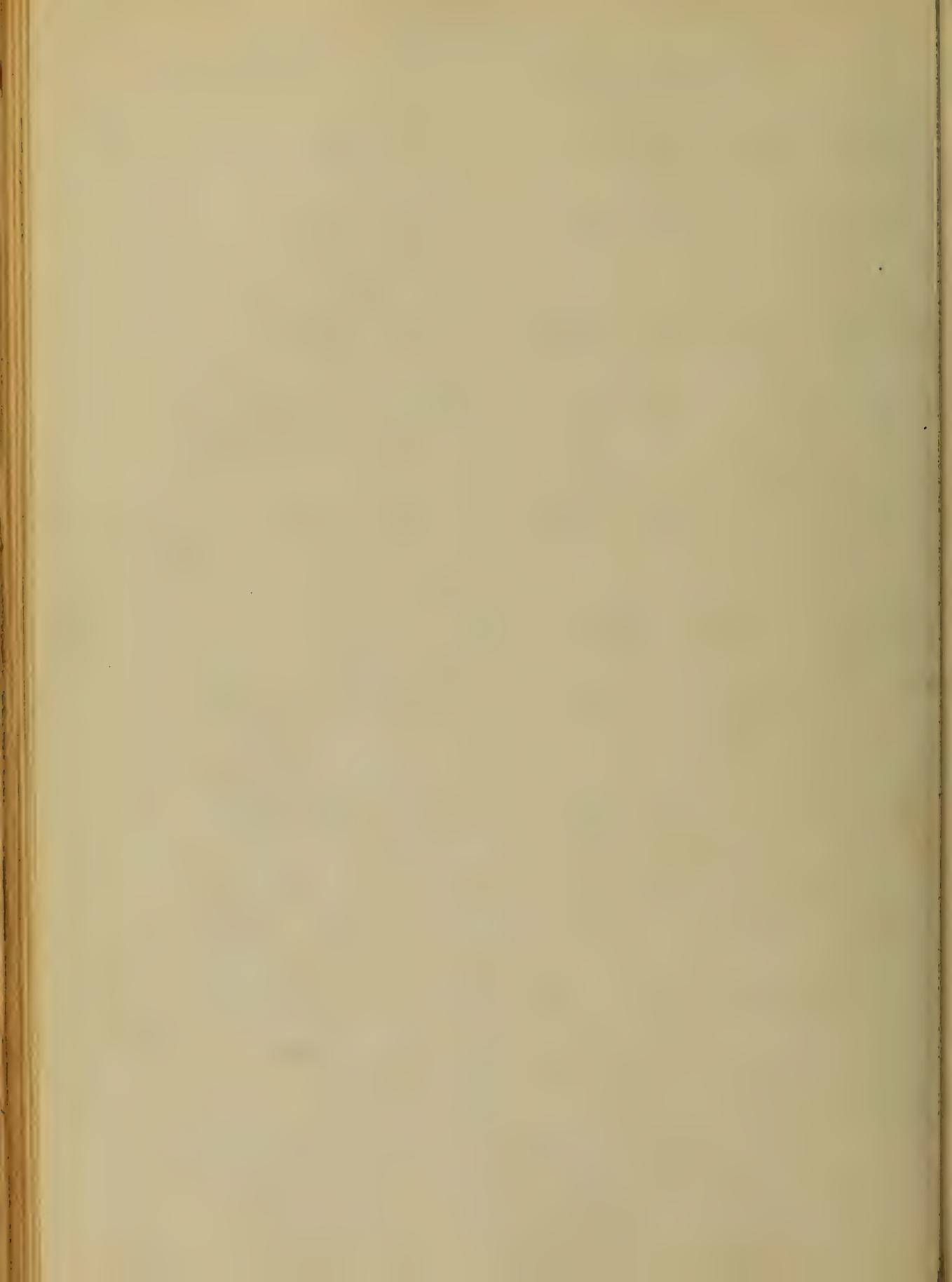
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Promarck's Stricture of the Urethra.

By this we are to understand a condition of the urethra in which there is a diminution of its caliper, due to an exudation of plastic lymph, the result of suppuration in some parts or parts of the mucous membrane of the urethra or its surrounding tissue, by which the parts become united, organized, and consolidated at the seat of disease. Strictures have received various significant names - such as the bridge stricture, the ribbon stricture &c. from the peculiarities of their pathological appearances.



this being however, a matter of
very little practical importance,
as it would be almost impossible
during life to distinguish the one
from the other. As regards the
most common seat of stricture there
is much difference of opinion
among surgeons, the membranous
portion being thought by some to
be the most frequent, whilst others
consider it less so, however I believe
it is now generally agreed that the
most most common seat of stricture
is the bulbous portion of the urethra
the membranous being next in
frequency- whilst the prostatic
portion is very rarely affected.

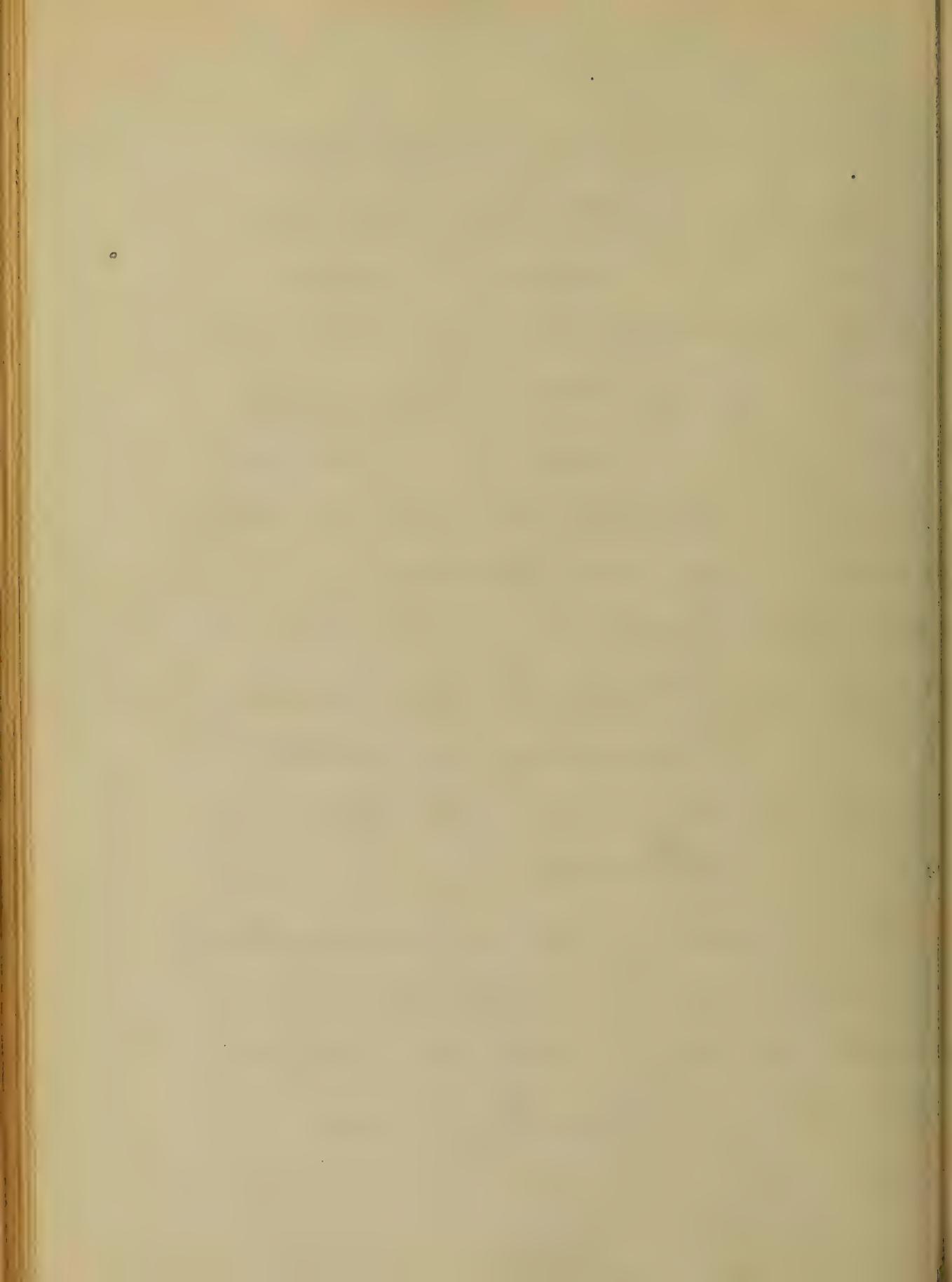


The extent to which the urethra is involved in stricture varies from a mere line to an inch, or more.

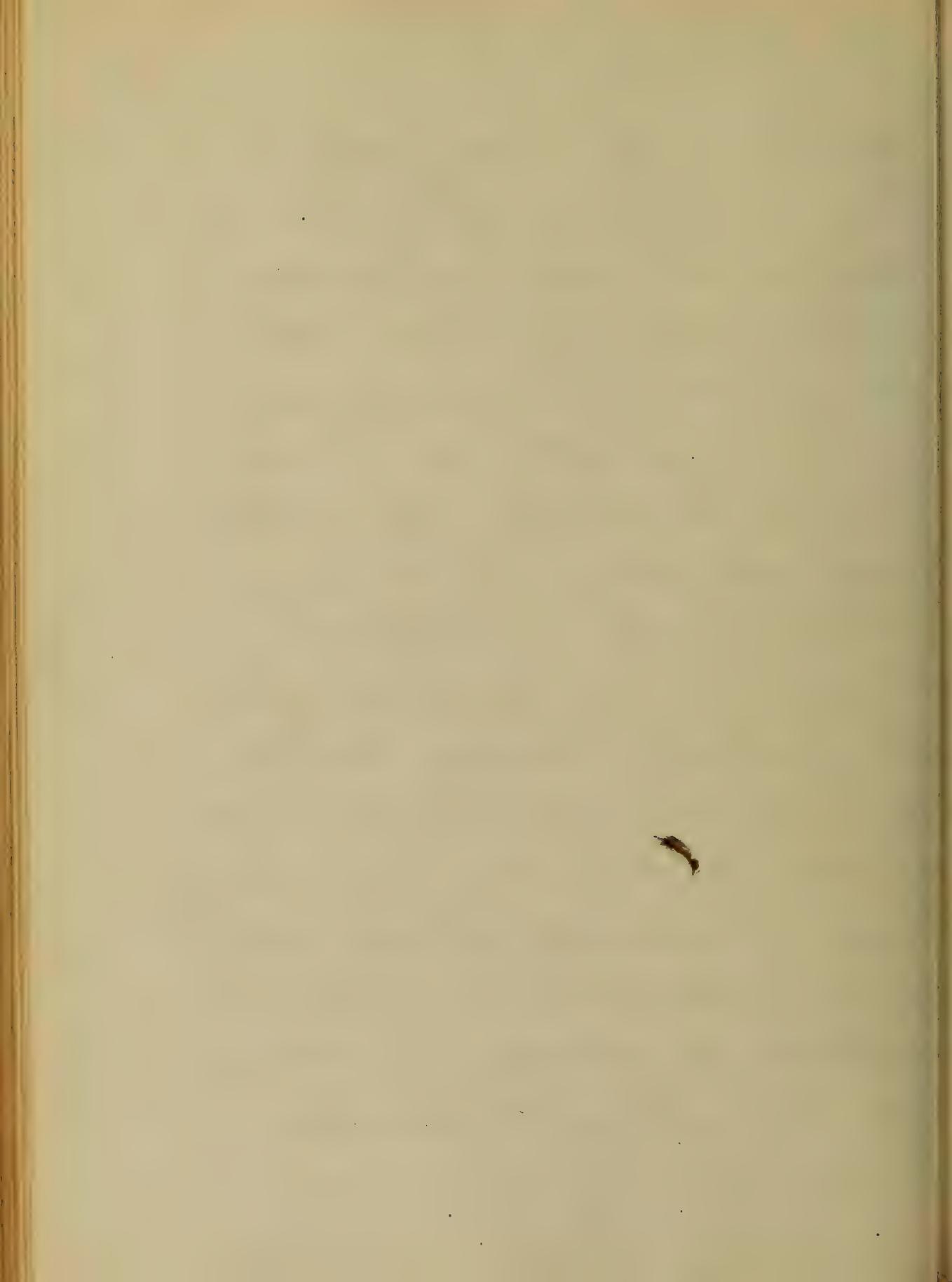
Urethral stricture is a disease almost exclusively of men being rarely observed in women from the fact that the urethra in males is long, narrow and complicated in its structure, whilst in females it is nearly straight wide and short possessing but little complication in its structure.

Causes.-

As I said in the beginning that stricture was the result of inflammation I might say that whatever produces inflammation of the

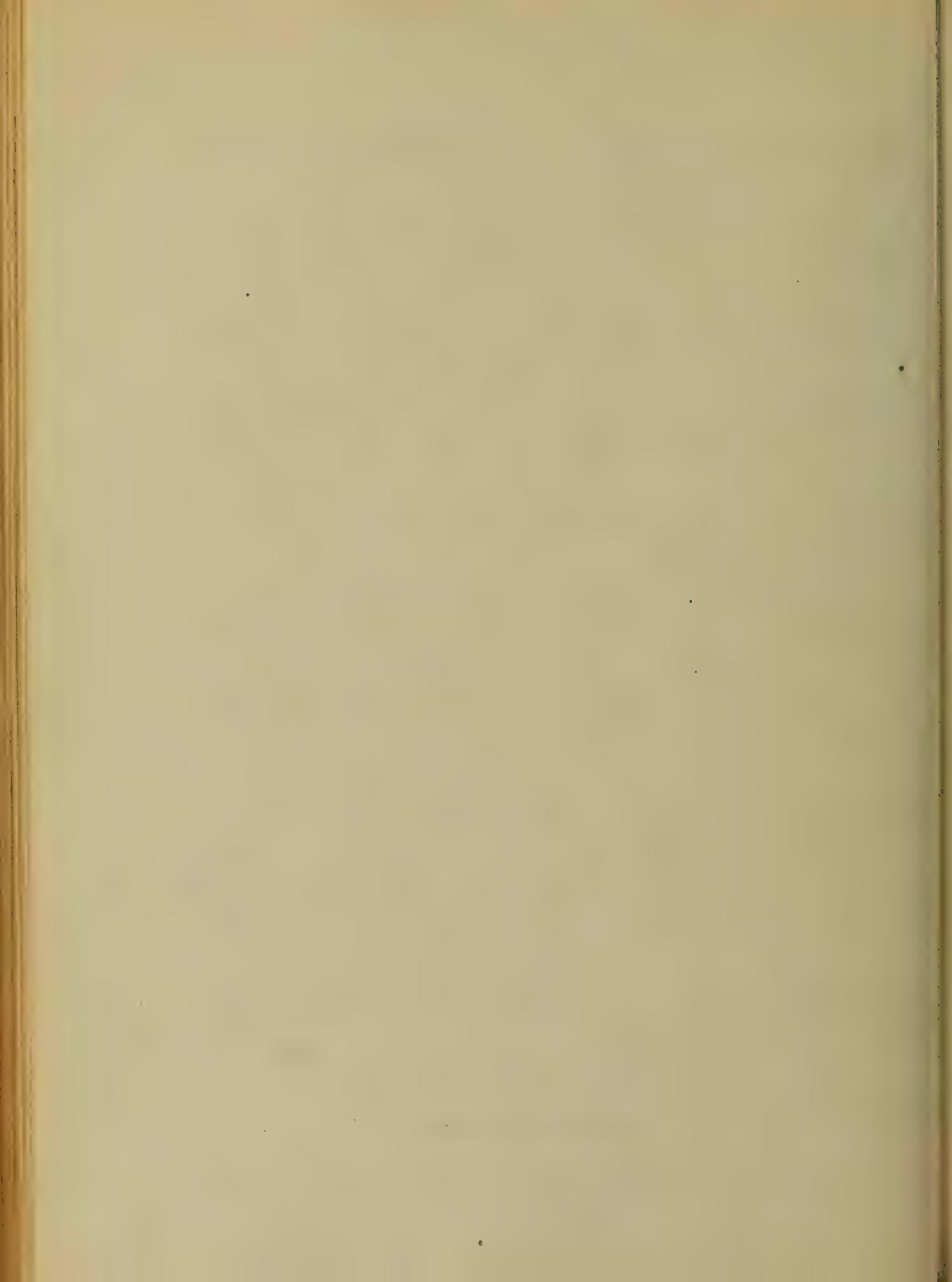


urthra may lead to the formation of stricture. Surgeons have divided the causes of stricture into predisposing and exciting. Among the predisposing causes I might mention age as one, persons between the ages of puberty and forty or forty five years are more liable to stricture than at any other period of life from the fact that during that time their sexual organs are in a state of activity. Another predisposing cause is climate. the inhabitants of warm climates are more predisposed to stricture than those of temperate climates because



They are more addicted to general gratification. There are certain states of constitution that predispose to stricture - persons of a sanguine, excitable temperament are more liable to stricture than those of a colder nature.

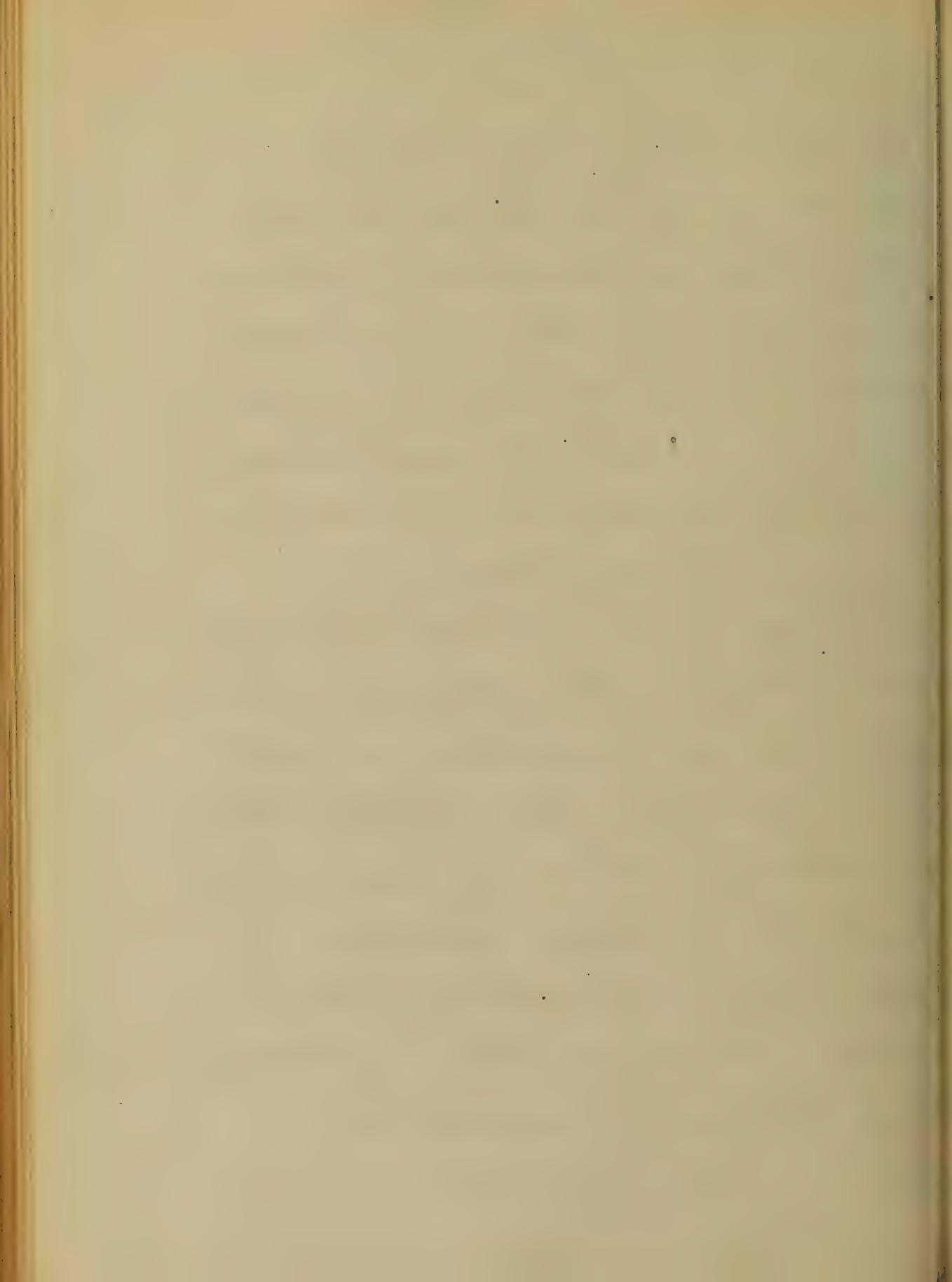
Among the exciting causes of stricture-gonorrhoea is one of the most influential and perhaps most frequent causes. Other exciting causes are - The continued discharge of unhealthy urine, practice of self-abuse, intemperance. Chancres occurring at the external orifice of the urethra are sometimes -



productive of very troublesome
strictures from the cicatrix, which
they leave after healing - the use
of strong injections of nitrate of
silver in the treatment of gon-
orrhœa - during the acute stage,
is often productive of stricture.

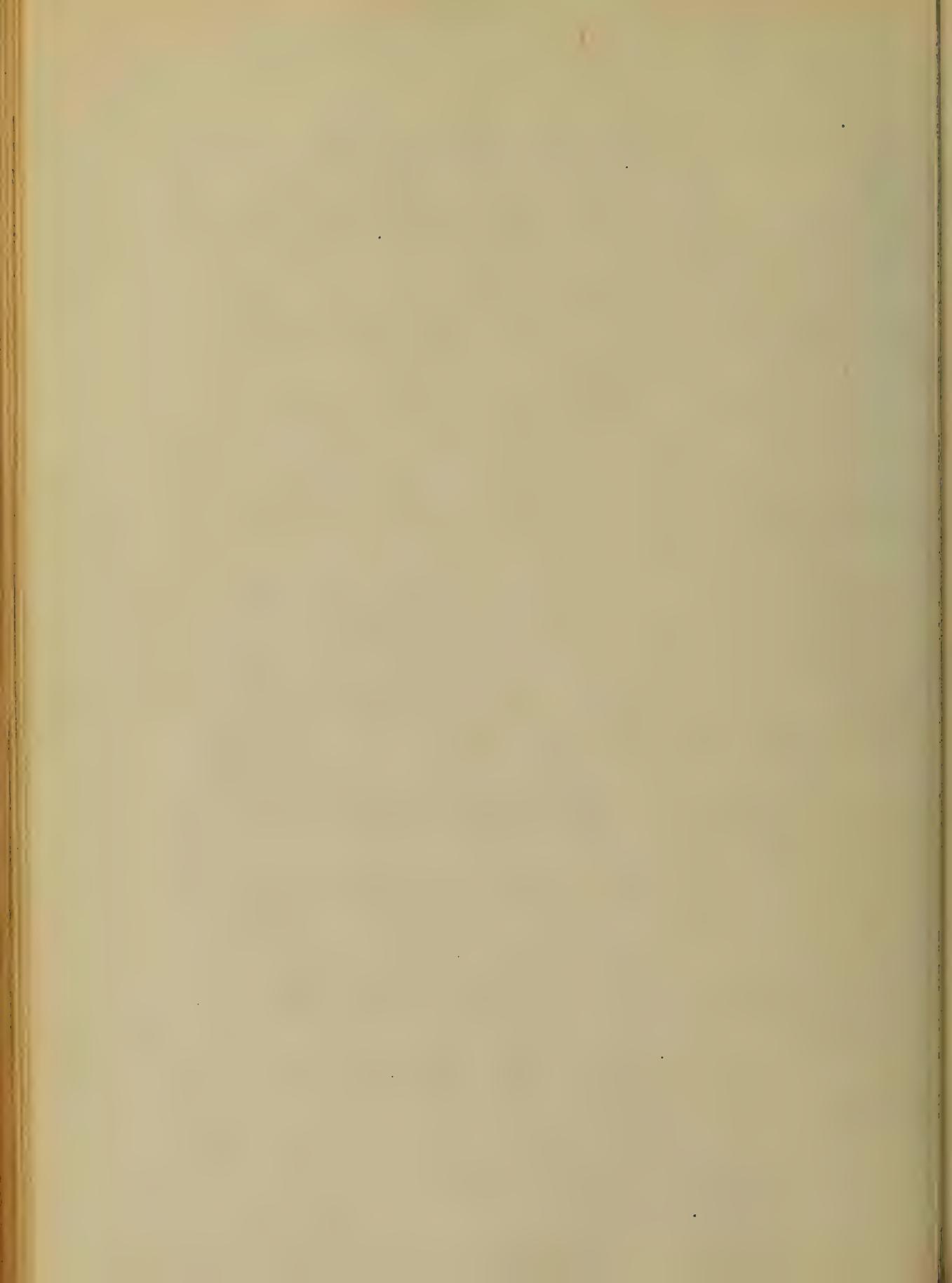
Symptoms:-

Perhaps the first symptom that
will attract the notice of a person
affected with stricture is, that
he experiences some difficulty
in starting the urine, and that
instead of being voided in a
full and sound stream as for-
merly - it is somewhat flattened
and the act of miction -



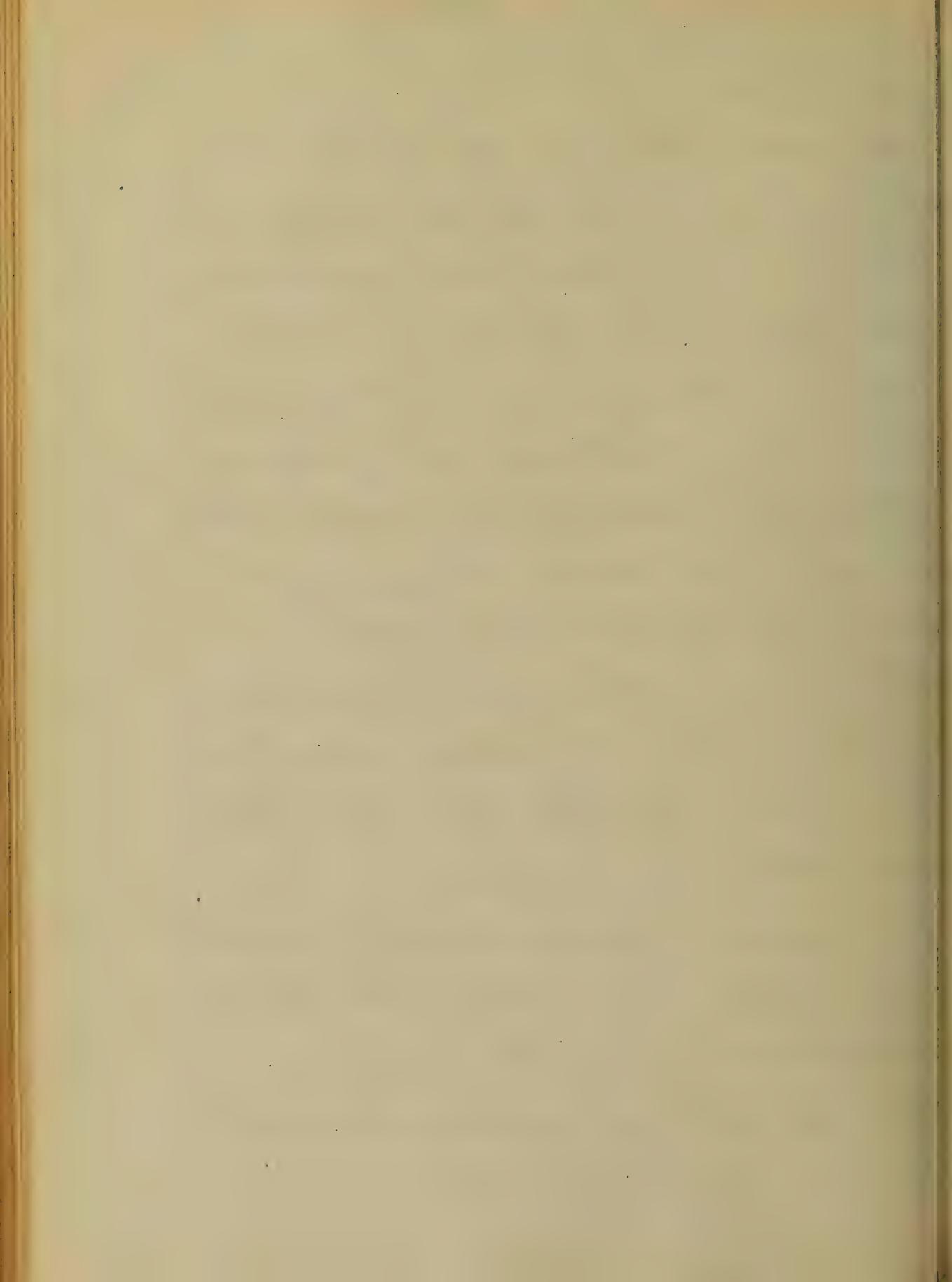
requires a longer time, and greater effort than usual - he will probably next observe a few drops of urine to hang in the urethra and dribble from him after the act has apparently been completed. As the contraction goes on in the urethra the stream of urine becomes bisected, scattered or twisted, at length the patient finds that the necessity of emptying the bladder becomes more frequent during the day and often compelling him to rise two or three times during the night for that purpose.

When the disease has progressed



considerable, and the urethra becomes very much contracted, the urine is expelled with great difficulty - either by drops or in a very small stream with much straining - calling into play very often the abdominal muscles, and in very bad cases there may be complete retention of urine.

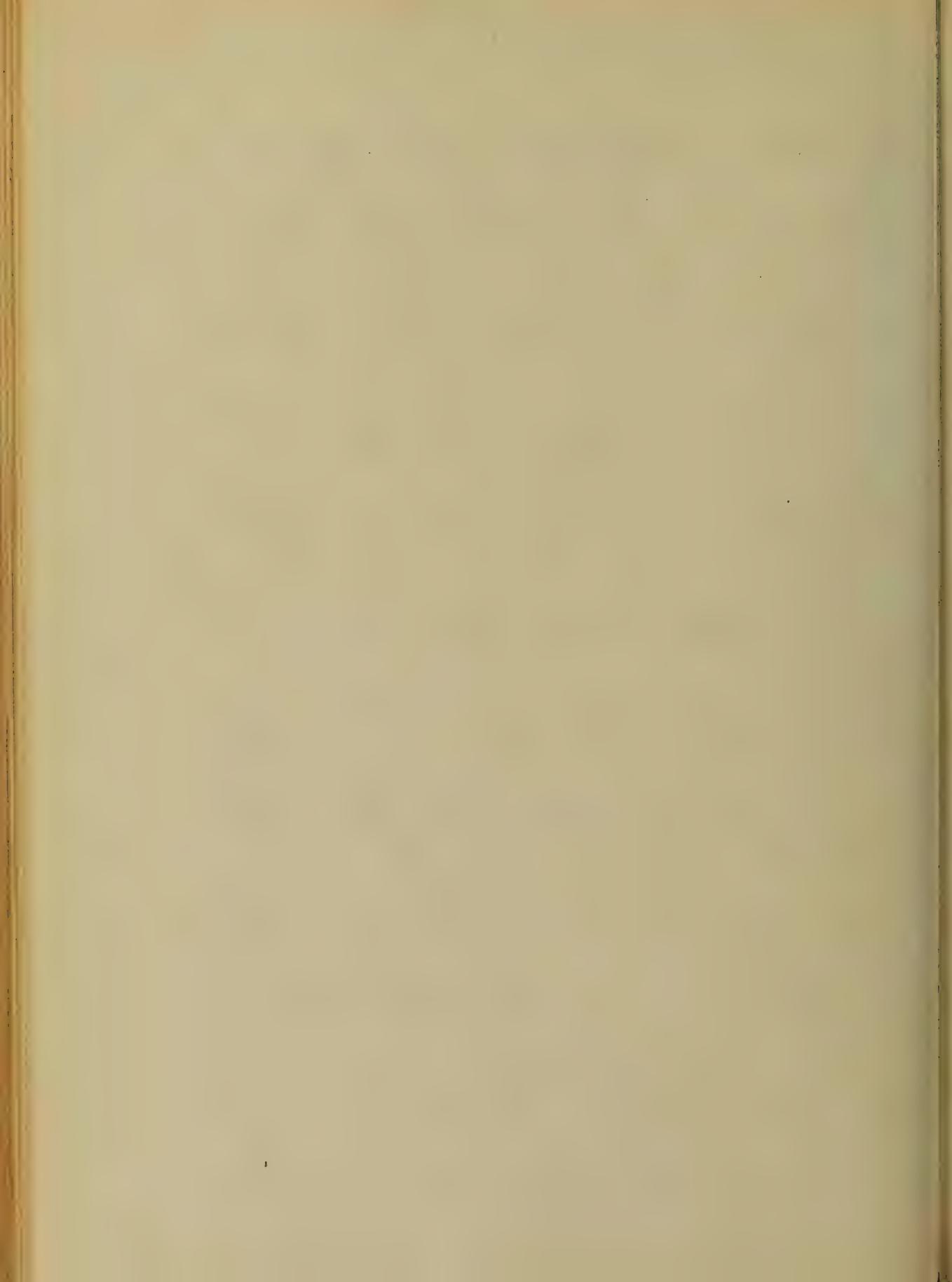
There are other symptoms connected with stricture, such as a gleet-like discharge - this being sometimes so profuse as to simulate gonorrhoea. Nocturnal emissions, pain about the penis, perineum and anus. Rigors are sometimes experienced by-



persons with stricture, and
have been mistaken for ague.

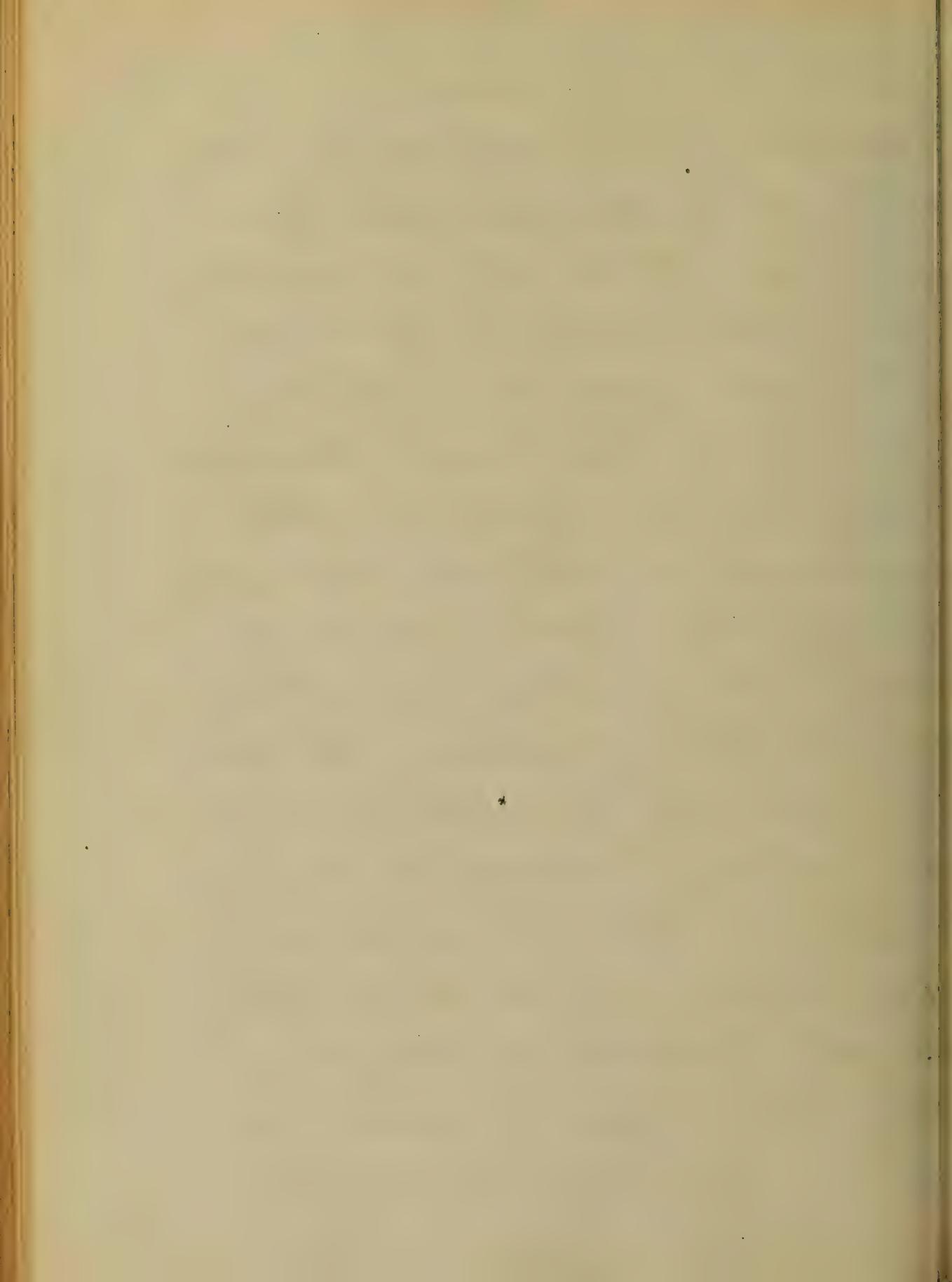
Finally, if the disease is allowed to go on unchecked, the tendency is, sooner or later to impair the general health.

The disease which had existed in the urethra alone, now becomes complicated with disease of the bladder - the mucous membrane of the bladder takes on a low form of inflammation from the irritation produced by too long retained urine - and then the constitution of the patient begins to be impaired, and if the obstruction existing in the



urethra be not removed a fatal result is the inevitable consequence. Although the symptoms that I have enumerated are in themselves generally sufficient to make out a correct diagnosis they are not regarded as pathognomonic - as there are some affections of the urinary organs in which the symptoms resemble very much those of stricture. In order to make out a positive diagnosis we must resort to some instrument with which we can explore the urethra - such as the Catheter or Bougie.

By this means we ascertain -



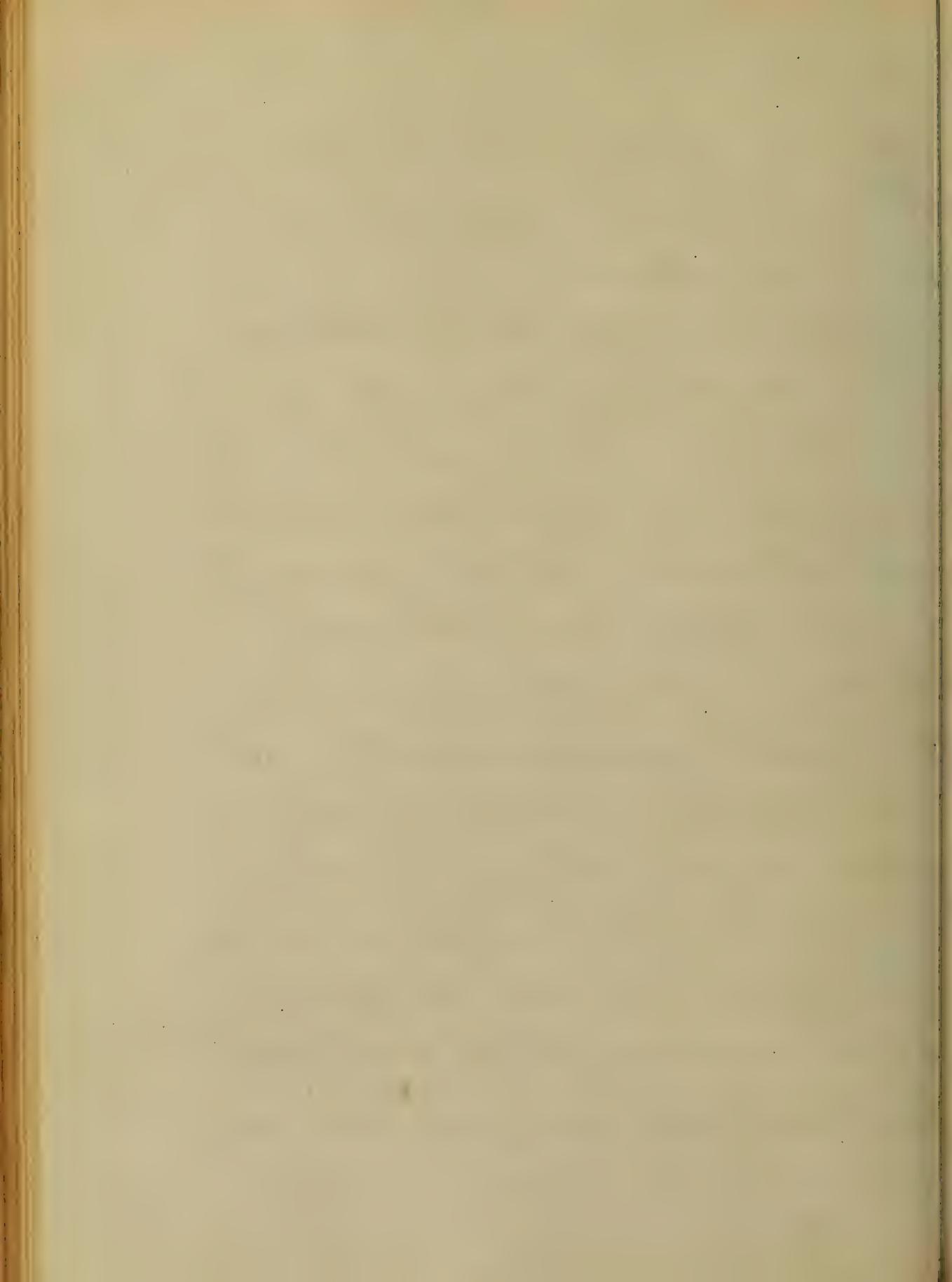
not only the existence of a stricture,
but also its seat and extent as well
as its consistence.

Anatomy of the Utricle.

The urethra is the membranous
canal which extends from the neck
of the bladder to the meatus-urina-
rius. It varies in length from eight
to nine inches, and is curved in
its course - the concavity looking
towards the symphysis-pubis.

Anatomists make three portions
of the urethra - the spongy, the mem-
branous and the prostatic, so named
from their anatomical structure.

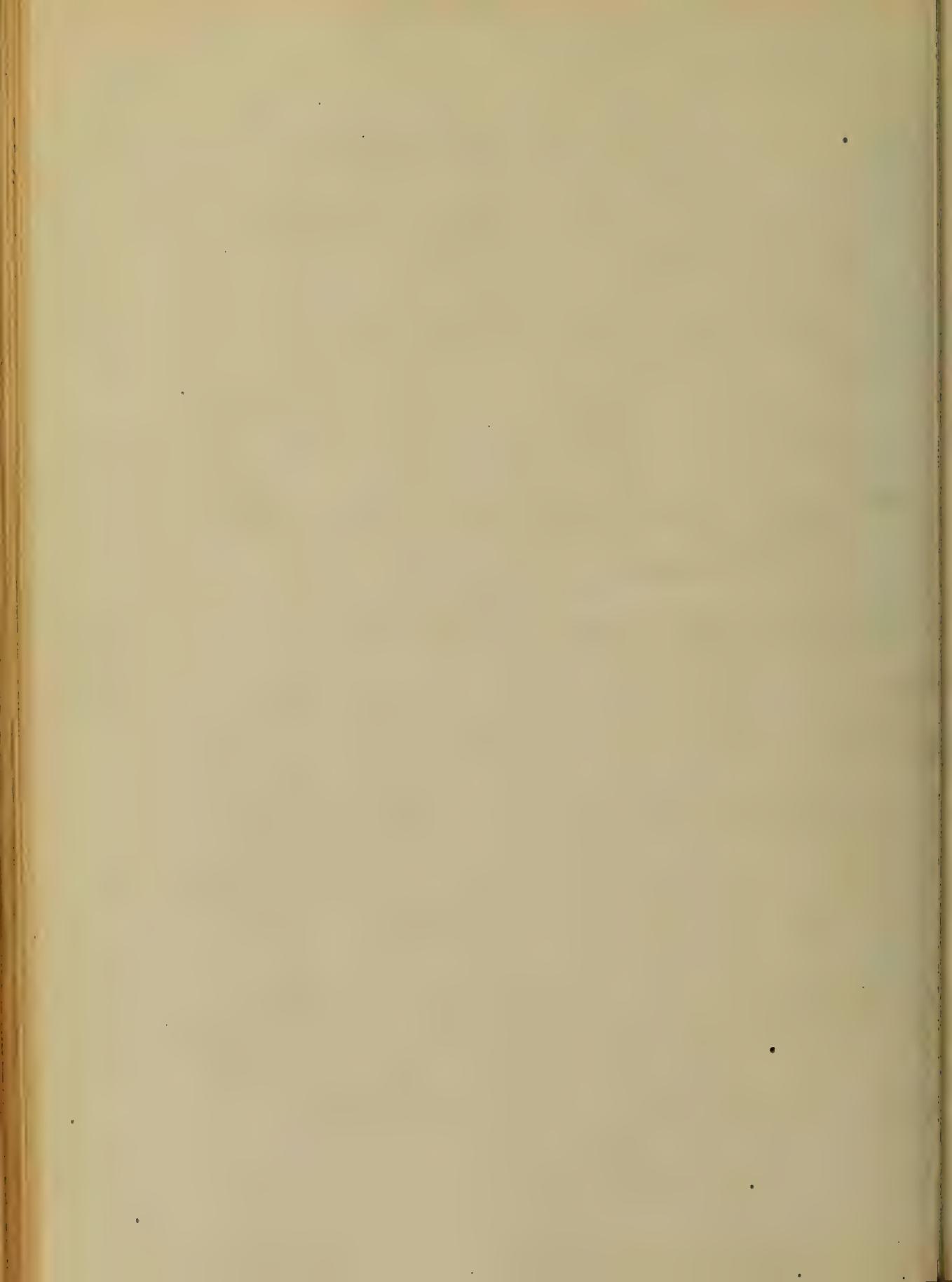
By some anatomists the part of the
corpus-spongiosum is considered



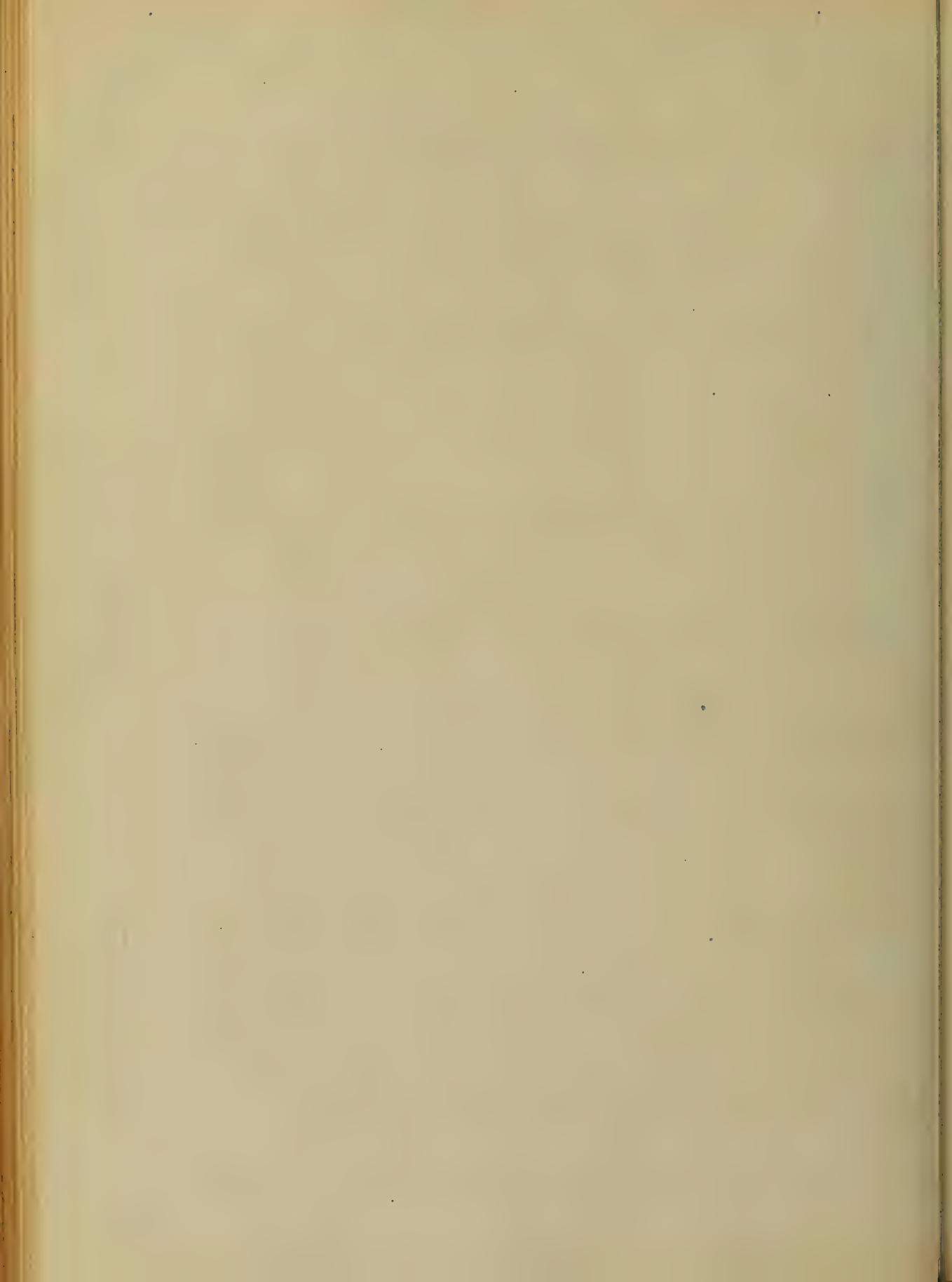
as forming a portion of the urethra, and thus they make four portions instead of three.

The urethra consists of three coats, a mucous, muscular and erectile - The mucous is continuous with the lining mucous membrane of the bladder internally, and with the covering of the gland penis externally - The muscular coat is divided into two layers of muscular fibres - an external layer which is arranged longitudinal and an internal layer circular.

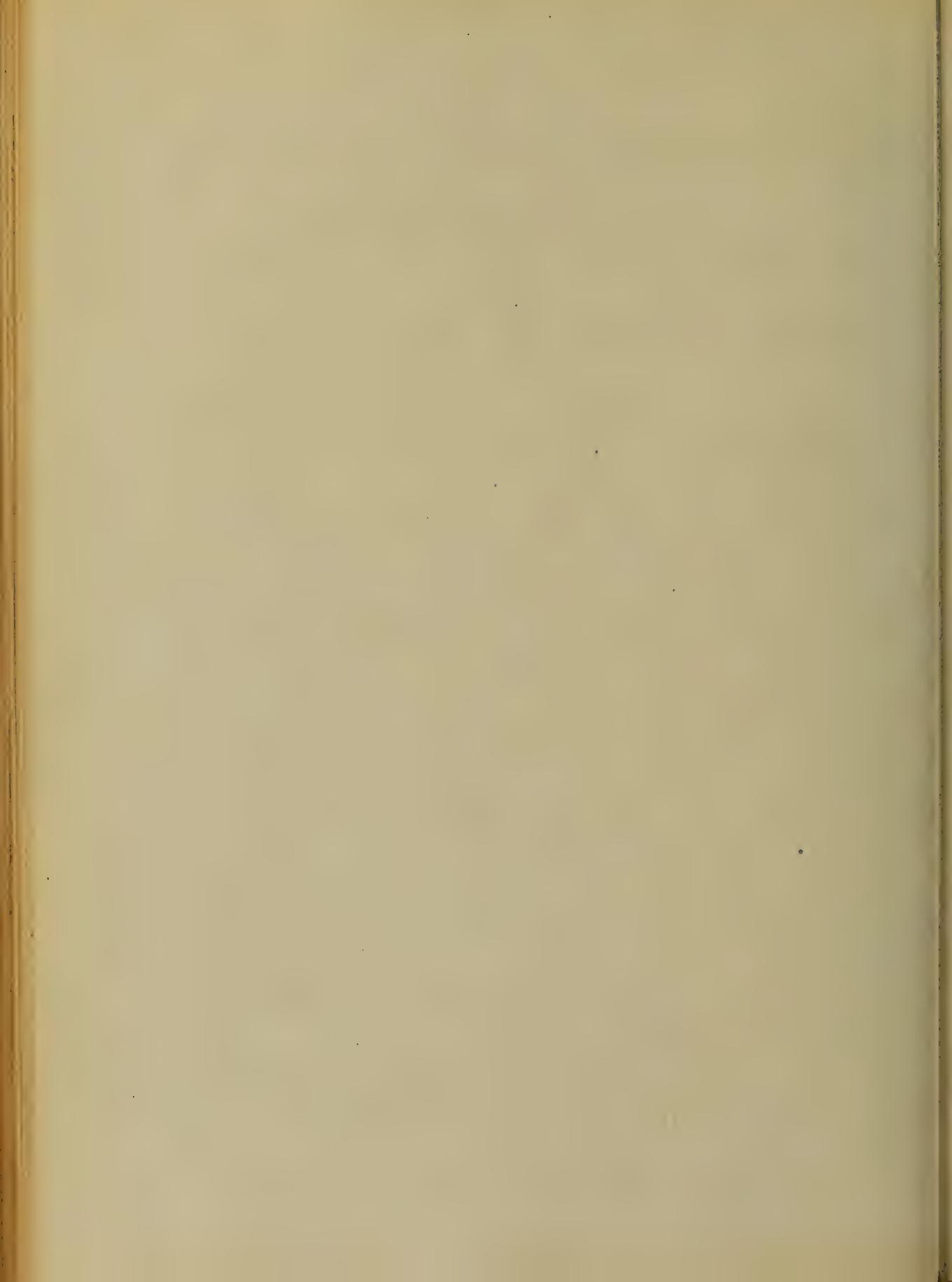
The fifth part of the urethra or the prostatic portion, so named from perforating the prostate -



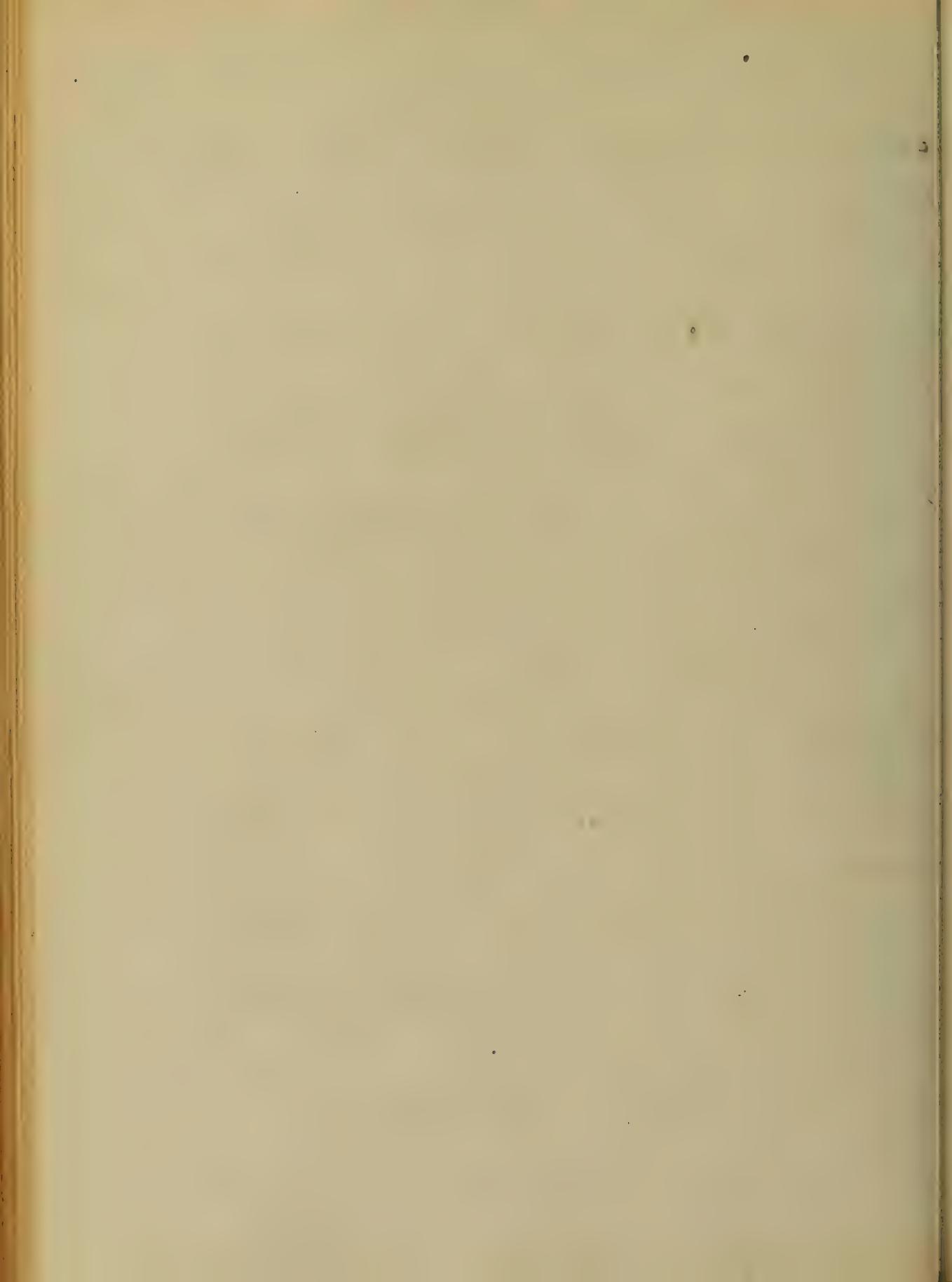
cland, measuring about an
inch and a quarter in length,
and is spindle-shaped. In this
we find running along the lower
portion a ridge formed by an
elevation of the mucous membrane.
The venae comitum, in front of this,
is a depression, the sinus pro-
ularis and within it opens the
ejaculatory ducts. On either
side of the capsule gallinaceous
is a depression, in which are the
orifices of the prostatic ducts.
The neck portion of the urethra
is the membranous - it extends
from the anterior part of the
prostate to the bulb of the



corpus spongiosum, and measures about three quarters of an inch along its upper, and half an inch along its lower surface, in consequence of its being slightly curved at its under surface by the bulb. With the exception of the external muscles this is the narrowest part of the canal. It perforates the triangular ligament, and is surrounded by loose tissue, and some muscular fibres which bear the name of Wilson and Lubbock by whom they were first described. The epigastric portion, so called from the sponge-like



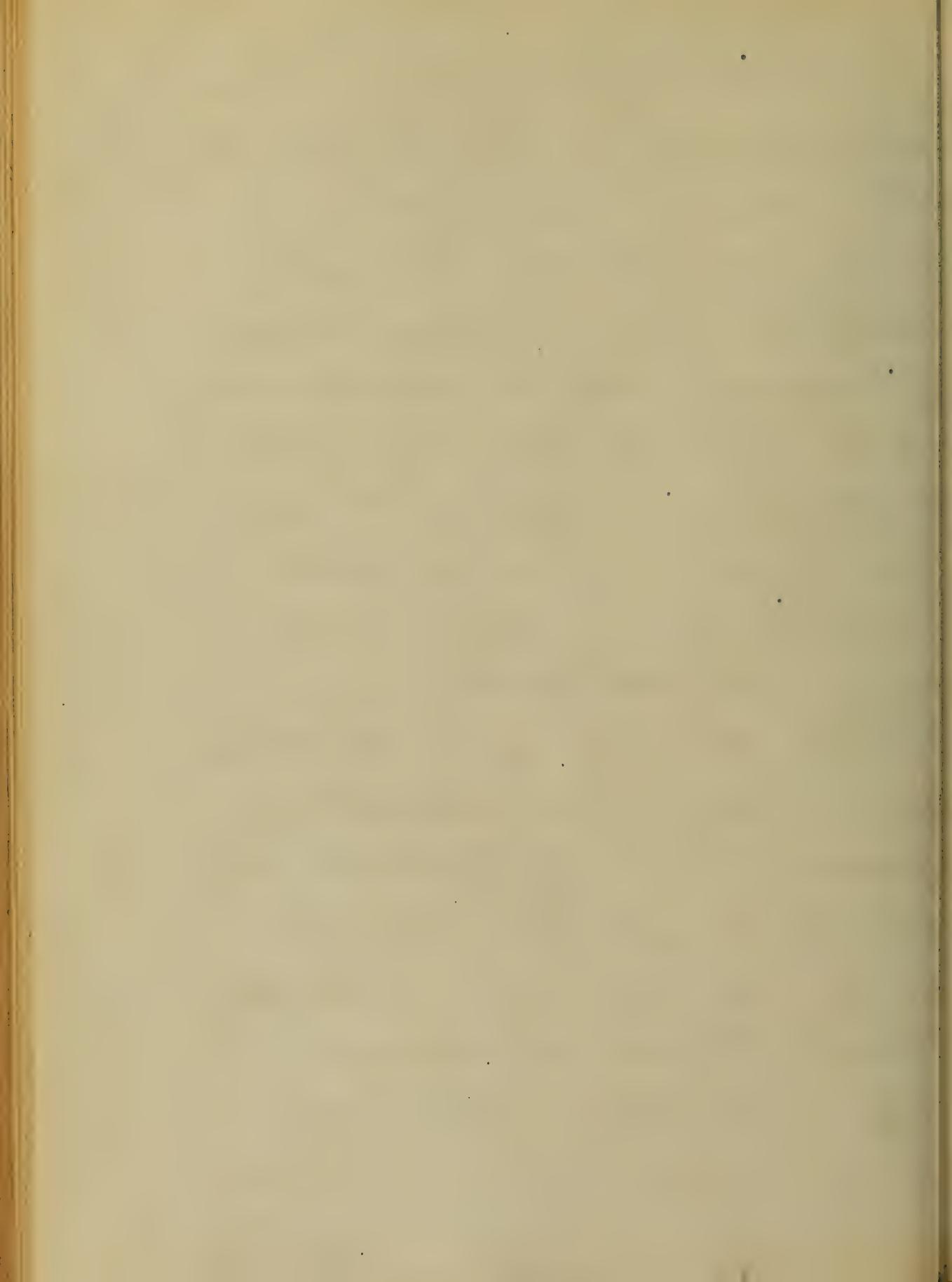
erectile tissue in that part of the urethra, extends from the termination of the membranous portion to the external meatus, and is about six inches in length. This portion is dilated at the commencement, forming the bulb, and at its termination forming the fossa nasiularis. Along the whole length of the spongy portion there are a number of minute openings - the orifices of numerous mucous glands and follicles. Within about half, or one third of an inch from the external-meatus - on the upper -



surface of the vertebra is situated
the lacunar-magna-this, very
often interferes the point of a
catheter in its passage along
the canal, and should be avoid-
ed by keeping the instrument
to the lower surface of the ver-
tebra for about two-thirds of its
length.

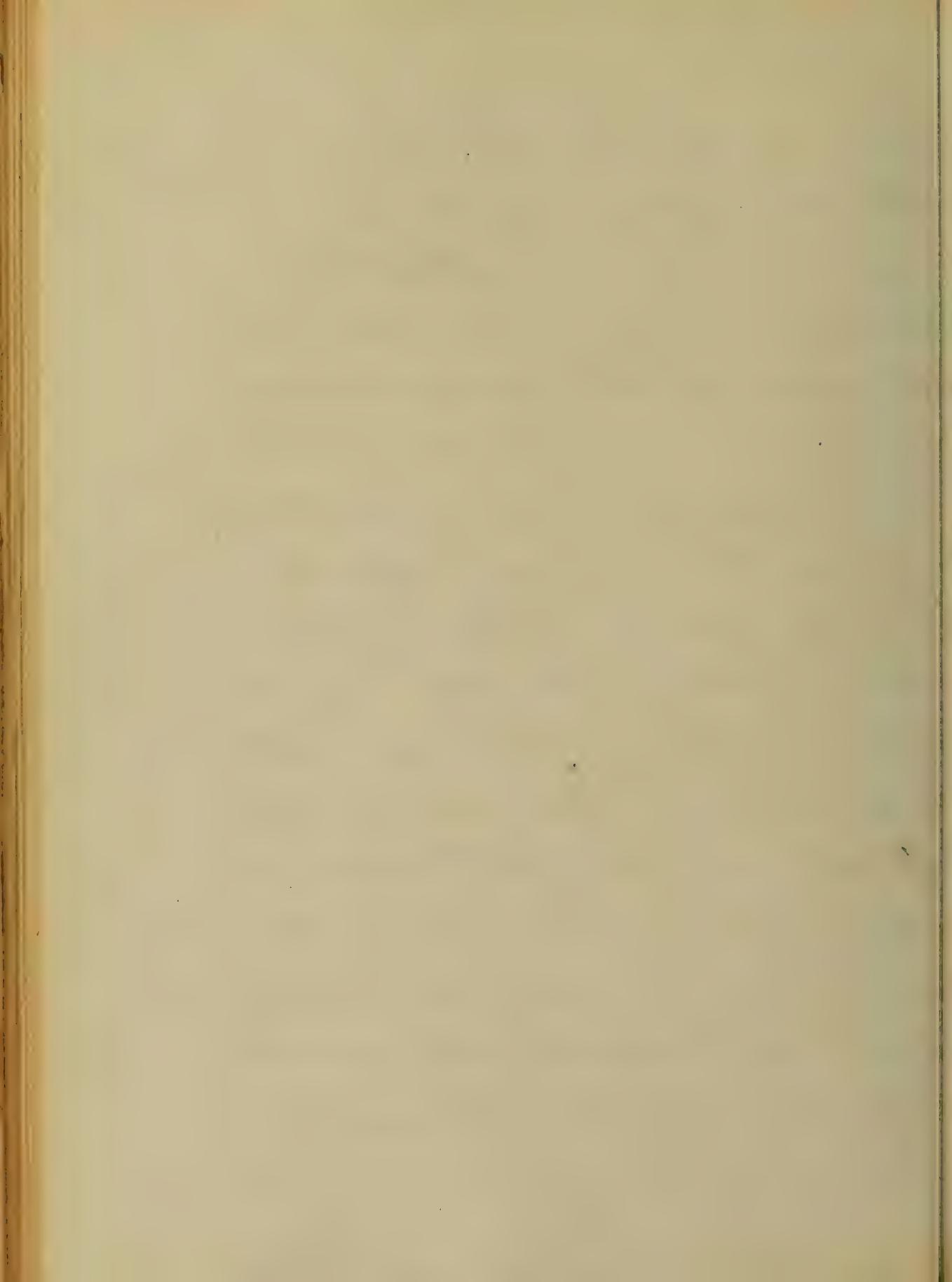
Treatment.

From the frequency of this disease
and the severe form it sometimes
assumes, it has of late attracted
the attention of the best surgeon
of the day, and well I understand
to describe the numerous
and complicated instruments.



invented by them for its relief.
The description would be, I am
sure, no less exhausting to the
patience of the writer, than the
perusal of this essay would be
to the reader; and ^{it} will be
of no real practical importance.

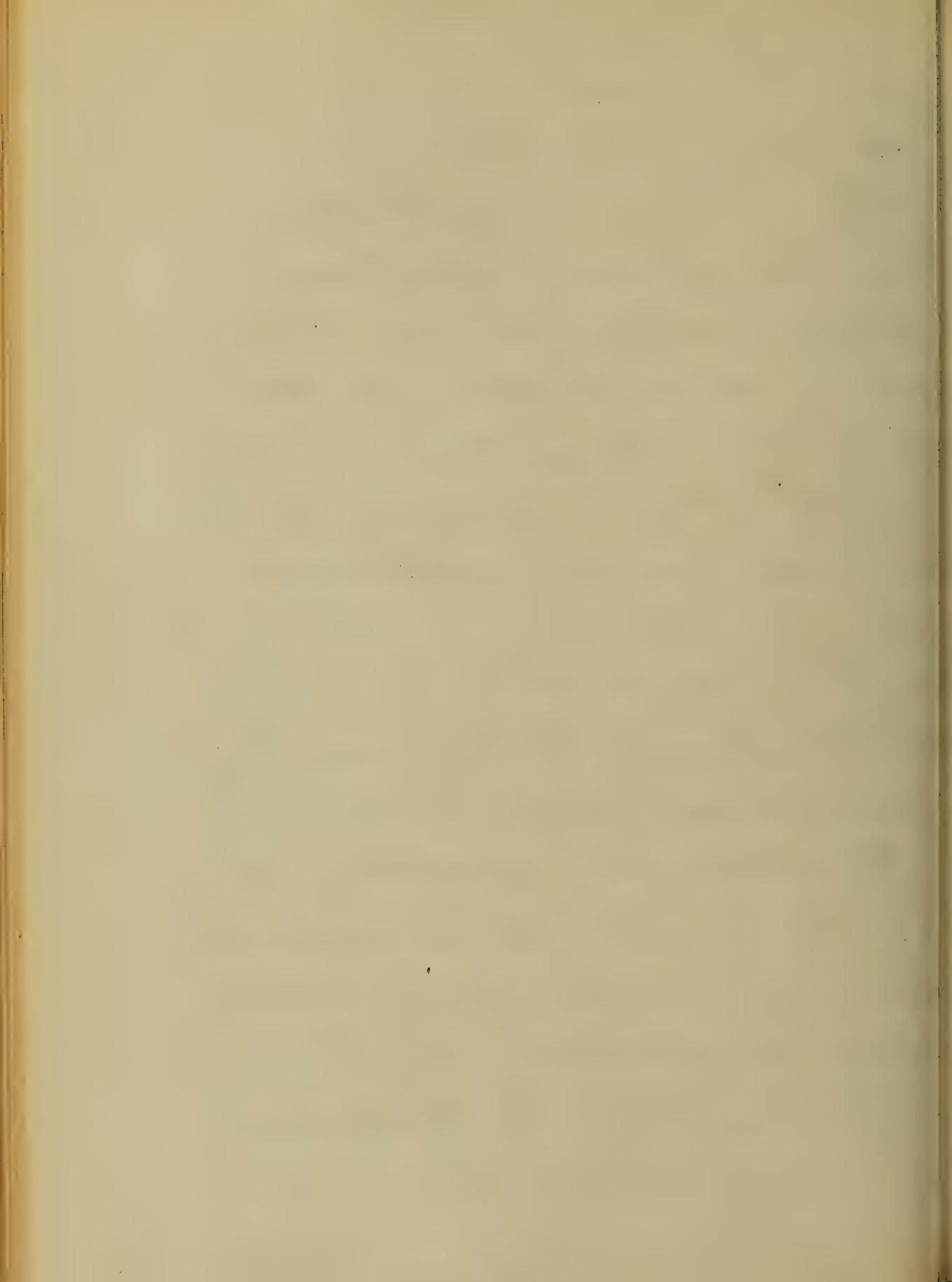
It is therefore, not my inten-
tion to occupy these pages
with a detailed account of the
various instruments and modes
of treatment adopted by dif-
ferent surgeons, but shall re-
strict myself to a brief de-
scription of such methods of
treatment as observation and
experiment has proven to be-



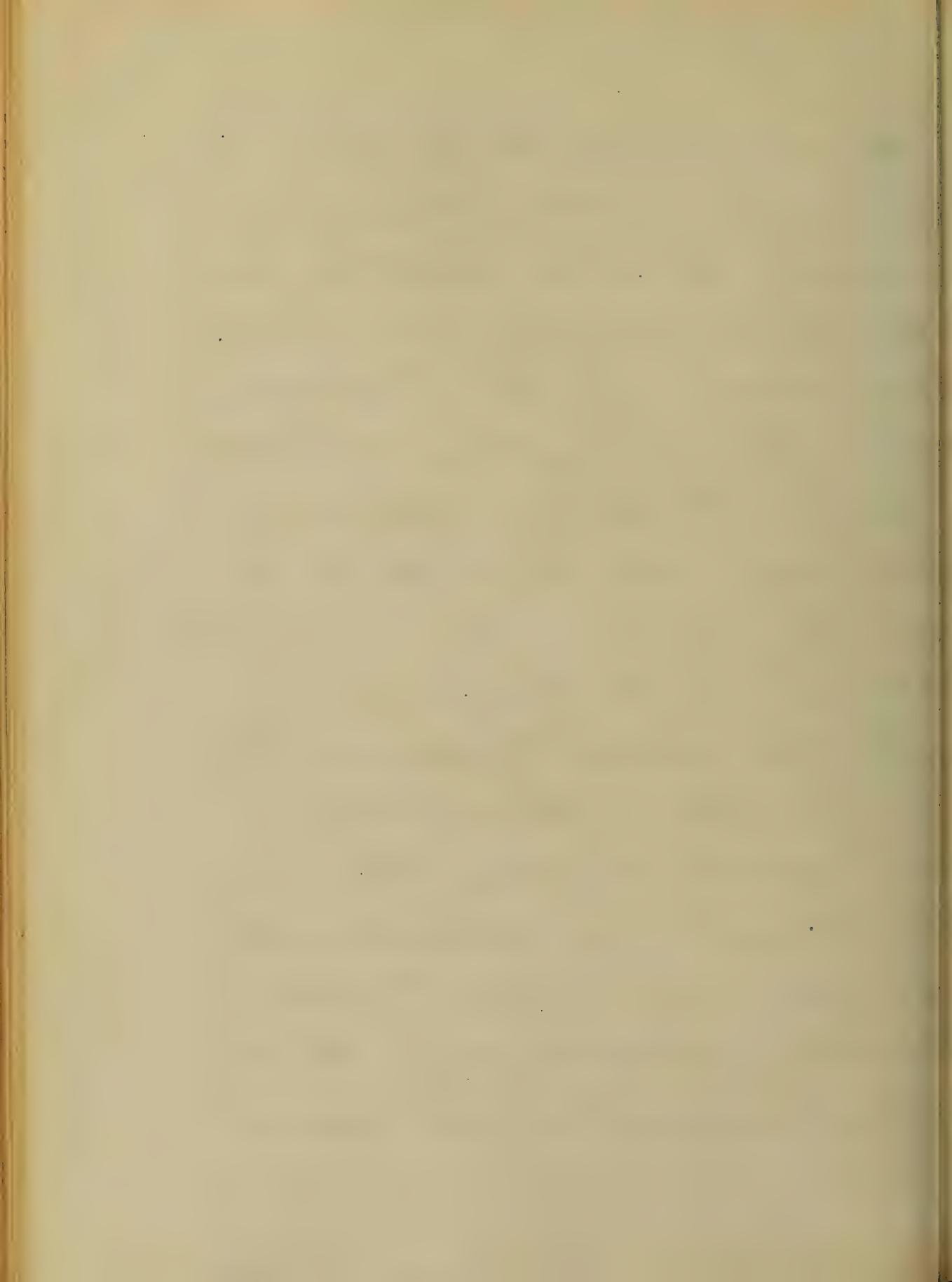
the most successful.

The treatment of strictures are both general and local -
by general I mean such med-
icines should be given as tend
to improve the patient's general
health, allay irritation and help
the urine pass as healthy condi-
tion as possible.

The local treatment, which is
the most important - consists of
mechanical means, such as -
Dilatation - The application of some
caustic agent to the diseased por-
tion of the urethra - or by a divi-
sion of the stricture. The first
method or that by dilatation -

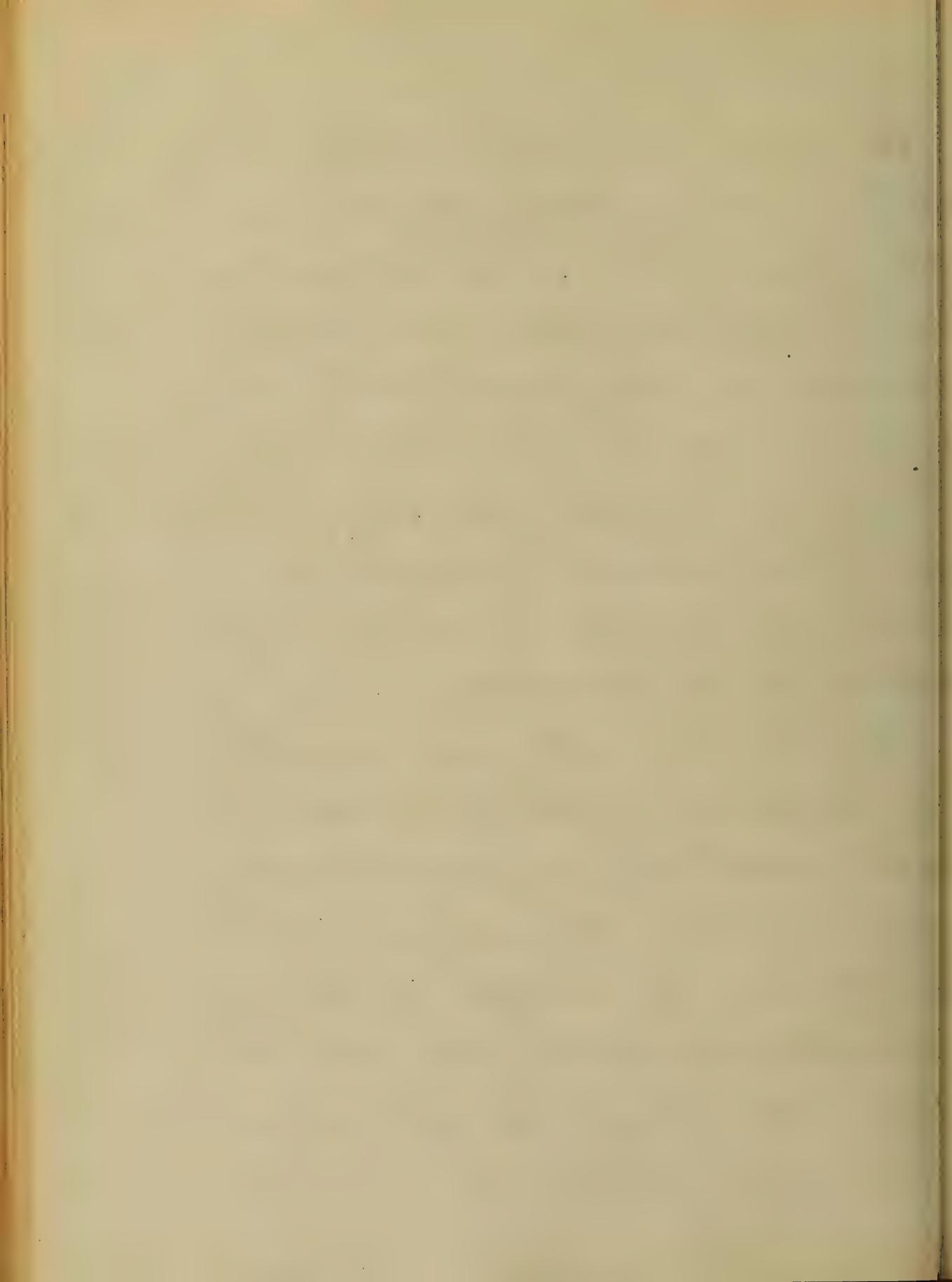


is the best and the one now
generally resorted to by surgeons.
Indeed the other methods may
be considered only as aids to
dilatation, as without dilata-
tion they accomplish but little
good. Dilatation is affected in
two ways - either by the bougie or
couch. which is a slow and grad-
ual process - or by means of ex-
panding instruments - Special Dilat-
ers as they are termed - which ef-
fect speedy dilatation. These are
to be used at the discretion of the
surgeon. The simplest means of
dilating a stricture is by the use
of the ordinary bougie, and in-

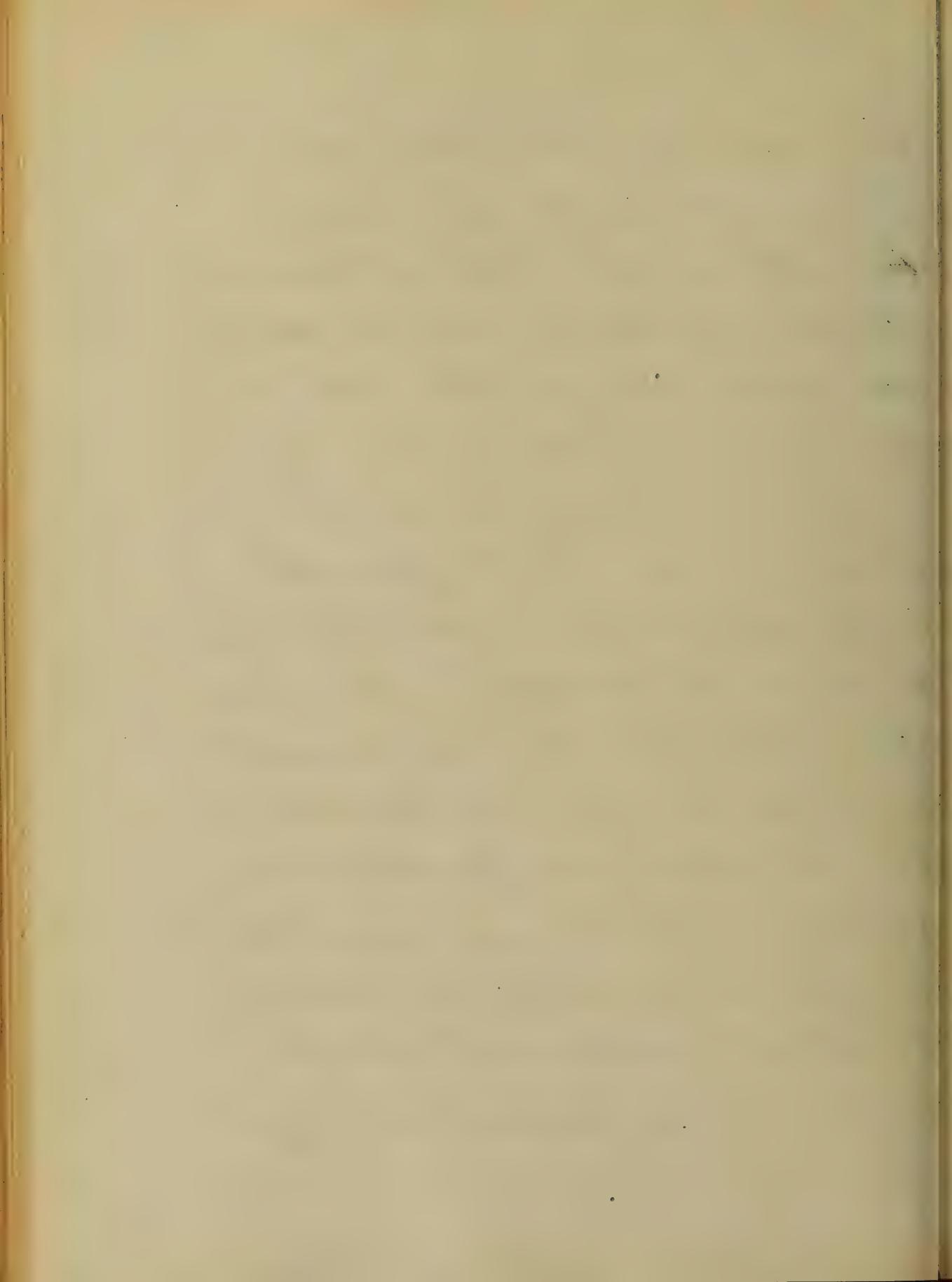


the great proportion of cases
this is undoubtedly the best meth-
od of procedure, as it involves
very little danger to the patient,
and in nine cases out of ten will
effect a cure - indeed I believe
there are very few cases of stric-
ture that will not yield to this
plan of treatment when it is
properly conducted.

The instruments used mostly
in dilatation of strictures are bou-
gies, catheters and solid me-
tallic sounds; according as the
stricture is of a soft yielding
character, in which case we em-
ploy the bougie; or of a hard-

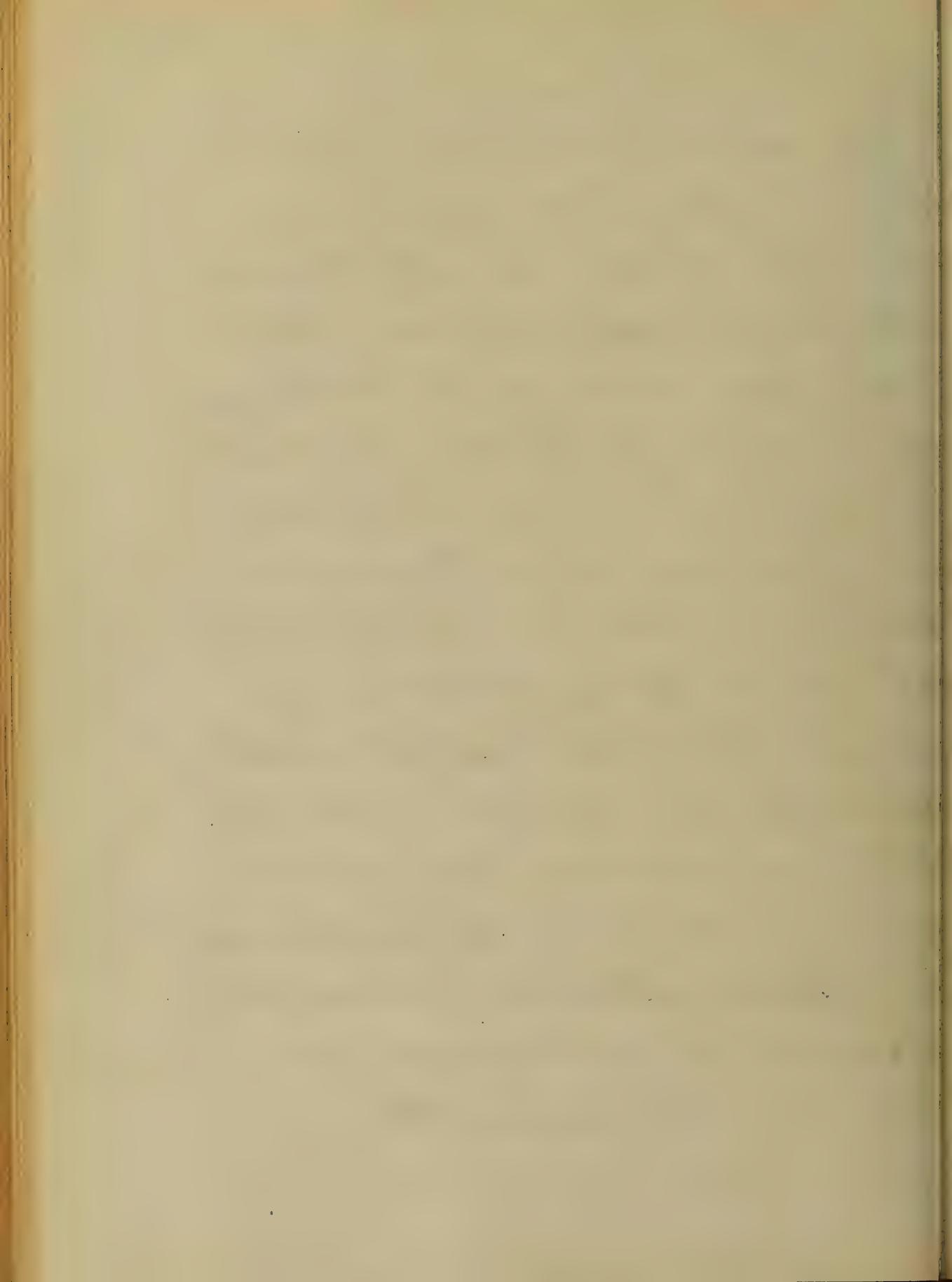


Cartilaginous character, when
we use the metallic sound as
being preferable. In introducing
these instruments into the urethra
we are to use all possible gen-
tleness and caution - bearing in
mind constantly the anatomy
of the parts. No forcible
and unscientific attempt ~~should~~
be used to stretch a diseased
and sensitive part of the ure-
thral canal - as has been done
by inexperienced practitioners -
which is the abuse, and not the
proper use of this most admira-
ble of all methods of healing.
the generality of urethral strictures.

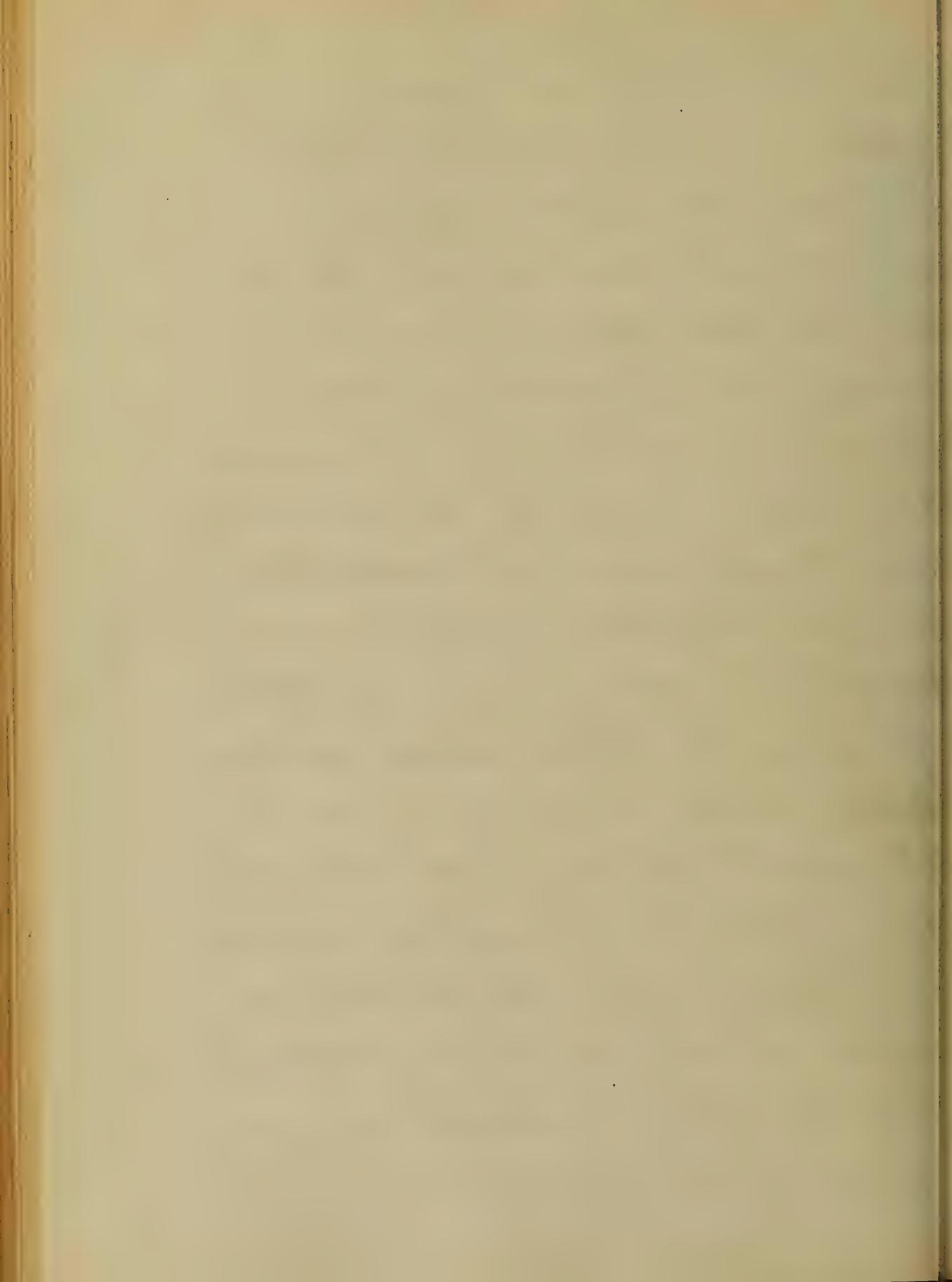


We should not be over anxious to accomplish too much at once, but devote the requisite time and attention to each and every case.

In commencing the treatment of a case of stricture (by simple dilatation) we select at first an ordinary size bougie, one that will readily enter the orifice of the urethra, and having previously oiled it to facilitate the entrance, we draw it through the hand several times - to make sure of its being perfectly smooth and then gradually pass it into the urethra, and through the stricture, if possible. -



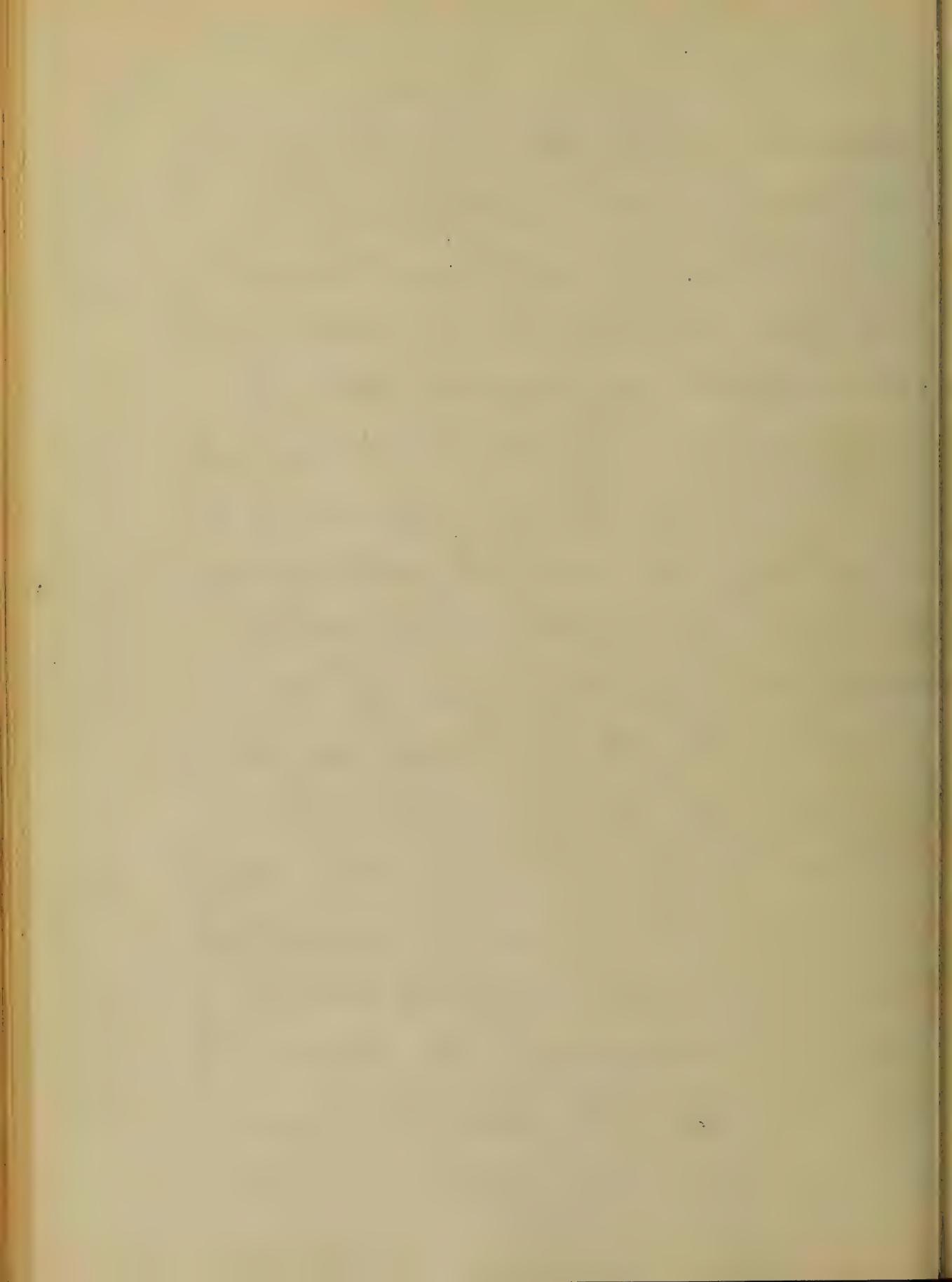
if however this cannot be done,
we should select a smaller
size bougie, and so on, until the
one selected should prove small
enough to pass through the
stricture without much pressure.
In cases in which the smallest
size bougie cannot be made to pass,
we may sometimes employ suc-
cessfully a small silver catheter
or sound. When once we have
succeeded in passing an in-
strument through the strick-
ture, it should not be removed
immediately, but allowed to re-
main in the urethra for from
five to thirty minutes or more.



according to the degree of irritability of the urethra. This will have a tendency to diminish the morbid sensibility of the stricture and facilitate the reintroduction of the instrument. The size of the bougie is to be gradually increased, after having passed one, until we succeed in restoring the canal of the urethra to its normal size or nearly so.

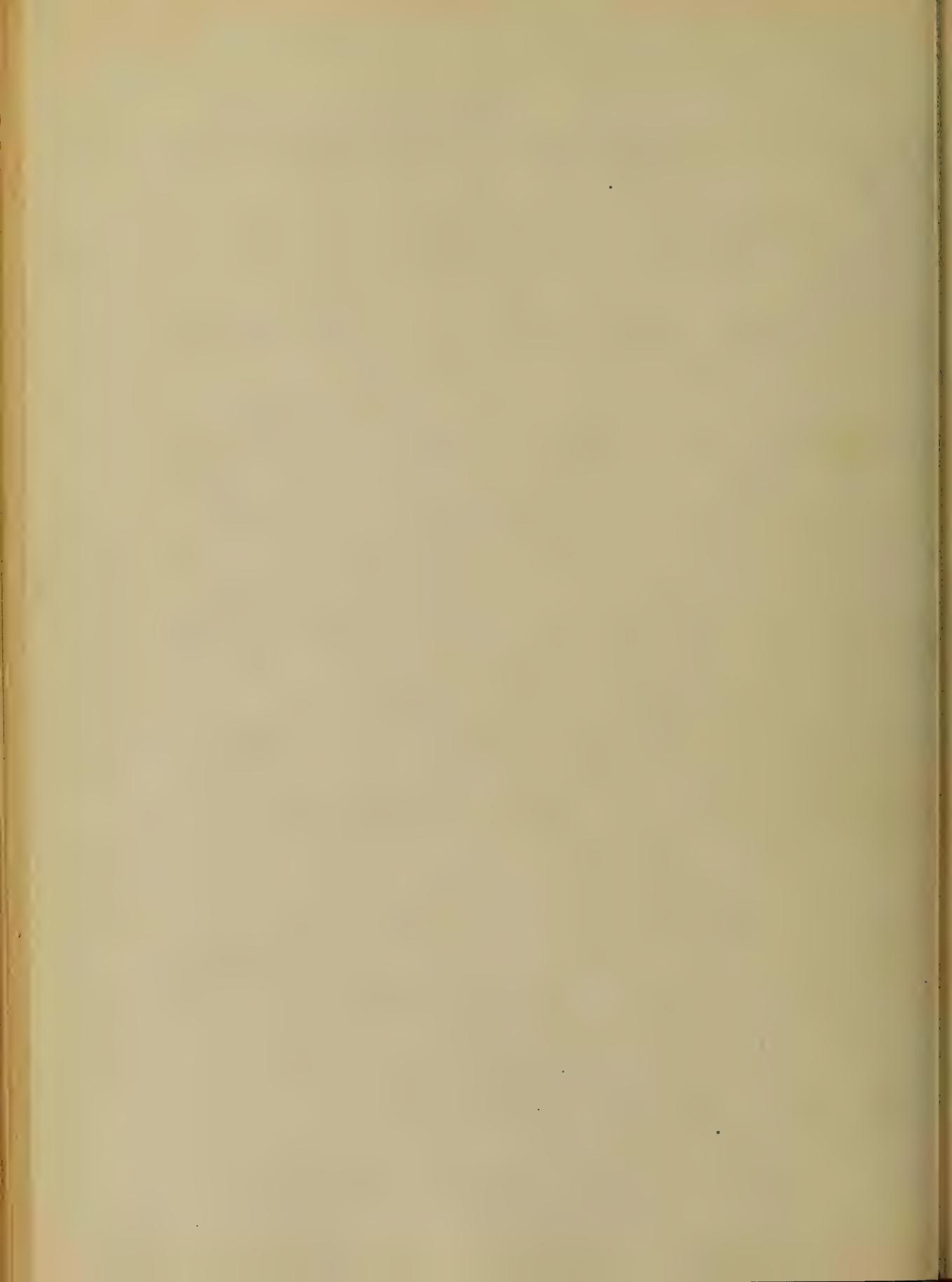
Prof. Dr. J. Smith recommends the use of slippery elm-bark as one of the best means of dilating stricture.

This mode of dilating was



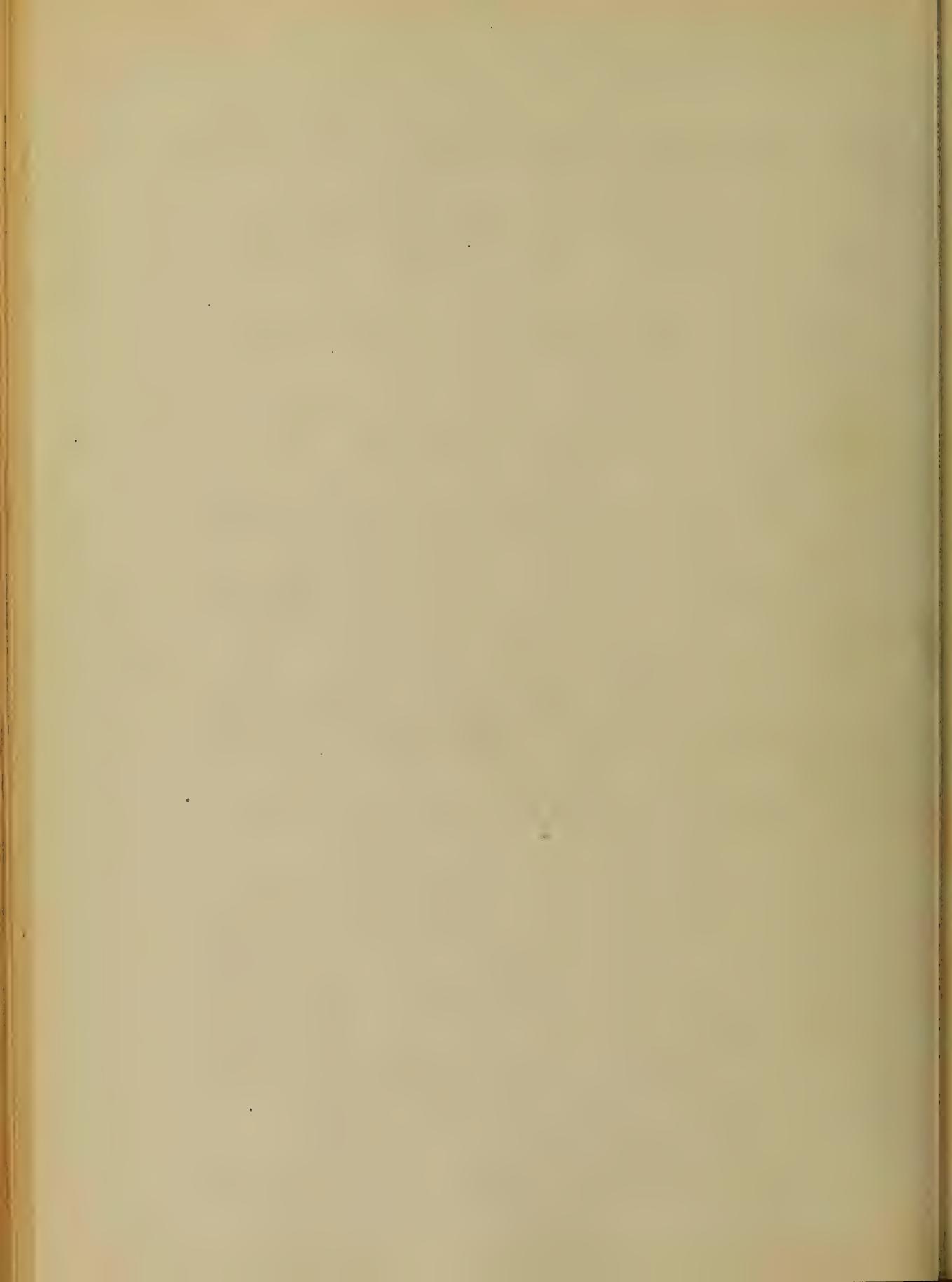
first proposed by Dr. Mc. Dowell
of Virginia in 1837, but from
the supposed liability of the bark
to fracture its use was abandoned.
I think, however, that this is a
mistake and that when properly
used there is no danger whatever.
The clippings - clean - boozie can be
made in a very few minutes with
an ordinary pocket-knife.

Previous to its introduction into
the urethra it should be placed
in water, taking care not to
allow it to remain too long,
as it might swell before
coming into contact with the
stricture, and then having it



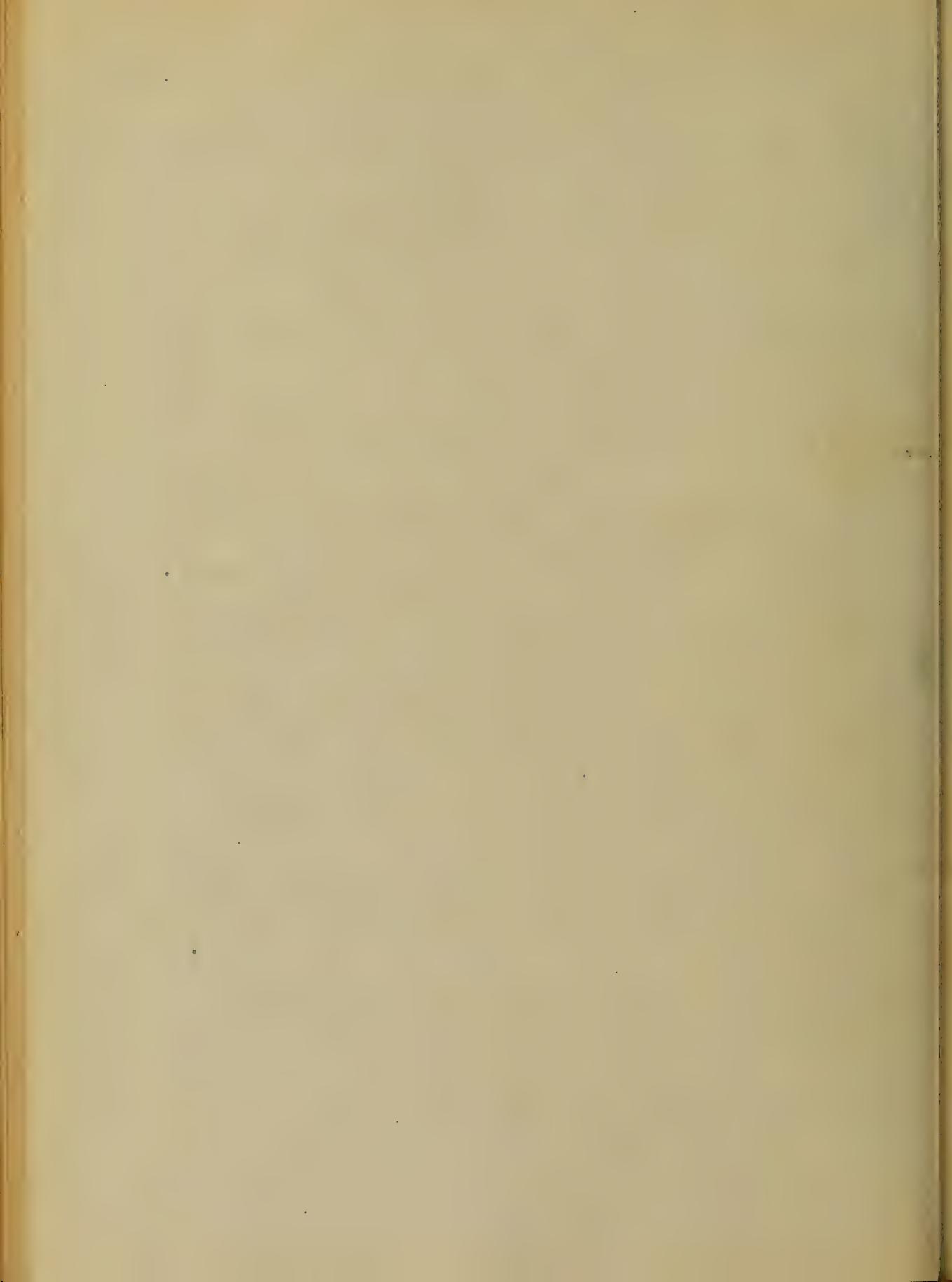
well oiled, gently pass it into the stricture, after remaining there a short time it swells, and gradually dilates the stricture. Prof. Smith has used the slippery-elm-bougie for a number of years in the treatment of stricture with signal success.

Having been connected with the "Baltimore Infirmary" for the last two winters (where a number of stricture cases are treated yearly) I have had the pleasure of witnessing the good effects of this treatment - and from the

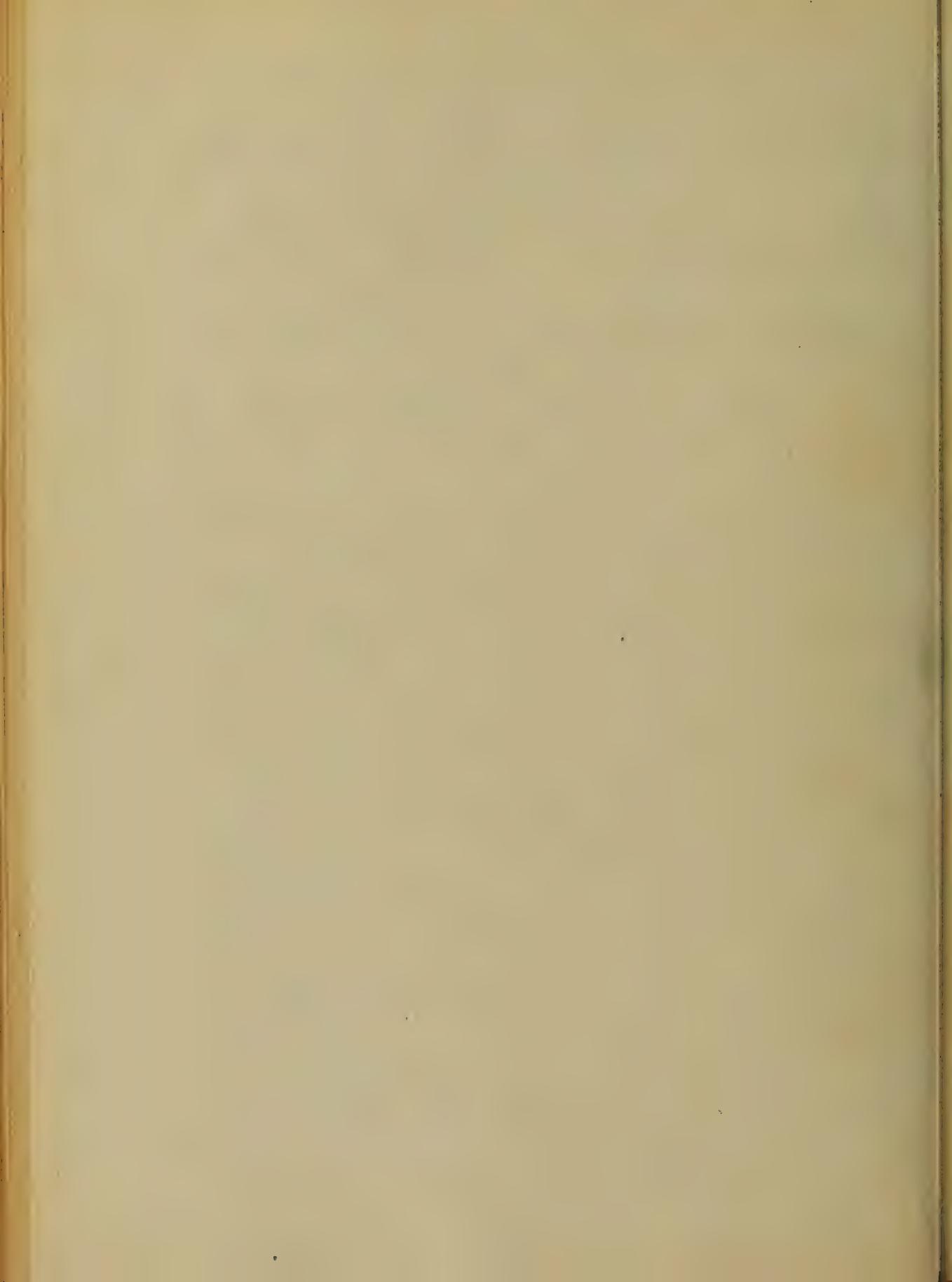


facility with which this bougie
can be made and the gradual
and easy mode in which it
accomplishes dilatation - I regard
it as one of the most admirable
means of treating stricture.

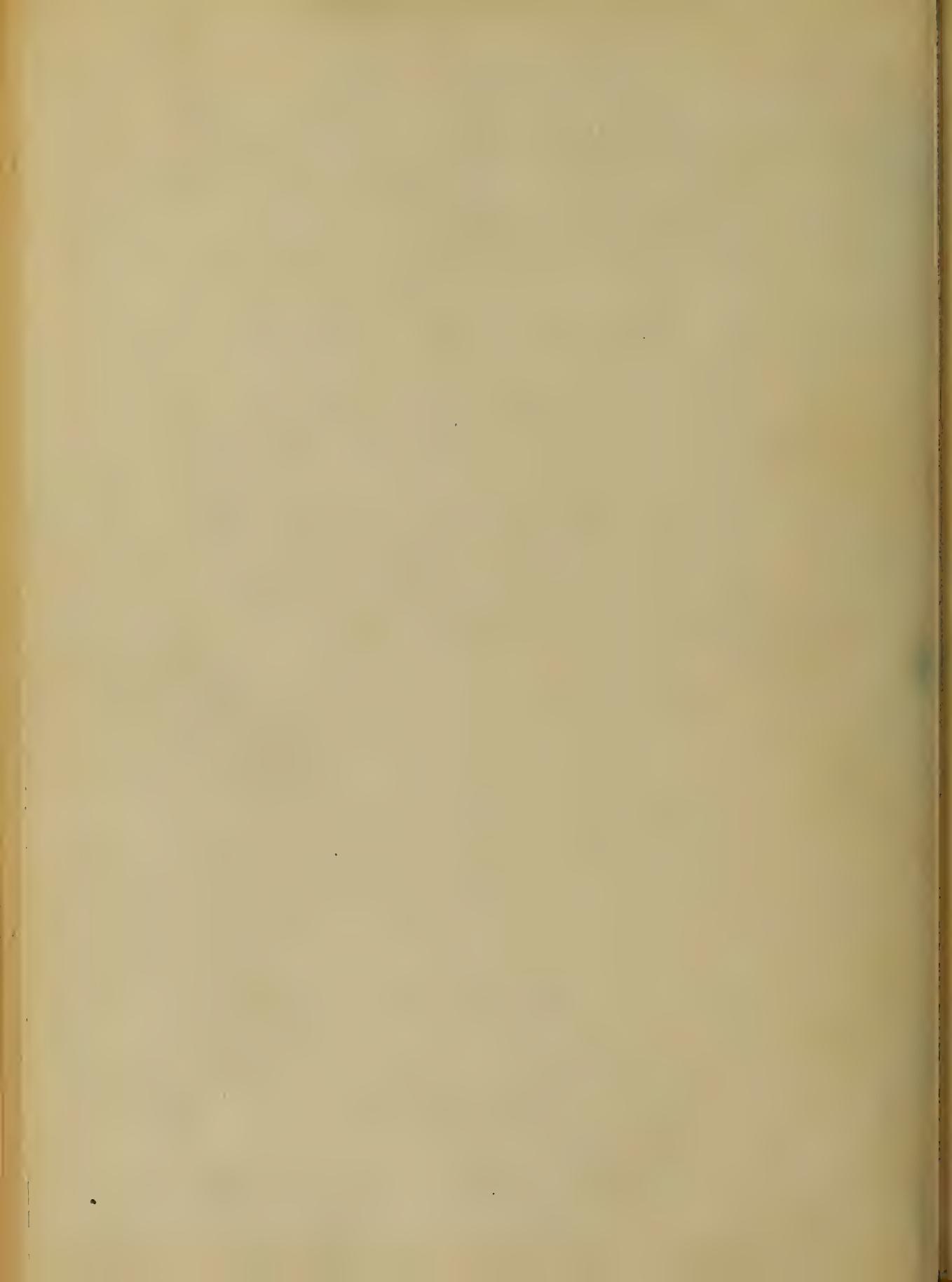
We now and then meet with
cases of stricture in which we
wish to accomplish dilatation
as rapidly and prompt as pos-
sible. In those cases we have
to resort to the use of some
expanding instrument - of which
I believe Holt's Dilator to be as
good as any. With regard
to the use of this instrument
I would say that it is -



applicable only where an instrument of moderate size can be made to pass through the stricture, and then we have overcome the greatest difficulty, and I believe the cure will be much more readily accomplished by the use of long ones. Although the cure of obstinate cases of stricture can readily be effected by dilatation, we now and then (unfortunately) meet with obstinate cases in which it will fail, and then we have but two means to resort to - either the application of some caustic to the stricture.



on its division by some-
cutting instrument. Both
of these methods are attend-
ed with considerable danger
to the patient, as well as
inflicting severe pain and
^{should} not be resorted to, until all
other means less powerful
have been tried.



A N
Inaugural Dissertation

ON

Delirium Tremens

Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

P H Y S I C,

OF THE

UNIVERSITY OF MARYLAND,

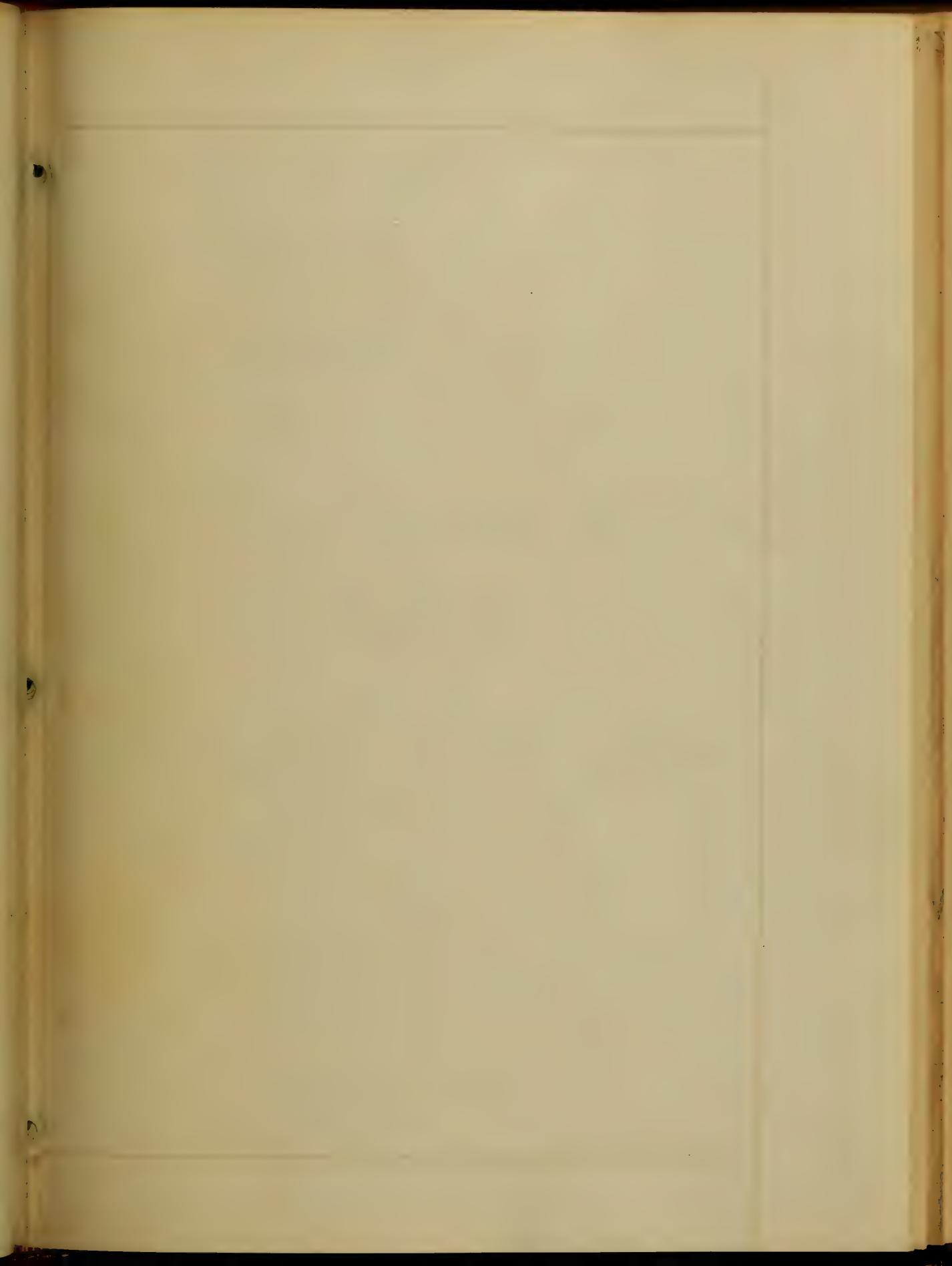
FOR THE DEGREE OF

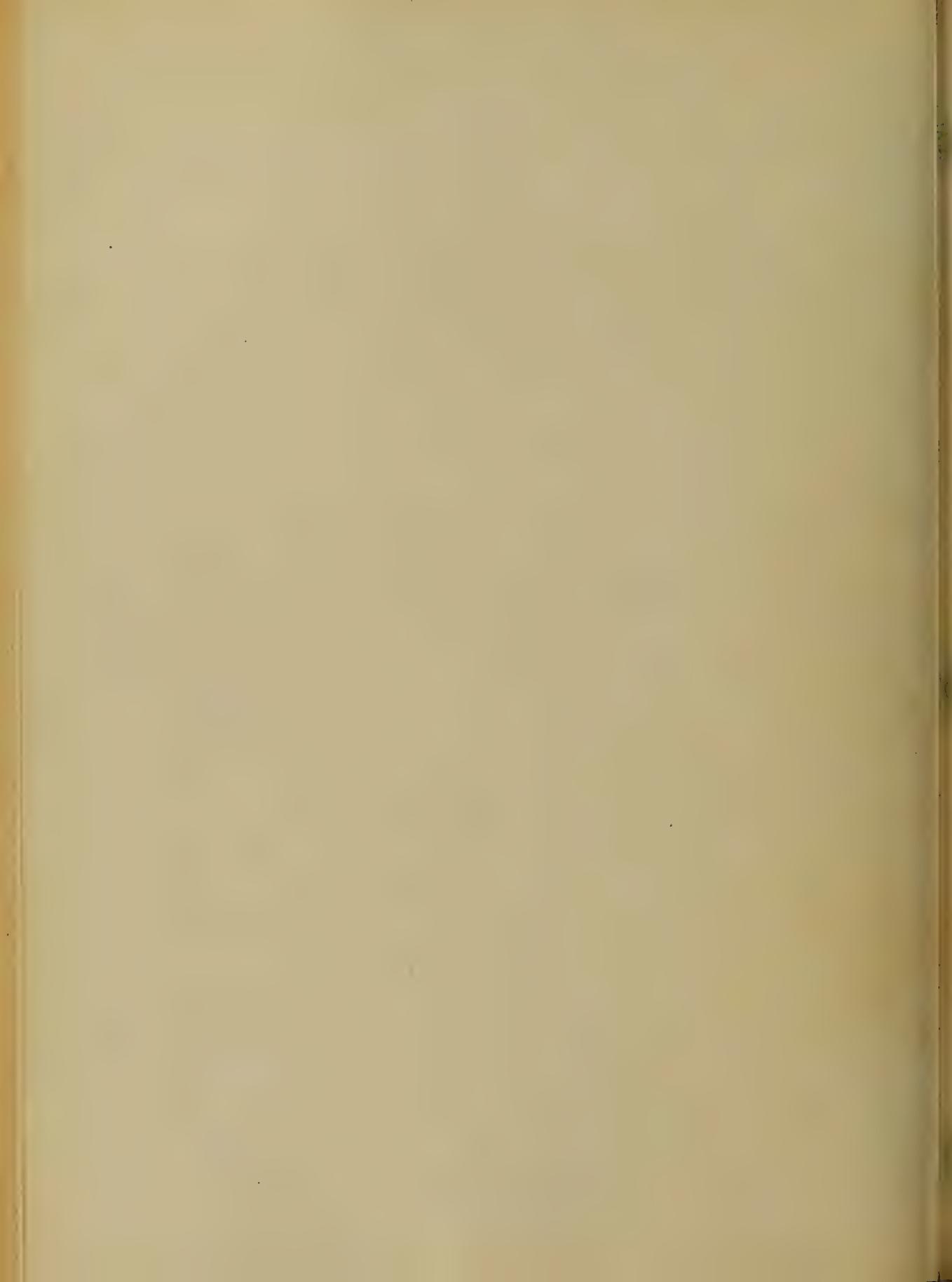
DOCTOR OF MEDICINE,

By
James B. Chesley
of
Maryland

Session of

1867-1868.





An
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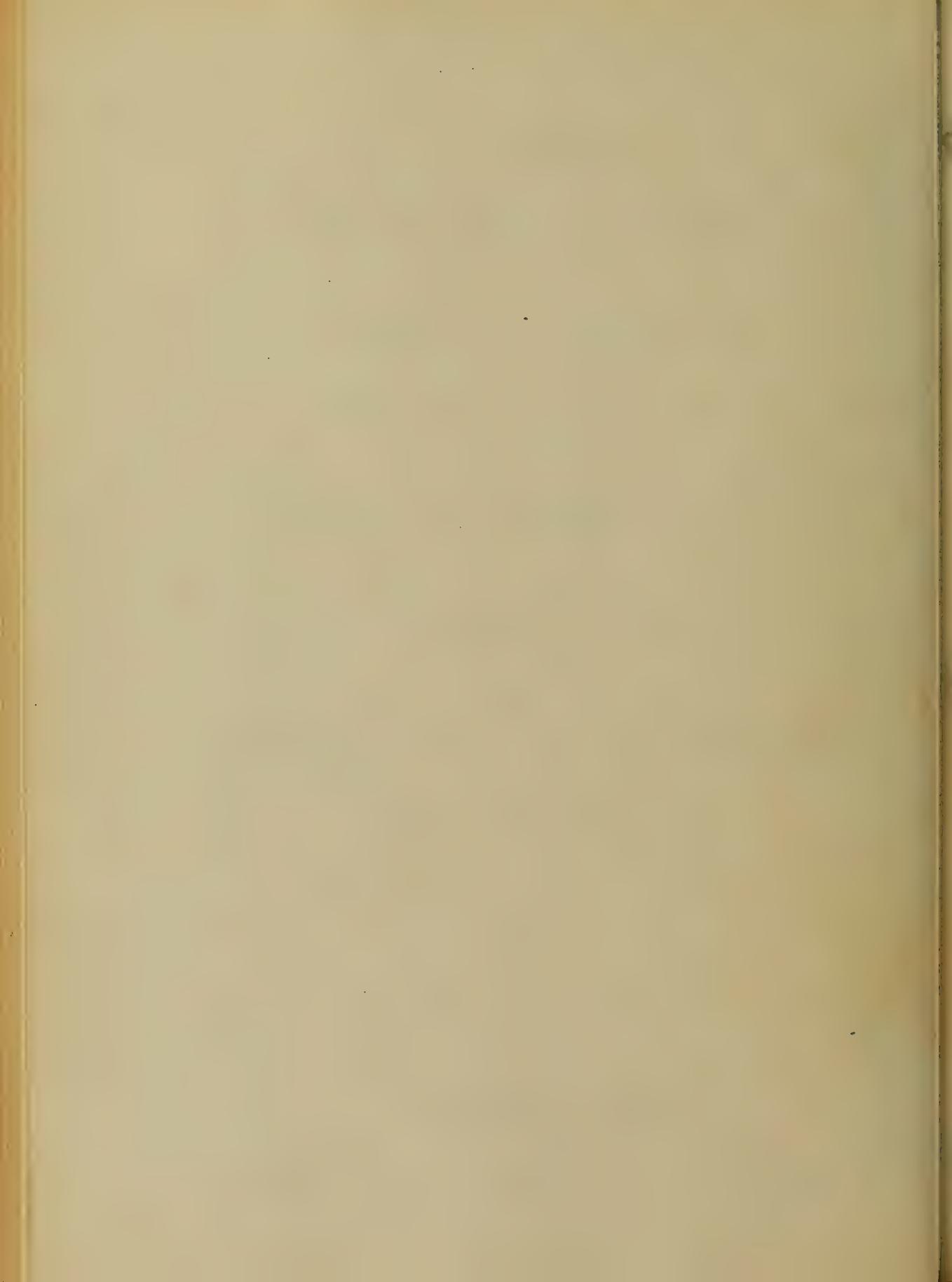
James B. Thesiger

of

Maryland

Session

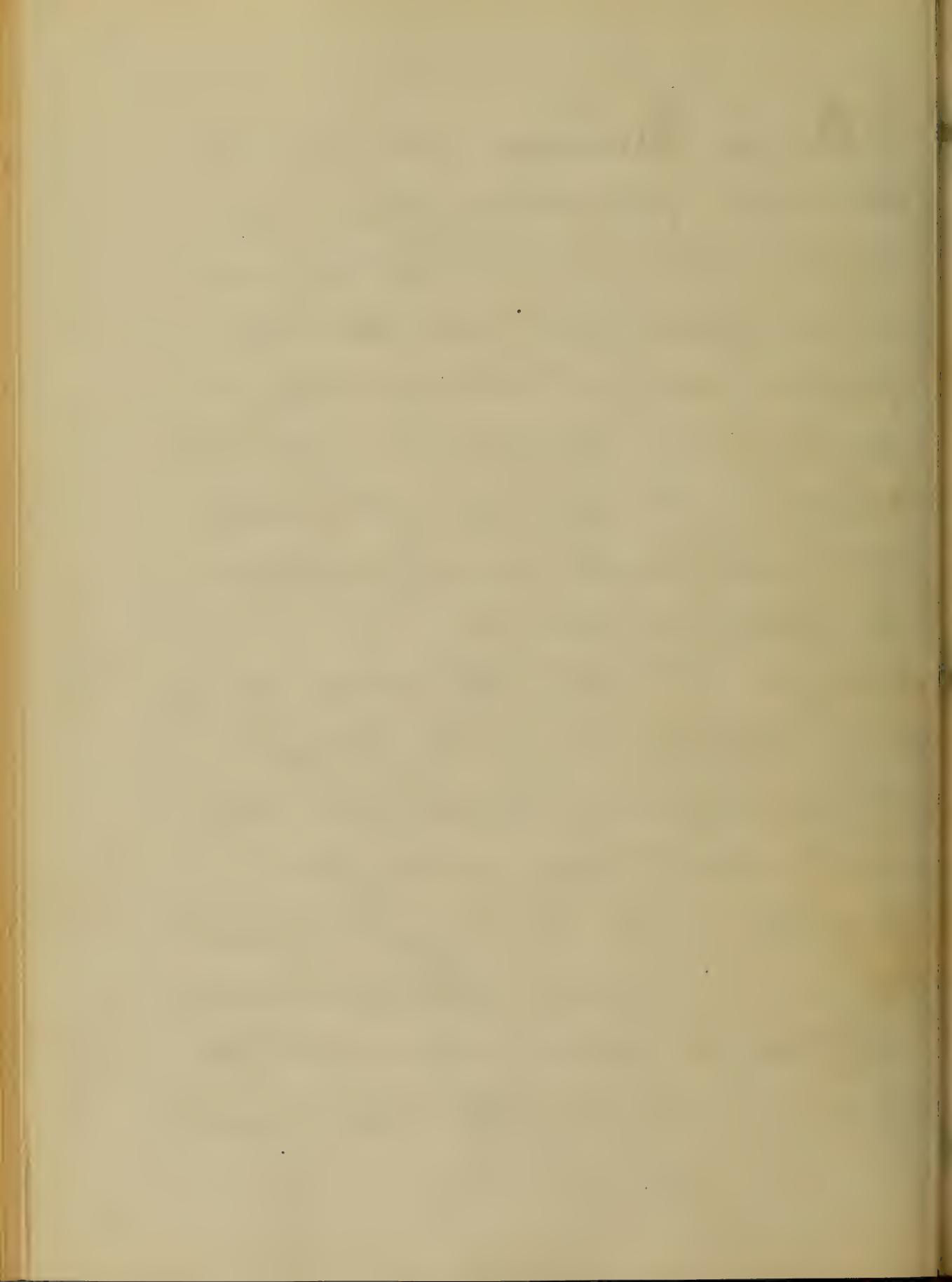
1867 - 1868



Delirious Tremens. This is one of the local diseases of the nervous system, consequent upon the absence of a habitual stimulant. It is an affection of the brain, the chief symptoms of which are - delirious hallucinations - foreboding of evil - muscular tremors - and constant wakefulness. The various stages of the disease present a considerable diversity of appearance, with different complications.

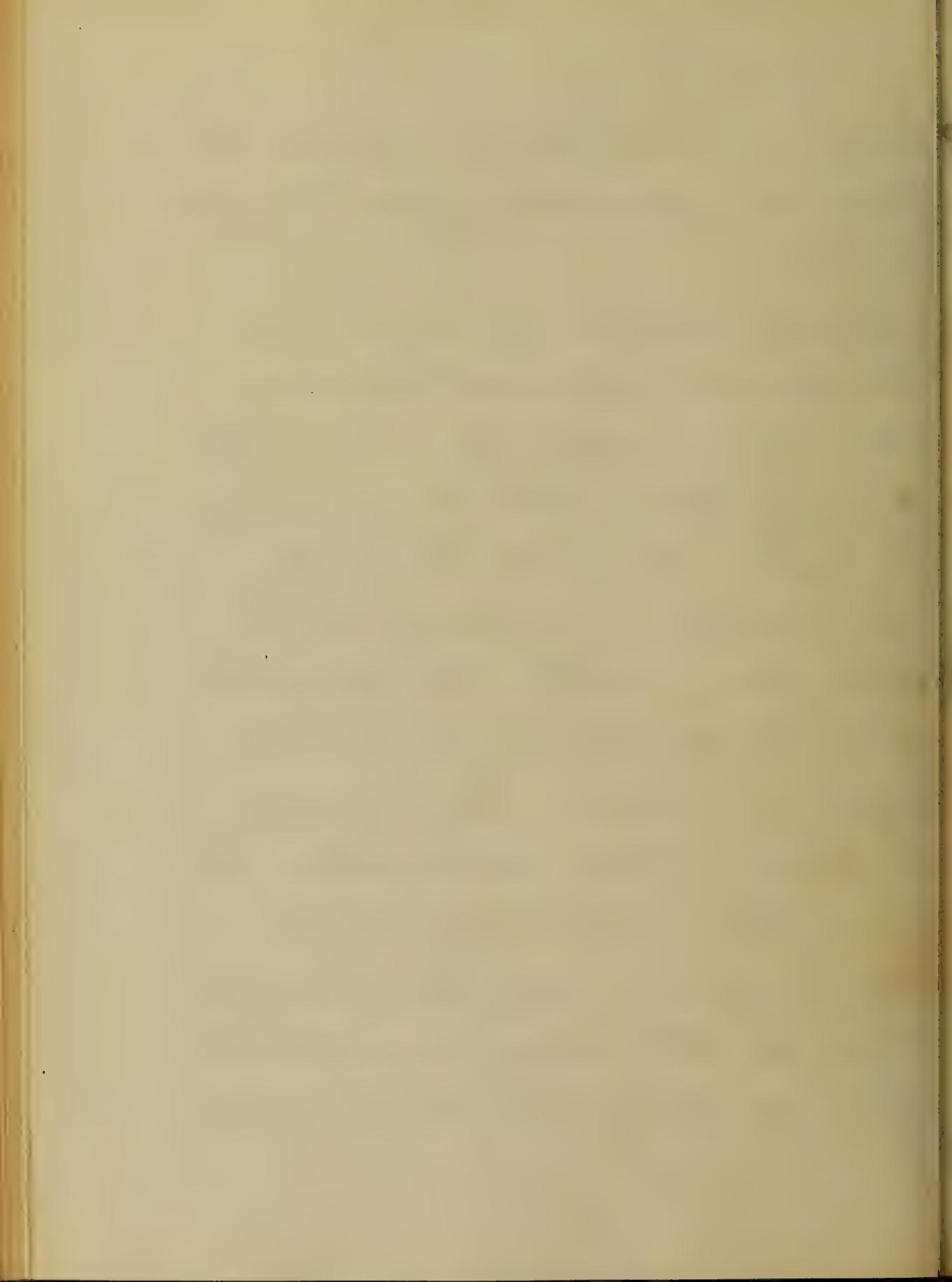
First stage. This stage of the disease is commonly known as the "horrors". It is the first effects after the suspension of the stimulant, and is generally relieved by again resorting to it.

The symptoms of this stage are great physical and mental depression, without positive delusion a difficulty in obtaining sleep - a quick pulse cool hands and feet, with a disposition on



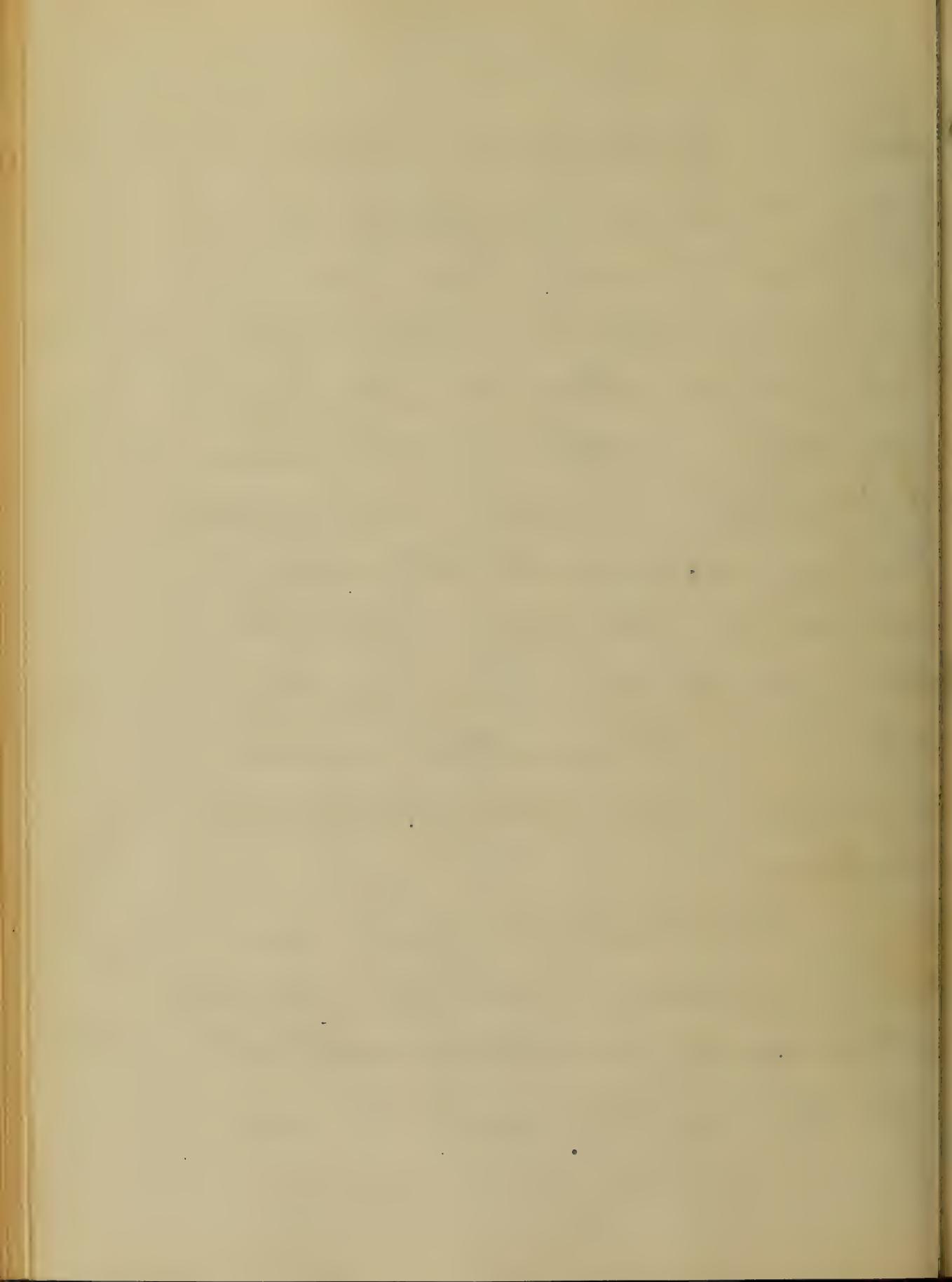
The part of the whole surface to perspire, while the digestive organs cease to perform their healthy functions.

Aggravated condition. If the privation of the stimulant is prolonged, the disease assumes a more serious form: it is at this stage of the disease that those vivid impressions are made on the mind, through the imagination which have for the time all the force of reality. The patient thinks he sees the most disgusting objects: such as devils reptiles vermin. There is no end to the diversity of these hallucinations. There is one feature of the disease, which is generally attendant upon these hallucinations, an uncontrollable feeling of fear, which influences all the movements of the patient, and which



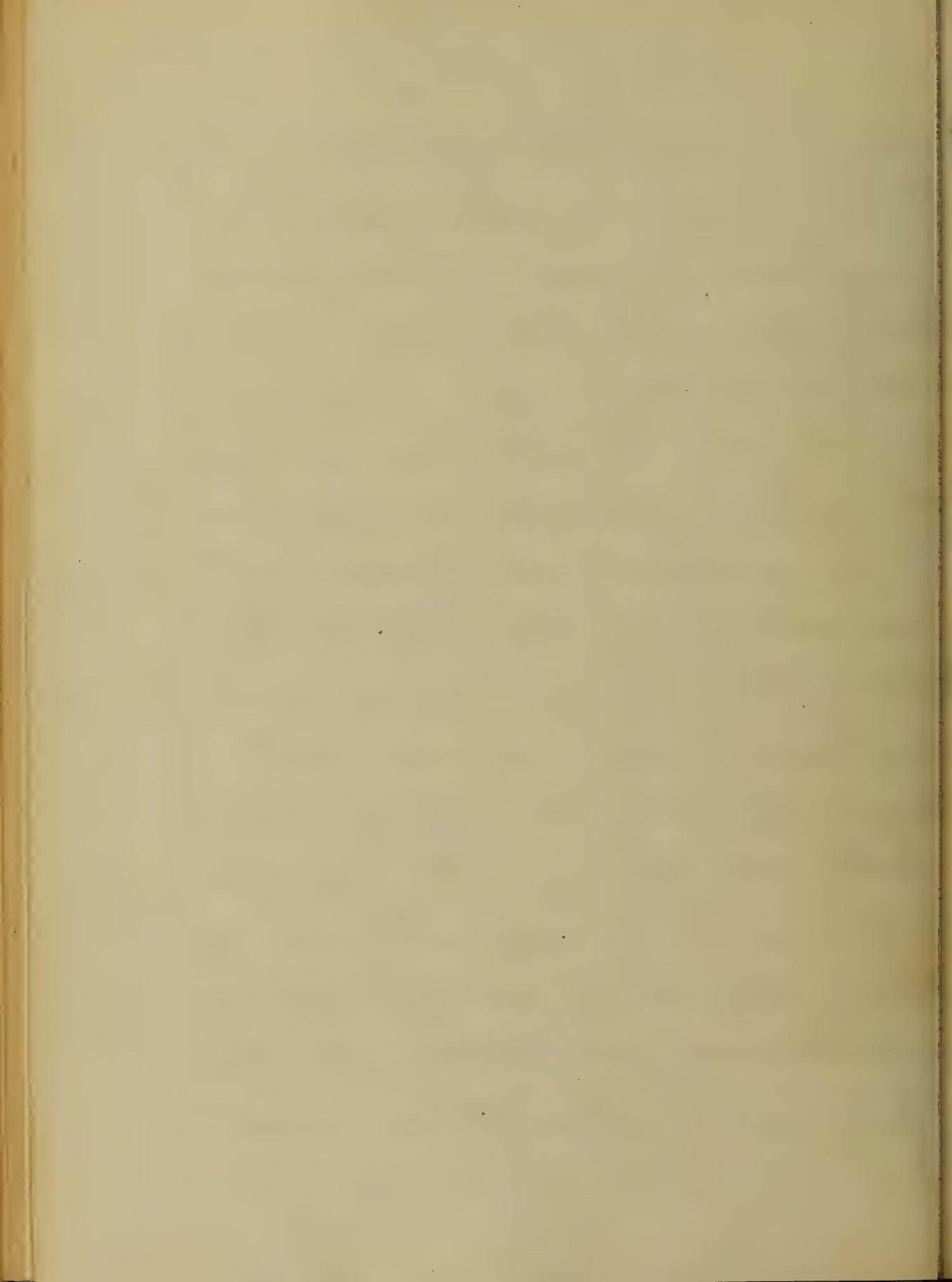
Sometimes leads him to self destruction to escape the imaginary impending evil. The patient when guilty of any violence is not influenced by feelings of revenge or hatred but is simply actuated by a desire to escape some danger or disgrace. The manner of the patient is not always violent, frequently the disease can be only detected by a close examination; when it will be found that there is on the face, a peculiar absent look; and a listening attitude assumed as if endeavouring to catch sounds of awful significance.

Some of the characteristic symptoms are a morbid vigilance - broken and disturbed rest culminating in continued wakefulness when the disease has reached its most



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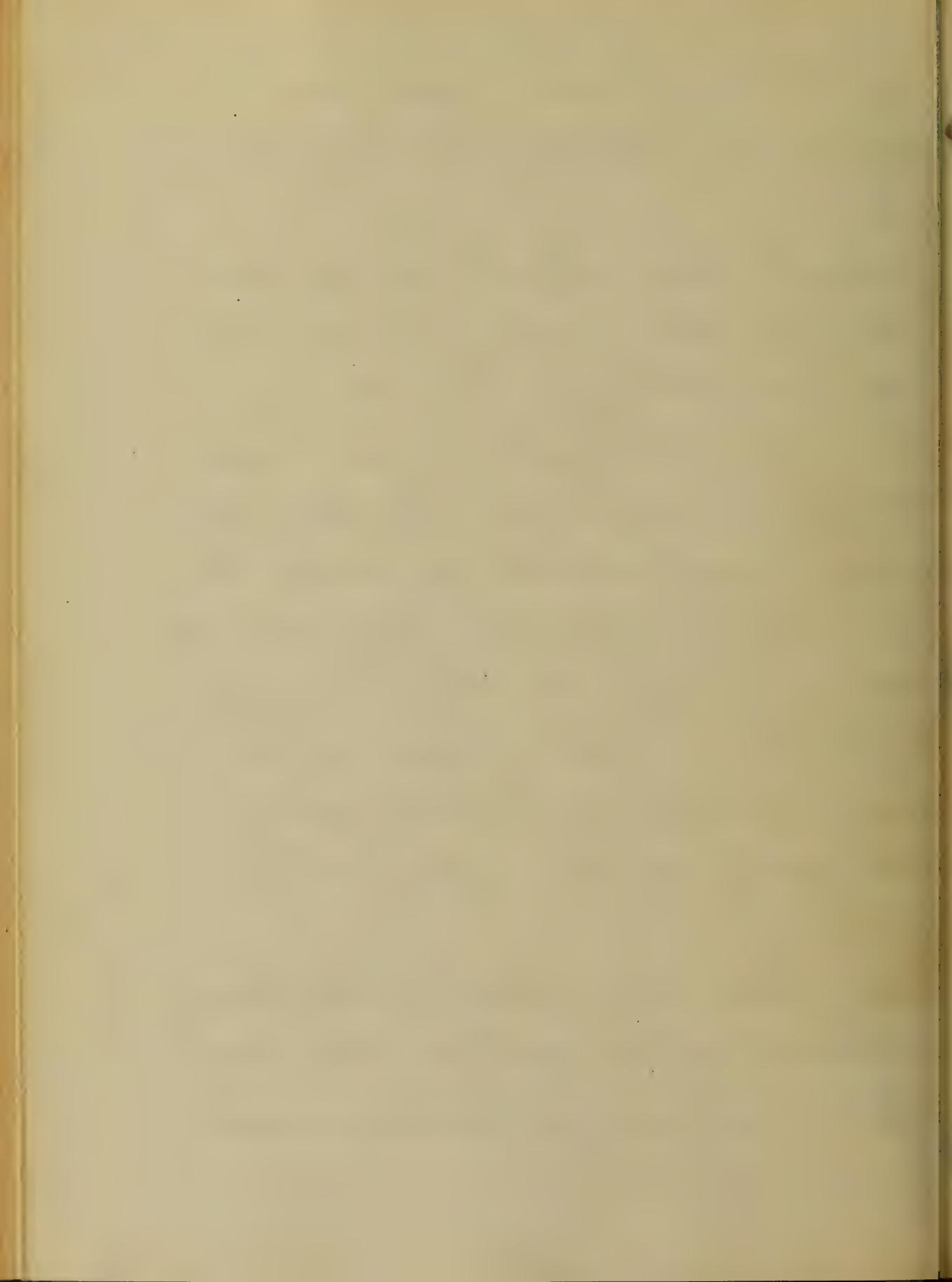
dangerous point - muscular tremors affecting
the whole system sometimes resulting in
convulsions - The pupil of the eye is con-
tracted though there is no intolerance of light.
The pulse is sometimes quite natural, but
may be slower and weaker than in health;
then again frequent and feeble - a furred
tongue - no appetite - constipated bowels -
dark and offensive stools - fetid breath -
profuse perspiration accompanied by an
unpleasant smell. are some of the
many symptoms of this disease. The
patient in most cases dislikes confinement
in bed and likes to keep on his feet. If
there is great debility with feeble pulse -
cold skin and pale features - the patient
should not be allowed to use much



exertion, as death frequently results from over exercise.

Favourable Stage After the lapse of several days, the patient usually falls into a deep sleep, which lasts from twelve to thirty-six hours. From this nap he awakes much debilitated. But free from the hallucinations which formerly harassed his mind. Though some delirious symptoms may occasionally occur. Sometimes the patient sleeps only a few hours, which is followed by an amelioration of the symptoms, which subsequently disappear upon a return of rest.

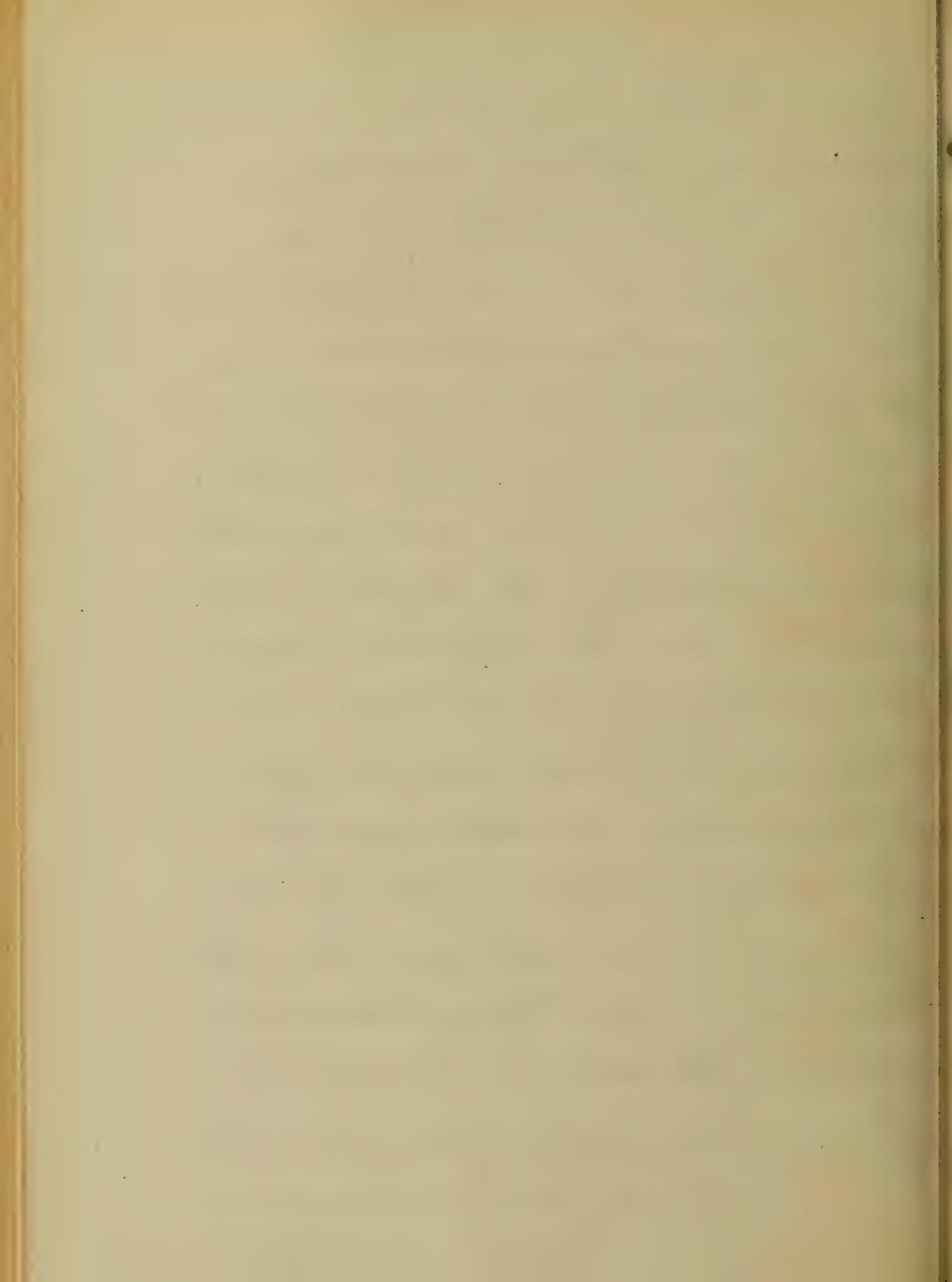
Last Stage This condition of the disease is characterized by great prostration, and results from improper treatment or the



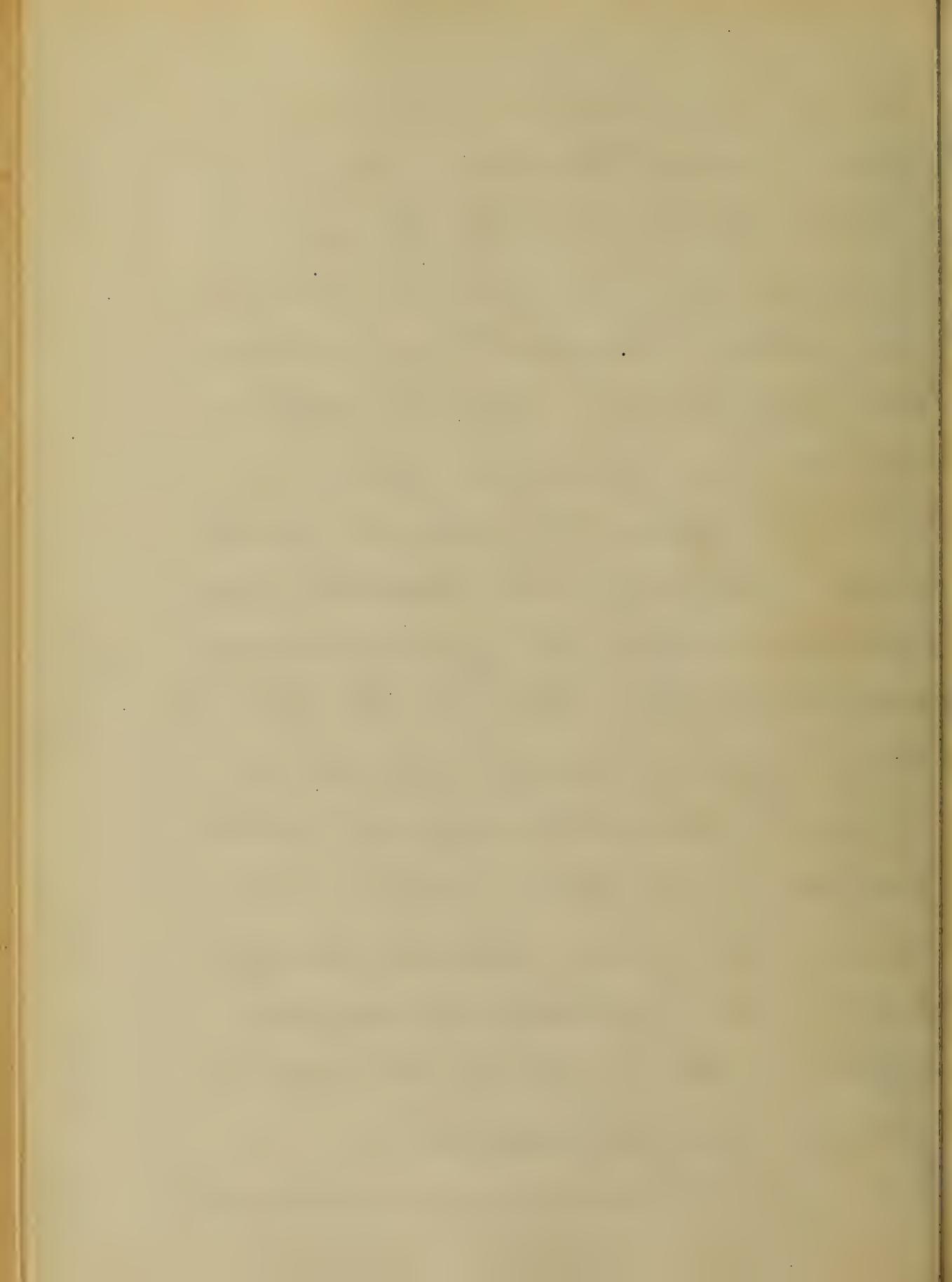
absence of any treatment. The previous illusions now give way to incoherence it becomes necessary to confine the patient to his bed. The symptoms in the earlier stages are now seen in a more aggravated form.

Subsultus Tenditum - muttering delirium - Coma - and convulsions give notice of the approach of death. The duration of this disease is from three days to two weeks.

The disease sometimes presents itself in complication with the immediate effects of the stimulant - or with accidental affections. In the former case the direct effects of the excitement upon the system become mingled with those produced by the portion of the alcohol. The symptoms are morbid cerebral excitement from the



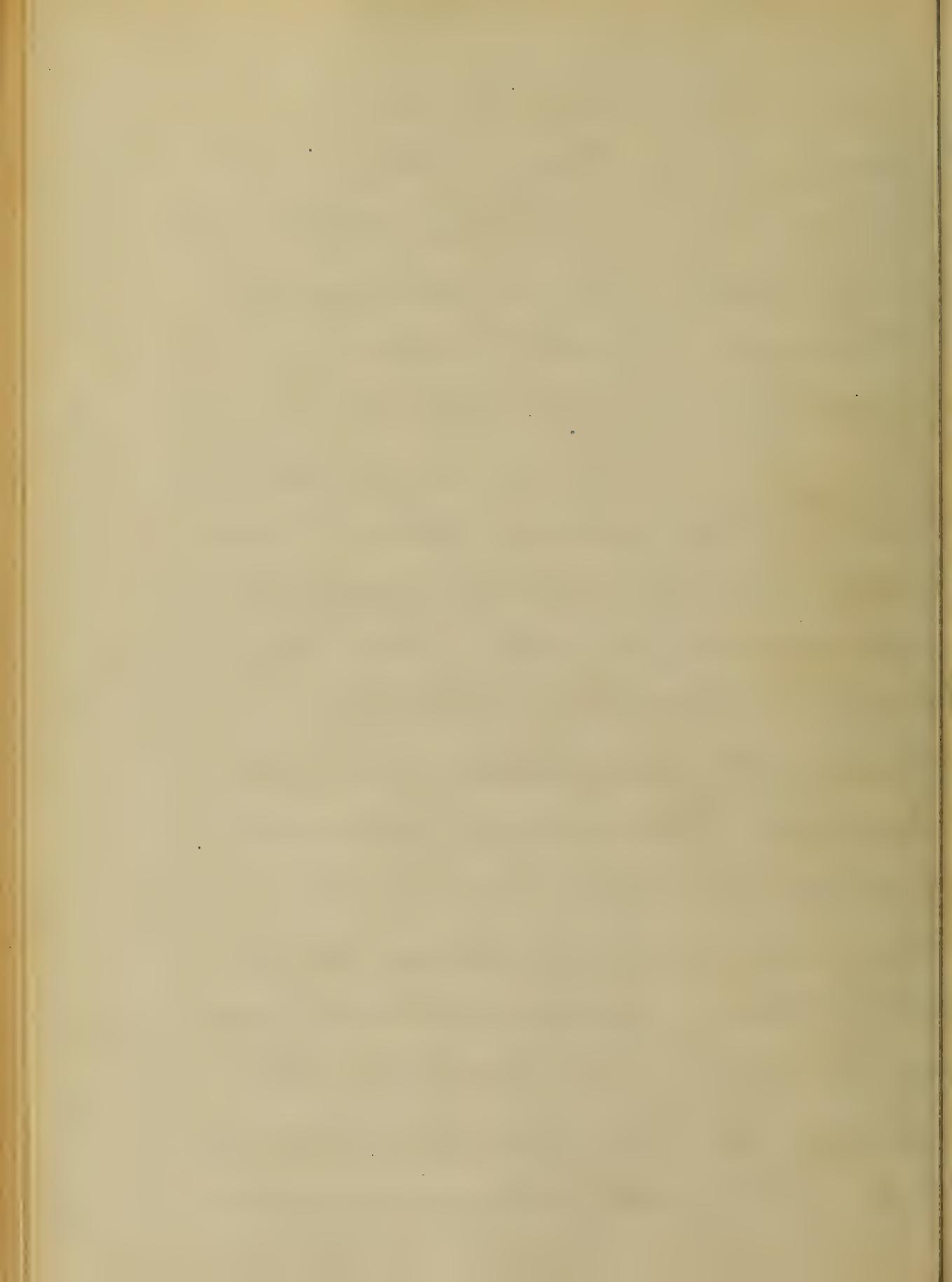
direct agency of the drink - The face is flushed and turgid - The lips intensely red - The head hot - furred tongue of a fiery redness - The appetite gone - full pulse - and extreme thirst. Again the patient may have sustained some serious injury or attacked by disease . The physician should exercise great care in the treatment of such cases , for sometimes the effects of the injury and those resulting from the portion of the stimulant so modify each other as to greatly confuse the diagnosis . All the phlegmasiae are liable - and in some diseases the cerebral phenomena are apt to mask the symptoms of the original affection - this is especially the case in pleurisy and pneumonia



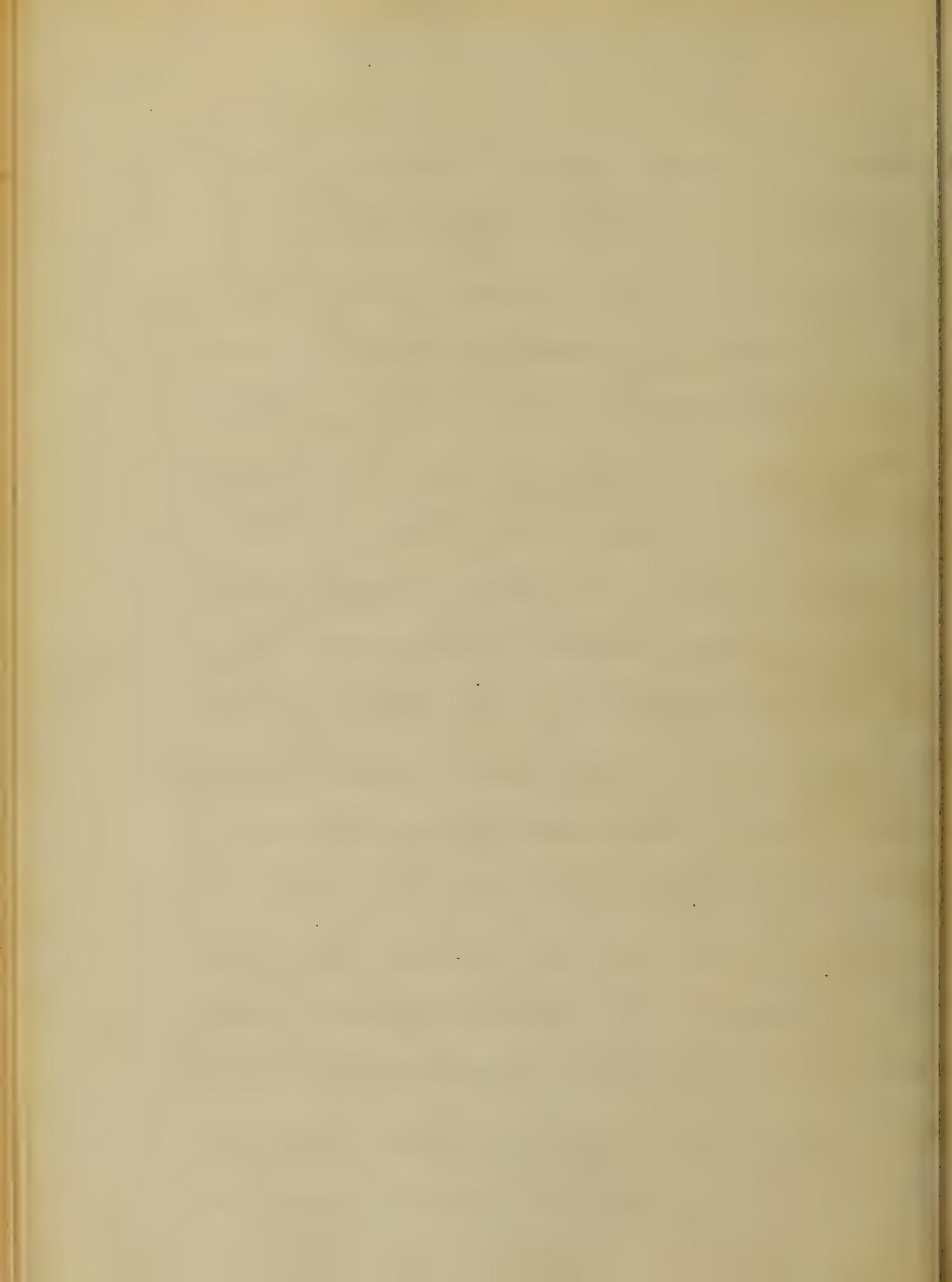
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Anatomy of the disease. Though such cases are rare, it sometimes happens that an opportunity offers for examining cases of uncomplicated delirium tremens. Such examinations have failed to discover anything which could account for the symptoms. Any affection of the organs not natural is either due to diseases upon which the delirium supervenes - or from causes which must be regarded as strictly functional.

Causes. The prime cause of delirium tremens is the suspension of an exciting influence which has become a cerebral habit, essential to the ordinary action of the brain. Persons who readily indulge in stimulants are more liable to this disease than those who only occasionally



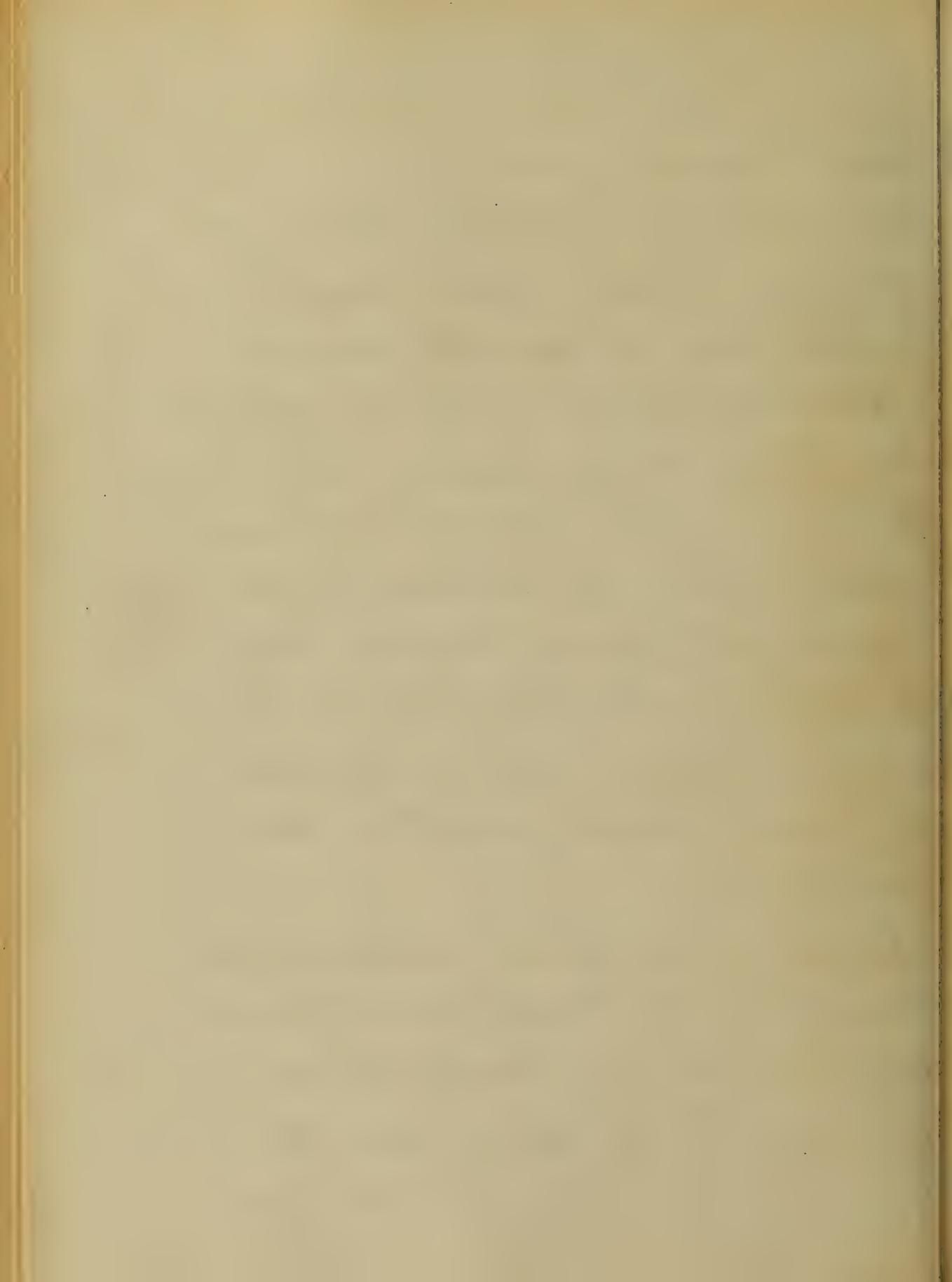
indulge to excess, giving the brain an opportunity to assume again its healthy state. The laboring man is not so liable to it as one of sedentary habits, because by vigorous exercise the influence of the stimulus is transferred from the brain to the various functional offices of the system. The disease may result from the use of any alcoholic stimulant though it is more apt to be developed by the strongest. It is not well settled whether this disease can result from the use of opium. It can be produced by excessive indulgence in tobacco, but in this case it is caused by the direct influence of the sedative on the brain and not secondary as in the case of strong drink, and causes



when the narcotic is omitted.

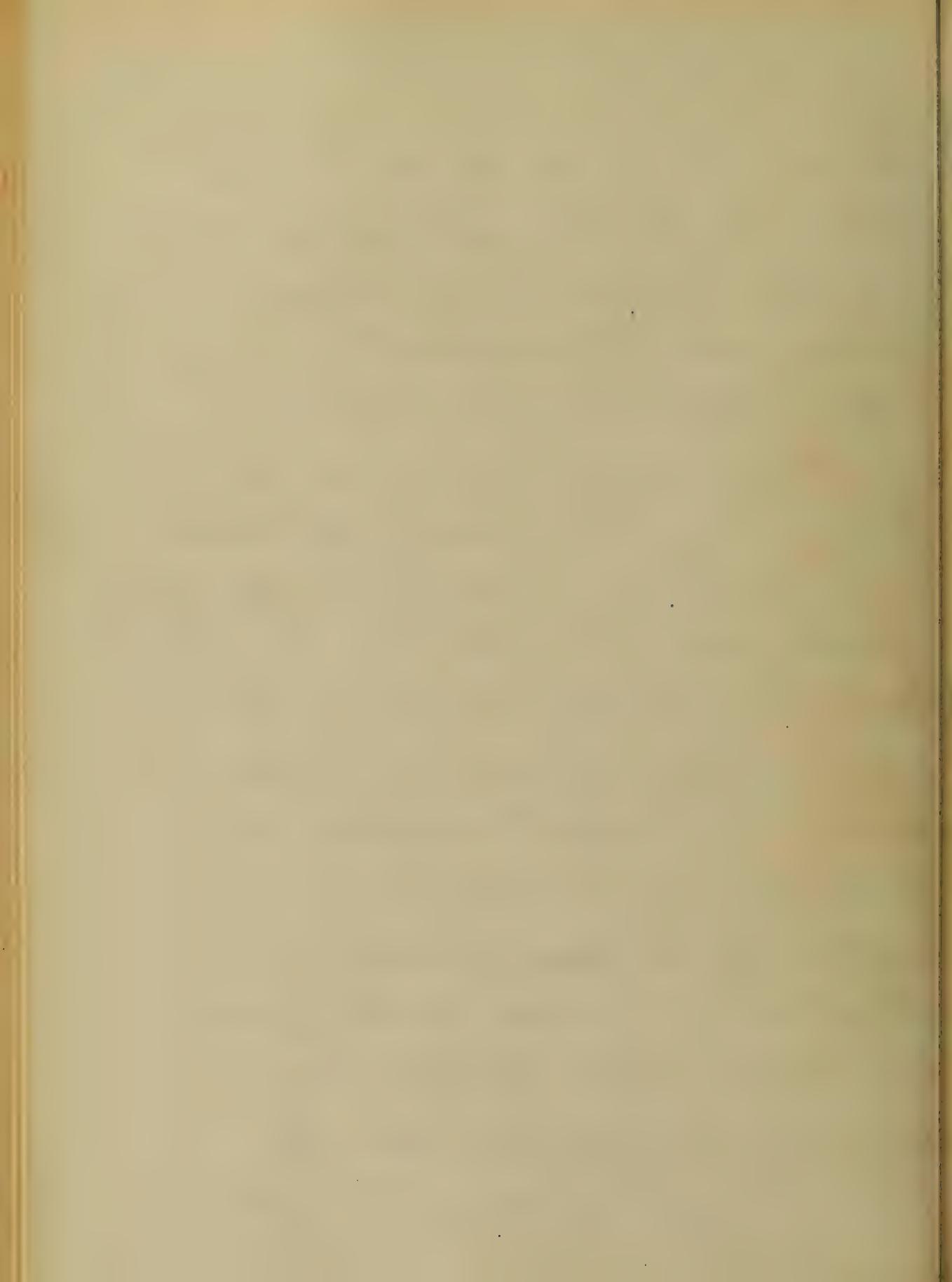
The delirium is frequently arrested by vomiting. Nausea which is much a cerebral action as any other sensation cannot occur while the brain is under the effect of causes producing delirium tremens. It has not been satisfactorily settled, whether the delirium in the temperate after severe surgical operation is identical with that produced by alcohol, there is certainly sufficient difference to sustain doubt on the subject.

Diagnosis The diseases which delirium tremens should be distinguished from are febrile delirium meningitis and insanity. In the case of fever the



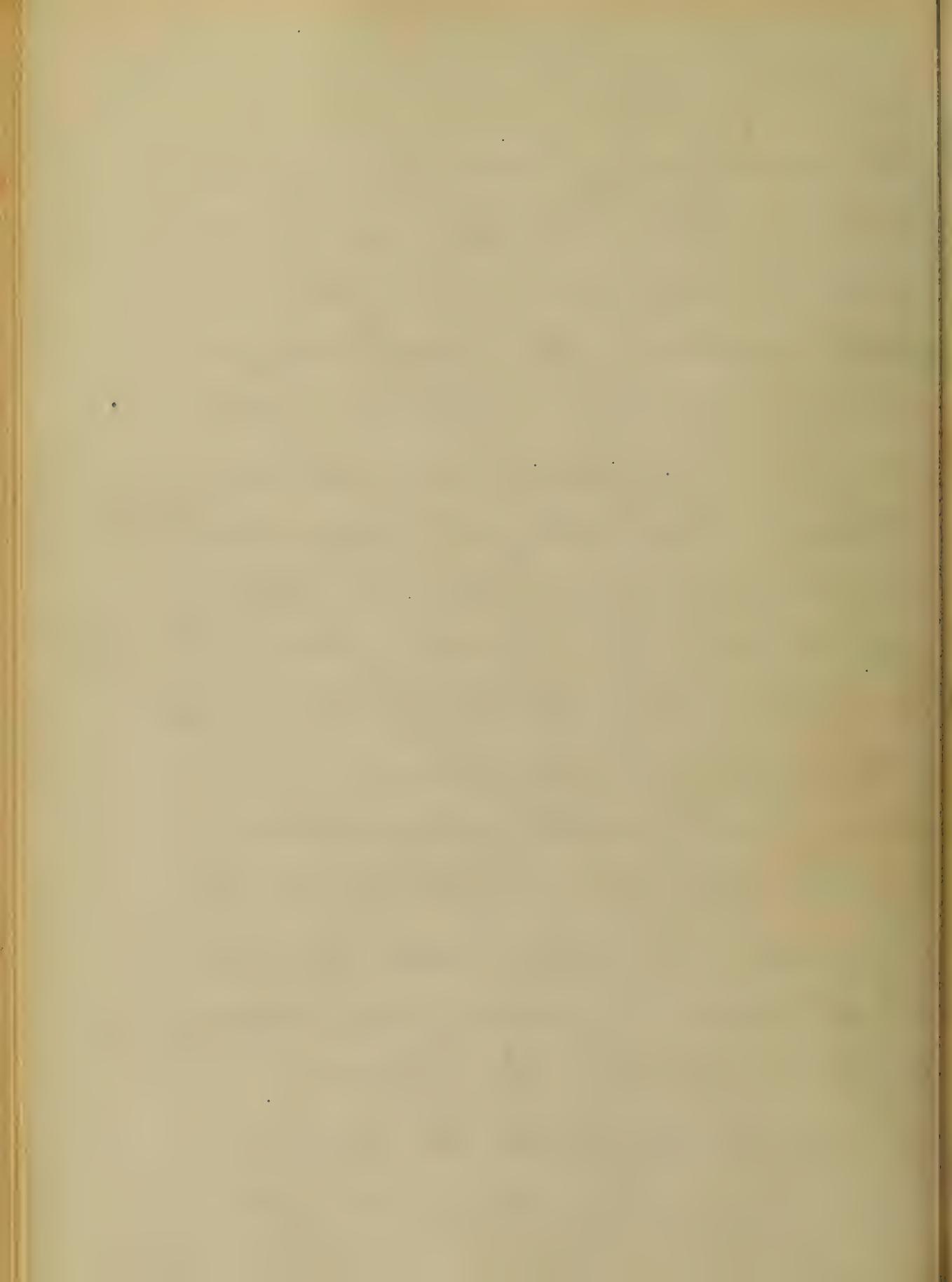
delirium is more incoherent. Though not attended by fear and hallucinations. There is greater prostration than in delirium tremens. While the countenance has a very different expression. The last stage is very much like a peculiar form of typhoid fever. But a knowledge of the case in its incipiency will enable the physician to distinguish between the two.

The delirium in meningitis is more violent. with more fever. and a stronger tendency to coma and convulsions, though it is devoid of the hallucinations and terrors of the disease produced by stimulants. Sometimes the two affections will be seen united, presenting a case very complicated in its character.



The development of insanity is much more gradual. The tendency to be the victim of fanciful illusions is not so great while it is less frequently attended with muscular tremors. Mania is more incoherent than mania more rational Dementia complicated with palsy might be taken for delirium tremens but the error must soon be corrected. Dementia is not attended by that wakefulness so characteristic of delirium tremens

When insanity occurs in a drunkard and becomes complicated with the disease it presents a case of greatest difficulty. It is necessary to form a proper diagnosis of this disease. That the physician should be familiar with the previous

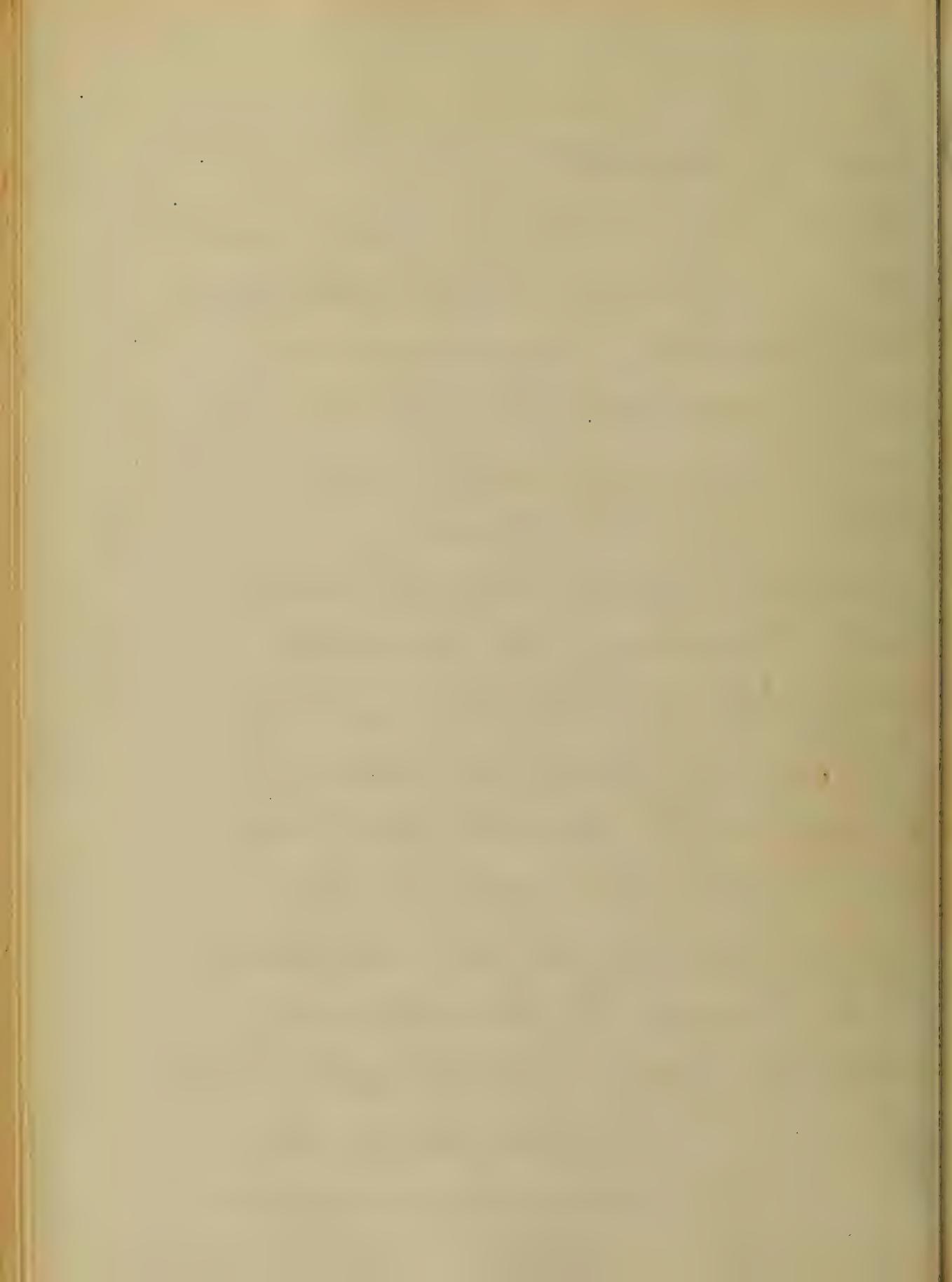


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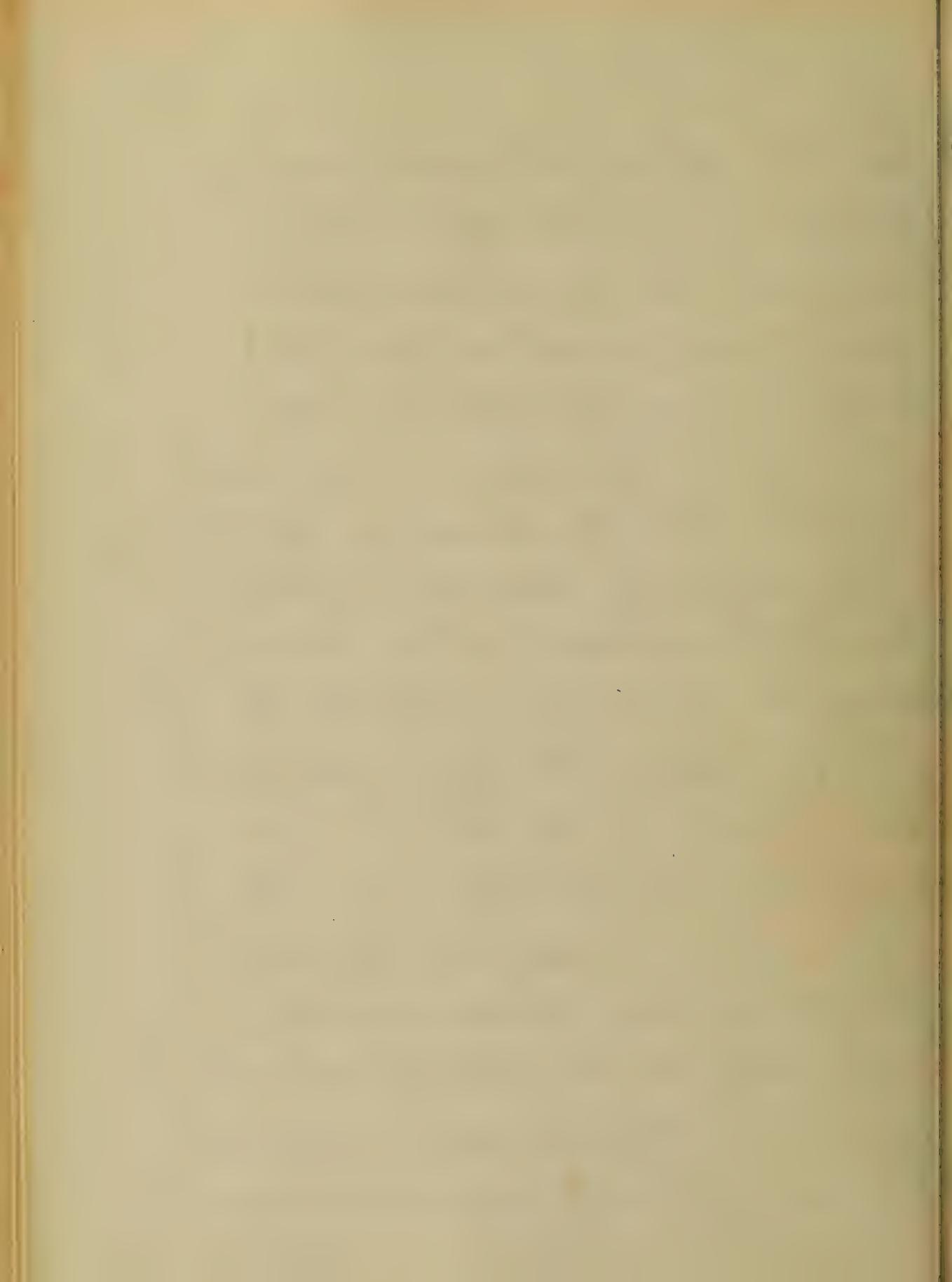
Habits of the patient.

Simple delirium tremens is not a dangerous disease. It generally subsides spontaneously. The chief thing to guard against is debility and exhaustion after muscular exertion. Each successive attack is attended with more danger.

Treatment As the cause of the disease is the cessation of the use of the stimulant. The first thing necessary in treating a case of delirium tremens is to endeavour to stimulate the brain to a proper action, and after this is accomplished to gradually withdraw the influence of the stimulus and enable the organ to operate under healthy influences. It strikes us at first

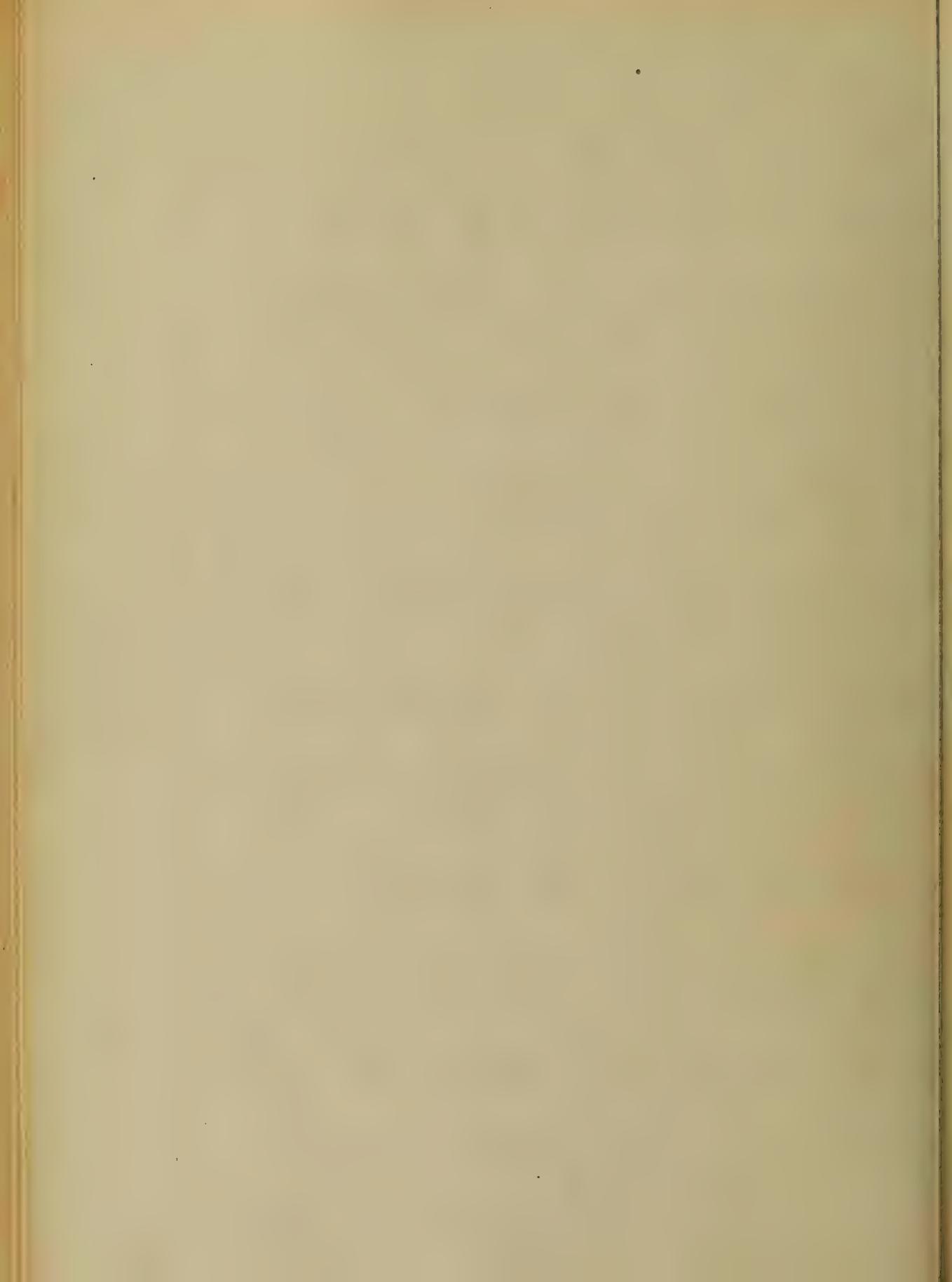


view that this object should be accomplished by alcohol, but not taking into view the moral consideration which should prevent us from thus tempting again the appetite of the patient for stimulants; and also the fact that the disease if left to itself frequently gets worse, without resort to such aid; it is extremely doubtful whether such treatment does not have the effect of confirming the patient in his habit. Even when tried in hospitals where the patient can be kept from temptation for some time after his recovery; rarely does it work a permanent cure. But we have a stimulus



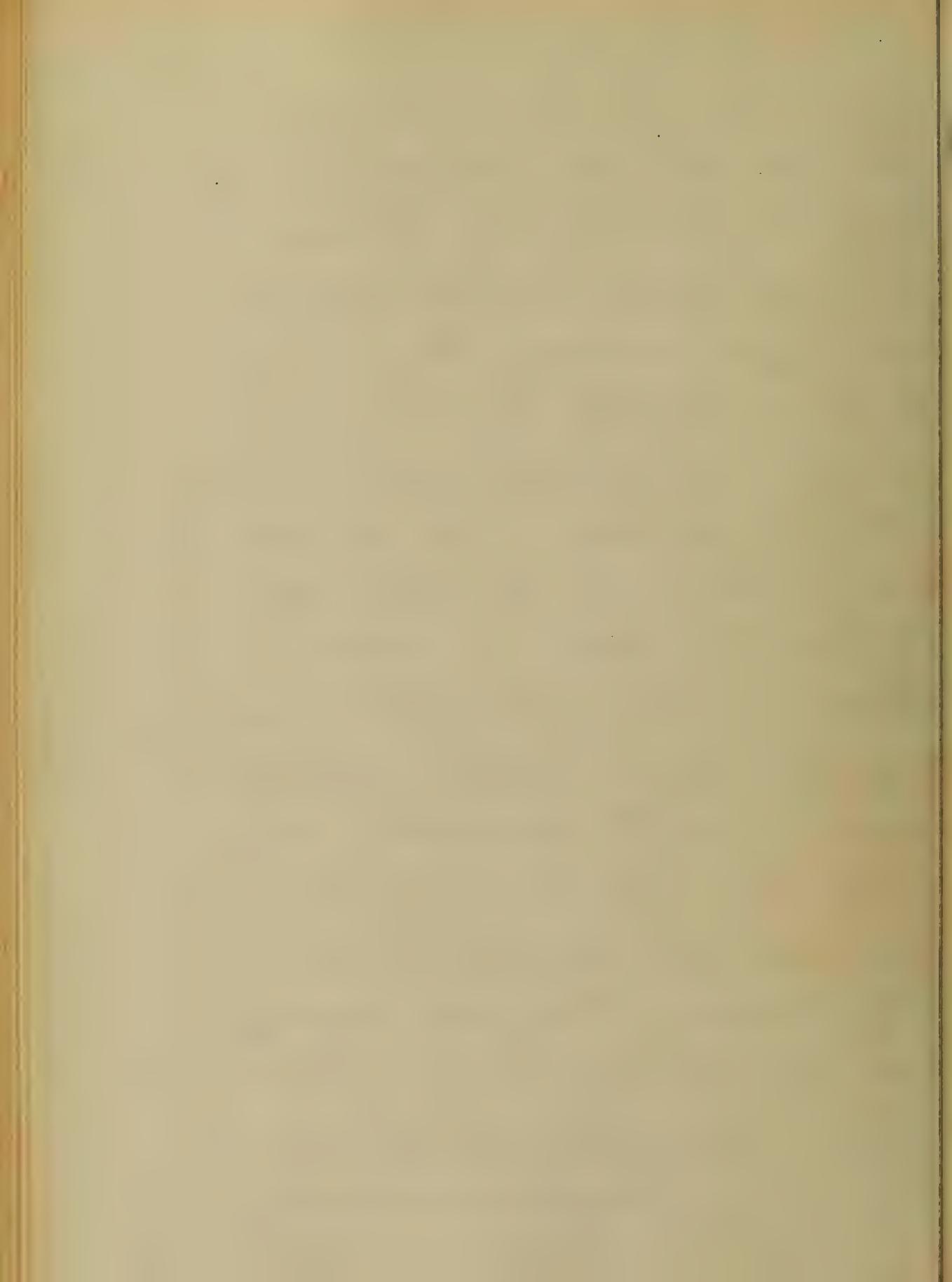
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which possesses the requisites of alcohol without being attended by its dangers. To the moral condition. This is opium which is usually given in the following form - two grains of opium - half a grain of Sulphate of Morphia - or its equivalent of Laudanum, which is given every two hours until sleep results or drowsiness is produced. After this is accomplished its influence should be gradually withdrawn, by lengthening the intervals or diminishing the dose. There are cases where the debility is great when it becomes necessary to resort to alcoholic liquors in such quantities as are necessary to sustain the vital functions. Malt liquors are the



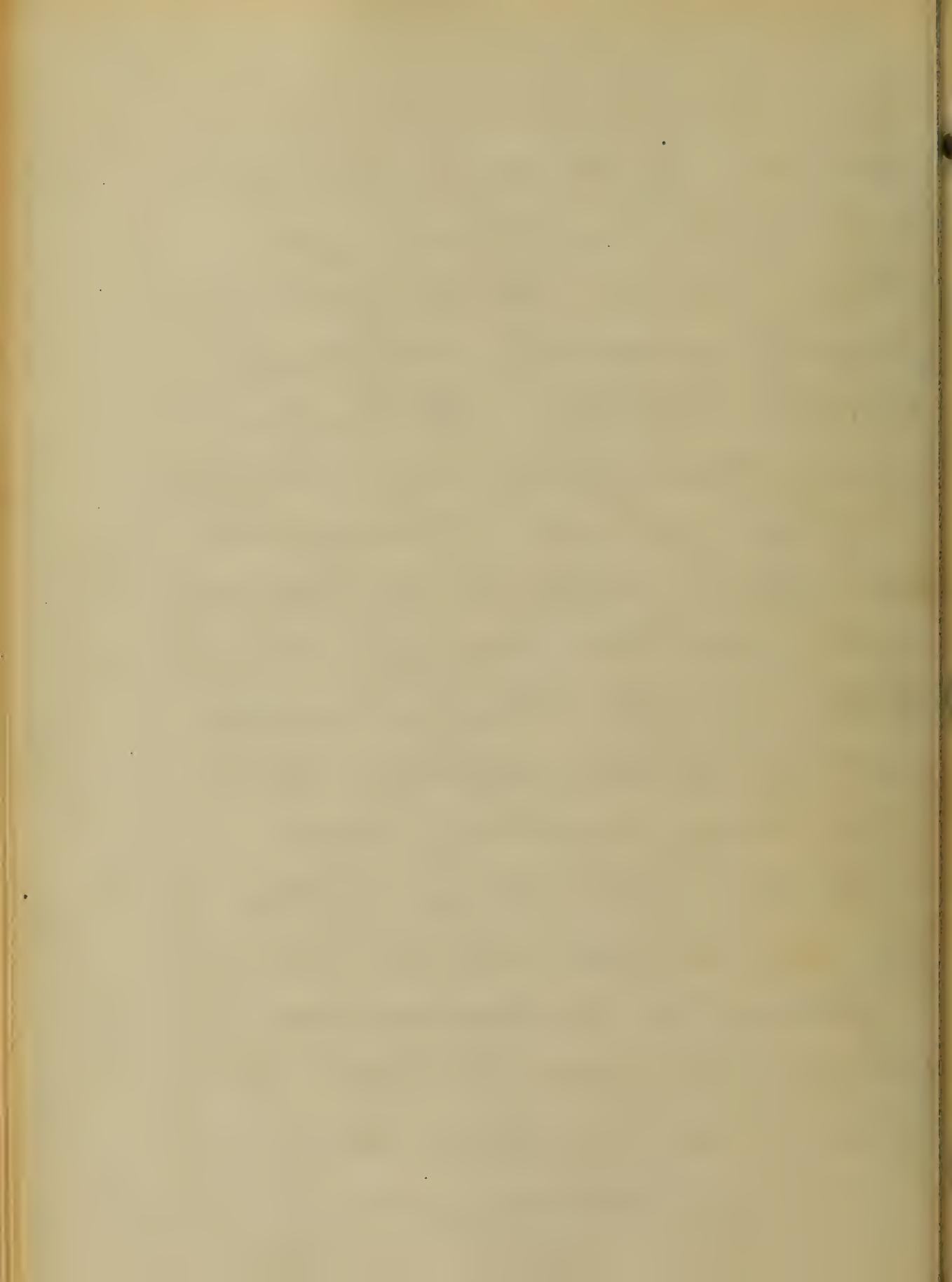
19

most suitable, but brandy should be used in extreme cases. It must be borne in mind that this remedy is used to give necessary strength, and to prevent a fatal prostration of the system. Tincture of hysop may sometimes answer this purpose. When the case shews a tendency to convulsions and the patient is tremulous, nervous stimulants, such as assafetida, and compound spirit of ether should be given. Where the excitement is very violent give chloriform internally in doses from forty to sixty drops in a little Camphor - the yolk of an egg and water at intervals of an hour or two. Taking care not to produce-



15

prostration if the prostration is sudden
and of an alarming character, give
Sulphuric Ether from Two to Four fluid drachas
frequently in connection with powerful
alcoholic Stimulants. The digestive
organs should be kept in as healthy a
condition as possible, if constipated
use Cathartics, adding Calomel when the
Sepsitic Secretion is deficient. Use mild
depultry purgatives, such as Magnesia
Castor oil Rhubarb and Aloes. Senna
if a strong purgative is needed.
If the disease should assume a Typhous
form. The strength must be kept up
by Carbonate of Ammonia and Nourishing
drinks. Sleep may be induced by a
ether over the whole head, This remedy



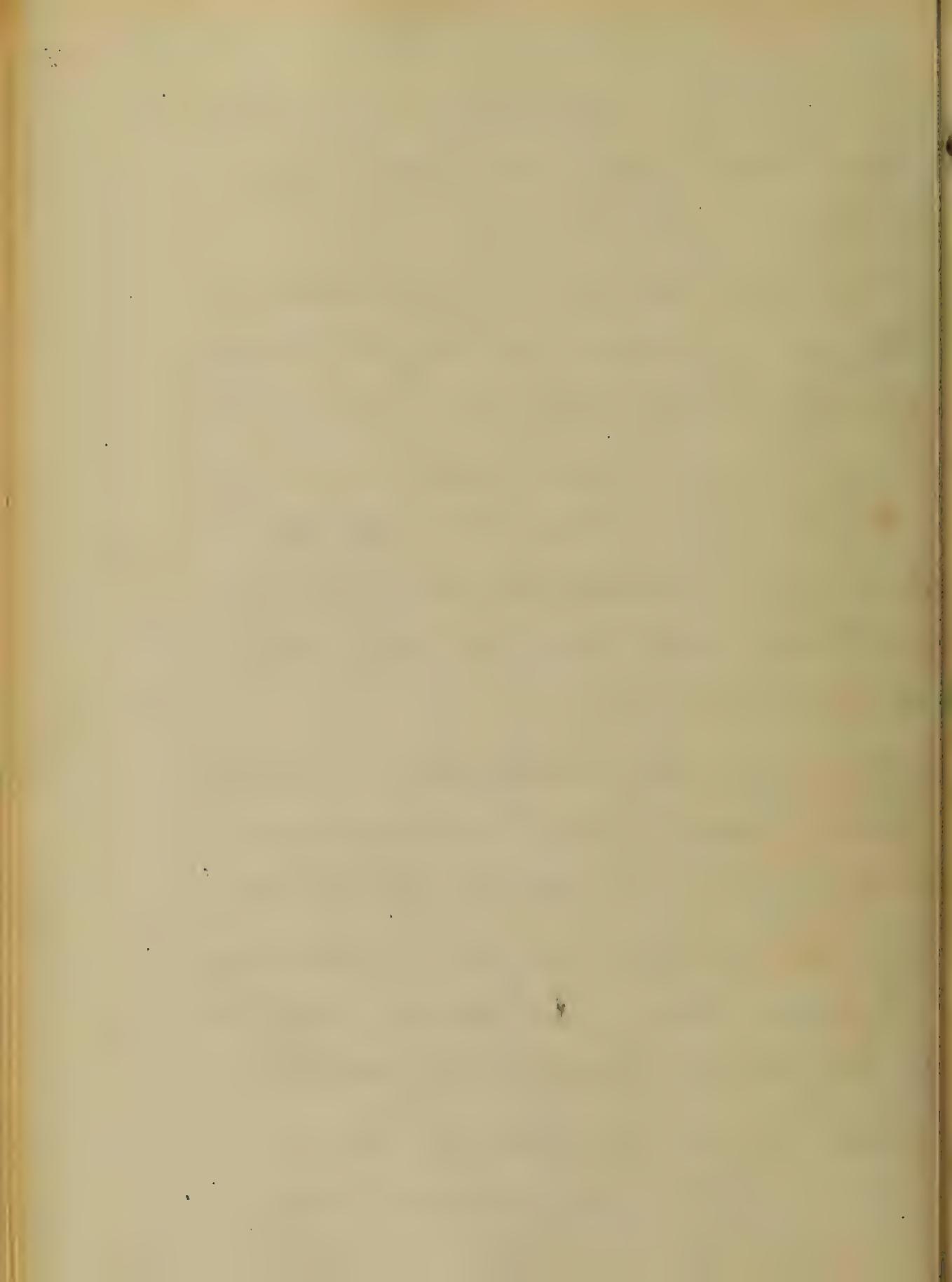
Should also be used when convulsions
and coma prevail.

When sleep cannot be induced by
the use of opium, it may be produced
by etheral inhalation, but it should
be given with much caution.

Belladonna is sometimes applied
to the pupil, which has the effect of
contracting it, and rids it of the
ideal illusions.

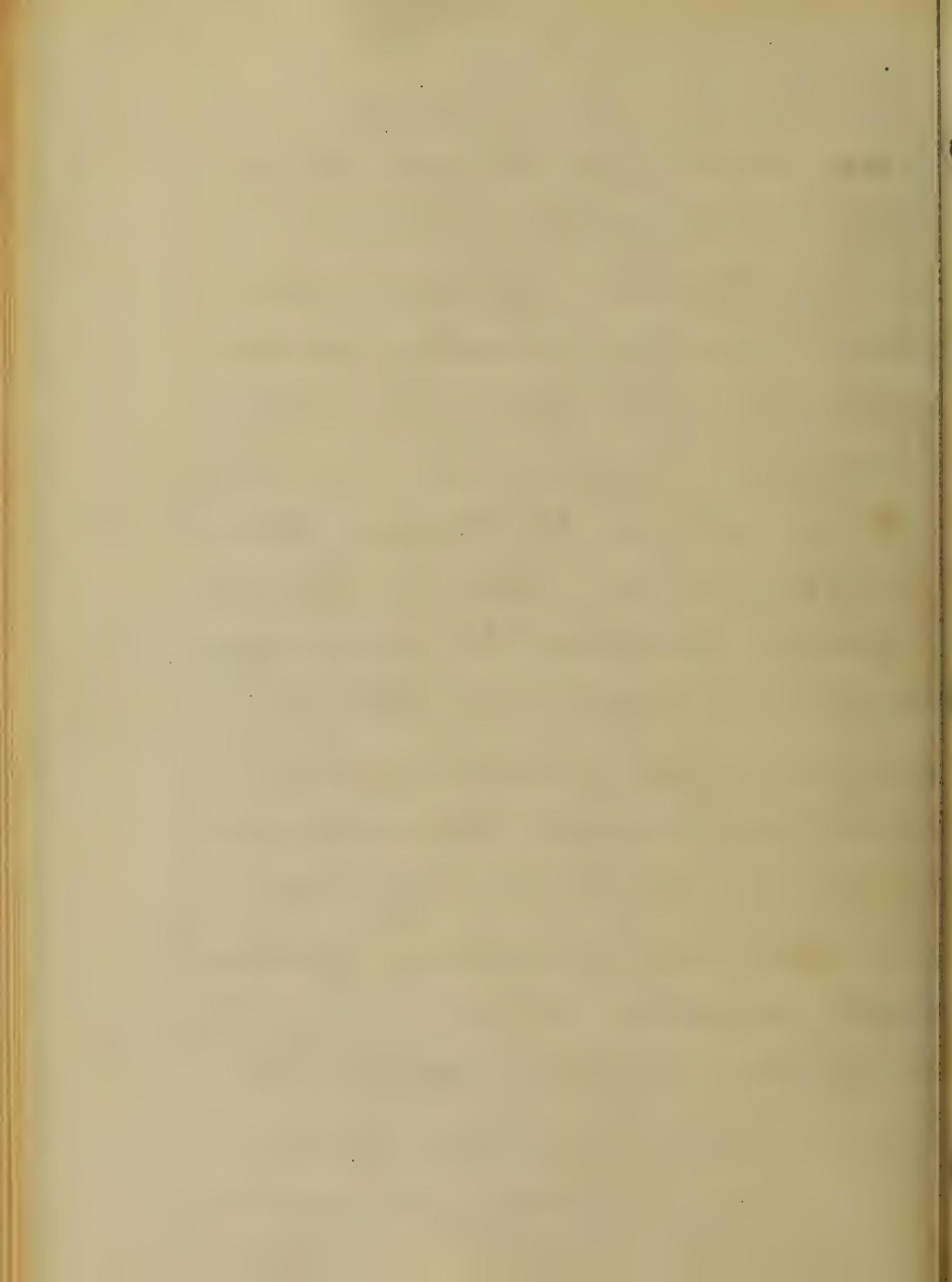
The sleep of the patient should not be
disturbed unless symptoms of coma are
evident, when he awakes he should
have nutritious food to obviate exhaustion.

In cases where the patient is affected
by the direct agency of the alcohol
presenting an example of the



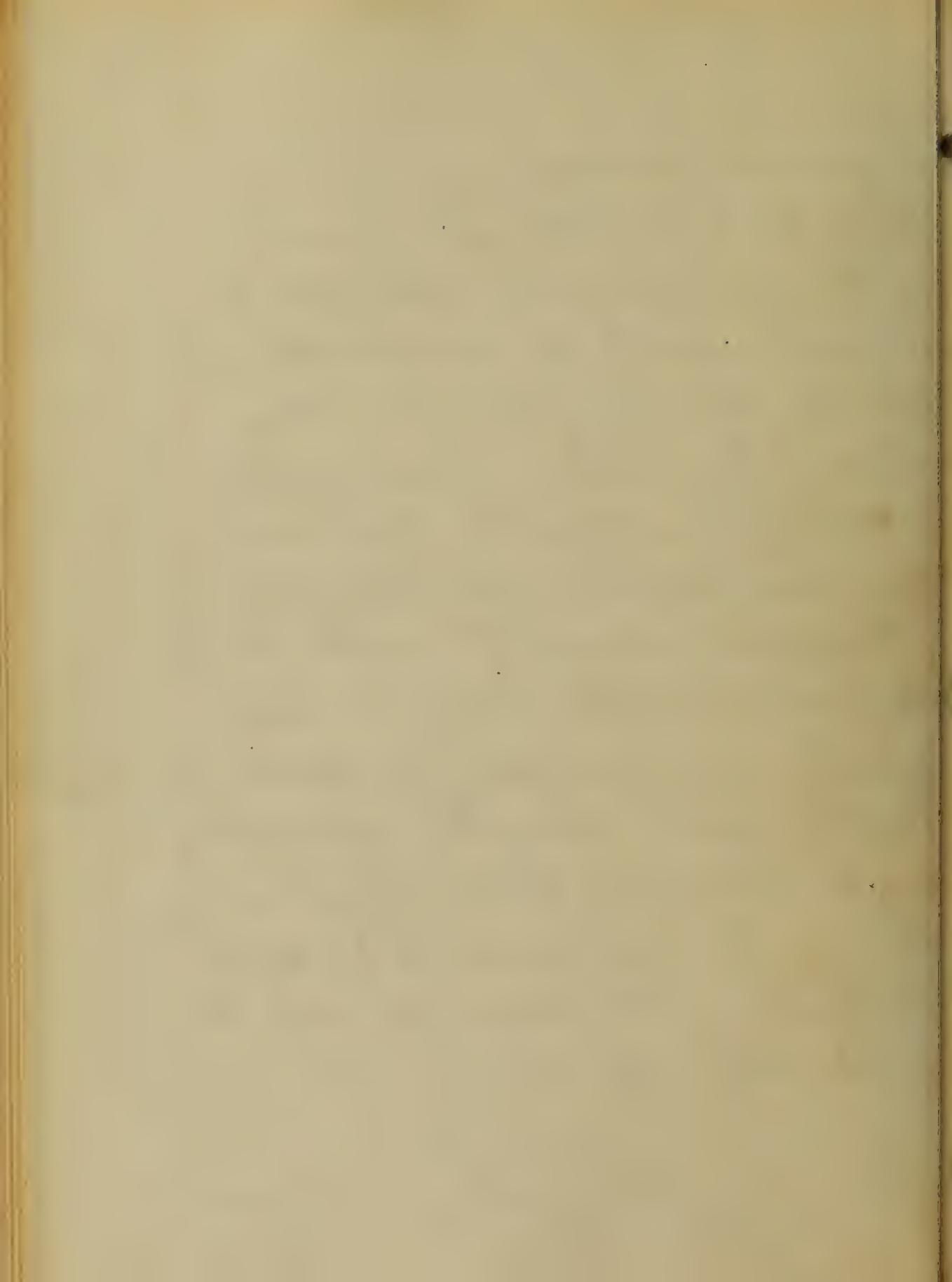
complicated type, the above treatment should be modified. It now becomes necessary to prevent affections of the brain by resort to bloodletting and cool applications to the head. If the symptoms of congestion disappear, and the ordinary delirium sets in, the simple treatment must be resumed. But if stupor or convulsions continue, the whole scalp must be blistered, and stimulants given in necessary quantities. The arterial and nervous stimulants given in necessary quantities are preferable, such as carbonate of ammonia, capsicum mush, assafetida.

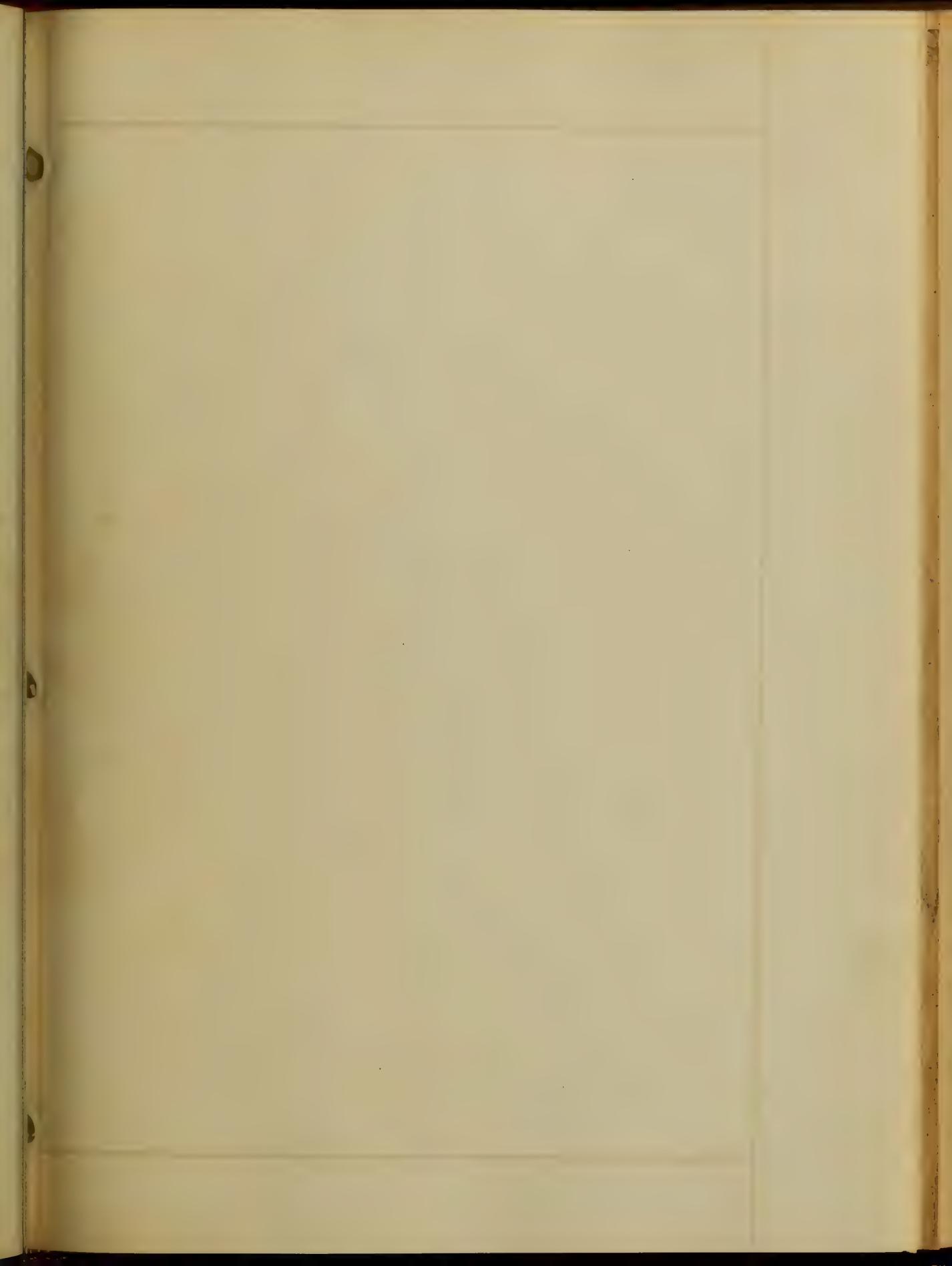
In the cases of surgical accident the treatment for simple cases should

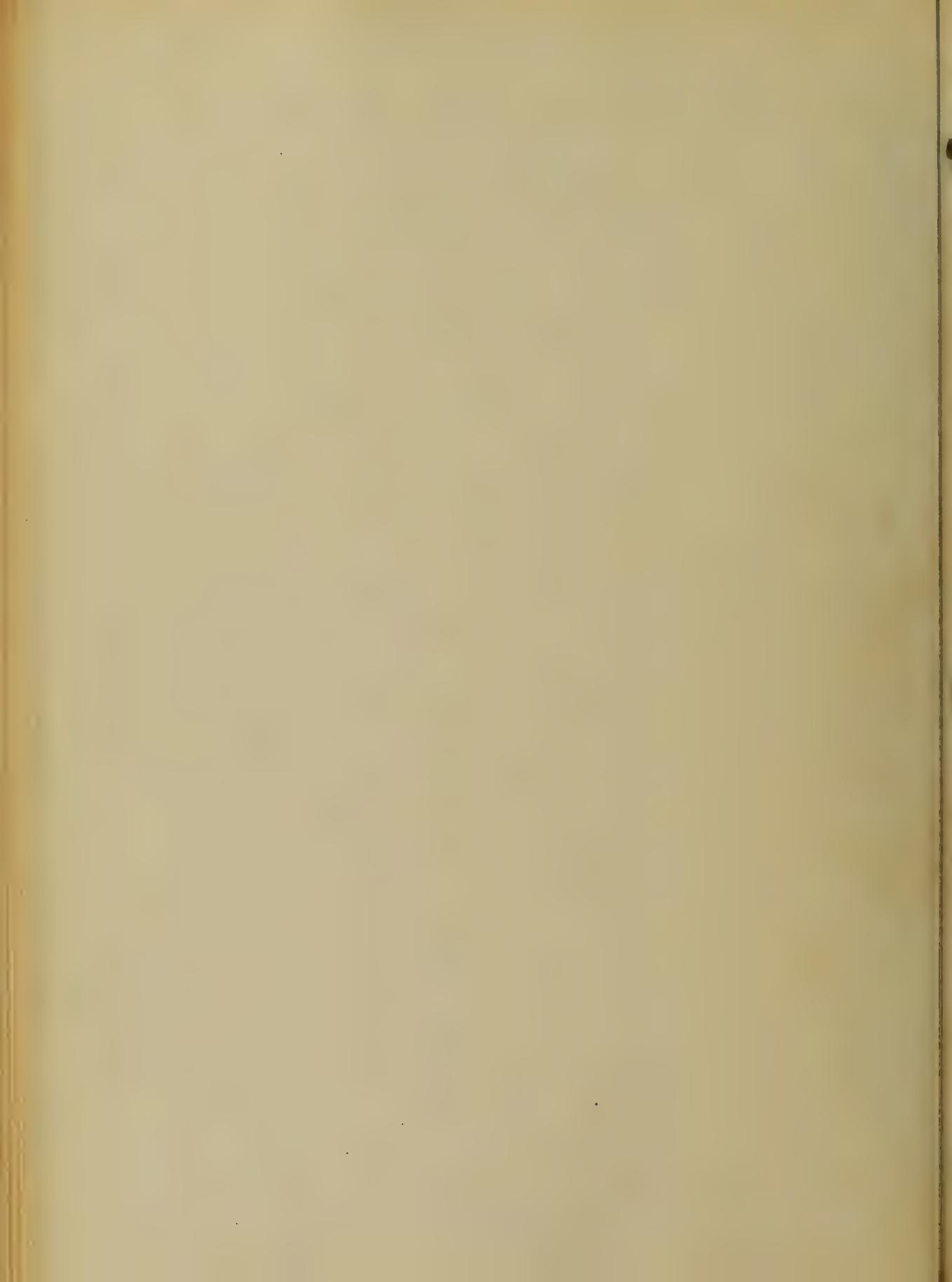


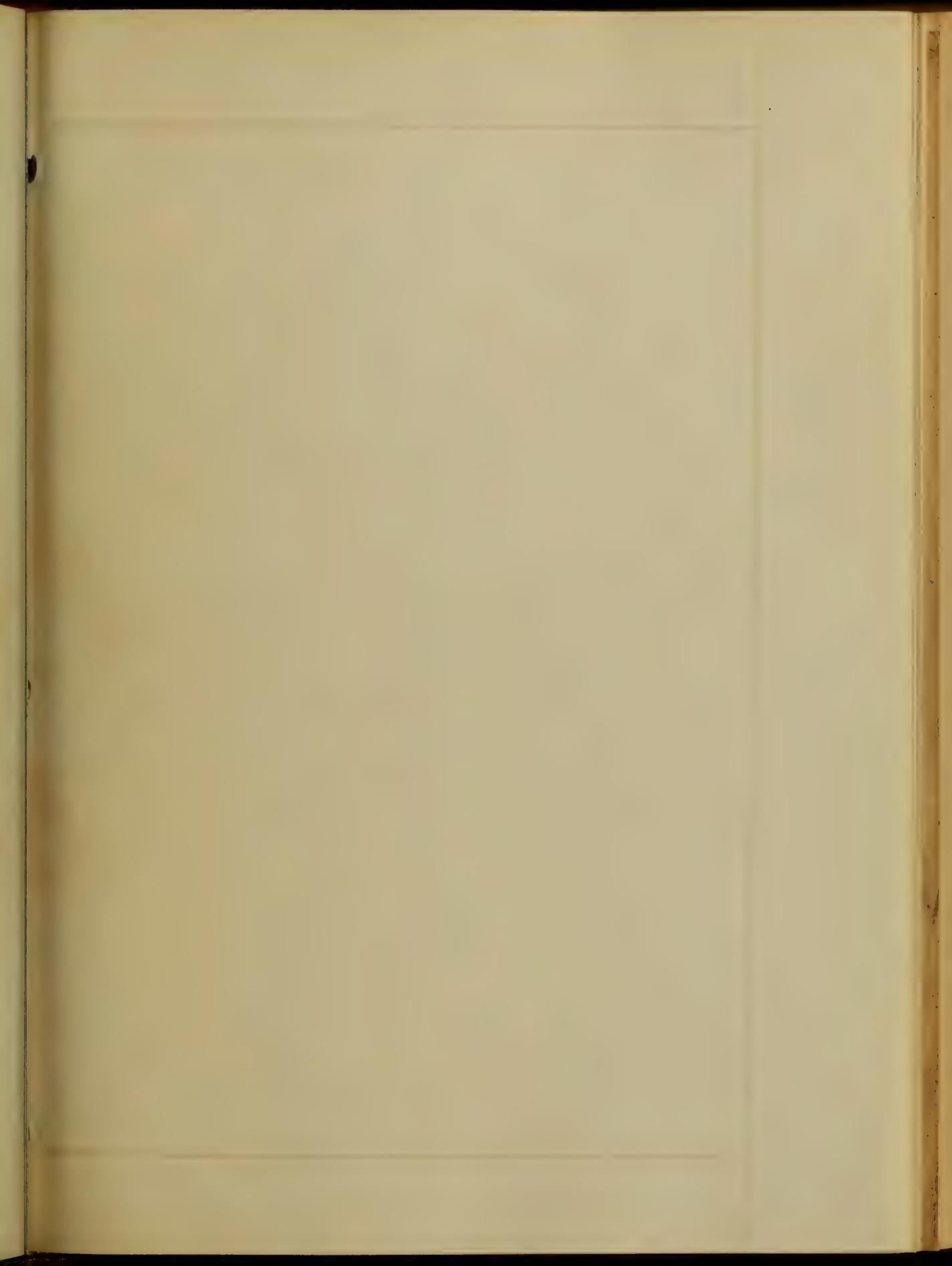
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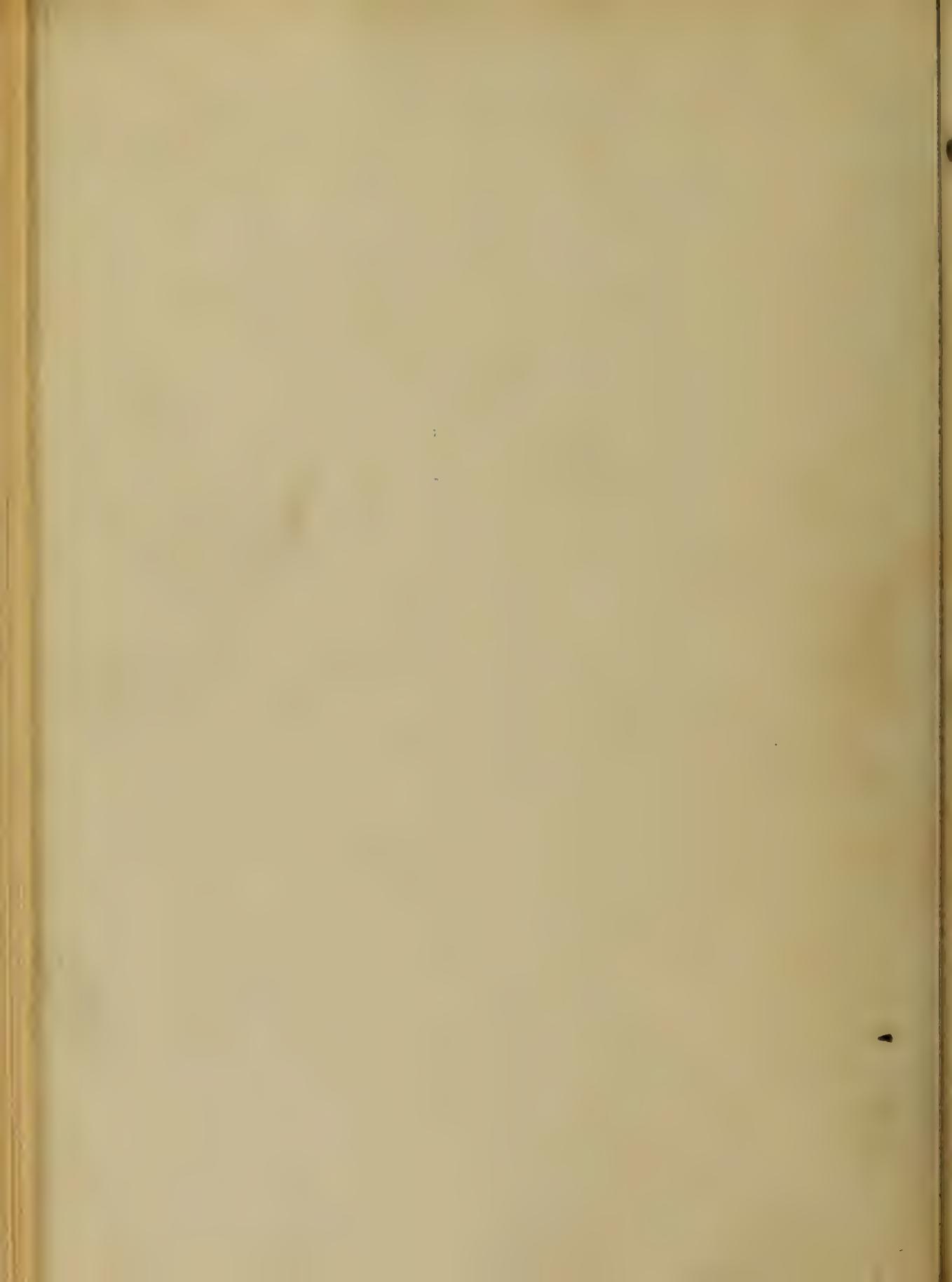
be followed, and opium freely used unless the head be the part injured. If the patient is feeble, there will be a greater necessity for alcoholic Stimulants than in ordinary cases. Quinia may be used to advantage. Some of the most difficult cases to treat are those complicated with phlegmasia. Bloodletting should be resorted to, and alcoholic Stimulants in such quantity as is necessary to control the delirium. When the inflammation can be relieved by leeches or cupping these are to be preferred to the lancet. Inflammation of the brain presents the greatest difficulty.



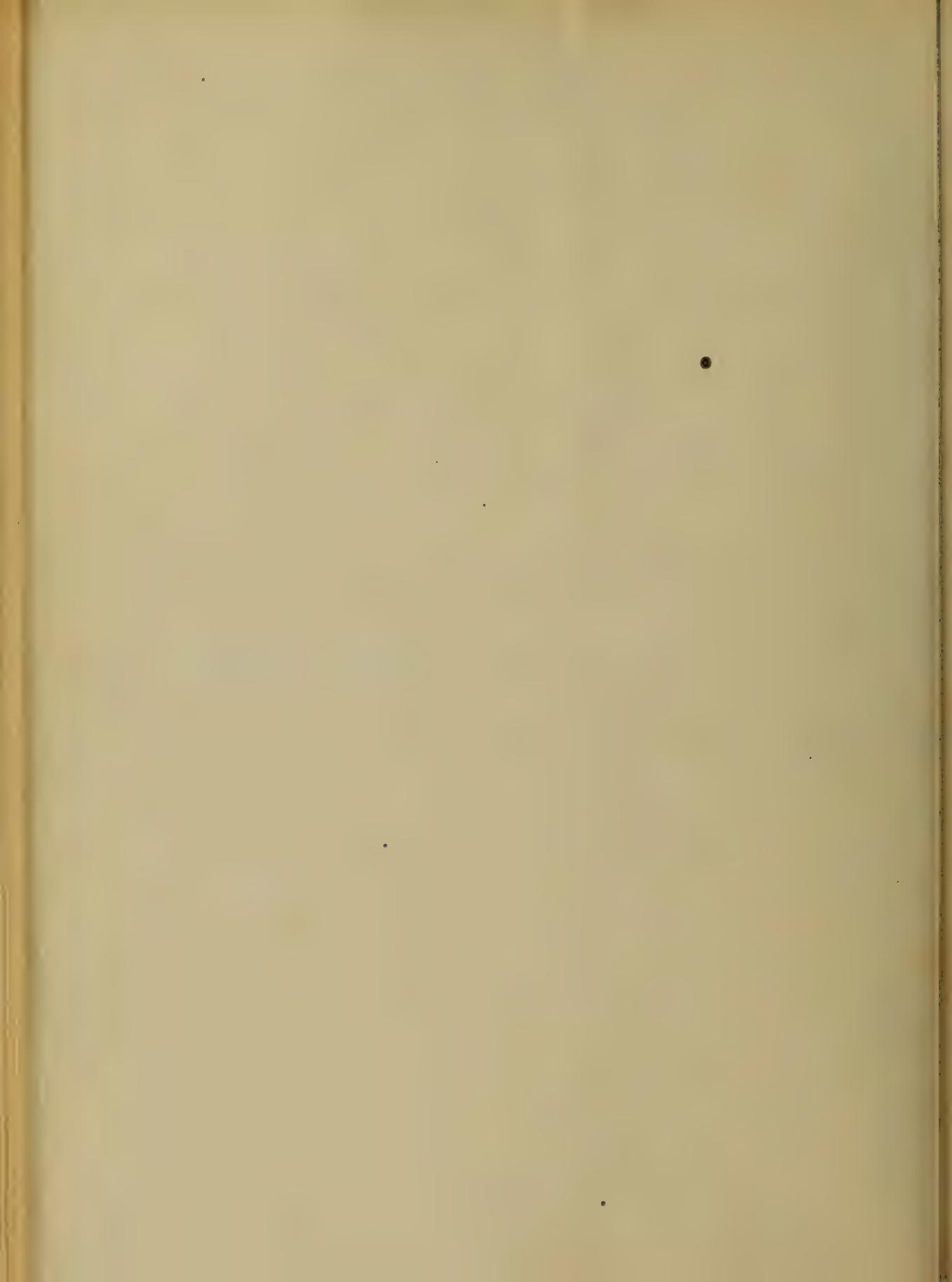




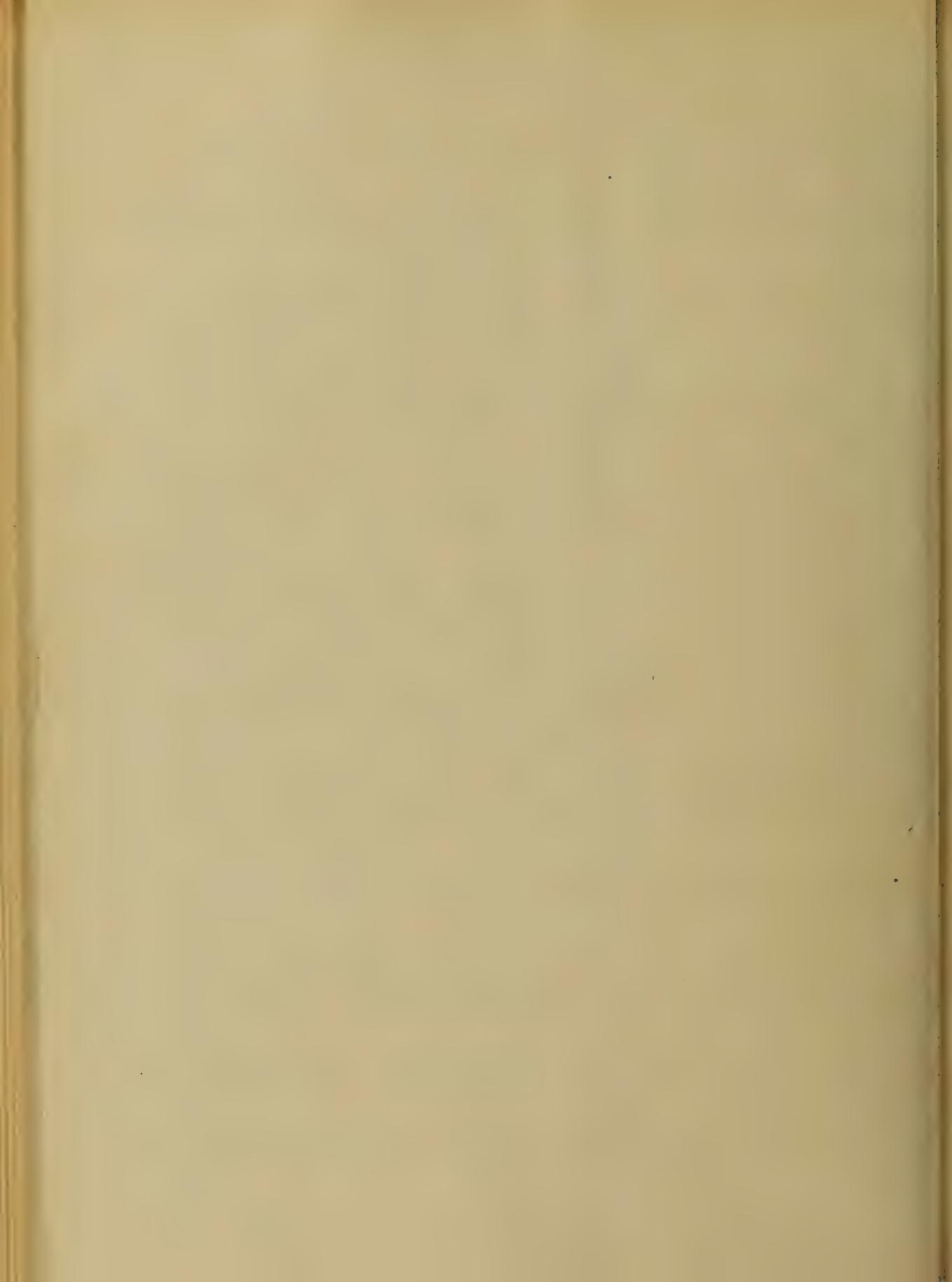




Stand at the table
in
the other room
and take the paper
from the floor, lay
it on the table
and get it off

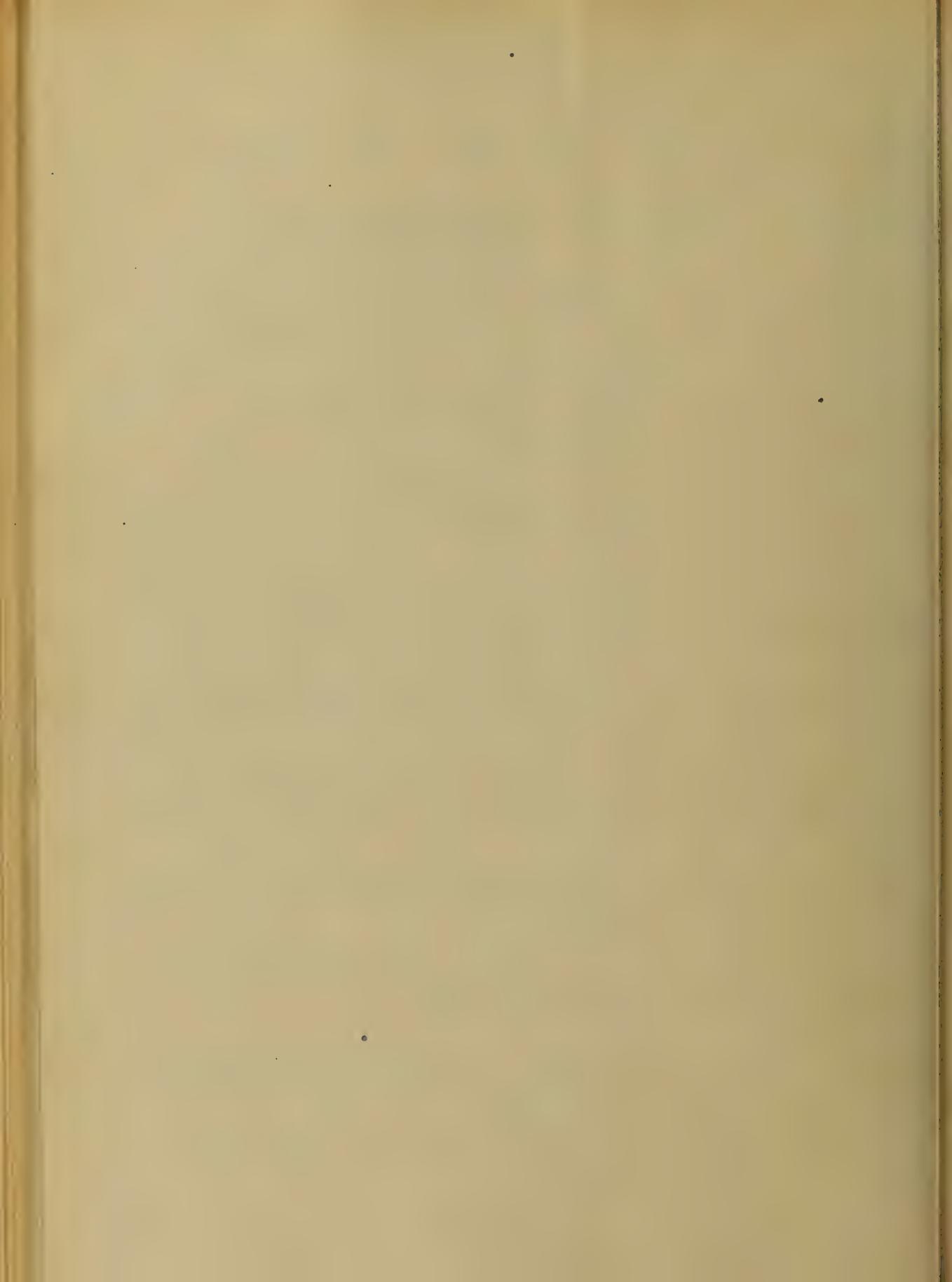


From a student of Materia
Medica I think I can justly say that I have
as yet seen no medicine which has done more
towards alleviating the ills of suffering humanity
and which better deserves the name of "magnum
Dei Donum" than opium. and it is looking upon
it in this high light that I have chosen it as the
subject of my dissertation. Feeling, as I do
my inability and at the same time a want of confi-
dence in myself to treat a subject which has
been so often handled by others & brighter minds
and more experience than myself. Having dur-
ing my first course of lectures at the University
of Virginia given an attentive ~~ear~~^{time} to the
lectures of Dr Davis the distinguished Professor
of Materia Medica. And my mind being refresh-
ed by the talented Professor of the University of

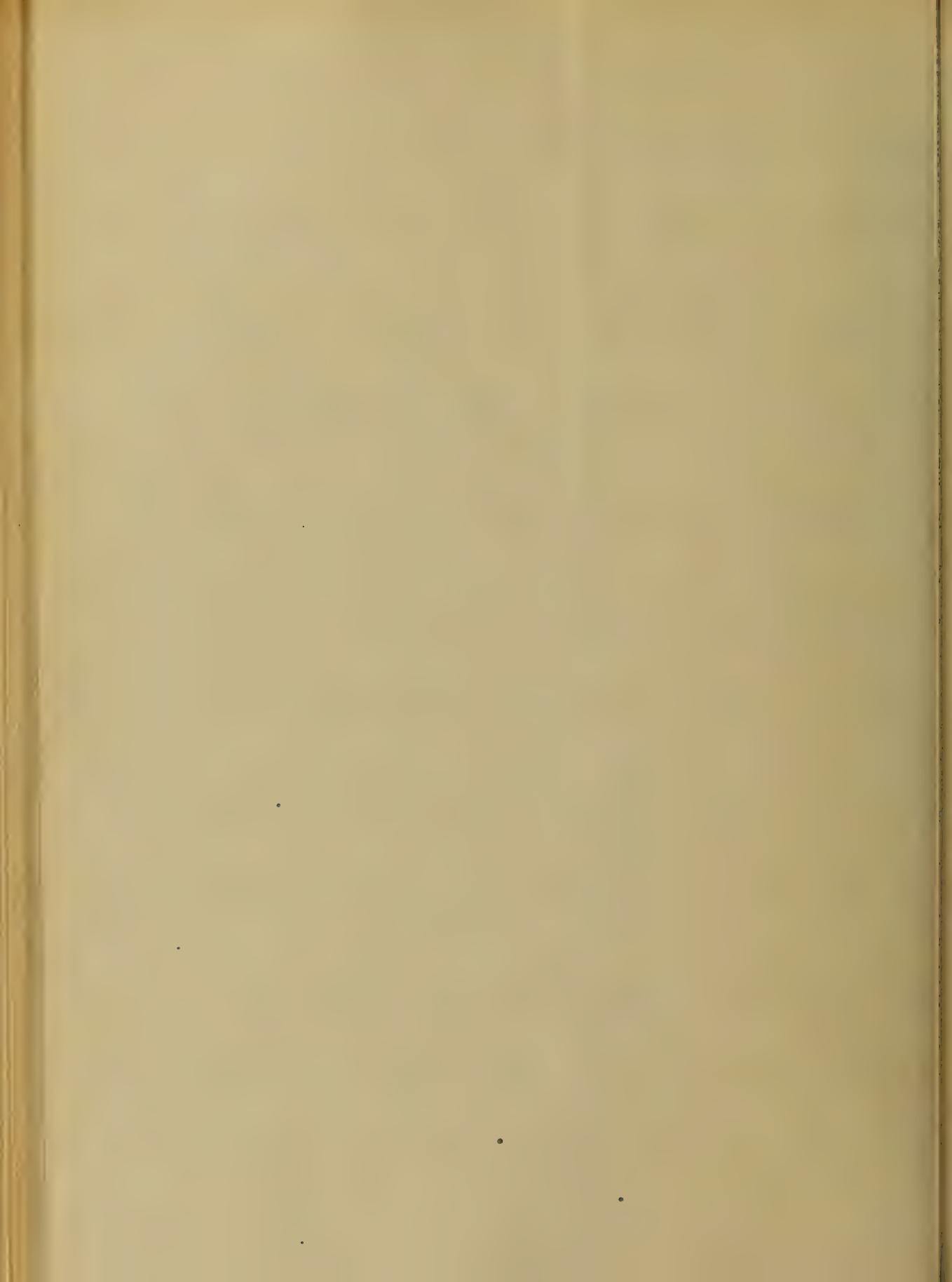


and I hope the few ideas which I shall express on the following pages may meet with your approbation.

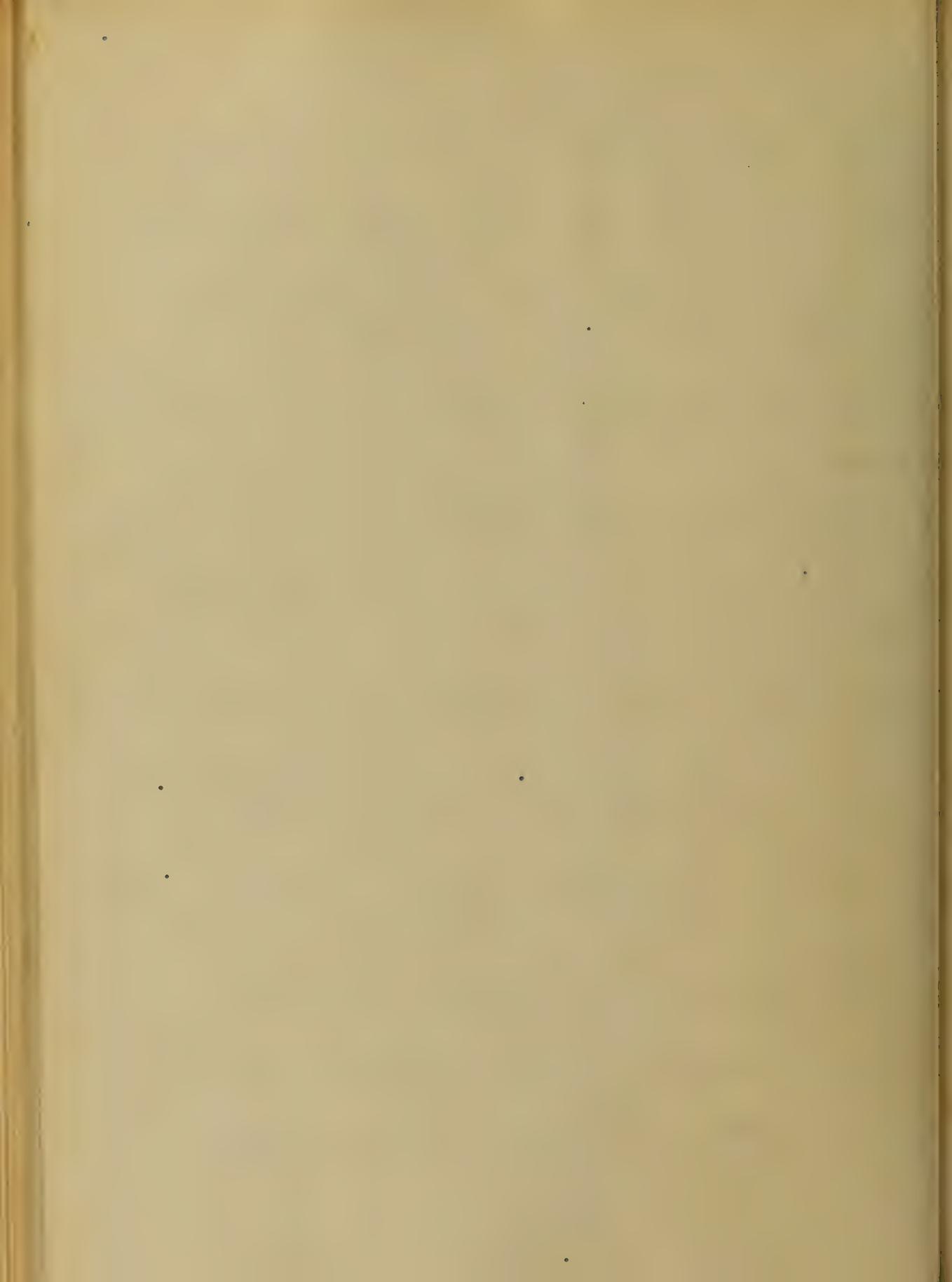
Opium is the concrete juice of the unripe capsules of Papaver somniferum. The poppy can be found growing in various countries most abundantly in Asia minor - Hindostan and Egypt. The plant is generally 3 or 4 feet in height - sometimes 5 or 6 ft. Incisions are made into the half ripe capsules. The juice exudes, and is collected and dried. The opium generally used in this country is that exported from Sumatra of which it is said a large amount is nearly exported. Estimated at from



Three to four hundred thousands pounds
It is seen in lumps more or less -
round - weighing - on one of 100 lbs.
and is of a dark reddish brown
color. It has the evidence externally
of having been wrapped in some kind
of leaves. When fresh it is soft - but
becomes hardened on age. Its broken
surface presents minute shining fibers
and its cut surface a waxy lustre. It
has the peculiar smell of Laudanum
Has an acrid bitter taste. Partially solu-
ble in water - alcohol and dilute acids
Inflammable when dry. The essential
principle of opium is Morphia, a
vegetable alkaloid. It exists combined
with meconic acid. Good opium

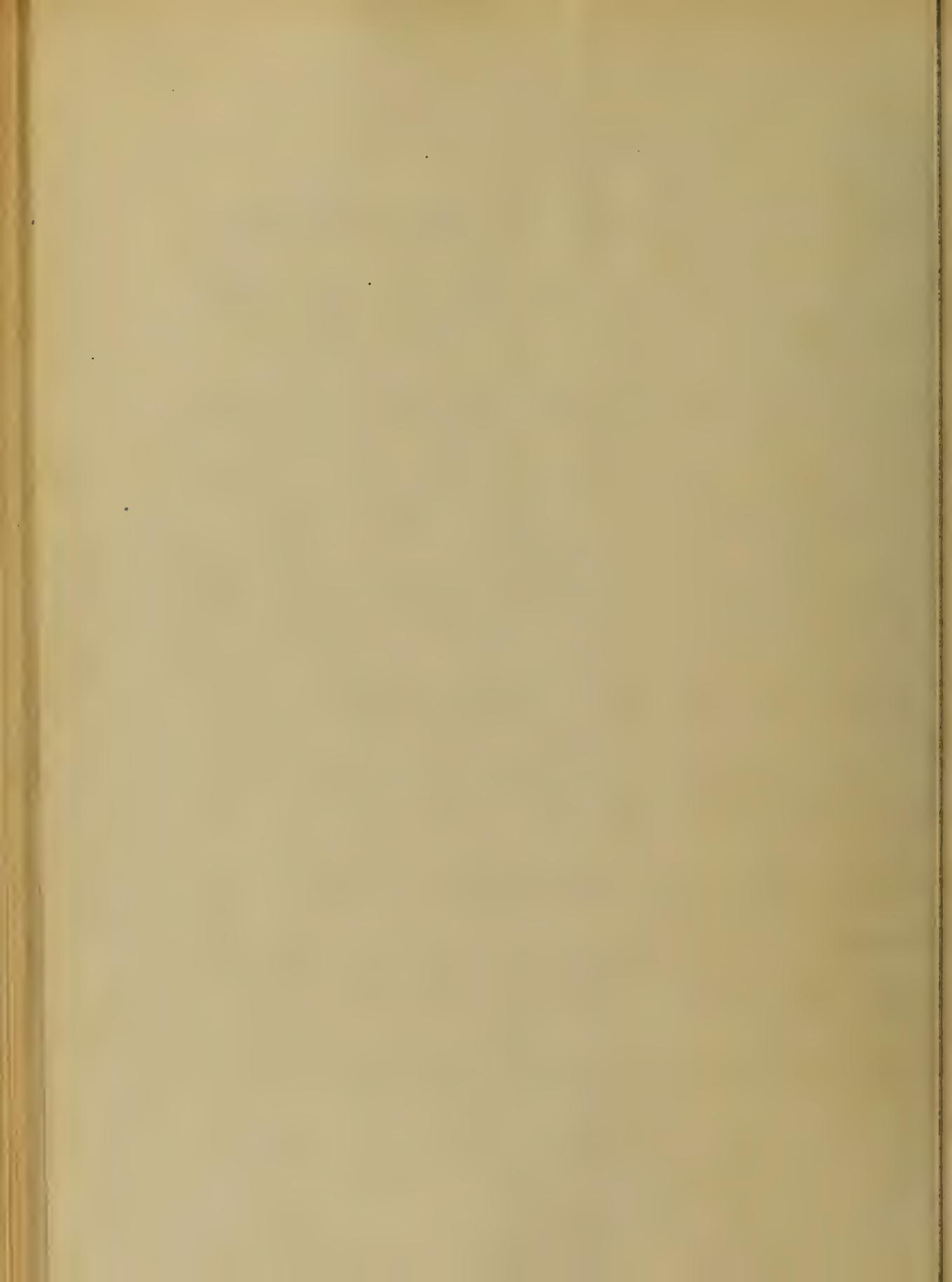


yields about eight, for a lb of morphia
Smells very strong - has bitter taste,
and when drawn over white paper makes
an interrupted mark. Morphia was dis-
covered in 1817. It exists combined with
meconic acid. It is generally extracted from
Opium in the following manner. The
Opium is sliced and treated with water
- This dissolves the meconate of morphia
An alkali is then added - such as Am-
monia. The morphia is precipitated and
colored. Alcohol is then added to hold up
the coloring matter. Then collect and
purify by boiling animal charcoal and an-
imal charcoal. Morphia is a white mys-
taneous substance - intensely bitter. insol.
- ble in water - partially soluble in alcohol



5

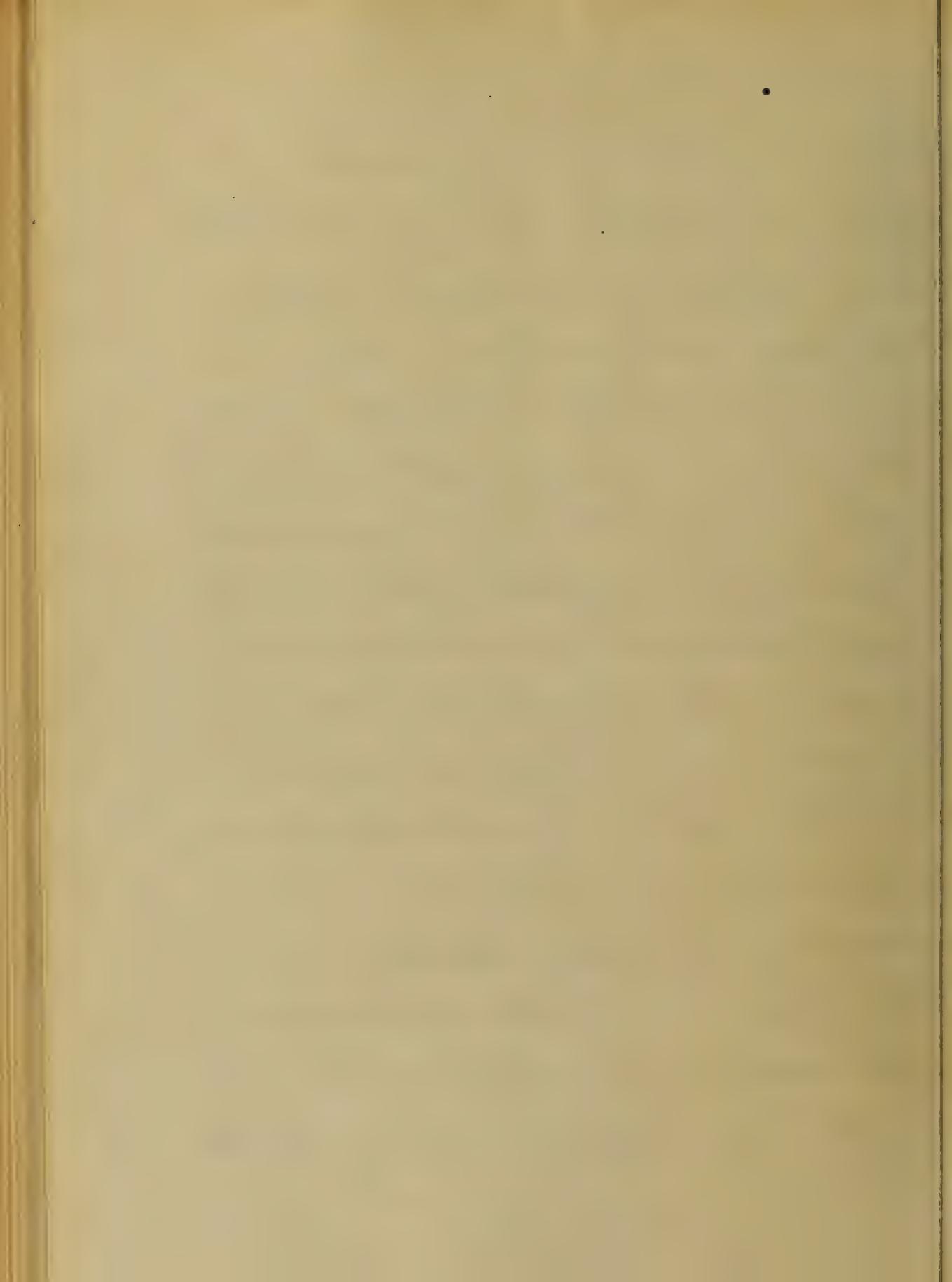
-ficially so in dilute acids. There are various preparations of Opium. The most ^{common} of which are Dovers Powders - Tinctura opii - Tinctura opii camphorata and aqua opii.
Dovers Powders contains $\frac{1}{10}$ Opium - $\frac{1}{10}$ Ipecac and $\frac{8}{10}$ Sulph-Potass-Zauda. It is prepared by taking powdered Opium and subjecting it to heat & heat. The active principle is diabolis. Contains $\frac{1}{4}$ ounces of opium to a pint of spirit.
The Camphorated Tincture of Opium contains Camphor-oil of anise - Benzoic acid and honey. 30 grs of opium to the pint.
Black drop-vinegar is used as the solvent. It contains nutmeg - sugar and - falks. - 74 grs of opium to the ounce.
As it is not directly within my province



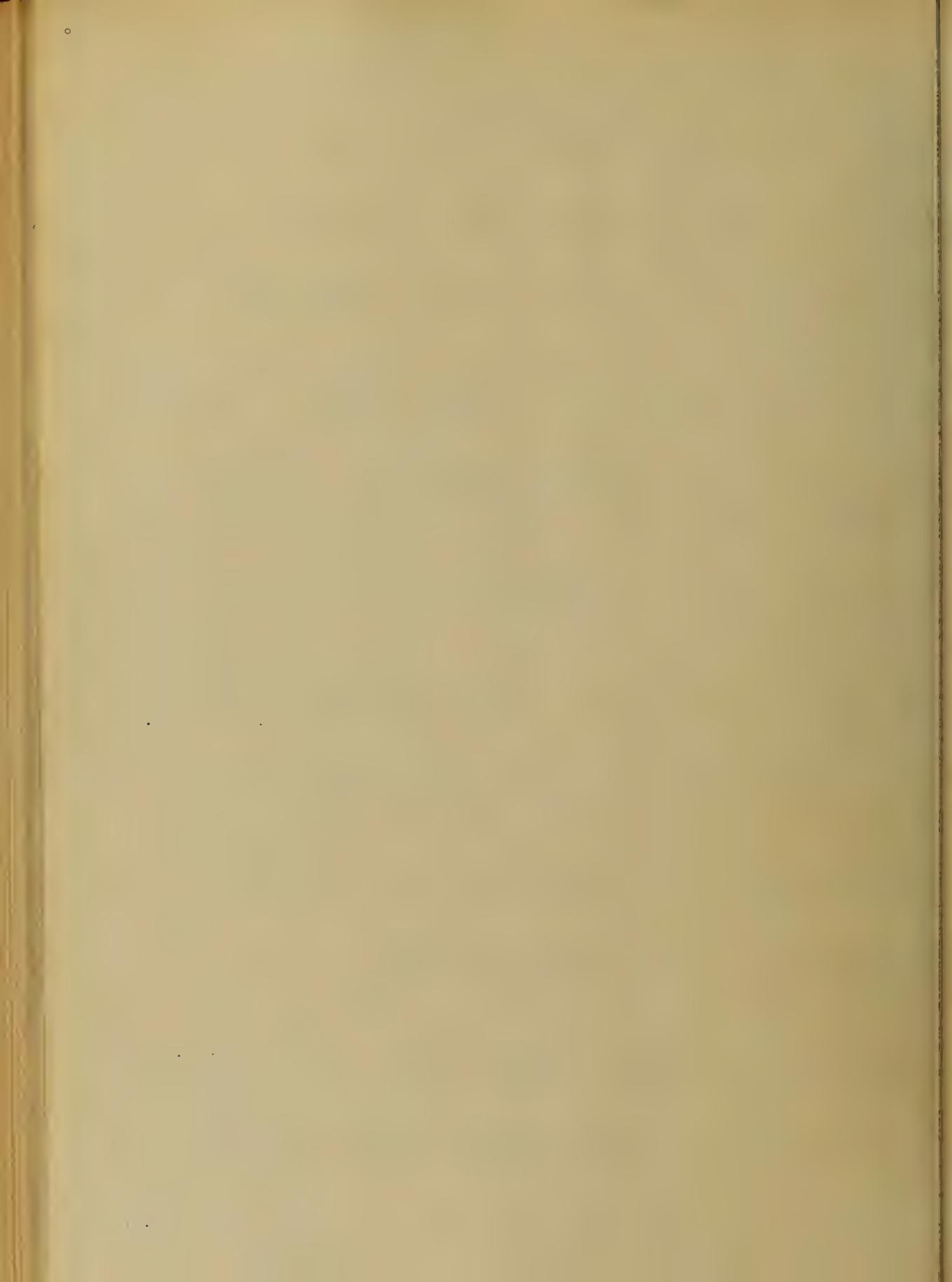
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to speak of the various preparations of Opium. I hope that a passing notice of the most important of them may be sufficient. Opium is administered in various ways. Generally by in powder or pills. The next most common method by the rectum - mixed with 3 or 4 tablespoonsful of mucilage or else made into a suppository 2 or 3 times as much is given this way after the mouth. It is also administered by the Epidiemic and Endemic methods - and still another very common way is by the Hypodermic method ($\frac{1}{3}$ as much as by the mouth). Effects of Opium.

When first taken it acts as a stimulant & afterwards (if in a sufficient dose) it causes sedation. Dr Davis says that the excita-



tion caused by Opium is more refined than
that caused by alcohol - Its effects are per-
- ceived in about 25 or 30 minutes after
being taken - A feeling of warmth or weight
in the stomach is experienced in 15 minutes
after it is swallowed - After this a dullness
in the head, which is soon followed by a
most delicious sensation, with an eleva-
tion of the whole moral and intellectual
nature" It is certain that the intellect be-
comes brighter - The imagination stronger -
and the feelings more refined - making one
feel like throwing off this mortal coil and -
wining his happy flight to those celestial
bright - "It is a dominant sign -
"The poet never had brighter fancies, or deep-
er feelings, or greater felicity of expression,

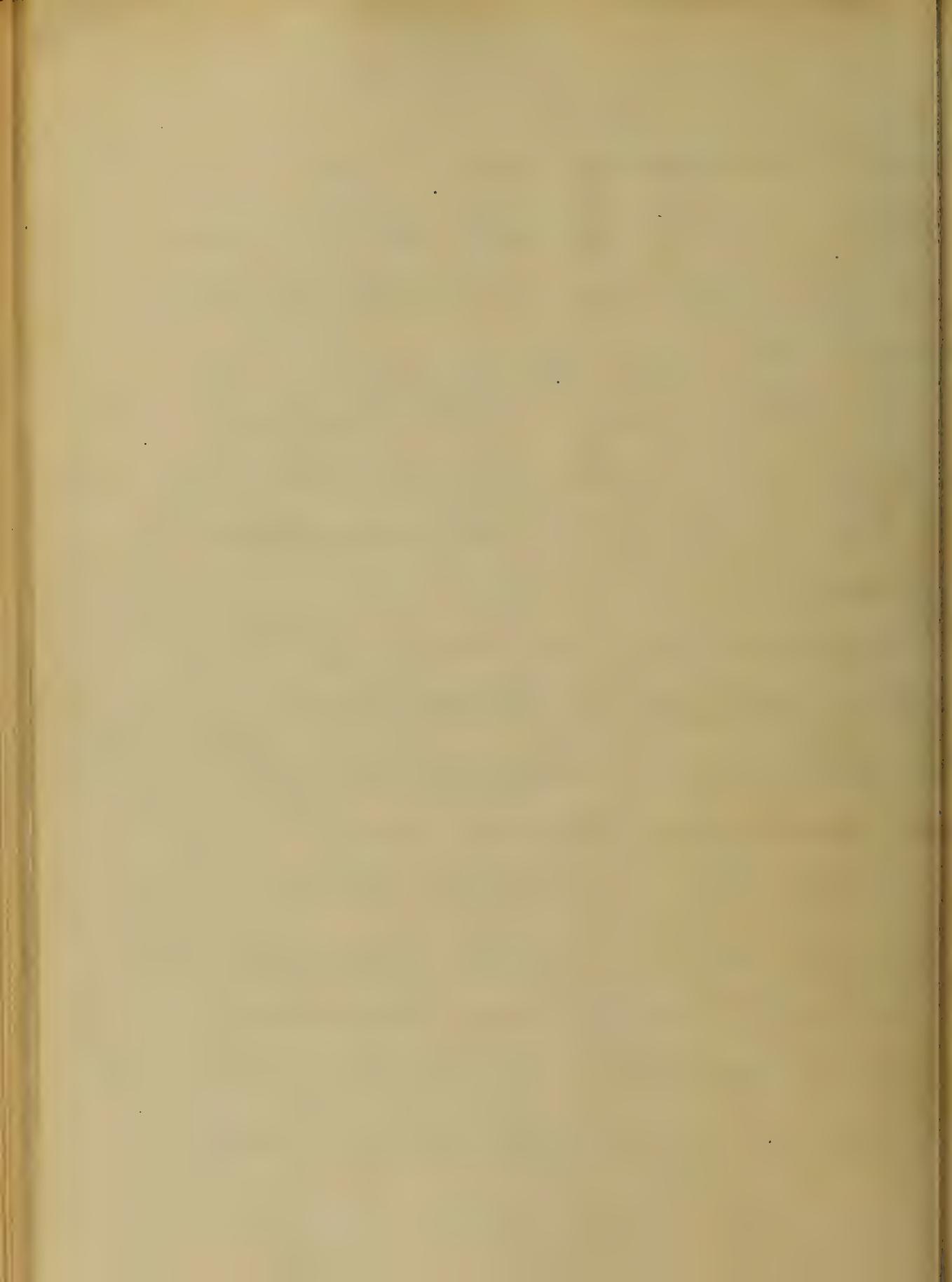


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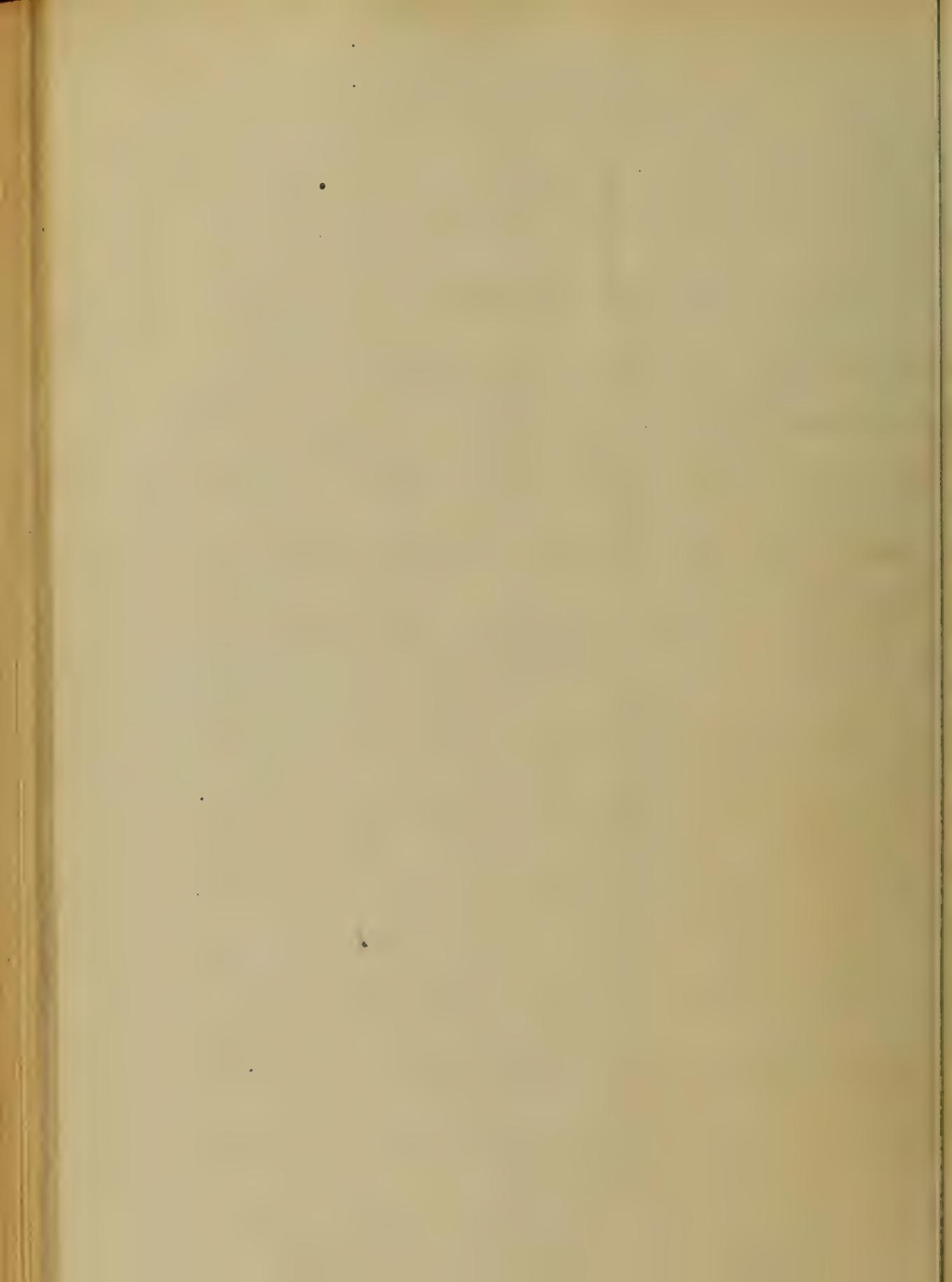
nor the philosopher a more penetrating or profounder insight, than when under the influence of opium in this stage of its action". It also increases muscular energy, so as to be more active and more able to bear fatigue. In the course of 3 or 4 or even 1 or 2 hours the patient sinks into the sweet embrace of Morpheus.

"as passes a summer cloud away,
as sinks the gale when the storm is over,
as gently shuts the closing eye of day,
as dies the wave along the shore."

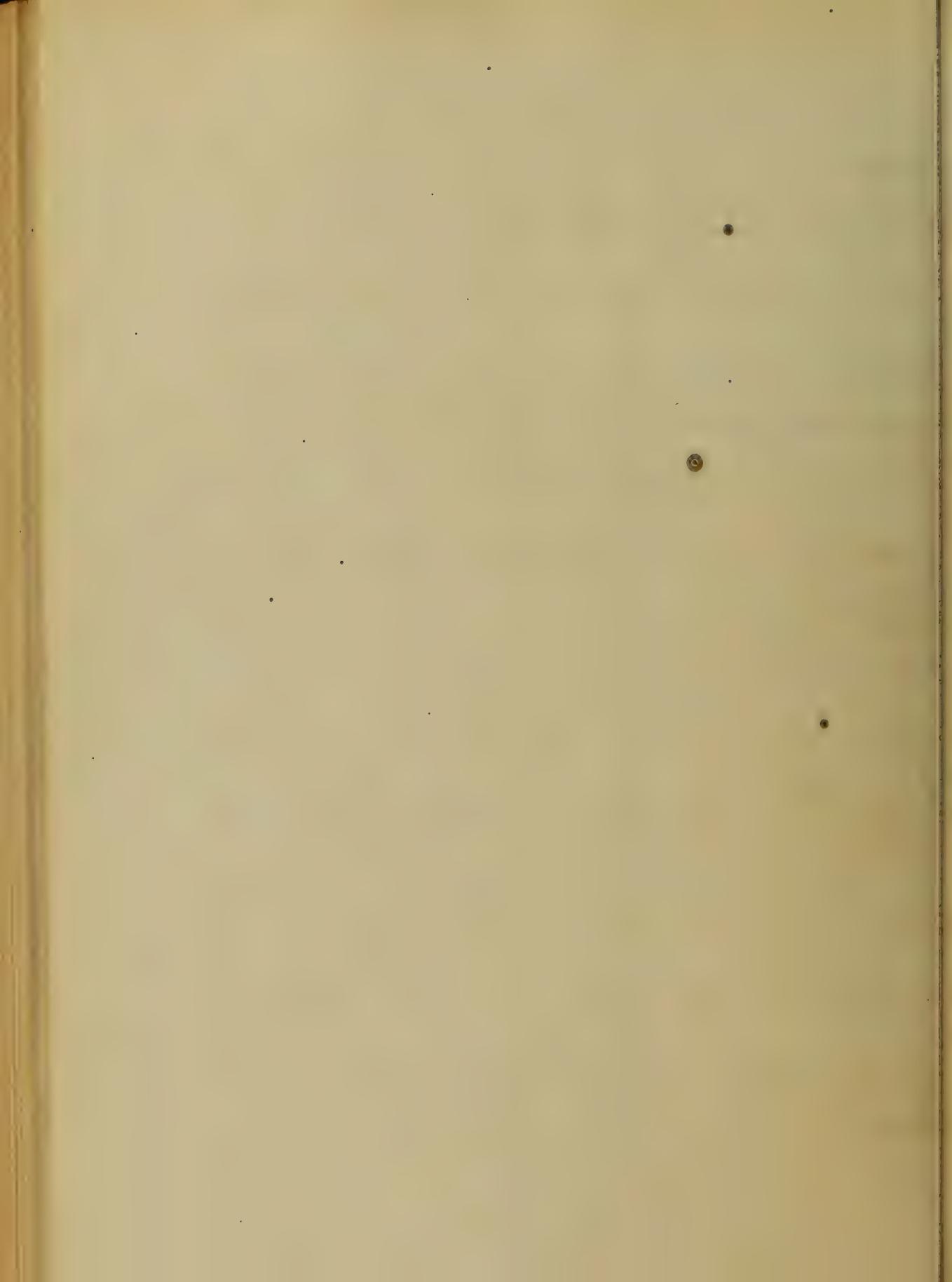
Sometimes the effects of opium are different
causing one to be restless - to talk in his sleep - and to have the most hideous dreams. This does not happen when given in sufficient doses. Alas! I am sorry to say



that this powerful drug - this precious gift
to man is often and much abused - The
lover when rejected by his mistress - being
plunged into the abyss of despair - and
when the delusive meteors of hope cease to
play around his fond soul - appeals to the
soothing effects of this potent drug
The poet when attempting to scale the heights
of Fancy often drinks the soothing draught
that his imagination may be brightened -
The drunkard who has drunk every cup
of joy - and every bump of care - drunk
draughts that common millions might have
quenched - when the fatal poison has no
longer the power of blunting his sensibility
has recourse to the more powerful in-



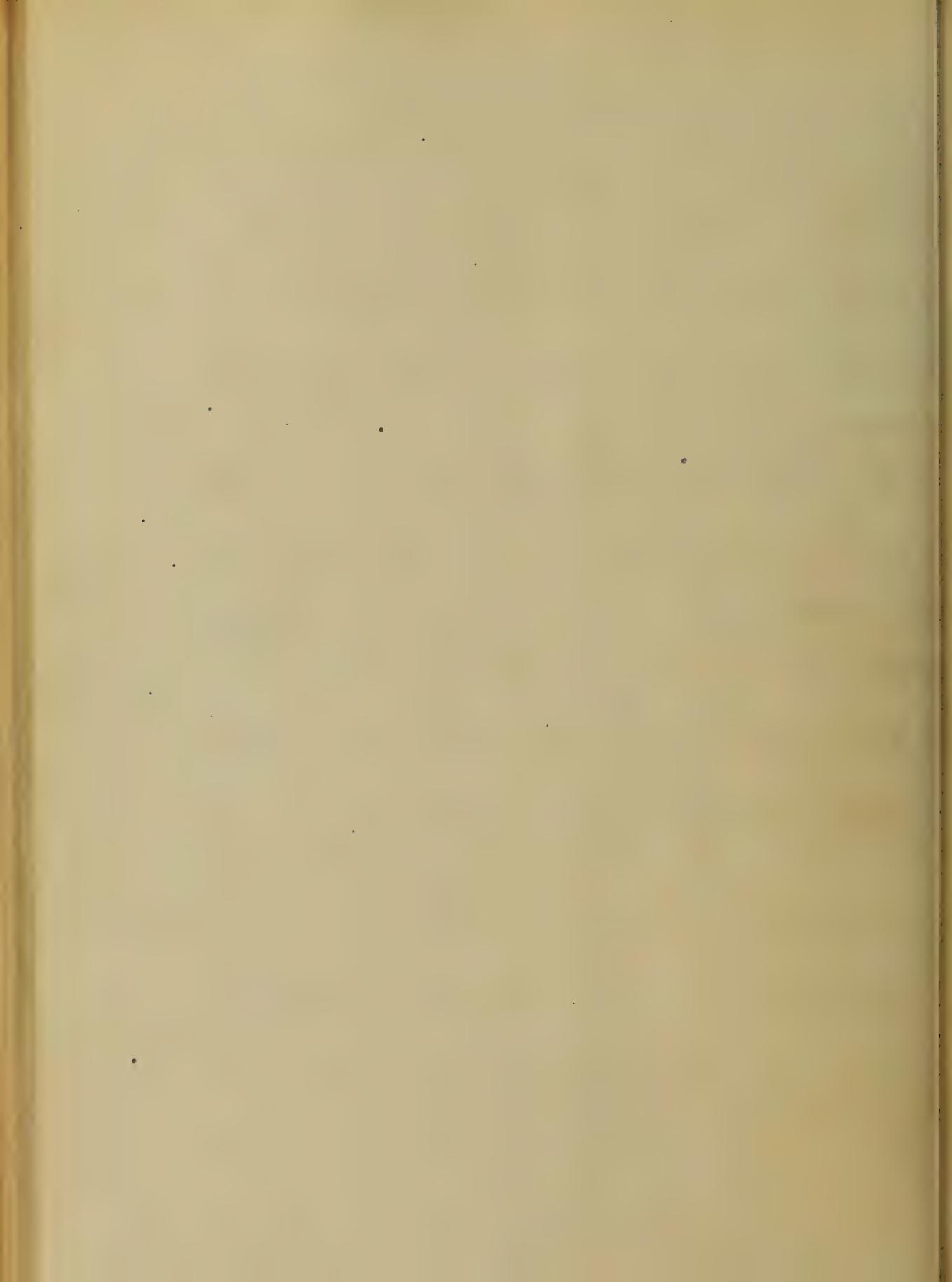
-fluence of Opium - The Opium Eah
is who has allowed this anaconda as in use
to wind itself around him and lead him
to "quaint shores and meads & fields" he
finds out when too late that he might have
attempted to seek blooming roses on the
cheek of death - Mellow you're he seeking
the icy pole or substance in this kind
of fleeting shades as to seek happiness
from the effects of this medicine
When taken in sufficiently large doses
Opium is extremely noxious. The symp-
toms from poisoning are sleep-drowsiness
or stupor according to stage of poison
The torpor becomes more complete
Death comes on in about 2 hours —



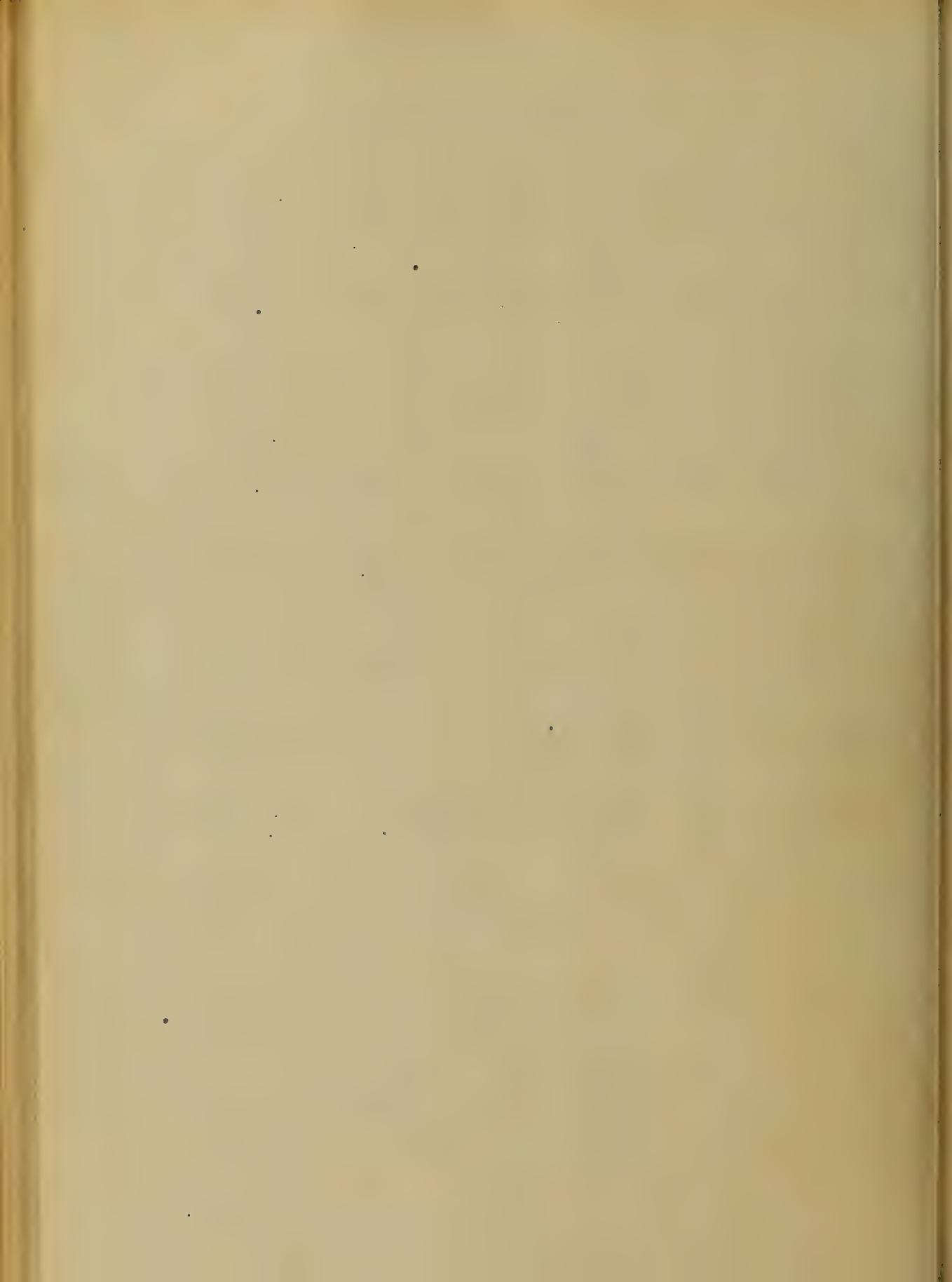
Pupil very much contracted - smell of Opium around - profuse sweat - Dark livid countenance & icteric expression - pulse slow breathing very slow - after death smell of Opium internally - Blood liquid - congestion of lungs and brain - It is hard to detect Opium as it rapidly decomposes - can find it only in the stomach - Have to detect one fluid, principally

Uses of Opium

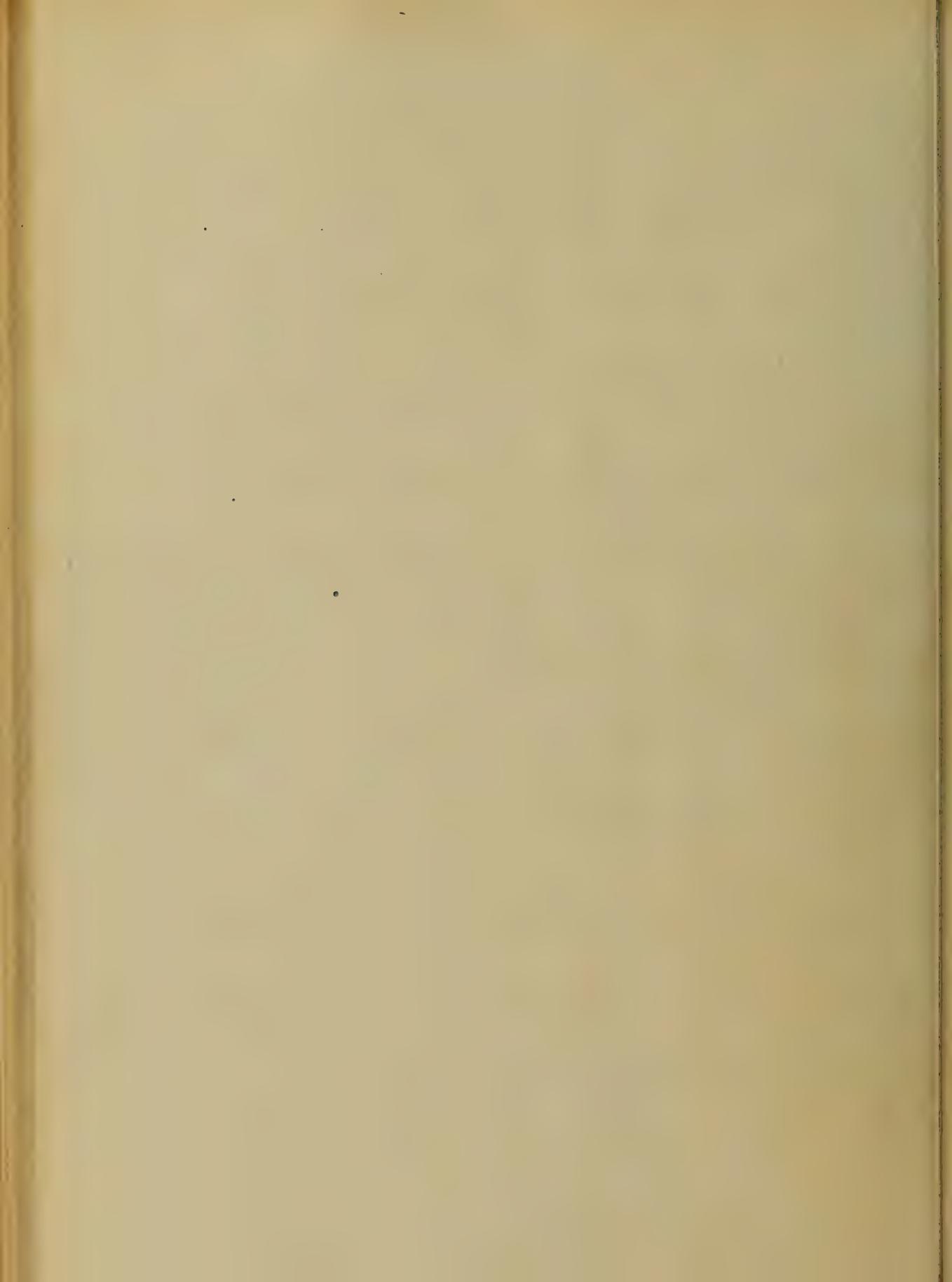
During convalescence after the force of a disease is broken and there remains pain - restlessness & an opiate will give relief - This administered by the Hypodermic -



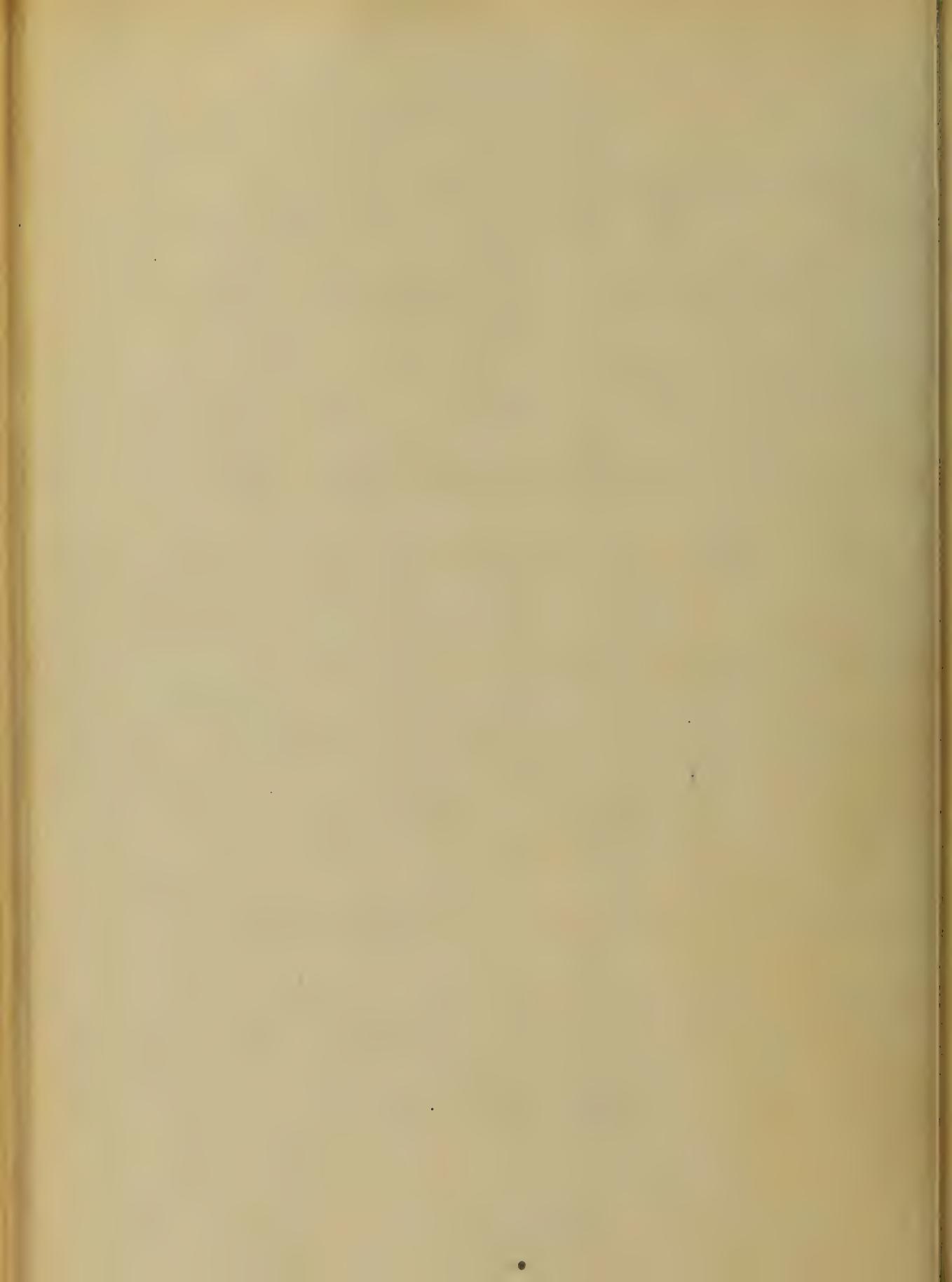
method for water-bills in curing
a Potū - In 3 galls - even when
there is low muttering delirium
& slipping down in bed it often
proves heretical. It can well be
given when the brain is inflamed -
I would watch the patient - If it in-
creases the symptom - discontinue it
and vice versa - If the habit is con-
tracted and the tongue dry in this dis-
ease use opium cautiousl - 20 drops
of the tincture may be given - if effi-
cacious repeat in an hour - In ca-
ses of colic - immerse in a warm
bath and stupefy with opium -
In violent pain of the bowels



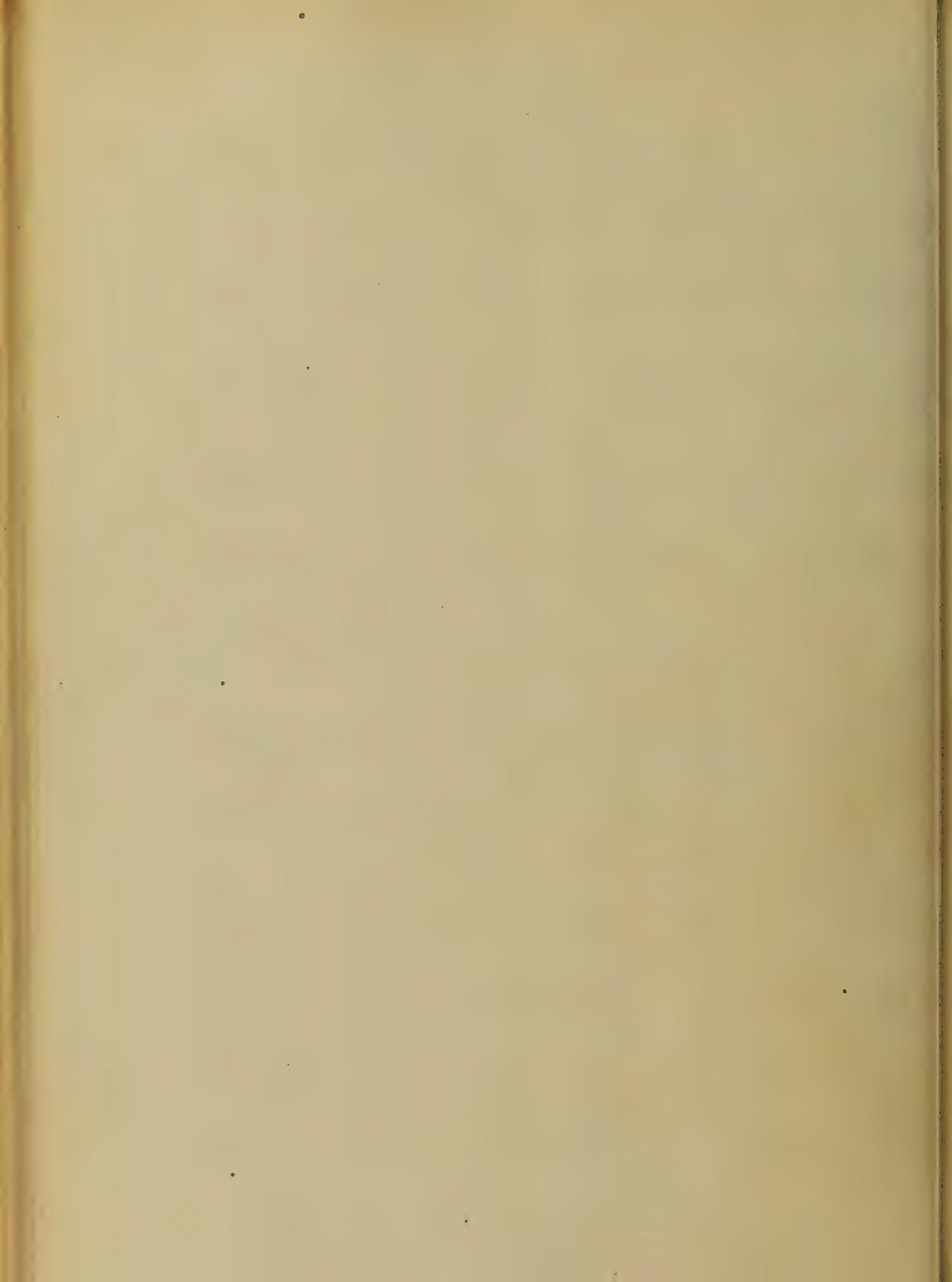
In affections of the heart - ex-
- gina Leptoris - Opium is given
In Dr. L'Heroux gives it by the
hypodermic method - after
surgical operations. In threat-
ened miscarriage - indicated by
intermittent pain in the abdomen
- slight discharge of blood - cause
patient to keep recumbent -
position and give full doses
of Jinc - 30 drops of tincture
repeated every hour - For
stoppage sometimes full doses
of Jinc are given - Cases
of impending inflammation
in free doses - In case of



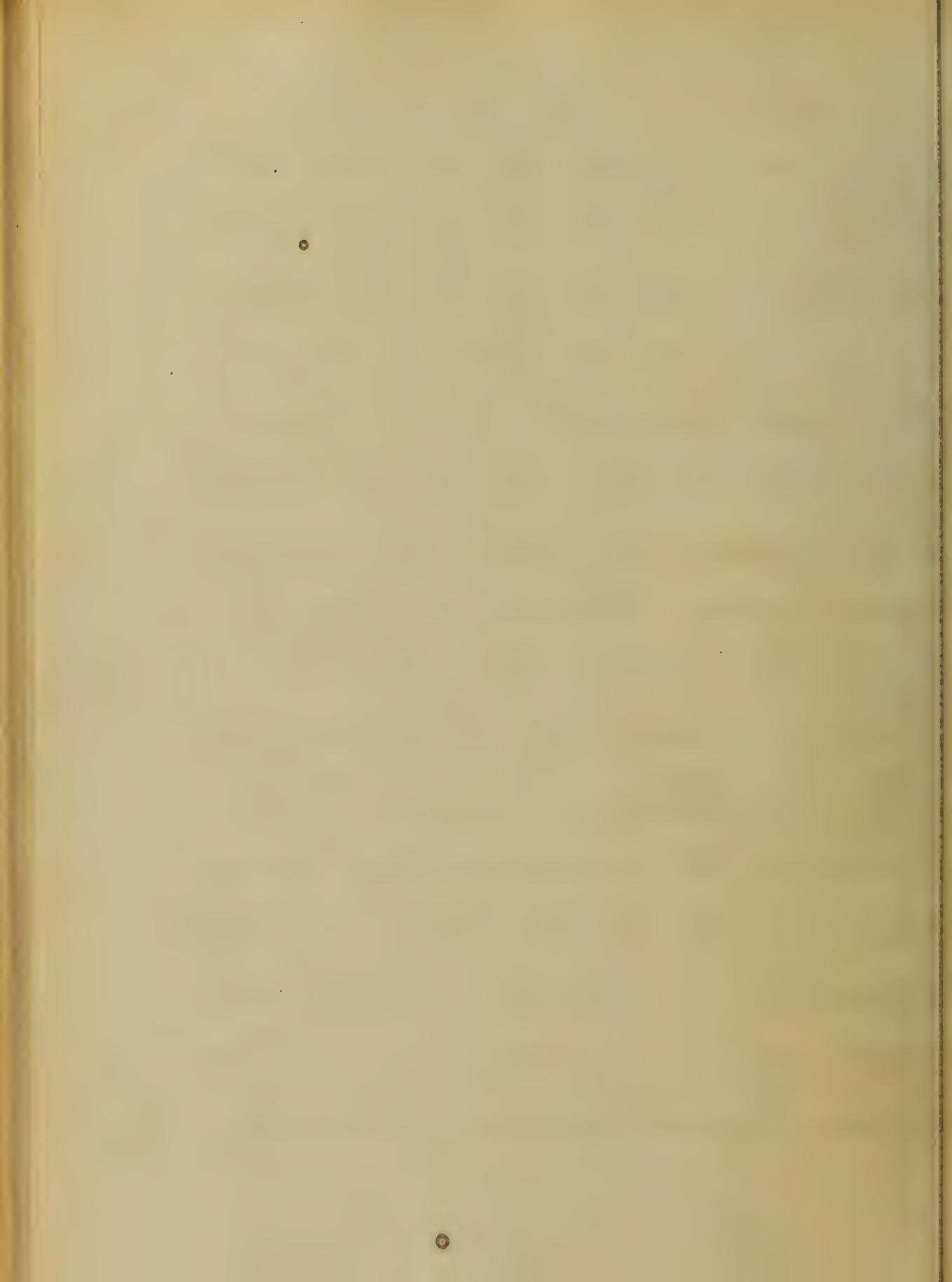
bloody stringy alvine passages
Opium will not pass - It eas-
es the poising - Given to re-
lieve spasms of Tetanus - by the
laudanum method - In irri-
tation of stomach not due to
inflammation - palpable in inser-
ting muscular specimen - Especially
strangulated hernia to aid in
restoring the intestine - To arrest
discharge from the bowels - Stimuli
and ulceration - In option - in-
charges from the air-passage
in diabetes Opium blunts the sen-
sibility - It is peristaltic action
and stops secretion - In fevers



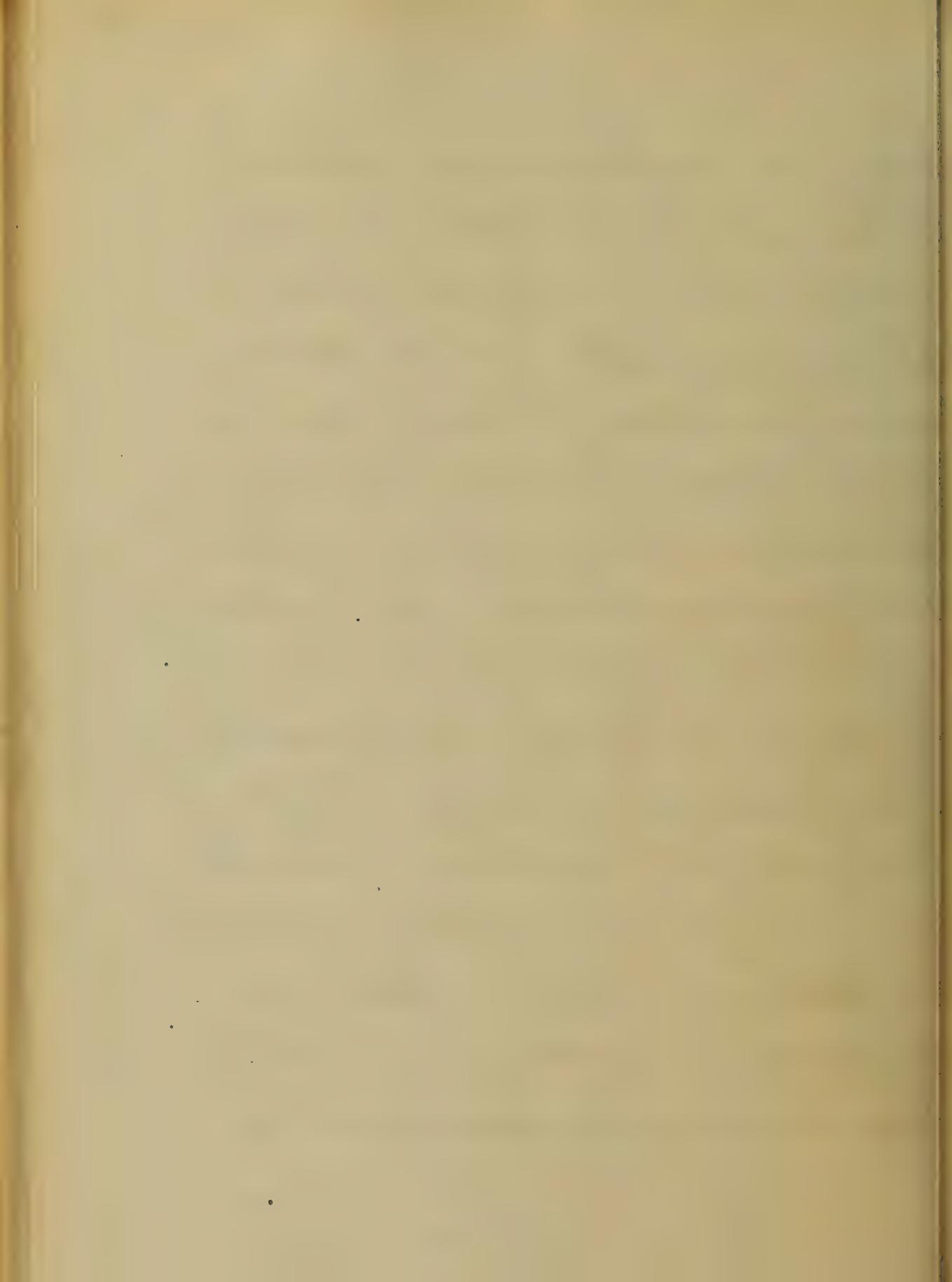
In intermittents it mitigates the chill
Beneficial also in fevers after the -
chill - hence may add Trinum to the
quinine. Taken externally before
the chill. In measles just before
the eruption Dovers Powders forces
out the eruption. In small
fever during the maturative stage
Trinum is the best remedy. In -
Typhoid fever is very diarrhoea -
In reaction after leeches Trinum
is given with a little brandy and soap
as in flooding from child birth. In
Tumors accompanied by pain
as in Paroxysm of period. In dyspepsia
it is given locally and internally.



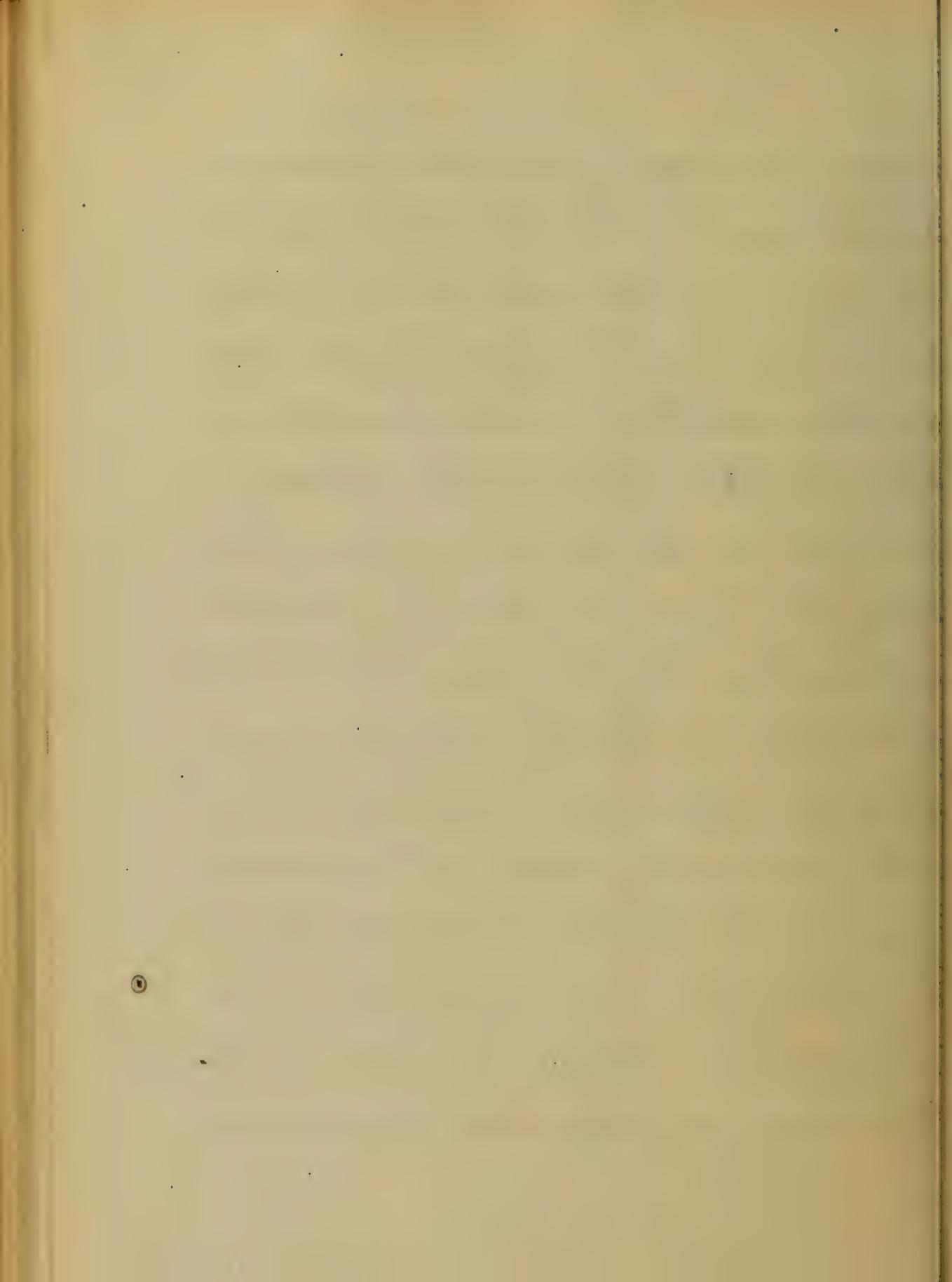
in short opium is an indispensable medicine to every physician
It is called over in almost every one
of disease which flesh is heir to
its medicine in the long catalogue
of materia medica is more used
and there is certainly not one which
could do more good to mankind than
hours of suffering from the
opium - Then the suffering victim
is stretched prostrate upon
the couch of disease - when the an-
gel of death hovers like a black
spectre around the scene - when
agony drives reason from her throne
- when the vital spark flickers -



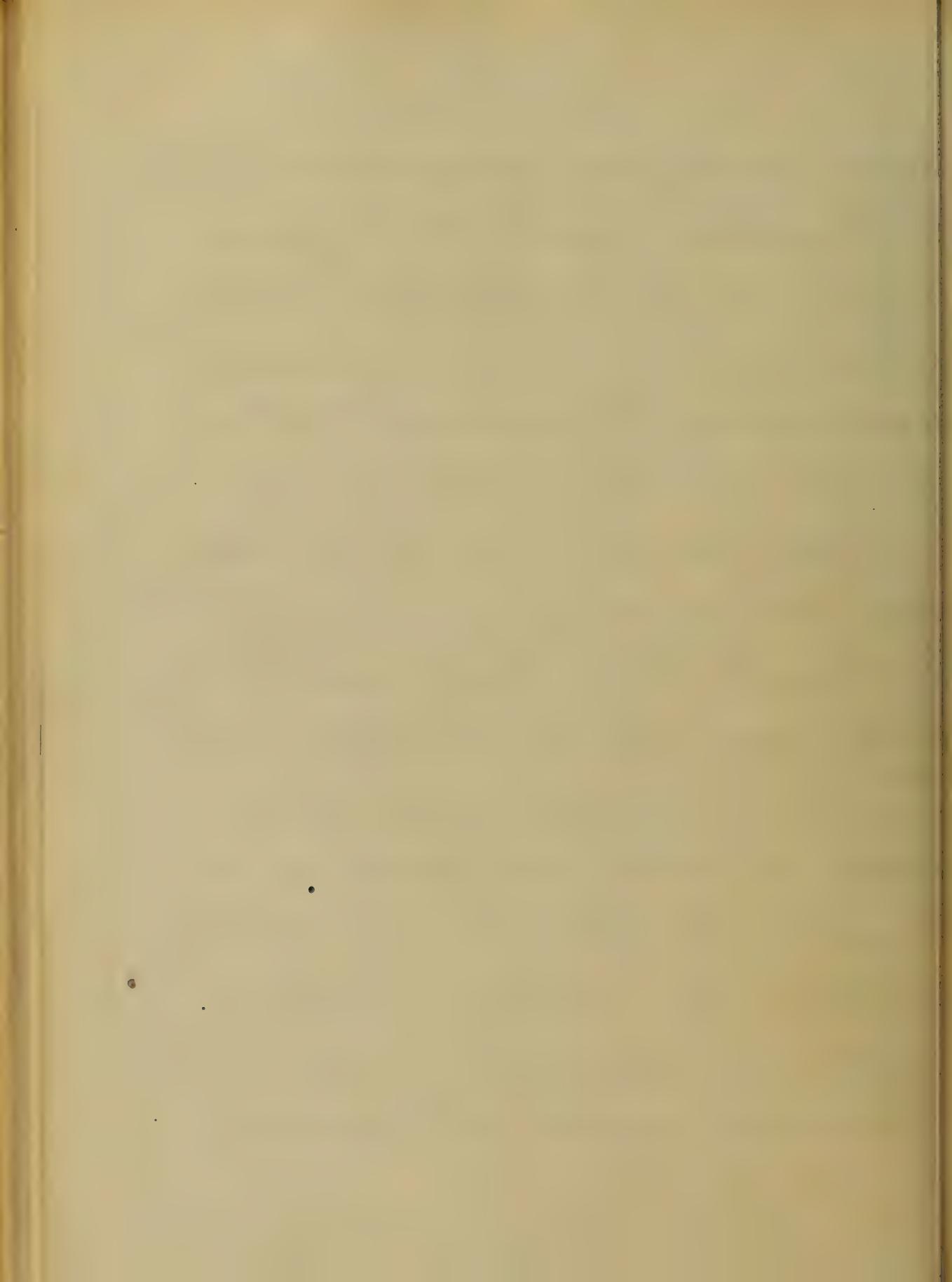
him in the lamp of mortality
- When visions to Earth are fading
away - when mind and soul -
Heaven and Earth are blended in
one - "When expanded nature is sink-
ing to rest. still interrupted by
distracted dreams - That o'er the
sick imagination rise - and in hazy
colours paint the mimic scene"
Tis then that ~~of~~ him steps in and
like the angel of mercy troubling
the waters of Giloam soothes the
pains of parting vitality and smooths
the pillow of dissolution - As
the sailor in his heaven bound bark
that rocks and creaks up on the



roaring surges of the billowy ocean
gives course to his messengers. The calm
as life is made subservient to will,
as power. Thought, action and volition
are the result of material cause. so -
Opium combining all the soothsaying -
powers which Heaven has given to man
and owning all the force of material -
action will be forever mankind's firm
est friend. The tortures of present
and future hell are made easy
and durable under its influence
mind and matter coalesce to form
an homogeneous body however.
And now in bidding a final adieu to the
university of Maryland allow me to say

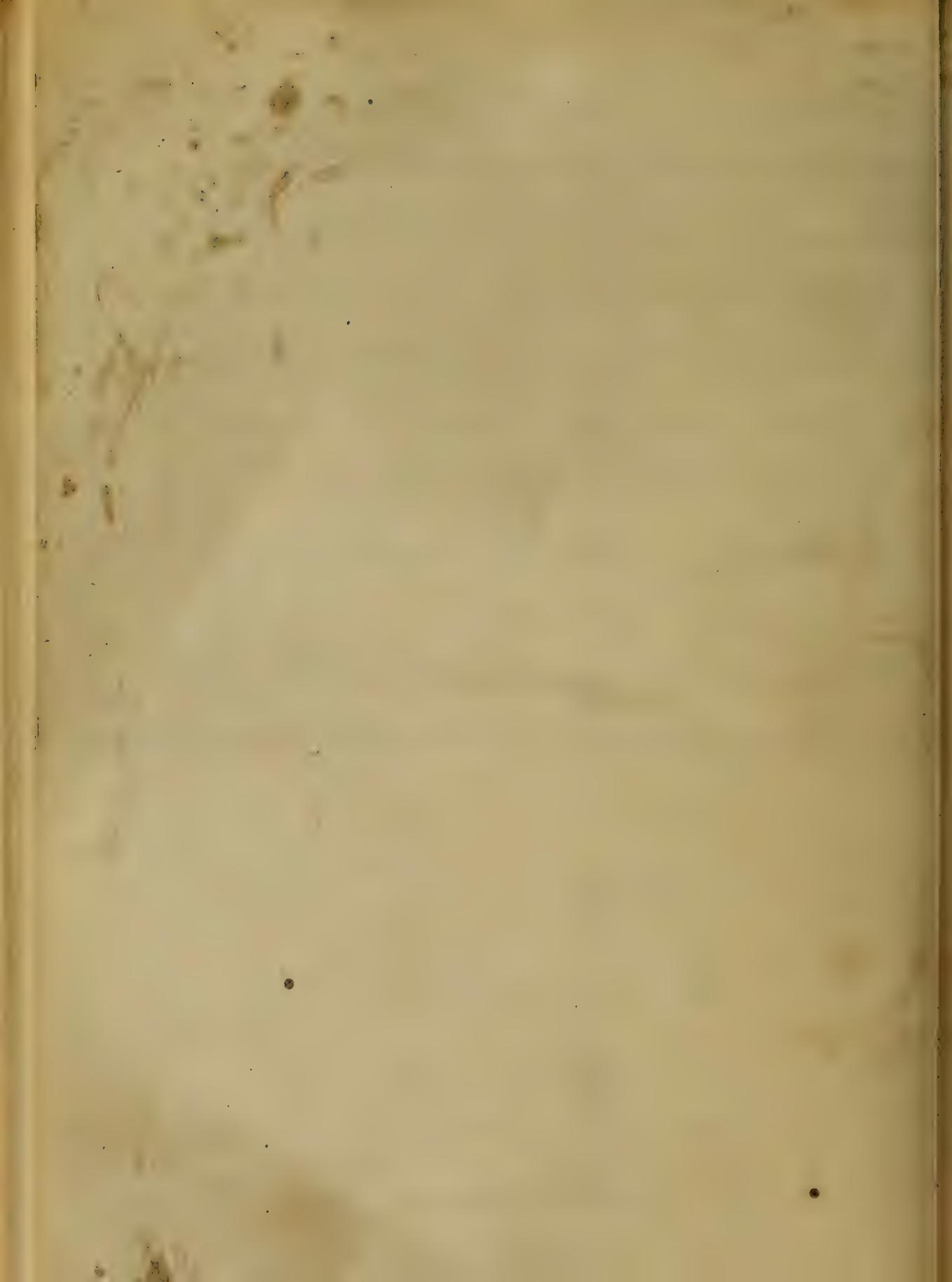


that it is with many deep regrets and benta
felt emotions. Some of the happiest
moments of my life have been spent
within her hallowed and timehonored
walls - and in the far distant future
- be it my lot to sail smoothly down -
this eventful tide - or be it my fortune
to administer to the woes and sufferings of
mortal mortality - in some far distant
land - some reckoned - enchanted isle
The session of 1867-68 will ever flash
across my mind as a sweet reminis-
cence of the past - a green oasis -
in the desert of life - I need not
say that it shall ever be my aim to
crown - and cultivate the adage and



counsel emanating from my alma mater
and that it shall be my constant aim
to adorn the profession which I have
chosen - In closing may I but express
the fond wish that new laurels may
be added to those already acquired and
that the University of Maryland may
continue to flourish.

Till wrath in fire the realms of ether glow,
And heaven's bark Thunder shakes the world below.



AN
Inaugural Dissertation
ON

The establishment of the excretion.

Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

PHYSIC,

OF THE

UNIVERSITY OF MARYLAND,

FOR THE DEGREE OF

DOCTOR OF MEDICINE,

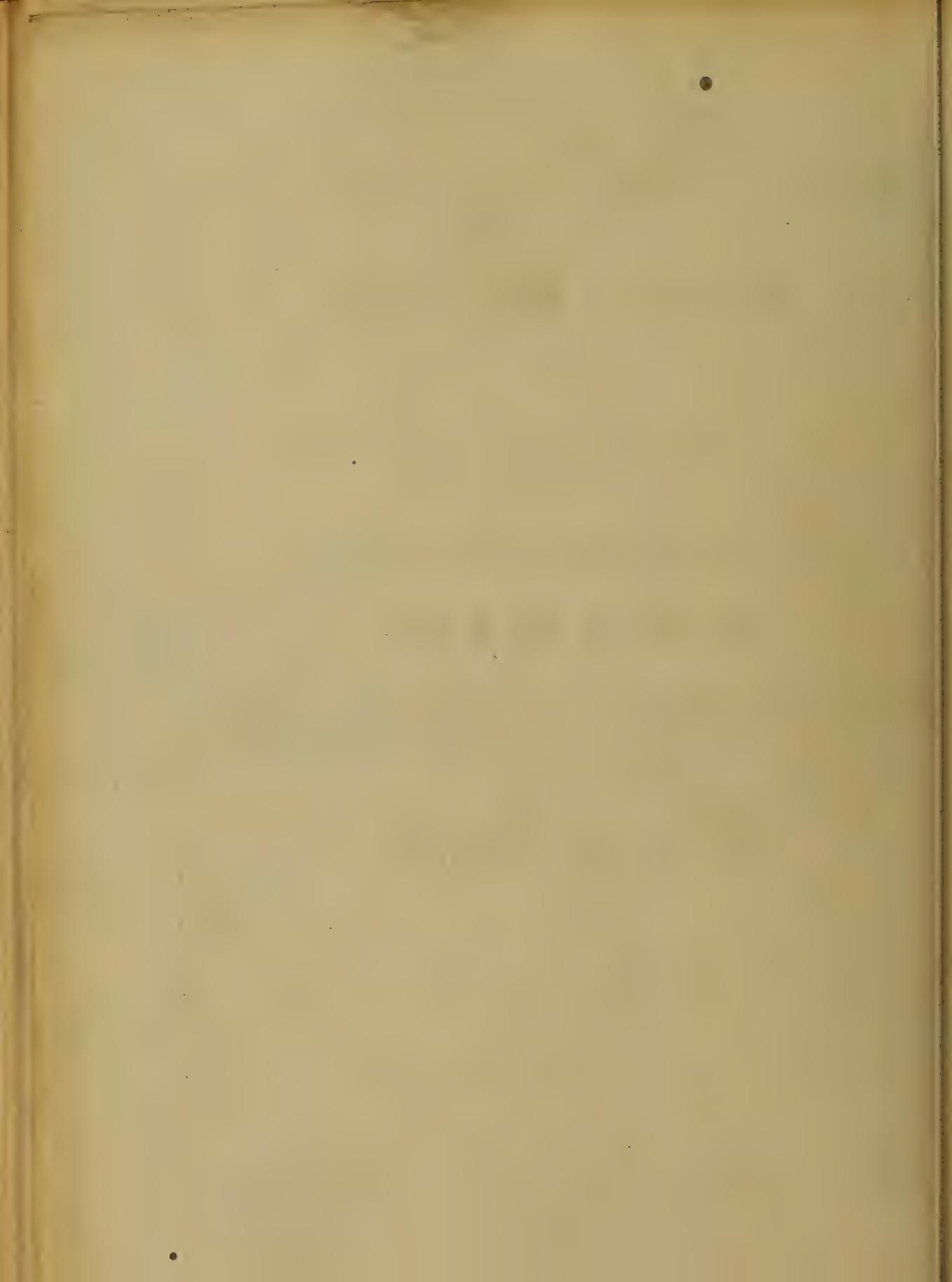
By

James Dulstro Monroe
Of

Virginia

Session of

1867-1868.



The first step of all, I see, traces

now back to the most primitive & most simple

animal life, its more advanced indicat-

ive & creative of higher orders according to

its development, which is second, less & less

varied in the scale of organized beings. It is

thus, the development is easily traced in

ascending through the four grand groups.

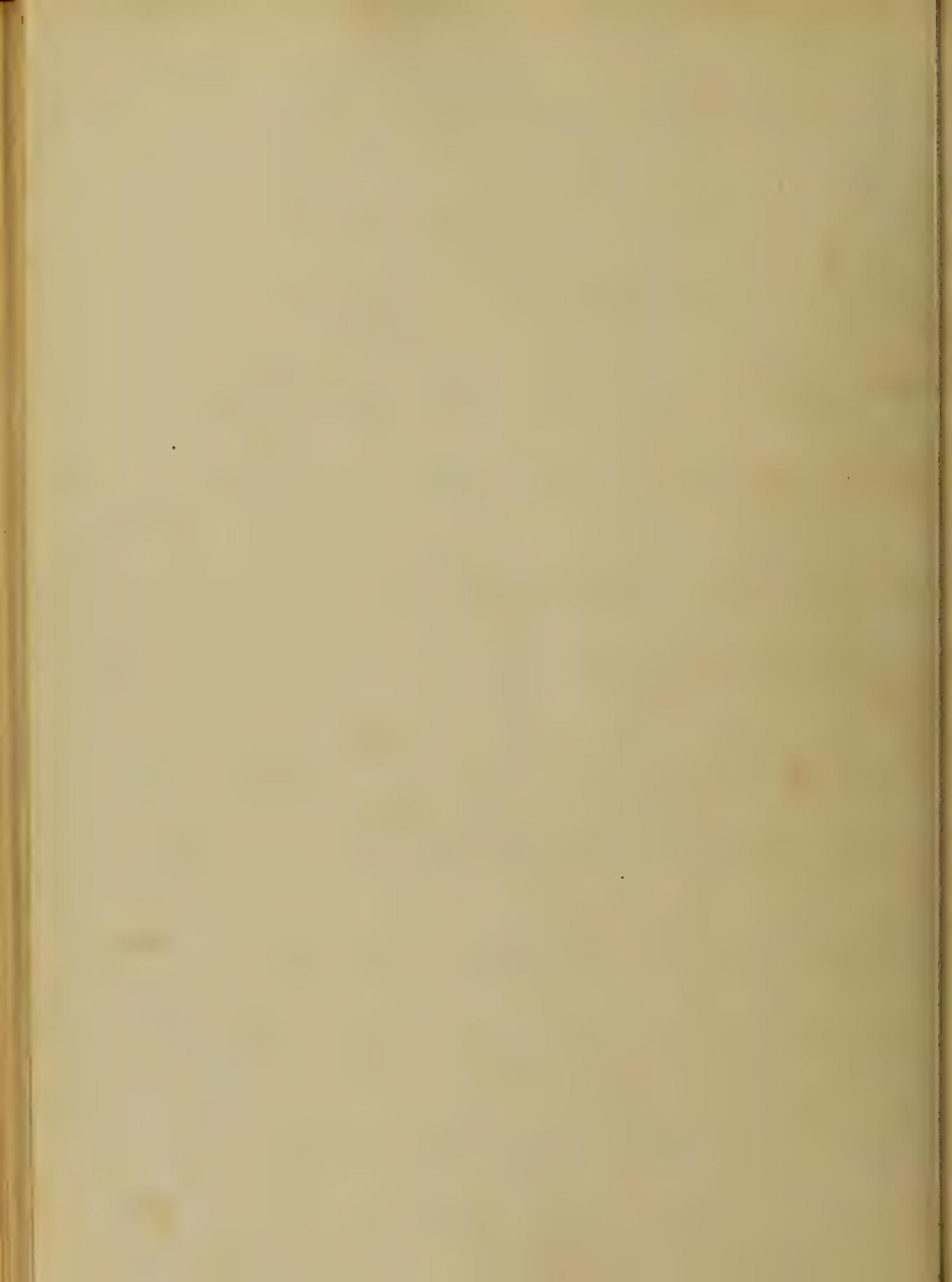
of animal life. The radiate mol-

lusca, articulate & the vertebrates. Its progressive

development is as strongly marked in passing

from the lower animals of the last class

to those of the next, the last



the wish increases in ascending through the

scale in size, & when, first, it reaches 1000, you may

then observe it attains its greatest size in

the elephant weighing from eight to ten pounds.

But even so the mammalia are wide of difference

as to behaviour that of the lower animals as

the mouse & that of the higher animals how.

and it is the most steady - most & most majestic.

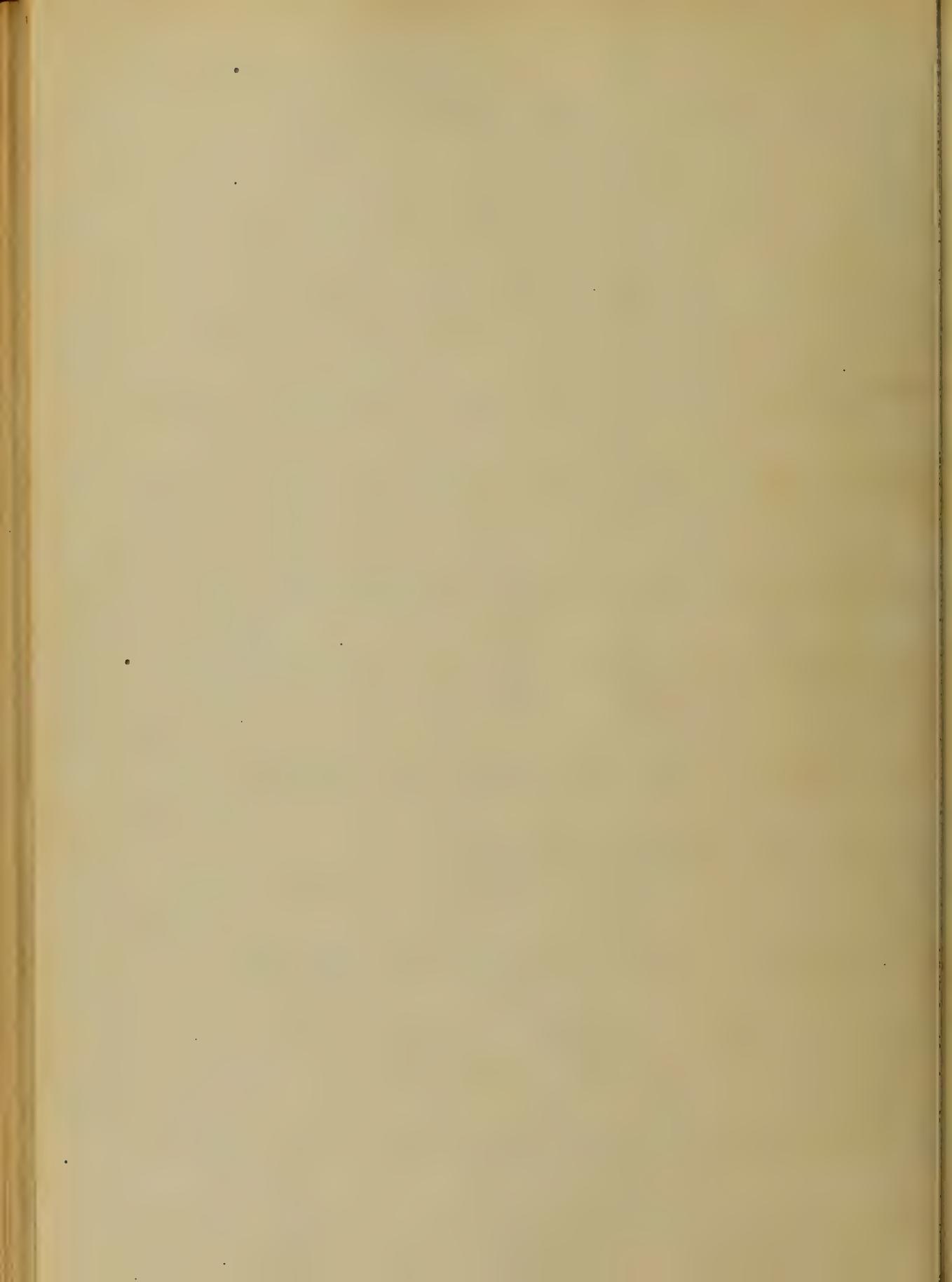
This is not reached until we examine that -

of man; man the first object of creation

man who alone of all created things from

parties of Divinity, man who alone of all beings

possesses a creature so unequal



The development of his intellectual faculties

in his turn becomes a creator; thus another

of the great Creator, how many nobler

and more perfect & stupendous works whether

of beauty, strength or usefulness are after all

the work of a small set of those

with which the great Creator has endued

us men.

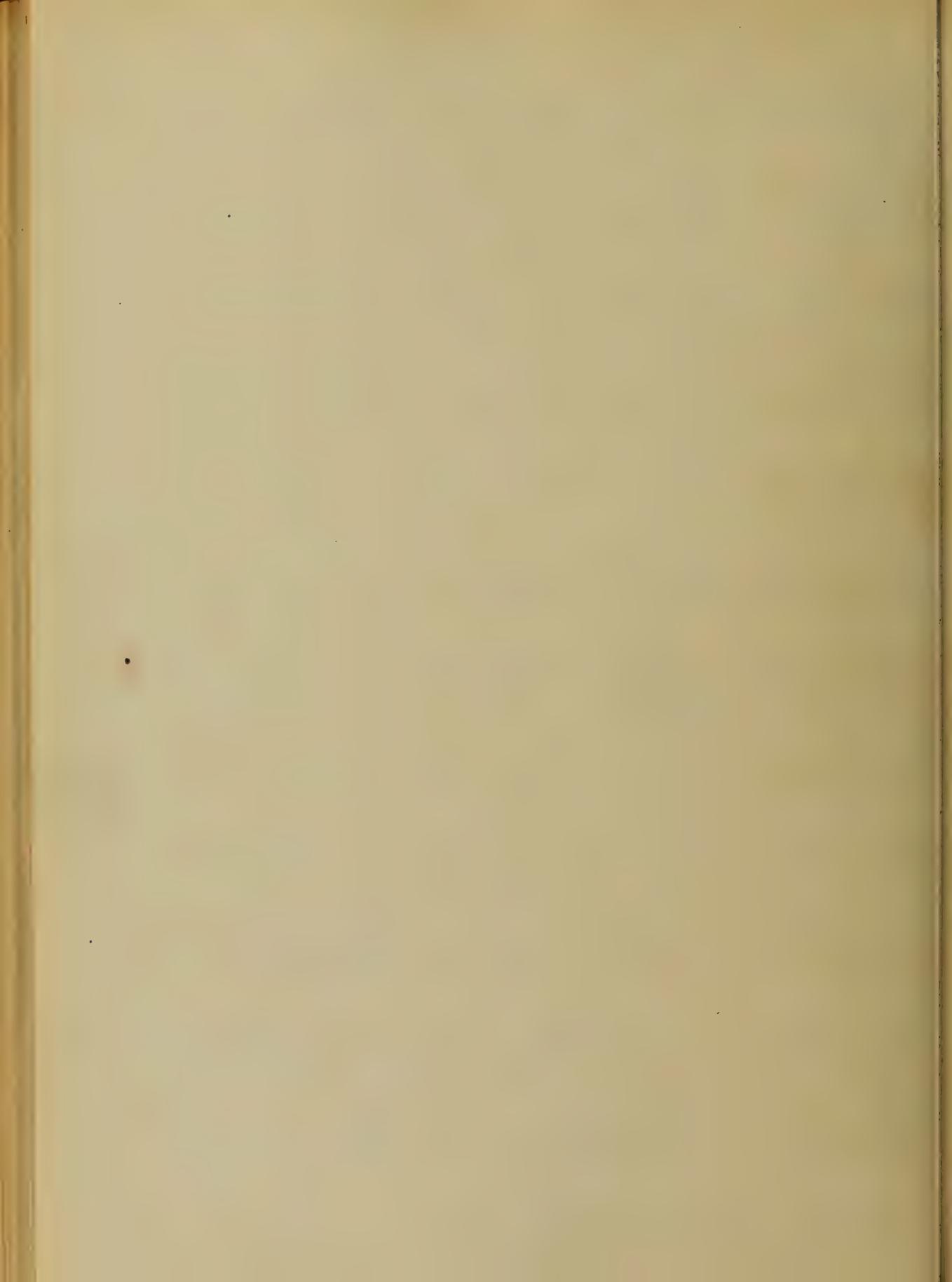
Now it is a remarkable fact that

in this former development of its various

faculties according to the standard of the

various races of human beings, it is smallest

& least developed in the negro, though never



in how much larger than that of the occipital

the post cervical to many must be.

as we have the mongolian which is itself

less developed than that of the caucasian race.

but the development of the occipital is less

widely separated individuals. the same acc

in accordance to the predominance of animal

functions over the vegetative, in proportion as

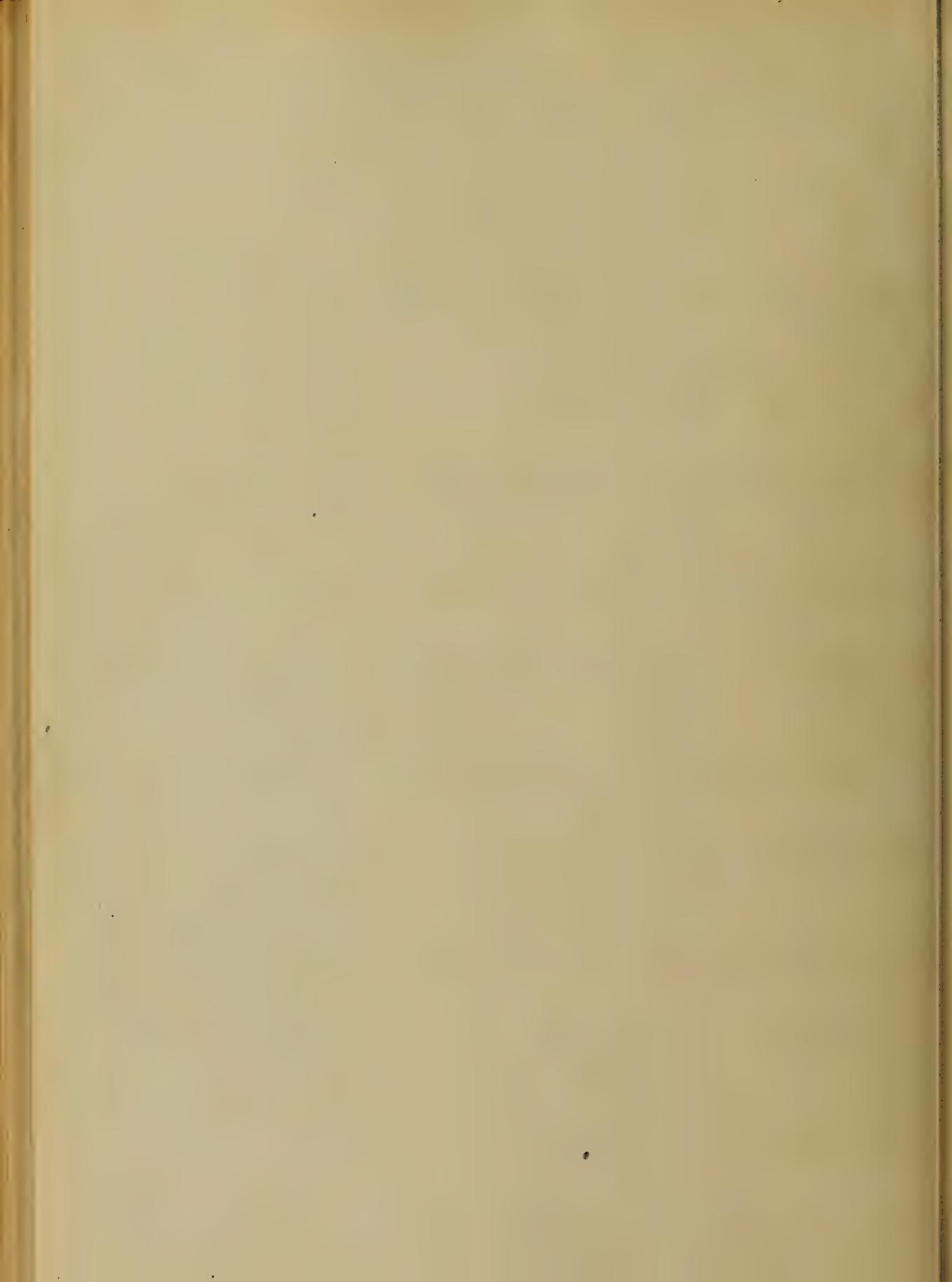
the intellectual functions excel those of passion

and part of the brain attains a greater develop-

ment than the same part in another person.

See.

Why the Chinese & Tartars must be so



sundew follows, likewise, every reliance is had

so called science of Geomancy, but over the

contrary, will all due credit proceed to Negroes

Gullas & Spangheim, their so called science seems

to me to be more an absurdity than a science.

The fundamental law of Geomancy is

that the mind consists of a series of faculties

each having its peculiar localities in the

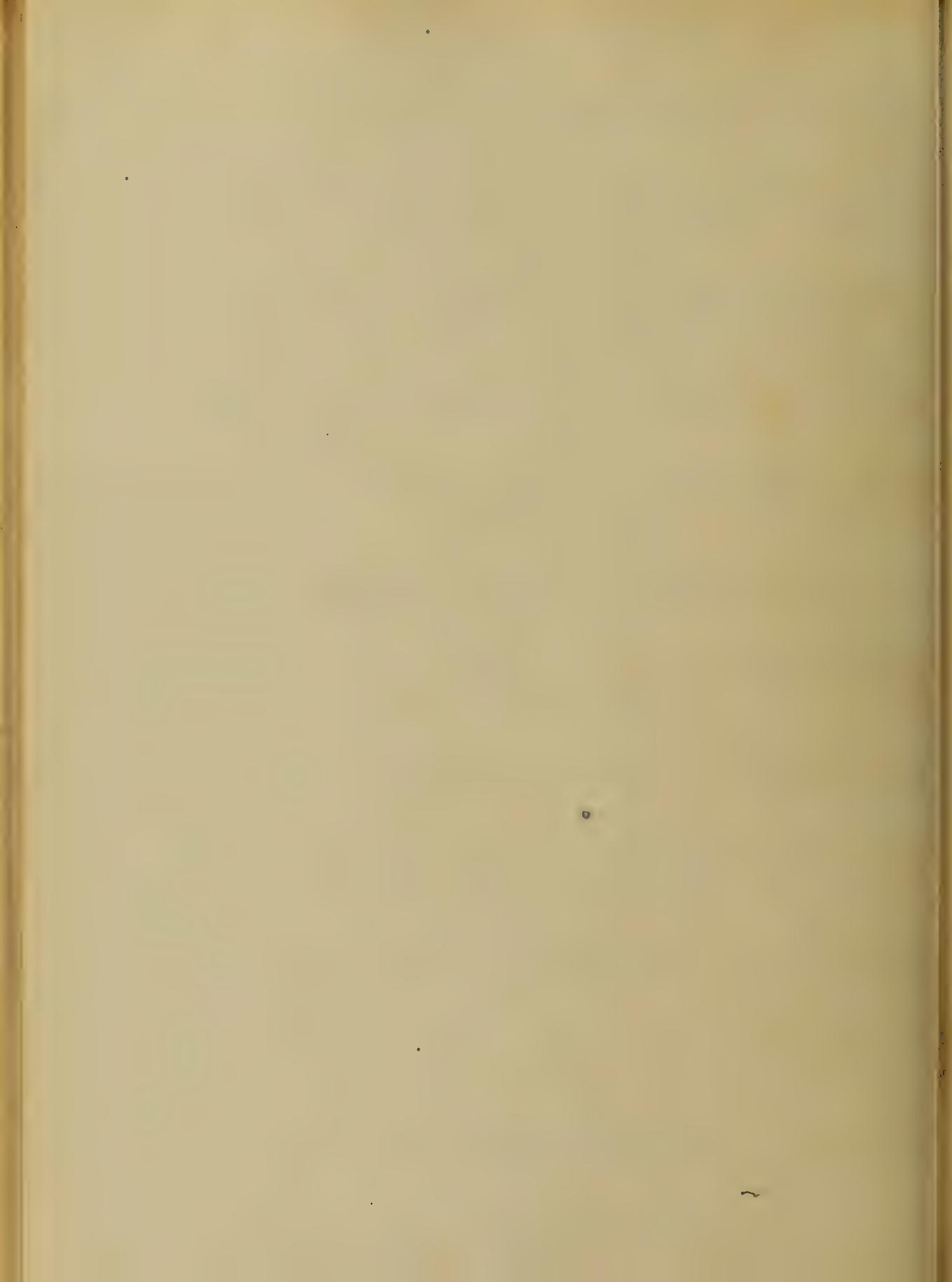
brain; but by reference to its emanations it

will be found impossible to establish any de-

ad distinction, as the same gives self-evidently

continuous movement. We instance, the

celebrated African Geomancer, Oleviste. The



faculties into three great groups, as follows:

animal & animal, & man. His position is, that

the last in the centre, the latter behind,

again reference to comparative anatomy

will show that the posterior lobes of the

cerebrum are little more than lobules.

men & in many, may do not even exist

in some of the lower animals, hence

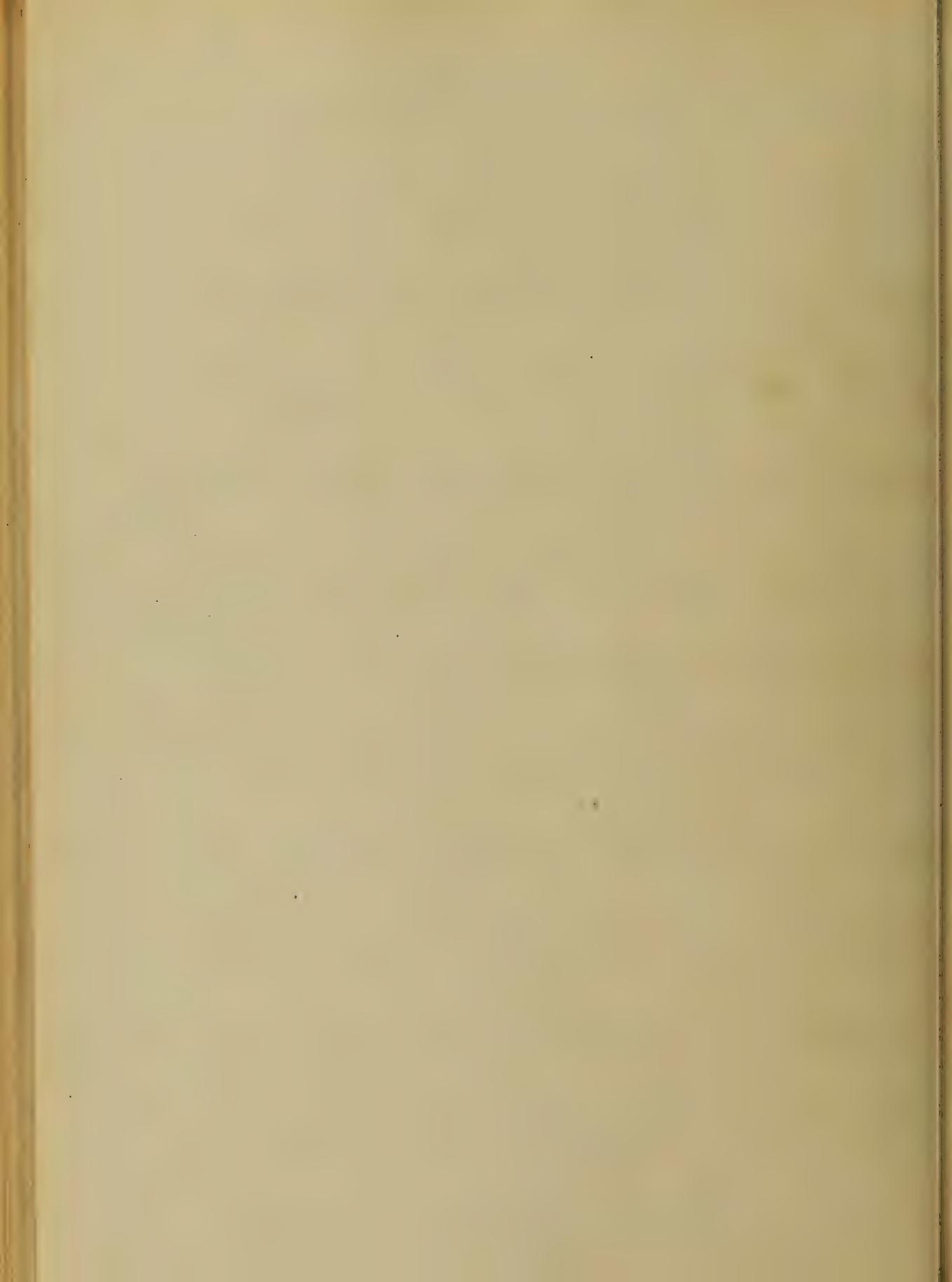
this classification at all events must

be erroneous. Thirdly, physiologists who

have divided only about one third of the

central process of the brain to all the

faculties of the mind, I cannot see why



The other 900 birds should not be dismissed.

Similarly their position is now set down

conclusively by the elevations & depressions

which are sensible to manipulations

of the cranium. The conclusions, but

such deductions may be manifestly

false though it be admitted that

each faculty of the mind occupies

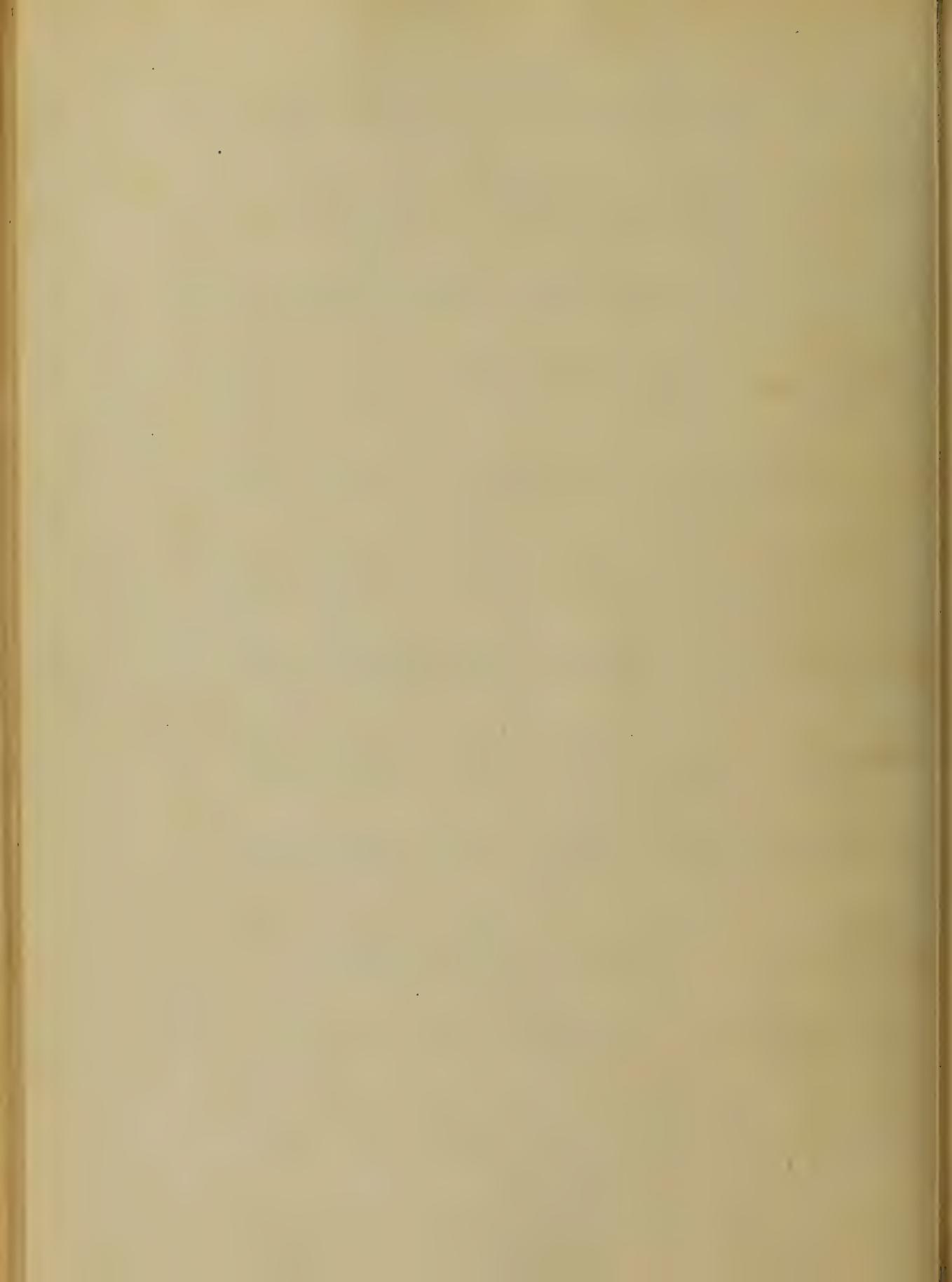
a distinct locality, for correlations

of the same size would give rise to

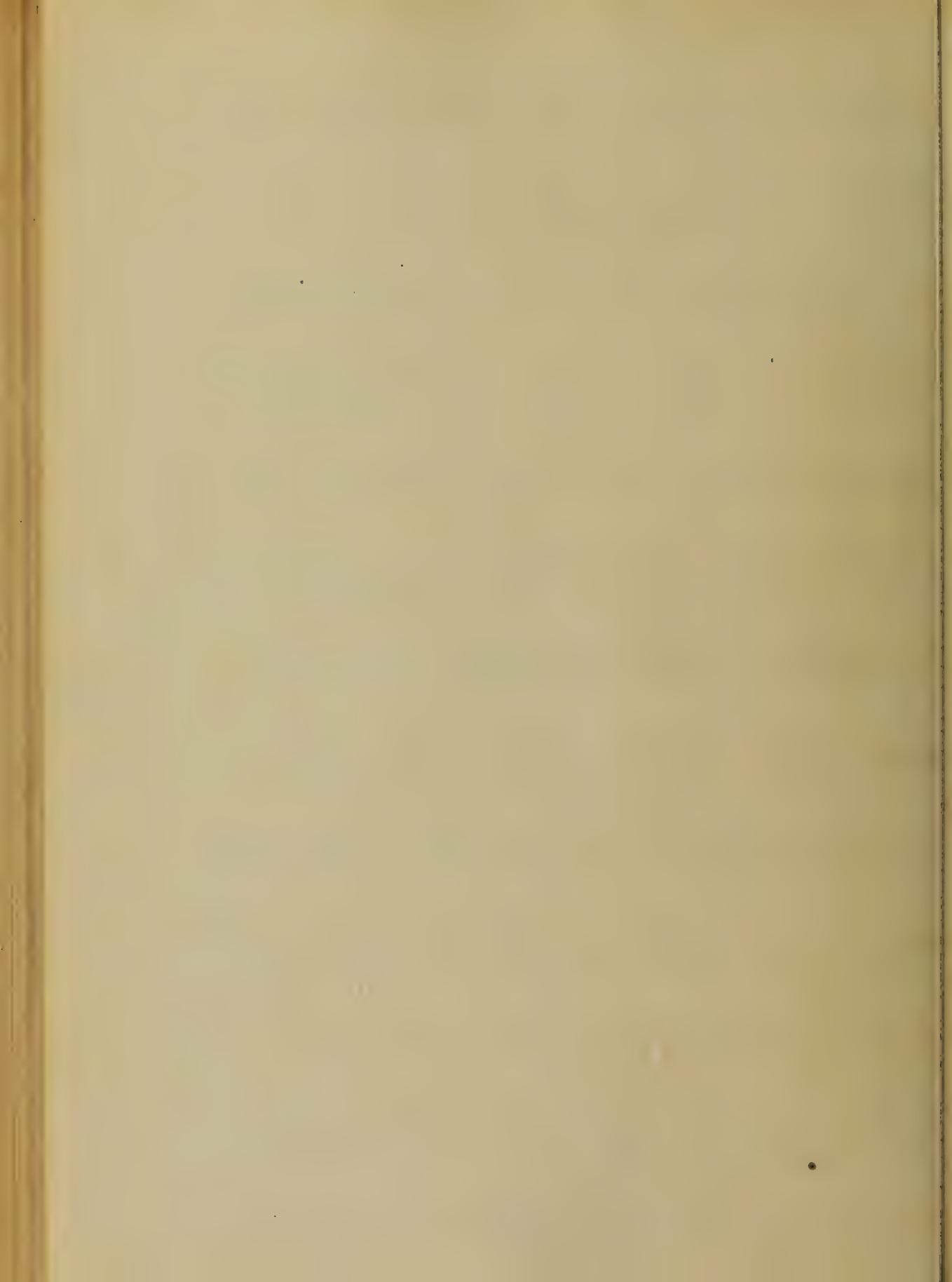
very different results, in accordance with

the variable thicknesses of the cranial

walls, in a thick skull a large cavity,

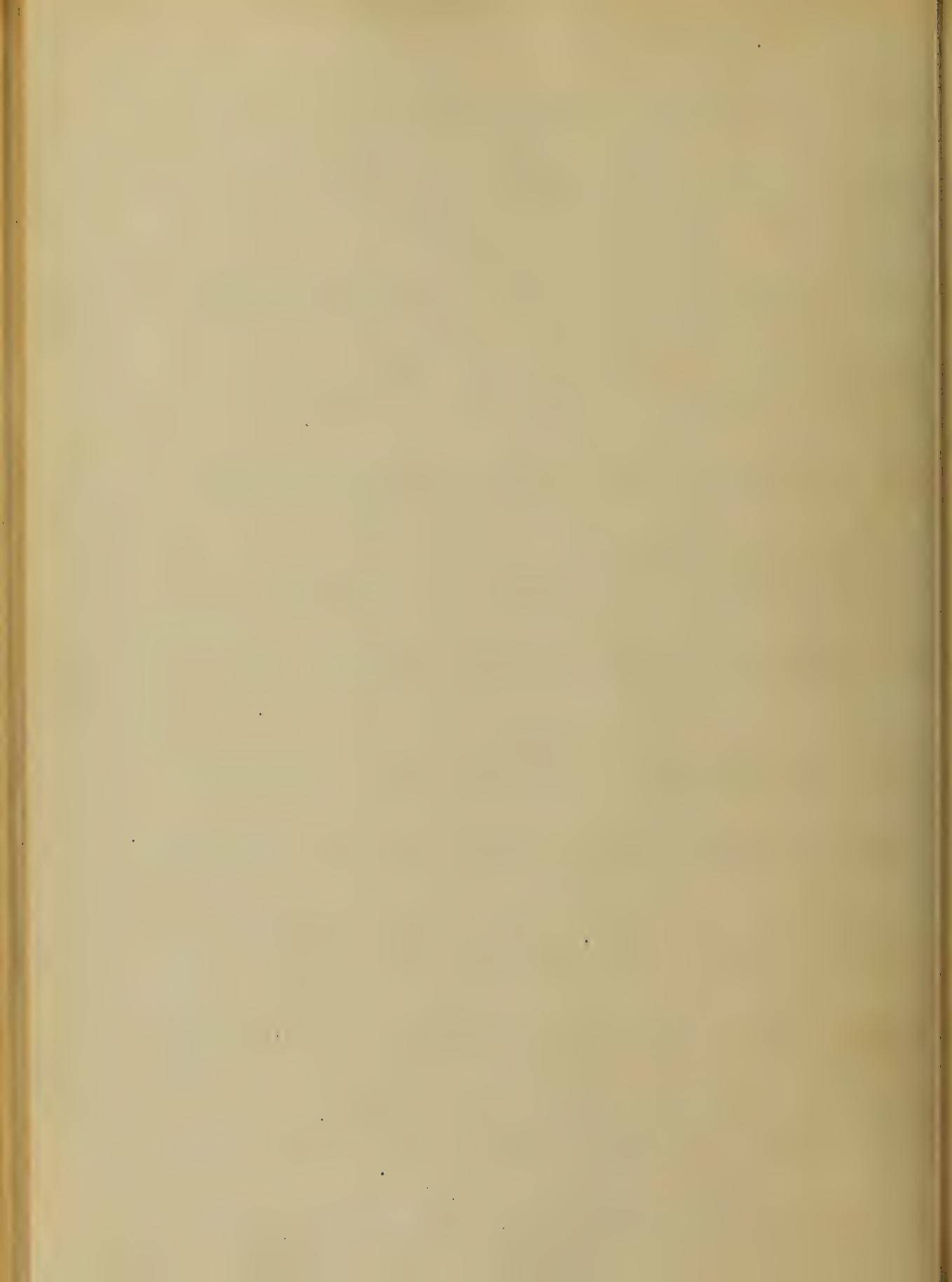


which would not be at all perceptible
on the external surface, simply because
an indentation on its internal surface
& conversely a small convolution may give
rise to a marked elevation in a thin
skull. The convolutions of the gray
substance extend inwardly as well as
outwardly & it is obvious that their
internal dimensions could not definitely
be measured by external measure-
ments of the cranium. Phoenix Eli
Sturtevant made the following statement
in his "Anatomical Manual": "There
exist in the brain great blind or anatomical



castles, separated by distinct fortifications within
the same inclosure, where the military residence
of the physiologist has endeavoured to
place.

In accordance with the great law of nature
to multiply the safeguards of an object
in proportion to its importance, the tower
is protected by an almost continuous long
wall, constructed in such a manner that its
contents are guarded from the highest
degree from any external violence, even excluding
that from the influence of atmospheric
influence. The tower is composed of a



number of distinct bones, now allowing the

tibia to increase in size with age & at the

same time collecting it with a nearly uninterupted
bony covering.

The wall of the osseum is

formed by the frontal bones, which being

much thicker afford the greatest strength conceivable.

with their thickness, their union with each

other being by means of numerous dentations

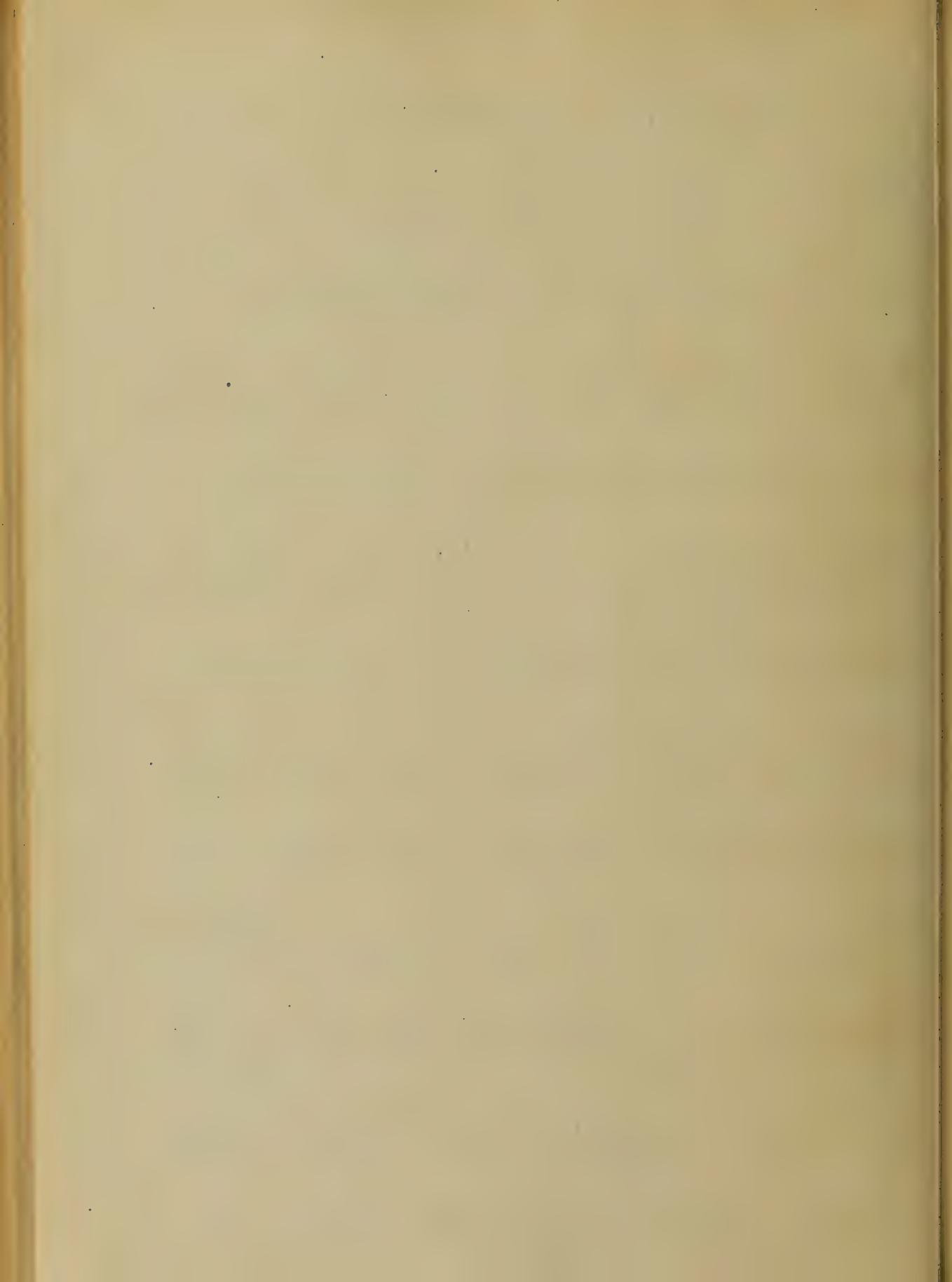
which interlock with each other so that

the force given a blow would be distributed

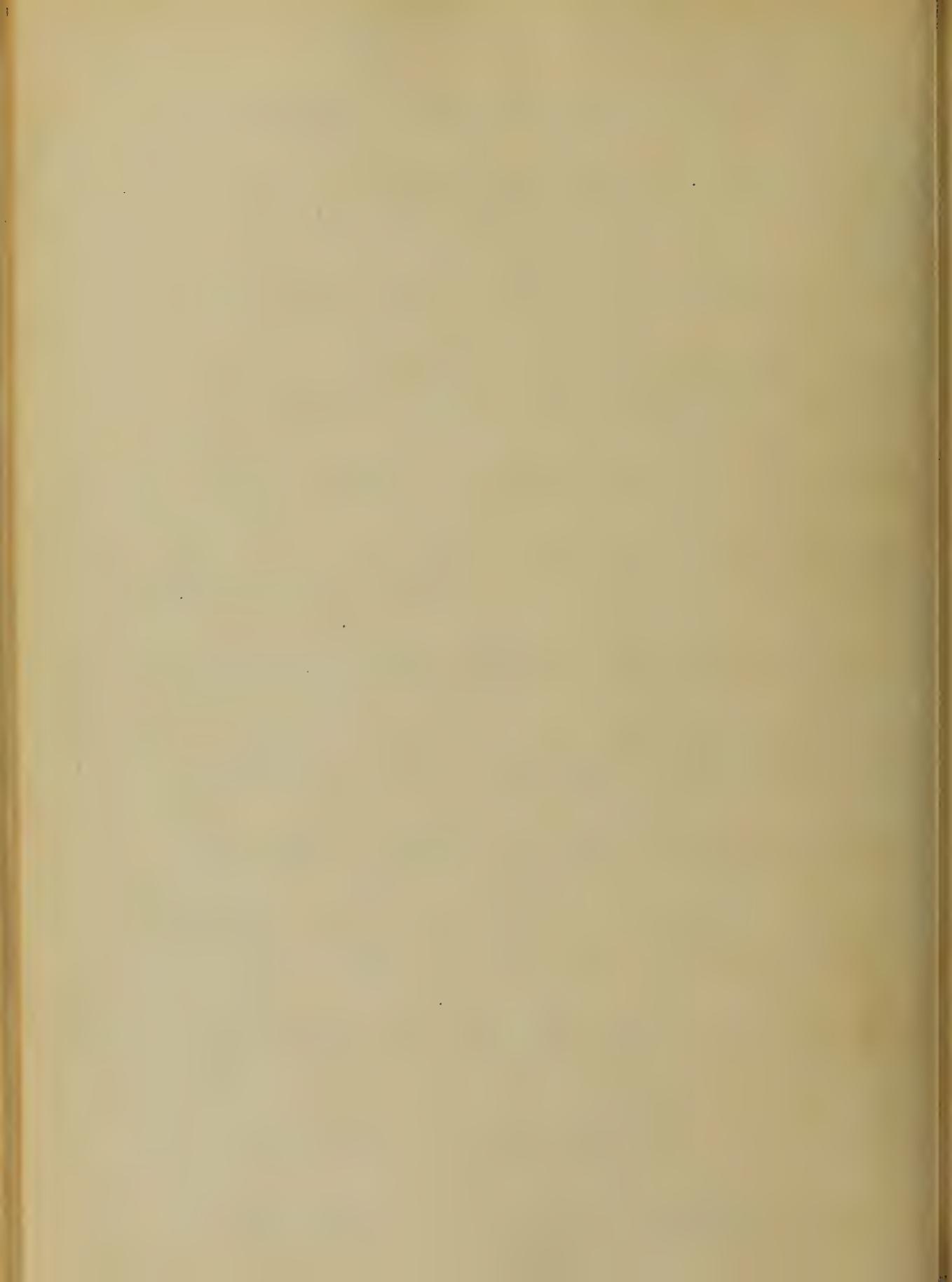
over the whole surface anteriorly they

articulate with the frontal bone which being

usually a single bone cannot without



fracture be separated in the median line & in
order to increase the strength of the parietal
bones & to keep them firmly united with
each other, the frontal bone is overlaid above
by the two parietals, but lies below overlying
the parietals at the sides, so that it supports
them without pressure. This separation and
the sides, is oblique, suppose it is a bone
lined by the walls owing of the orbitoid
bone & the temporal bone which overlap
their respective walls. Behind the parietal
bones are the sternocleidomastoid & articulates
with the occipital bone which being a



single bone prevents their separation posteriorly.

Opposite the temporal bone are wedged in between

the uppermost occipital bones & prevent it

owing to its slanting position, these

bones. The only remaining bone of the skull is

is protected from direct violence by its position

being such that other bones cannot receive the

stroke before it can be reached.

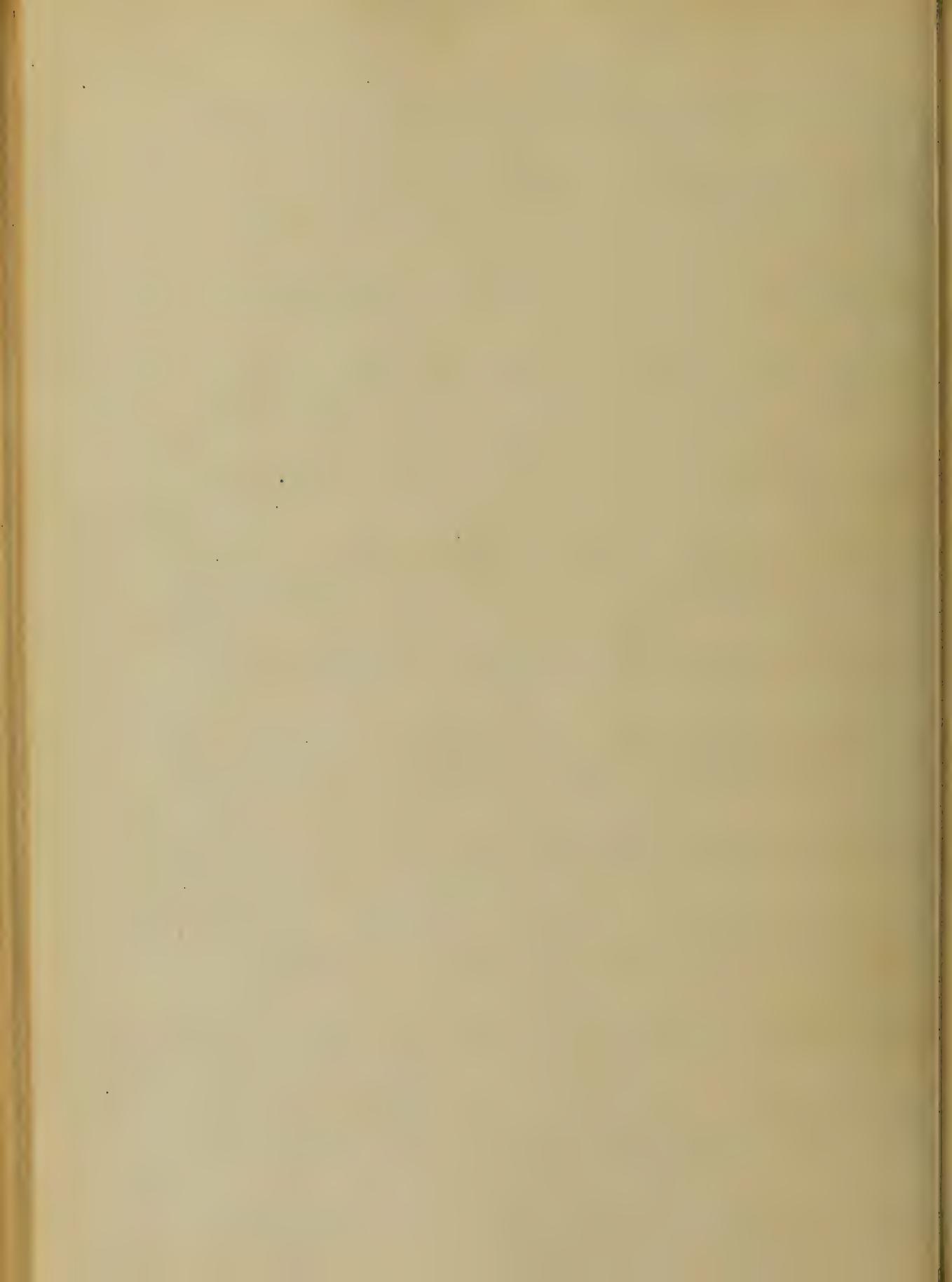
If the bone will be removed the whole internal surface

will be found to be covered by a thick fibrous

membrane known as the meninges which divides the brain

into two parts & consisting of an external - dura mater and an inner

- arachnoid layer. The dura is an incompressible & the



seen, & it has excretions & excreta in its

St. nose & the nose is in fact a large nostril

originally it was probably in the skull, but now

it is made by sending numerous mucous

Sinus associated with the nasal & oral cavities

between the nostrils, the nasal & oral cavities

are in allusion. No other bones form a shield.

strength, or a longitudinal series, the dorsal con-

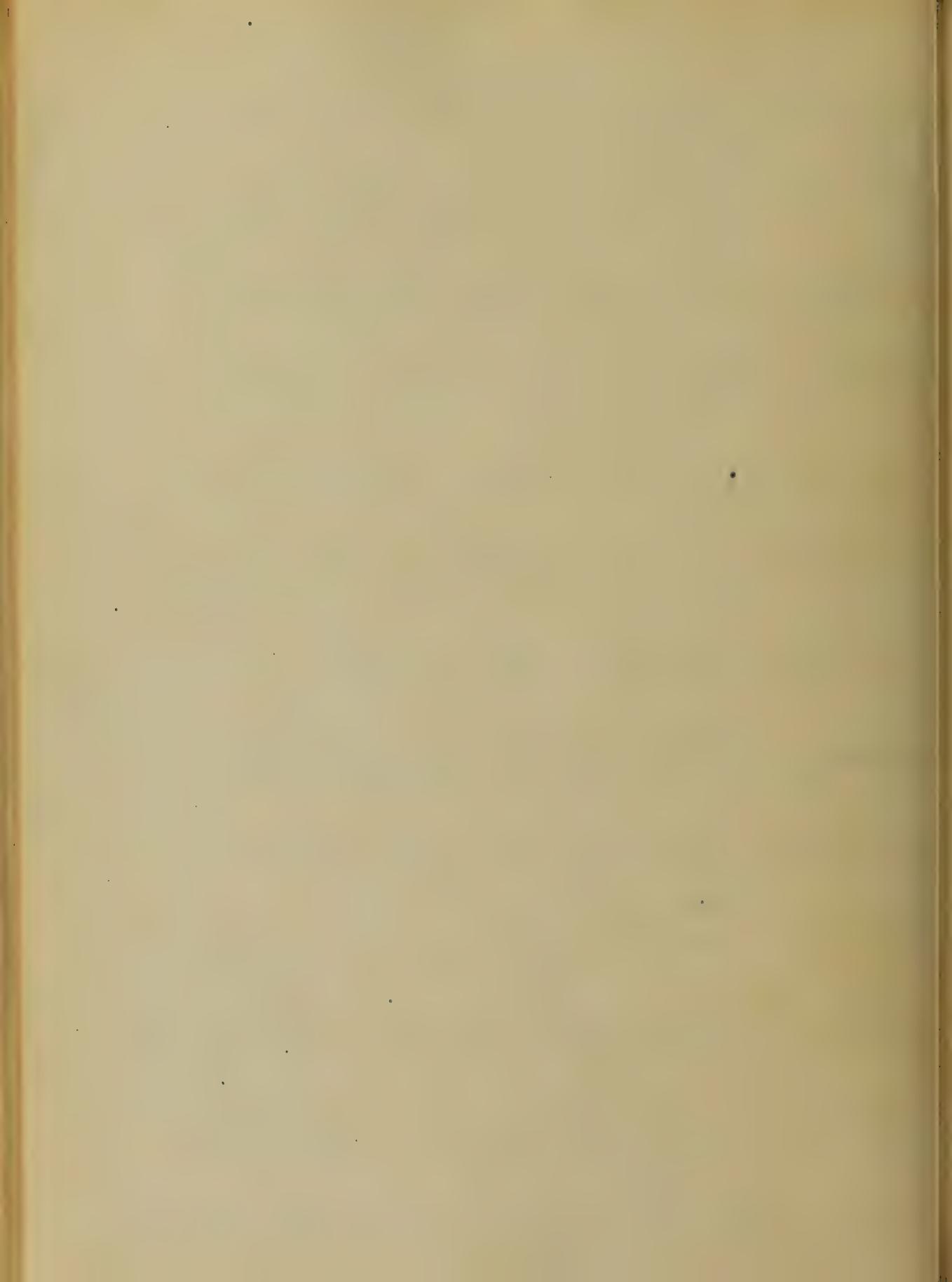
dition is the posterior cerebellum which is attached to the

transverse process of the occipital bone & is surrounded

by the lateral sinuses, & in front it is attached to

the body of the uppermost cervical vertebra, the

frontal bone where it includes between the two



dividing laminae. The superior pial cerebral vein.

In the median line of its upper border the falx cerebri

is divided into two laminae edges the

straight veins. The office of the falx cerebri is to

support the posterior lobes of the cerebrum & to press

and draw them together fixing the convolutions.

The falx cerebelli is a ligament which separates

the lobes of the cerebellum.

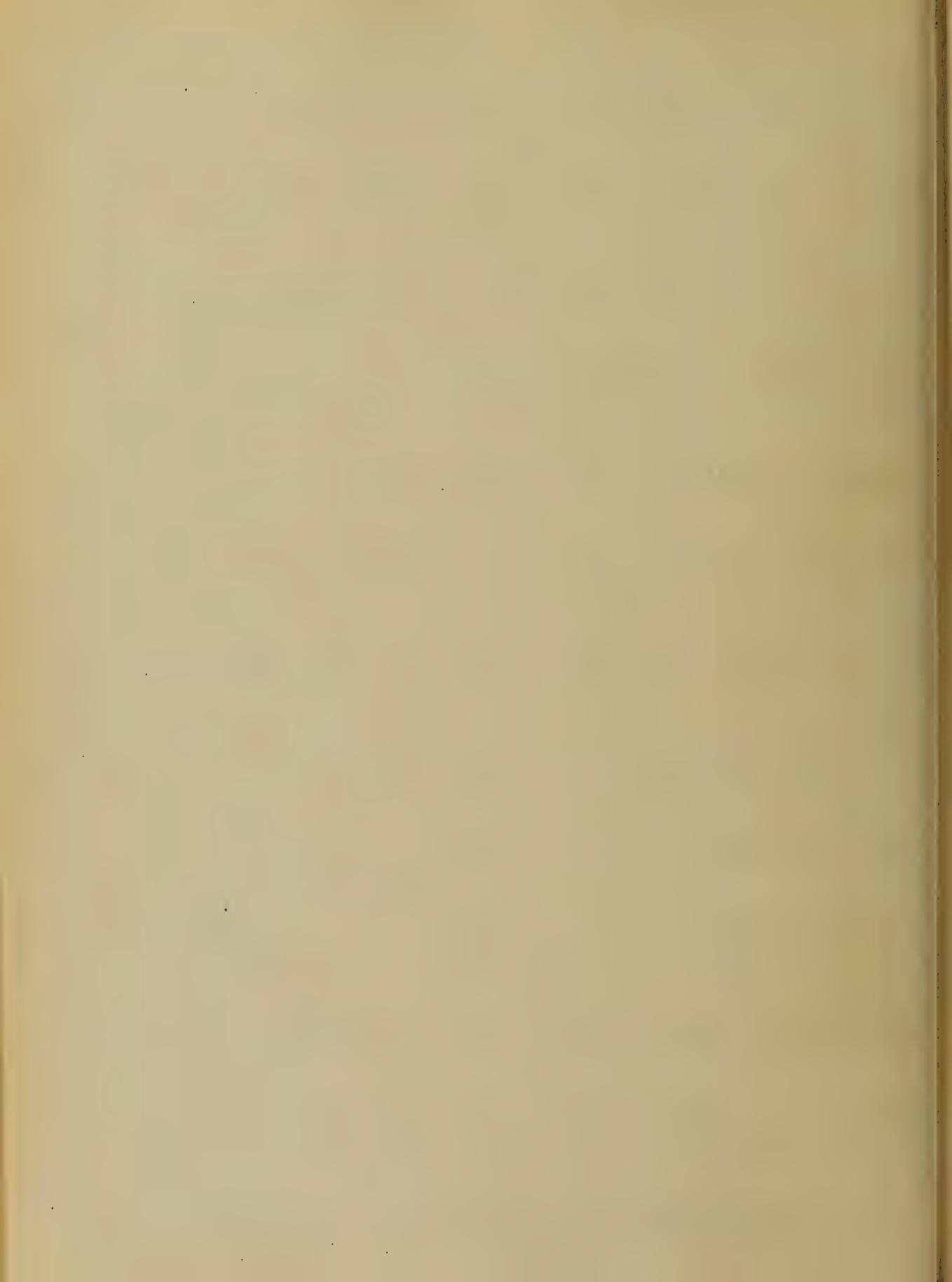
Beneath the dura mater lies a thin layer of tissue,

the arachnoid, its external layer being the meninx.

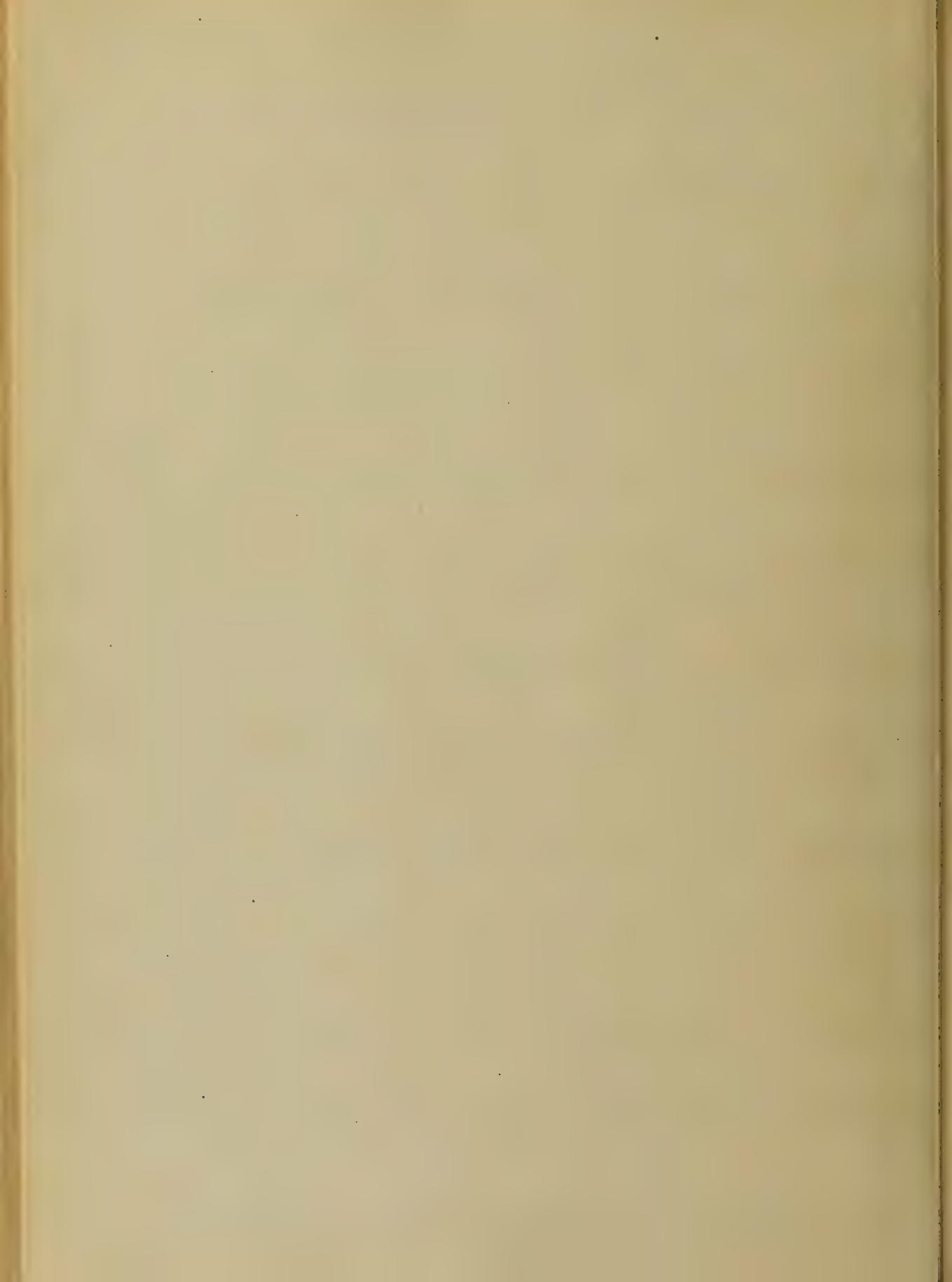
but its viscous layer is only loosely applied over the

brain, protecting over the convolutions of the hemispheres

however dipping down into the sulci & even there



Because the ventricle can have its space called
the subarachnoid space filled with a clear fluid various
by numerous small vessels, subarachnoid
cerebro-sacrae fluid the efface,
is of great importance as it projects the nervous
conducts and vessels, decomposing concrections
communicated from without & lastly as the cranial
environs are subject to sudden changes during
recovery the necessity of constant attendance
and vigilance is evident and when the patient
has a fever it is necessary to have a small
amount of stool prepared to replace the waste



which it has undergone during activity.

Immediately beneath the subarachnoid, lies the

thin pia mater which consists of minute processes of

capillary blood vessels connected by means of anastomosis.

in delicate cellular vessels. This membrane covers the

surface of the brain exceedingly closely differing between

the convolutions sending minute blood vessels into

the substance of the brain, being the nutrient

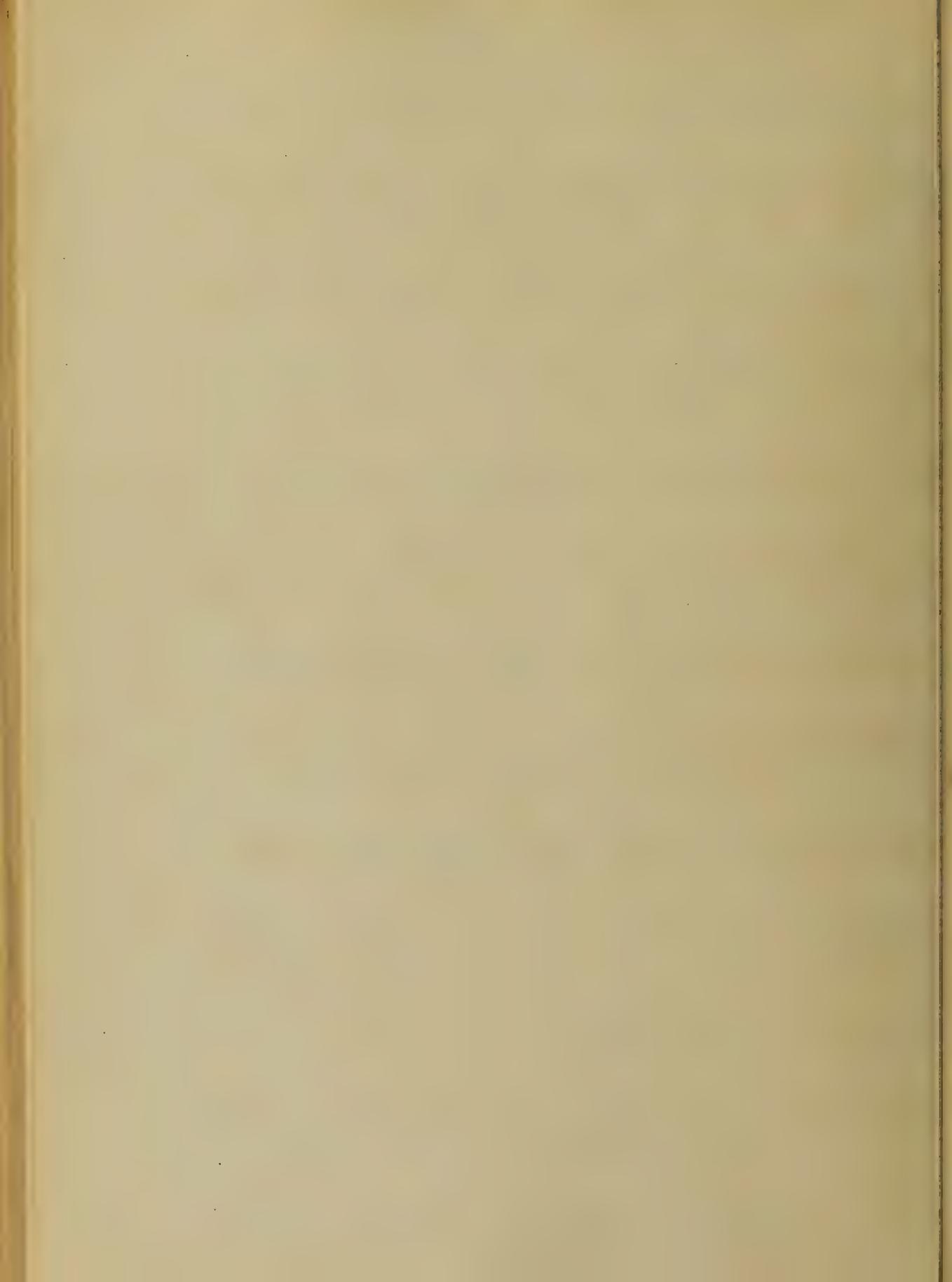
vessels of the brain; it is also prolonged into the

interior where it forms the choroid plexus & the

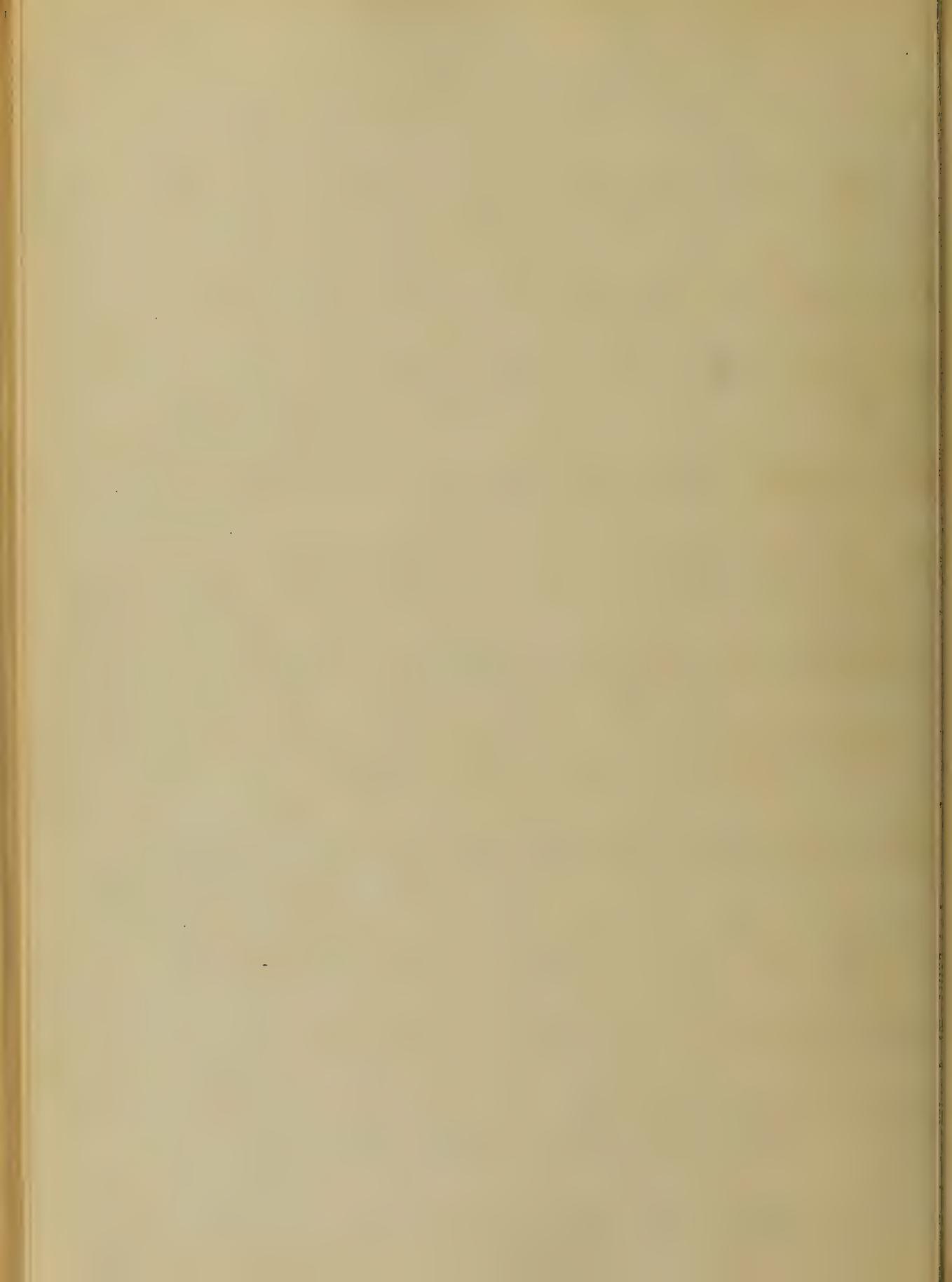
choroid interposition

as the brain is exceedingly delicate in structure

some means were necessary to protect it against the



force of the wind, maintaining the blood current
parallel from the heart & lungs, & equal to six inches
of mercury or over-blown pounds, according to an article
of the general law by which the blood is sent by
the shortest course with the least expenditure of
force to the parts which it is to nourish, we
find that the internal concordance is the highest
when their direct course as soon as they reach
the extremities, their direction becomes tortuous
through the vessels and inclines upwards
then recedes & inclines & again ascends to the
lowest point, then passing forwards
on the body of the vessel and again ascending



near, the carotid artery, & especially the right one.

strength of the heart & blood vessels. These are very

by increasing the strength, & power, the amount of

of friction must diminish the velocity or force

of the current of blood, & in addition to this this

force is still further decreased by the great num-

ber of ramifications which the vascular substance has,

before reaching the brain substance.

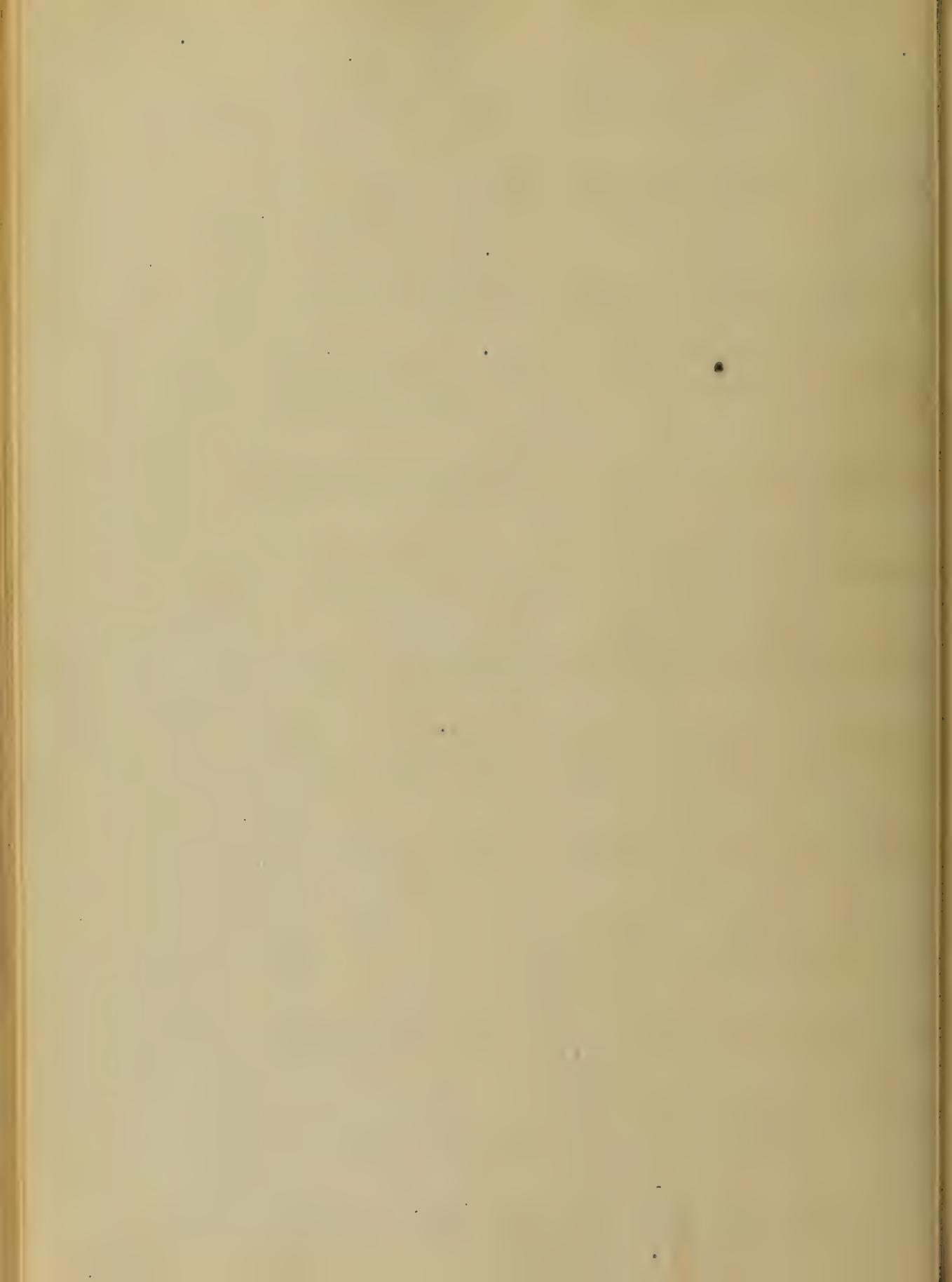
As the brain presides over all functions of animal

life, it is of the utmost importance that its nutri-

tion should be continuous, & we find that every

measure capable of increasing this necessarily supplies

of blood has been provided by beneficent Providence.



& the wisdom of our divine grace in regulating

the necessary safeguards to insure under all circumstances

a secure and uninterrupted supply of blood.

At the vessel, it is still contrary to the rule

usually observed in the arterial tree the arteries

anastomose freely forming the circle of Willis

which is composed of the cerebral arteries which

divide and encircle the cranial cavity through the

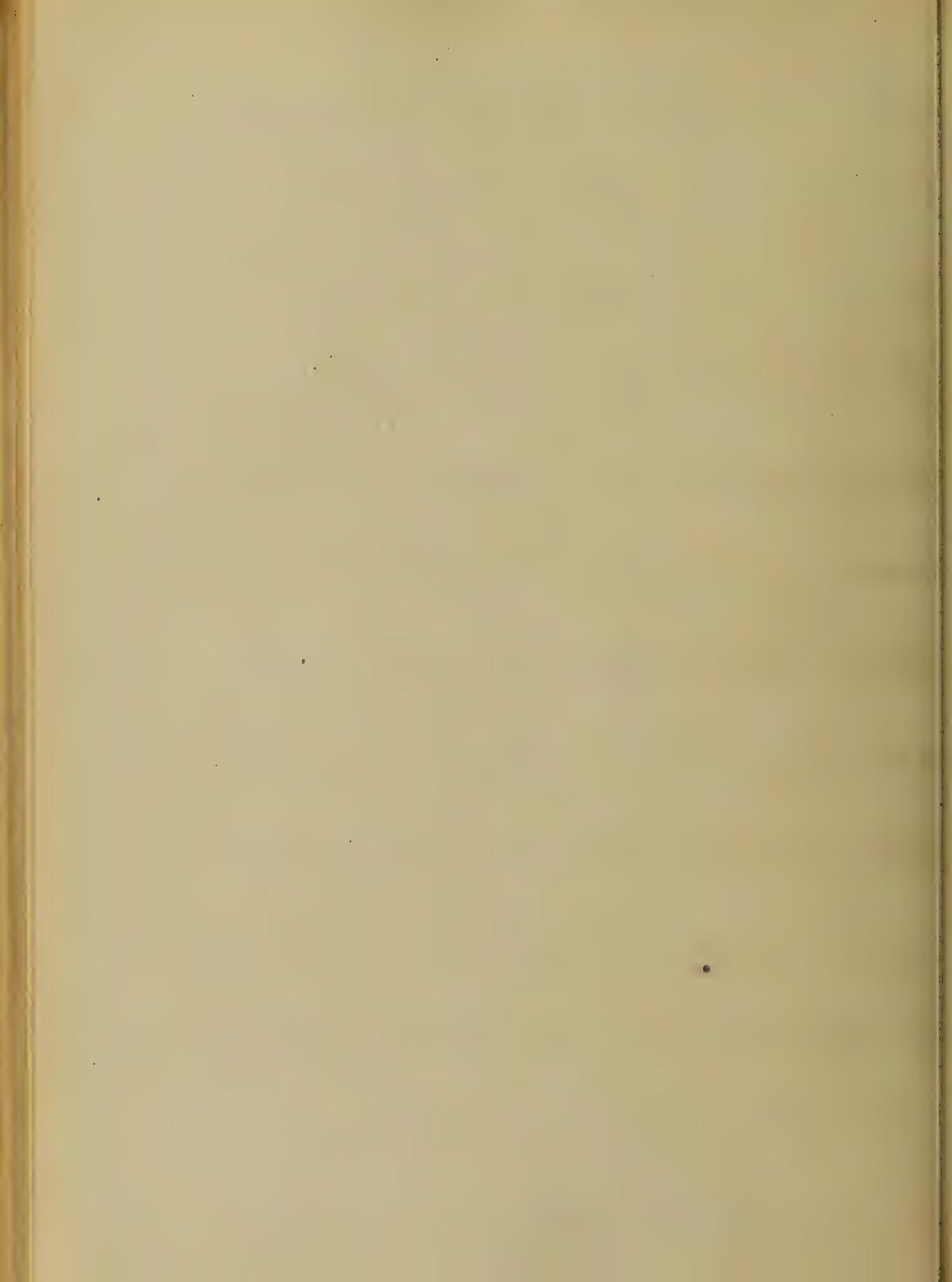
foramen magnum, enclosed from the basilar artery

very well, so that the arteries remain distinct.

The latter are united with the internal carotids by

means of the posterior communicating arteries;

This is done by giving off the anterior cerebral artery



air in which are connected with other in number,

The air sensor communicates, exciting, & sending a con-

tinuous circle is established so that if either

of these four arteries should be obstructed

in any way the others would supply the whole

amount required for the nutrition of the entire

brain. The venous circulation is also peculiar in the

brain, as there are here no muscular contractions

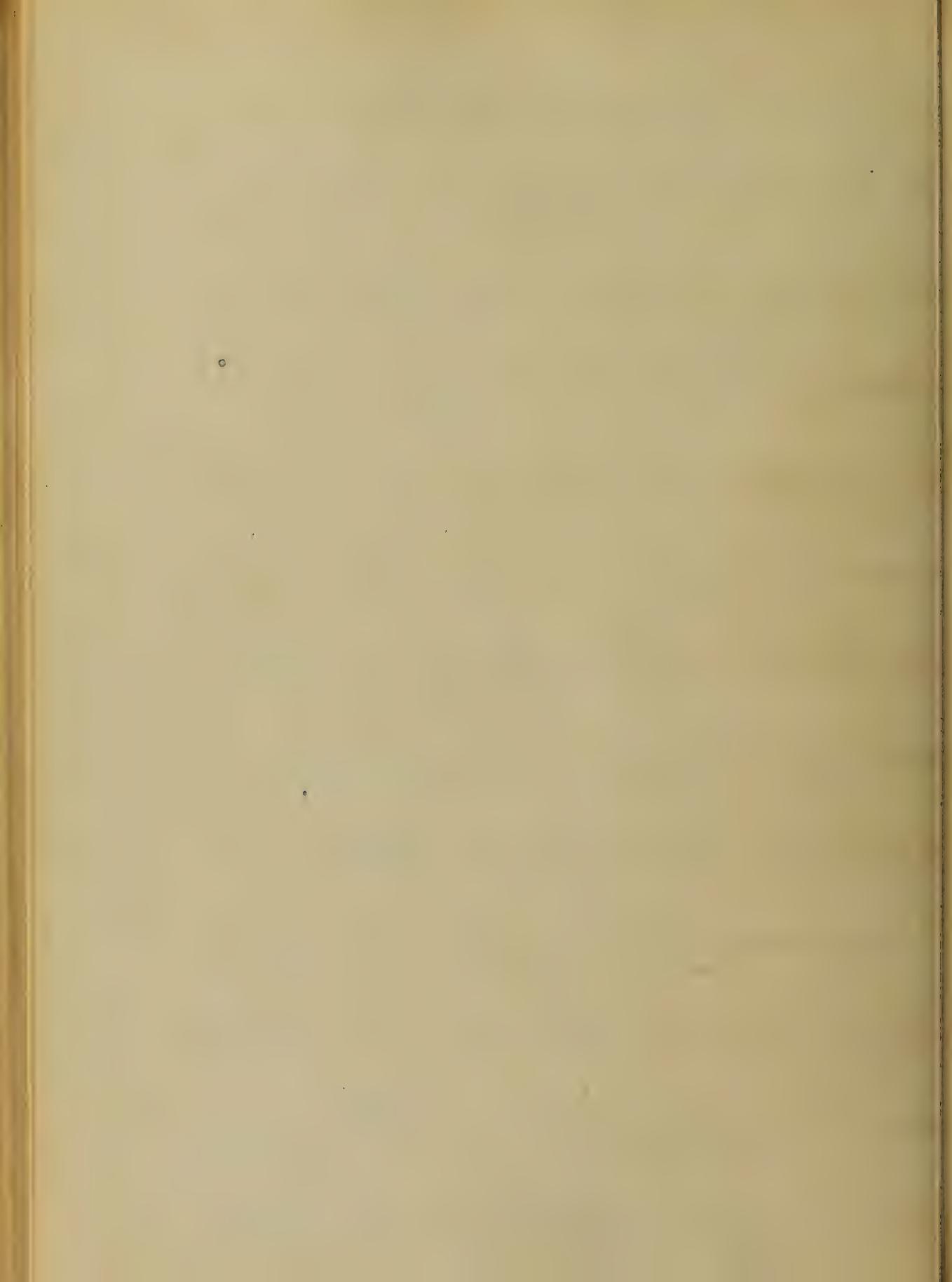
to assist in the removal of the blood when it

is loaded with carbonic acid, but in place of them

The veins are contracted so as to turn in another

place, the power of inspiration, to act with equal

force & more regularity. The veins form large



secretions which increase in caloric as they come

from the brain substance thus offering the least-

possible friction & obstruction to the onward

course of the blood. Second. In the nervous coats

are closely adherent to the nerve membranes so that

when during the act of inspiration the pressure

front is exerted on them they cannot contract

but must continue open & therefore permitting

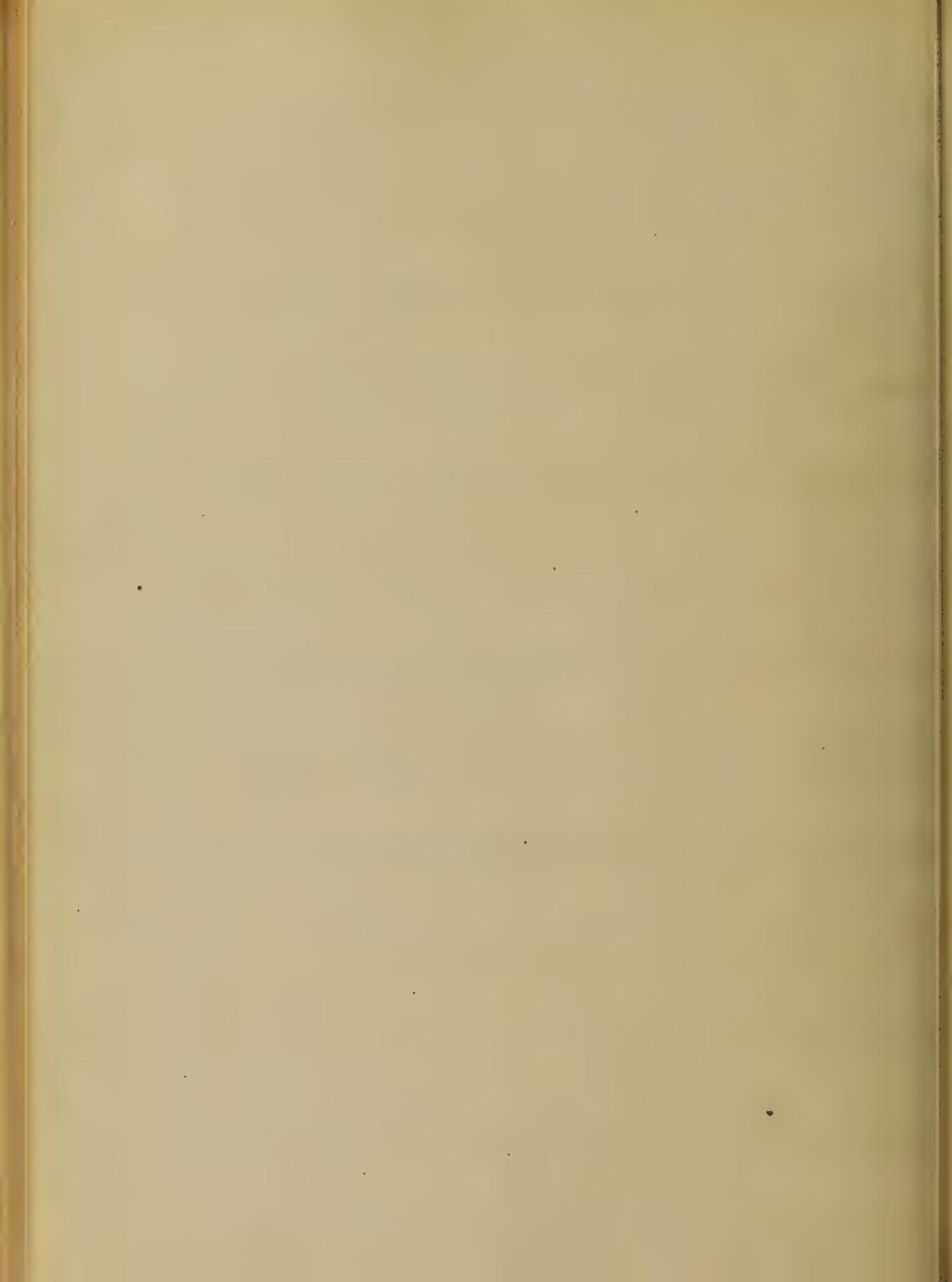
the free egress of the blood. But as the force

of inspiration ceases during expiration the

blood cannot leave them with the same

velocity & were it not for the balance in-

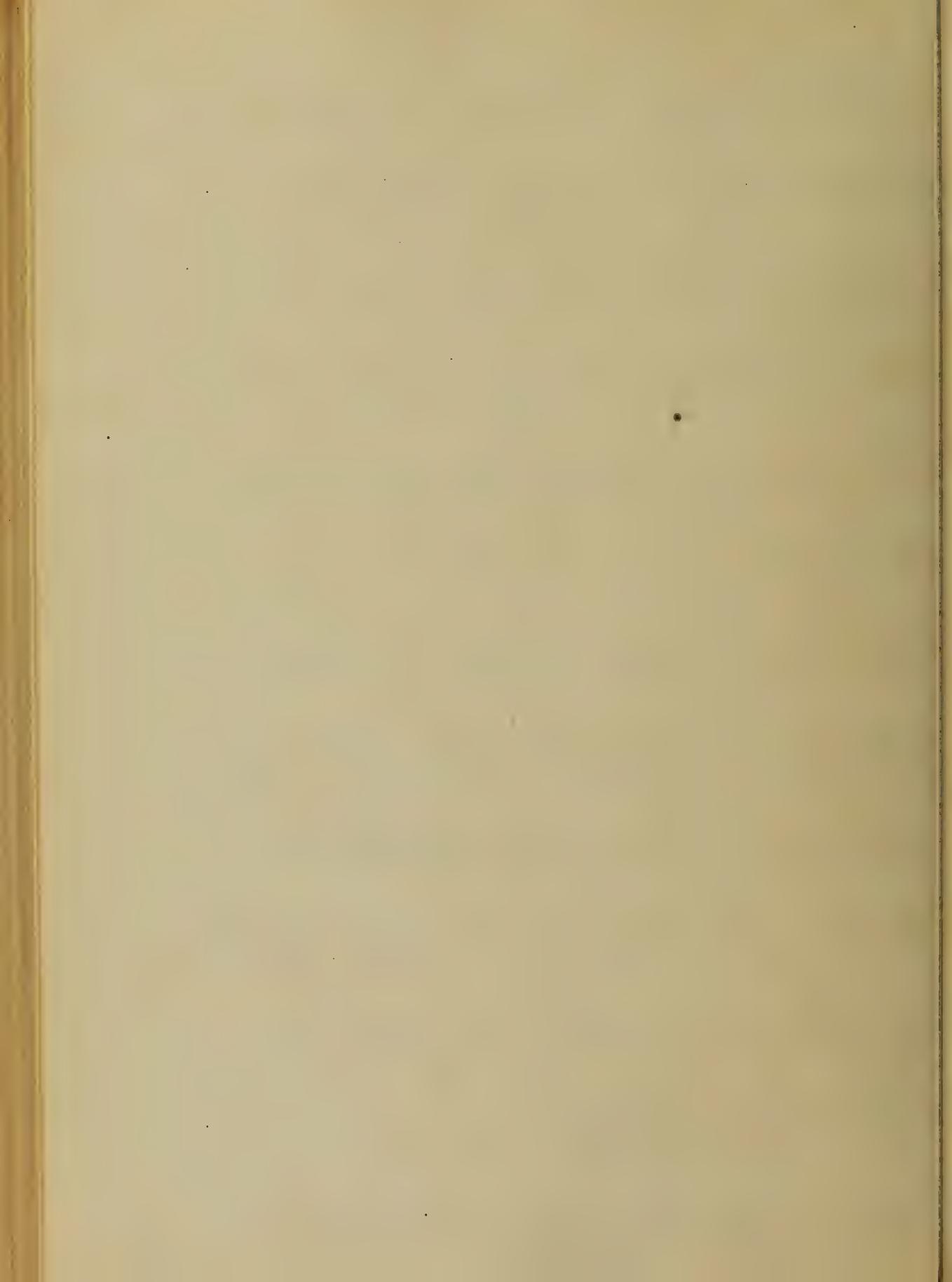
duced by the cerebral-aqueductian fluid



The blood would be its accumulation com-
ing up the delicate veins of the brain and
causing very deleterious consequences which
however is encephalitis as is by the evidence
of this fluid brought the vessels into the
spinal canal.

The great quantity of blood may be estimated
by the large quantity of blood required for its
nutrition, for although its weight is only
about one fourtieth of the whole weight of the
body yet it consumes about one fifth of the
whole quantity of blood.

Small the fixator lies the encapsulation or



or brain and 35 mm. long & 18 to 21 mm. wide.

Positioned in the occipital region, which in man consists

but of about nine tenths of the whole cerebral mass.

The cerebrum superiority is of an ovoidal shape

rounder behind than in front, convex in outline

& divided into two equal portions by the longitudinal

itudinal suture which reaches to the base of

The skull in front & behind; in the middle

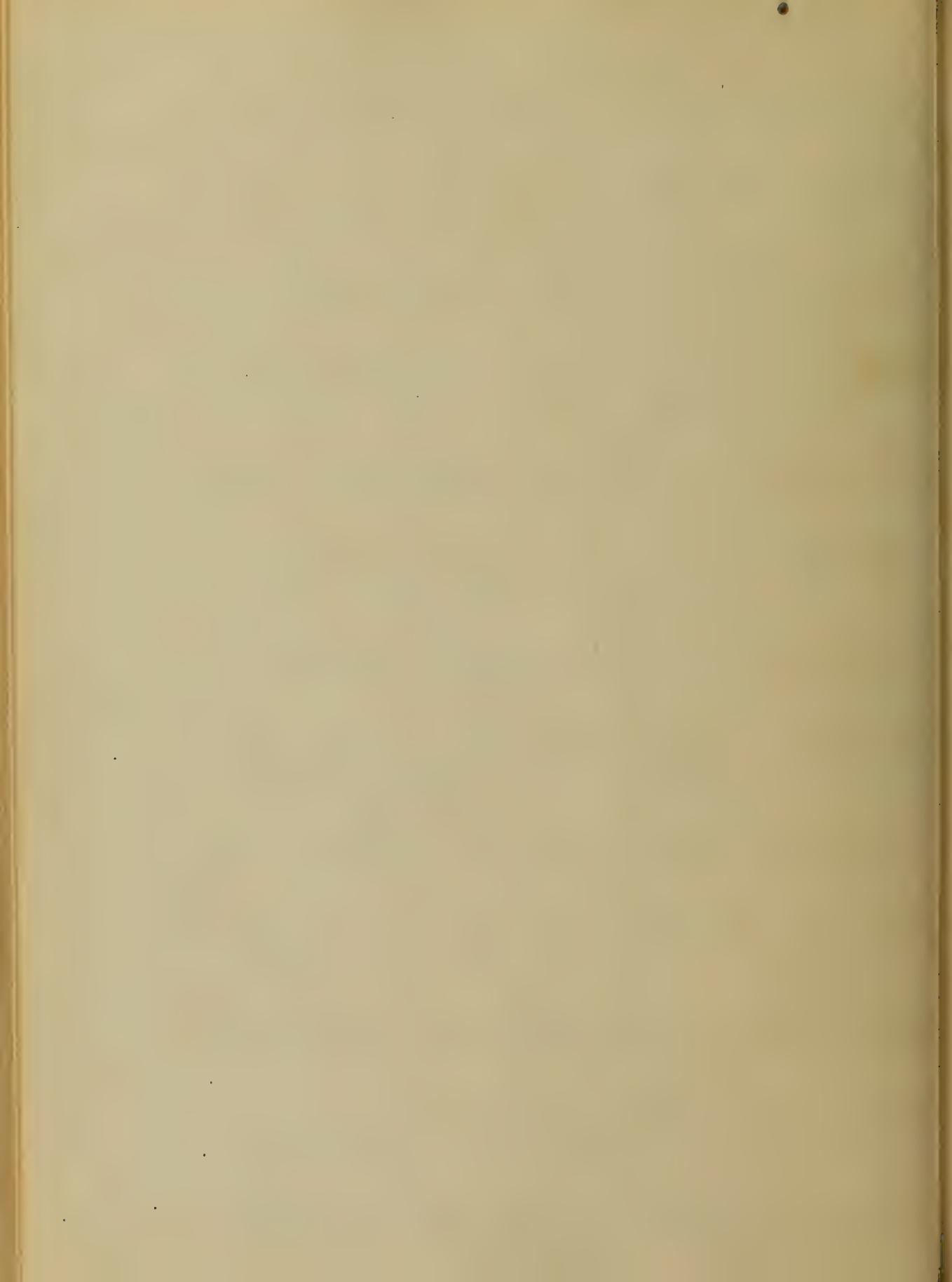
The two hemispheres are united by the corpus

callosum a broad band of commissural fibers

which interconnects the outer surface of the

are turned dorsad to the concave vault,

The examina, the inner sur, are as follows



& in contact with the opposite hemispheres. On

its inferior surface it is of an irregular outline

resting on the anterior & middle lobes at the

base of the cranium & behind upon the tentorium.

The lower surface is divided into three, middle

& posterior lobes, the middle & posterior lobes are

separated by a fissure, the fissure of Sylvius.

The middle & posterior lobes are united at the

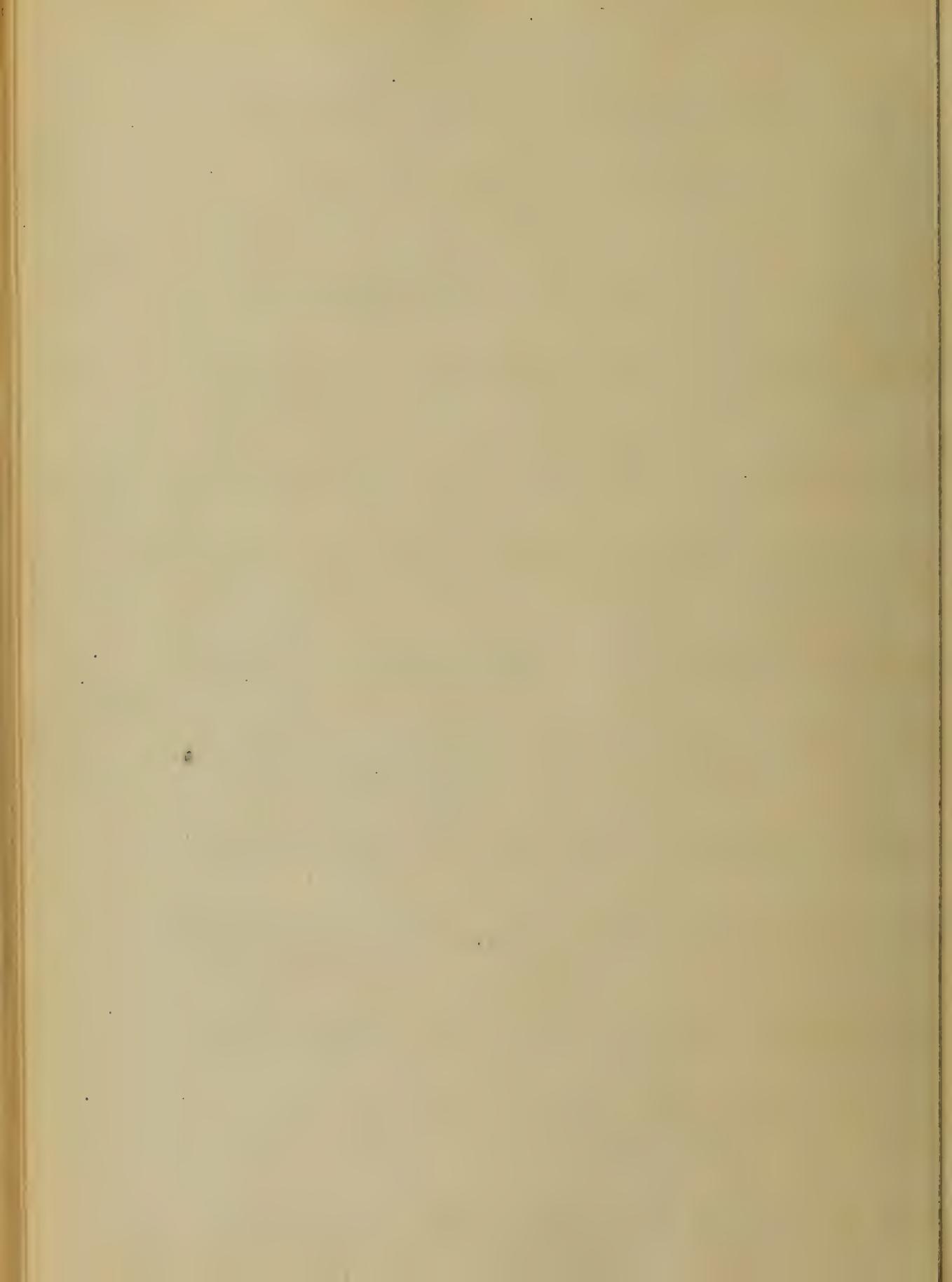
anterior margin of the cerebellum. The whole

of its surface is covered by deep convolutions

increasing in number & depth & complexity,

as we ascend in the scale of animals.

They resemble the spinal cord. The gray matter



Show matter lies on the outside, & white
matter is a continuous layer. By means

of this situation of the convolutions which

are about one-third of an inch in diameter.

The grey substance is very materially increased

in amount without occupying a proportional

increase of space. The white matter of each

hemisphere consists of nerve fibres radiating

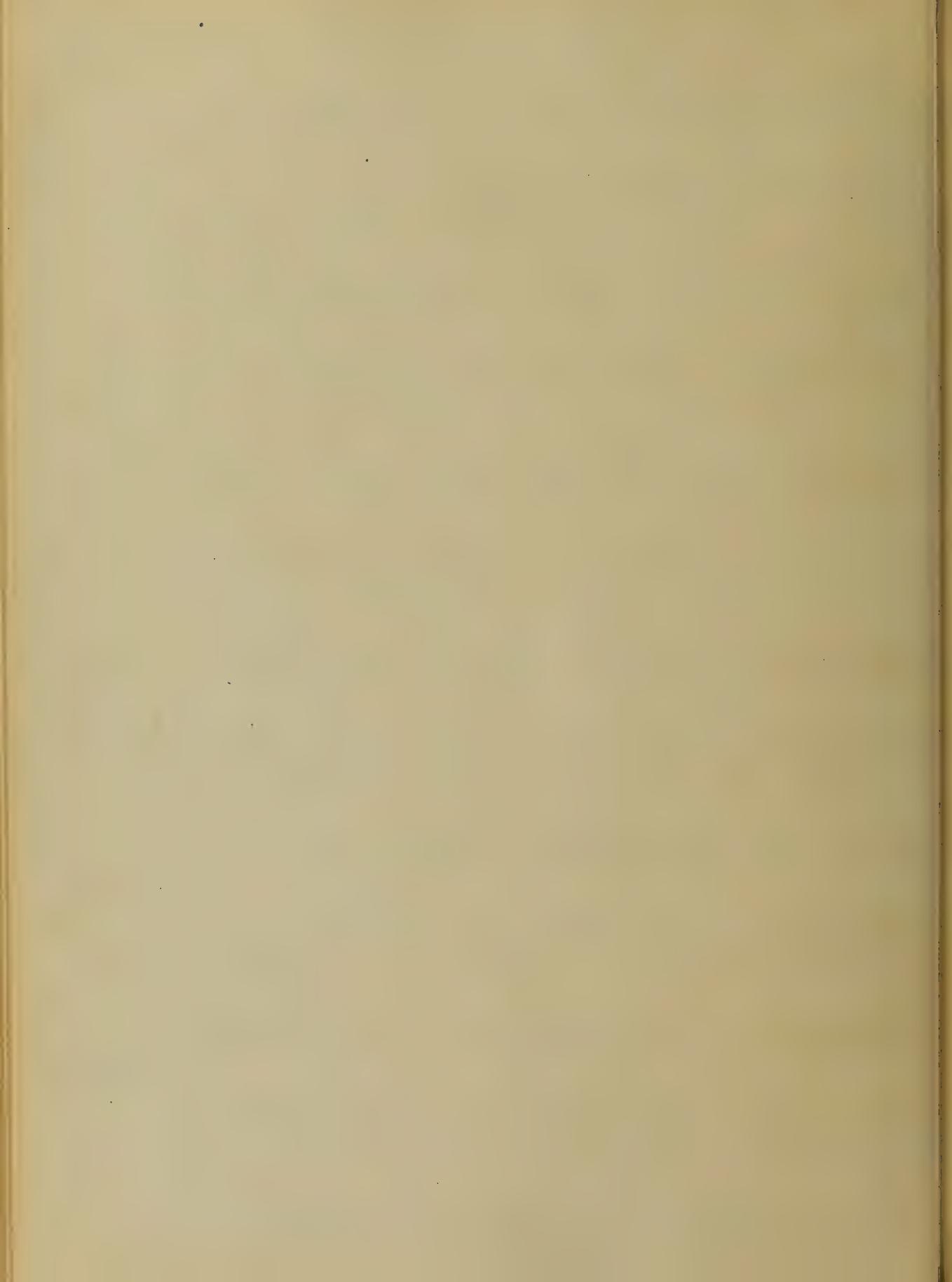
in various directions viz one set connecting the

hemispheres with the cord, medulla oblongata

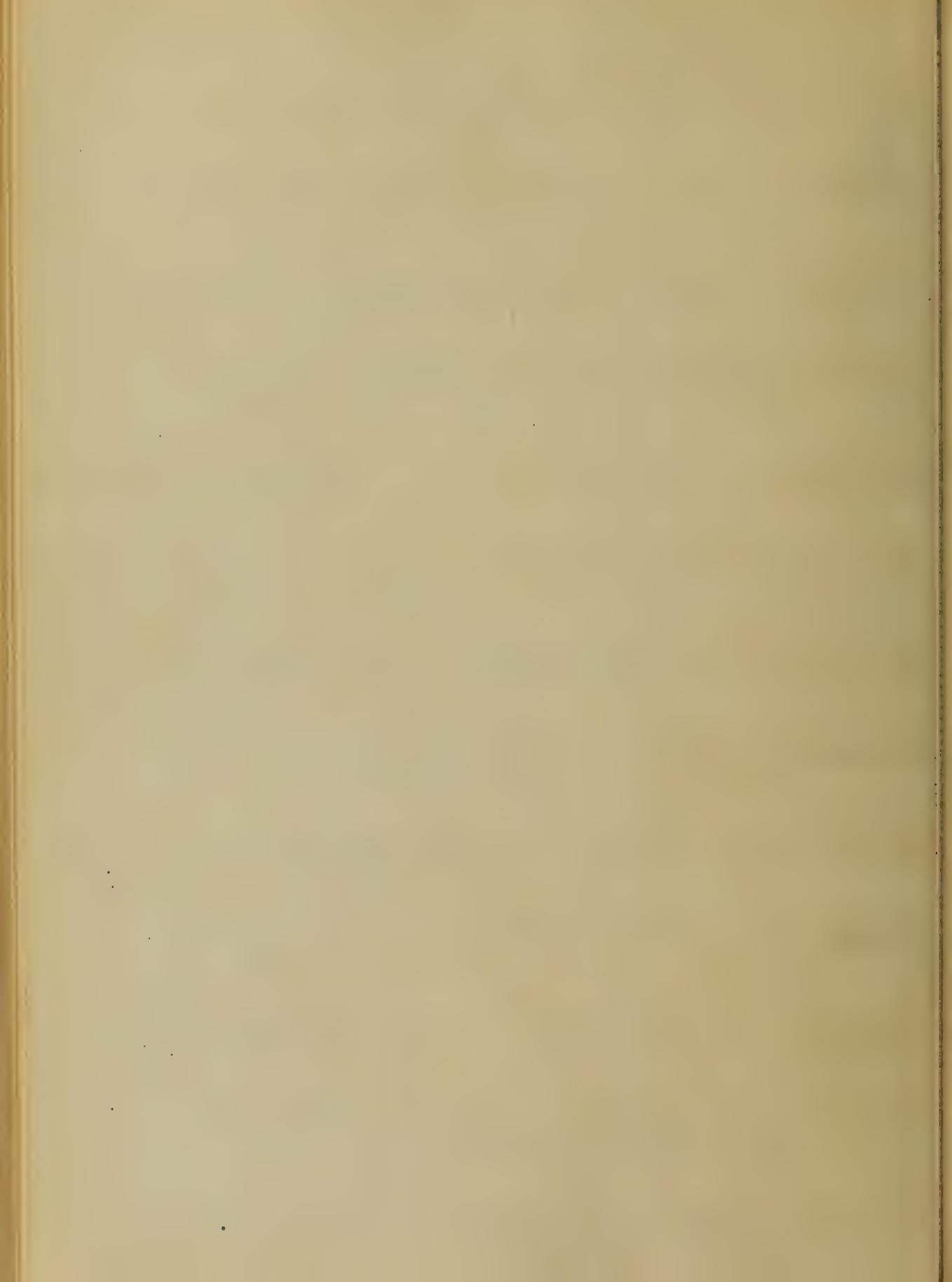
etc., & the first consists a second set connecting

the hemispheres with each other & a third

set connecting different parts of the same



hemisphere. The cerebrum is developed in
the human embryo as an offshoot from the
sensory ganglia & by its access to concretions
and bone it will be found that in some of
the lower vertebrates it is merely a slight
bulb lying between the cerebellum and pons
as in the fish, barely sufficient to cover the corpora
stricata but increases in size in proportion
to the intellect of the animal, covering in
most men of New Zealand about a third
it reaches in man its maximum development
thus covering the whole cerebrum with the
exception of the cerebellum



The cerebral vessels are fixed and immovable

through which the mind manifests its influence

on the sensations, the evidence associated with this con-

clusion is founded are all by exclusion as all other

functions are by experiment found to be lodged

in other organs, & these organs no other function

for it to fulfil. It cannot be concerned in

receiving sensation or originating motion as

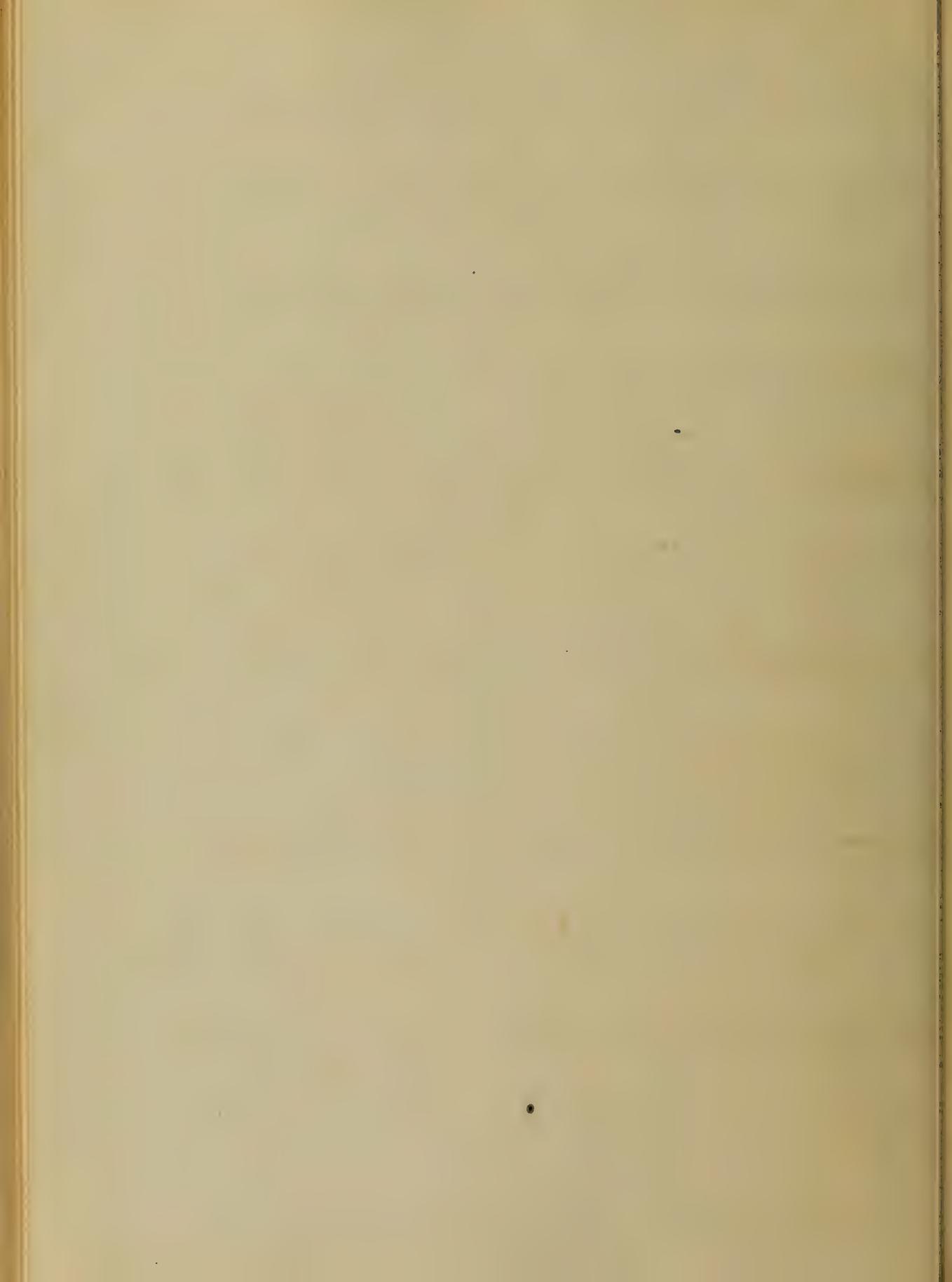
animal experiment proves them to be entirely

deserted of both sensibility & excitability.

which can be easily demonstrated, because

wounding or lancing the vessels of the

cerebrum, second, the physiological analogy.



Finally by combining all we find that

The rate of development of the cerebral hemi-

spheres is in direct proportion to the degree

of the animals. We find that in the weight

of the cerebrum compared to that of the entire

body, in reptiles the cerebrum is one twelve

hundredth of its entire weight, in fish and

birds it is one hundredth, in birds over two hundredth,

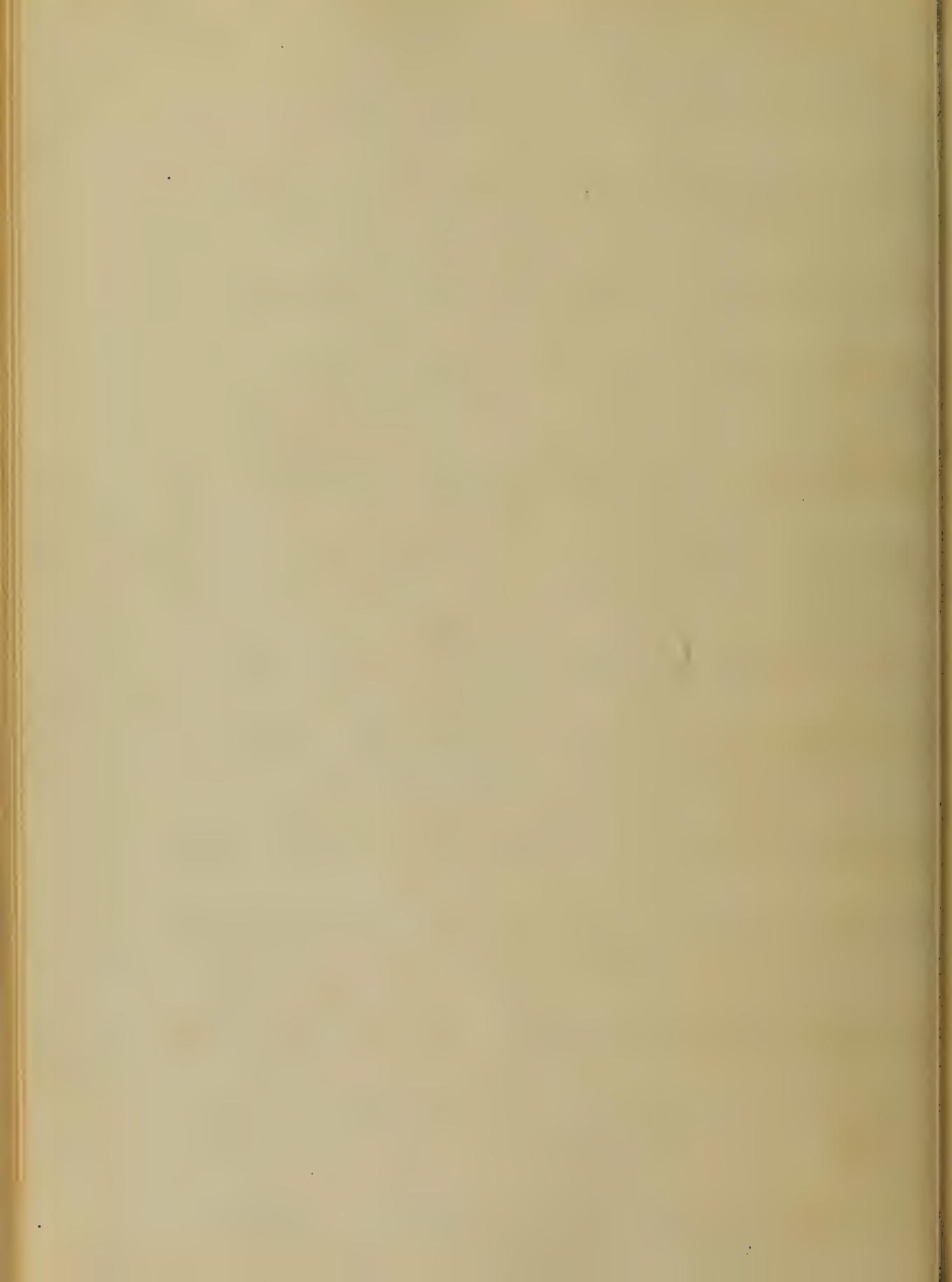
in mammals one one thousandth, and in

man it is one fourtieth.

of his entire weight. In the same order the size of

the cerebrum in different races & even in different

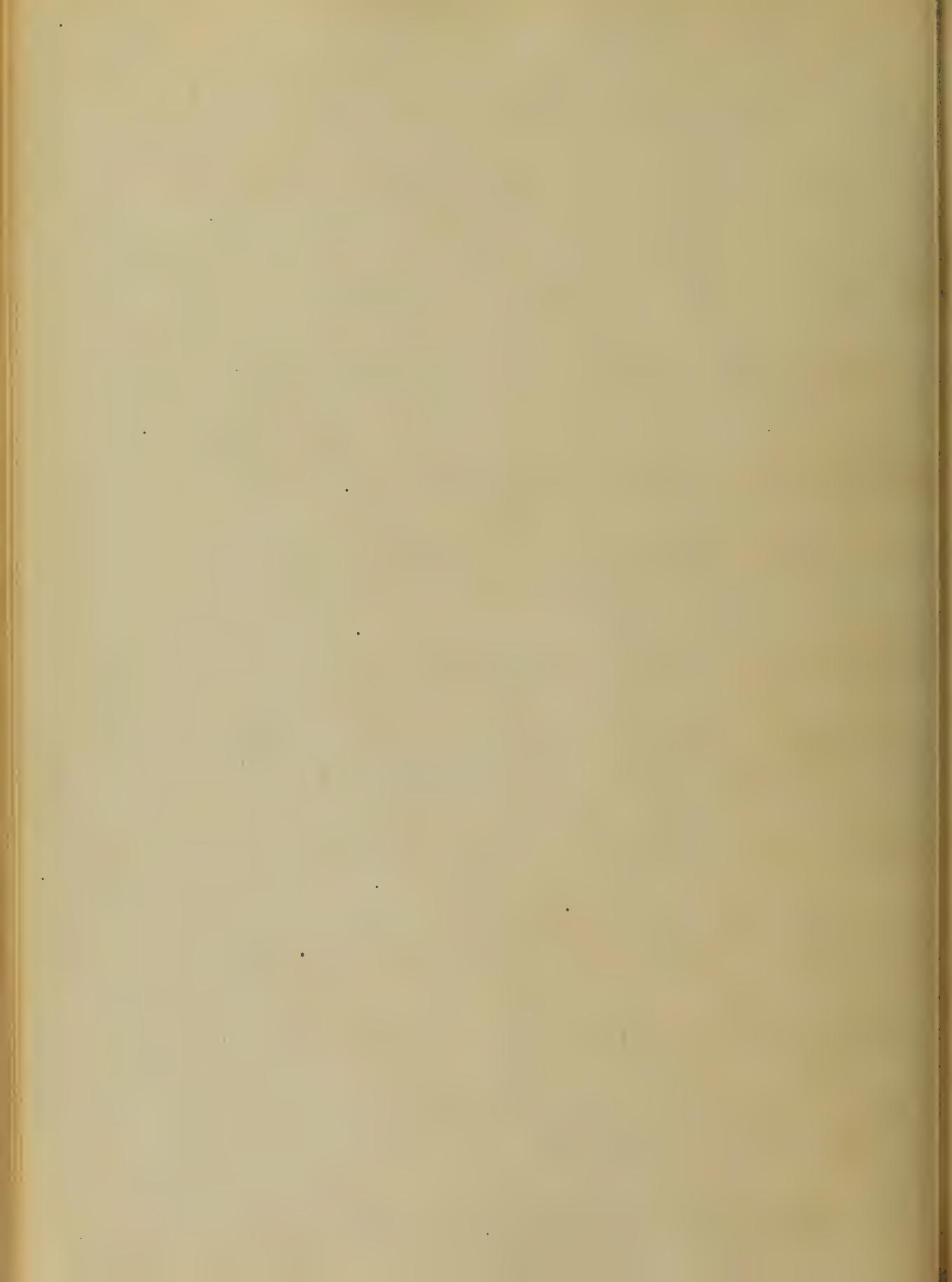
individuals of the same race corresponds directly.



with the grade of their intelligence; but the functional activity of the brain is also modified by its texture so that increased excitability may compensate for deficiency in bulk. Fourthly

from pathological observation the function of the cerebellum is evidenced, for in disease the animal is impaired in proportion to its lesion.

Fifthly its function may be deduced from direct experiments when it is removed in lower animals. The effect of which is to change the animal into a state of profound stupor, the being nearly entirely insensible to stimuli, incapable though its life may continue for



several stages with infirmities, though sometimes

fever still occurring, & capillary fever does not

or Exercising the organs of digestion.

do she ever become fatigued or wearied? That is

is it the centre from which the mind acts or is

it merely the terminus which receives, New

knowledge & impressions made by the world?

This she will certainly more nearly resemble

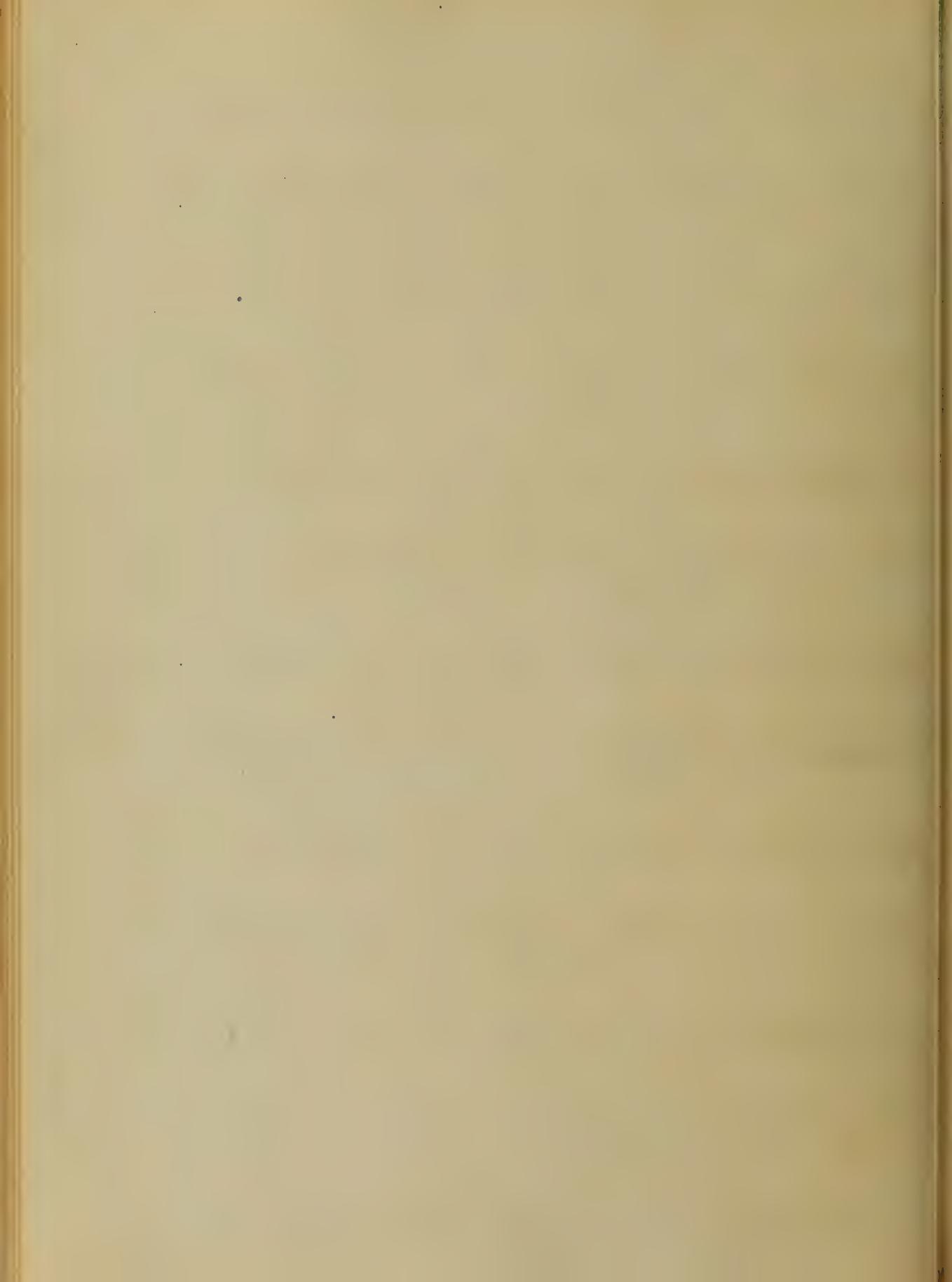
a spiritual creation, being closely allied

to the mind or the spiritual creation.

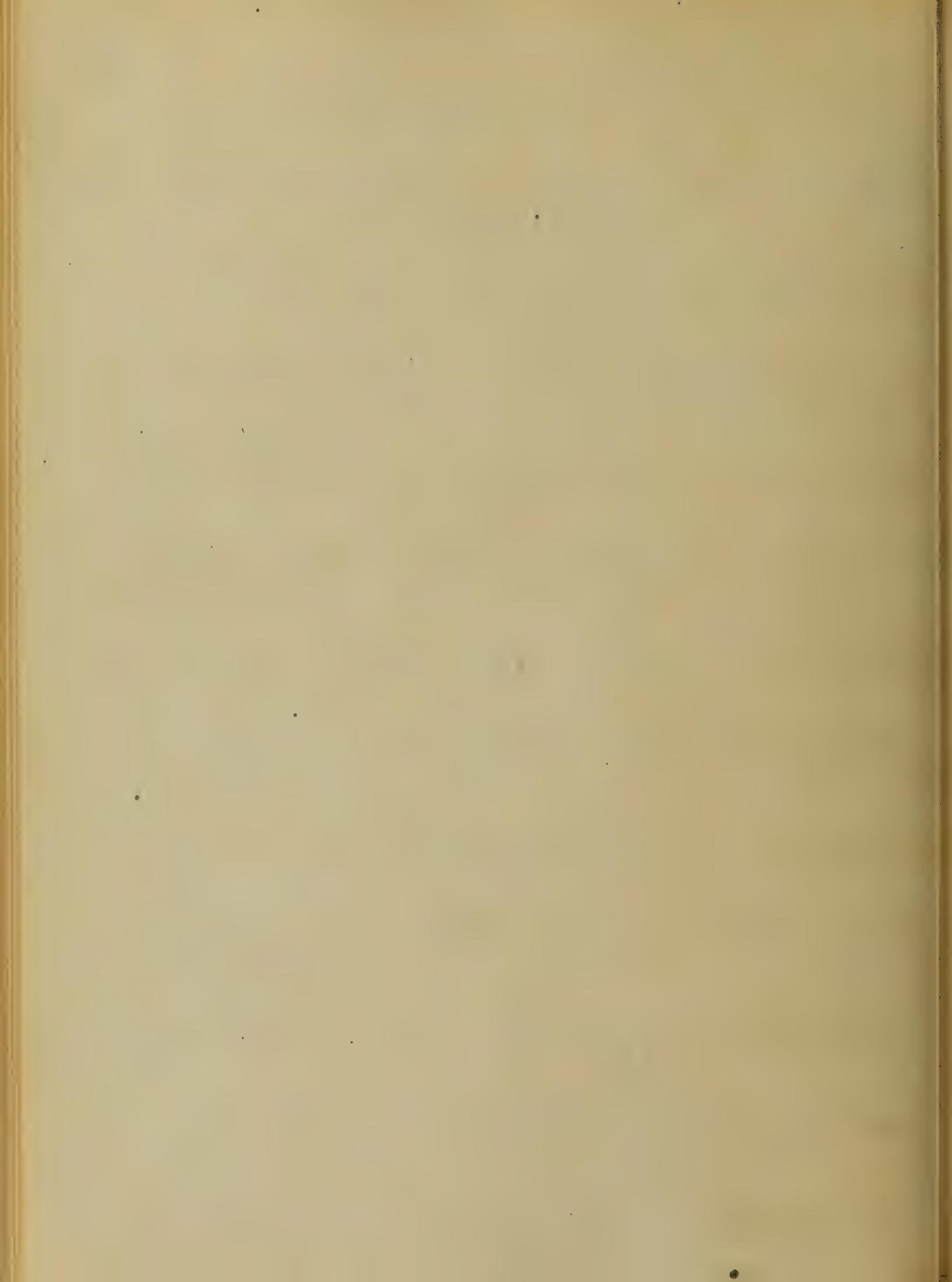
of the tub. and quadrige mind, it would

be difficult to conceive how the immaterial

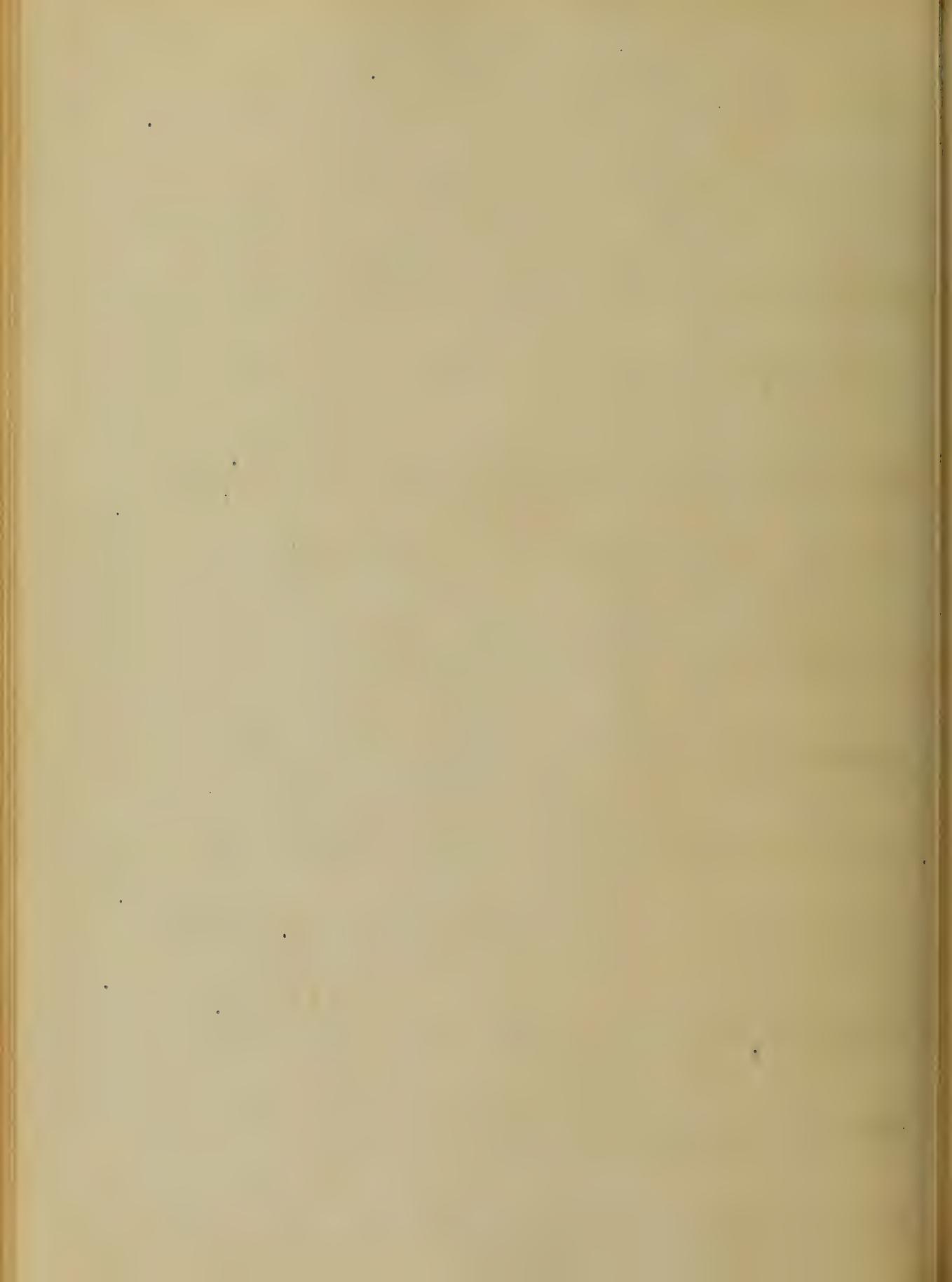
mind, the bond of union between one divided,



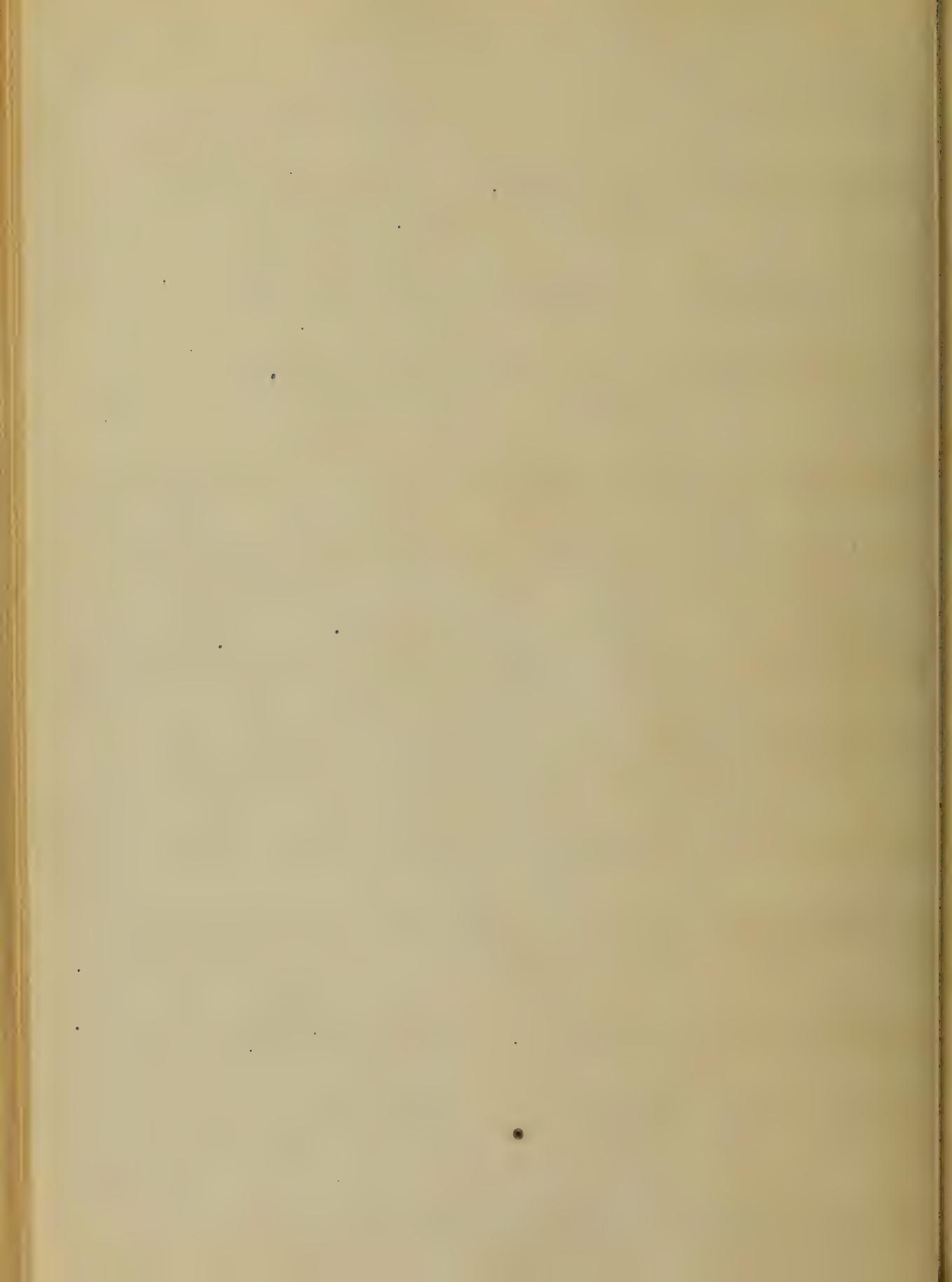
immortal nature & our material limited animal
nature should be located in a material substance
which like the rest of the body is subject to
decay & of limited duration therefore I cannot
arrive at certainty the latter view regarding the
substance simply & solely as the mere instrument
on which the mind creates its impressions &
from which it, the mind, receives its impression
concerned to it from the surrounding world.
The consequence may not consist with your seeing
conscious thereof, or there may be unconscious
impressions as Sir W. Hamilton calls it, for
instance we can easily recall a number



organization which gives a large customer his
privileges suddenly & leases every one else to
others like a very bad recollecting them has been
entirely abandoned. There seems to me but one
way to account for this namely that the sensuum
through which the cerebrum must act in order
for us to become conscious is all the time enga-
ged in something else, it receives the impressions
made on it but its action cannot take place
until it has rid itself of its former occupation
& then acting we become conscious of its opera-
tions & the name or quotation which occurs to us
as it first occurred?



Before leaving the cerebrum it will be proper to
glance at its connections with each other &
with the rest of the encephalons. The cerebrum
is united to the fellow ^{of} its ^{by} means of ^{the} inter-
callosa or a mass of closely interwoven fibers
extending on the median line & at the bottom
of the longitudinal suture between the cerebral
hemispheres & connecting these fibers widely
take into the substance of the hemispheres
on either side & radiate chiefly into the anterior
& middle lobes but some also extend to the
posterior lobes. $\frac{1}{5}$ of ^{the} cerebrum is devoted to the
establishment of harmony between



The two hemispheres under the corpus callosum

has the fornix consisting of a mass of long ir-

itudinal fibers arching down in front forming

The anterior crus on each side & may be traced

to the outer part of the optic nerve at the optic chiasm

where one lost in the substance of the thalamus

opposite of the same side; below the fornix

area are found, one on the side, & passing dorso-

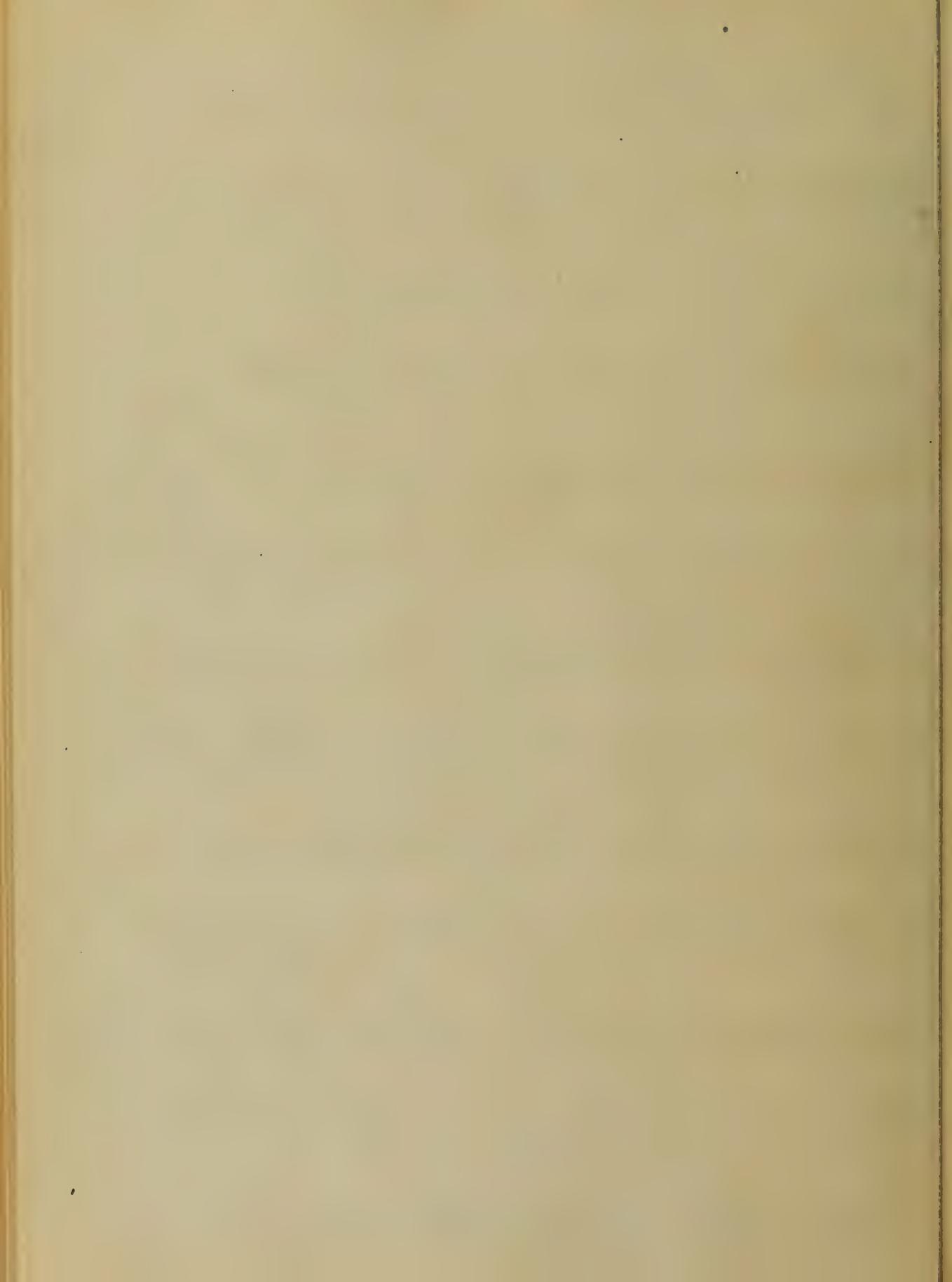
ward into the lateral ventricle where they

are continuous with the hippocampus major.

A clear series of fibers connecting the two -

passing through the cortex & thalamus the latter

through the optic thalamus penetrate the



and to connect the hemispheres on each side.

The *radix semicircularis*, the peduncles, the

semicylind, the *striae longitudinales*, the gyres

fasciculatus & *fasciculocircumclusus* are all

longitudinal commissural fibers supposed to

connect distant parts of the same hemisphere

Cyanocephala cerebelli at least connect the

cerebrum with the cerebellum, its fibers passing

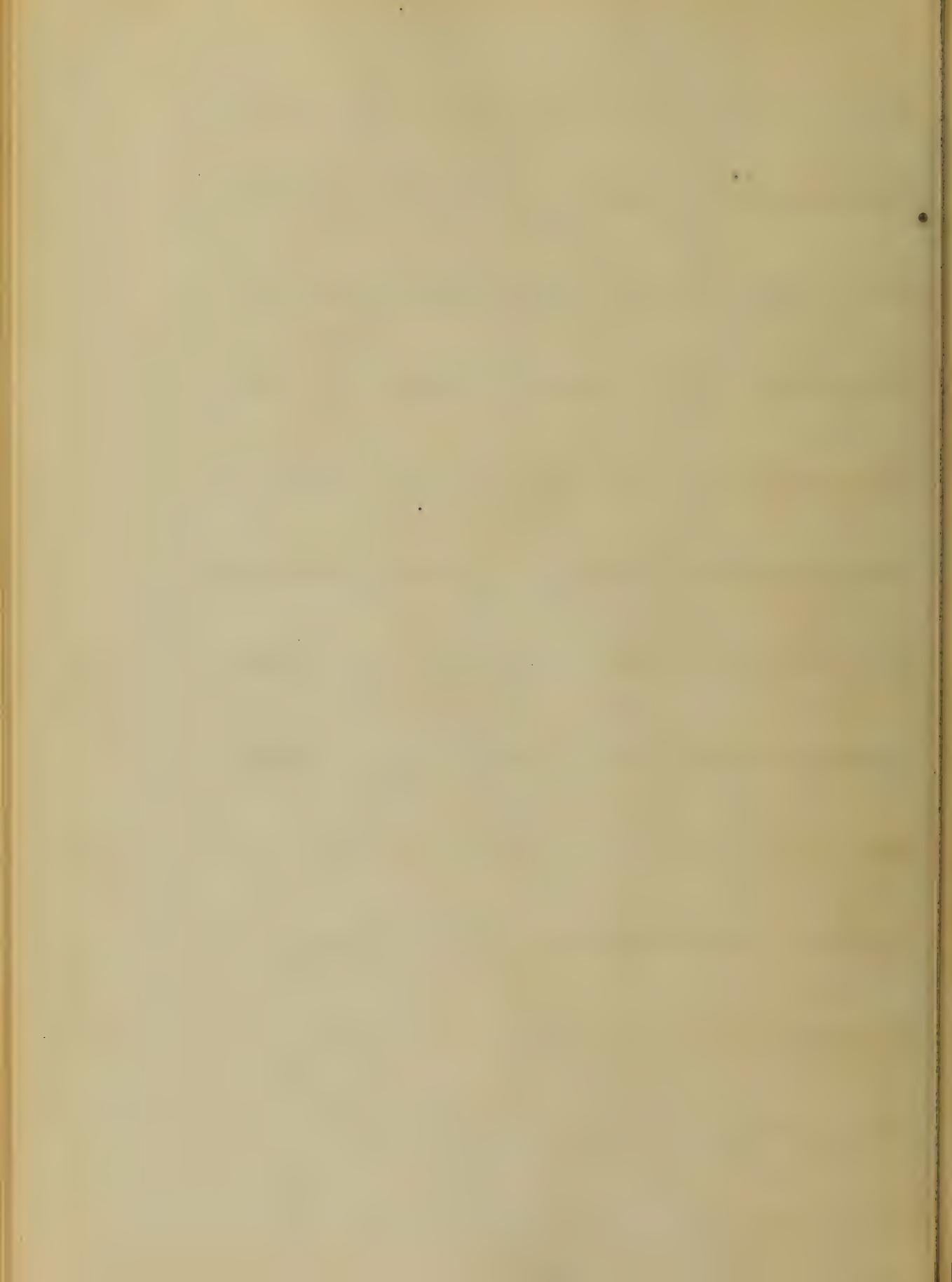
downwards & backwards through the crura

cerebri opti thalamii to the cerebellum.

Finally by means of the crura cerebri the

hemispheres are connected with the midulla

oblongata



Immediately beneath the first layer of tissue

The cerebellum separated from it by the

interiorized layer of the cerebellum occupying the

two lower layers of the original brain

size it is equal to the entire cerebellum when

averaging about five & four ds. The cerebellum

looks as if it were flattened from a ball or even

with its largest diameter from side to side

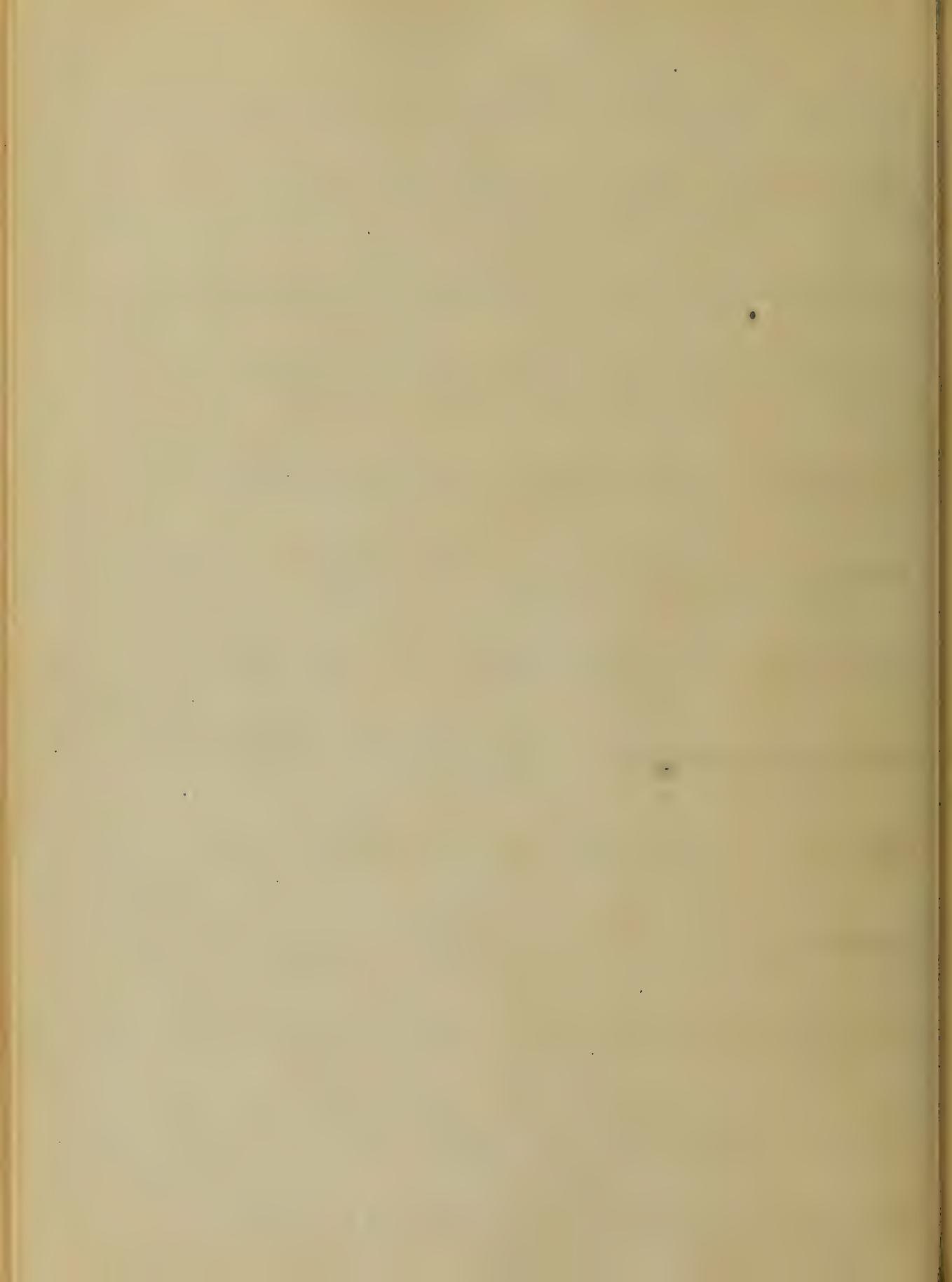
The gray or cerebellous matter is here also situated

on the surface, & its convolutions are much more

numerous & complicated, the sulci are much

deeper than in the cerebrum so that in proportion

to its size, it contains much more cerebellous matter.



5. A vertical section be made through one of its branches
1

In certain vessels the wall may be observed to consist of

This is it consists of a bundle of the canals with radiating
8

canals & hence is called the arbor-vitae. In the trunk

6. The arbor or tree has an isolated ganglion probably

the continuation of the anterior spinal vessels

from the sacrum.

7. Connections of the cauda equina with the rest of

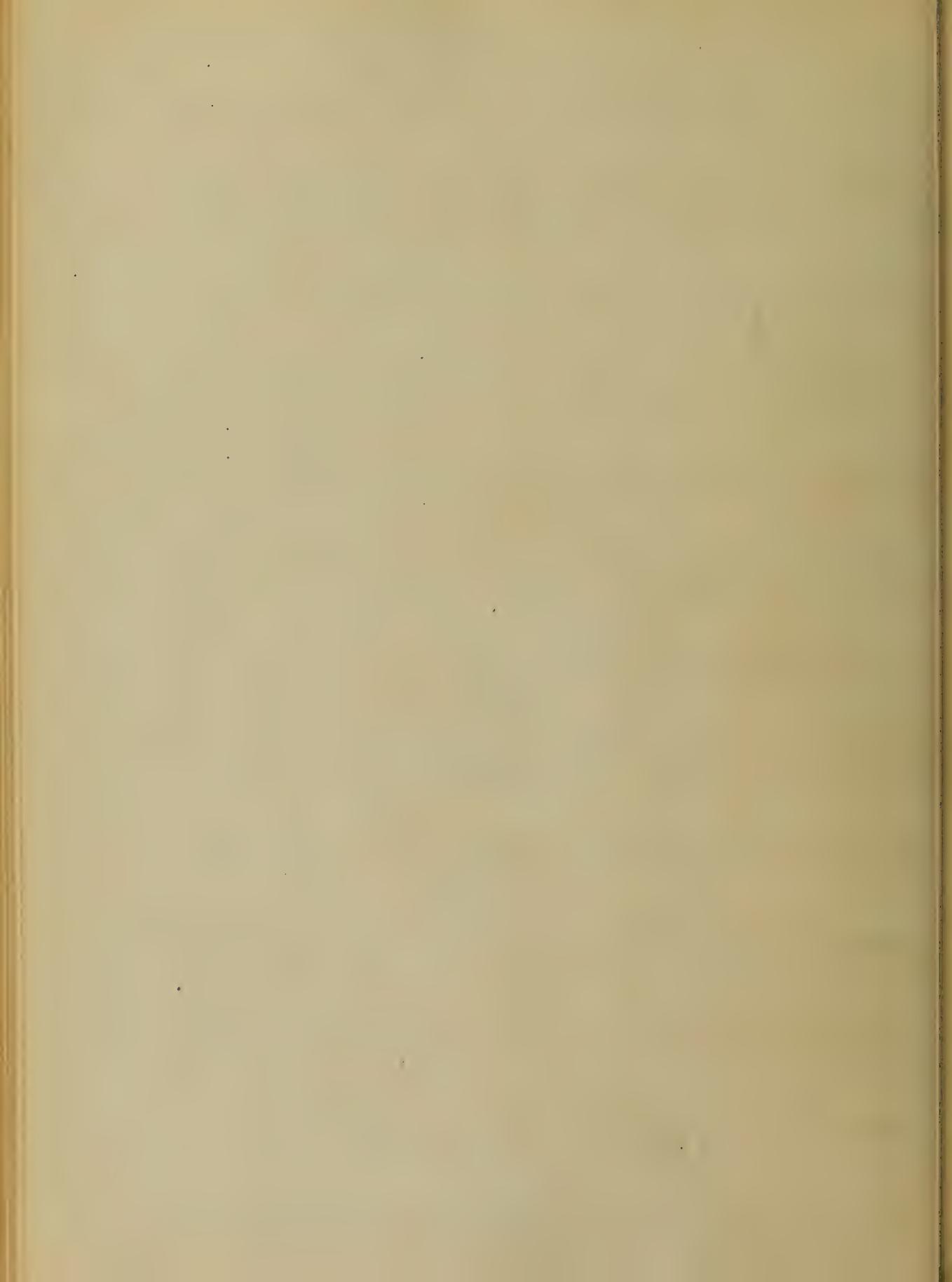
the spinal canal are first by its upper branches on the

processes centrales and rami which pass forward

8. connects to the intervertebral ligament beneath

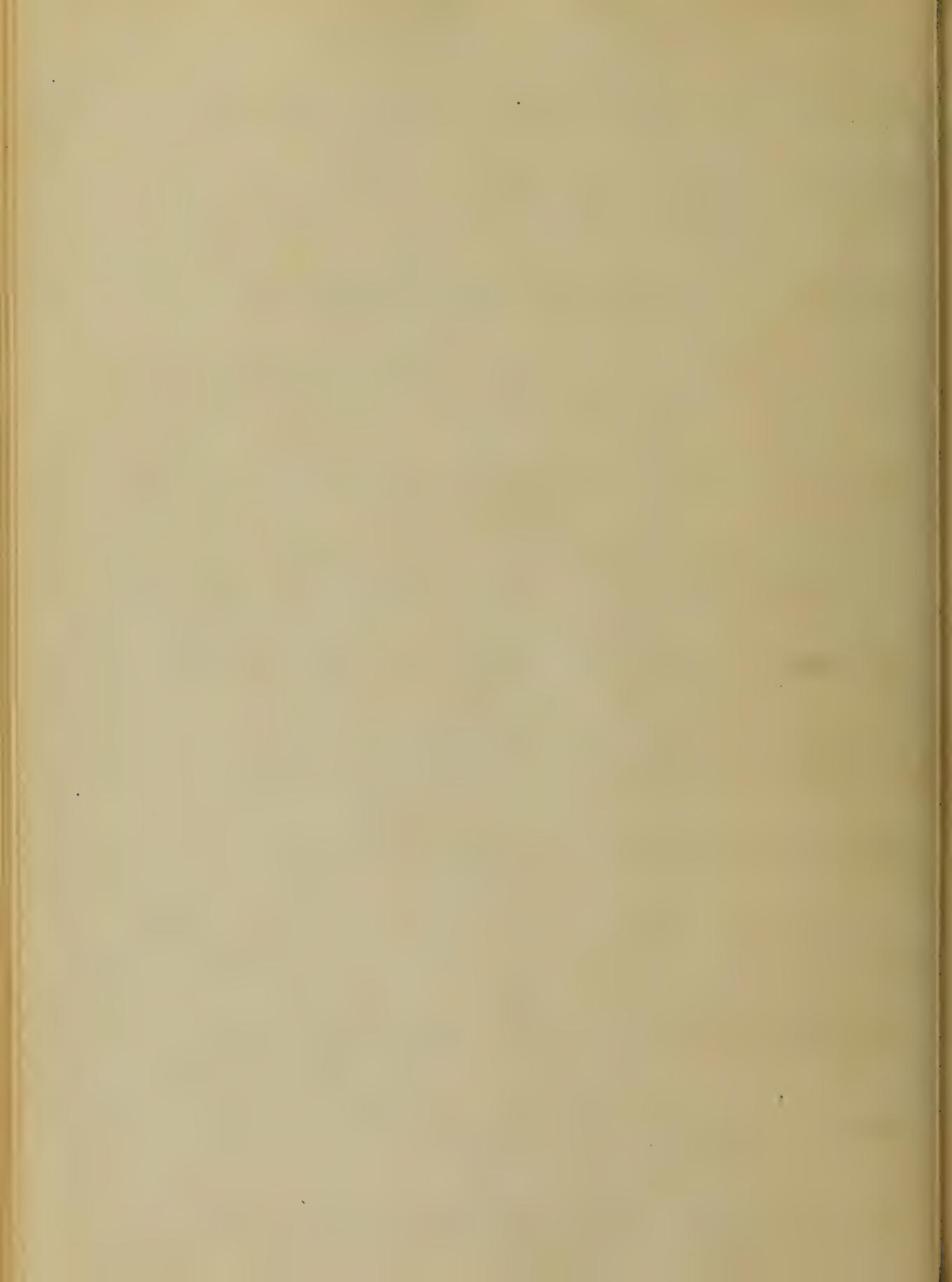
while it ascends to the canals containing the filaments

which appear to form a part of the floor of the



you will consider; secondly the insular lobules or the
processus ad medullam which unit it to the medull.
at one point, another is represented, two sin which
connects the two hemispheres of the cerebellum, it
consists of a mass of fibres arising in the lateral
margin of the cerebellum & arching over the correspond.
ing points thus forming the transverse or supra-
cerebellar fibres of the Pons Varolii.

11. 11. & 12. June. In this position it was suspended
in a position giving to the cerebellum that of amas
veneris, but far from being suspended by such a
the latter reflects such an affection. However it
was the seat of convulsions if it would certainly



as will be as fully developed in the lower mammals and

in man, but comparative anatomy shows that

it is developed slightly more with man, the reason

being its maximum in the human being.

Furthermore if the affection of scrofulology were

give the condition would certainly be less developed

in educated animal than in one whose reproduction

processes are unimpaired, but this is not the case where

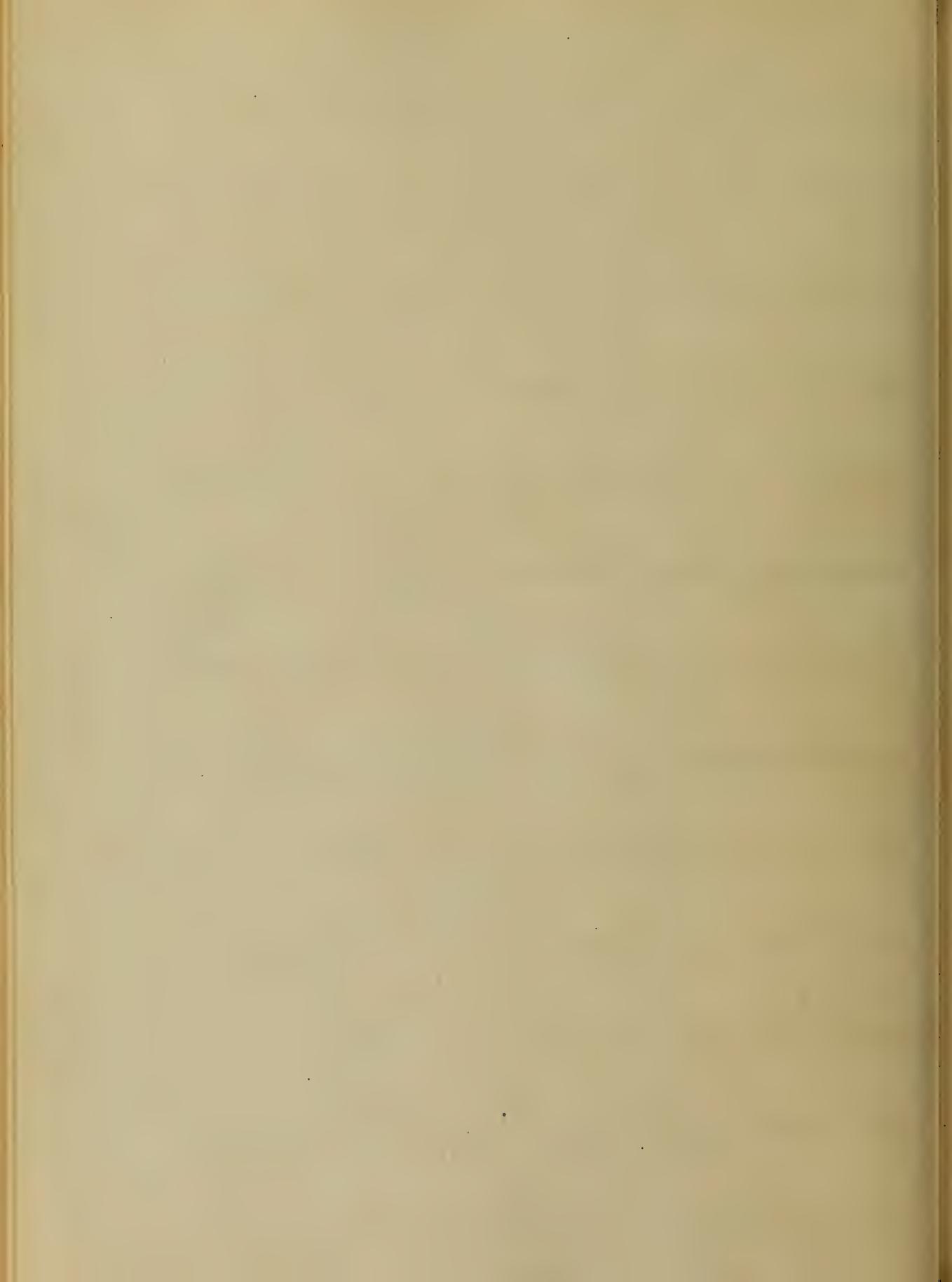
the condition of scrofulosis is so common & yet it is commoner

in the latter & hence it greater develop-

ment in the latter must be owing to some other cause.

It is most probable for foundlings in Paris a case of

and is reported who having it was so much affected



to master certain that the authorities were forced to

put her in a straight jacket to prevent her from

screaming when this child did the most minor exercise

which revealed that she was entirely destitute of even

volition. There was however one peculiarity manifested

in this young girl, long ago was recognized, similar

to that of a common child when she was comforted

she would roll to & fro. This appears to me

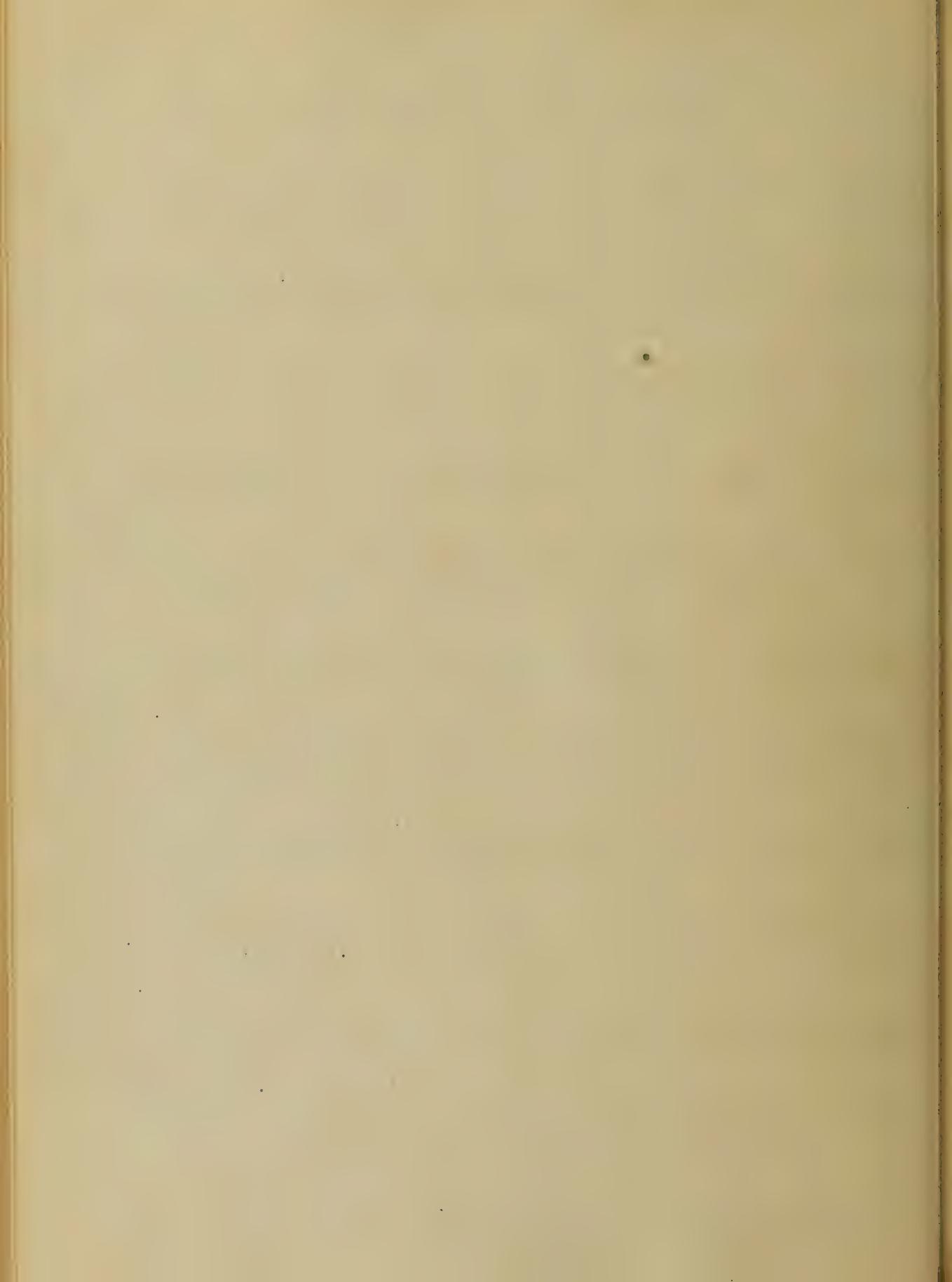
to be strong evidence of the sanity of the mind

as maintained by Flourens with regard to the function

of the cerebellum. Though D'Addario's experiments

leave some doubt over their correctness but I

do not consider this question directly connected



Tenu - regarded the function of this ganglion as that

of co-ordinating the various voluntary movements & it

was easily seen that, it was induced by irritation of the cere-

bellum. He exposed the base of the skull in a frog and

& then removed a portion of the cerebellum, the animal

just mentioned would now lie back. The movement is

of the extensor muscles, in crossing the mouth of

airway, the bird lost the power of flying altogether.

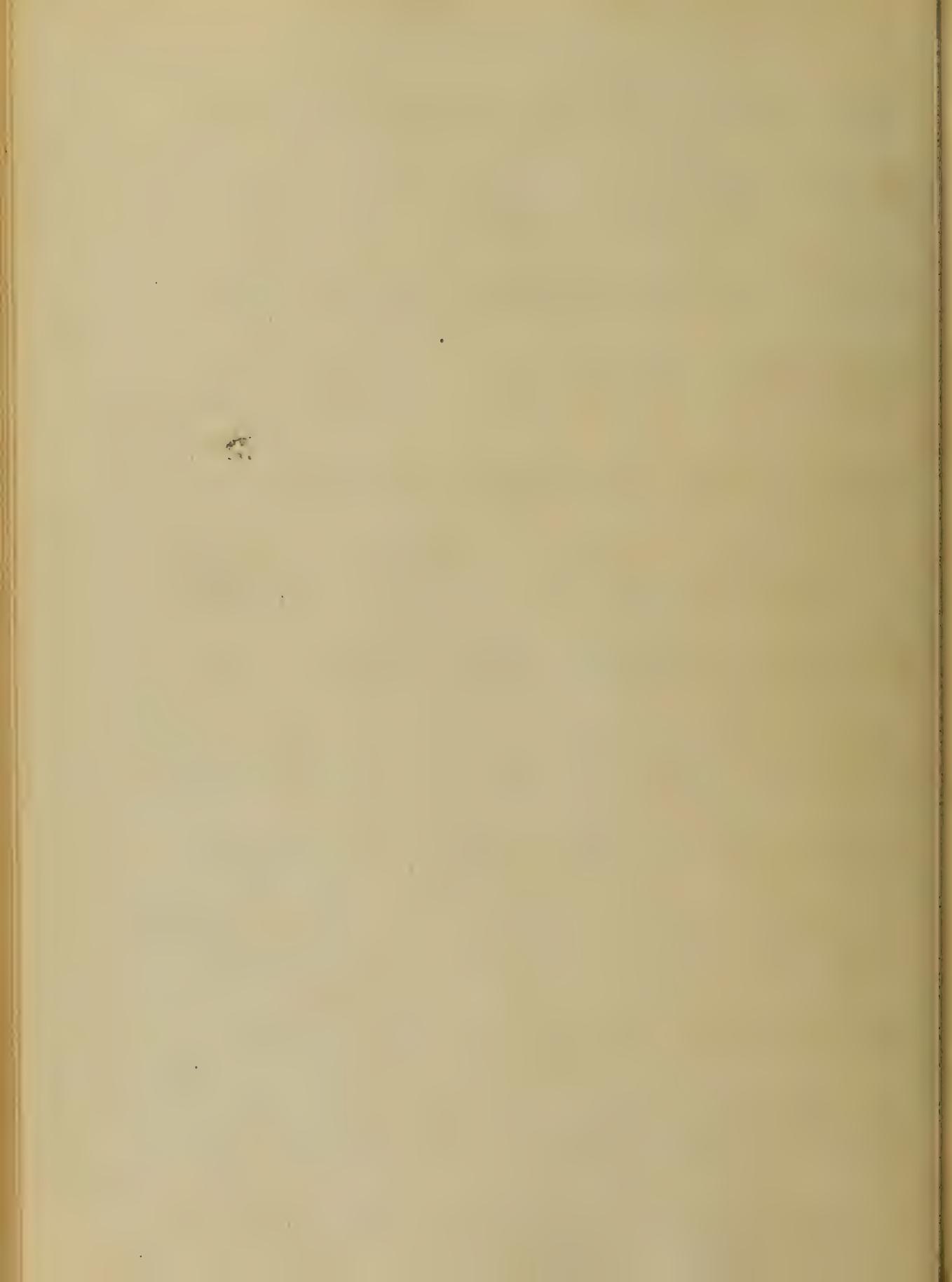
It was able to stand or walk only with extreme difficulty

airway; though it was not in the least fatigued

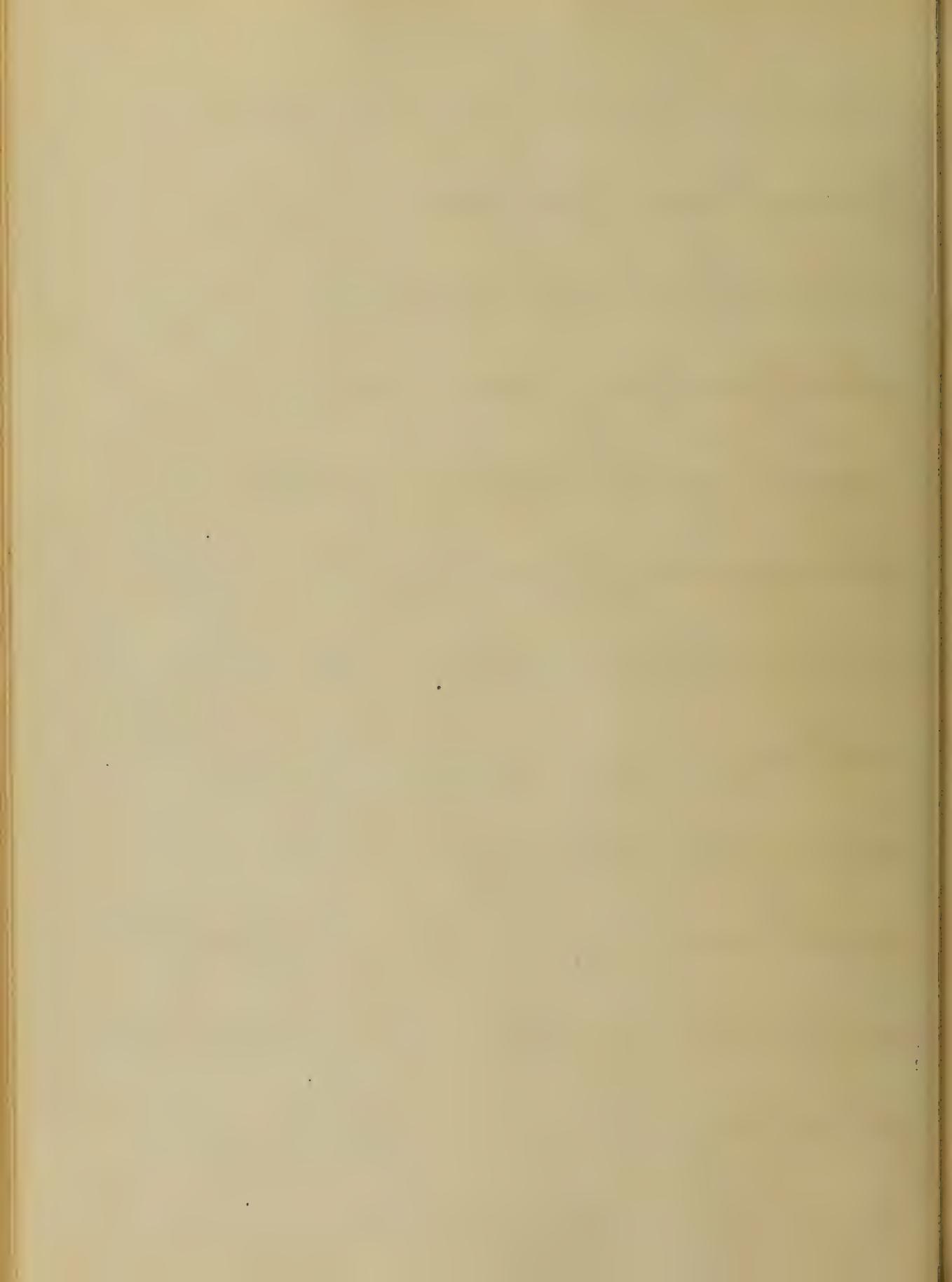
for it did not ... because of its complete loss of the

use had however no control over the successive con-

contractions of its limbs so that its motions were con-



and is blundering. The bird in reflected faculties
acts susceptibility to impressions unaccustomed
which I gained after the experiment. These results
inevitably follow this operation, and evidently point
to the correctness of Flourens's view as to the office
of the cerebellum. Although Dr. Dalton found that if
the animal received three successive operations it would be
coordinating power in the parcell of time. I say so
first of all, because Dr. Dalton relates four cases
in which he removed more than three quarters of the cerebellum
others one half, of the cerebellum; and one half
of the cerebellum he observed in all four cases the
same want of coordination in the muscular movements.



ments but in a little more than a fortnight.

The animals had nearly or quite recovered their

natural control of their motions, & on killing the

animal it was found that section had made no attempt

at regenerating the lost parts, so it was therefore suggested

that the effect observed by Flourens was due to stroke

of the system in consequence of the operation, not

to the removal of the cerebellum. But as it neither

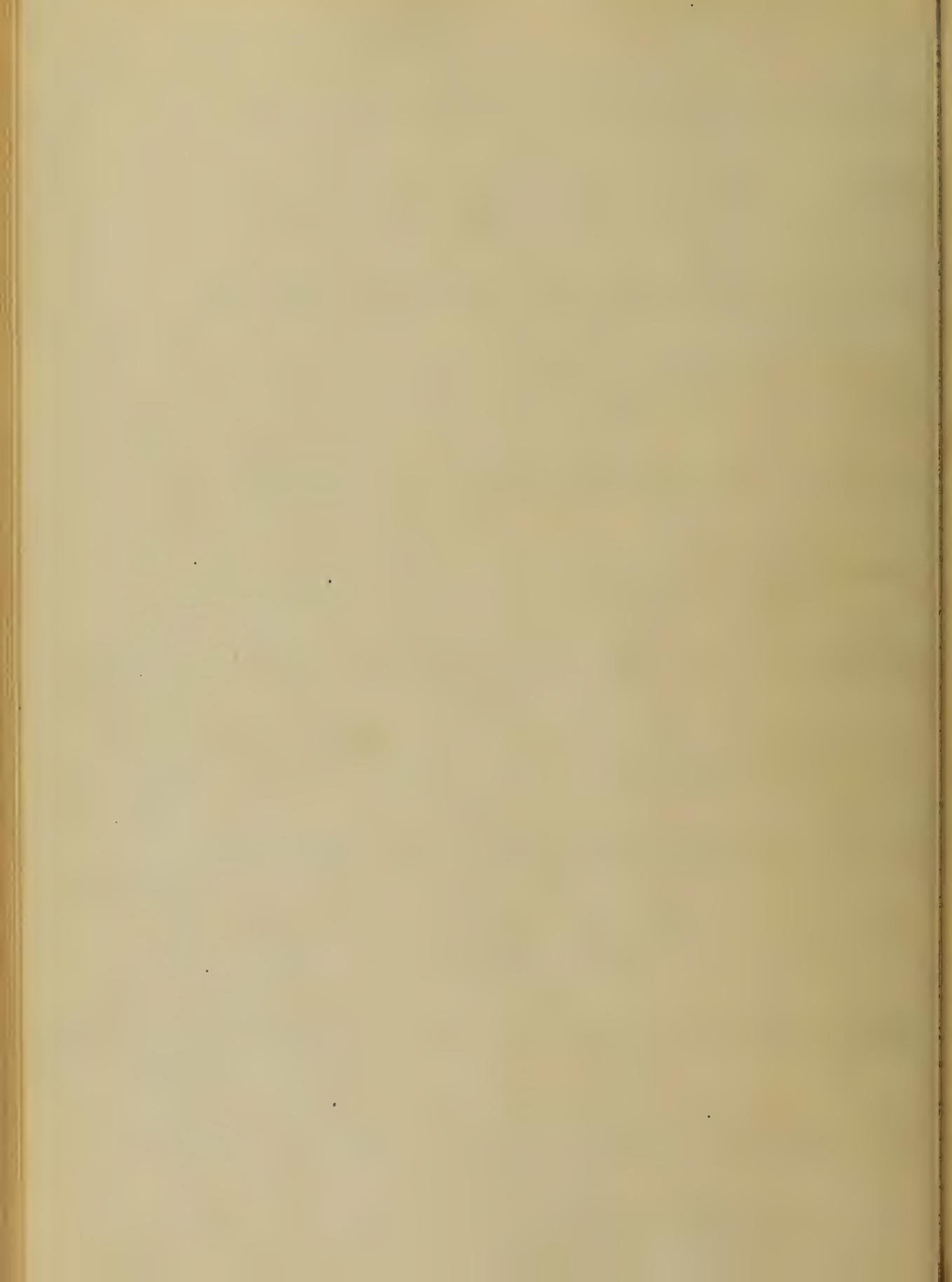
in fact did he remove the whole of the ganglion,

it seems to me that the subsequent recovery of

these animals does not prove Flourens to be erroneous

but only the wonderful power of nature to

adapt itself to surrounding circumstances.



Now, however we see exhibited everywhere, Bernhard found

that if a bird be put under a bell-glass & treated as follows

be gradually replaced by carbonic acid, the bird would

continually do live in an atmosphere which it would inhale,

by killing a bird taken out the glass & mixt

with it. The continued existence of the bird did not prove

that it did not require pure air for the continuance of its

life. In another case a man lived in that same inci-

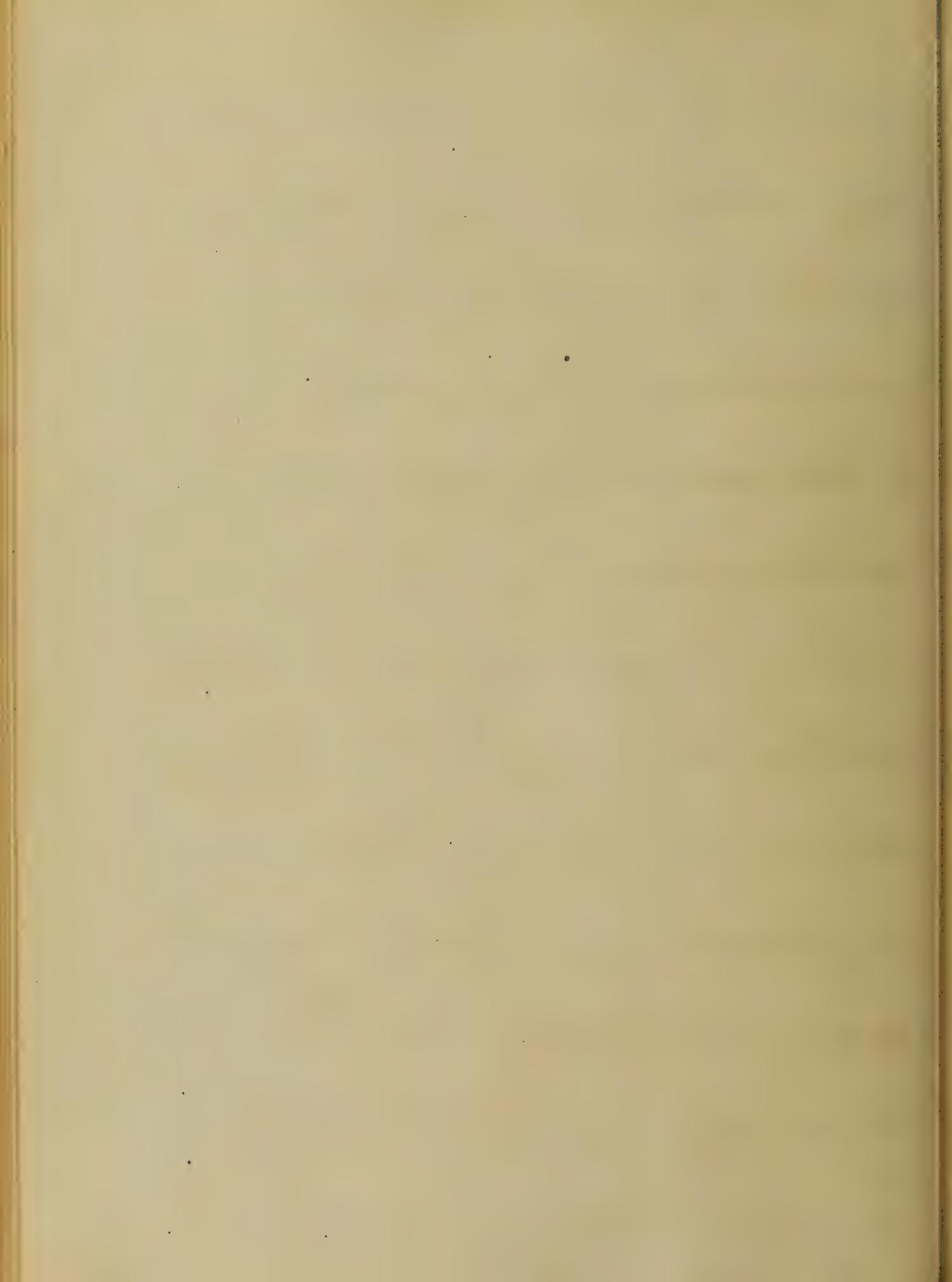
lating of carbic acid, however, so that his carriage,

one of the vertebrates which had been placed in contact

by desire, whilst in this, continued at the same

time the individual would undoubtedly have

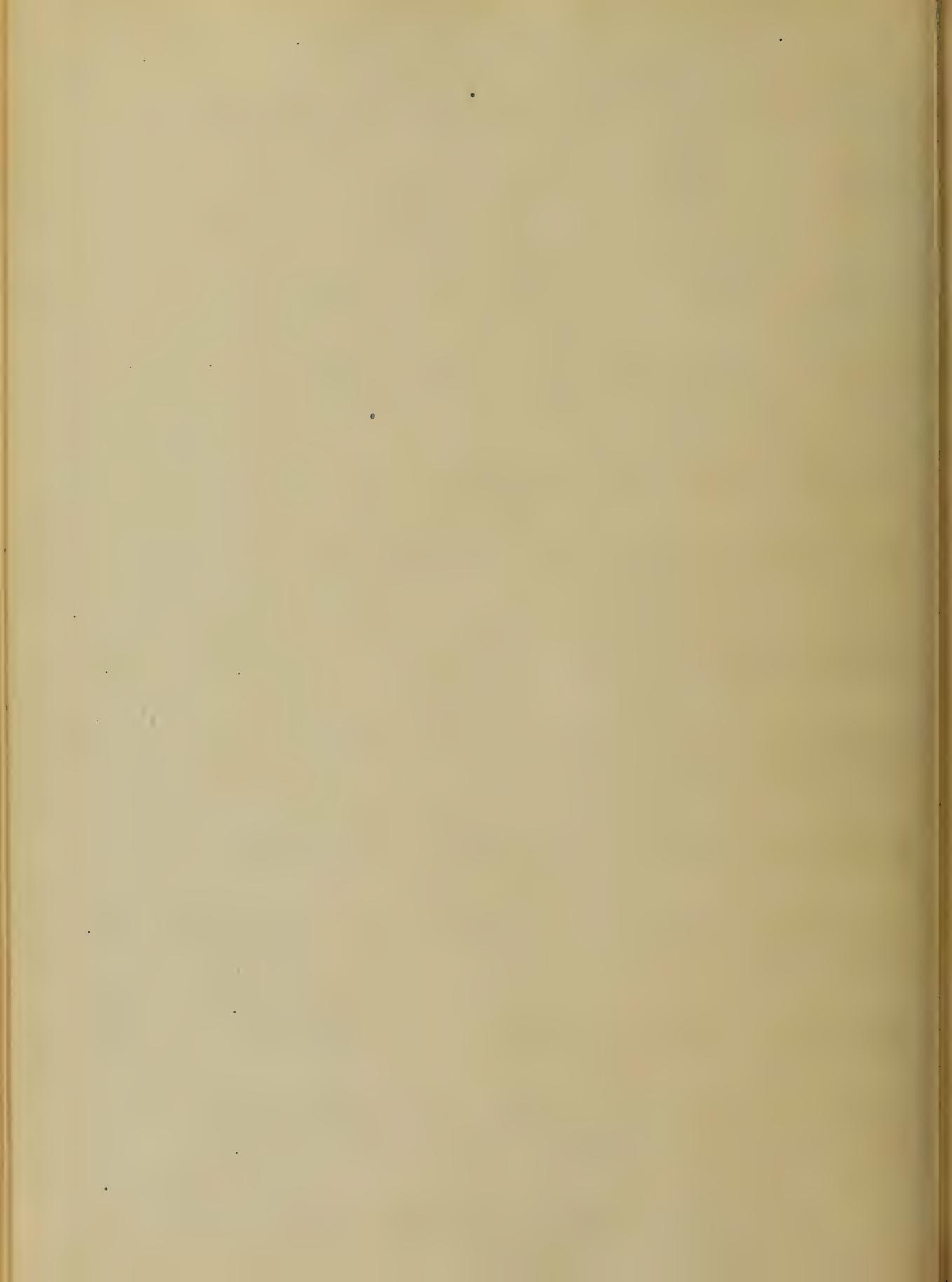
probably given up the power of breathing.



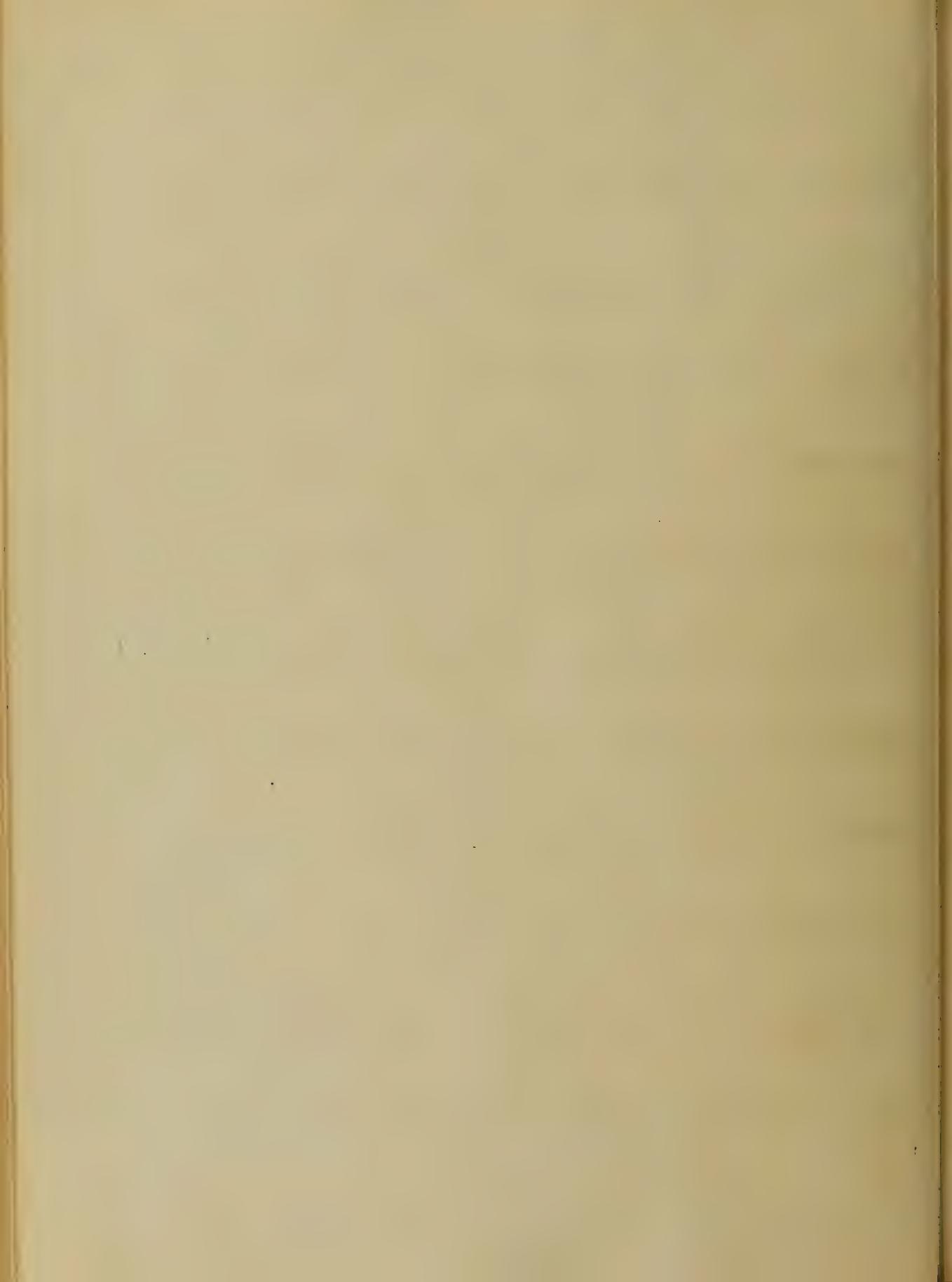
Supplying. The sense is not merely derived from the
external contact sense.

... anteriorly also seems to favor the opinion
of Stomach proving that the development of the
concretion corresponds very closely with the increase
of production of vomit. In conclusion of course the
animal is capable.

First comes the fine anterior tube of the esophagus &
then one thickened ampulla of the esophagus then
this. The olfactory nerve or ganglion. It is a collection
of very minute surrounded by the white substance
of Schleim, small & elongated in shape. It gives a
short sensory nerve filaments, not collected into bundles,

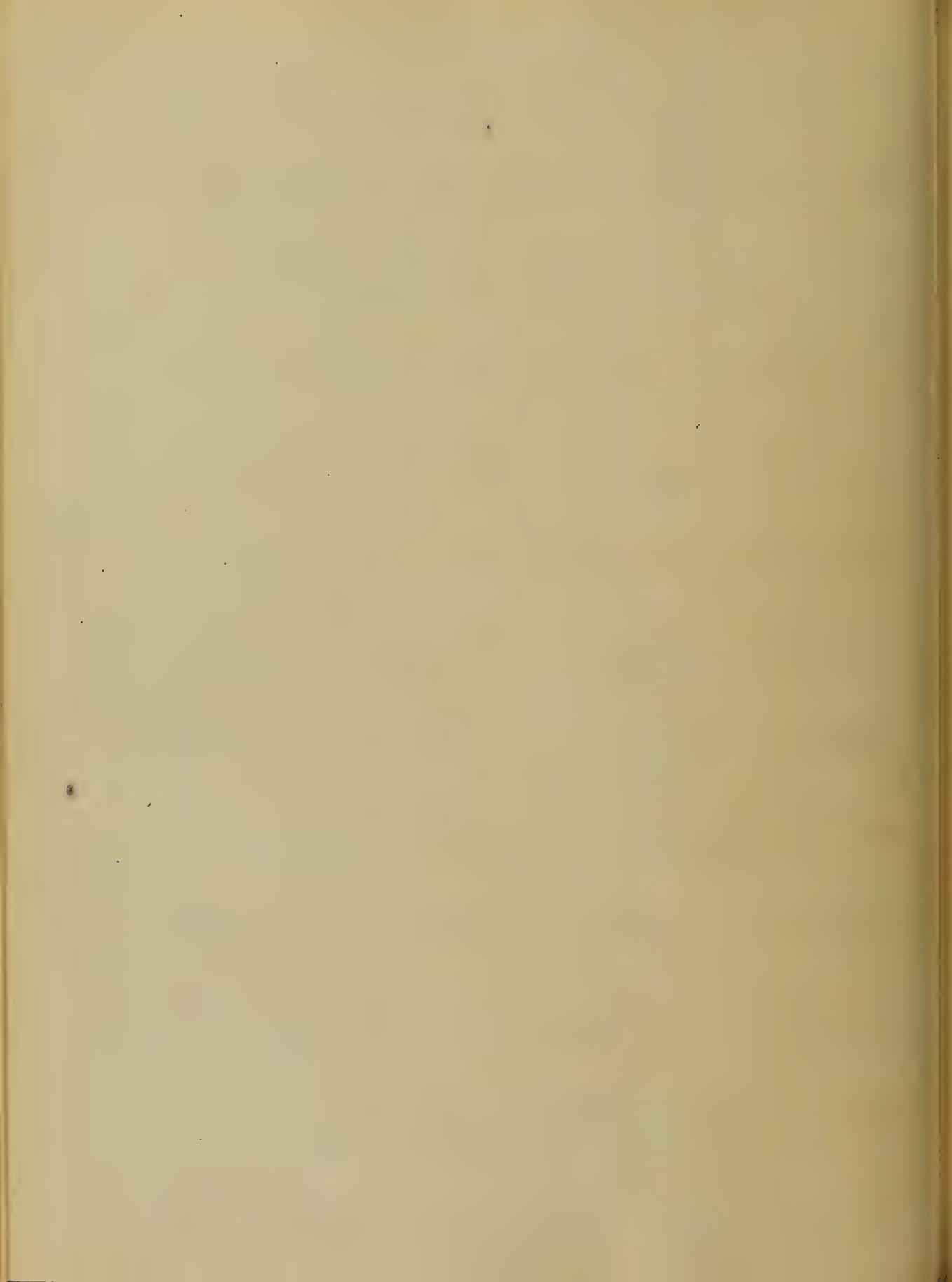


from its under surface there is a narrow median rootlet
to the mucous membrane of the nose. Its connection
with the epipharynx is by means of three comu-
nijunc or roots the long roots various bundles or
medullary band which passes across the figure of
Sylvius into the main mass of the middle lobe of the
cerebrum & its deep origin may be traced to the wings
of pia & to the superior nasal fibres, the optic
nerve. In addition to the vascular roots the
median root of the nose is connected with the
posterior & anterior ethmoidal vessels of which latter
the blind or short root also rises from the anterior
lobe of the nose.

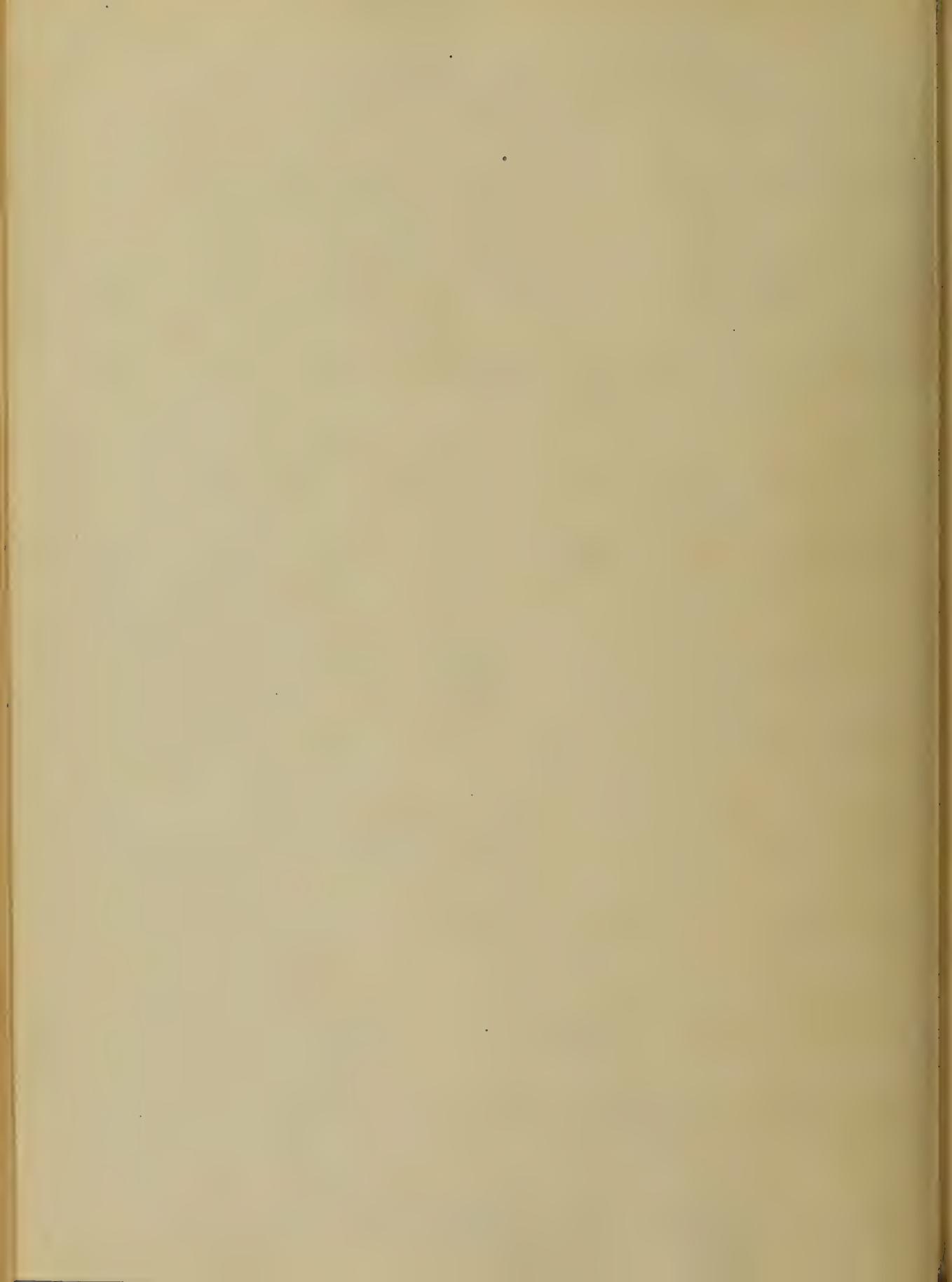


The office of the olfactory ganglion is undoubtedly
that of imparting the perception of the sense of
smell as indicated by its anatomical distribution
& by the evident correspondence which exists in diffe-
rent animals between the degree of its development
& that of the external olfactory organs. Though
these ganglia may be easily destroyed & soon recovered
yet owing to the impossibility of determining
the existence or non-existence of the sense of smell
direct experiments on the lower animals cannot
prove that this is its function.

The optic nerve is so long & long it is often subdivided
on either side of the brain ventricle, partly forming



the floor of the lateral ventricles. Externally they are
covered by the white substance but in the centre are
composed of a mixture of white fibers & nervous
matter. They are connected with the cerebrum &
cerebellum - by means of the commissures
on which they rest. They form a part of the sensory
nervous system, they have no connection with vision as their
name would suggest. Longet found that their
inflammation produces neither contraction nor
dilatation of the pupil, their removal in fact
did not interfere with vision nor the sensibility of
the light. This function according to Longet
is a peculiar cross action on the voluntary



movements, he arrived at this conclusion by

observing the effect produced on a rabbit after

the removal of one, now, he states that -

The animal fell on its right side, wanting

the power of balancing himself but he was

not paralyzed on that side. Removal of both

of the thalamus no longer produces this ef-

fect. The real cause must therefore be

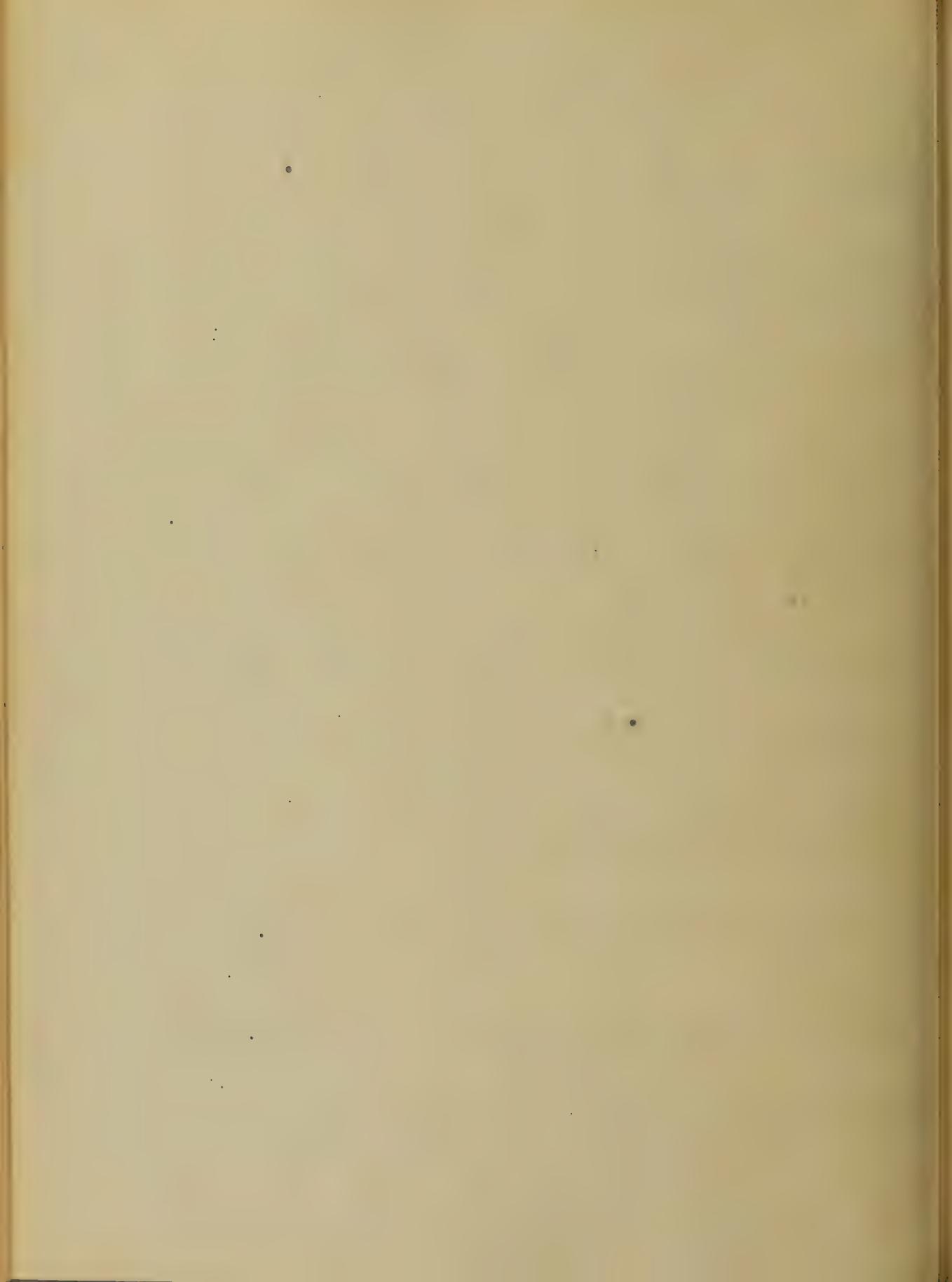
located upon some other undetermined site

in the brain. "The functional disturbance

of either eye or ear is probably not the cause,

as the disconnection and concrecation are

very thoroughly light on their real function.



The eyes are situated in two large pyramidal

masses situated in front & to the outer side of

the optic lobes, they cover up a portion of the

substance of which is white matter fibers.

They are connected with the optic nerve by

means of fibers which are the continuations

of the anterior columns of the cord & with the

are joined by means of the continuation of these

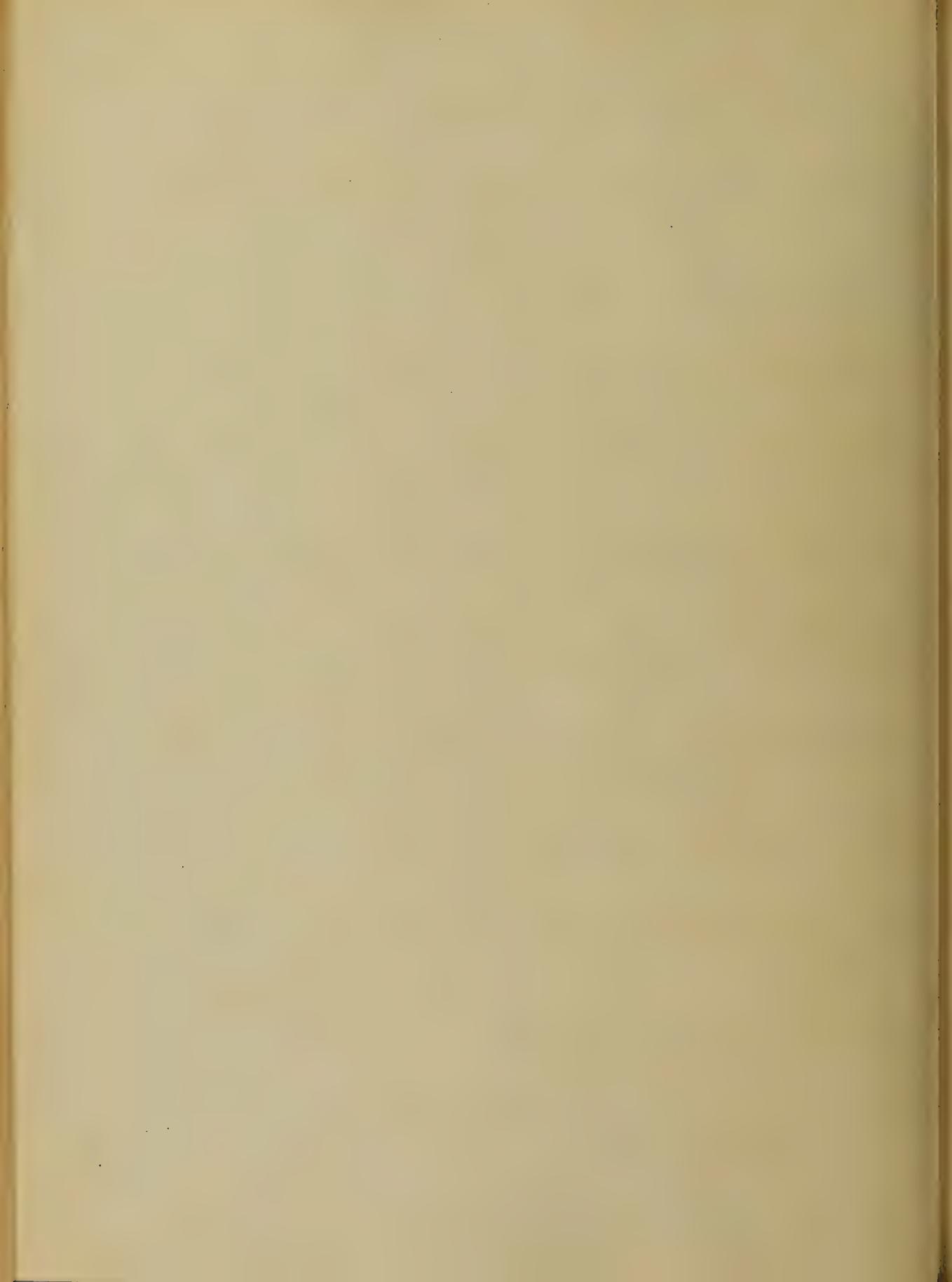
fibers into the substance of the hemispheres.

This connection is best understood from a

gross dissection of the brain of a dog.

It has nothing to do with volition & sensation, but

the precise nature of this connection is still unknown.



and the middle of each of them - and it is connected

one is placed in pairs two in front & two behind

in number & are situated in regions, which are situated

not behind the posterior commissure & the

more ventricle under side, few veins made of

the corpus callosum. The anterior commissure or

nerves are the larger & consisting of white matter or inter-

nal, & are situated in the posterior commissure

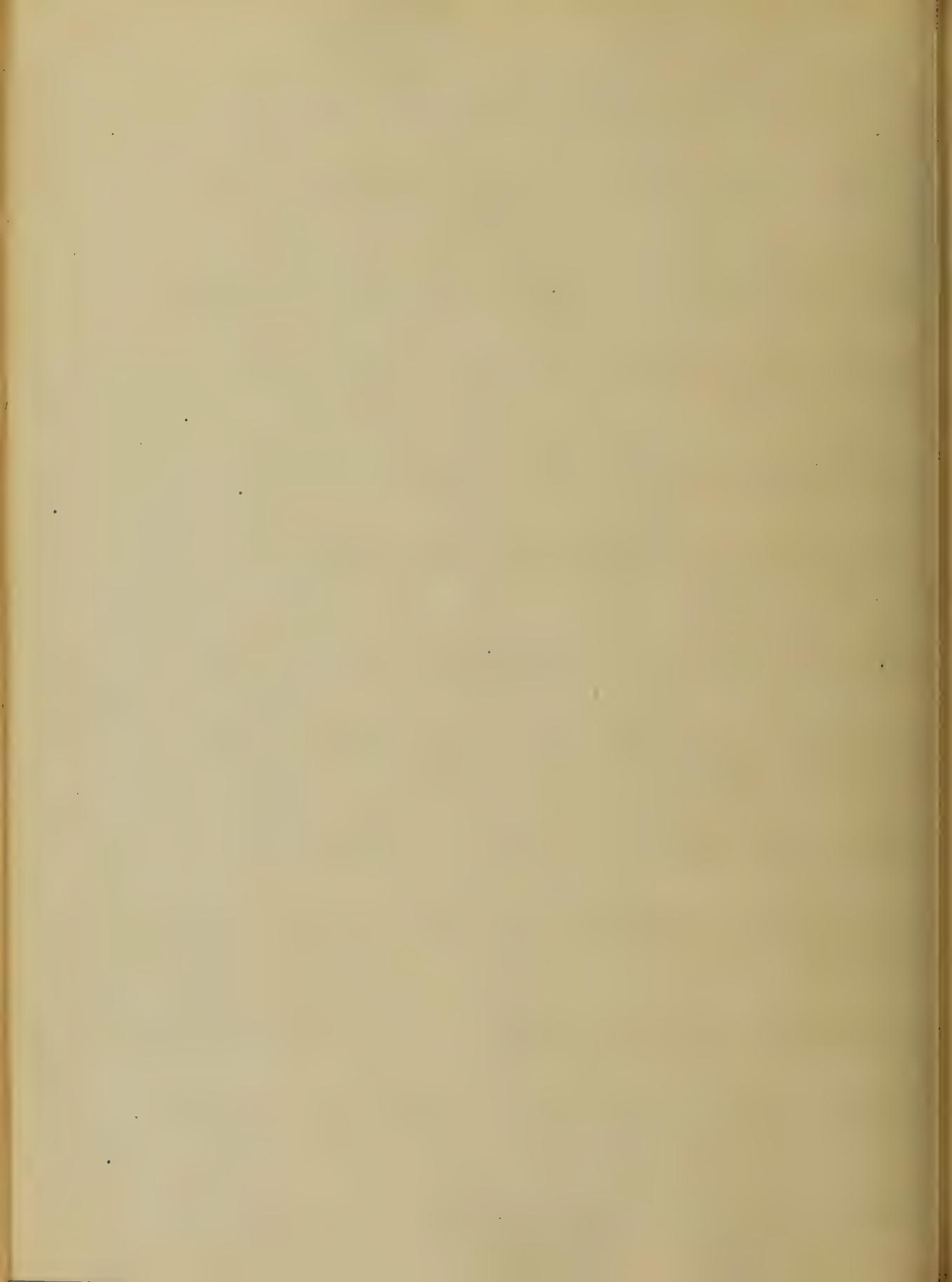
are of a lighter color but similar in structure

& more slender, than the corpus callosum, few

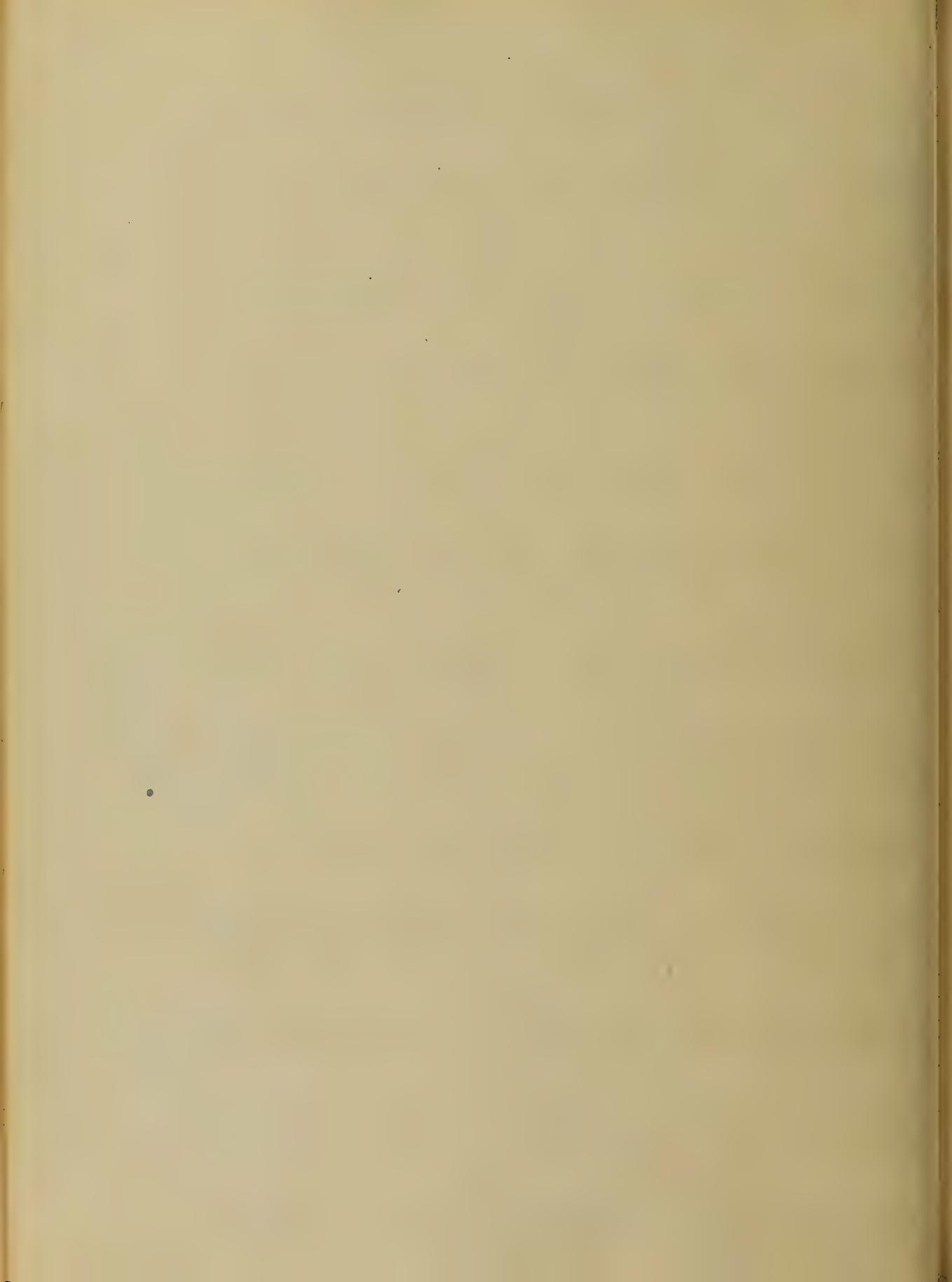
or no nerve fibers in the middle of the

commissoem, they are thick, the commissures

between the optic & the calamus, the nerves are called



The brain has a anterior tract which goes to the retina
behind the lens & the optic nerve called the optic
nerve. By means of these tracts they are
connected with the cerebrum & with the cerebellum
by means of the pons, so called because of the
olive shape of it, because of a few white fibers.
Their principal function is to preside over
and regulate the sense of sight or they give
origin to those who witness its development
They correspond to that of the external visual organs
in various animals, being large in fish & birds &
resembling their eye balls in size to the size
of their heads. and so on with every animal.



qualifying words, man. This function may be determined

by direct experiment for section of the optic nerve

or the other side of the tubercula of the epiphysis

produces complete blindness, but sight remains

if the section be made between them & the cerebrum.

Even after the complete removal of the cerebrum

hence the perception of impressions of light

existing in the eye, any idea. But in the section of the

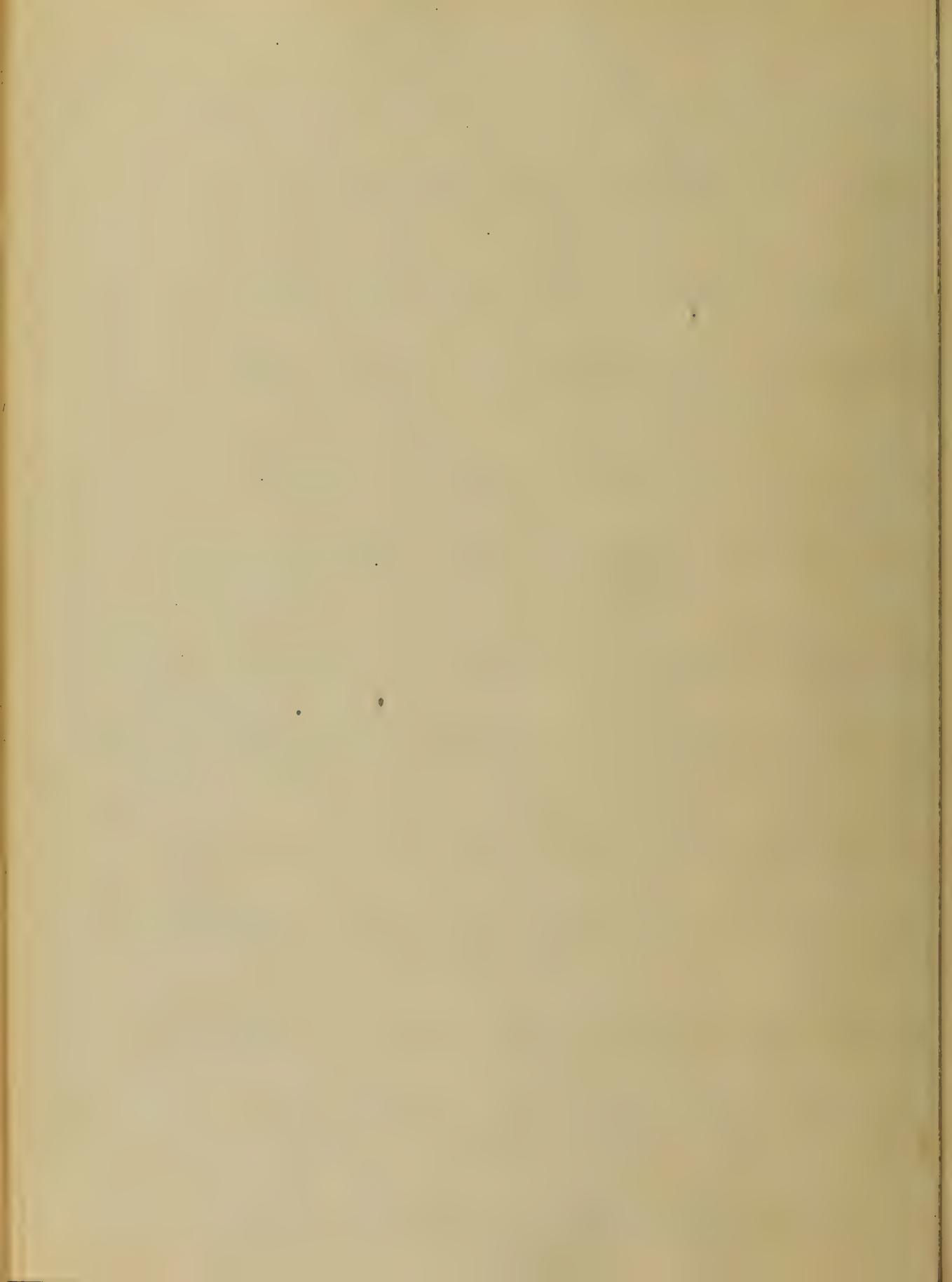
nerves in the optic tract & nerve of reception,

from each tubercle there is no direct connection with

sets of fibers which at the optic chiasm are joined

in several directions, and yet do not cross overwards

is the reason why the same side, a second set of fibers, has



over it. The elias goes to the vicinity of the oblique
side & the third set turns in the eliason back
wards & goes to the other side & lastly a fourth

set not originating from the subcilia at all

arises from one retina, passing through

the eliason & is distributed to the other retina.

The cilio-stellate is connected with both retinas

& with each other, & the retinas are so connected

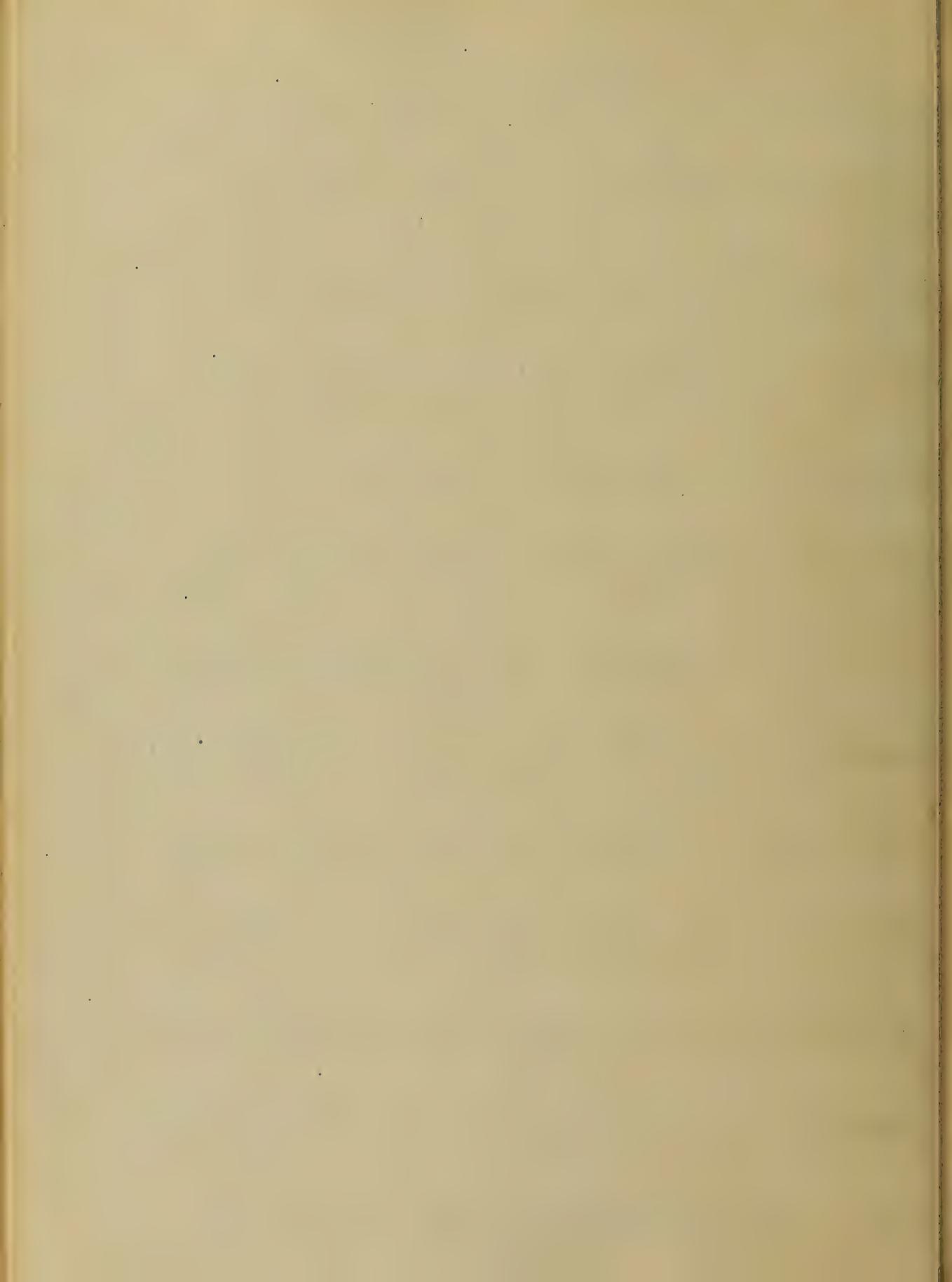
Fasciae are connected with each other for the

purpose of keeping everything situated

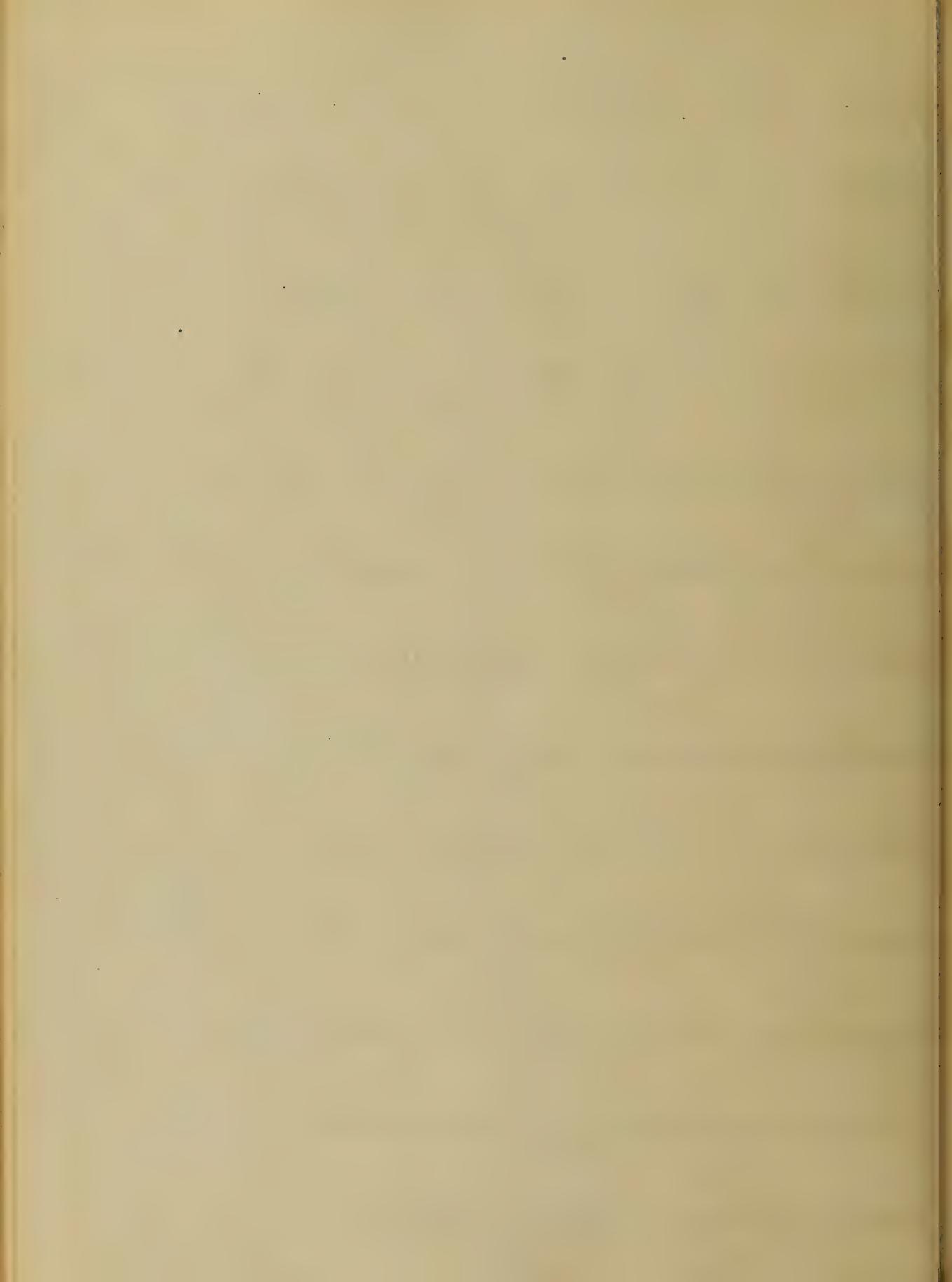
so advised so that an image reflected on them

will fall on corresponding parts of the eye as

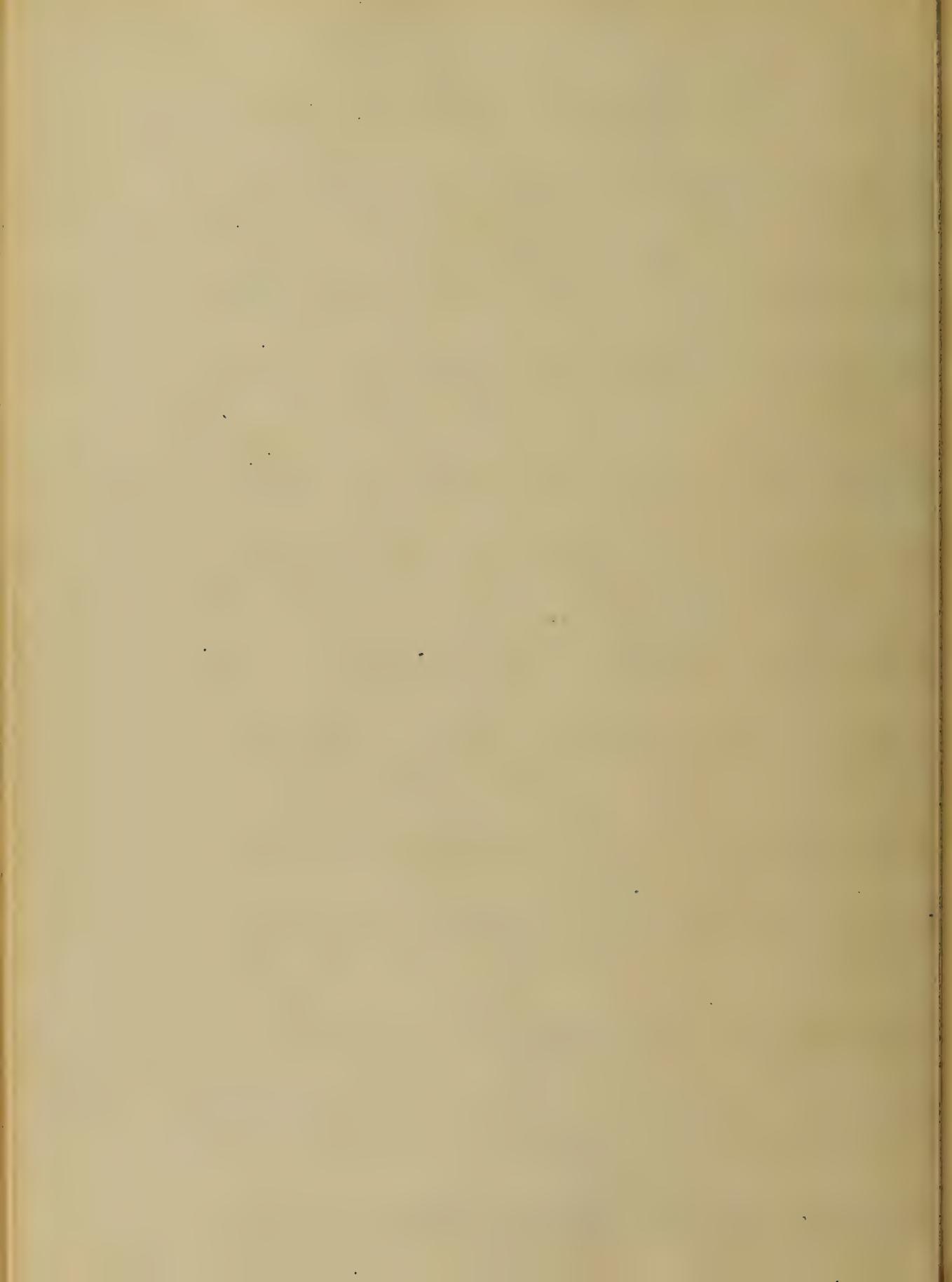
is done in the distribution of the fibers who



of figures originating in the Retinæ has been
conjectured by some physiologists to be for the
purpose of securing a single up of vision, by
their distribution to corresponding parts of the
retina. The image reflected through double lenses
on each retina would be perceived single because
each Retinae would only take cognizance of
one half of the images, so by the connection
between the two eyes causes harmonious vision.
Some explain single up of vision by
saying, vision that the Retinae act alternately
but so rapidly successive, such as the Retinae
passes if the action were continuous.

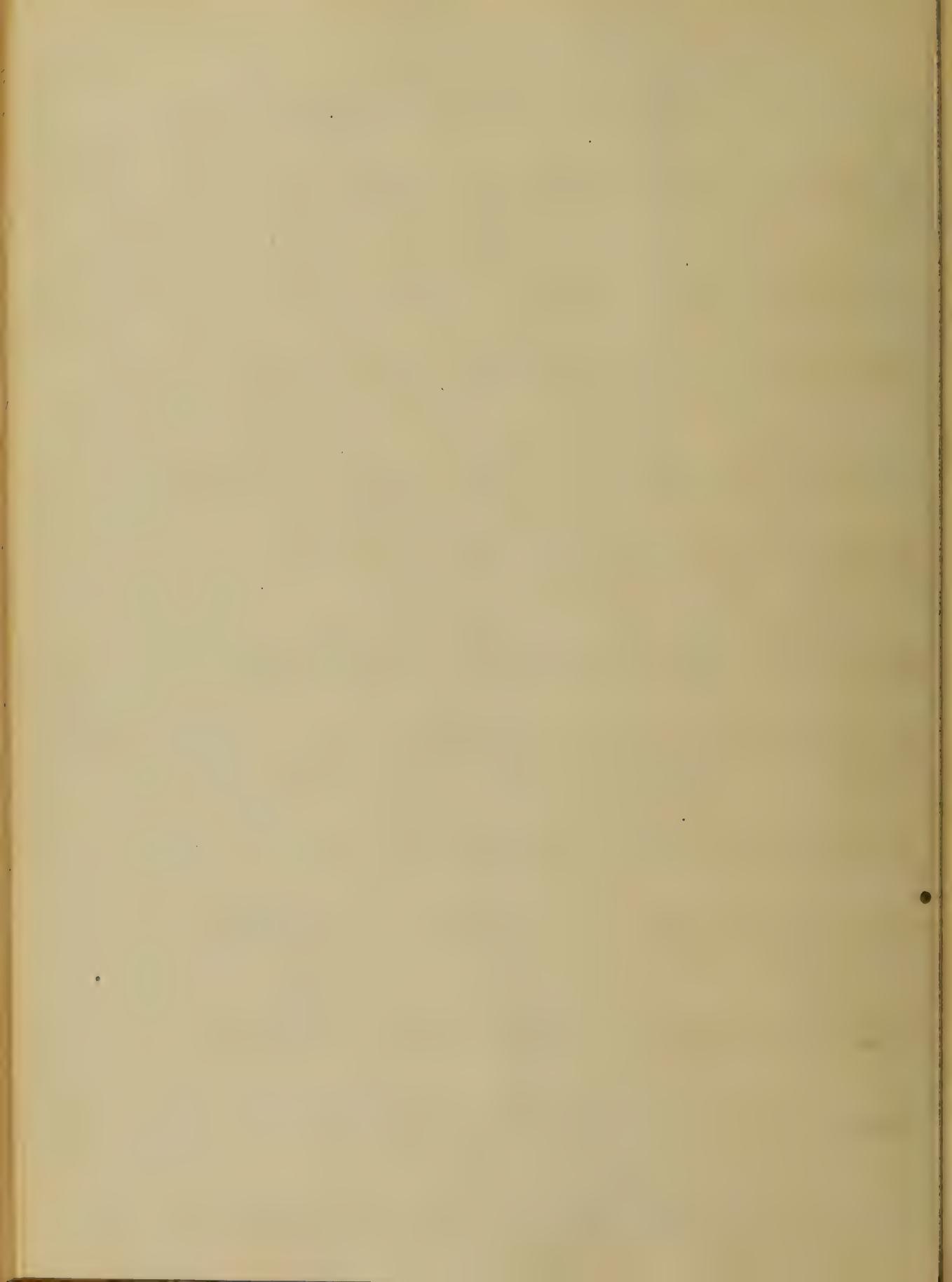


The vibrissae, great sensory fibres serve as
the receptors for the reception of light also
act as centres through there occurs a reflex action
for it regulates the quantity of light admitted.
Having the right side in superior position
the cilia's, now receive diminished colour, the
light nerve to the vibrissae great vibration
where it is converted into a motor impulse & prepared
gated along motor relays to the optic nerve
causing contraction of its circular fibres thus
excluding the excess of light. This function is
proved by actual experiment for if the optic nerve
be irritated while the eye is connected with the

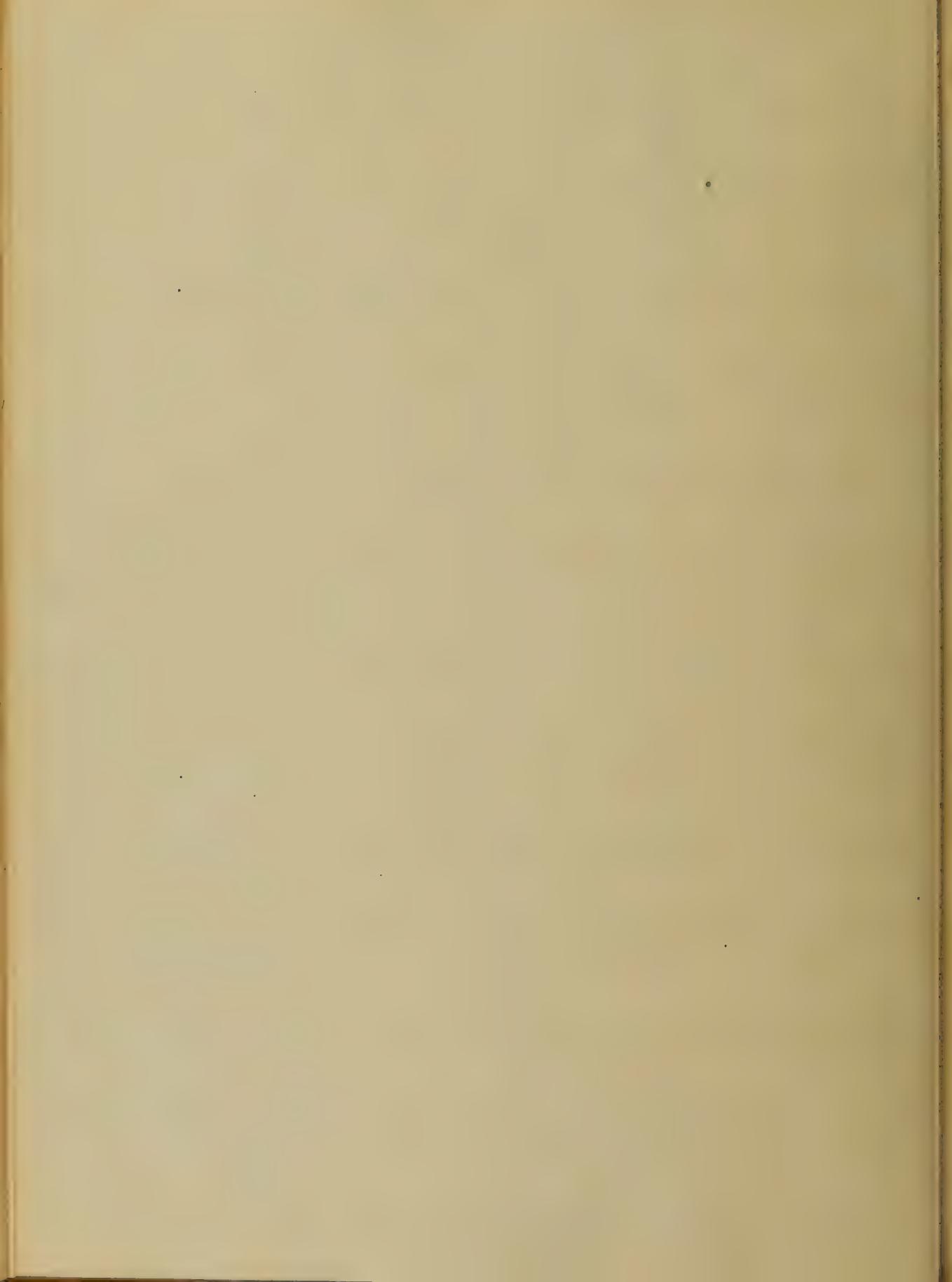


Then the pupil will contract, but if the eye
move be given, the muscle enervated the pupil
will not contract.

The subcervical is a small collection of gray
matter lying beneath the pia mater fibres of the trapezius
variolosus divide in the course of the ascending fibres
of the anterior cervical pyramid from which
it is formed. The function of the subcervical
according to Luschütz is the transmission of sensations
& voluntary motion for when he removed all the
nerve fibers except of the subcervical & the optic nerve
these two nerves still excited the animal with
the same intensity, i.e. voluntary motion



& as soon as the tuber annulare was broken up
that all manifestation of sensations & volition
immediately ceased, consciousness appearing
then to be entirely destroyed; he could excite no
motion in the animal which continued to live but
now due to reflex action of the spinal cord.
Long before we concluded that in this young lion
impressions from without were converted into
conscious sensations, & that voluntary impulses
which stimulated muscles to contraction originated
in it. Simple sensations & ideas of volition are very
different & must be distinguished from the ideas
to which they give origin in the mind. The latter



being, I believe, a continuation of the vertebral

... trace in the cerebellum.

The medulla oblongata is the superior extension

of the spinal cord, it is about an inch & a quarter

long & lies in the groove of the basilar process of

the occipital bone beneath the cranial cavity.

It presents no annulated cone & consists of two

anteriory pyramids, two olfactory bodies, two medullary

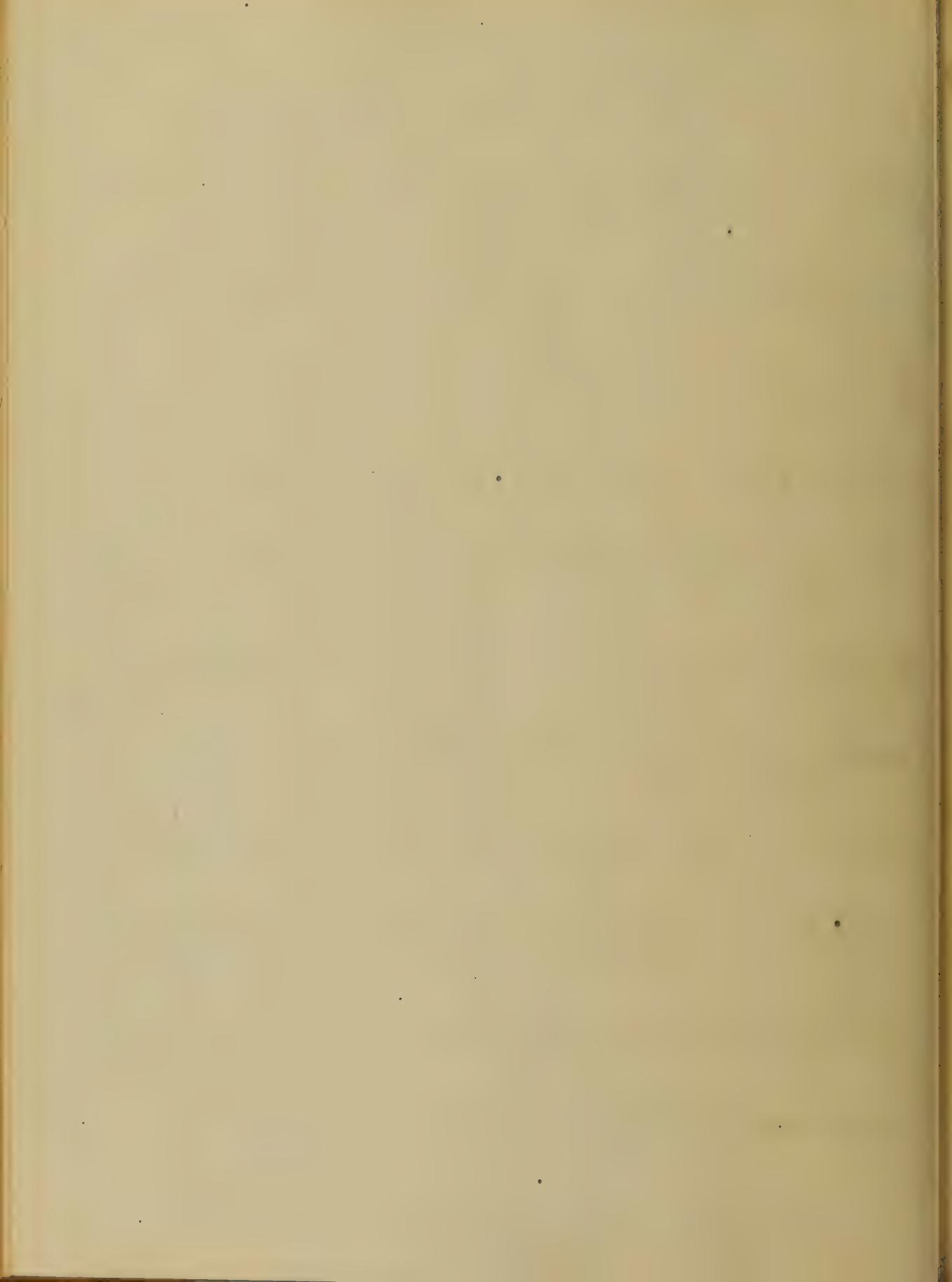
bodies & two posterior pyramids. At its lower the

anterior or motor columns decussate. That is the

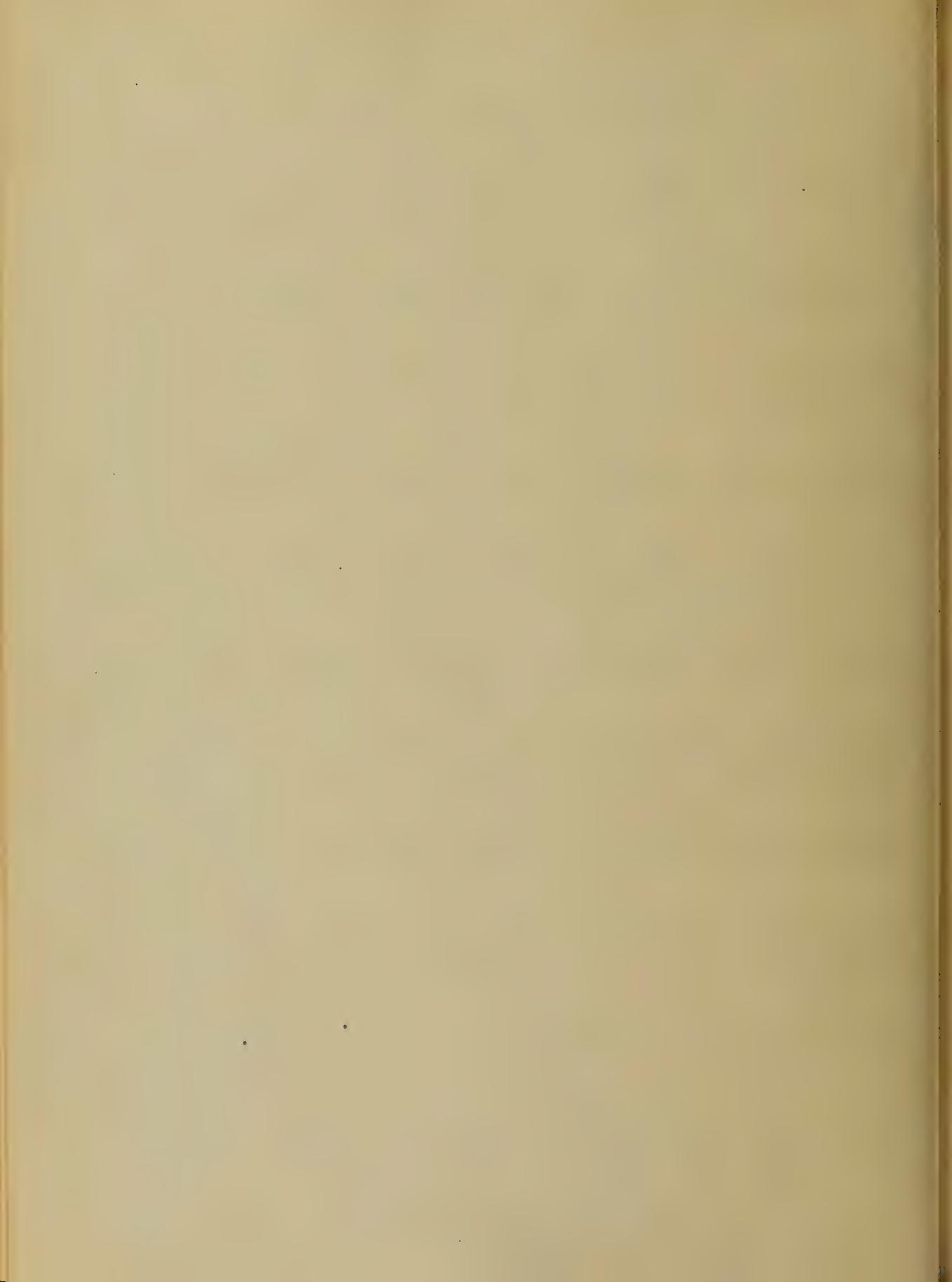
fibres of one column cross over to the other so that

if these columns are divided at half a foot decussation

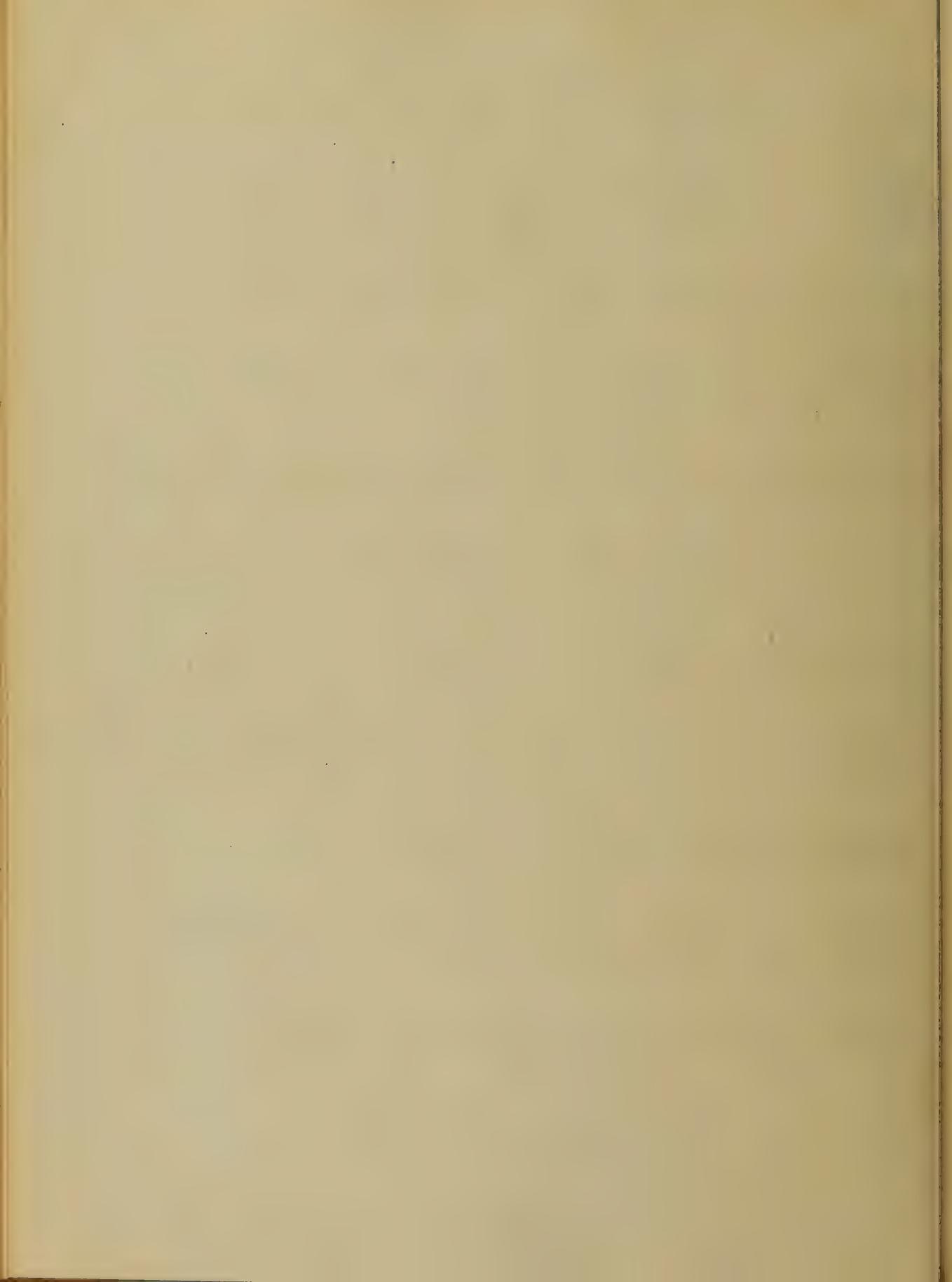
motor power is lost on the opposite side of the body.



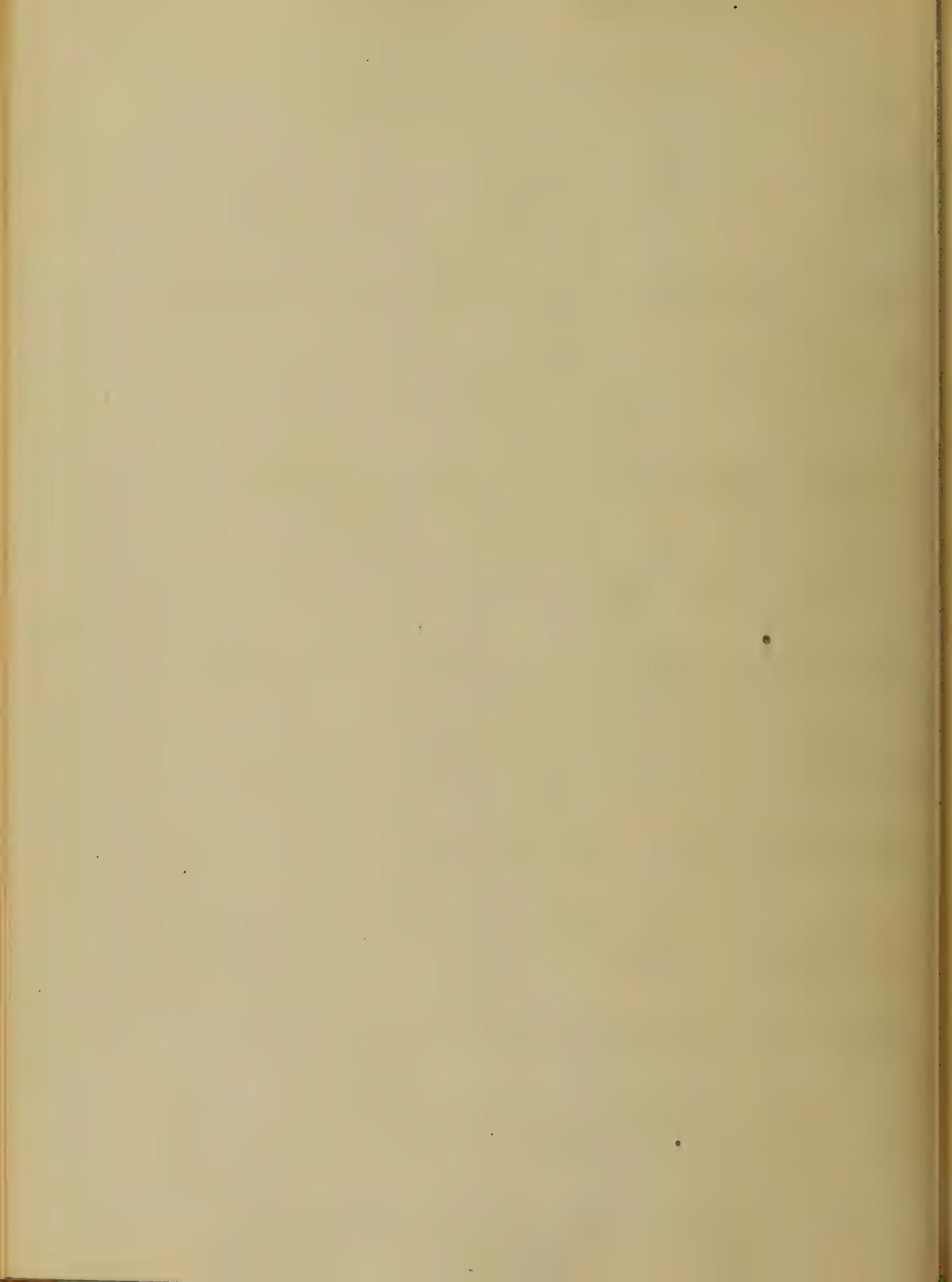
ensue; whilst if the division be made at the
level of degeneration it is without any appreciable
motor paralysis of both sides. The anterior pyramidal
& the olfactory bodies are respectively continuations
of the anterior lateral tracts. The cord, however
according to Brown-Séquard motor supply the
fibres of the anterior pyramids pass under the
hypothalamic fibres of the substantia nigra to the commissum
striae, through the substance of which they pass
to innervate the grey matter of the cerebrum.
The origin & function of these are not very well
understood, their main claim is probably physiological
as transmission of the reflexes upwards, whence the



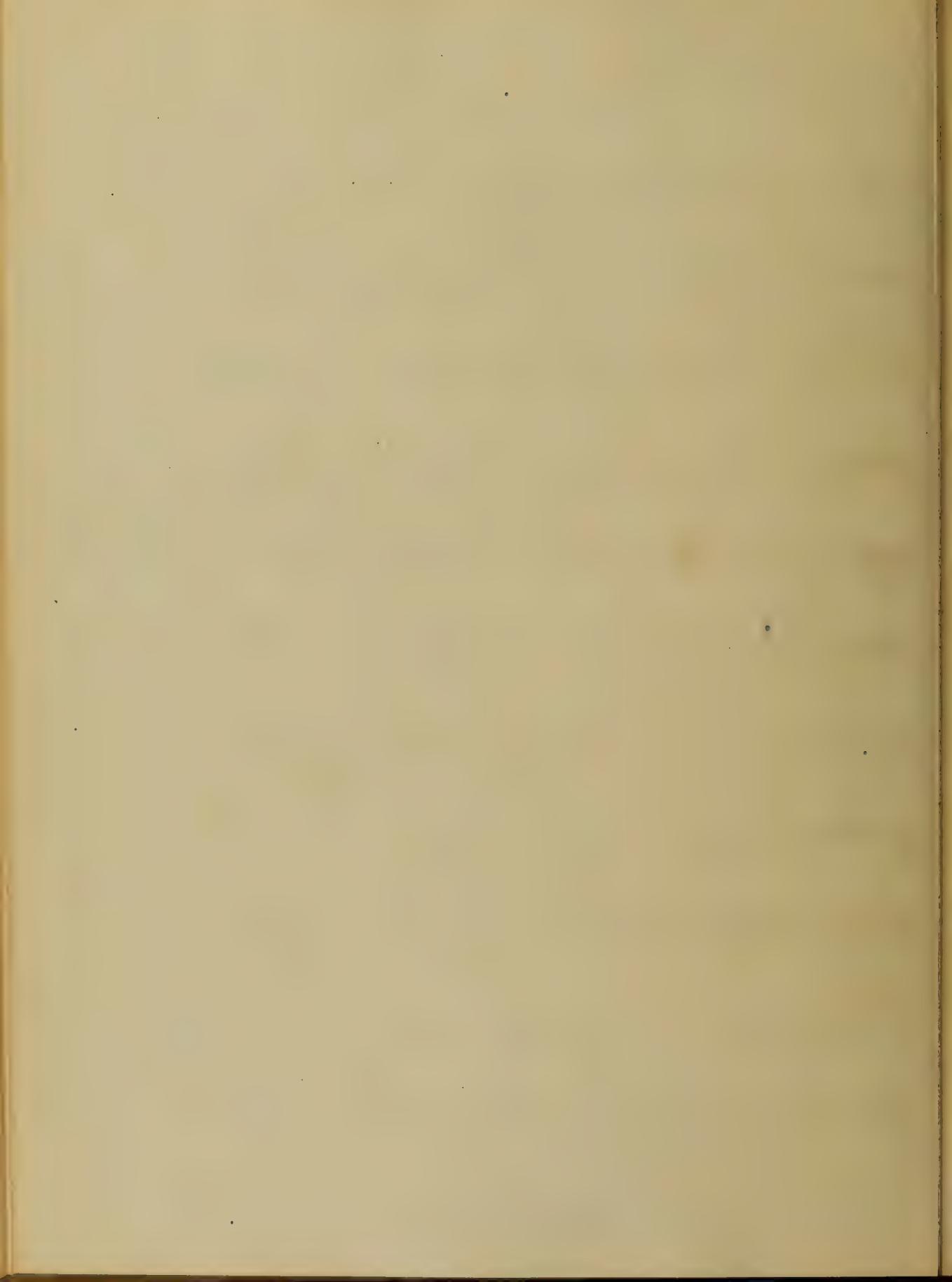
being, which distributed to the corpus cerebellum
of the cerebellum, in 1777, inspiring you with
beneath the tubercula quadrigeminae either
& so that you be now of this Molarini to be ultimately
by this distributed to the cerebellum was matter of the
curious some of the titles of the anterior of your
and also those of the posterior bodies
which are distributed to the cerebellum
the right, and those of the anterior & the posterior bodies
divege from their yellowish grey mass in the cere-
bellum cerebellum ... so called from its shape &
which expresses some of the central gray matter
in it has the most of central parts, the common



frame, for here lies the respiratory ganglion
from which originates the pneumogastric
nerve, that which conveys the sense with respect
to the desire to respire - a sensation which
through irritation, in any part of the body
where there is a deficiency of aerated blood, is
afforded to this nerve which by reflex action
stimulates the respiratory muscles to contract
thus dilate the chest & admit air. This
operation is purely a reflex action, for it
is performed externally without conscious reflexion
on part of its origin, its course & its effect. The
will can control this by the will is however

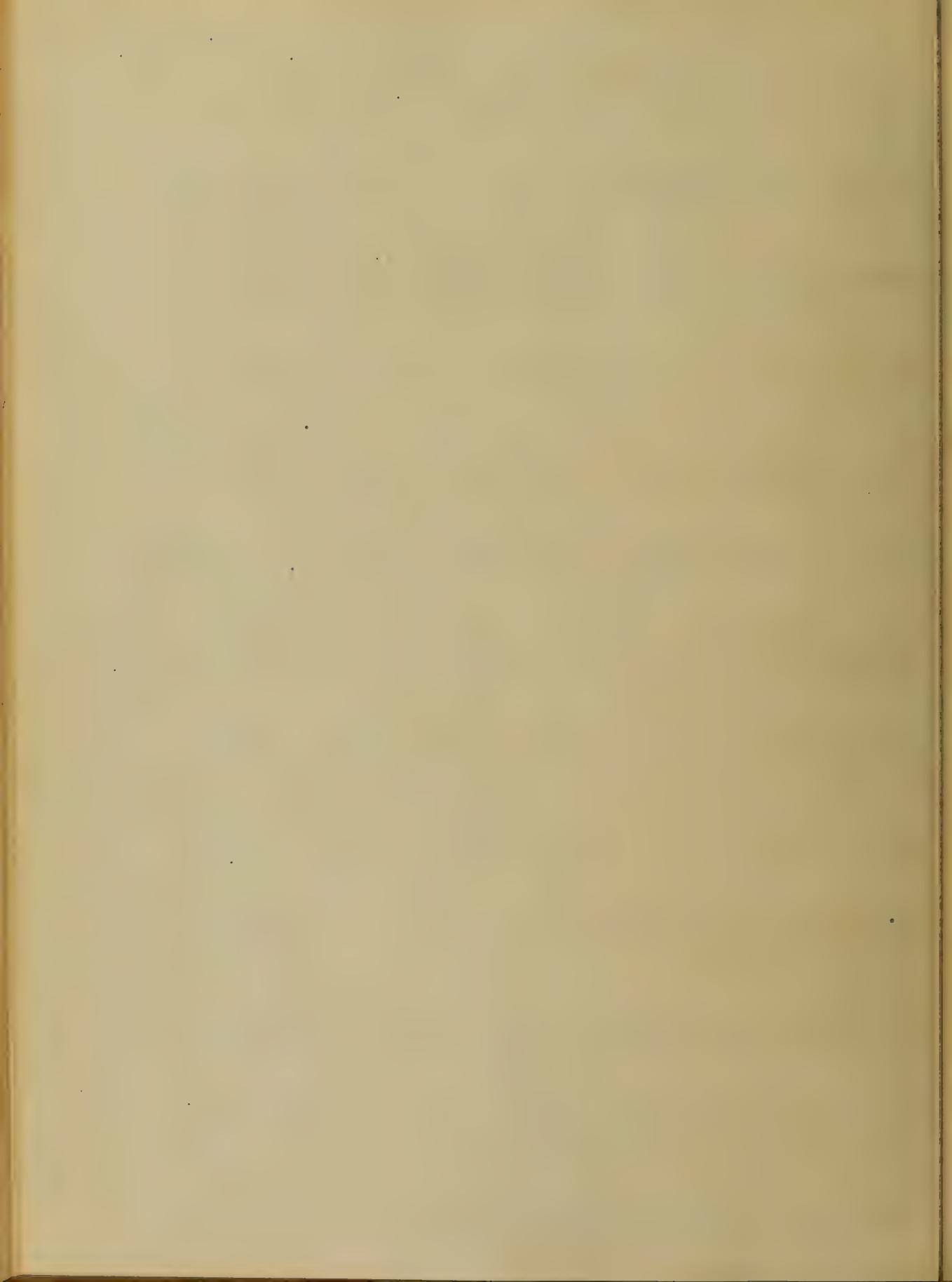


After a, however, to a certain extent but no
mental effort however powerfuleable to
stop it altogether, in the course of a very short
time the demands of the system become so
imperious that the pneumogastric not
only suspends its function involuntarily, but
also of all mental exertion to prevent it.
just above the respiratory ganglion lies that
of the auditory nerve which seems to convey to the
consciousness impressions of sound conveyed to
it by means of vibratory move-
ments in the air, or
through the bony structures in the floor of the fourth
ventricle lie the gustatory ganglion & from it



originates the nerve filaments distributed to
the tongue strong as the two nerves of gastracion.
at the side of the calamus scriptorius lies a small
mass of vesicular matter called by Glouers
The vital of vol^d not larger than a small pea,
named thus because he supposed it to be the
seat of life as he thought that its removal
would cause instant death. This is a mistake
for it may be removed without doing a mort.

i. The transverse nerve of gastracion
divided; when death occurs it is due to a want of nutrition
to the brain and spinal marrow. The blood sent to the
gastro-intestinal tract passes into the brain and spinal



causes, in my view, the best form of irritation

This ganglion is really the afferent ganglion.

Stenbeck found that puncture of the muscle

in oblongata just below the origin of the

innervation between it and the auditory gan-

glion would give rise to an articular diabetes

mellitus, & in result this is what Stenbeck observed

in, which is a disease in which there is

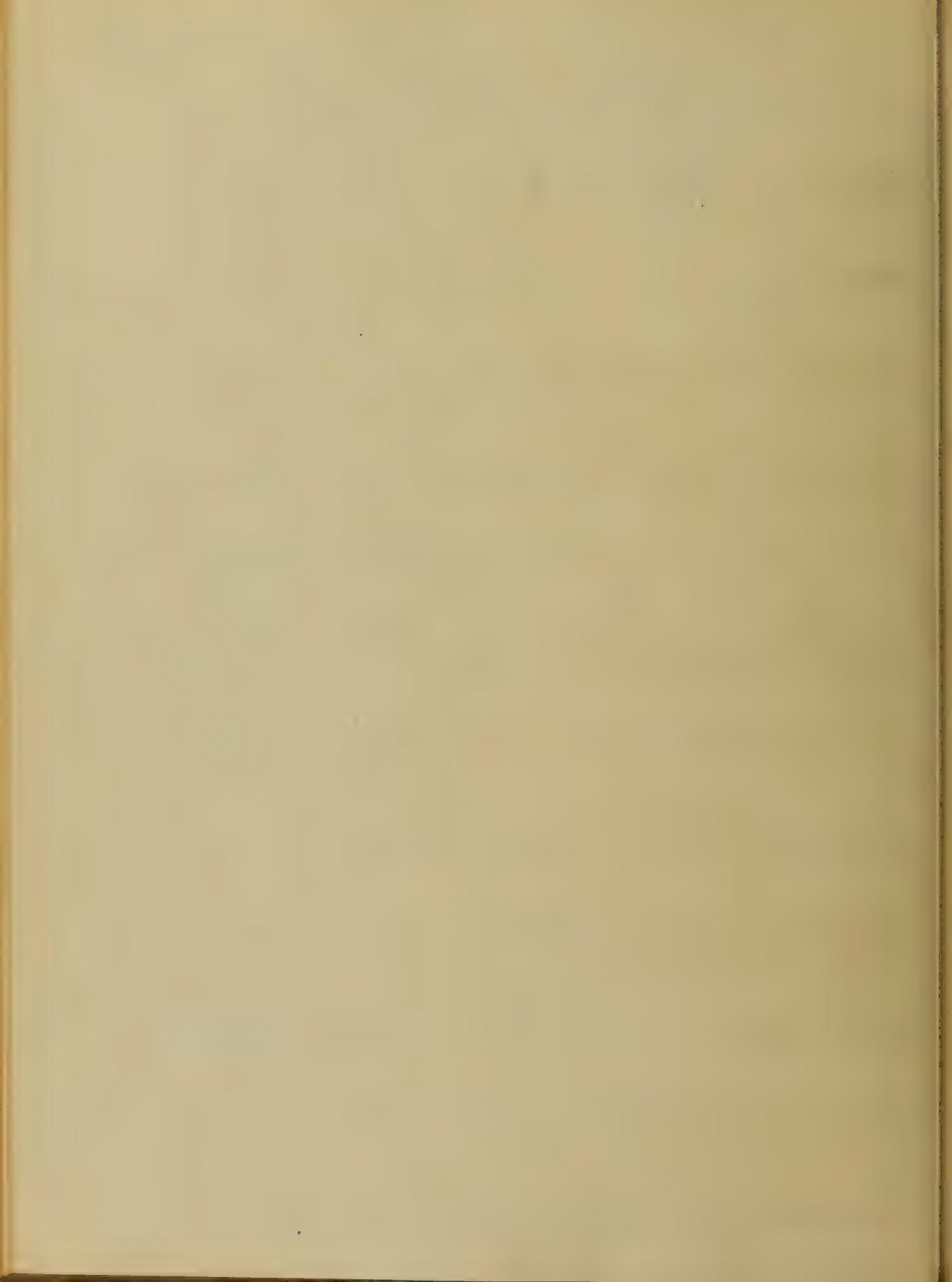
succession of two or more articular conditions

Therefore it seems to me, though I have no

authority for making this statement, that as

some of the venereal diseases, i.e. syphilis

are distributed to the liver, the irritation



of the intermediate and fastidious acids

as a stimulus to the glycogenic function

or the liver producing inj. processes & thus

causing the disease.

As we have seen the animal cell or embryo

is characterized by a symmetrical double

reflexion composed of two identical symmetries

Indeed, various attempts have been made

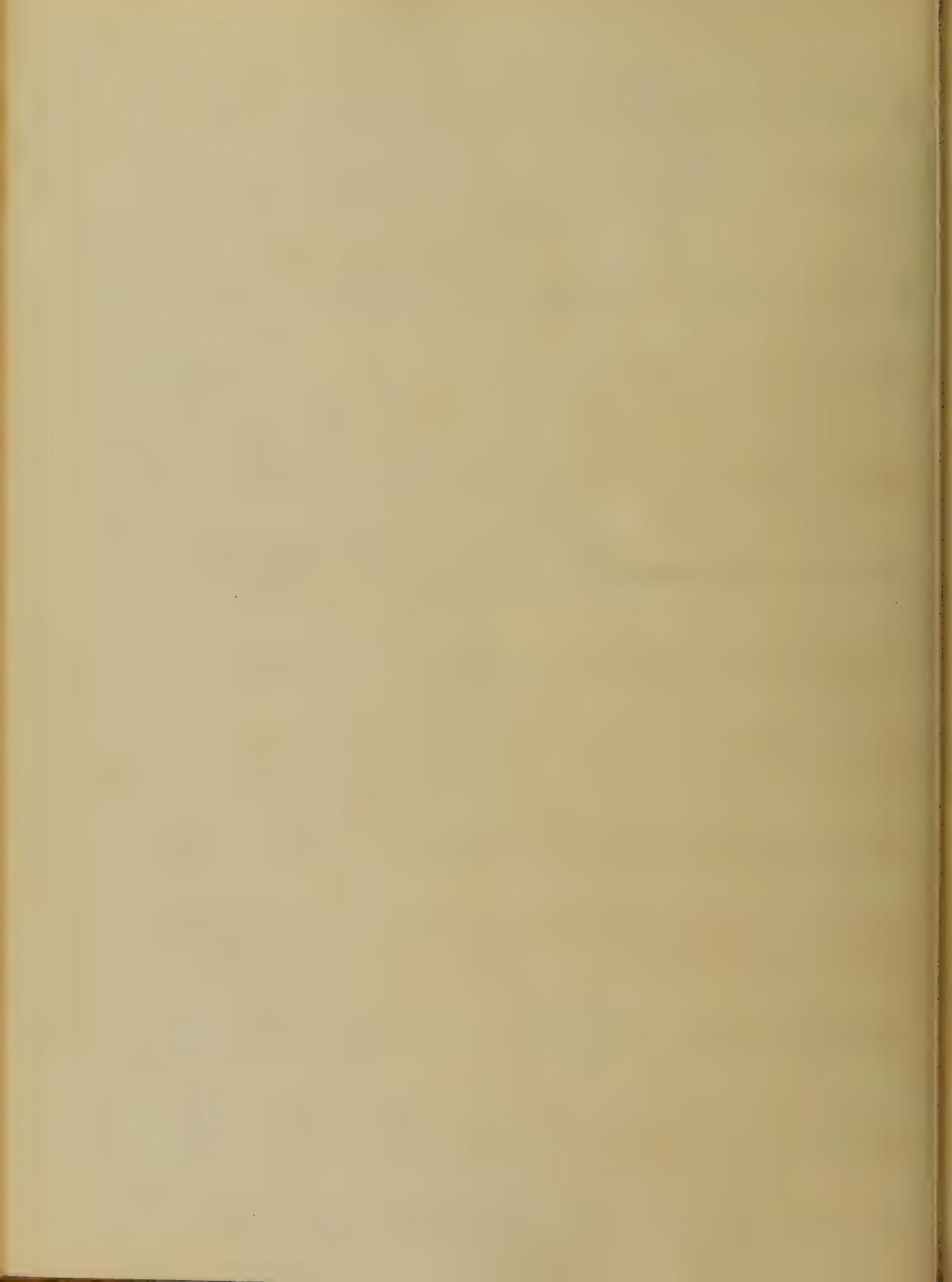
to ascertain what is the object of this apparent reflec-

tion; it seems to be that each half is capable

of meeting the requirements of life & motion

& that each half is a distinct organ, able

per se. That is to say the eye or ear though capable



of separate actions they do & can act together

either as some suppose increasing their effect

or their combined actions in one side, or

the deficiency of the other or by such a rapid

alterable action that the impression goes

as continuos; the same cause seems

The most probable in the circumstances have

been known to act alternately in cases of

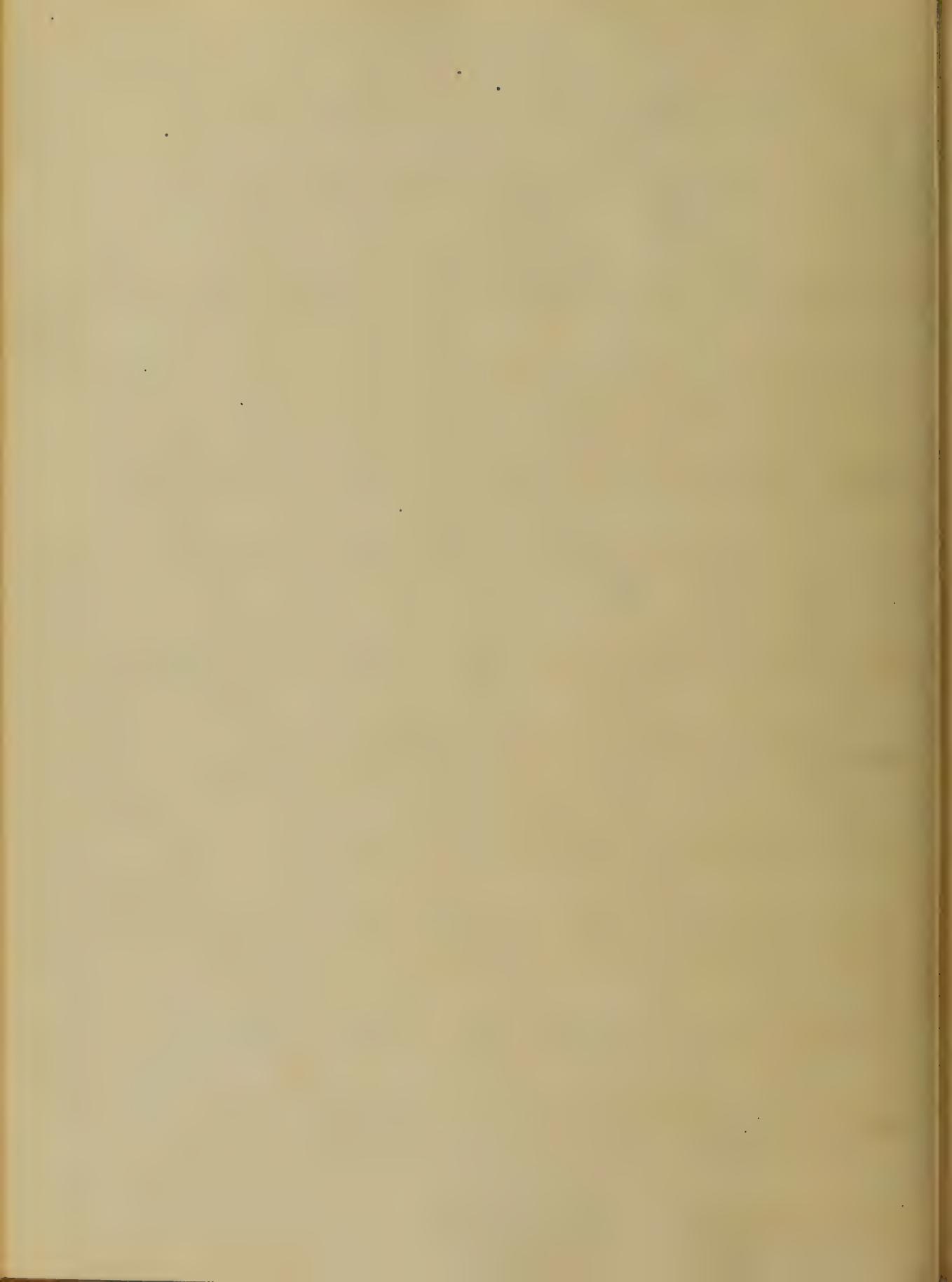
insanity when the individual would live

two distinct lives, during one period his

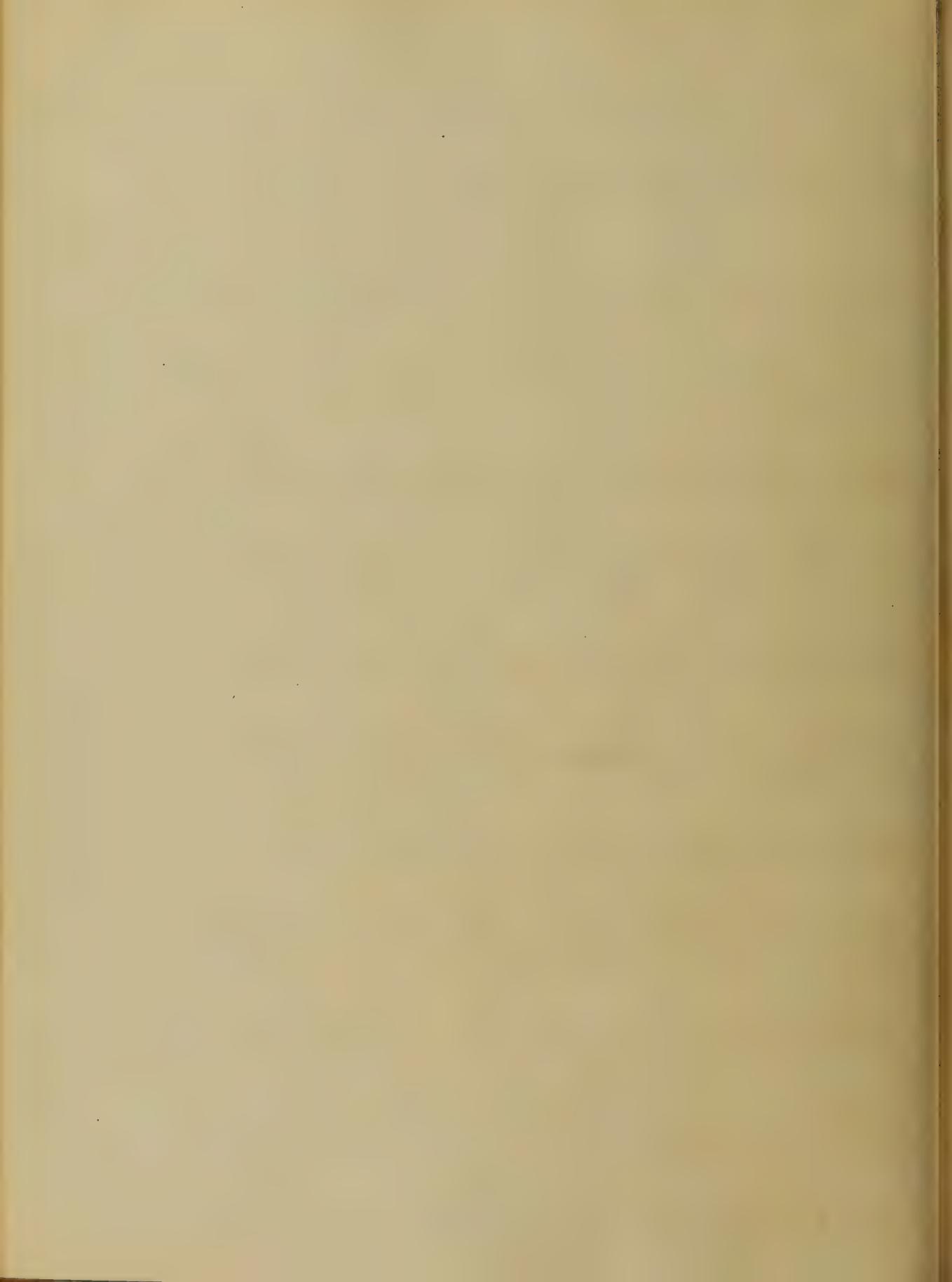
existence would be according to a certain

set of ideas & things in association, secondly,

it seemed to be his guides he was not



leaving his previous ideas & vice versa
removed. This pathological condition has
been frequently observed but I do not know
of a single instance in which an insane
person seemed to live three distinct lives.
In one case the person before becoming
insane spoke two languages but when
this appearance of double action occurred
he spoke one in each period & could not
or did never comprehend the language
which was not proceeding at that instant.
It would be difficult to define such a con-
dition as I have it at the present sus-
pension



of the activity of the mind &c. The sensorium

But such a definition is to say the least a

very incorrect one for the mind is a being
very active during sleep as in dreams. Besides

it can not be regarded as a unity but as

a series of fluctuating conditions during

the course which may be succeeded or ushered in another

in a state of activity. The walking & sleeping

states merge insensibly one into the other

The highest power of the sensorium is the con-

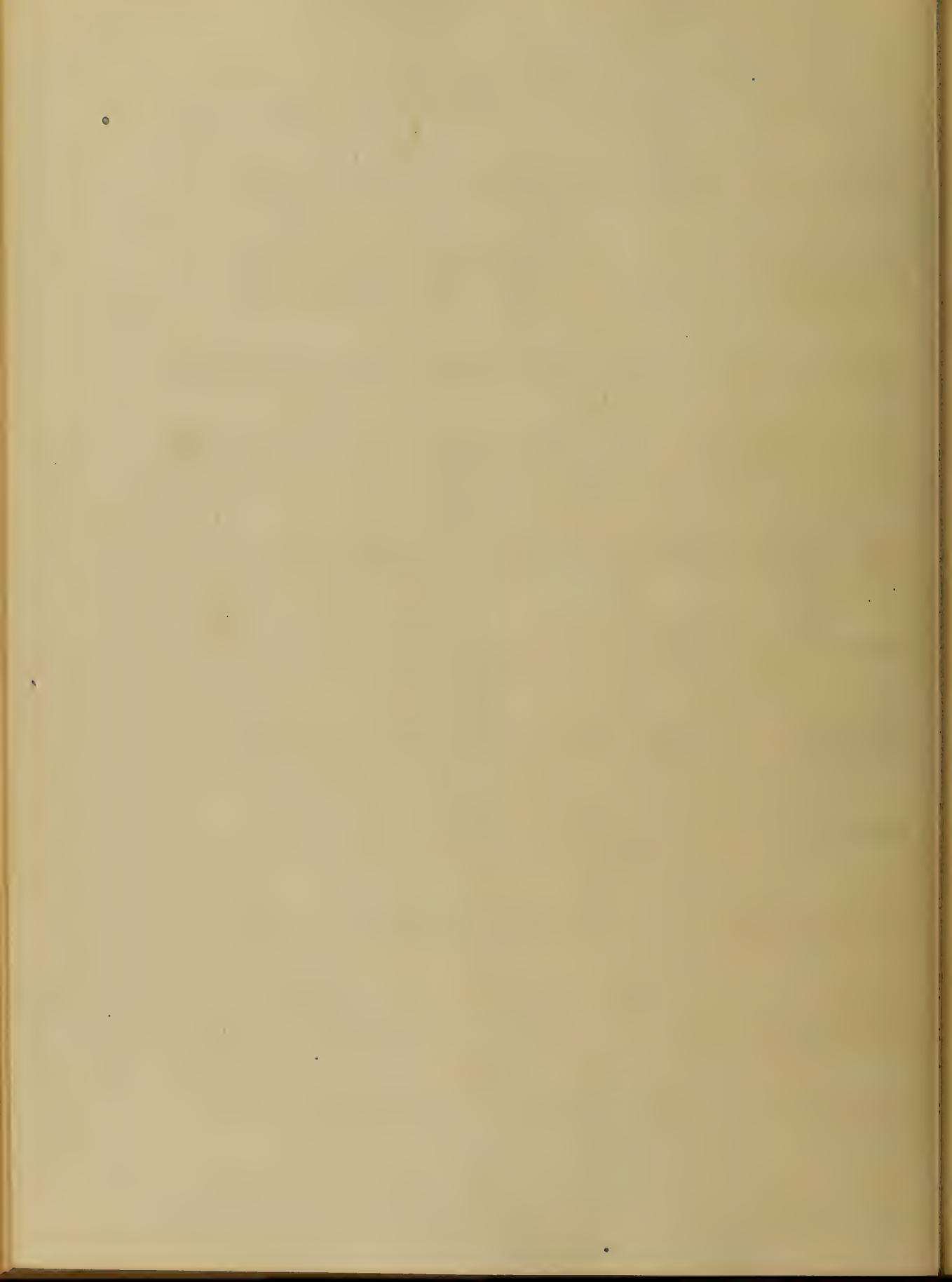
trol of the will over the operations of the mind.

or the concentration of our thoughts with the sensorium

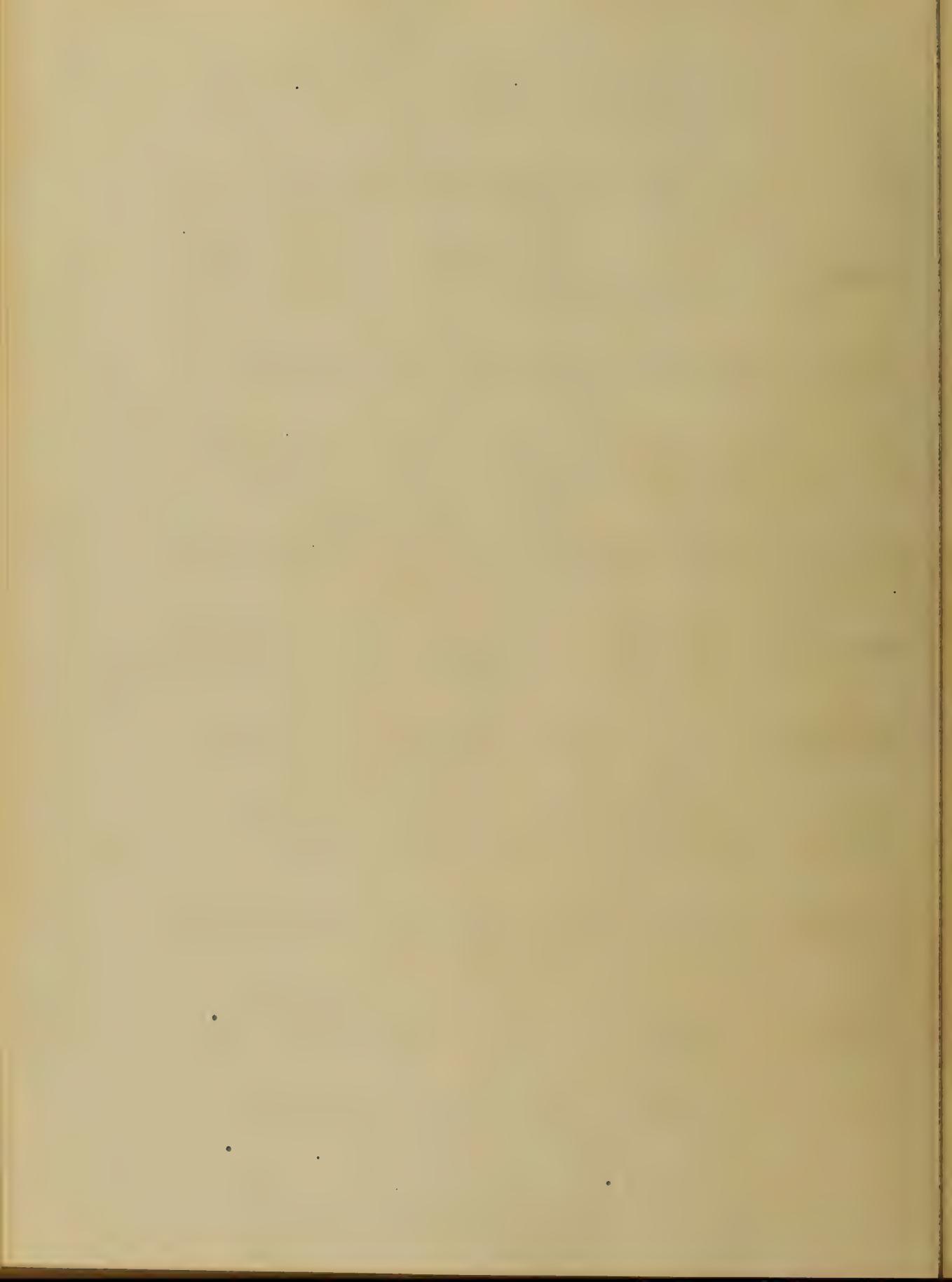
is not the seat of the will as we have seen but

in order to be conscious the cooperation of the
sensory &c of the exterior is required; hence
in passing from a state of wakefulness to one
of sleep the first power lost is that of concentra-
tion of thought, the will being suspended while
the other functions of the brain are sustained
as an illustration I may cite my own case.

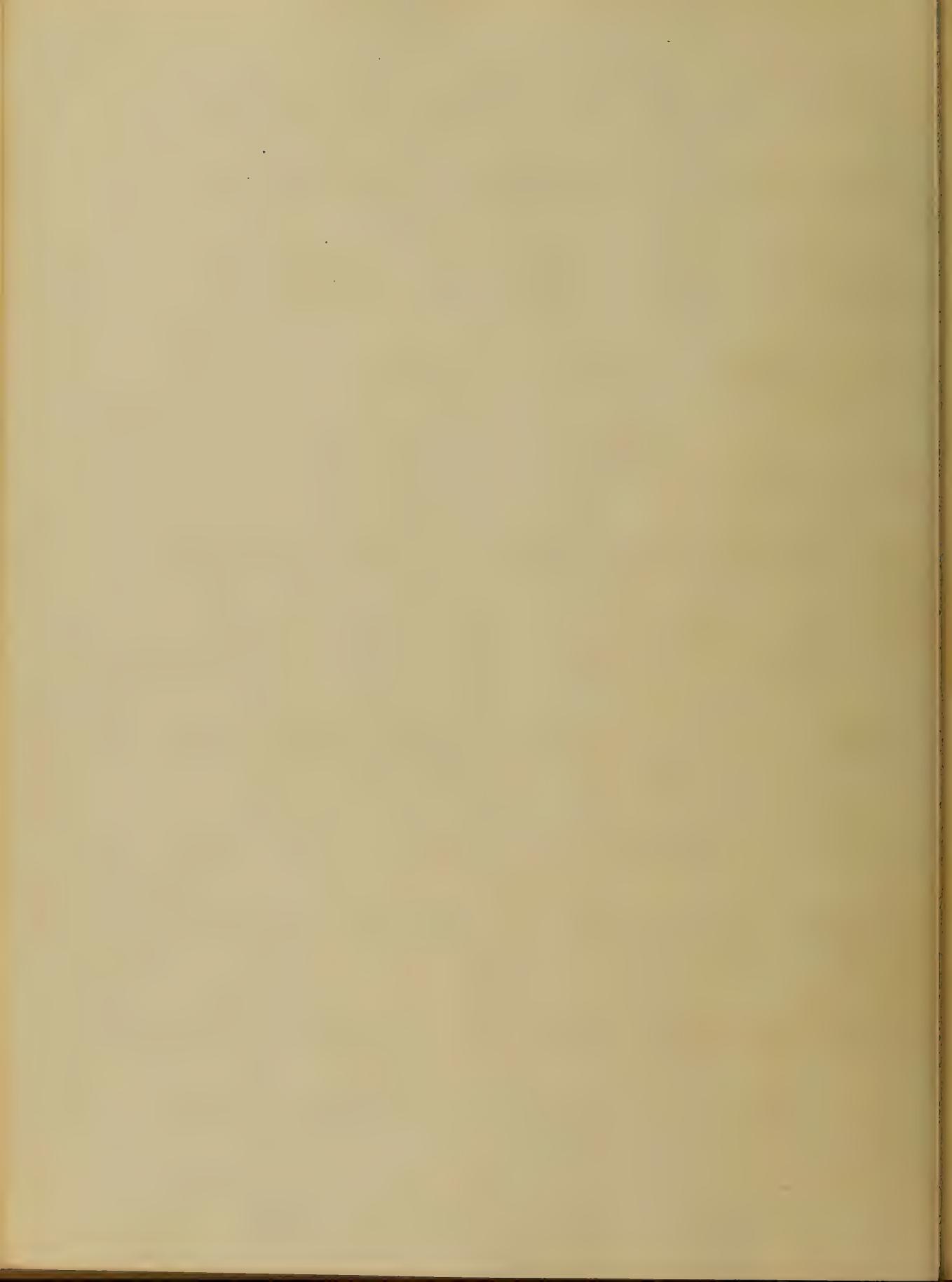
During my attendance first course of lectures
at the University of Virginia I devoted
habitually nineteen to twenty hours daily
to study & consequently nature often would
claim her dues & I was forced to adopt all
sorts of expedients to prevent me from sleeping



one fellow I adopted was to recite the lecture of
the morning day aloud to one of my companions
& though reading myself, though to my com-
panion heards & understood the subject I was
frequently totally unconscious even of the
subject which I had been reading & was forced
sometimes to repeat twenty pages the content
of which were entirely new to me.
The second step toward sleep is the loss of
control over our bodily movements as induced
by the pain we experience after falling asleep
whilst in an ~~un~~ comfortable position, we feel
the pain but cannot move from the position



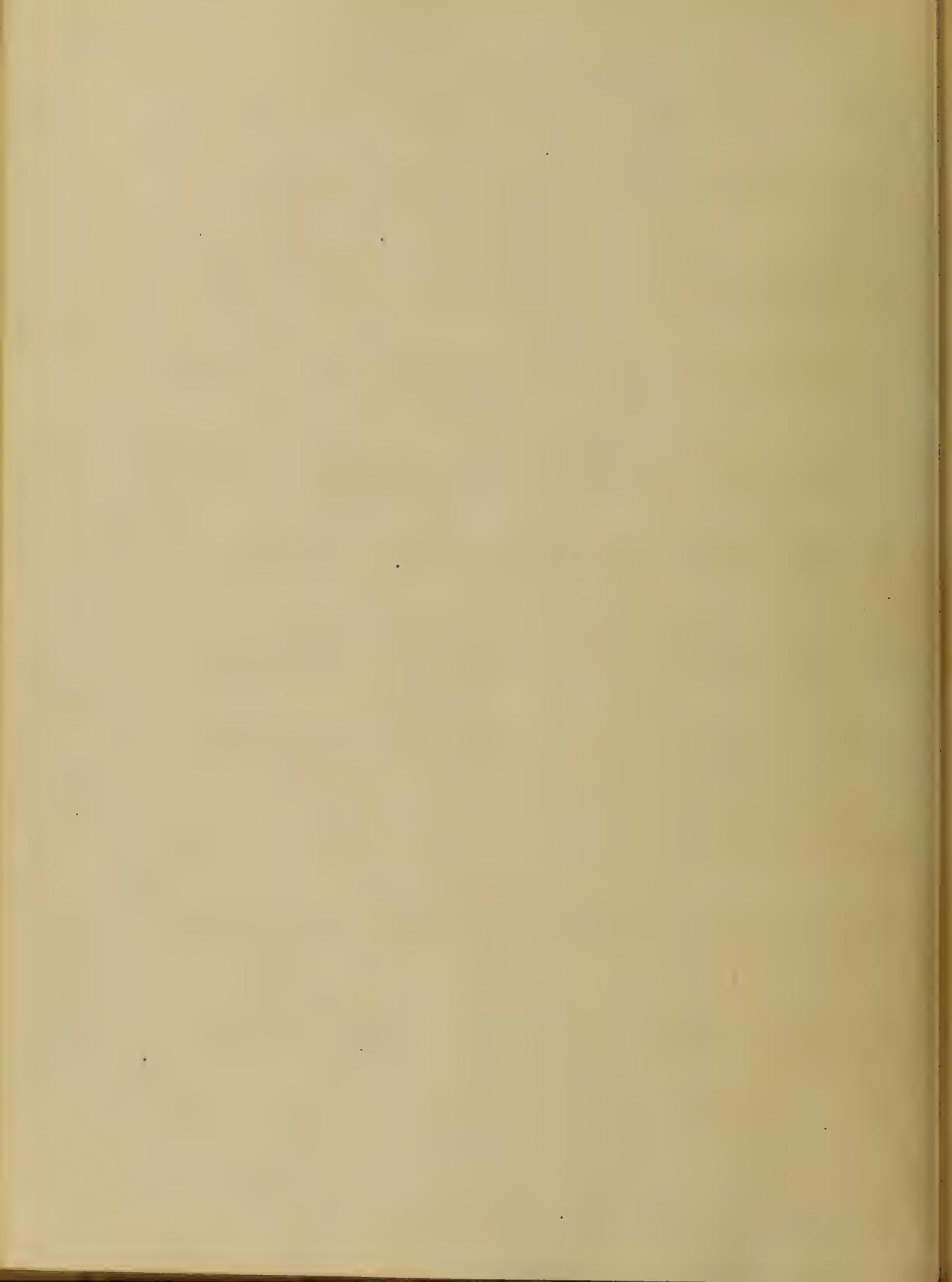
fisture. This is soon succeeded by the loss of
sensational consciousness; which is followed by
the loss of the power of exciting central action
through the medium of the external nerves.
as exemplified by the failure of external respiration
& excretory dreams which frequently occurs when
this condition is present. The first
power lost is the sensory & physico reflex action
The reverse is the order followed when regaining
consciousness after it has been lost. See
pathological condition known as coma in a
few cases of various degrees and includes
various conditions which it is difficult to



arouses the patient & that though he there exists considerable unconsciousness yet the patient is more or less easily aroused.

During sleep the functional activity of sensorium is more or less suspended during sleep & in proportion to the degree of sleep, but that of the cerebrum are never totally suspended though some maintain that "the mind is in a state of torpor or absolute repose."

There is a hereditary tendency to the occurrence of sleep & that irrespective of the amount of activity of life the tendency occurring in certain amount of sleep as well as life labor.



The exciting cause of sleep is a monotonous suc-

citation of gentle impressions on our senses,

as a soft breeze, or the murmur of a brook,

such impressions being just sufficient to en-

gage the attention of the mind & so prevent

its wandering in other tracks for all sensations

or thoughts which require mental activity prevent

sleep. The proximate cause by some is supposed

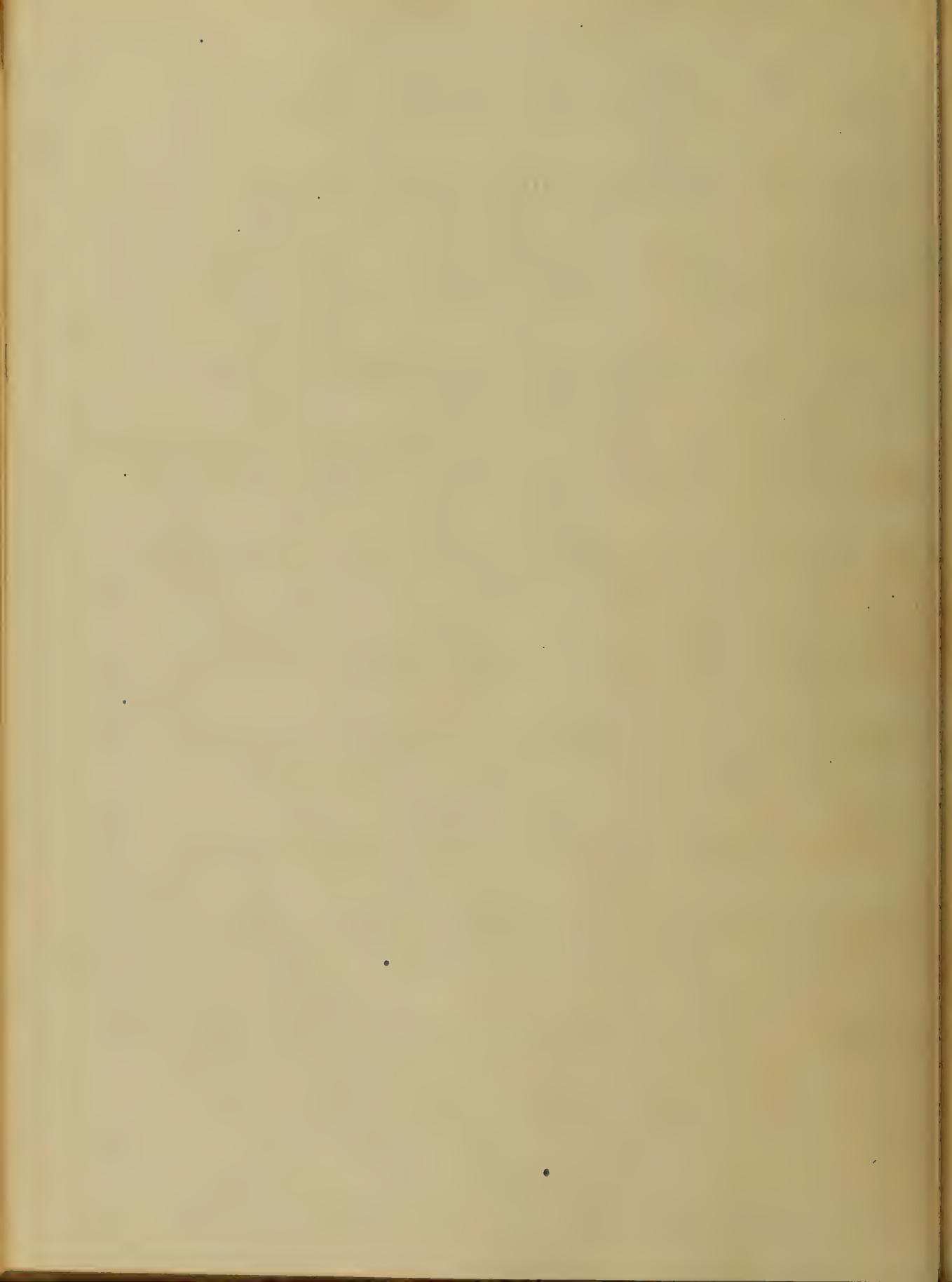
to be a slight congestion of the capillaries of the

brain but it seems more plausible to suppose

it due to an opposite condition of these vessels

as the supply of blood in the organs is in

proportion to its activity & those are active & those



The activity of the metabolism is decreased

therefore the amount of blood must be pro-

portionately increased. Sleep may be called

inactive sleep, nevertheless the organism vegetative functions

are known to be more active during sleep, but they

are really also less active than in the awakening

state, but repair is more active because the

activity is so much diminished. The amount of

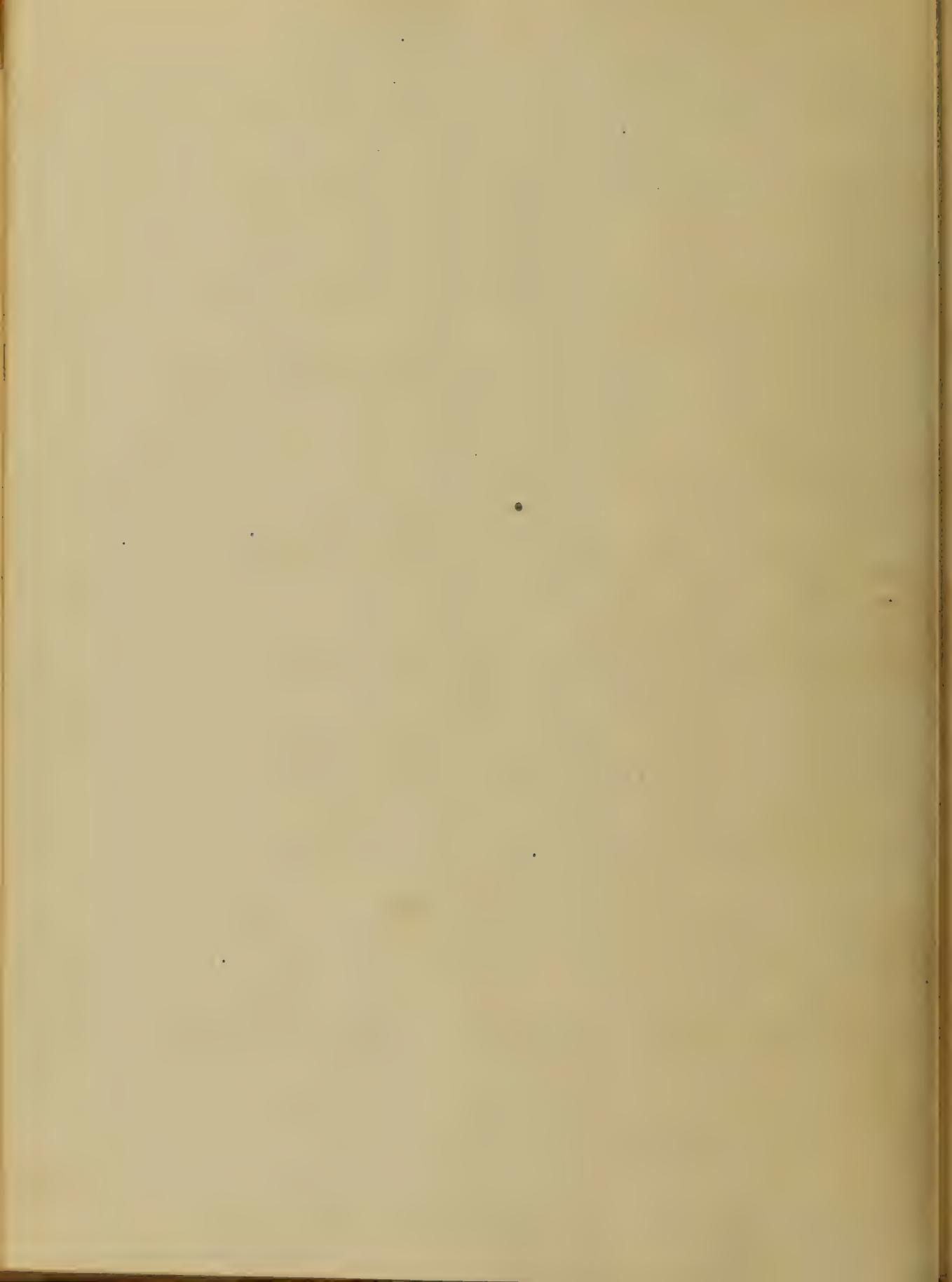
sleep required by each individual depends on his

age, environment, species, etc., etc., etc., etc., etc.

an adult requires but from 6 to 8 hours in the

twenty-four; temperature has the usual effect

requires more, the nervous system, habit,



I was very much delighted to be the author of

according to the latest information received from Dr. J. C. M. H. S.

for I think it is probable the the activity of the

cerebrum is only diminished not suspended during

sleep. This now remembrance of this mental

activity is no proof of its non existence for in the

most perfect dreams viz that of a somnambulist -

the person fails completely to recall his actions

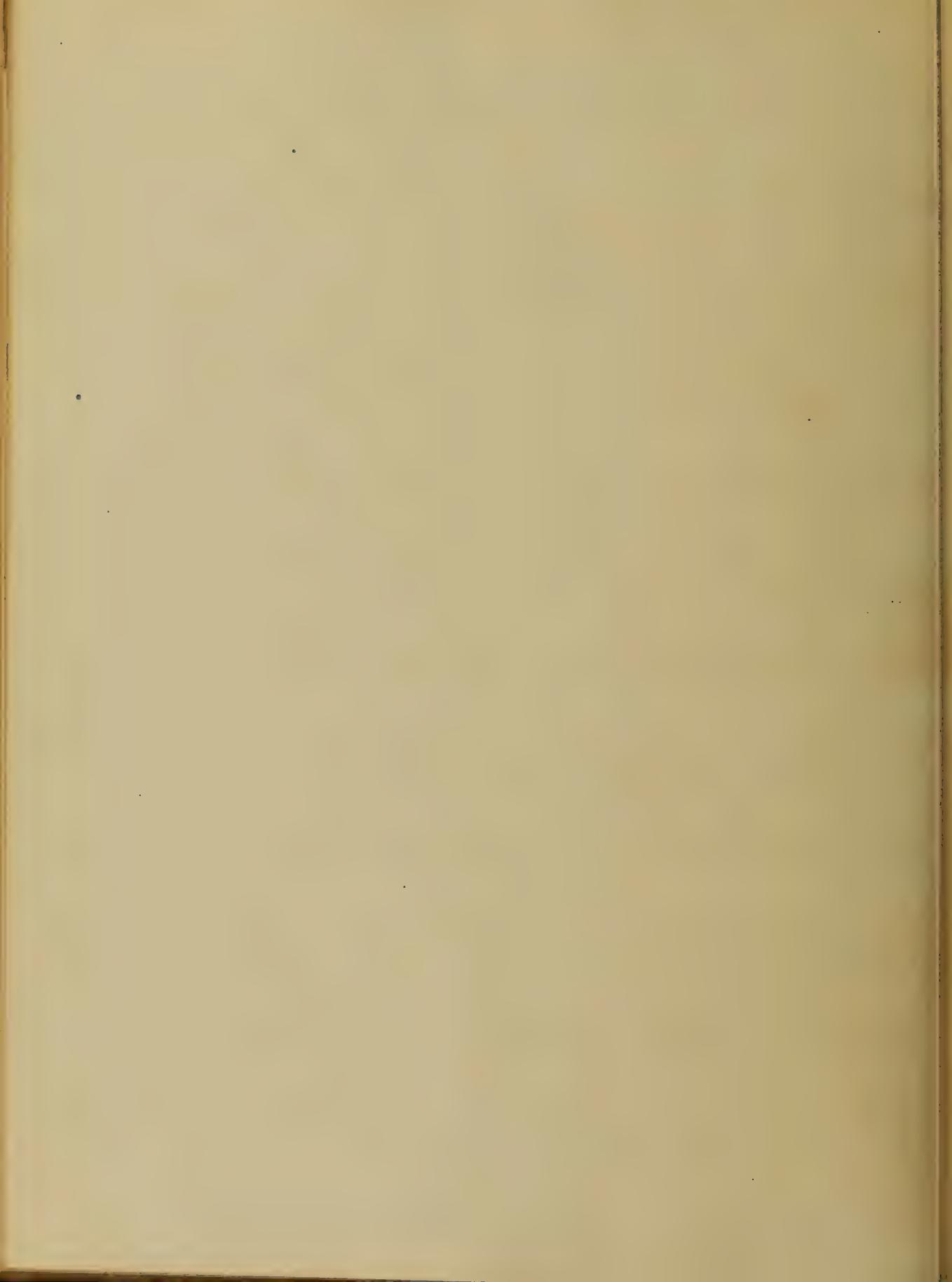
when awakened. Some who hold that the mental

activity is totally suspended during sleep regard

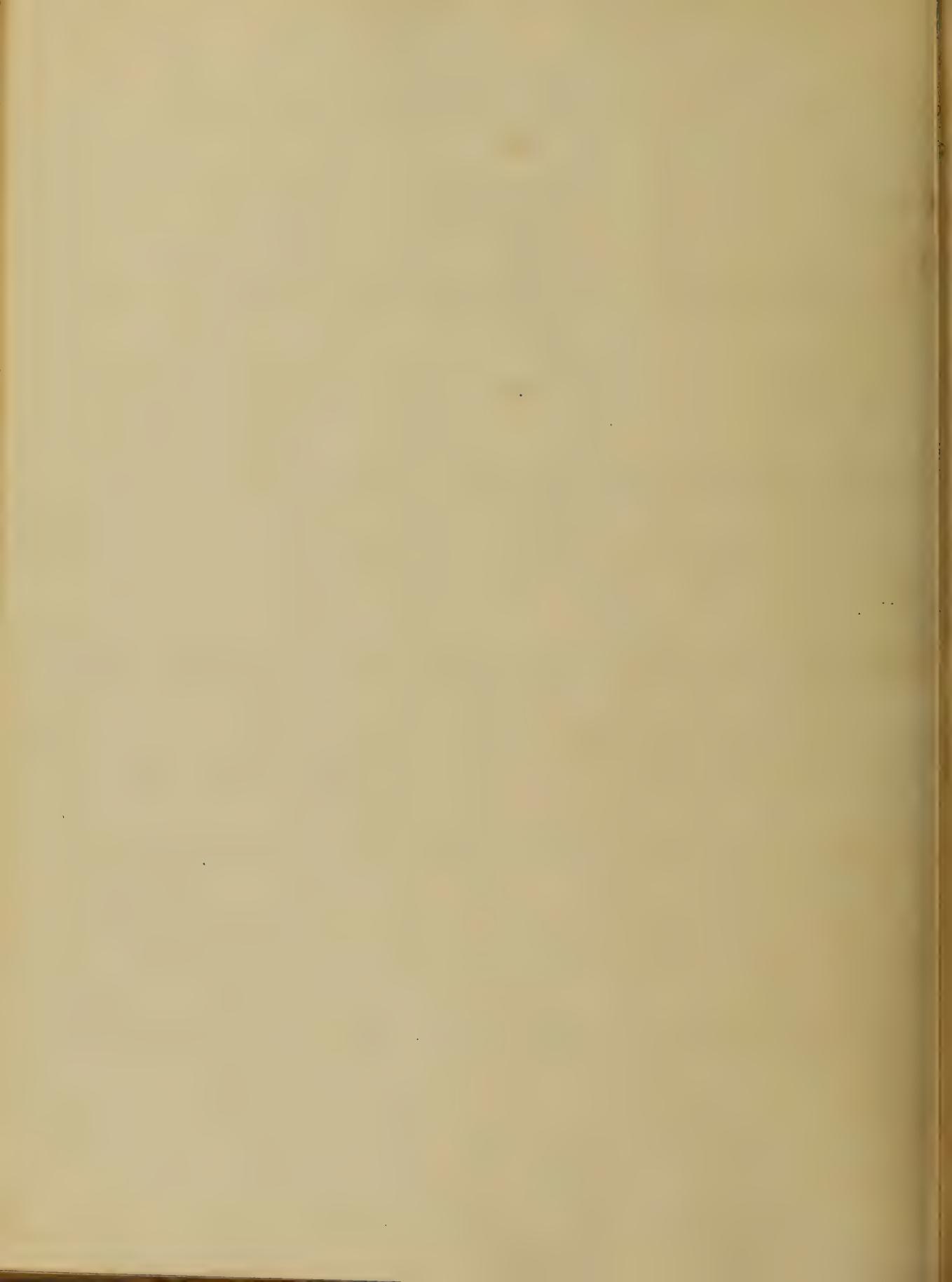
dreams as the action of the mind during the

transition stage from sleep to wakefulness.

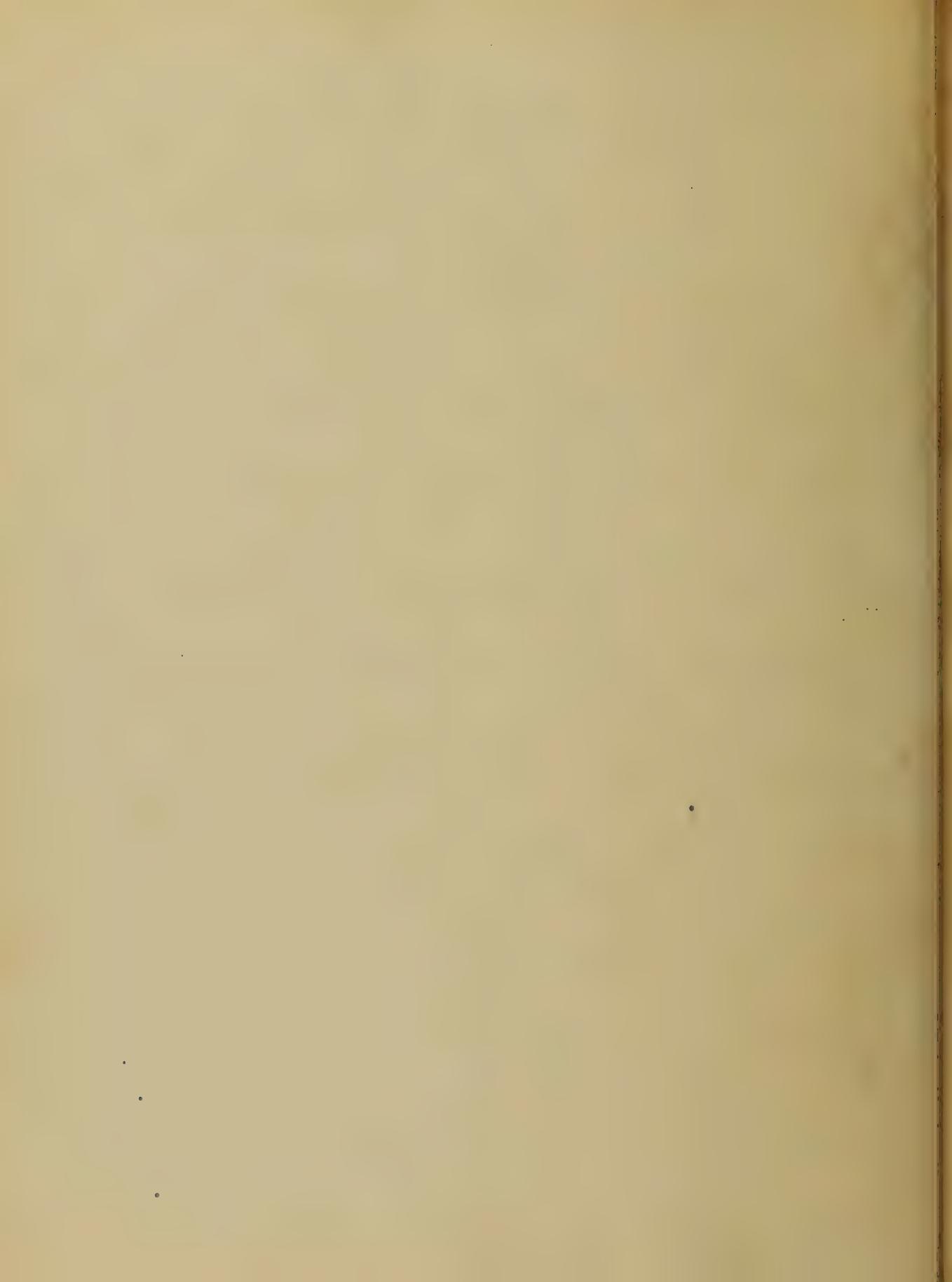
but the various stages & lengths of dreams under



that supposition rather improbable. Besides
many facts seem to prove that the mind is
active during sleep as for example persons are
frequently wakened by the cipation of familiar
noises, the ability of persons to wake at given
hours even when unusual as when travelling I
call always rouse myself at the required time.
again persons can be wakened by forming previous
engagement as in the case of an english signal
officer who could only be roused with the greatest
difficulty but when he had made an engagement
to rise at a given hour would rouse when called
in a low whisper again in my own case I am



number on two occasions being aroused by the servant -
who was in the habit of making fires in the
morning, because his fire had gone out & he
ow these occasions came to my bedside to get a
match which he was not in the habit of doing
& that I thought he made no more noise than
usual in fact - but simply because he came
into a portion of the room where he did not
usually go. Again whilst at a gentleman's
house during the war a servant attempted
to rob my pockets & awoke as soon as he
looked up, however saw me going to tell
of his profession of some money in the pocket book



& yet he made his noise train if he had kindle

The few as usual. Please fact to see to me

To be conclusive evidence of mental activity

during sleep. The other opinion which maintains

that if there were no mental activity during sleep

it would be remembered & this is refuted by

The somnambulist forgetting his dreams & our

explanation why this action is forgotten seems

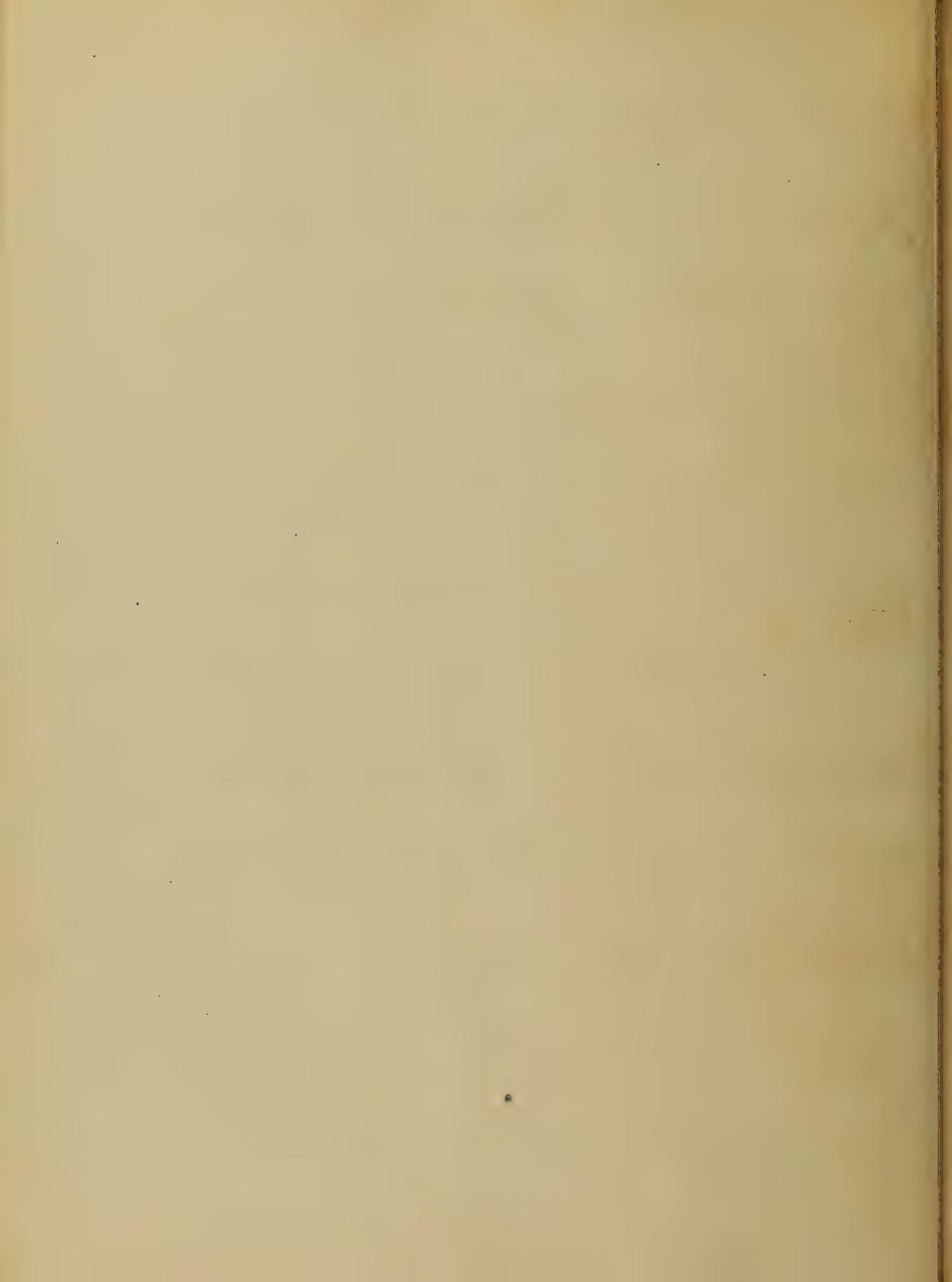
to me to be given by the saying of more or less com-

plete suspension of the sensory ganglion whose

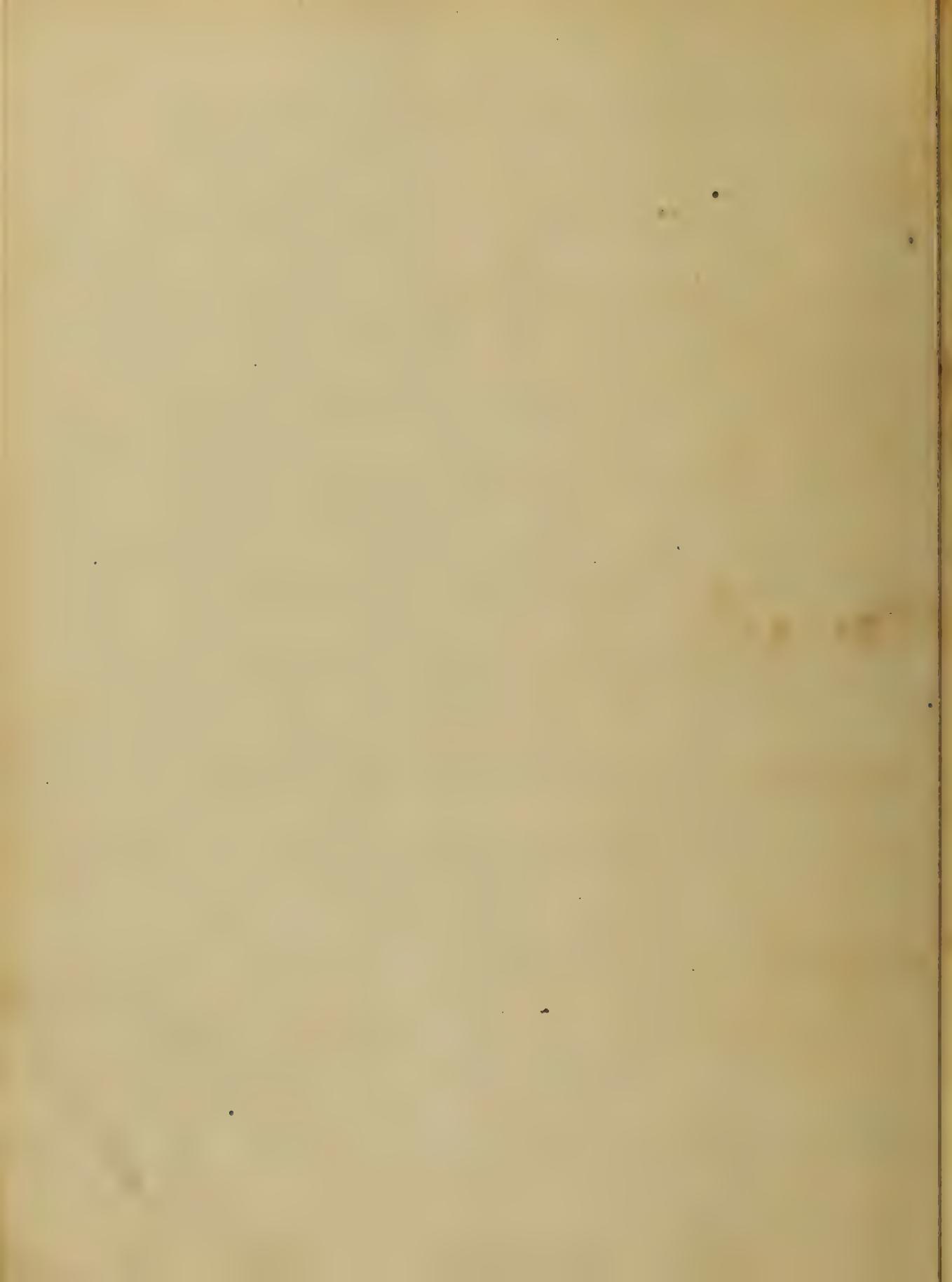
activity is required in order that we should

become conscious of the action of the mind.

If has been as Red now can the self-sustained



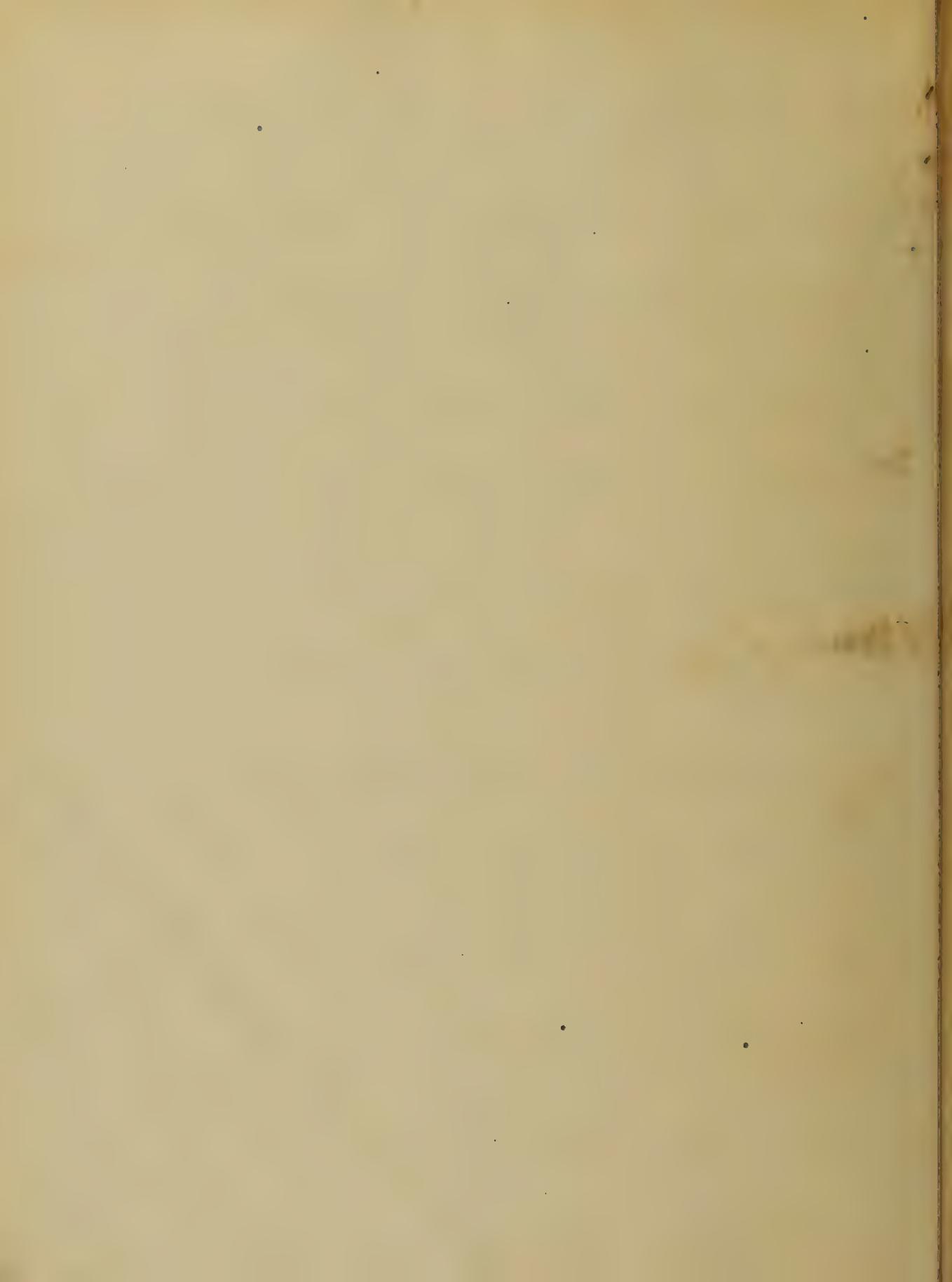
of the mind by sleep accounted for if its action
be not suspended? Very easily is that voluntary
exertion of the mind alone fatigued it simple
automatic flow of thought is accomplished
easily & without exertion. Therefore requires no
rest or recuperation. We believe in the activity
of our dreams because to prevent incoherent
ideas, the sensory ganglia must be perfectly
& fully active, but that would be inconsistent
with sleep. hence in sleep our thoughts are
accepted as real because we cannot distinguish
phantoms by which their incoherence would
become apparent.

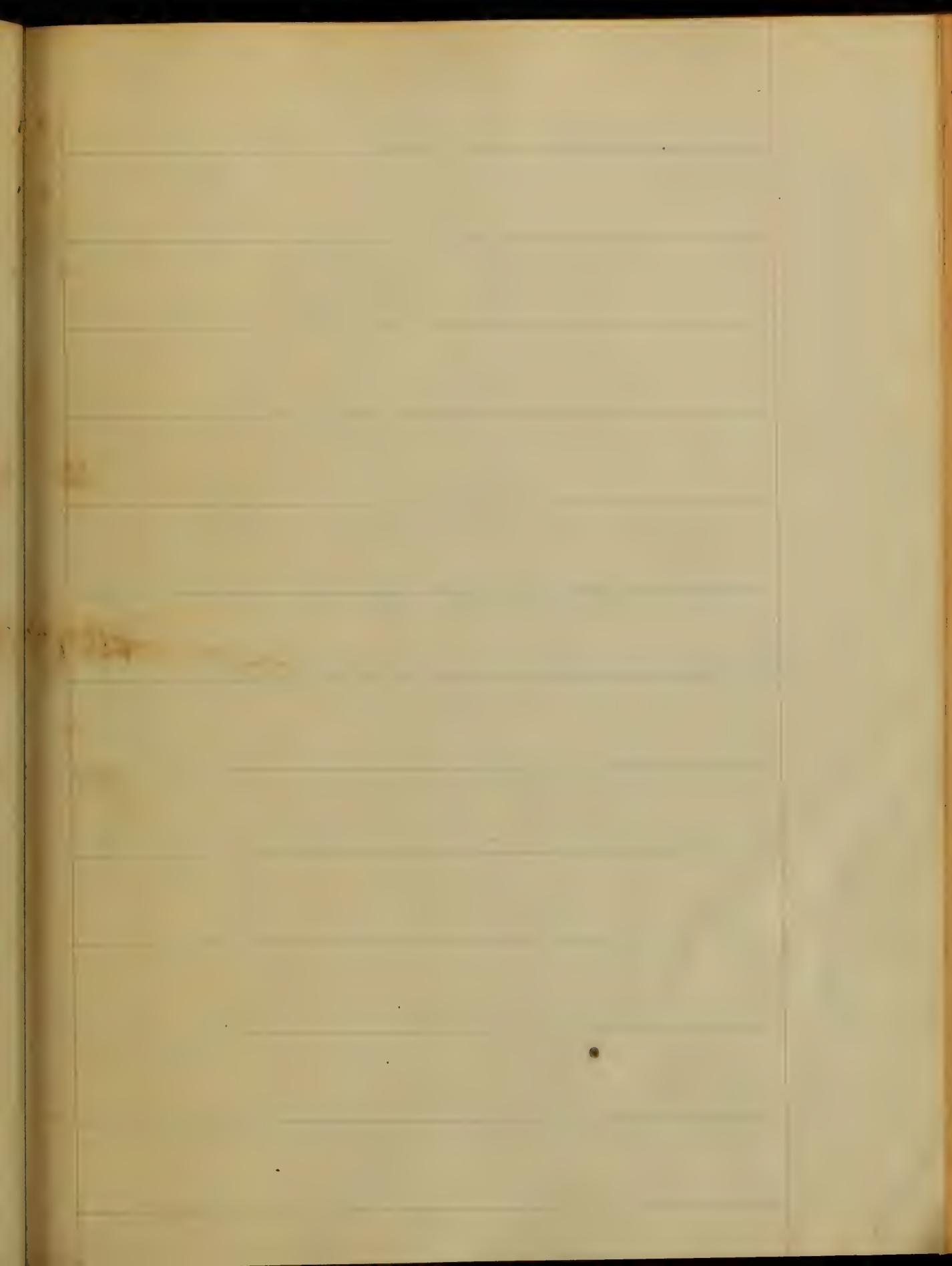


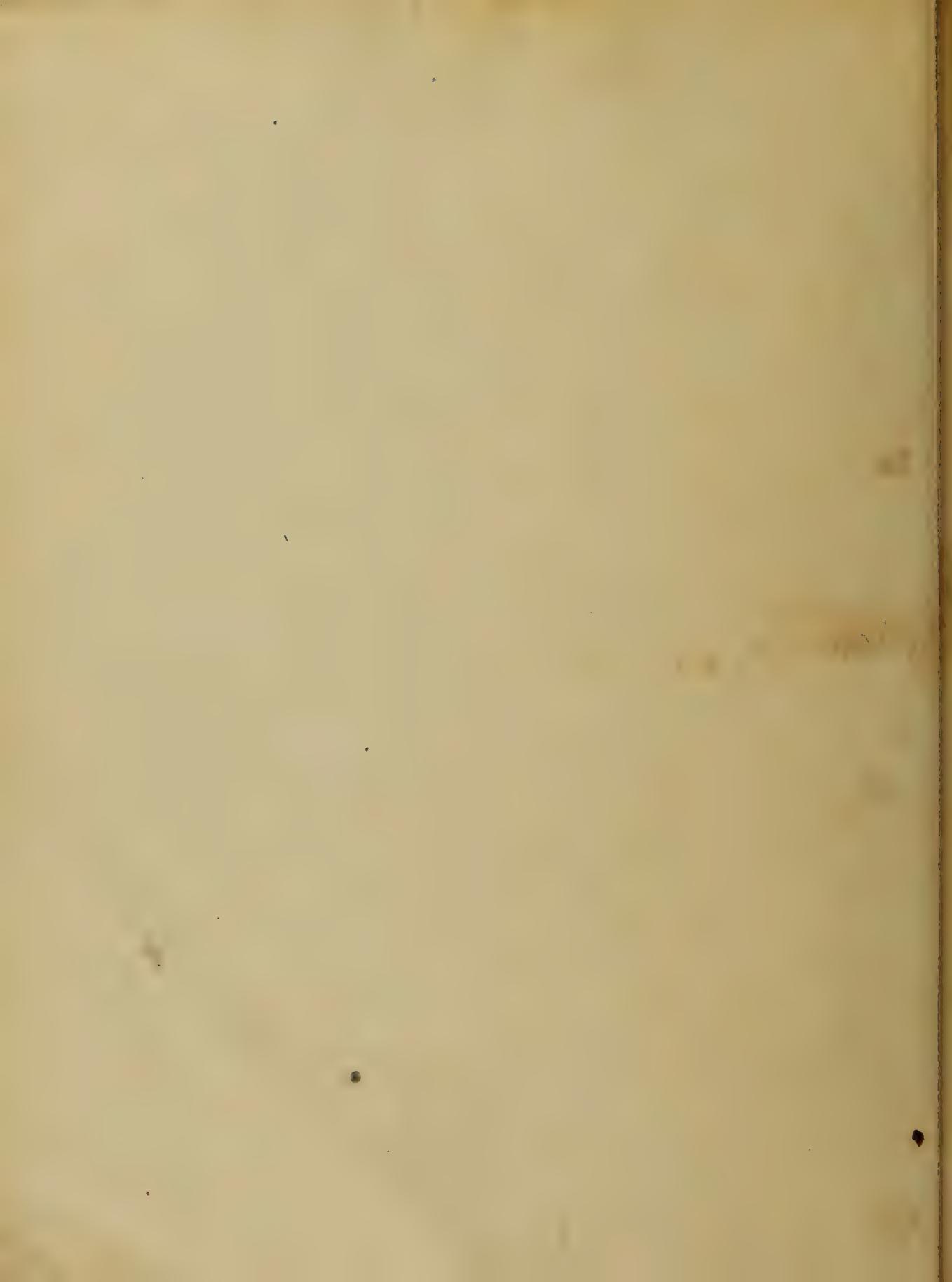
I had intended to enter more fully in the consideration
of the various physiological phenomena of the
brain but I find that I have protracted
the subject all day & I endeavoured to be as con-
cise as was consistent with clearness. I shall
therefore refrain from trespassing any
longer on your indulgence, which I save
for the errors which want of experience
may have caused me to commit.

Respectfully submitted to the examination
of the "Institut de Sciences & Faculty of Medicine
of the University of Paris, France

James Dunlop Worcester.







AN
Inaugural Dissertation

ON

C. Pneumoniae

Submitted to the Examination

OF THE

Provost, Regents and Faculty

OF

PHYSIC,

OF THE

UNIVERSITY OF MARYLAND,

FOR THE DEGREE OF

DOCTOR OF MEDICINE,

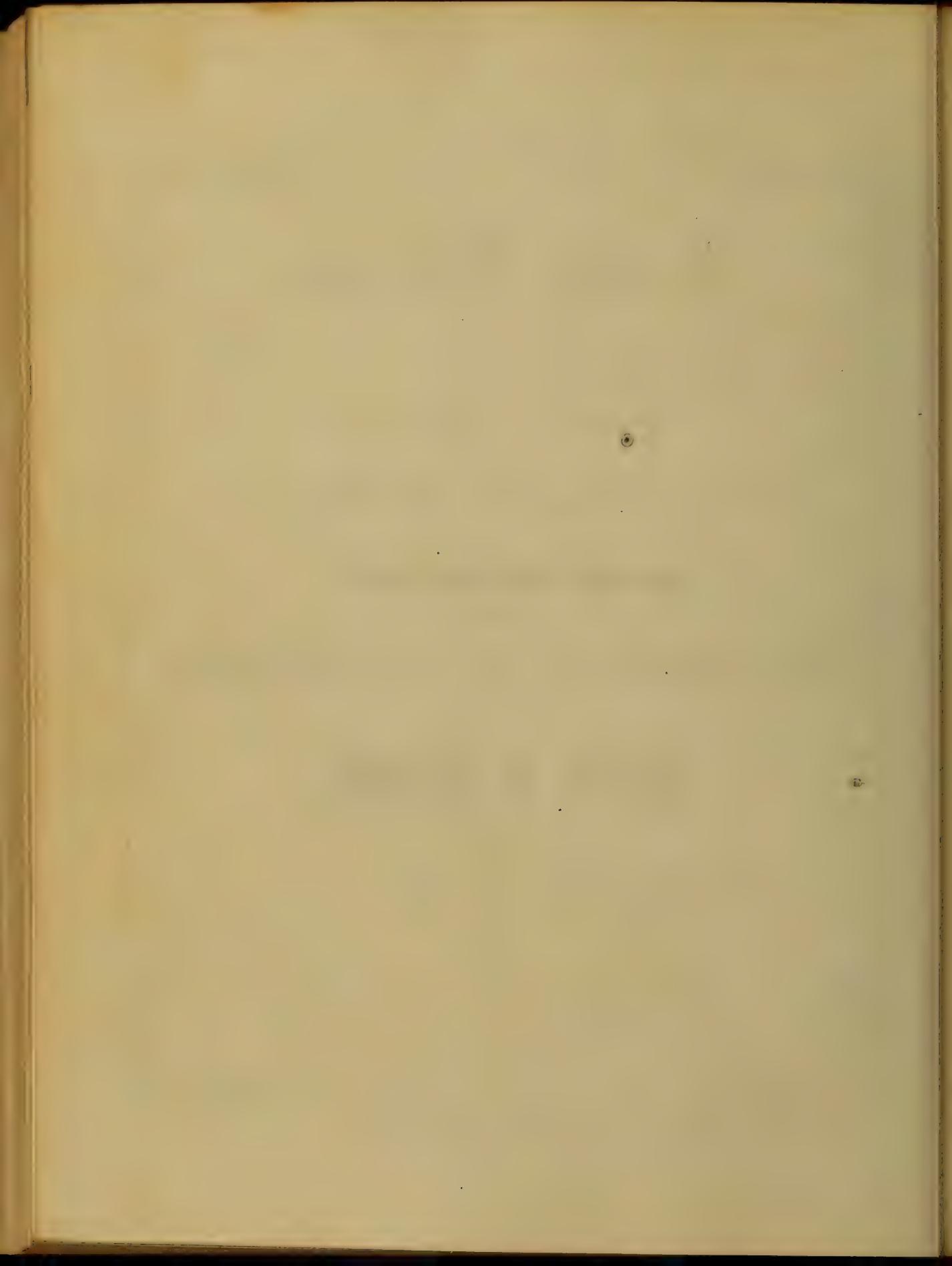
By
Newton D. Baker

of

Jefferson County Vt.

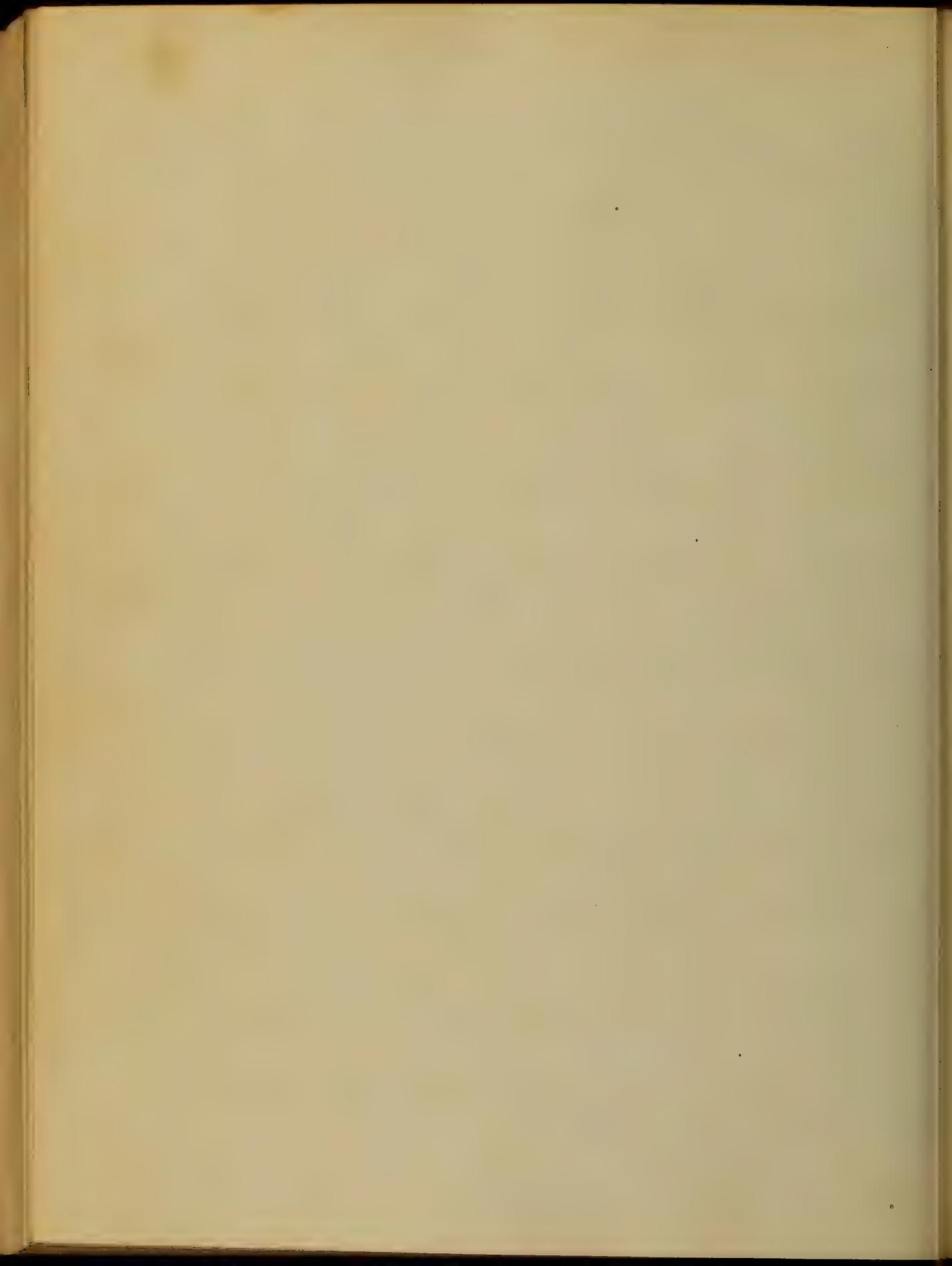
Session of

1867-68



Pneumonia or Pnu-
monitis is an inflammation of
the parenchyma of the lung; or in
other words, of the lung tissue proper.

The inflammation begins in the
mucous membrane lining the air
cells, occasionally extending into the
minute bronchioles. The difference
between the cellular and bronchial mu-
cous membranes, (the former being)
squamous or tessellated, the latter
cylindrical or ciliated) accounts for



The infrequency of the invasion

extending into the bronchial tubes.

Pneumonia generally attacks but a

single lobe at a time; and when a

second is attacked, it is by a fresh

invasion. Consequently, different portions

of the lungs are found in different

stages of the disease. Pneumonia

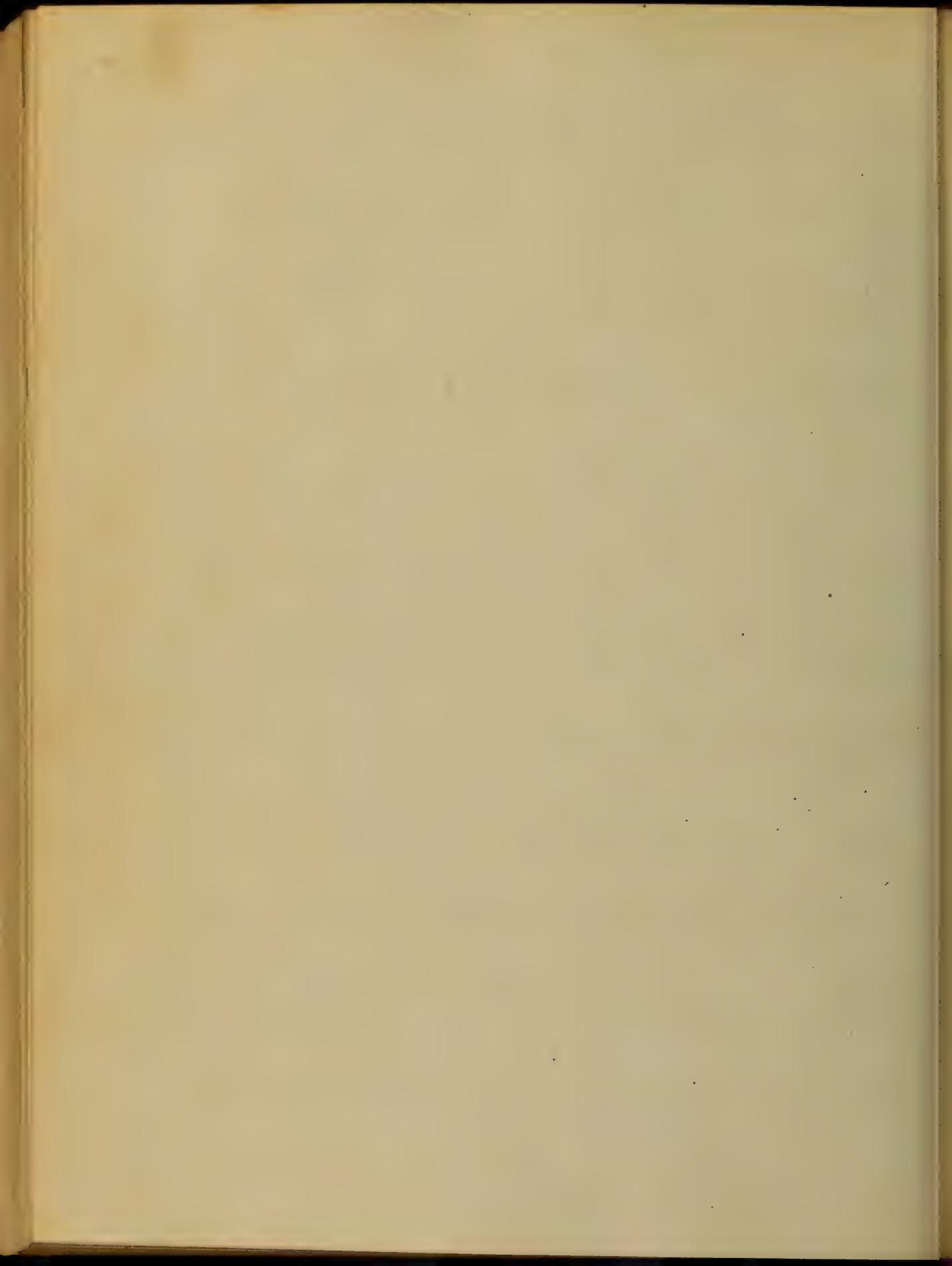
may very properly be divided into

several varieties. Lobar, when a whole

lobe is involved; circumscribed, usually

a complication of some other disease;

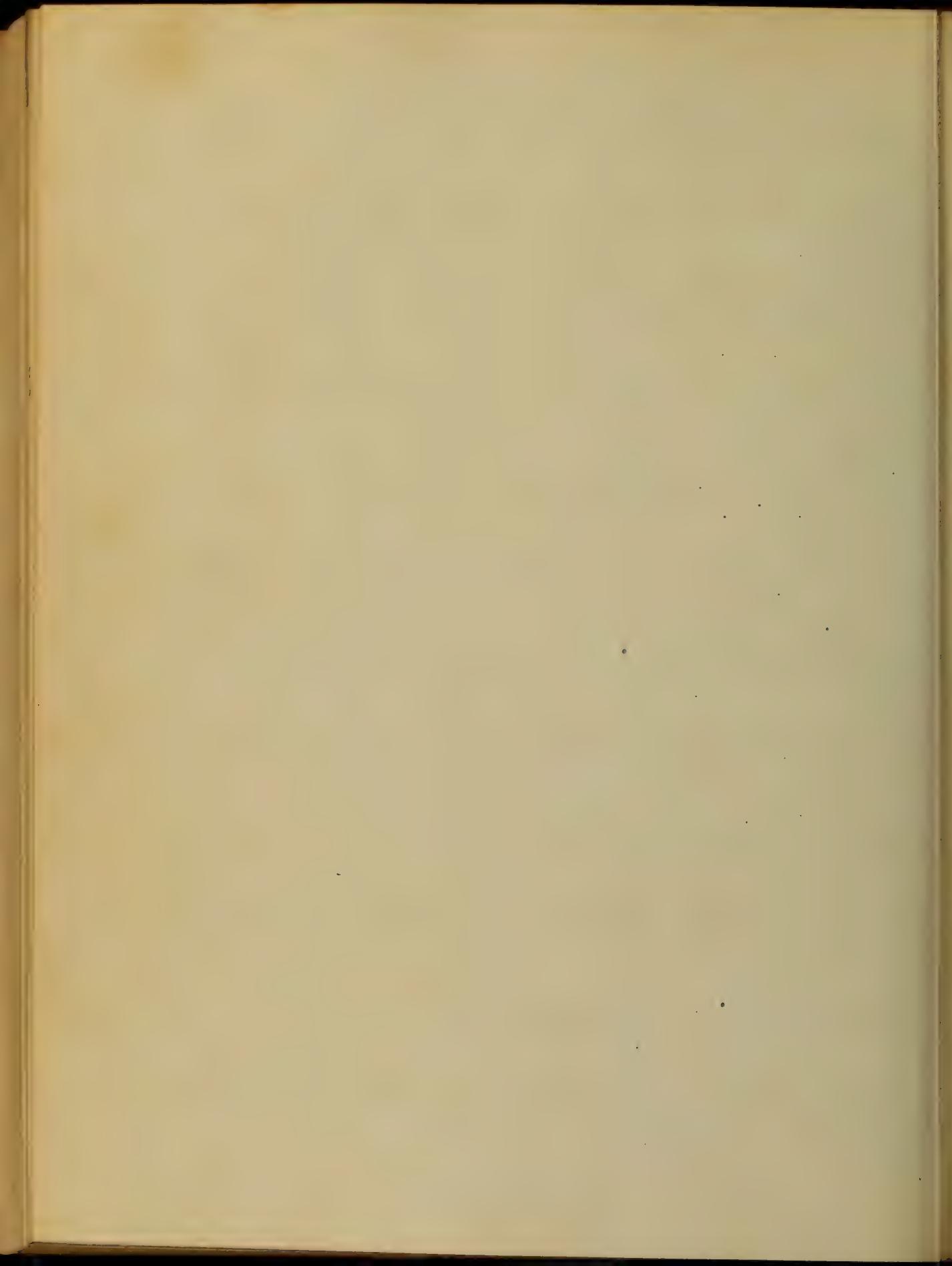
Lobular, when isolated lobules are



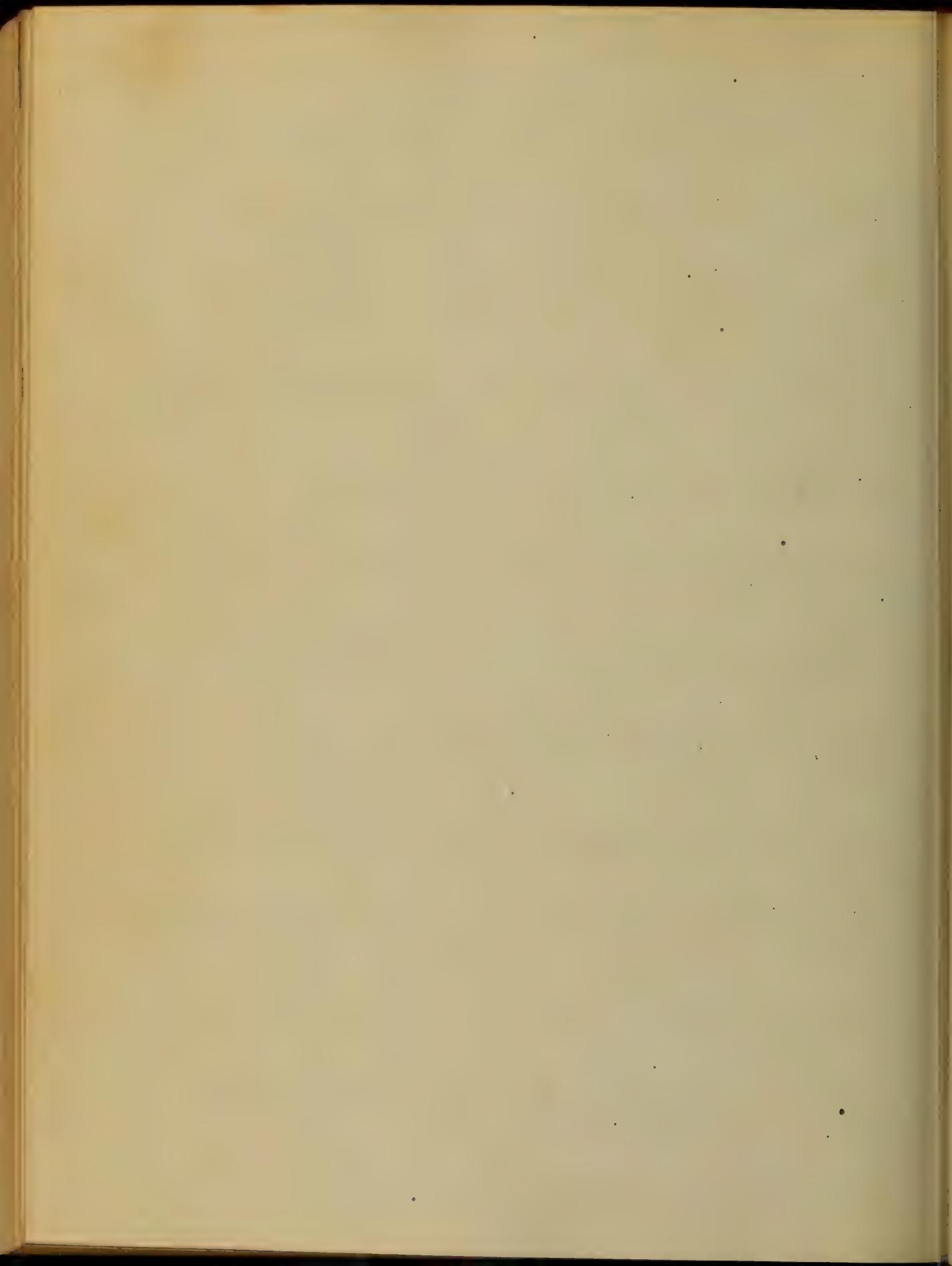
affected; the variety mostly occurring
in children, and also a chronic form
of the disease. We propose to confine
ourselves to the consideration of the
lobar variety; and will first notice
its anatomical characters.

Pneumonia is usually divided into
three stages, 1st. the stage of congestion
or engorgement; 2^d. that of red hep-
atization, or solidification and 3rd. gray
hepatization, or gray softening.

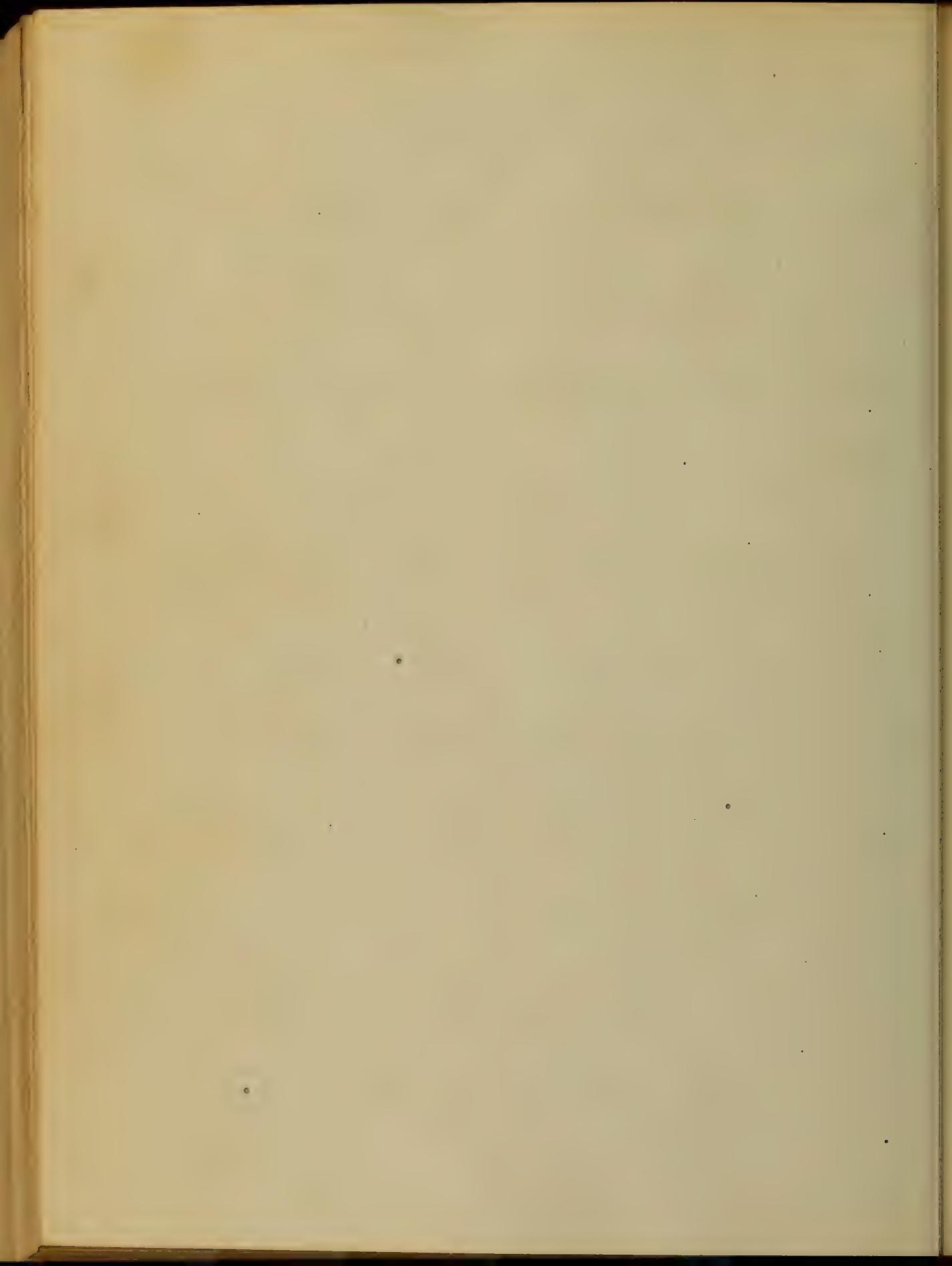
The first appreciable change noticed
as a result of the inflammation



is an abnormal quantity of blood
or *Hæmorrhage*; due to Active Congestion
or engorgement. The inflamed portion
of lung is found to have increased
in weight. Blood exudes from its
cut surfaces together with a little
frothy serum. It is often difficult
to distinguish this condition of
Hæmorrhage, from that due to *Hæmorrhage*
Congestion. The latter however is always
found in the most depressing parts
of the body. The air cells contain
a certain quantity of air which may

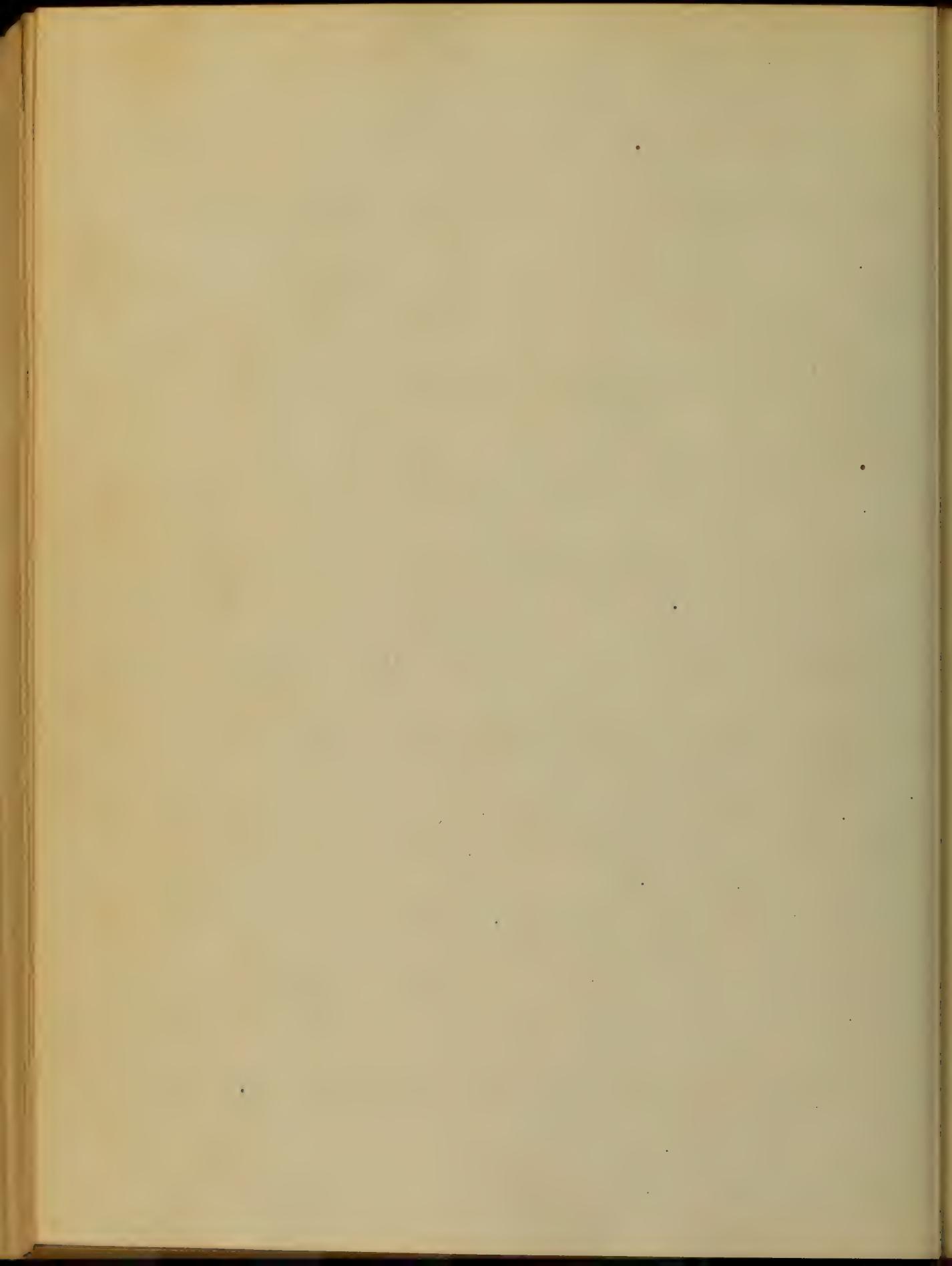


or pressed out. This stage is of short duration, generally followed by the second or that of Solidification, of Coagulated Material is excreted from the blood; the air forced out; the cells coagulating, and the whole becoming a solid mass. The cut surfaces resemble very much those of the liver; hence its name Ted Refalization. Its weight is increased; a portion of solidified being thrown into water immediately sinks. This increase in weight is due not to any accumulation

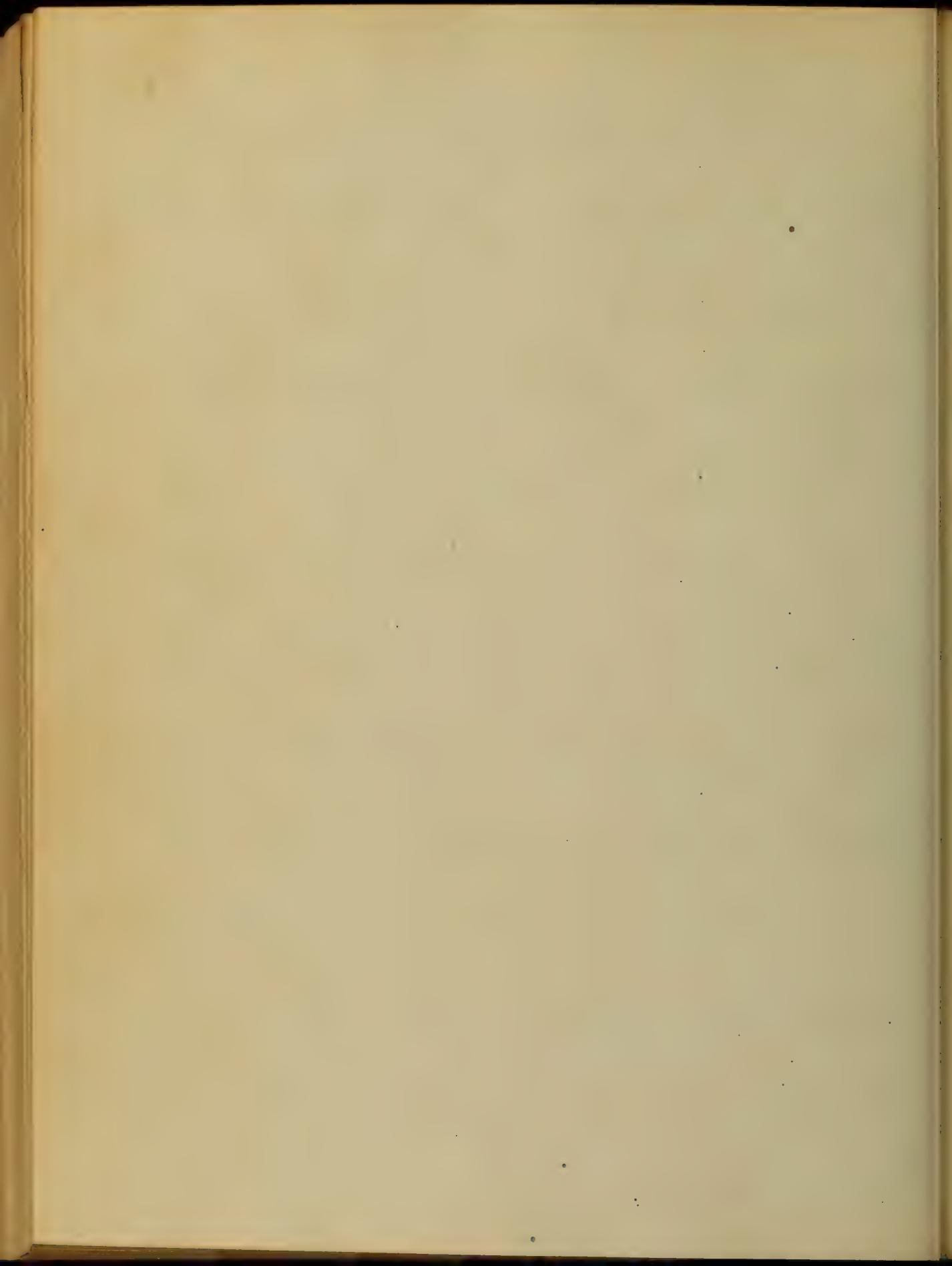


of blood; for it is really less than
in strength; but so the quantity or solid
matter drawn from the blood.

If a favorable result take place the
exudation is rapidly or in part removed
by absorption. The cell walls are
found to have suffered no injury.
Circulation is immediately re-established
the excretion of the toxins restored
and the patient goes on to recovery.
In other cases we have not this happy
result. Instead of removal by absorp-
tion, we find violent infiltration.



This constitutes the Third, or Stage
of pulmonary Aggravation; the disease is
broken down. Recording in Pulmo-
nary abscesses. This extends from the
Cut-surface. Pleurisy is almost a
constant complication. *Pseudomonas* attac-
ks, preferentially the lower lobes; and
the lower lobe of the right, or lower lobe
of the left lung, exceptionally it attacks
one of the upper, especially if non-exist-
ing other pulmonary trouble.
The signs, tones and generally prominent,
being sustained in singing by a well



Marked chill, at other times by rigors.

Pain more or less severe, somewhat circum-

Scribed, may be disseminated with Pleuris

Confined to the affected side. The complication

of Pleuris is however so frequent, that

when the pain is very severe, it may

almost always be looked upon as the cause,

This also is a frequent warning in different

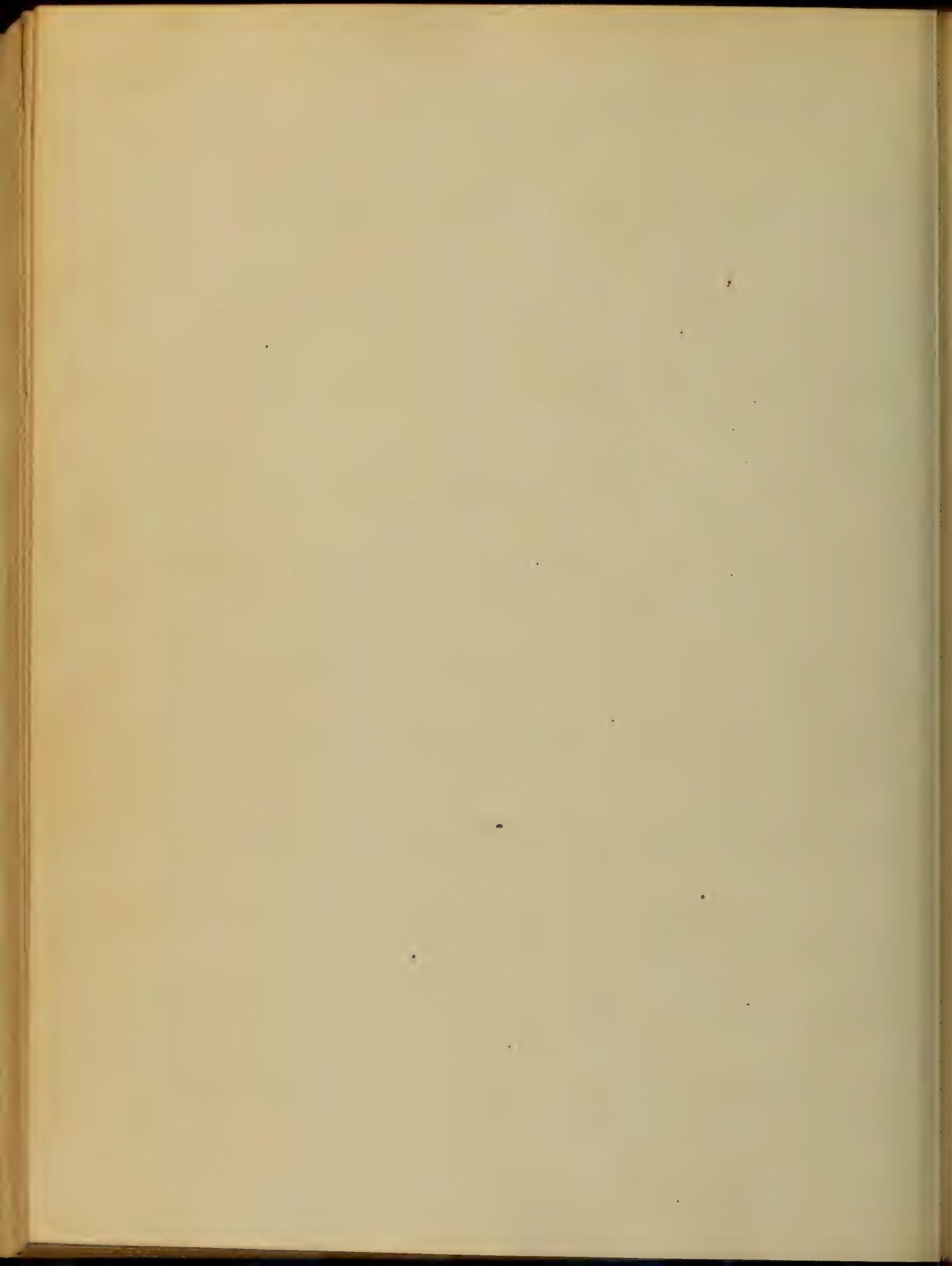
instances, I have slightly to one mentioned and

briefly this in a friend who came from

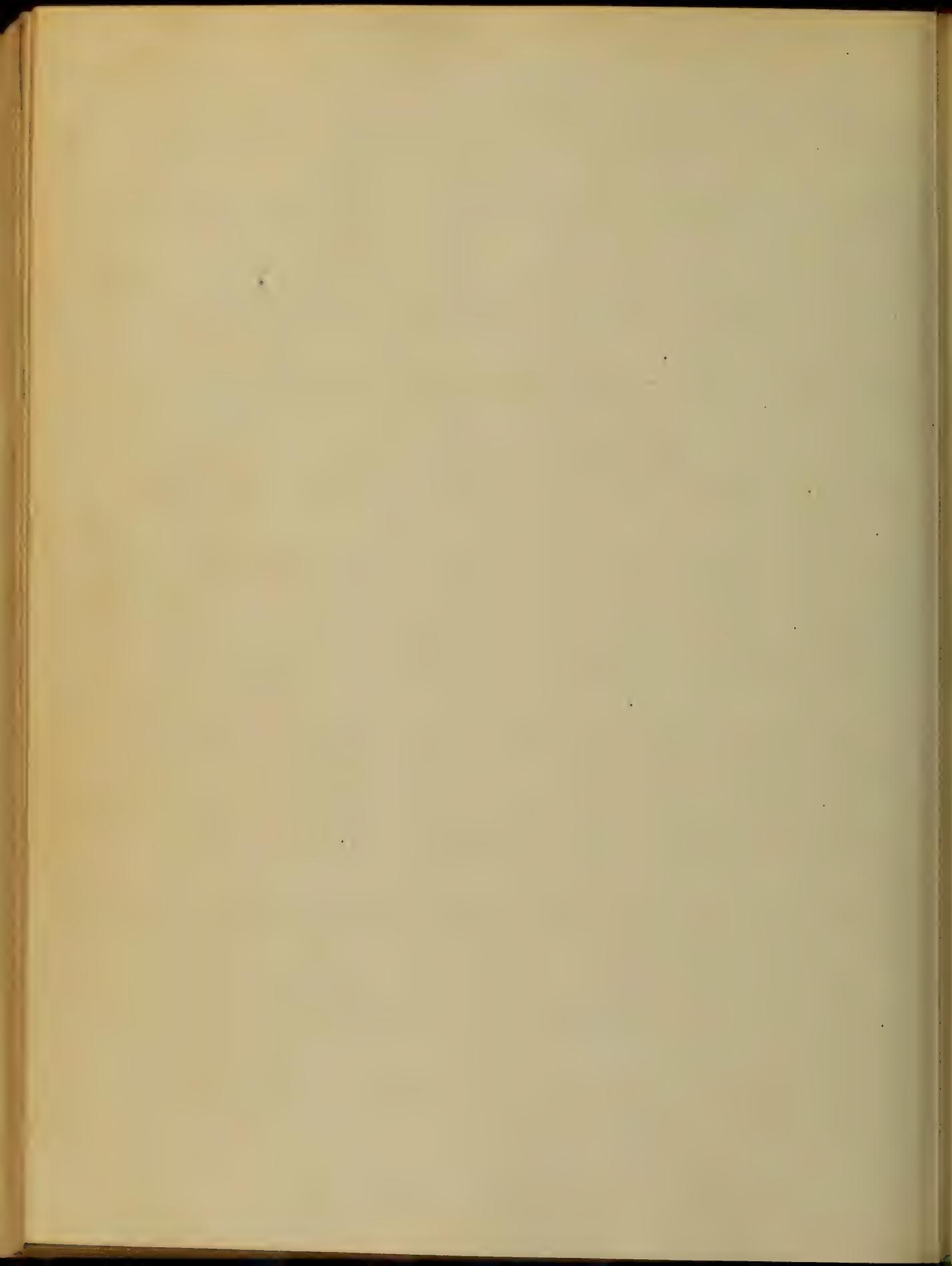
Cases it even rises above the last named

mount. In Robert's person full and

bounding, not easily compressed.

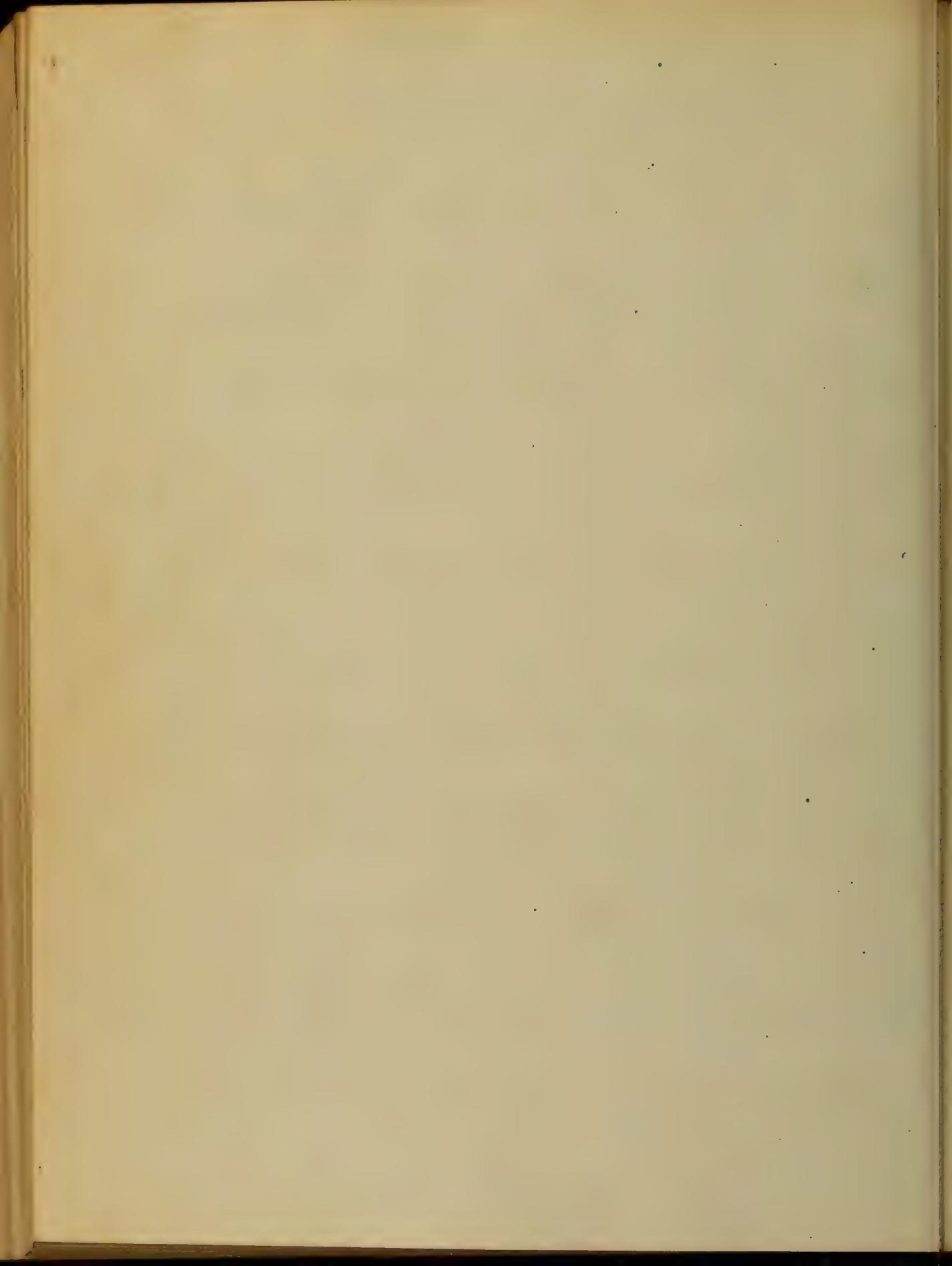


The Inspiration is feeble & panting
From Thirty to Sixty to the Minute, and
the relative pressure of the inspiration
and the Heart's Action being entirely
lost. Cough a disorder prominent dying
from; though entirely curable in some
Lieu Cases. The expectoration is at first
of clay or mucous: a little later, by the
admixture of a small quantity of blood
it becomes of a rusty color. This when
present is pathognomonic of the disease.
Unfortunately it is absent in a small
proportion of Cases. As the disease



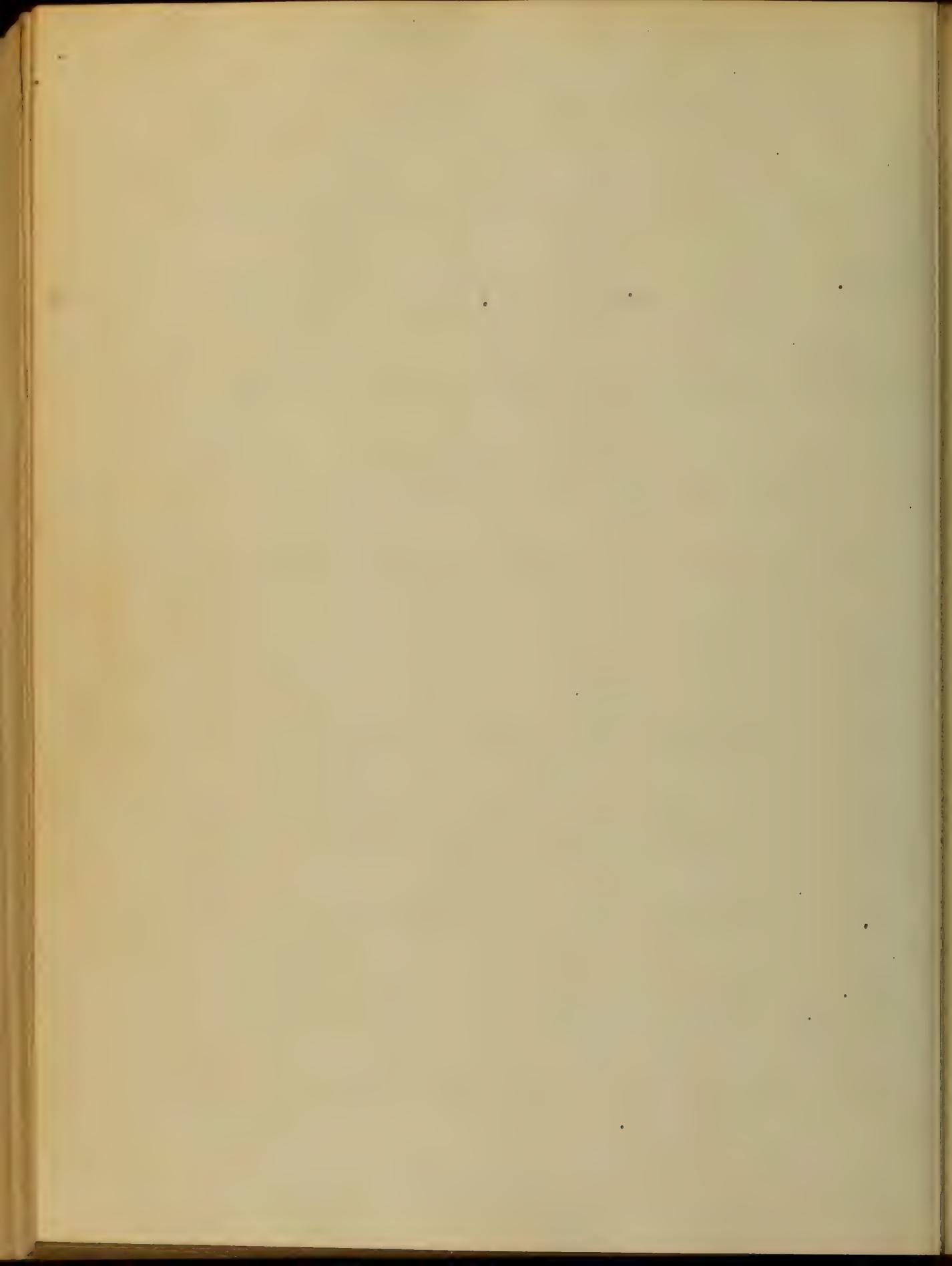
assumes a graver type; the expectora-
tion becomes purulent, or is mixed with
air character, which is a very bad sign
most of the time. The fever is usually
high. Delirious fits may be present, in a-
ccordance with the high febrile action;
or denoting gravity of disease.

During solidification the pain somewhat-
abates; cough is less troublesome and peculiar
bright spots of caries on the cheeks;
and if this be excluded, they are
almost pathognomonic. Examination
of the urine also gives us some valuable

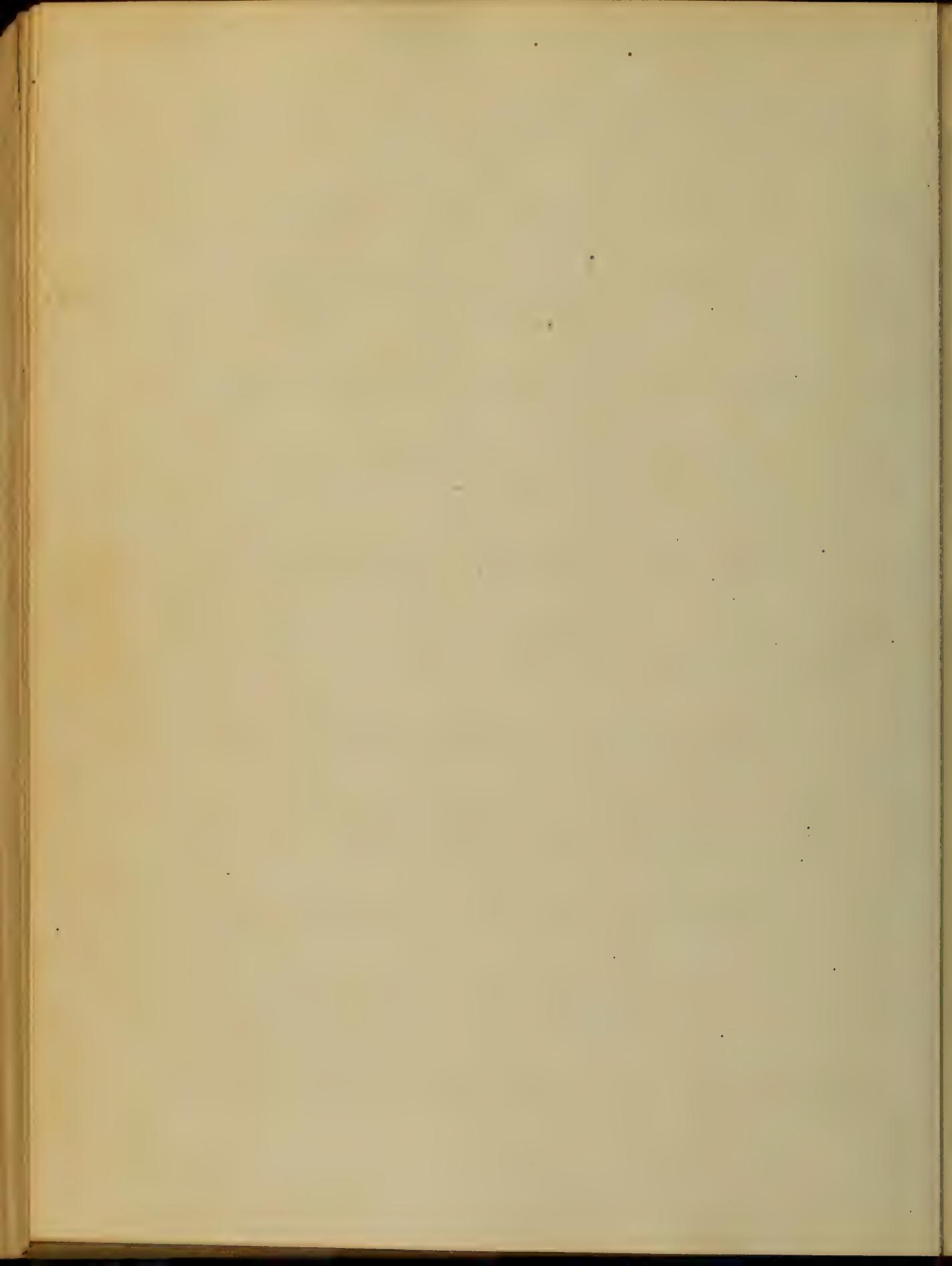


Information. Solution of Nitrate of
Silver, fails to cause any precipitate,
showing the retention in the system
of its Chlorides. The same is the case
in some other affections; but in Mind
is it so constant, as in the one under
consideration. No recovery, however different
Matter may be noted, by their approach,
to their normal quantity, of
the chlorides in the Mind.

Pneumonia has various and many
complications, sometimes among them
are Excoriation of Liver, & Colic from the

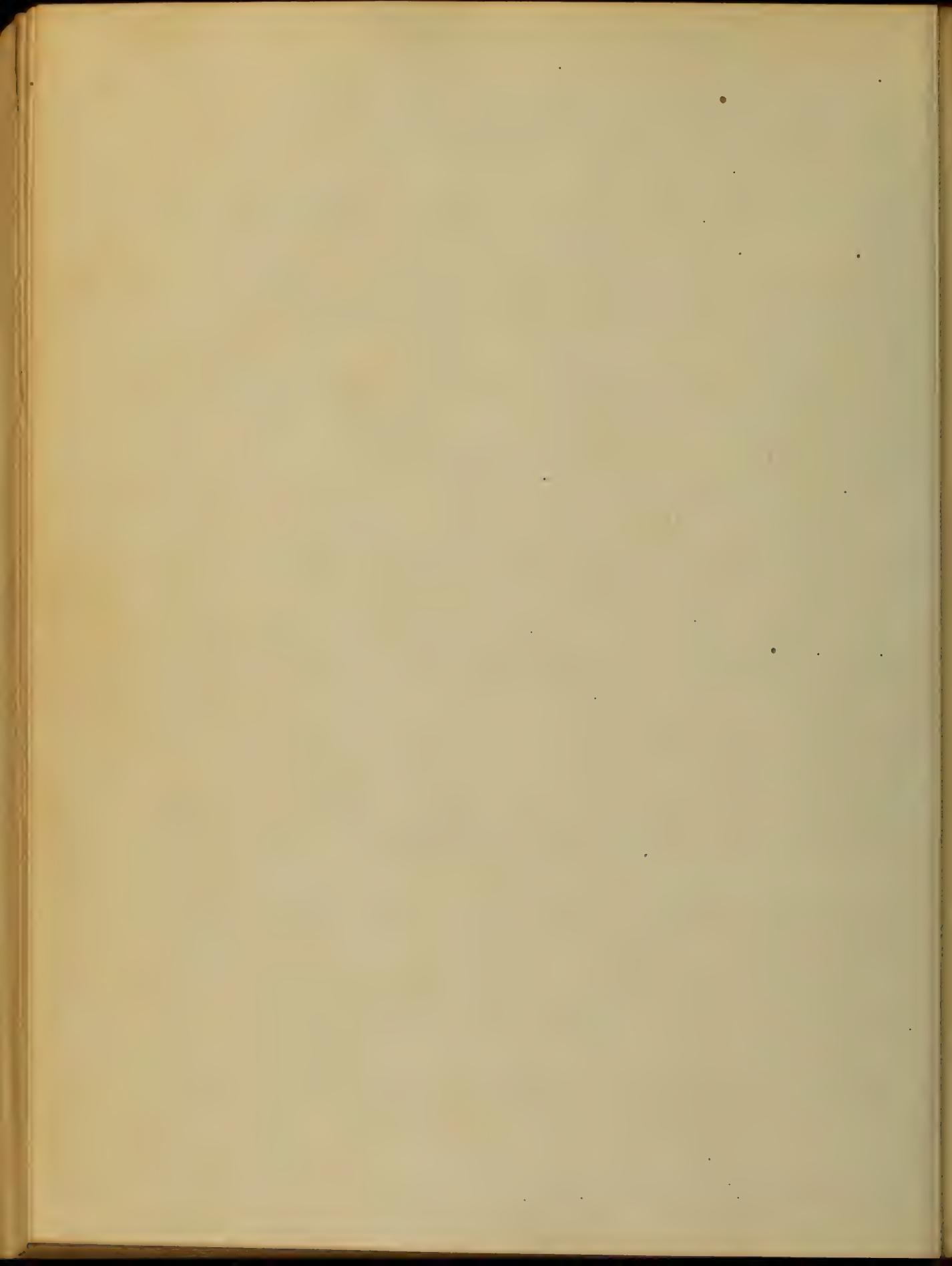


It is not very properly described in a
consideration of Typhoid fever which
should receive due consideration with a
consideration of the disease known as
Typhoid Malaria, where Typhoid symp-
toms exist without the lesion of that
disease. In the third stage or that of
tertiary involution, there are rigors
and of frequent recurrence. The degree
of prostration becomes extreme, the
expectoration purulent or sanguineous,
abscesses are formed by the disorgan-
ization of the tissue, and emaciation



in a few cases may be present; it
is detected by the peculiar and fetid
odor of the breath, so characteristic
of gangrene.

The diagnosis of Pneumonia is
more correctly made out by means
of the physical signs, than by the symptoms
alone. In the first stage no distinct
slight dullness over pneumonia. Auscult-
ation reveals during inspiration
a fine crepitant rale. Differing from
the crackling sound heard over
the trachea; and considered highly suspicious



of the disease. When hydatiditis
has taken place, there is an entire

absence of all vesicular sound;

but owing to the violent constricting
power of the solidified lung, a

blowing sound is conveyed to the

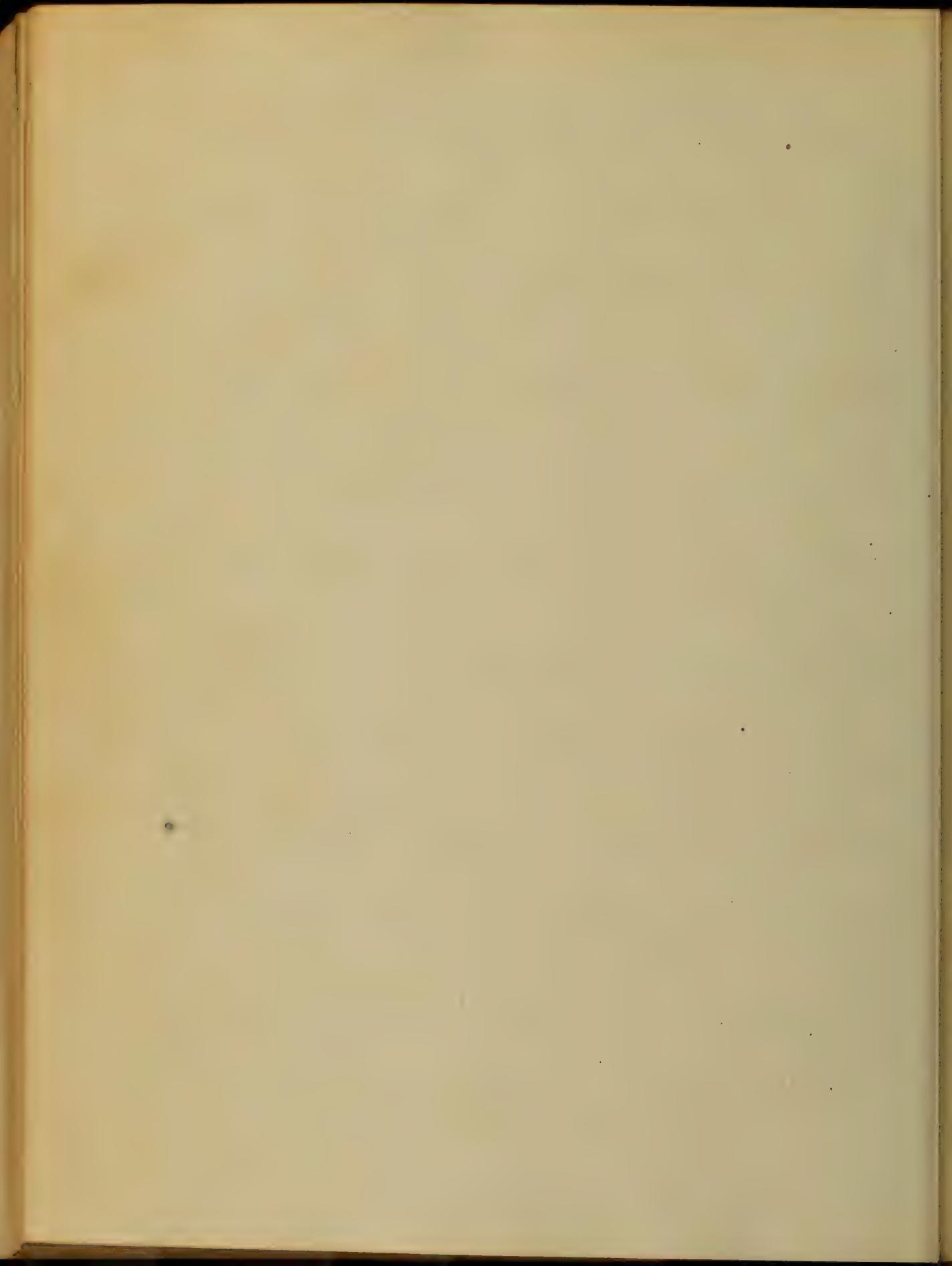
ear, produced by the ~~passage~~ of
air over the bronchial mucous

membrane. Bronchial inspiration.

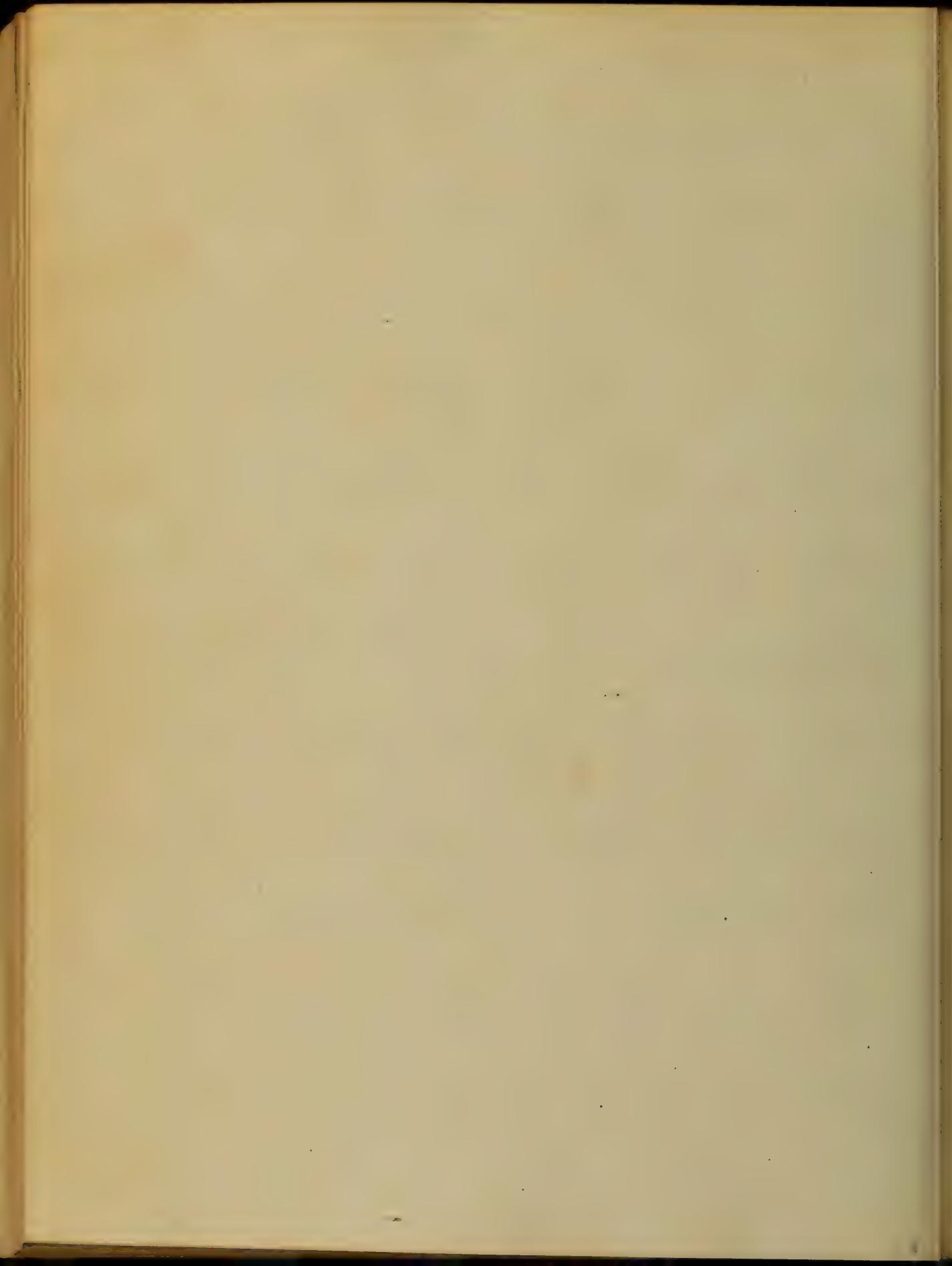
In the patient of Dr. H. the voice

appears to be formed immediately
over the ear, technically known

as, bronchiophony. The vocal sounds



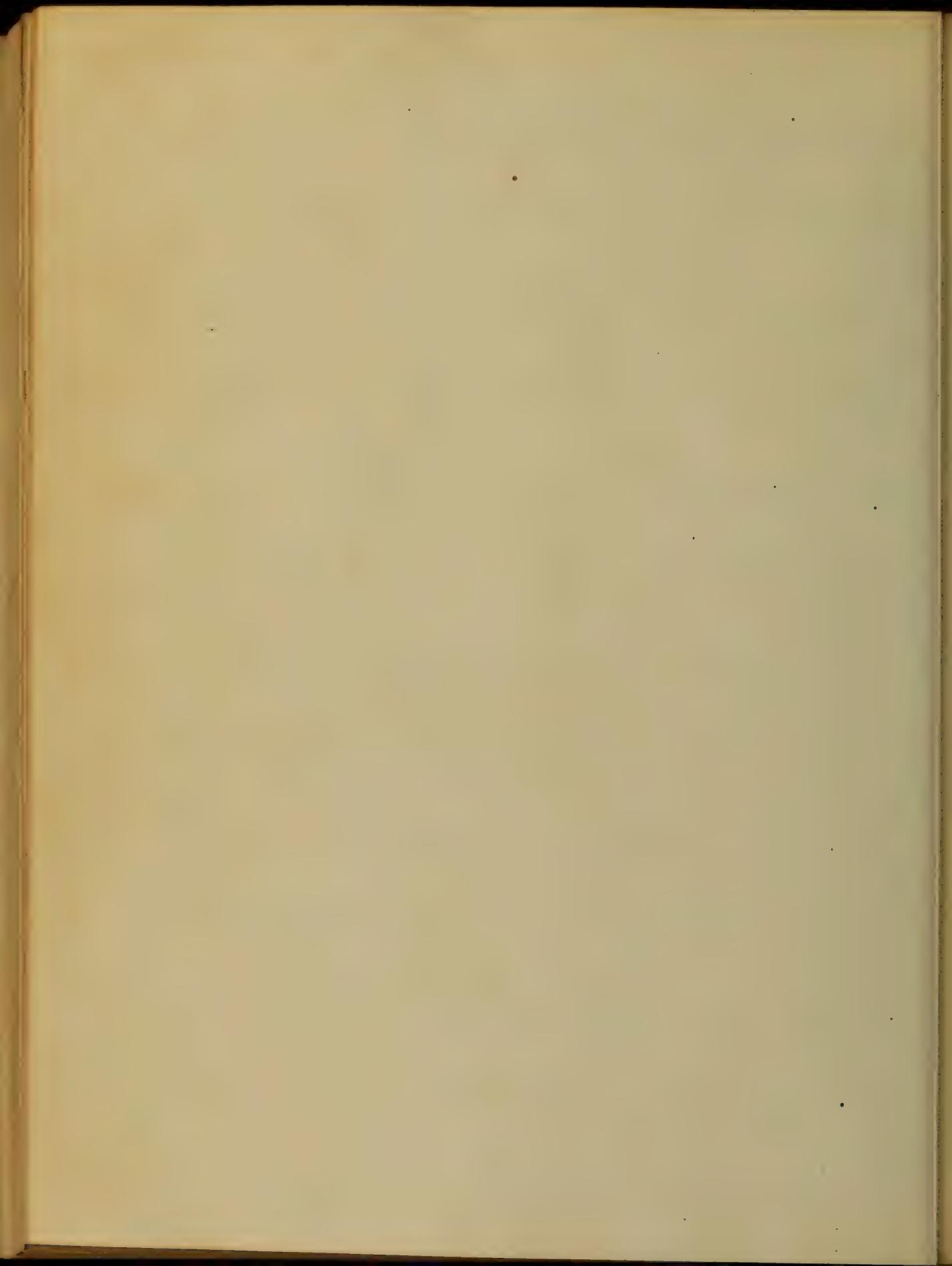
is also increased. Complete dulness
or rather flattening on percussion
exists in this stage. The normal
Lounds in the healthy ^{lung} are decreased
in intensity in consequence of the
absence of extra labor imposed
upon it. If the exudation be removed
by aspiration as is the case in most
instances, which terminally occurs,
the dulness, ^{now} becoming ill
and less marked. The normal
vesicular murmur gradually
breaks its appearance while the bron-



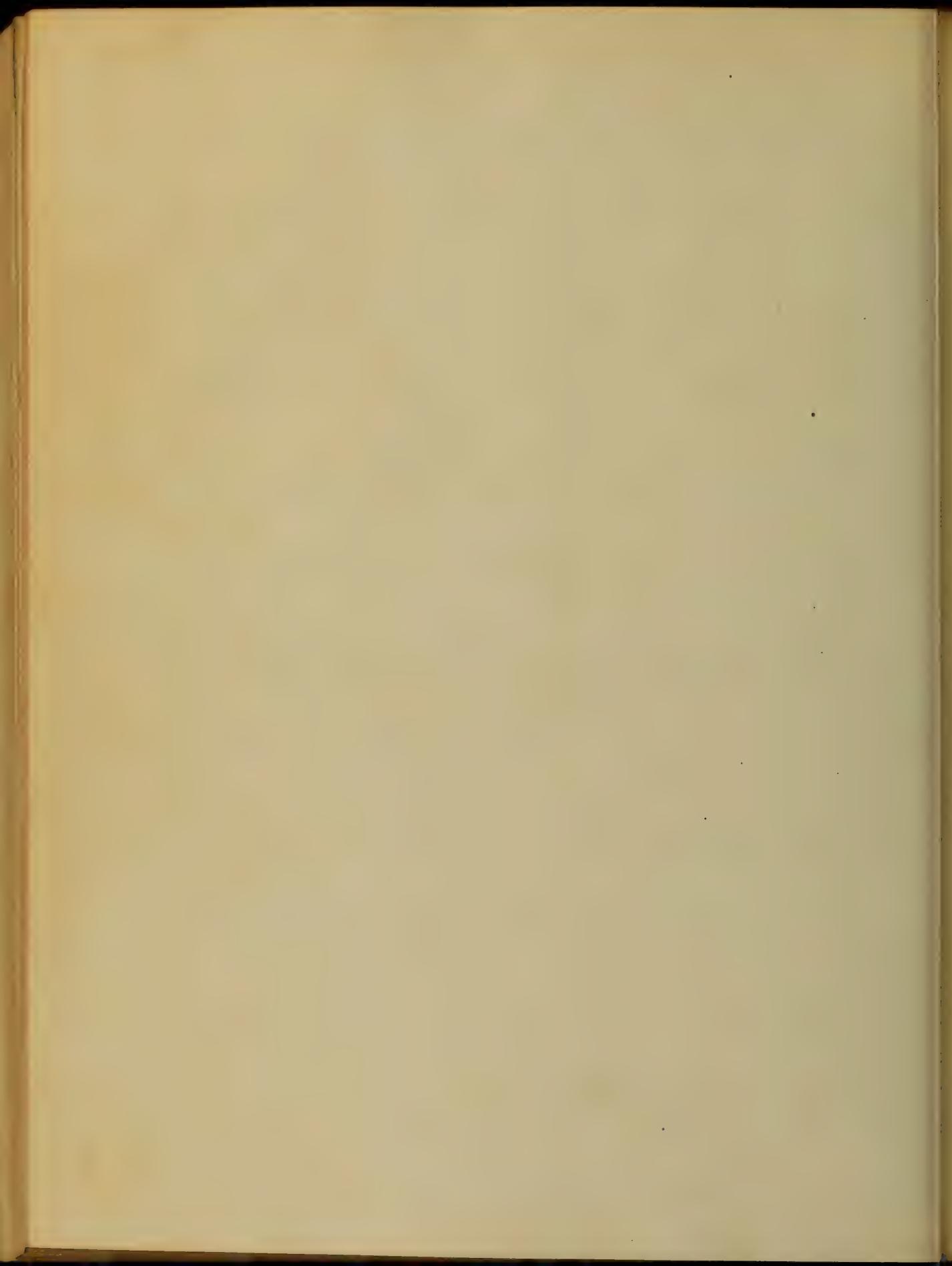
This sound becomes evident.

By the merging of the rattling,
bronchial, and rattling vesicular
sounds. We have the characteristic
ular Respiration of Dr Flint.

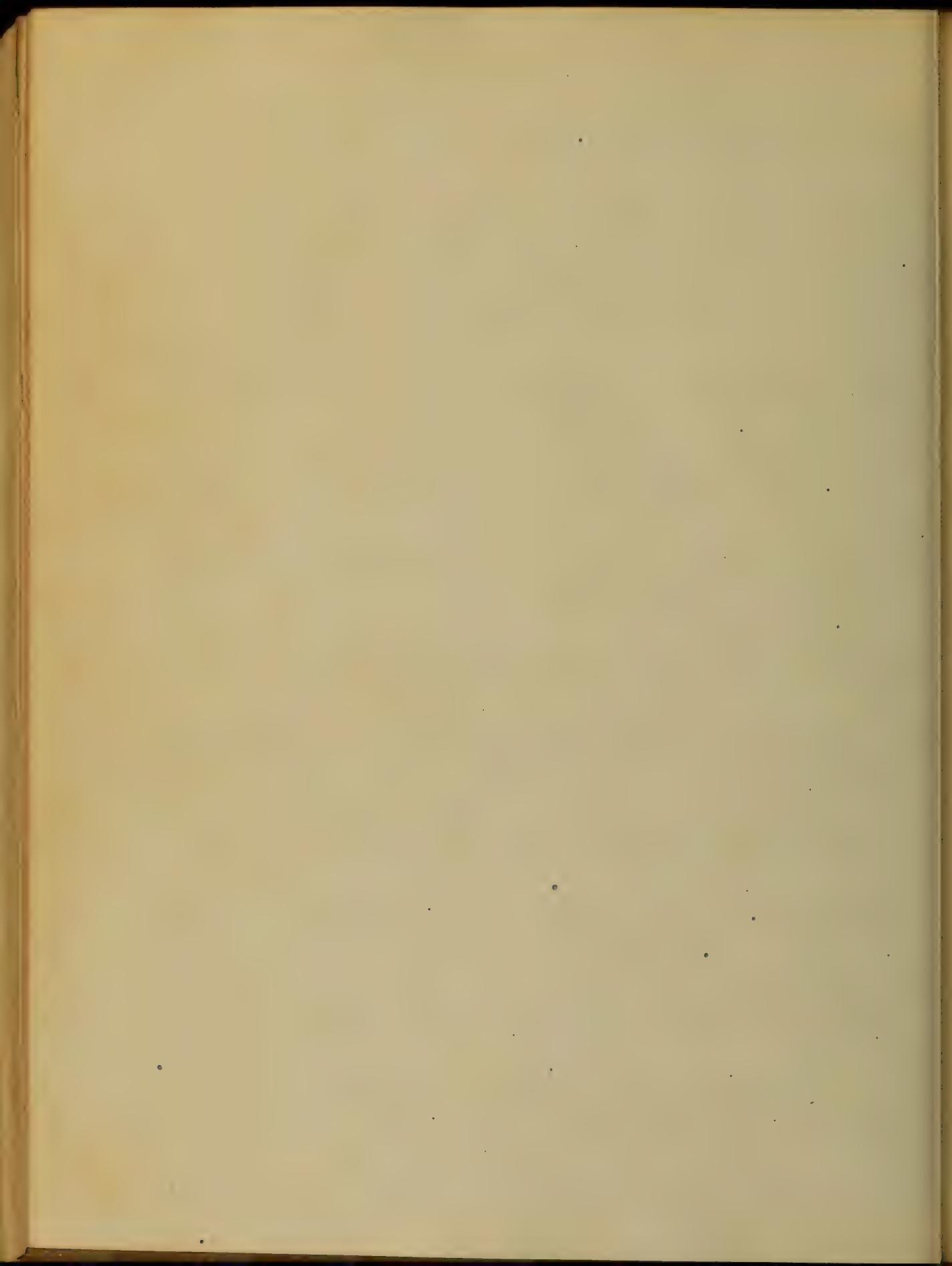
The physical signs of the third
stage, are nearly identical with
those in the second; if a cavity
be formed by the absorption of
the lung substance, a cavernous sound
is evident. This is rare as patients
occurring succumb to the disease
before this stage is reached.



The Prognosis is influenced greatly
by the complications which so frequently
arise in the course of the disease.
The tendency of simple uncomplicated
Acute Malaria is varying in
proportion to the amount of Lung tissue invol-
ved. The Prognosis is rendered
unfavorable by the occurrence
of crisis like fulminant and
Delirium Tremens &c. When suppura-
tion and abscesses occur recovery is
hard. Much depends on tubercles

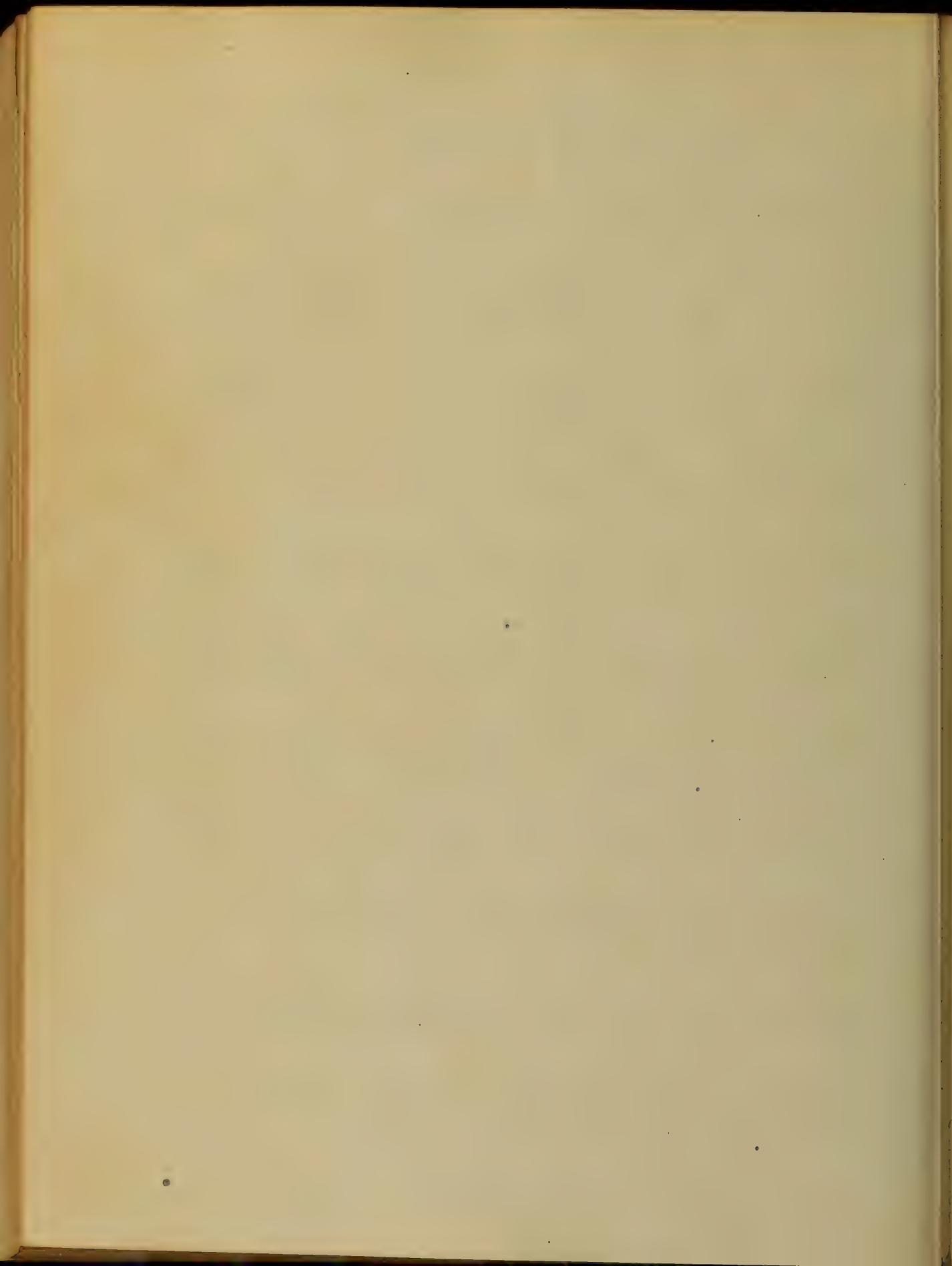


of the patient, as the most un-
promising Cases sometimes enter
into Recovery. The symptoms of
a violent convulsive disorder
are, great frequency & sieblance of
the pulse. Hurried Respiration; dyspnoea
and delirium; on Typhoid Cases low
and muttering, vividness of the
imagination, confusion of ideas,
bloody or mucous-purulent expectoration
Convalescence from Pneumonia
is usually rapid and uninterrupted
at some places when tubercles



had been discovered, to be
called in "Secession" in much the
more visible a consideration a
present than as the result of the
Secession in itself.

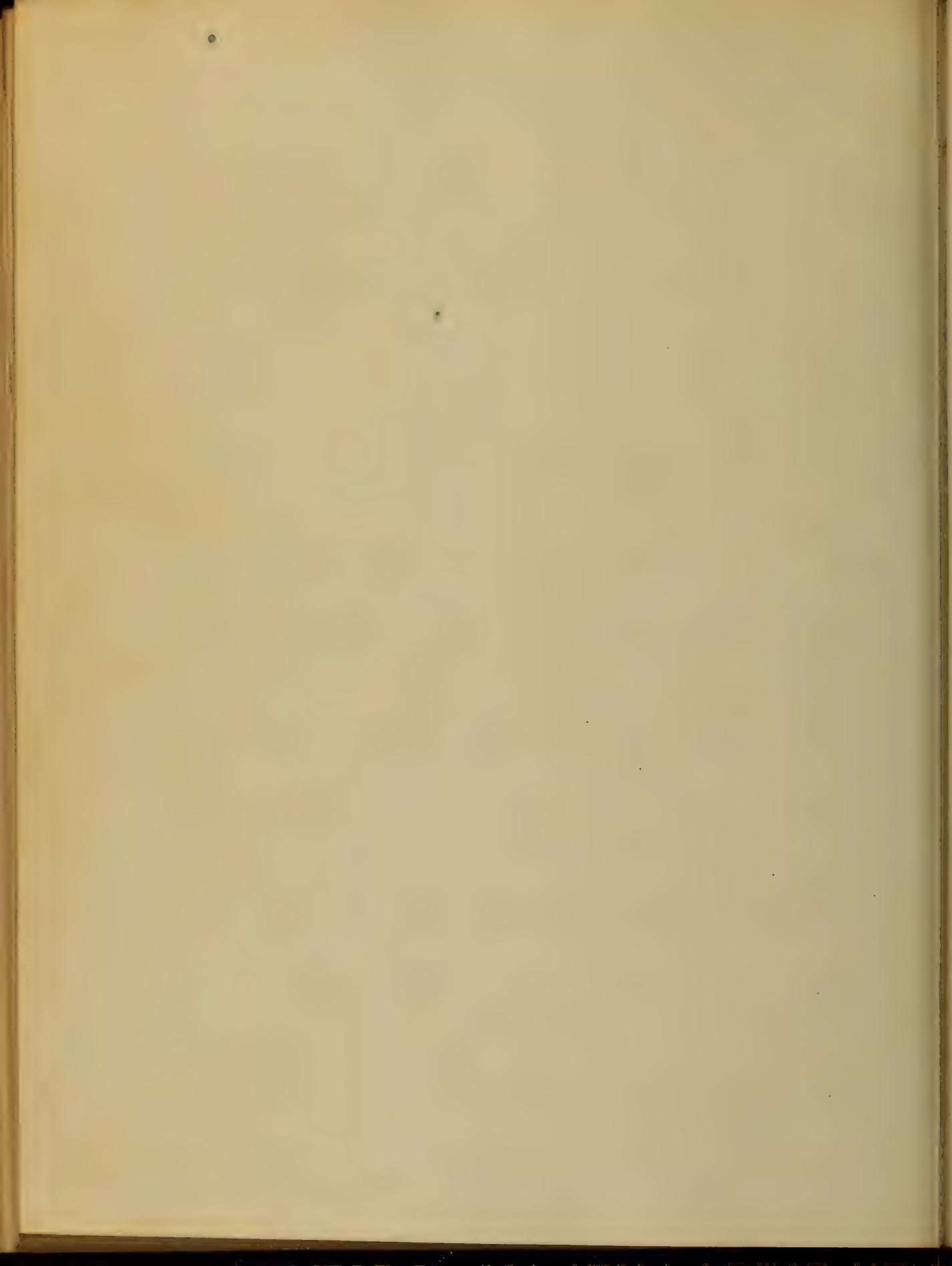
The course of the epidemics
is showing some exposure to cold
or wet, no age or sex are exempt.
From its progress there are more
frequently attacked than women.
The result of their greater exposure,
is more prevalent in the middle
and Southern than in the



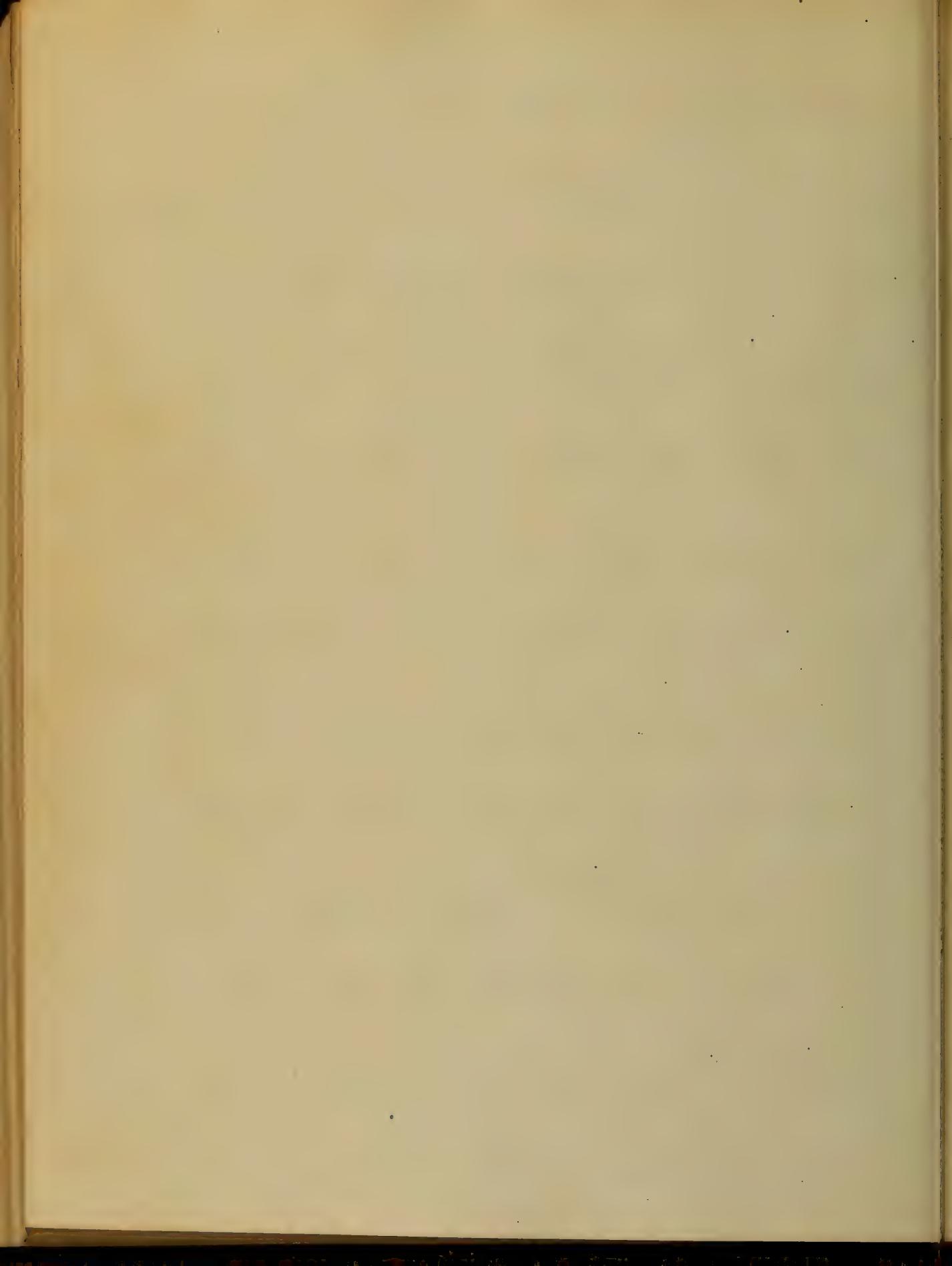
Northern States.

The Pathological Character of
This Disease is peculiar. In in-
flammation of the Pleura, the
Exudation becomes organized, in
that of the air-passages; it is
expectorated; but in Pneumonia
it is reabsorbed; or broken down
into fluid.

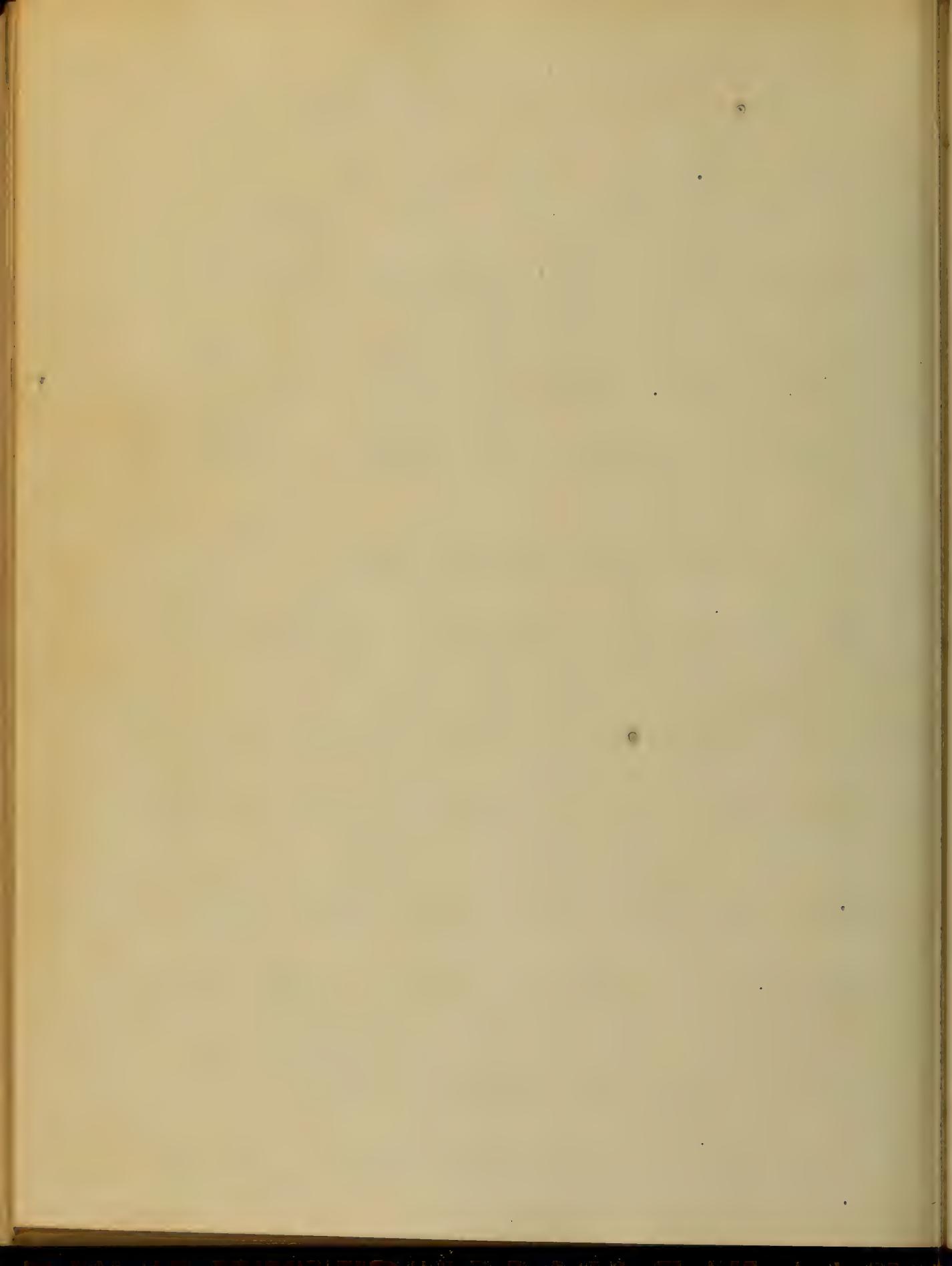
The Clinical History of no disease
has been more carefully studied, or
correctly made out, than that of Pne-
umonia; yet in none does there exist



greater diversity of opinion as to
Treatment. The first and class advoating
affection, to its fullest extent, bleeding,
blisters, poultices and loculi with the view
of expelling drugs. Another class, using
universal stimulation. Fortunately for
humanity, there is a third class out
numbering either of the former, who
take a middle medium between the
two extremes, at liberty to deplete or
stimulate as the indications seem
to require, in other words treating
the symptoms as they arise.

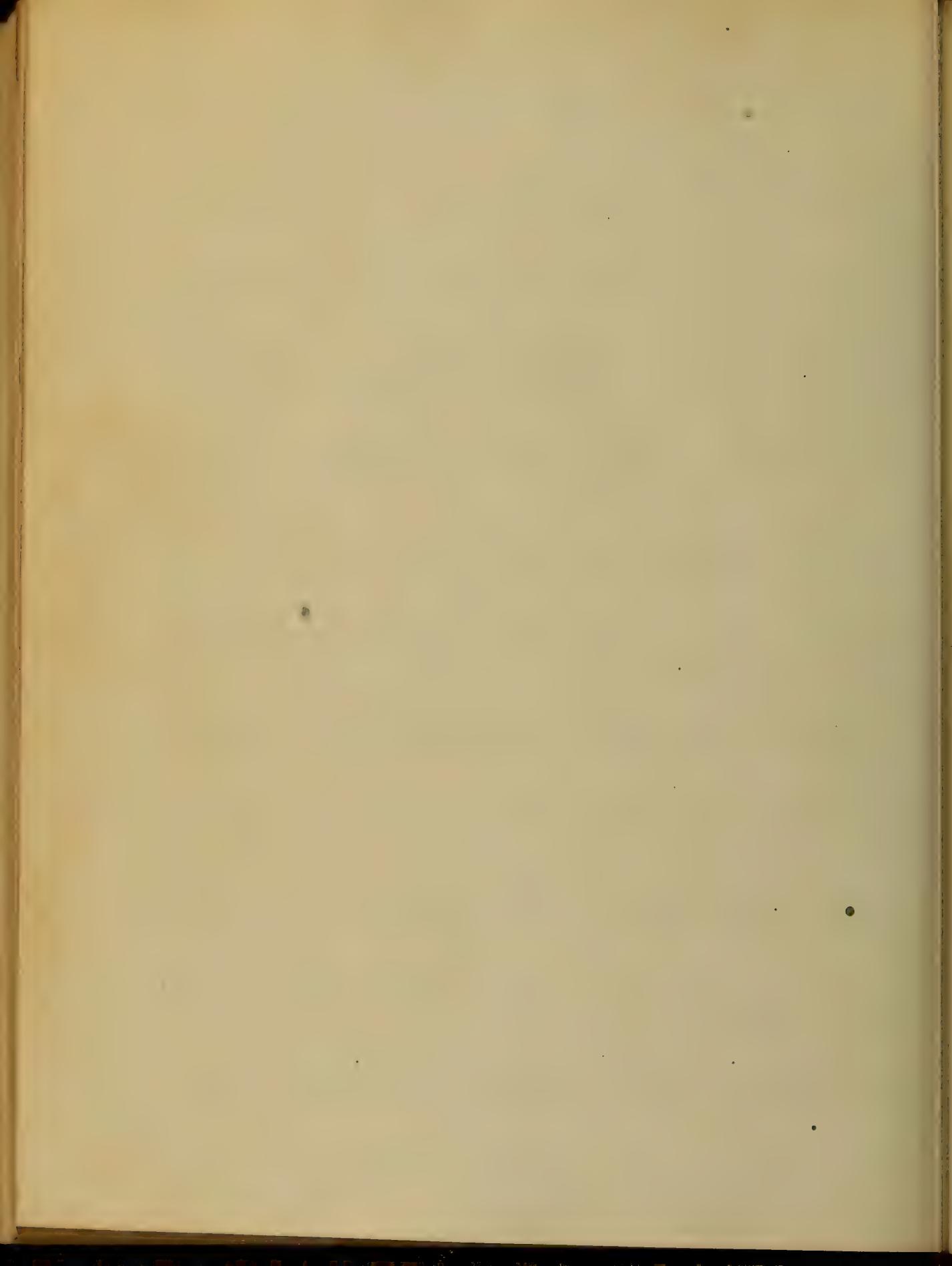


The treatment suitable in each stage
of the disease, is somewhat different.
Blood letting, the most violent of all
remedies, has by many been thought
adequate to arrest the disease, in the
first or stage of engorgement; but
the possible if not highly probable
bad effect from so far reducing
the vital powers of the patient, precludes
it now. This will defend much of
course upon the patient's strength
and vigor of constitution. There
is one condition, however, in which

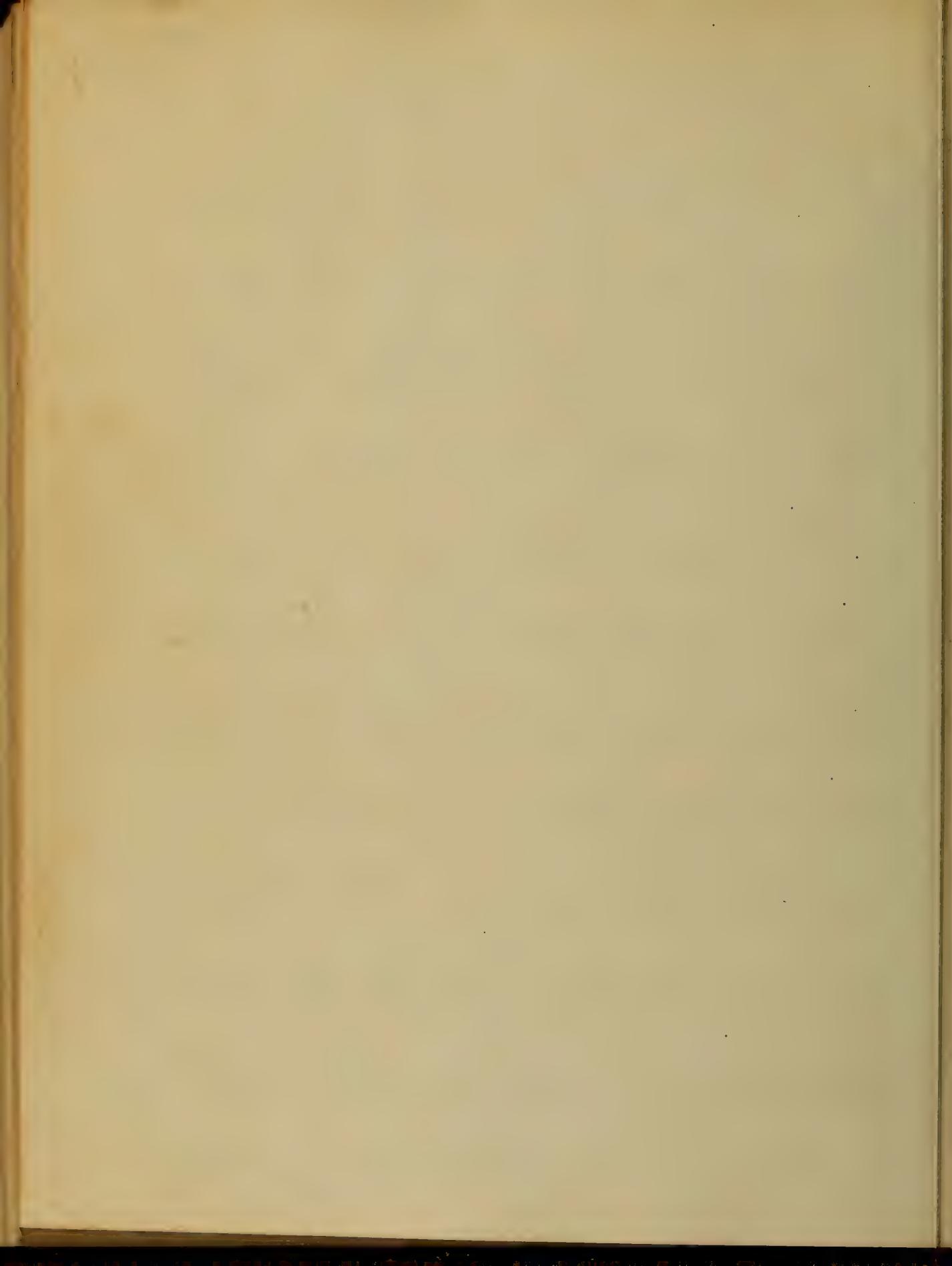


all agreed, that the abstraction
of blood is of the greatest utility;
viz. where from retarded Pulmonary
circulation. The right cavities of
the heart become distended, causing
great difficulty, with irregular
and irregular action of the heart.

In these cases, the abstraction of
blood restores the equilibrium of the
circulation, and lessens the difficulty
of respiration. Local bleeding is not
subject to the same objections; and
acts beneficially also as a remedial.



If it be deemed necessary to move
the bowels, a saline opient should
be used, opium in some one of its
forms, to allay pain, and produce
sleep. Dover's powder is both antispas-
modic and diaphoretic. Tincture of Sassafras
afflict to the chest is both alterative
and counter irritant. Hot fomentations
Turpentine Salves &c. will be found
slightly useful, an oil silk jacket
covering the whole of the thorax, keeps
the body moist, and at an even tem-
perature, another advantage is, that it



promotes physical explorations.

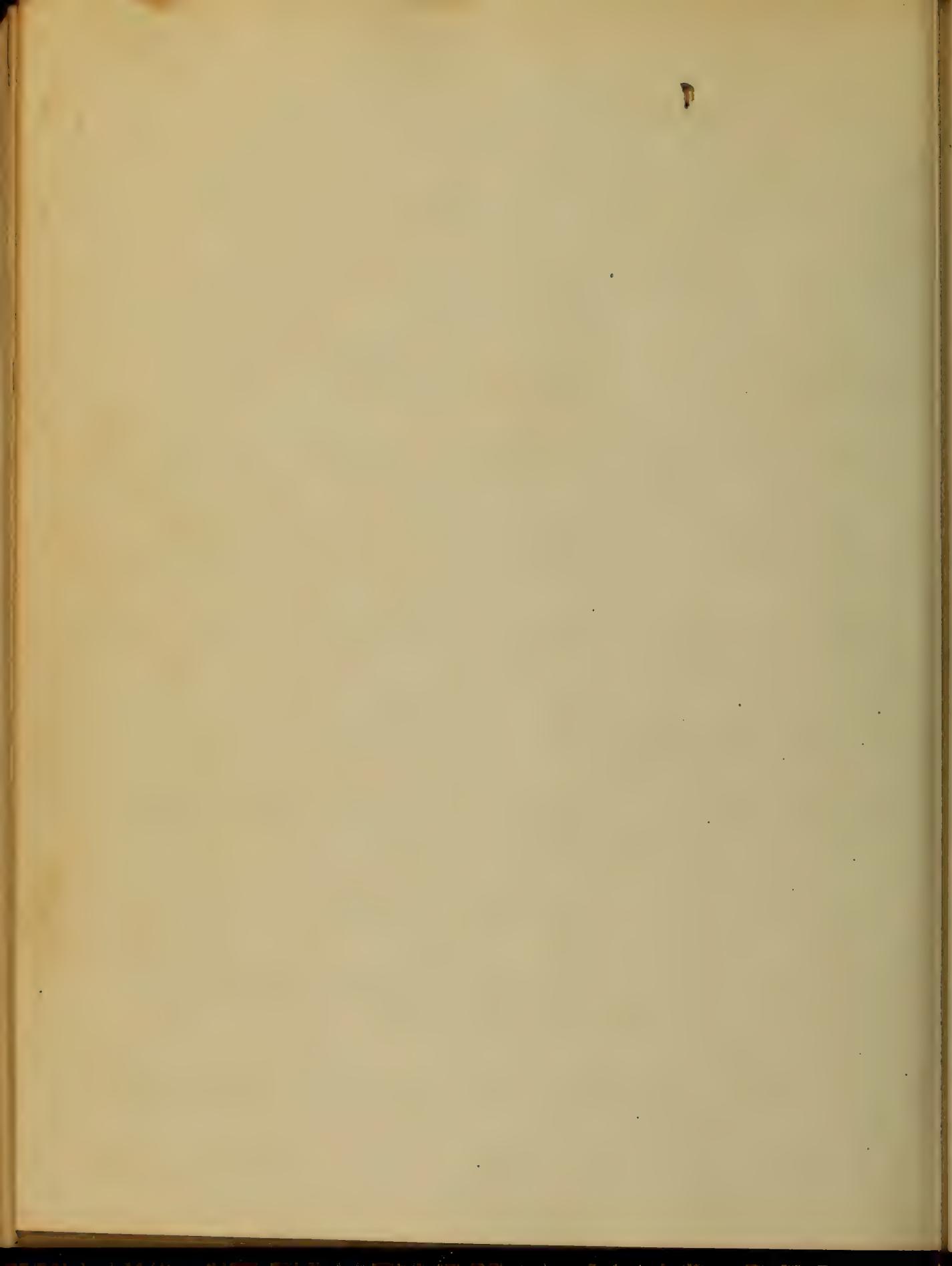
In the Second Stage two new conditions arise, to which the attention of the physician should be directed, first the patient's strength must be supported till the exudation can be absorbed,

The second is to facilitate if possible

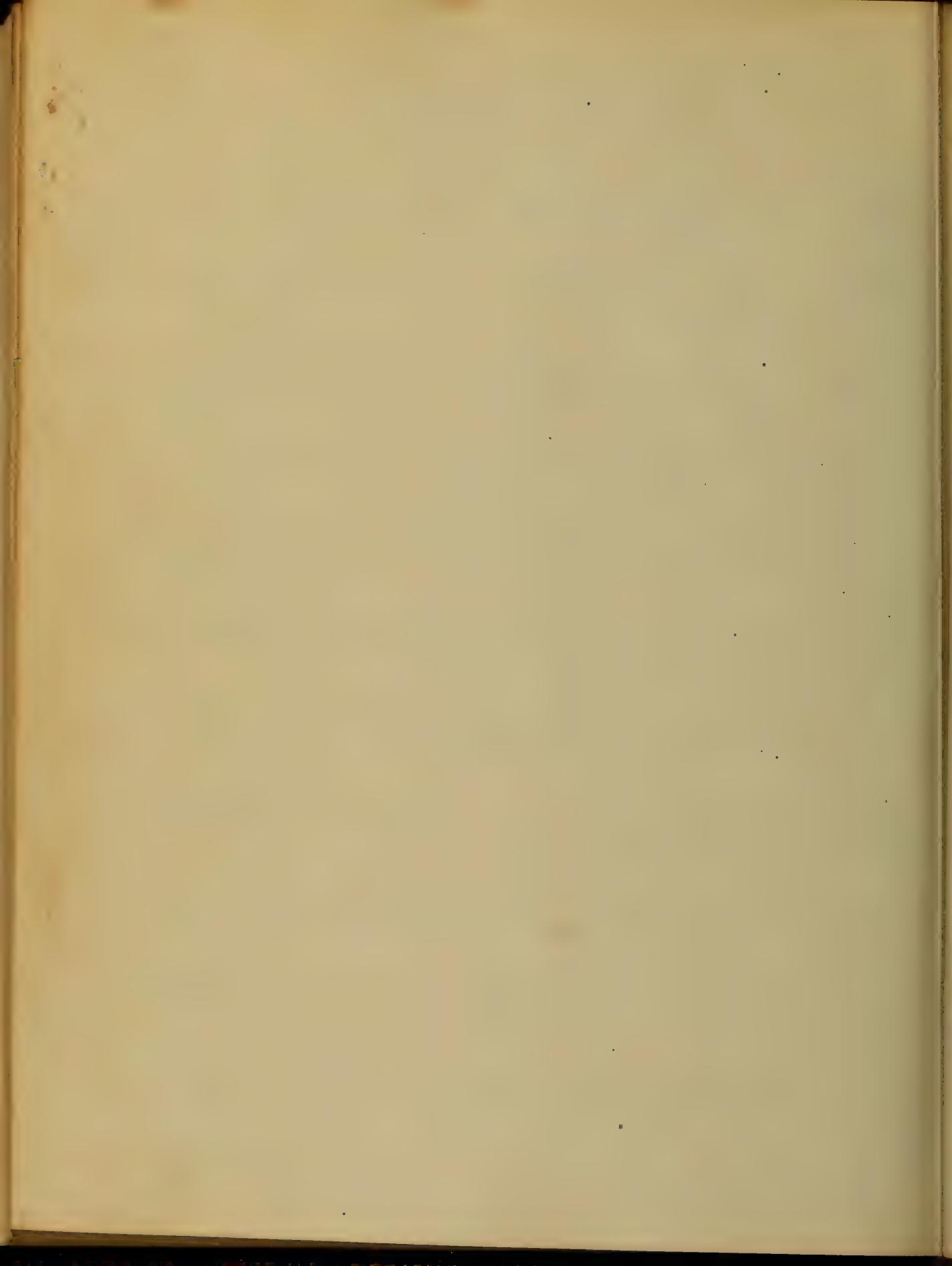
The removal of the exuded matter.

Nourishing diet, easy of digestion, such as buffeons, milk &c, will meet

The first indication, the old plan of starving patients, is fast losing ground, the theory that food is



Inflammation has at last been exploded,
and no physician, whom prejudice
does not control, would think of
withholding from his patient's
life giving elements. Iodide of
Potassium is thought to be a sorb-
facient, - In most Cases Natural Effect
is removed by exhalation. Mercury,
at one time enjoyed quite a reputation
for its Sorb-facient powers; but at
present is rarely if ever resorted
to. If the fever continues, some
fetidizing mixture may be given,



Preparations of ammonia, are thought

to prevent the formation of hard-
clots, of the sputum into

The preparative stage, Alcohol,

Carbamate of Ammonia, &c should

be added to the measures already

in use to support the patient.

Expectorants do little good so far

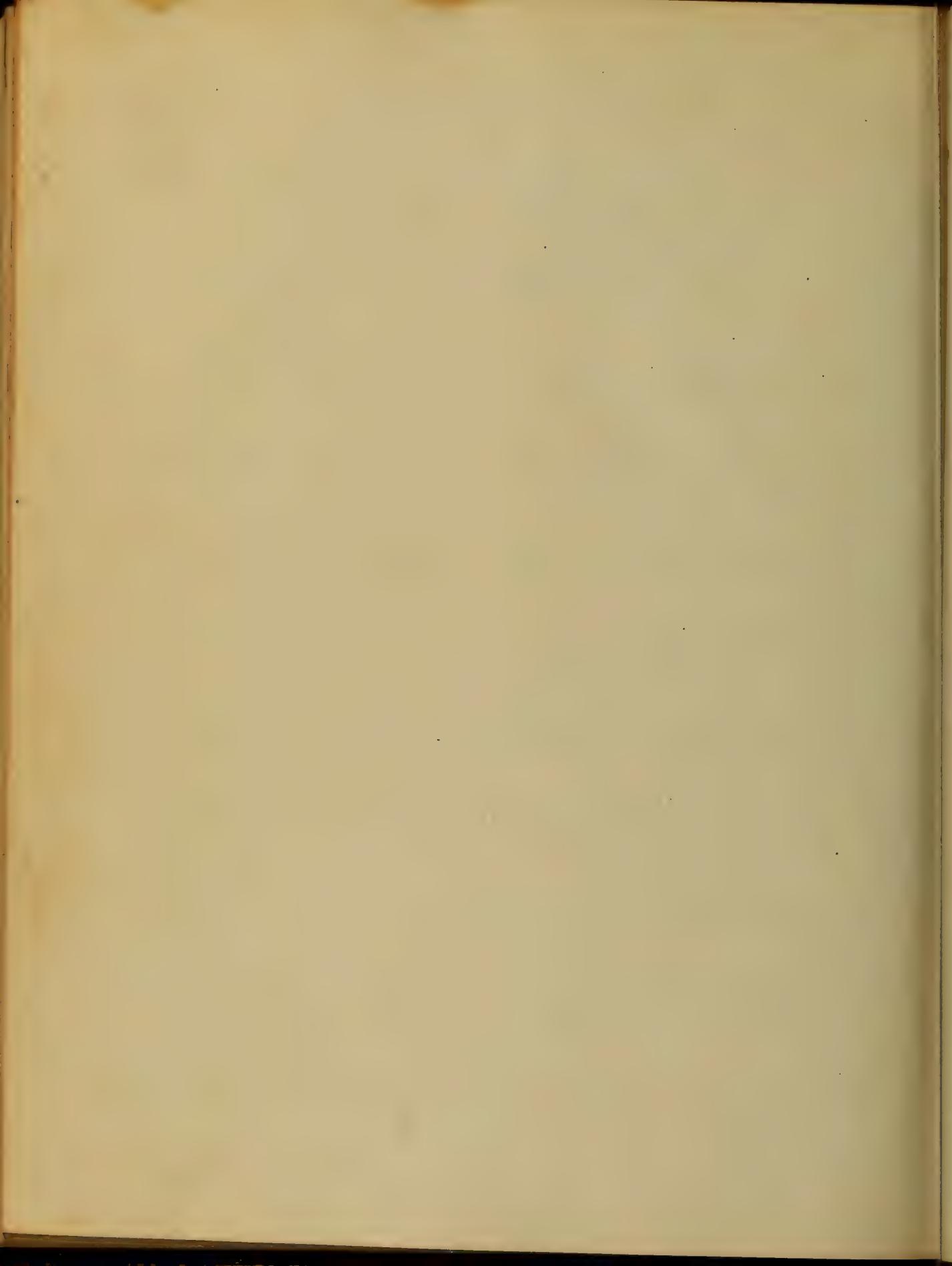
as the pneumonia is concerned;

but may act beneficially upon the at-

tendant Bronchitis.

Complications should be met

with decisiveness, appropriate to their



When Intermittent fever exists
Quinia should be promptly administered,
Ginger, Camphor, tonics
such as Rose, Quinine or some
of the Spriggle Bitters should
be used, fresh air, and early
exercise will hasten the convalescence
and restore the strength.

N. D. Baker

