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O U T L I N E S

OF

LECTURES, &c.

O U T L I N E S

O F

L E C T U R E S

O N T H E

P R A C T I C E O F P H Y S I C .

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OUTLINES OF LECTURES

O N

THE PRACTICE OF PHYSIC.

ON the subject of *fevers*, different doctrines are delivered, and various opinions are entertained; and the manner of treating febrile diseases is influenced by the theories of them.

It is consequently agreed, that the present stock of observations is insufficient for the discovery of the proximate causes of fevers, or for the establishment of principles that point out a constant mode of prevention, and cure.

In order to ascertain the extent of the knowledge hitherto acquired of these diseases, and to be able to form a just opinion of the foundation of the prevailing doctrines, and modes of practice, it may be found useful to take

A general View of the principal Systems, and of the Progress made at different Times, in the Cultivation of the Knowledge of Fevers:

*Among the Greek and Roman Physicians,
from Hippocrates to Celsus.*

Hippocrates understood by the term fever, any disease in which was present a preternatural de-

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gree

gree of *heat* felt by the patient, or evident to the feeling of the physician. Hence the numerous diseases in his writings comprehended under the class of fevers; and at this day, according to the popular acceptation. The pulse is not mentioned among the symptoms, but great attention was paid to the urine. He appears to have considered this preternatural heat or fire, sometimes as the essential symptom, but, at other times as the cause or essence of fevers.

Some of the distinctions of the different kinds of fevers made by Hippocrates, are not perhaps sufficiently explained to be intelligible; others are pointed out according to the difference of their remote causes, their duration, their progress, and their symptoms. Perhaps he divided fevers into two classes, viz. those with concomitant local affections, and those in which no considerable topical disease was present. The disorder of the whole constitution, in inflammations, was reckoned among fevers; and such fevers were denominated according to the seat of the local affection. It is not clear that he made the very useful practical distinction between fevers independent of any local affection, and symptomatic fevers. He mentions intermittent and continued fevers; among the latter, the *καῦσος* or *πυρ*, the *Ephemera*, the Mortal-fever, the *Leipyria*, the *Epiala*, the *τυφός*, and about forty others. The principal remote causes

causes mentioned were, the Atmosphere, and Bile ; also repletion, indigestion, ingesta, heat, cold, miasmata, infection, obstruction from bile and pituita, emotions and passions, irritation, fatigue.

The descriptions of fevers by Hippocrates were apparently written from Nature ; and most of the symptoms have been found on subsequent observation ; but they are too imperfect to be a foundation for reasoning on their proximate cause, and seem intended only to point out the pathognomonic symptoms, and the signs of the progress of these diseases. The phænomena of fevers he seems to have referred to two sources, viz. to the proximate cause, or to the disease itself ; and to the action of a power existing in the animal œconomy, called *Nature* :—the tendency of the former condition is to occasion death ; of the action of the latter to prevent death by diseases, and to remove them, hence termed *Natura morborum medicatrix*. The exacerbation, and remission of the symptoms were referred to the greater exertions, at particular times, of the disease, or Nature, or of both. Spontaneous cures were ascribed to Nature. Hence fever was defined, figuratively, to be a conflict, between the disease and the *natura medicatrix*.—Death was accounted for from the victory obtained by the disease—Health, from the victory of Nature over the disease.

In fevers it was supposed peccant or morbid matter existed; which, in the beginning of them, was in a crude state, but underwent a change, called concoction, in the progress of these diseases, by the action of the *natura medicatrix*. When this was concocted, it was expelled by this power in the discharges: by turbid urine, vomiting, purging, expectoration, hæmorrhages, abscesses, and especially by sweating.

Hippocrates observed considerable changes in the appearances, and sudden exacerbations or remissions of the symptoms during fevers:—at these times, or immediately afterwards, discharges frequently took place, and these diseases declined, or disappeared, or grew more violent, and fatal; and, according to the various appearances, a judgment was formed of their future progress, duration, and issue; such states were accordingly called *crises*, or *judicia*; they were explained by the hypothesis, that at those times the *natura medicatrix* made exertions to remove the disease, and that then a part, or the whole, of the morbid matter was attempted to be expelled. These *crises* were supposed to occur at certain determinate periods, especially on *uneven days*, reckoning from the first day of the fever:—they were called *critical*, *decretory*, or *judicatory days*. Of these, some were observed to be more frequent than others, and some more favorable, and decisive than others. Their
existence

existence is attempted to be shewn by the analogy of the periods in some eruptive fevers, inflammations, suppurations, putrefactions, maturation of fruit, incubation, growth of animals, &c. The order of these days is very different in different parts of Hippocrates's works, and in the same parts in different copies;—it is not consistent with his own hypothesis;—it is inconsistent with his own cases;—it has not been confirmed by subsequent observation;—it is supposed to be a mere phantasy, originating in the doctrine of Pythagoras concerning the influence of odd numbers. Critical days were not admitted to exist, by physicians who practised in nearly the same climates as that of Cos. Later writers who have vindicated this doctrine, have supposed the difference of climate and treatment to disturb this order, and to prevent the occurrence of critical periods, or to render them less evident than formerly.

The general principle on which Hippocrates practised in fevers, namely, that of increasing, diminishing, and exciting; but, generally, being a mere spectator of the actions of Nature, necessarily required the most accurate and minute observation of the phænomena; and, at the same time, instructed him in the appearances connected with the increase, declension, duration, and other changes of fevers. This venerable physician having, probably, a superior genius in the art of observation,

observation, his knowledge of these exceeded that of most other men ; on which account, he was better able to judge of the issue of diseases : accordingly, the prognostics, as far as they are founded on the contemplation of these observations, have, perhaps, never been so much cultivated as by Hippocrates.

Though it appears that a very considerable proportion of patients died by fevers, he, in numerous cases, did not interpose art, judging the *natura morborum medicatrix* to be adequate to their cure : at other times, he attempted to assist Nature's operation when too weak ; to imitate it when extinguished ; and to restrain it when too violent.

A greater proportion of patients died under this treatment than under some modern plans, in which medicines are employed without any restraint from the apprehension of disturbing Nature.

The symptoms of the *natura morborum medicatrix* are, generally, by modern observers not distinguished, or they are thought to be equivocal ; and abundant experience has instructed us, that certain medicines and means, employed in the present mode of treatment, which are not dictated by the actions of the above power, either supersede the exertions of Nature, or, when present, have little or no influence on them, and do no
mischief

mischief by altering or impeding them, excepting in the case of some spontaneous evacuations that evidently cure fevers.

REMEDIES.—Differed according to the channel by which the febrile matter was to be discharged.

Blood-letting indicated by signs of increased action of the heart or arteries; of congestion;—by spontaneous hæmorrhages in the parts affected—scarification to let out blood—dry cupping to discharge spirit—employed especially on the first day, and certainly before the fourth, because afterwards liable to interfere with the concoction and crises, but in some urgent cases as late as the eighth day.

Vomiting. Scarcely any fever cured by this operation spontaneously; therefore a crisis not attempted to be produced by this means—only indicated as a palliative in some cases in which foulness of the stomach ^{was} present; not often excited.—By what substances; melicraton; large quantities of water with honey; oxymel; decoctions of herbs.

Purging with two views—to produce or promote a crisis, and to palliate. Purgatives not frequently exhibited, and always with caution—to excite a critical discharge early in the disease, and when symptoms were present of the febrile matter being in motion, shewn especially by the
appearances

appearances of the urine—perhaps not employed in the advanced state of the fever, nor in the declension, or only when the crisis had been imperfect. These medicines were administered to palliate, by unloading the *primæ viæ*, by diminishing turgescence, by carrying off part of the febrile matter. In some cases, clysters to mitigate the fever and favor the critical discharges, during the whole course of the fever. Clysters much more frequently employed than purgatives, to mitigate the symptoms. Purgings not excited on the critical days, nor previously to V.S., nor when expectoration had come on. Substances employed—colocynth; elaterium; euphorbium; scammony; black and white hellebore; nitrum; thapsia; ty-melæa; peplium; rhamnus; cnicus; *aquâ marina*; common salt; infusion of beet; linseed; fænugreek; daucus; fefeli; cyminum; anisum; oil and honey; honey in water; whey; salt in milk.

Sweating: excited, perhaps in a few instances, to prove critical, in imitation of spontaneous cases; as well as frequently to promote crises, and palliate. Excited when signs of coction appeared in the urine; when disposition to sweating was evident but nature seemed to be too weak—by the warm bath; washing with warm water; rubbing with hot oil; fomentations; covering the patient with cloathes in bed; bagnio; sweating chair.—by diluent warm drink copiously; juice of laser in wine.

Expectoration—

Expectoration ;—in febrile diseases of the breast, promoted by ptisan, and honey in ptisan—fomentations—liniments.

Diet, depended more on this than medicines—no food or drink near the time, or during the febrile paroxysms, or on the critical days—very little nourishment in violent fevers, and the quantity was diminished as the fever increased, but never prescribed total abstinence for several days in the beginning of fevers—vegetable diet in a humid form most proper—ptisan, or boiled barley, in the first part of fevers ; cream of barley near the height of the disease ; other farinaceous decoctions ; refrigerant herbs and fruits ; *aqua mulsa*, or hydromel ; acetous acid in hydromel, to prevent the honey forming bile ; sometimes wine in water—every kind of food in small quantity—probably no animal food—milk prohibited—mere water for drink not approved of—quantity of food according to age, and custom ; infants and children allowed more than adults ;—the use of diluents from this author.

Regimen. No exercise allowed, contrary to his master Herodicus, nor gestation excepting walking very gently, and frictions—patients may sit up out of bed.

Palliatives : to diminish *pain*—fomentations—cataplasms—unguents—heated bodies applied to parts affected with pain—clysters. To diminish *heat*—cold water internally and externally—cold oil to the hypochondria — beet leaves, cucumbers, topically in the erysipelas. Knew the somniferous quality of opium, but not used in fevers.

Diocles Carystius. All fevers symptomatic, or produced by some other primary and *local* affection :—probably first considered the frequency of the pulse as an essential symptom of fever.—His practice upon the plan of that of Hippocrates.

Praxagoras : the cause of fever was in the fluids ; in the *vena cava* between the liver and kidney—the symptoms to be observed in the pulse :—the founder of the pathology of the humours of Galen :—the arteries contain spirit ; and the veins blood—pulsation occasioned by the arteries, as well as by the heart.

Cbryfippus. Fever consisted in the motion of the arteries :—substituted abstinence for bleeding and purging, but employed bland clysters and vomits.

Herophilus

Herophilus improved the system of Praxagoras.

Erasistratus also, contrary to the Greek school, prescribed abstinence in place of V. S. and purging, even in active hæmorrhagies :—fever and inflammation consisted in the action of the arteries, by the transfusion of blood into them—the pulse afforded the pathognomonic symptoms of fever—fever a general inflammation, and inflammation a topical fever.

Archigenes, of the pneumatic sect :—fever occasioned by the disturbance of the spirit which presides over the body in health, and which, in diseases, is irritated. Perhaps first employed blistering by cantharides.

Asclepiades rejected Hippocrates's doctrine of nature, coction, critical days, and his mode of treatment—on the Epicurean principles, fevers and all other diseases depended upon the state of extension, or cohesion of the solids ; in certain conditions of which the corpuscules obstructed the invisible foramina, in other states the pores were too large, or dilated—expelled purging, and generally blood-letting, though he frequently used bland glysters—employed the fever itself as

the remedy—total abstinence from food and drink till the fourth day of the fever ; prevented sleep during this time, and irritated by exercise, gestation, light, thirst, refusing to gratify the cravings, and then indulged the appetite and tempted the sick to take food by the variety allowed. Pain occasioned by obstruction to the passage of atoms, and by blood-letting the pores were relaxed and the obstruction removed. Bleeding in the pleurisy proper because there is much pain, but not in the peripneumony because there is little :—that in fever there was inflammation—chief remedies, gestation, friction, sweating by the hot bath ; which last remedy he employed much more frequently than his predecessors.

Themison : with Aesclepiades — all fevers, and diseases in general, depended on a too contracted or too lax state of the solids—preternatural heat in all fevers—first applied leeches in pains of the head — principal remedies, blood-letting and purging for the *strictum*, and cold water for the *laxum*—no food till three days after the fever had declined—practice described by Celsus, ch. vii, l. 3.

From Celsus to Galen.

Celsus divided fevers into continued, intermittent,

tent, and those attending other diseases—original, and symptomatic—some species “both diseases and remedies”—horror or rigor not a part of the fever, and though general not constant symptoms, nor did they always precede heat—rejected the doctrine of critical days—quartan never fatal—some quotidian paroxysms without a cold stage.—His pathology perhaps that of the *stridium* and *laxum* of Themison.—Fever did not essentially consist of paroxysms; in some there being no exacerbation and remission, “ita ut, cœpere, continuant.”

Mentions the slow, erratic, ardent, pestilent, quotidian, tertian, quartan, hemitritæan, continued fevers; the phrenzy, peripneumony, pleurisy, hepatitis, *συνάγκη, ὡς συνάγκη, παρασυνάγκη*; some of which described superficially, and others not at all, yet recommends minute attention to the countenance, &c. of the patients;—pain of the right shoulder or clavicle, and torpor of the right arm in the hepatic fevers.

Remote Causes:—mentions repletion; inanition; heat; cold; summer season; autumn; winds; wet weather; drought; black bile; certain ages.

Prognostics:

Prognostics: many of them admirably just (l. II. c. iii, iv, v, vi, vii, viii. l. III. c. vi.) founded principally on the appearance, gestures, postures, excretions, secretions.

Prevention. Plan for preventing the pestilential fevers very full and complete; consists in preserving vigor and avoiding debilitating causes.

CURE. Regimen; Food and Drink. Considered to be the inventor of the proper time for giving food, and this the best remedy—abstinence on the principle that there is superabundant matter in fevers which will be digested if no addition be made; generally not allowed till the fourth day, and even after this only every other day, but according to the circumstances of strength, age, constitution, climate, season, was given from the first to the fifth day without regard to critical days; therefore differed from Aesclepiades in not making the transition from inedia to satiety, and from the ancients in allowing it before the fever had disappeared—no food during the paroxysms, or exacerbations; or during their customary times of occurrence; therefore especially given at midnight or very early in the mornings—liquid vegetable food most proper, but sometimes animal
food

food and wine.—Drink not allowed till food, therefore not near the time of the paroxysms; but to abate thirst the mouth permitted only to be rinsed—more difficulties with regard to drink than food.—Large room—darkness—pure air—little covering—sleep in the night—watching in the day time—does not appear to allow exercise or gestation.

Sweating the most frequent means, except regimen, of curing fevers—by a warm water bath, fomenting; by a sand bath, a heated room; by friction with hot oil; by covering the body with clothes, or in a bed; by walking, gestation; by warm water the days of and after the paroxysms; by cold water;—in hepatic fevers sweating by the bath. On certain days paroxysms prevented by the bath, warm cloathing, friction—bathing during the whole time of the cold fit; in some cases after it, wine—bathing in slow fevers, and pestilent from the attack. Sweating sometimes prohibited, as in the ardent fever.

Alvi Dejectio. With Aesclepiades, seldom till the latter end of fevers, and then not with the strong cathartics at that time known—belly kept open by certain kinds of food and drink, and sometimes by milk and pullet broth.

Alvi

Alvi Ductio—With *Asclepiades* rarely except bland fluids thought proper—useful, when inedia did not carry off the fever, to cleanse the *primæ viæ*, to remove costiveness, if too weak to bleed, or after the period for bleeding has elapsed, when a great quantity of liquids has been drank before the fever; scarcely proper before the third day, nor while crudity remains; not proper in pestilent fevers, except for children and very weak persons; employed in cold fits of long duration; warm water to be drank the day it is excited. Glysters of warm water; honey and water; decoction of fænugreek, mallow, or ptisan; sea water or other solutions of salt; with oil, *nitrum*, or honey added.

Vomiting. In fevers which begin with horror, because from bile.—In intermittents on the attack of the cold, and beginning of the hot fit produced by warm salt water — alone often cures, with abstinence, by carrying off bile — encouraged when spontaneous — on the fifth day in tertians and fourth in quotidians — on the diminution in pestilent fevers — in the ardent fever sometimes by cold water drank to beyond satiety, as well as to sweat, if to carry off pituita, even before the fourth day. In bilious fevers.

fevers attended with horror or tremor; warm water, warm salt water, or salt-water and honey.

Blood-letting. Whenever the body was too full of blood, and not according to Hippocrates's rule.—From the temples, arms, and feet.—When the whole body affected, general bleeding; in topical complaints, taken from as near the parts affected as possible.—Arteries not to be opened because they will not close again.—In children scarification instead of general bleeding.—If spirit only to be taken, cupping; if blood, scarification and cupping—according to the strength, degree of fever, and fullness of the vessels.—More regard paid to the strength than the age; and after a certain time, whatever were the symptoms, did not bleed; not after the 4th day, nor on the first;—fatal in the paroxysm. In the semi-tertian premised to food;—the chief remedy of the pestilent fever; in the phrenitic fever when the symptoms least violent.—In the angina, pleurisy, peripneumony, and hepatitis, general and topical bleeding.

Stimulants. Wine, and animal food in the pestilent fever—a little wine with the food in quartans, and after vomiting and laxatives in tertians.—Just before the paroxysms; garlic to be swallowed, mustard, salt and wine, myrrh, pepper in hot water, castor, asafætida, friction with oil and salt water. Cataplasms to the præcordia, dill, thyme, &c. to the nose.—In slow fevers, friction

with oil and salt water.—Sinapisms, incisions; in the angina and pleurisy.—Affusions of hot water;—hot bath.—In flow fevers, horror and fever produced by immersion in cold water, and afterwards friction with cold oil or salt and oil.

In inveterate quartans: change suddenly from wine to water, and from water to wine; from acrid food to mild, and from mild to acrid.—Exercise; gestation; unction in the intermissions.

Refrigerants. In affections of the head; externally rose-water, vinegar.—In the *ardent fever*, cold water drunk to satiety.—After the height or 4th day, fruit, cold olera; cold external applications, viz. leaves of the vine wetted with cold water, with oil and cold water.

Sedatives. In affections of the head; externally, cataplasms with rosa, cerussa, spuma argenti, poppy. Sleep induced after long continued thirst, watchings and heat by cold water to satiety.—In phrenetic, cases sleep induced by friction; by gestation in a suspended bed. Opium and the milky juice of the *lactuca æstiva*, his soporifics, not exhibited. Anodynes not to be used except in cases of necessity.

Symptoms. Horror; heat; thirst; watching; pain of the head; pain, or oppression of the præcordia—parched and foul tongue.

Phthisis. Arose from the distillation of an humour from the head to the lungs, which produced ulceration and *febricula*, with cough and excretion

excretion of purulent bloody matter that emitted a bad smell when thrown upon the fire—occurs from the age of 22 to 35. *Remedies.* Sailing for a long period; change of air, by going from Italy to Alexandria; more dense air—heat and cold to be avoided.

CÆLIUS AURELIANUS. Does not treat distinctly of fevers without inflammation, or other attending diseases. Excelled in his account of the distinguishing signs and characters of diseases—his arrangements most simple—pathology, the *strictum* and *laxum*—rigid abstinence the three first days of fever, and no medicines before that time—attentive to avoid all external irritations.—Emetics often, but purgatives seldom administered—Bled in fevers with inflammation, but not till after the third day; and not more than once—topical bleeding as late as the 10th day in inflammations.

Aretæus. Descriptions excellent; of the pleurisy better than Sydenham's; full on the ardent fever—disorder of the constitution in inflammations reckoned fever—probably means a disease of the trachea, or croup, by cynanche—not certain that by cynanche is meant the angina.—Syrian and Ægyptian ulcers probably the ulcerous sore throat—like the other methodists used freely external applications, but with Hippocrates seldom vomits;—often acrid clysters—opiates frequently, and blistering by cantharides—V. S. ad deliquium animi—practised arteriotomy.

From Galen to the Arabian Physic.

Galen. Adopted wholly Hippocrates's system, to which he added the pathology of the fluids by Praxagoras, which he extended considerably, and rejected the doctrines of the methodics.

Fever consisted in præternatural heat in the heart, and not as some supposed in the action of the arteries—division of the species according to the seat of the cause of them; viz. in the *spirits, fluids, or solids*; hence the *ephemera, synochos, and hectica*.—The fevers referred to the synochos were putrid:—different species from the different fluids affected; synocha and synochus from blood; tritæophyes and tertian from bile; ardent fever from pituita; epialos from salt pituita; quotidian from acid pituita; amphimerina from insipid pituita; quartan and tetartophya from melancholia; hemitritæus from both bile and pituita, &c.—fevers varied by the qualities of the fluids, moisture, dryness, heat, cold.—Fever also divided according as they are attended with exacerbations or without any.

Tertiana exquisita never exceeds 12 hours, nor 7 revolutions.

By putrefaction, meant any deviation from the natural state of the fluids—the same thing nearly as the morbid matter of the moderns—buffy coat a sign of putrefaction—the fever in inflammation is of the putrid kind.

Remote causes. Bile the principal remote cause; repletion

repletion the principal remote cause of fevers with inflammation ; heat of the air ; affections of the mind ; the aer ; *aquæ et loci* ; watching ; thirst ; fatigue ; wine ; irritations in the *primæ viæ* ; ingesta ; want of food ; the sun ; stars ; the moon, which accounts for the influence of septenary numbers.—Tertians prevail in summer, quartans in Autumn, and quotidians in winter.

Symptoms. In every fever, the pulse quick, and the urine not as in health—no author so full on the pulse and urine.—Improved much the history of fevers, especially of the continued and continent.—Pretended to know the species of intermittent and other fevers on the attack, as well as their duration and mode of termination—fevers rarely attack old men, but when they do are fatal.—Arrangements improved ; some distinctions useful, others merely refinements. Never saw any crisis on the 8th or 10th day, but sometimes on the 6th, though imperfectly.—Explained on Aristotelian principles.—Obstruction of the fluids produces inflammation ; and the inflammation causes putrefaction.—Hæctic fever, or fever of the solids distinguished by its duration ; by the quickened pulse after meals ; one species attended with tabes.

TREATMENT : *Bleeding* the principal remedy, even ad deliquium animi, in all putrid fevers : differed most from Hippocrates in this practice —on what principles — scarification ; cupping ; leeches.

leeches.—Not proper in either very hot or very cold weather ; nor so proper in hot as in cold climates ; less useful in Greece than Italy.

Cold water the most efficacious remedy ; early exhibited extinguishes fever.

Sudorifics. Often employed ; on what principle.—*Externally* ; tepid bathing ; cold bathing immediately after the hot bath, and then putting the patient into bed.—Friction with oil.—Fomenting.—*Internally* ; wine in water ; cold water ; *theriaca andromachi* ; mithridate ; spices ; peppers.

Purgatives. Generally, only employed when concoction had been completed ; sometimes to remove turgescency, and to carry off bile and morbid matter ; as in the tertian by *absinthium*. Febrile heat impedes the operation of scammony ;—black hellebore, and aloes in fevers.

Emetics. Rarely exhibited at all, and never scarcely in the beginning of fevers.

Febrifuges. Chamomile : other bitters, viz. wormwood, centaury, myrrh.

Opium, of a poisonous nature ; was cold in the 4th degree—even killed patients when applied in a suppository.

Food. Ptisan of Hippocrates ; cream of Ptisan, extravagantly commended.

Oribasius Pergamenus. A copier of Galen—extended considerably and described the modes of topical bleeding.

Aetius Amidenus, did little more than add some
superstitious

superstitious modes of treatment, or incantations, to the Galenical system.—Febrile eruptions or exanthemata cured by V. S., vomiting, and purging, e. g., in erysipelas, variola, morbilli, scarlatina.—Scarifications in erysipelatiuous fevers—the pestilent fever with ulcerated tonsils supposed to be the ulcerous fore throat.

Alexander Trallianus. Galen's doctrine in general adopted; the cause and seat of fever as affirmed by him—arranged better the subject of febrile diseases—improved greatly the diagnostics—supposed fevers depended much on putrefaction in the *primæ viæ* and not in the blood, because they were frequently carried off by vomiting. Distinguished more clearly quotidian from hectic fevers; pleurisy from the hepatitis; inflammation of the diaphragm from the phrenitis, &c. which had been confounded—had faith in charms, and amulets.—Purged in *acute fevers* contrary to the common practice.—In *intermittents* confided in amulets and incantations—exhibited emetics just before the paroxysms—purgatives in the tertian. In the *ardent fever* bled, but depended more on purging.—In the *angina* bled from the jugular veins.—Hermodactyles in most of his purgative compositions—first exhibited rhubarb—diacodium in the phrenitis, pleurisy, and cough.—Topical bleeding on the principle of revulsion.—Hippocrates's plan of diet followed.

Paulus of Ægina. A compiler from Galen—
first

first opened the jugular veins in diseases of the eyes—bled from the arteries.

Ætuaris, of Constantinople, used mild purgatives; cassia, manna, myrobalans, also fenna;—sugar instead of honey; juleps; distilled waters, rhodostagma, intybo stigma, otherwise followed Galen.

Among the Hebrew Physicians.

Translated the Greek physic into their own language; were the principal physicians in Europe, and part of Asia for several centuries—probably made no considerable improvement.—Considered fever as salutary.

Among the Arabians.

Earliest of their writers principally or merely compilers and imitators of Galen.

Abubeter Rhazes of Bagdad. About the 9th century described the small pox, and measles—appear to have been derived from Ægypt probably two centuries before, and then not spoken of as new diseases. Distinguished between the *confluent*, *distinct*, and *anomalous kinds*.—In the variola the 4th and 7th critical days.—Suggested the principle of fermentation instead of putrefaction; comparing the action of the variolous contagion to that of spirit in exciting the variolous fermentation, that the peccant matter is excreted by the skin.—History of the symptoms just.—Many prognostics

prognostics well founded.

Did not distinguish the different stadia of the small pox, nor its periods and changes so accurately as subsequent observers. Adopted in general Galen's system, but differed from him in many parts of practice. Compiled much from the Arabians as well as the Greeks, especially from Serapion.

Treatment. Practice not quite consistent—most parts of it the same as that of modern inoculators, allowing cold air; cold drink; refrigerating food: yet also allowed broths and animal jellies; and even some animal solids.—To prevent or prepare for the *variola*, prescribed swimming; ice water; the most cooling and acid drink—pretended to a medicine that would prevent the eruption of more than ten pustules.—To prevent eruptions on the face and near the eyes, wetted them frequently with cold water.

Eruptions, in the beginning, promoted sometimes by *vomiting* and *sweating* with ice-water; afterwards for pains and when the eruptions turned black and green, by fomentations and vapour of water.—*Purging stools* twice a day till about the crisis, then not produced, or less frequently, but the patient kept warm.—General *blood-letting*, especially when angina present

E

above

above the age of 14, and even ad *deliquium animi* till the crisis; but under this age cupping and scarifying. V. S. at any period if symptoms urgent.—*Opium* liberally used to promote maturation, for watching, diarrhæa, and to remove irritation.

In the decline; purging—sometimes V. S.—gargarisms—collyria—treatment for the prevention of pits.

In the measles if syncope occurred and urgent symptoms, used cold bathing and friction.

Perhaps first mentioned the use of fenna.

Treats of the ephemera; intermittent fever; the caufus; the synochus; pestilent fevers; the dysentery; fevers from ulcers; inordinate febrile paroxysms in suppuration and dropfies.

Avicenna: adopted Galen's notion of fever, that it consisted of "igneous heat" in the heart—of putrefaction of the fluids—of the distinction into primary and symptomatic fever:—treats of the small pox and measles—proposes to let out the matter of the variolous pustules by puncturing them with a golden pin—made little or no improvement on the Greek writings and those of Rhafes.—Calls the cold fit, *frigus febrile*.—Continued fevers have no exacerbations and remissions.—Deviated from Galen in allowing cold
water

water during the whole course of the fever, for the concoction of bilious matter and thirst.

Avenzoar; a rigid Galenist in all his distinctions.—First described the inflammation and suppuration in the mediastinum and pericardium.—Bled from the opposite side affected after the precept of Archigenes and Aretæus, and as practised among the Arabians.—In the pulmonary consumption, with Galen recommends asses milk, but from religious motives prescribed that of goats.—In diseases of the throat, &c. directed nourishment to be conveyed by clysters and bathing.

Averroes and other Arabians—all Galenists; but allowed more freely cold water, and before concoction.

Isaac Israelite—with Galen, that fever consists in preternatural heat proceeding from the heart to the larger arteries and extremities.

Among the European Physicians.

The school of Salernum, founded in the seventh century, and the colleges of Paris, Bononia, and Oxford, in the ninth and tenth, for a considerable time, at least made no alteration in the

Arabian system of Physic ; nor those of Montpellier, &c.

Valescus de Tarenta first wrote de *Febribus Purpuratis* ; and several authors on the plague about this period.

The only improvements made after the introduction of Arabian learning in Europe for several centuries, were a few chemical remedies, by Roger Bacon, Albertus Magnus, R. Lully, Arnoldus de Villa Nova, Jo. and Js. Hollandus, Gordonius, Thaddeus, Basil Valentine.

R. Lully invented *terra foliata tartari*.

Arnoldus's administration of the tincture of gold in the plague to a Pope, may be mentioned as a proof of the introduction of chemical remedies at this period :—proposed the theory of fermentation to explain fever.

Basil Valentine exhibited antimonial preparations in fevers, as well as in most other diseases, as emetics, purgatives, sudorifics, and specifics ; the preparations now in use are almost all his inventions—invented and employed ætherial liquors ; probably a purging salt, composed of the vitriolic acid and potash ; vitriolic and marine acids—caustic alkali for the gout and calculous disorders.—Theory of salt, sulphur, and mercury.

Hockener, or as he stiled himself *Paracelsus*,
used

used antimonial medicines in fevers, and probably many other chemical preparations.—Proposed to cure fevers by arcana without regard to nature.—Opium in large doses in fevers, and inflammations, gr. iij. for a dose in the phrenitis; first gave mineral acids; his specific purge, and balsam of samech, perhaps tartar vitriolate and soluble tartar.—Nitre in the pleurisy.—His pathology founded on the supposed existence of tartar; also on the three principles salt, sulphur, and mercury. His contempt for the principles of Galen and Avicenna.—From his time, for more than two succeeding centuries, the doctrine and practice in fevers was founded, and influenced either by the principles of the chemists, or of Galen.

The *Sudor Anglicus*, a new fever, appeared in the army of Henry the VIIth. soon after his landing, 1483.—Cured by sweating—this practice introduced the pernicious hot regimen in fevers, erroneously ascribed to the Arabians.

Among the Physicians of Europe after the revival of the study of the Greek writers.

Fifteenth and Sixteenth Centuries.

In general for a century or more only commented on the systems of Hippocrates, Galen, and some of the Arabian writers.

Linacre promulgated the Hippocratic system in England.

Fernelius, though he censured and criticised some parts of Galen's system, adopted it in general.—Fever consisted in “igneous heat” in the heart, and dispersed over the rest of the body.—Horror and rigor, or cold fit of intermittents not a part of fever—that fevers subsisted without putrefaction—seems to have first proposed obstruction of the capillaries from lentor in the fluids—was restrained from V. S. when the signs of coction appeared, but exhibited purgatives.—*Purging* recommended in the beginning of all acute diseases from repletion or turgescence—the only channel for evacuating putrid matter after concoction.

Fracastorius explained the subject of contagion—author of the composition called *Diascordium*.

Hollerius upon *Duretus*—fully on intermittents.

Heurnius, *Montanus*, *Facotius*, *Foubertus*, &c. all followers of Hippocrates.

Felix Plater proposed to distinguish by characters, and to arrange diseases upon the same plan as that in natural history.

Botallus occasioned observations to be made on the mode and effects of blood-letting.

Ludovicus Mercatus wrote particularly on the distinctions and differences of fevers—described the

the ulcerous fore throat; in which practised V. S. —reckoned to have exhausted the subject of intermittents

H. Mercurialis wrote, after long experience, particularly on fevers—attempted to introduce blistering plasters with cantharides in putrid fevers unsuccessfully, and in opposition to general prejudice.

J. Lommius wrote in confirmation of the Greek system—the most chaste writer of his time—his histories of many fevers are among the most just hitherto published—explained particularly the use of blood-letting in fevers—continued fevers cured principally by V. S. and diet. In *diet* followed Hippocrates, allowing ptisan, cremor ptisanæ, aqua mulsa, cold drink.—Sometimes *purg- ing* in the height of fevers, which practice was afterwards adopted in the small pox.—Indication for V. S. to remove plenitude in strong habits, lest the putrefaction and igneous heat should be increased—should be practised on the second or third day; after the fourth neither useful nor safe, the febrile matter having then begun to be concocted, and separated from the fluids not diseased, nature's operation would at that time be disturbed. Galen's rule with regard to V. S. the same.—*Purg- ing* prescribed because it does not

carry off equally the sound and morbid fluids like V. S. but promotes the excretion of concocted matter. Crudities in the stomach or intestines to be carried off by rhubarb, or vomiting, otherwise V. S. promotes the absorption of such crude and putrid matter; if these crudities be not removed previously, the V. S. may prove fatal—the time of greatest remission to be chosen for V. S.—*Syrup of white poppy* for watching, though rarely employed; more frequently cataplasms, liniments, lotions of refrigerants, emollients, soporiferous plants, pediluvium, cool air, fumigation with vinegar, fragrant plants, noise of a brook, or of water poured from one vessel into another.—*Cold water* in the early part of fevers impedes concoction—acid fruits to diminish heat when cold water proper—reprehends Avicenna for exhibiting cold water before concoction, contrary to the opinion of Hippocrates, Celsus, Galen, Paulus, Aetius, Alexander, &c.—should be given only in the height of the fever, when there is most vehement pulsation of the arteries, thirst, inquietude, &c. to excite a decretory evacuation, by vomiting, purging, and especially sweating; to be drank cold from the spring to satiety, to three or four pints—agreeably to Galen forbid not only in cases where crudity present,

sent,

lent, but in tumours, pains of viscera.—In *inflammation* cold water: because less dangerous to increase it by impeding maturation than to have a hectic fever.—In intermittents cold water never to be exhibited, the concocted matter being too viscid for excretion by cold water, but carried off by purging.—*Food* not given in the height of the fever, Nature then opposing most powerfully the disease, and must not be distracted by the digestion of food; and before that time the least nourishment only.—In the declension of fevers no medicine but strengthening food; pullet broths; other animal food; barley ptisan with pullet broth in quantity less than to satiety; wine in water, or in barley water; temperate air.—*Sleep* only after food.—*Walking* in the house.—*Gestation*—no purgative, but *laxatives*; cassia, electarium lenitivum, manna, &c. clysters of oil, cassia, &c.—After an imperfect crisis, to prevent abscesses or a return, *purgatives* and low diet.

Fac. Sylvius. Fever depended on a commotion in the blood from the alteration of mixture of its parts—that it is cured by hot medicines—that it is occasioned by inspissated blood, which the heart propels with difficulty.

P. Forestus, 1584, of Delft, adopted Galen's distribution of fevers, and the greatest part of his system—

system—the greatest clinical writer—a most useful work for cases, and the correspondence of them with those of the Greeks and Arabians.—Subsequent writers improved the history of fevers by means of his work.

P. Salius Diverfus, revived Paulus's opinion, that the seat of pestilent fevers was in the large intestines—described the various forms and proteiform nature of intermittents.

Musitanus. The cause of fever was in the principle of motion of the human œconomy—the occasional causes; corrupted chyle, blood, bile, water in the pericardium.

Valerius Cordus, in the Nuremberg Pharmacopœia inserted æther.

Rulandus. His preparation of antimony, the vinum benedictum, or aqua benedicta, with which cured pleurifies, &c. by vomiting.

H. Fabricius wrote fully on the Erysipelas capitis.

Seventeenth Century.

Quercetanus. Many chemical formulæ.

Crollius: invented calomel; a neutral salt by uniting vitriolic acid to potash—various antimonial preparations.

Beguinas,

Beguinus, Hartmann, Ludovicus, &c. Various preparations of antimony. *Hartmann* prepared the *pulvis antimonialis Ph. Lond. Raleigh*: his confection.

Theodore de Mayerne. Mercurial and antimonial medicines—contrayerva—nitre.

Sanctorius. Numerous statical experiments to ascertain the proportion of the perspired matter to the other excretions from different kinds and quantities of food, drink, degrees of temperature of the air, exercise, &c. in health and diseases—the foundation of much erroneous reasoning on fevers from the state of the perspiration, in as much as those diseases were imputed to a deficiency of that matter—the experiments inaccurate.

William Harvey altered the theory of physic by his discovery of the circulation of the blood—the liver shown not to have so great a share in the production of fevers.—Accounted for febrile paroxysms from morbid matter in the heart or near the lungs, depressing the vital principle, occasioning accumulation of fluids in the interior parts, then heat in the heart, which is diffused with the peccant matter through the rest of the body; and thus nature overcomes the disease,

Sennertus;

Sennertus; compiled very fully from the Greeks and Arabians—adopted the Hippocratic and Galenic systems, but united with them chemical pathology and chemical remedies.

J. B. Van Helmont; like Paracelsus, treated the Galenic system with contempt—had some just and original ideas of the animal œconomy, though expressed in the most romantic jargon, with a great number of fictions and reveries—his *Archeus* that inhabits the mouth of the stomach—the *nature* of Hippocrates, to which he ascribes intelligence—ridiculed the doctrine of cures by nature; of concoction, of critical days—natural crises should be superseded; no one deserved the name of a physician who could not cure a fever within four days; yet allowed that nature did cure fevers by expelling matter out of the body.—*Heat* not the cause but effect of fever—*local irritation* its cause, which excites the actions of the presiding spirit, *Archeus*—one sudorific remedy, the *præcipitatus diaphoreticus Paracelsi* a specific in fevers—pretended to cure all fevers, even inflammations, as the pleurisy without bleeding, purging, vomiting, blistering—exploded many inert or effete medicines and farragos—occasioned sudorifics to be more frequently exhibited.

Willis made considerable improvements in the history of several fevers, particularly in the nervous,

ous,

ous, and introduced much new and ingenious theory from chemistry, the anatomy and functions of the nerves, and the doctrine of the vital principle.—Heat the effect of fever—fever consists in a fermentation or effervescence in the fluids, or in the stomach, pancreas, &c. producing heat, thirst, &c.—the blood either too dense, or too thin in fevers—first referred many of its phenomena to the nervous system—the founder of Hoffman's and Cullen's theory—morbid matter in the blood, in some fevers, transferred to the brain, and then disorders the nervous system; but in the slow or nervous fever (first described by him) depends *primarily* on the nervous fluid, in which fever there is little ebullition in the blood.—In the nervous fever no crisis, because no impure to be separated from pure parts of the blood as in fevers of the fluids—observed no critical days.—Ferrum potabile, or tartarised iron, his invention. Opium used as a sudorific.

Mindererus. Author of a neutral salt so much used.

Mynsicht, introduced emetic tartar—elixir of vitriol.

Joel, Schenke, improved the history of fevers.

Ballonius first distinguished clearly the rheumatism from the gout—first employed the term
rheumatism

rheumatism to denote the disease now understood by that term—distinguishes fevers into those in the first passages and mesentery, and those in the blood vessels; for the former used purgatives, for the latter blood-letting.

Riverius. Refers fevers to fermentation, the inseparable effects of which are increased pulse and heat—employed principally saline mixture and nitre, also camphire and blistering plaisters.

Etmuller. Employed much blistering plaisters in inflammatory fevers—intermittent fevers imprudently cured by the cinchona, to be reproduced by volatile alkali.

C. Van Bontekoe—that all fevers depend on acid viscid matter; and the cure must be by watery, attenuating fluids, and nitre—his principles Cartesian—the degree of fever to be measured by the velocity of the blood—opium the best sudorific.

Sylvius de la Boe—that fever consists in a coagulation of the blood, or other fluids, by acid matter—followed by the Cartesian Physicians—exploded V. S. and refrigerents, and exhibited attenuants, diluents or dissolvents—the pancreas especially affected, the cold fit arising from the acidulous halitus of the pancreas effervescing with the bile. When the bile is primarily affected
there

there is more heat than from the lymph.—Anginose fever a peculiar species. — His principles with those of Helmont, and the Cartesian physicians, introduced the hot regimen to expel by sweating the supposed poison that occasioned the coagulation.

Bennet. Improved the history and treatment of consumptions attended with fever.

Specific Remedies. The alchemists had already shown the virtue of *arsenical* preparations, and the Spaniards learnt the use of the *cinchona* in intermittent fevers, from the Indians in South America.—The Countess of Cinchon, about 1640, the first European cured by this bark—Spanish Jesuits promoted its use—for twenty years very little prescribed—But seldom used by Willis in 1659—Many writers against its efficacy and safety —In 1663 began to be more frequently employed —Probably had gone into discredit in England, but revived and its credit supported by Talbor, in opposition to Lister in particular and the London College.—Sydenham probably learnt the use of the *cinchona* from Talbor.

Thomas Sydenham. A great clinical physician —His great improvements, descriptions of fevers —an advocate for the distinction of diseases upon the plan of botanists.—Adopted the doctrine of Hippocrates

Hippocrates concerning the *natura morborum medicatrix*; of coction; his plan of finding indications or causes founded on a sufficient induction of facts.—Fever a salutary exertion of nature to expel morbid matter by the commotion raised in the blood, which appeared by sweating, purging, abscess—distinguished fevers into those which terminated with signs of coction, and those without its being evident — *Occasional causes* are, 1st, occult and inexplicable states of the atmosphere which produce “stationary fevers,” i. e. fevers that prevail for a certain series of years: 2. certain vitiated states of the fluids, from the sensible qualities of the atmosphere, especially *cold*, and from other evident agents, as contagion, ingesta, which produce “intercurrent fevers”—Three classes of epidemics, 1, those which are stationary fevers, and occur of the same kind during totally different and manifest states of the air, and of a different kind during the same states: 2. Intercurrents, independent of the causes of stationary fevers: 3, “Symptomatic intercurrents” that arise from the causes of stationary fevers to which supervene those of intercurrents.—These occult states, or constitutions of the air, depend on contaminations from effluvia.

fluvia arising from the bowels of the earth, which continue for a certain time, and are succeeded by a different constitution from different vapours.—These produce putrid and other states of the blood.—The manifest qualities of the atmosphere, and the fix non-naturals, predispose only to certain epidemics.

In some epidemics, diseases prevail which exhibit the same appearances, and require the same treatment; in other epidemics, the disorders are of uncertain and different kinds; and the same kind of disorder varies in its appearance in the same constitution of the air.—The spring and autumn promote or impede the action of the epidemic constitutions.

Stationary fevers, those epidemics which preserve their type for years, s. vi, c. 1.—thought fevers might be divided into species more properly, according to the constitution which produced them, than according to some very evident symptom or alteration of the fluids, which may be present in different species of fever.—Described the epidemics from 1661 to 1676, and from 1676 to 1684.—Conceived that the number of different

epidemics were not observable within the life of one man.

In intercurrent fevers, viz. scarlet-fever, pleurisy, peripneumony, rheumatism, erisipelatious fever, angina, &c. considered the local disease as symptomatic of the fever, and the consequence of the mode of the crisis, or the nature of the part most disordered in the fever, f. vi, c. 1.—Intercurrents sometimes but rarely epidemic.—Whether this doctrine of the causes of fevers founded on facts, or consistent.—Observed five constitutions of the air, which produced five species of epidemic fevers.—Described intermittents—Continued fevers, several kinds, c. iv, sect. 1. c. iii. f. 3. c. iv, f. 4. c. ii. f. 5.—The pestilent fever—The plague—The dysentery, f. iv, c. 3.—The diarrhæa, c. iii, f. 3.—The cholera morbus, f. iv. Epist. Resp.—The variolæ regular and anomalous.—The measles, f. iv, c. 5. f. v, c. 3, 4. Ep. Resp.—Bilious colic, f. iv, c. 7.—Epidemic coughs, f. v, c. 5. Ep. Resp. 1. — Intercurrents, and stationary, however different in the states of the atmosphere that occasion them, often agree in other causes. — *Evident causes*; contagion; excesses in eating; exposure to cold, when overheated, or under other circumstances—Cold, destroyed

stroyed greater numbers than the plague, sword, and famine.

In *continued fevers*.—Of opinion that the autumnal intermittent or depuratory fever, from its frequency in ancient times, and from the regular period for the coction of the febrile matter, was the primary fever, and is that which applied to Hippocrates's observations and practice, and which many modern fevers will not.—Described several new continued fevers.—Distinguishing symptoms; sweating at certain periods of the disorder; dryness of the skin,

Indication to restrain the commotion when it threatened danger, and to excite it when insufficient for extruding the morbid matter.—*Blood-letting*, if indicated the first measure, then, especially if sickness or inclination to vomit, prescribed. *Antimonial emetics*, with the squill in the beginning, if an opportunity, otherwise at any period; and the evening after the emetic an *opiate*.—If no danger from the too great commotion, and that does not subsist in a sufficient degree, prescribed, *diascordium*; distilled aromatic waters, and theriaca andromachi, contrayerva, crab's claws, bezoar—If ebullition too great the day after V. S. and vomiting, exhibited a

laxative clyster—Repeated V. S. and clysters if indicated.—Ebullition being duly diminished, the danger is less, and concoction more speedy, if coctiveness takes place.—Laxity of the blood, or premature cessation of the febrile commotion, required cordials and astringents.—No remedies if the fermentation, neither too violent nor too languid—about fifteenth to seventeenth day, there being signs in the urine of a laudable separation and remission of symptoms, exhibited a purgative to prevent the return of the sediment into the blood and obstruction.—Patients confined to bed.—In *phrenitic delirium* supervening from the hot stimulating medicines, or the disease, V. S. clysters, and refrigerants, and afterwards in the decline a narcotic.—Narcotics too early cannot stop the fermentation, but are hurtful, and impede the separation of the peccant matter.—Laudanum or other narcotics never proper before the eleventh day.—Aloetic purge twelve hours before the narcotic.—In watching after the decline of the fever, cold liniments of rose water to the temples, and the head.

Cough. Oil of almonds.—If *hæmorrhage from the nose* supervene, often salutary; in other cases the indication to restrain the pernicious ebullition,
by

by V. S. &c. meconium; after it ceases, a purgative to obviate its return—in case of *singultus*, diafragma exhibited—for *diarrhœa* prescribed an emetic, astringent clysters—if *iliac passion* supervene, exhibit saline mixture, mint water, relaxant or emollient, external applications; and when the stomach is composed, aloetic pills—cure depends upon the knowledge of the channel by which febrile matter is to be evacuated, viz. by V. S. purging, &c.—Sweating the most natural mode of curing fevers, but dangerous to be excited by art, before the period of coction; prefers V. S. and especially purging (Sch. Mon.)—term *malignant* destroyed more than gun-powder, (Sch. Mon.)

In *Intermittents*—referred the cold fit to the irritation of febrile matter; the hot fit to fermentation, or effervescence; and the sweating stage to despumation or the expulsion of febrile matter—autumnal intermittents, fermentation performed at repeated times; in continued autumnal fevers, in a continued period; in both the periods is about 336 hours.—Vernal intermittents cured spontaneously—by emetics before the paroxysms, and opiates on the attack—by promoting sweating in the sweating stage—clyster
in

in the intermission—refrigerants and clysters, by impeding fermentation, may protract fevers beyond 336 hours.—Autumnal, intermittents, tertians—cured by sweating with posset drink, whey, infusion of sage, 44 hours before the paroxysm; then aloetic pill, theriaca andromachi, saffron, spirit, wine—double tertians, by sweating without the purgatives—quartans, uncertain in their cure; Peruvian bark, often the cures by it only temporary; the cautions in its use.—Peruvian bark also used in vernal and autumnal tertians—more efficacious than sweating, purging, and V. S. (Epist. Resp.)—change of air—dropsy, rachitis, anginose affections, insania in the decline of fevers.—Account of the introduction of Peruvian bark; opposition, prejudices, pretended deleterious properties (Epist. Resp.)—why dangerous just before the paroxysms—discovered that it must be given repeatedly to prevent returns—modes of exhibition—diet—V. S. and antimonial emetics to be premised in vernal intermittents.

Pestilent Fever; Plague.—Considered to be only different degrees of the same disease—influence of the season in producing them—the description of them—the plague a peculiar fever from inflammation of the spirituous particles of the blood—

blood—the *ignis sacer* is, in many respects, similar to the plague (cap. ii. f. 2.)—blood buffy as in the pleurisy and rheumatism—the angina and pleurisy prevailed at the time of the plague— notwithstanding the inflamed blood, alexipharmic cordials and wine serviceable, if they produce sweating, otherwise are mischievous—V. S. copiously, the sole remedy of Botallus; hurtful, when tumors appear—treated it in the same manner as the pleurisy—sweating—then a purgative.

Small Pox. Improved considerably Rhazes' description (cap. ii. f. 3); particularly excellent for the distinction of it into different stages—conceived inflammation to be present in the blood and fluids in general; that there is a period for the digestion and coction, and then of separation of the maturated inflamed matter—indication founded on this notion (ibid.)—cool air, during eruption, fever, and maturation; yet should not be cold—danger from V. S. clysters, and cathartics, on hypothetical principles—mischief by hot regimen, from the prejudice of nurses—cordials proper when V. S. injudiciously employed, or cold air, have occasioned a recession of the pustules, or detumescence of the hands and
face—

face—wine, animal food, being abroad on the attack, forbid; but tepid small beer, and farinaceous decoctions, boiled or roasted apples, apples boiled in milk allowed—nothing cold or hot permitted—eruption not to be accelerated by the hot regimen, however urgent the symptoms—by hot regimen and cordials, the eruption is impeded; and in this heated state, the body to be cooled by small beer for drink, slight covering with bed clothes, and thus the eruption promoted—on the fourth day to be confined to bed; and if eruption does not appear, bland cordials exhibited, viz. diascordium, laudanum liquidum, &c. or in young strong patients, after hot regimen of wine, spirit, &c. V. S. proper. Made a wide difference between the distinct and confluent variola.—In distinct, if in summer, after the eruption, may be kept out of bed daily a few hours, but neither cold nor hot—in the state of complete suppuration exhibited cordials, and not before, of wine—in watching, paretics exhibited. In the *confluent* variola, requires a still cooler regimen—ptyalism to be promoted, and irritation diminished, sleep induced, swellings supported by narcotics—treatment of particular symptoms.—Secondary fever—is a putrid fever, from the absorption of the matter—V. S. most efficacious

efficacious—opium, in large doses, twice a day—for costiveness, a suppository, or laxative, but no cathartics, till after the twelfth day; and then only when the fever is diminished by V. S.—bloody expectoration, and bloody urine, how treated—his laudanum liquidum, syrupus de meconio, and the solid laudanum.

Topical affections; in *stationary fevers*; supervene, are symptomatic and accidental, to be treated as the fever itself, principally; genius of the prevailing fever to be attended to.—In *intercurrents*, the topical affection, though symptomatic, is essential—hence the important practical distinction between *essential* pleurisy, angina, &c. and *symptomatic* or *accidental*. (f. vi. c. 1.)—In fevers, with local affections, morbid matter is deposited on such parts—Per. bark hurtful in such fevers.—Notion of the rheumatism. (Epist. Resp.) A fever with a natural pulse and topical affection. (Sch. Mon.)

In his practice, to 1684, had not employed the purgative salts of Glauber, Polychrest, soluble tartar; tartar; ipecacuanha; nor antimony, excepting vinum antimonii.

William Cole, rejected the opinion of the Galenists of febrile matter formed in particular parts, as putrefaction of bile, pituita, melancholia, in the liver, spleen, stomach, intestines, mesentery, &c.;—of Sylvius, that fever depended on acid in the pancreas;—of Willis, that it consisted in fermentation of the blood;—his own opinion, that the brain and nervous system is the seat, and the morbid nervous fluid, the febrile matter—to the nervous system belong the fibres of the muscles and nerves of the whole body.

R. Morton opposed the doctrine, with regard to the cause of fever, of the Galenists and chemists: that it consisted in disorder, præternatural heat, or expansion of the animal spirit in the blood,—in intermittents, continued, and hectic fevers, was occasioned by a certain *miasma* or poison, produced by contagious effluvia, passions, errors in diet, drink, exercise, sleep, &c.—In the ephemera occasioned without any miasma, by insolation, violent exercise, and other external agents.—The hectic fever, consisted in a less violent but more permanent præternatural expansion of the spirits, arising from a less irritating miasma, as in the phthisis, some cases of suppressio mensium, &c.—Some continued fevers go on without exacerbations,

bations, others with remissions at uncertain periods; species of continued, were, 1st. *Syneches*, or remittent, in which are exacerbations, and may be cured by the Peruvian bark. 2d, *Inflammatory*, attended with inflammation of any parts, viz. *universal* e. g. measles, scarlatina, small pox, erysipelas, herpes, rheumatism; *particular*, phrenitis, ophthalmia, angina, peripneumonia, &c. 3d, *Colliquative*, in which there is a preternatural excretion or secretion. e. g. diarrhæa, dysentery, cholera morbus, vomiting, sweating, salivation. 4th, *Synochos*, without paroxysms, equal in its whole course; species were the malignant, pestilent fever, and plague. 5th, *Worm fever*,—his synoptical table exhibits a very distinct and comprehensive view. By animal spirits means the “*principium vitæ*,” and nervous influence, deduced the symptoms from the nervous system and the blood—described the simple and spurious remittents, or *syneches* epidemic from 1658 to 1664, and from 1673 to 1692; the autumnal diarrhæa and dysentery, from 1666 to 1672. The history of the measles.—Febrile paroxysm accounted for by the sedative action of the miasma on the vital parts, the action is excited, and the cold and hot fit thus produced, and by the sweating fit, the deleterious miasma is expelled, or by purging and other evacuations.—In intermittents and remittents, the Peruvian

bark, an “ Herculean antidote ;” in other fevers, no antidote known, the only indication, to assist or restrain nature’s action by clysters, V. S. emetics, opiates, emulsions ; volatile alkali, cordials, repeated blistering ; nourishing diet, pure air, large bed room—no critical days observed—antimony, excepting vinum benedictum, not mentioned.

Described fully the intermittents and particularly the anomalous forms.—Powder of camomile flowers, nearly equal to the Peruvian bark, according to Coysb.—Vegetable bitters in general—History of the Peruvian bark. (cap. vi, Ex. 1.)—Great objection to its use was that in fevers, the morbid matter was retained instead of being expelled—his defence of the bark, against Chiffletius, and Plempius, &c.—Criteria of good bark ; most efficacious } in substance.—Emetics, purging, V. S. previously, if indicated.—Schedula Romana, their mode of exhibition, just before the fit, in dose of ʒij —more efficacious in divided doses, and to be repeated for a month every eight days, although there be no fever.—In diarrhæa, laudanum to be mixed with the bark,

Remit-

Remittents, endemic in the neighbourhood of marshes, the sea, woods,—epidemic in autumn.—Opium, hurtful or fatal in or near the time of the paroxysms,—proper to palliate cough, diarrhæa, and produce sleep. In inflammatory fevers, if there be periodical exacerbations, cured by the bark—are fevers with an inflammation not primary.—Diagnosics from autopsia, the pain, and other symptoms in the pulse, urine, and blood.—*Measles*, two species, from the degree of the poisonous matter, and the different vigor of the spirits—treats very fully of their cure—diarrhæa supervening; by opium, astringents, bark, rhubarb.—*Scarlet fever* only differs from the measles, in the mode of efflorescence. *Variola*, its four stadia, previous fever, eruption, maturation, declension.—Chicken pox reckoned a kind of the distinct small pox—treats very fully of the variola—does not exhibit the bark, nor antimonial vomits in the first stage.—Opposed Sydenham in the use of the cold regimen; used opium, and astringents in cases of diarrhæa—in the malignant kind, in the decline, used the bark, wine—purging after, but not during the disease; then with great caution.

Rheumatism described—Considered to be a kind of remittent fever,

Began

Began to throw light on the subject of marsh effluvia, subsequently so much better understood.

Etmuller—applied blisters in infectious fevers as *Mercurialis* had attempted, as well as *Riverius*.

Bellini demonstrated the causes and phenomena of fevers from the quantity, quality, and motion of the blood, on mechanical principles—described very distinctly the “ antecedents, concomitants and consequences” of the ephemera, simple synochus, putrid synochus, caustus, hectic, continued periodic fevers, morbus hungaricus, sudor anglicus, malignant cough, and catarrhs, plague;—secondary, or symptomatic fevers, viz. the phrenitis, pleurisy, phlegmonodes or fever from inflammation of pure blood, erysipelatodes from erysipelas, typhodes from inflammation of the liver, slow fever from a disease of some viscus, milk fever;—concomitant in which the fever and inflammation are produced at the same time, or in which the inflammation is a necessary consequence; viz. the measles, small pox,—periodic intermitting fevers.—No fever without a “ vitiated” state of the blood, in quantity, motion, or quality, and preternatural state of the pulse; from
which

which state of the blood all the phænomena are deduced—the blood may be in too great, or too small quantity, or its motion and qualities be morbid, as in the ephemera, synochus, &c.—Viscid blood or lentor, produces obstructed circulation, and the cold fit thence arises (prop. xviii) in which the capillary vessels are obstructed; this obstruction produces such a resistance in the action of the arteries as to remove it with, at the same time, a disengagement of confined heat, hence the hot fit.

Gideon Harvey maintained the doctrine of *Galen*, that fever consisted in igneous heat in the heart, against the opinion of its depending on fermentation.

New Remedies. Glauber's salt; polychrest salt of Glafer; Rabel's water; Grew's bitter or Epsom salt; Ipecacuanha; Seignette or Rochelle salt; Dover's powder; Algoroth powder.

Lancisi: observations on the effluvia of marshes, putrid exhalations, and other miasmata.

Baglivi: opposed the doctrine of fevers, depending on acidity, and therefore the use of testaceous

ceous substances and other antacids.—Proposed that they arose from a putrid disorder in the chylous fluids of the mesentery; occasioned frequently by that pernicious drug, the Peruvian bark—that this medicine, before the signs of coction is highly deleterious “*in aere romano.*”—cured fevers by adhering to the Hippocratic laws of coction and crisis—by evacuants in due time expelled the concocted matter—used the bark only in the decline of the fever to restore strength, but camomile a more certain febrifuge, especially in intermittents—purgatives, volatile, and active medicines forbid in the beginning of fevers, not before the seventh day, lest crude matter, or matter not proper for expulsion, be expelled—with signs of determination of blood to the head, lungs, &c. in the phrenitis; if in young subjects, V. S. in the beginning of continued fevers, and repeated, if required by the symptoms: if any suspicion of coagulation, as in the plague, this evacuation improper—on remission, the sign of coction, in mesenteric fevers, purging proper without regard to critical days, which do not here operate—*doctores medici! dies criticos religiosè observate!*—Typhus, its crisis in six months; feat of it in the stomach; in wounds the critical day, especially the 3d; in pleurisy, peripneumony on the 3d,

3d, 5th, 7th, 9th, 11th, and 14th.—Their existence probable from the stated time for other fermentation; the blood fermentable.—In the phrenitis, blisters hurtful.—Diseases to be distinguished by a few pathognomonic symptoms.—Could not exhibit bark, consistently with the critical days and coction.

EIGHTEENTH CENTURY.

In the early part.

New Remedies.—Snake-root, known in 1633. Ipecacuanha, its emetic and laxatives properties, published 1648, but not much used for 50 years. Cascarilla. *Dover*; his powder in a dose, containing six grains of opium as a sudorific for the gout; his bolus containing eight grains of turbith mineral for the rheumatism, as a purge; in a few hours diacodium; next day in the evening the gout powder.

A. Pitcairn. Supposed fever to consist in the increased motion and rarefaction of the blood,—No critical days observed in Scotland:

Frederick Hoffman: his doctrine of fever founded on the *strictum* and *laxum* of the methodists; —that every fever, intermittent, continued, exanthematic, inflammation, and hæmorrhages, &c. and even symptomatic, on the accession, or in the progress, consists in a spasmodic state, or stricture, of the vessels and fibres of the whole vascular or nervous system, with universal lesion of the functions, occasioned by a cause irritating the nerves and producing congestion of blood in the internal parts, (shown by sense of coldness, constriction of the skin, detumescence of the vessels, suppressed perspiration, costiveness: pain of the head and back, anxiety of the precordia, restlessness, difficult respiration, hard and frequent pulse); the increased action of the S. S. by which the spasm is resolved, shown by the heat, by the blood circulating in greater quantity and more freely on the surface, by the excretions and secretions, the stronger and softer pulse, especially by the sweating:—the general spasm is occasioned, in inflammatory or acute fevers, by obstruction in the vascular system; the spasm excites increased action of the sanguineous vessels, and increased circulation, by which the obstruction is removed; this the mode of cure by the *natura medicatrix*: on this principle repeated V. S. Sudorifics,

Sudorifics, heating medicines, opium, increase every kind of inflammation ; and diluents and refrigerants diminish it :—inflammatory proper fever, from blood in colorless vessels, universally or locally, and fever accordingly universal inflammatory fever ; local, viz. phrenitis, pleurisy, &c. :—the spasm in all exanthematic fevers, is occasioned by a thin caustic, acrid serum, which in the interior parts, is diluted, and “ corrected ;” and by the increased action of the S. S. it is expelled, in the form of eruptions ; the spasm resolved, and fever naturally cured : hence the propriety of demulcents and diluents, and mischief from sudorifics, purgatives, emetics, refrigerants, before the matter is “ concocted :” —in intermittents, the obstruction and infarction of the abdominal viscera, occasion the spasm, and increased action of the S. S. by which the disease is spontaneously cured : — in arthritic, rheumatic, and catarrhal fevers, there is peccant matter in the muscles, lungs or joints, from obstructed perspiration, producing spasm in those parts ; the action of the S. S. is increased, and the spasm, and morbid matter naturally expelled : —in active hæmorrhages, the spasm is occasioned by obstruction from the redundant blood, and the increased action of the S. S. from the spasm oc-

caſions the hæmorrhages and ſolution of the ſpaſmodic ſtate, by which the fever is cured.—Collected the hiſtories of fevers, eſpecially from Hippocrates, Aretæus, Celfus, Cælius Aurelianus, Alexander Tralianus, Ballonius, Riverius, Mercurialis, Lanciſi, Baglivi, Willis, Sydenham, Morton, Sylvius, Boerhaave, Sennertus, Hildanus, Etmuller; adds many of his own obſervations and caſes —Explanation of the phenomena, and remote cauſes, t. ii. ſect. i. § iv, § v.—wrote fully on the remote cauſes and origin of fevers—the two actions ſucceeding each other, in every fever, obſerved by Hippocrates.

Fever, a primary diſeaſe, as well as ſupervenes to other “ paſſions.”—Nine-tenths of mankind deſtroyed by it.—That intermittents are contagious (ſ. i, c. iv, t. ii.)—Not to diſturb the critical motions by medicines.—Wrote particularly on camphor—ſpirit of ſal ammoniac, from ſal ammoniac—oil of wine—dulcified acid of vitriol and nitre—anodyne liquor—wine—nitre—antimony—marine ſalt—manna—opium—caſcarilla—magneſia alba.

∴ *Treatment.* In tertians, quartans, and quotidians: the indications formed from the preſence of
acrid

acid bile, which, by its irritation, occasions the spasm.—*Remedies*—nitre, sal ammoniac, diluents; acids forbid because they inspissate: diaphoretics; cerussa antimonii, antimonium diaphoreticum, infusions of scordium, lemon peel, carduus benedictus, with his *anodyne liquor* after the paroxysm: during the spasm, when too violent; anodyne liquor, spir. nitri dulcis in distilled stimulant or antispasmodic waters, diluents, nitre: for acid bilious or viscid matter in the primæ viæ, the testaceous powders, fixed alkali, nitre, digestive salt, tartar vitriolate, diluents, Epsom salt, salt from Seltzer water, magnesia alba which with the acid of the stomach forms a kind of Epsom salt, manna, rhubarb, terra foliata, rhubarb. *Emetics*, ipecacuanha mixed with tartar emetic; and purged and vomited by the same medicine; a mixture of emetic tartar, manna, terra foliata: to restore vigor after the paroxysms and prevent their return the safest and most efficacious remedy is the Peruvian bark, hellebore, astringents, bitters, iron, alum, cascarilla.—*Opiates* hurtful: to remove obstructions of abdominal viscera; extracts of bitter vegetables; acidulous and thermal waters, mercurius dulcis, diaphoreticus solaris, antiquarium Riverii, regulus antimonii medicinalis,

cinalis, panacea Glauberiana and Conerdingiana, sulphur antimonii.

In the femitertian, to remove inflammatory obstruction of the menfetry, liver, &c. ; ceruffa antimonii, nitre, and abforbent earth :—to expel and correct the febrile matter, manna, and tartar, rhu- barb, polychrest falt, bitter extracts, refinous gums, aloes ; by perfpiration, effence of fcor- dium with the anodyne liquor.—In catarrhal fe- ver, in the fpring and autumn, V. S. early in the difeafe — Abforbents, demulcents, fpermaceti, almond, or poppy feed, emulfion, liquorice, &c. ; anodynes, diacodium of Montanus, pilulæ de fty- race of Alexander Tr. ; diaphoretics ; pectorals, gum ammoniac, myrrh.—The fmall pox, be- nignant, malignant, and intermediate ; and mea- fles.—To diminifh acrimony ; diaphoretic antimo- ny, C. C. C. demulcent drink,—to promote the eruption, liquor anodynus and bezoardicus, con- trayerva—to promote the deficcation, abforbents, faffron, myrrh, very mild laxatives, viz. pilulæ Beccherianæ.—The miliary fever, red and white. —Sometimes idiopathic, at others fymptomatic —to promote the eruption, and in the recession, the anodyne liquor, with a third part of the bezo- ardic

ardic spirit of Buffius. The epidemic contagious petechial, catarrhal fevers.—The true petechial fever of Minda, in 1683, described—a species of febris Hungarica.—Erysipelas, an exanthematic fever—similar to the plague,—Idiopathic, symptomatic, true and spurious.—Remedies—spiritus nitri dulcis; the anodyne liquor, lapis bezoardicus, cinnabar; demulcents.—Clinical cases of erysipelas. — The synocha or sanguineous fever, from congestion of blood—simple, from blood in a sound state, a disease of short duration; and putrid or malignant synocha, from the same state of the blood, in weak and bad habits; it continues to the 14th or 21st day with petechiæ. — Is sometimes epidemic; in four days catarrhal symptoms: cured 1st, by diminishing the quantity of blood by V. S.—2dly, by removing the spasm and diminishing the heat by diluents, acids, nitre, cold drink—3dly, by restoring the circulation on the surface of the body by diaphoretics, 4thly, in the decline, laxatives.—The ardent fever.—In the inflammation of the stomach, on theoretical grounds, V. S. and opium hurtful.—In the angina, V. S. from the jugular veins; the tongue; by scarification and leeches from the neck.—In the phrenitis, to remove the congestion in the
 head,

head, the increased impetus, and the spasm, blood-letting, from the jugular vein, laxatives, acidulous diluents, pediluvium, fomentations to the head; in every affection of the head, the hairy scalp to be shaved.—In pneumonic fevers, the lentor in the blood and spasm to be resolved;—blistering plasters not mentioned, nor opium.—Hepatic fever “*abstinendum ab omnibus opiatis*” “*quæ febrem accendere, vigilias interdere &*” “*delirium suscitare valent.*”—Nephritic fever, sometimes a diary; V. S. in the foot. —Hæctic fever; causes and seat of local disease attending it various—*antihecticum poterii.*—Hemorrhages from fever, active; doctrine on this subject new and clear; the febrile spasm occasioned by plethora and expansion of the fluids; cured by V. S. by Paracelsus’ remedy—nitre—by acids; opiates; laxatives; pediluvium.—Registers of the weather.

G. E. Stahl. Fever consists in an action of the vital principle, or *natura medicatrix*, to expel putrid or putrescible matter, by increasing the vital actions—is a salutary action.—Nature is an inorganic, wise, intelligent principle, the mover of all the parts,—called *anima rationalis*—
that

that the symptoms arose from two sources, viz. the noxious matter, and the natura conservatrix, and medicatrix—from the nature of fever its name given, namely, derived from februo, or the solemn rites februa, “ quibus domicilia
 “ ab umbris erraticis defunctorum repurgare,
 “ et causas morborum tollere intendebant.”—*Continentes* without any remission from beginning to the end; ephemera; ephemera plurium dierum, fynocha, fynocha putrida—*Continuæ*; in which there are exacerbations and remissions, viz. continua simplex, febres catarrhales, biliosæ, inflammatoriæ, exanthematicæ, continua tertiana, quartana, lenta, and hæctica :—*Intermittentes*.—*Febres idiopathicæ, primariæ, essentielles*, in which one affection;—*Febres deuteropathicæ, secundariæ accessoria, symptomaticæ*; rheumaticæ; biliosæ; inflammatoriæ, viz. pleuritis, &c.; catarrhales; exanthematicæ, viz. variolæ, &c.; febres dysentericæ; chronicæ; vulnerariæ.—General cause, from plethora, also from the quality of the fluids—rejected fermentation as the cause, also obstruction in the capillaries from spasm by irritation, and the Boerhaavian doctrine of the reciprocal and quicker influx of the nervous fluid from the brain into the heart—accurate in the account of the remote causes—heat the essential,
 K inseparable

inseparable symptom, but not the fever itself—perhaps no person, or but few, are directly destroyed by a fever, but they die from the disease which attends, or to which the fever supervenes—hæmorrhages on critical days—in the treatment, “*medicus fit minister naturæ*”—in the beginning and increase of the fever, the morbid matter is prepared; in the height and decline, it is fit for, or is actually excreted—emollients, diluents, attenuants, absorbents, nitre, acids, to promote the excretion; diaphoretics, antimonium diaphoreticum, bezoar mineral; camphor; clysters; in a few fevers only, vomits, and laxatives; and in the synocha only, V. S.—Stahl’s, the Hippocratic doctrine maintained—in every fever refrigerants hurtful—thirst, inquietude, and other symptoms, are not alarming—in the tertian, did not exhibit vomits excepting to expel morbid concocted matter from the stomach, nor Peruvian bark: but in obstinate cases only, antimonials, iron, bitters—“*per arsenicum medicatio non decet viros* since “*ros*”—in the quartan, for infarctions, the nuxvomica—when the paroxysms are habitual, the Peruvian bark—in the quotidian, emetics only in spontaneous vomiting; the bark improper, because it confines, instead of expelling, the febrile matter—

matter:— In inflammations practised bleeding sparingly, seldom, and only early in the disease— no topical astringents or sedatives; opium condemned in fevers, rheumatism, and all febrile cases.

Hermann Boerhaave. Every fever consists in a preternaturally frequent contraction of the heart, attended with an obstruction in the capillary vessels—the inseparable symptoms from the beginning to the end of every fever is the pulsus velox.— In almost every fever, from internal causes, the constant symptoms are, horripilation, quick pulse, heat.—Horripilation not in every part of fever, nor in every fever:—in the cold fit from the phænomena, there appears to be an obstruction of the blood in the extreme vessels, and at the same time a more frequent contraction of the heart—the remote causes may occasion increased motion of the blood, which the vessels resisting, the thinner parts are expelled, and viscosity of the blood is induced; hence obstruction in the small vessels; or the same effect, viz. increased action of the heart, may be produced by increased resistance in the capillaries; and this quickened circulation necessarily occasions a greater secretion and influx of nervous

fluid into the heart, which is an additional cause of the frequent pulse.—Remote causes, enumerated act directly, either by increasing the motion of the heart, or by producing obstruction in the capillaries—among the remote causes reckons inflammation, suppuration, hydropic liquid, &c. (§ 586)—the phænomena of the cold fit from the contracted state of the vessels, the inspissated blood, and the weakened power of the heart; of the hot fit from increased action of the heart—heat not the cause or essence, but the effect of fever—effects of fever; quickened circulation; removal of stagnating fluids; coction and excretion of the stimulating, or obstructing matter; crisis of the matter, which produced inspissation, and irritation of the fluids; obstructions of the viscera; thirst; heat; pain; anxiety; debility; lassitude; sense of weight; impaired digestion, &c.—continued sometimes change into intermittents, and intermittents into continued fevers:—terminate in death, other diseases, or health.—Indications, viz. 1. to attend and to support the strength of the vital functions; 2. to correct and expel irritating matter; 3. to dissolve and expel lentor; 4. to palliate symptoms.—Fever removed by the Peruvian bark, often produce chronic diseases, in consequence of

of the remaining lentor—putrescent disposition in all fevers.—Principal irritations known; inflammation, suppuration, hydropic liquid, miasmata, and contagion.—Opium early in the disease only mentioned as a sedative, to remove certain passions—V. S. in inflammation in general, not proper after the 4th day.—Eruption in the small-pox, measles, erysipelas, scarlatina, petechiæ, produced by the increased circulation in fever.—Fevers divided into *continua*, which go on from the beginning to the end without remission, in one course; *remittent*; *intermittent*.—*Continua*; *ephemera*, *continua non putris*, *synochus putris*, or fever from great acrimony of the fluids, (and which tends to putrefaction, rather than putridity,) *caufos*.—Acute diseases consisting in fever and inflammation; phrenitis, angina, variola, gout, rheumatism, &c.—History and remote causes, accurate.—Fever symptomatic of chronic diseases.—In the rheumatism, did not exhibit opium.—In fevers no antimonials, but for vomits; Hoffman's anodyne or æther, or dulcified spirit: purging and opium but sparingly; not with double salts in purging doses, except tartar; blistering plasters very little used.

Bonetus, Morgagni, Licutand, Haller; their collections of dissections.

Torti, an elaborate and valuable work on intermittents.

Inoculation:—The son of Lady M. W. Montague, the first European inoculated at Constantinople, 1717—the practice introduced into Turkey, about 1675, from Circassia—origin not known. Is said to have been practised time immorially in the Welsh mountains.

Jurin, one of the first writers on Inoculation.

J. Freind: wrote nine commentaries on the first and third books of the epidemics of Hippocrates—particularly on the use of purgatives in the confluent small-pox, and in the erysipelas capitis—the confluent variola being a putrid fever, purging when the febrile matter is concocted, may be particularly efficacious.—Employed on the principle of imitating the cure, by the *natura medicatrix*, as observed by Hippocrates.—confirmed by particular cases.—Exhibited them in the confluent kind, when the pustules began to dry, and in the numerous distinct sort in contradiction

tradiction to Morton, who said cathartics were pernicious, even in the decline of the disease, and before the 13th day, and without previous V. S. which Sydenham deemed proper.—Nature indicated the practice by the spontaneous diarrhæa in children, and the ptyalism in adults.—In erysipelas of the head, administered purgatives at any time of the disease when the brain was affected, whereas others had administered sudorifics—made some addition to the history of the variola.—Bled from the jugular veins in febrile phrenitic delirium.

Sir David Hamilton wrote a collection of histories of the miliary fever, and on that fever in general.

Richard Mead; his work on the small-pox and measles—medical precepts and cautions.—De imperio solis & lunæ.—Observed that patients die with excess of swelling in the variola; gave bark.

Clifton Wintringham; improved the history of epidemic fevers, by showing the connection between them and the atmosphere—explained their remote causes, especially miasmata and infection.—Recommended laxatives in the swelling and
height

height of the small pox.—Proposed opening the pustules in the confluent sort.

Ebenezer Gilchrist ; a very faithful and full history of nervous fevers.—The theory inaccurate.—Practice since his time much improved.—The use of blisters, as well as bad effects.—Opium.—His observations a very considerable improvement.

Sir R. Manningham's description of the nervous fever or febricula : by which this disorder became still better known.

Thomas Simpson, differed from Sydenham in the treatment of the small pox, with regard to keeping the patient constipated, during the period of suppuration ; and the supporting the swelling of the head and hands, &c. by the diacodium—after the suppuration, patients first relieved from the severest symptoms of the eruption, but soon became delirious, from the opiate, given as Sydenham directs.—The notion that the pustules would be made to subside by purging before the morbid matter was separated from the blood, served to establish a pernicious practice.—The small pox, a disease of the skin, consisting in inflammation, and suppuration ; objects to the attempt

tempt to promote the swellings, but not the pustules.—Purged during the whole time of suppuration, and at the same time gave opiates.—Sydenham himself obliged to use laxatives, in constipation, in the secondary fever.—All the good effects of opium are easing pains,—diminished the swelling, for which, in imitation of nature, produced purging.

Gangrene cured by the Peruvian bark.

Theophilus Lobb;—Of opinion with Boerhaave, that the variola may be prevented or cured without any eruption; not by the antiphlogistic method, but by the *Æthiops mineral*.—In fevers the fluids either too thick, particles too bulky, too thin, or are acrimonious: V. S. consequently practised sparingly.

De Jussieu; decoction of *simarouba* brought into Europe in 1713, and used as an astringent; before this period, *Japan earth*, by Boulduc; the *senega root*, account of, by Tennant, 1739; *Frobenius* introduced vitriolic æther; *Woulfe*, the nitrous æther.

Mr. Rushworth, first, in 1715, and afterwards *Skipton*, *Douglas*, and others, shewed that the Pe-

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ruvian

ruvian bark cured inflammation and fever attended with gangrene, and stopt its progress.

About 1734, *Powder of the Chartreux* or Kermes mineral, a preparation of Glauber, much in vogue, in fevers, pleurifies, peripneumonies, asthma, catarrhs, anginas, small pox, &c. *Ice water* in fevers, small pox, &c. by the Italian physicians, applied almost universally both externally, and fifteen to twenty-five pints daily internally.

A. Thomson; emetics administered just before the cold fit in agues, or in the beginning of the hot stage; by which practice, one third or less Peruvian bark than usual, was sufficient to cure intermittents.

Morgan gave emetics about an hour after the invasion of the cold fit, and sweating promoted, which cured without bark.

Douglas, in 1732, described an epidemic angina in New England, which appears to be the angina ulcerosa maligna.—Exhibited infusion of serpentaria, volatile alkali, wine, Peruvian bark, elixir vitrioli.

Martin defended the ancient doctrine of crises and periods.

Hillary; an account of the states of the atmosphere, and attending disorders. — Wrote on the small pox. — Observed a delirium on the fourth, or fifth day after the eruption, and that a sparkling, fiery, red colour at the bottom of the eye, is a fatal symptom. — Recommends preparation by purgatives, mercury, and low diet. — V. S. in all the stadia if the fever becomes high. — Thinks the disease may be prevented by Boerhaave's method.

Degner, on the epidemic, contagious dysentery of Niemagen, 1738.

Robert James, 1748, in his "Dissertation on Fevers, and Inflammatory Distempers," opposed the Hippocratic system of practice. — With *Asclepiades*, called it a meditation on death, and a physician of this sect, resembled the spectator of a tragedy, "who spoiled if he attempted to prevent the catastrophe." — Recommended stimulating cataplasms to the feet in comatose delirium. — His febrifuge powder, which seldom failed, was a preparation of antimony; did not trust to it alone; employing V. S. purgatives, and other remedies.

—Is said to have exhibited the Peruvian bark, as soon as remissions appeared, and that he declared, he considered that medicine as the only known febrifuge.—His practice occasioned antimonials to be the general febrifuge in continued fevers.

De Gorter; his commentary on the aphorisms of Sanctorius.—*Keil*, had found several errors in the experiments of Sanctorius—that diminished perspiration does not produce catarrhal cough, “*adiapneustia not est causa tussis.*”—That this discharge was extremely various in quantity, without any disease following or attending.

J. Huxham. The causes of almost all epidemics, are depraved constitutions of the atmosphere.—The propagation and duration of contagious diseases, principally, depend on them.—Wrote observations on the epidemic diseases, and on the manifest qualities of the atmosphere at Plymouth, from 1728 to 1738, and from 1738 to 1748.—Emetics exhibited in catarrhal fevers.—Epispastics to the throat in the angina.—Scarlatina frequently observed.—Malignant peripneumonic fever very fatal.—Malignant contagious fever, in which the blood was much dissolved, and V.S. hurtful; produced in jails.—Catarrhal fever
called

called influenza, in the spring, 1743, throughout all Europe; frequently became pleuritic and peripneumonic, and changed into a tertian and quotidian.—Slow putrid fevers.—Musk highly extolled for promoting the eruption in the variola.—Blistering plaisters, and cordials proper in the small pox, attended with a slow fever, lurid, and livid variolous eruptions, contrary to Sydenham's advice.—An epidemic catarrhal fever changes sometimes into an intermittent, and peripneumony; does not bear V. S.—In malignant peripneumonic fevers, copious V. S. hurtful.—Distinction between malignant peripneumony, and the peripneumony from inflamed and viscid blood.—In pleuroperipneumonia, large, burning, and even painful pustules on the breast, scapulæ, neck, about the fifth to seventh day, favourable; which indicate epistartics and scarifications.—Too copious V. S. in putrid fevers of jails.—Red wine the best alexipharmic.—Pulmonary phthisis, without ulceration.—Many observations on the rheumatism.—Glas of antimony infused in wine; his essence of antimony, the best sudorific in fevers, and obstinate rheumatisms.—His history of the slow, nervous fever, is invaluable; the other accounts of the putrid, petechial, intermittent, peripneumonic, and pleuritic fevers, and the small pox, are
all

all excellent, as well as of the pleurisy and peripneumony; and erysipelas of the lungs.—Described the ulcerous sore throat, but not till after Fothergill.—He observed no paroxysms, in continued fevers. — Proofs of dissolved and putrid blood from the scurvy, chlorosis, petechial fevers; of “viscid blood,” from the buffy coat; of pituitous blood from leucophlegmatia; they are all erroneous or equivocal. — Held the doctrine of lentor, acrimony, density, dissolution, &c. of the fluids.—Different habits referred to the strictum, laxum, & delicate.—That fever was a struggle of nature to remove an oppressive cause.—Increased motion of the blood, the essential effect of fever; which in inflammatory fever, occasions *obstruction* by forcing red blood into the “ferous arteries,” and inspissating the blood.—Obstruction in the pleura produces the pleurisy; in the brain, phrenitis, &c.—Blisters, improper in the beginning of inflammatory fevers, because they stimulate by their “acid salt;” also indiscriminately in putrid fevers.—Profuse purging, even in inflammatory fevers, hurtful by draining off the thin part of the blood.—Lentor also the proximate cause of slow or nervous fevers. — Intermitents from obstruction by marsh exhalations. — The seat of the slow, nervous fever, principally in

in the “lymphatic or nervous juices;” of the putrid malignant fever in the blood.—In the angina, blisters to the throat to promote the natural cure by inflammation and swelling.—Corrected Sydenham’s practice of V. S. and purging in the plague.—Shewed the propriety of treating certain fevers, upon a different plan, from the antiphlogistic of Sydenham; or, in the low and putrid, and several epidemics, V. S. not at all, or sparingly; vomits to be exhibited early; laxatives; promoted the apparent operations of nature, without regard to critical days.—Never saw a putrid fever carried off till more or less sweat issued.—No crisis in the nervous fever.—Camphire joined with opium, the most certain sudorific in nature; theriaca Andromachi, mithridate, diascordium, and elixir paregoricum, the best sudorifics.—His tincture of bark, containing serpentaria, saffron, orange peel, and cochineal; elixir vitriol, red wine, spices in the decline of low and putrid fevers.

The nervous fever did not bear purging; opiates, if strong, pernicious; blisters serviceable; chicken broth; gentle diaphoretics, procure most ease.—For tremors, and sinking of the strength, gave musk gr. x. for a dose, pulvis,
con-

contrayervæ, saffron, Raleigh's confection; citronated volatile alkali, saline mixture, blisters to the limbs, volatile alkali, wine, tincture of bark; bark; especially in the decline, when there are remissions.—Sweating medicines, “ been the “ bane of thousands in the miliary eruption.”—Three kinds of fever attend the small pox, viz. inflammatory, nervous, and putrid, and the treatment is accordingly.—Censures Sydenham for the uniform use of the cold regimen, and Morton for the hot regimen.—Of opinion that preparation by the use of the bark or mercury, could render the small pox mild.—Head should be shaved antecedent to the eruption. — Warm bathing to promote the eruption.—Says, pustules appear on the lungs, and viscera of the abdomen.—Gave bark in certain cases, on the authority of Mead, Monro, and Wall, to produce suppuration.—At the close of the third stadium, the suffocation sometimes threatened from the glutinous thick matter, and relieved effectually by emetics of oxymel scilliticum, infusion of ipecacuanha.—Anodynes near the crisis.—When the salivation is abated, and incrustation begins to be formed, in its consequences, it is like the “ poisonous “ shirt of Hercules :” confining pus, which produces a secondary fever.—An absurd and silly notion

notion, that the linen should be worn by another person twelve or twenty-four hours, before put on by the sick.—If salivation continues, the pustules mature, the swellings come on regularly, the patient sleeps, breathes freely, nature cannot be assisted, and should not be disturbed; and clysters, though costiveness be present for several days, should not be injected till after the compleat incrustation; then proper to prepare for the succeeding purges; but if the foulness of the primæ viæ, secondary fever, &c. came on, clysters used.—Purging, at the close, with calomel.—Opium freely in pleurisy after V. S.

John Fothergill; gives an account, December 1748, of the *ulcerous sore throat*, in London; and of this disease in other countries, previous to his observations. — Appeared first in England about 1738.—Relates a very accurate history of it in London; its progress, issue, causes, and juvantia and lædentia. — Was a disease disposed to putrefaction of the habit in general, and fauces in particular;—that its occasional cause was, a specific miasma and contagion;—that the most sensible relief, as in other putrefactive cases, was from discharge of peccant matter by the skin, and that

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therefore

therefore the eruption was to be promoted ;—that “ a cordial, alexipharmic, warm regimen, was the most useful,” and V. S. purging, &c. retard or prevent such discharges, and do much harm.—No critical days.—The fever begins with the affection of the throat.—V. S. and purging seldom without mischief. — Remedies ;—emetics ; wine in mint tea ; contrayerva ; cordial, and Raleigh’s confection ; spices ; spirituous distilled waters.—For the diarrhæa, confectio fracaſtorii, elect. è ſcordio cum opio, cinnamon water.—Wine with nourishing food.—Blifters to relieve faintnefs.—In caſe of hæmorrhagy, refrigerants failing, gave bark and opium.

Chomel’s Work, on the *ulcerous ſore throat* at Paris, in 1748, tranſlated by Torriano. — V. S. never employed^t ; bliſters uſeful ; emetics to unload the primæ viæ ; camphire the chief cordial and ſudorific ; — conſiders it to be a putrid diſeaſe ;—ſhows that it was obſerved by the ancients ; a table of nineteen authors who had already written on this diſeaſe.

Bryan Robinſon ; has written a table ſhewing the tenour of the pulſe at different hours of the day ;

day ; which exhibits the number of the pulse in a minute, of *two* persons in health, when sitting, at the several hours, from eight in the morning to eleven at night. The numbers of the pulses are means from observations on one subject during twelve, and on the other during, three weeks. From this table it appears that the pulse is slower in the morning, than at any other time of the day ; that it grows quicker before breakfast, a little more so after it ; that it grows slower again before dinner, and quicker immediately after dinner ; and that the quickness acquired by this meal continues for about three or four hours, and then abates a little ; and continues in that state without any considerable change, in bodies which eat and drink little at night, till they go to rest. The breakfast was between nine and ten, and the pulse in one person at eight, was 65 ; at nine, was 67 ; at ten, was 70 ; at eleven, was 73 ; at twelve, was 71 ; at one, P. M. was 70. The dinner was at two, P. M. and from three to six, the pulse was 77 ; at ten, it was 74 ; at eleven, it was 76. In the other subject, who breakfasted and dined at the same time, the variations were proportional to the former.—These observations have

been the principal part of the foundation for the theory of febrile exacerbations, and remissions, depending on a law of the animal œconomy in health, called the “natural evening paroxysm;” but the increase and decrease of the pulse, obviously more probably depends on the stimulus of food, drink, and motion, than on any such law. Many subsequent observations and experiments have, perhaps, demonstrated the truth of this latter opinion.

Observed the effects of motion, posture, the affections, passions, respiration, in encreasing and diminishing the pulse; of great use in preventing erroneous opinions so common, on the subject of their action.—Propos. xxi. prob. iv.—Statistical Experiments Prop. xxxii, xxxiv.

FROM THE MIDDLE OF THE PRESENT
CENTURY.

Fr. Nicholls, related and explained many properties of vital matter, but on the principle of the *anima medica*; *Haller* discovered many qualities referred

referred to the vis insita *, and vis nervosa; *Whytt* observed and explained many properties, called vital and involuntary motions, by the sentient principle: *Gaubius* referred them to the vis vitalis; *Cullen* to the nervous system: *Tiffot* considered the properties of vital matter called irritability to furnish a theory, by which all the phenomena of diseases might be explained †.

Whytt, by his treatise on sympathy, established a principle of considerable use.

F. B. Sauvages; his arranged system, published first in 1731, and the new edition in 1763, called *Nosologia Methodica*;—diseases arranged according to symptoms into ten classes, containing 295 ge-

• Hæc vis ab omni alia hæcenus cognita proprietate corpore diversa & nova est. Neque enim a pondere, neque ab adtractione, neque ab elatere pendet, cum in molli fibra sedeat, à durefcente evanescat. — *Halleri Primæ Lineæ*, ccccii.

† Ex. Vestris operibus probe intellexeram hanc esse irritabilitatem, quæ in medicinam haud minùs radiet, quam *circulatio*; par nobile inventorum quorum deficiente altero claudicat aliud.

nera,

nera, under which are comprehended 2400 species — A most valuable work — Febrile diseases, two classes, viz. *febres*, and *phlegmasiæ*. — *Febres*, three orders, viz. continued, remittents, intermittents. — *Phlegmasiæ*, three orders; *exanthematicæ*, *membranacæ*, *parenchymatosæ*. — In every species of the class, *febres*, the strength of action of the vital functions, is in greater proportion to that of the voluntary powers, than in health; of which difference of ratio, there may be four kinds, viz. 1. the strength of the voluntary functions natural, and the vital powers, especially in frequency, increased; 2, the voluntary powers diminished in strength, and the vital not altered. 3, the powers of the limbs increased, and the vital actions increased in a greater ratio, as in the *Phrenitis*. 4, the strength of the voluntary organs diminished, and of the vital increased, or natural or even diminished. *Characters*. — Increased size and frequency of the pulse, with *coldness* on the attack, *heat* in the progress, and *sweating* in the decline, and greater prostration of strength than would be expected from the state of the vital powers.

“ *Causa febris est distributio fluidi nervei, seu*
 “ *virium in nervos cordis in majori ratione,*
 “ *quàm in nervos artuum; eo sine fit illa dis-*
 “ *tributio,*

“ tributio, ut repagula circulationi sanguinis in
 “ minimis vasis opposita removeantur, et sic vasis
 “ sanguiferis libertas, and sanguini facilis aditus
 “ restituantur. *Instrumenta* febris potissimum sunt
 “ cor et arteriæ. *Materia* febrilis, seu morbifica
 “ multiplex est; sæpè chylus pravus, qui tum
 “ sua viscositate vasa minima infarcit tum suâ
 “ acrimoniâ vasa sanguifera molestat, et ad con-
 “ strictiones sollicitat. Quandoque id præstant
 “ miasmata, tum sponte in sanguine enata, ob
 “ suppressas evacuationes assuetas, maximè ob
 “ perspirationem suppressam, purulenta liquami-
 “ na, putredinosa fluida, tum extus ex aère,
 “ cibus, potubus, in massam sanguineam delata:
 “ raro nititur natura ad vasa dilatanda et elongan-
 “ da tantummodo.”

Adopted the notion of Hippocrates, Syden-
 ham, Baglivi, &c. that the symptoms arise, ei-
 ther from the disease itself, or from the effects of
 nature, to expel morbid matter.

Before the discovery of the Peruvian bark, the
 cure consisted almost entirely in the preparation,
 coction, and expulsion of the febrile matter, but
 this remedy by correcting the morbid matter,
cures

cures without any sensible evacuation, and much more expeditiously than nature.

Febres continuæ.—Begin with lassitude, affection of the head, coldness, horror but not rigor; then increase of heat daily to the height, with head-ach, thirst, prostration of strength, horizontal posture, no exacerbation except from an evident cause; on the decline, moisture of the skin, sweating, or other evacuation.—Symptoms related as they appear in the animal, vital, and natural functions, and in the excretions, and qualities.

Distinction of fevers into *essential* and *symptomatic* is erroneous—The cause of the essential being said to be obstruction, or irritation, therefore symptomatic—In the symptomatic, the local affection may proceed from a common, or the same cause as the fever.—If the increased frequency of the pulse be attended with a proportional increased strength of the voluntary organs, as in a state of anger, by exercise, &c. fever is not present; or if the pulse decreases in strength, in the same ratio as the voluntary organs, e. g. in the agony of death, debility not fever is present: hence in-
 creased

created pulse alone is not fever.—Obstruction is only a remote cause, a “*principium.*”

Objections to a *fomes* in some part, which affects the blood; from passions, terror, exciting and preventing fever fits; from their regular recurrence, &c.—all mechanical explanations inconsistent with mathematics.—Ephemera; 11 species; principally from the difference of the occasional causes; the history tolerably complete.—Synocha; 9 species.—Synochus; 15 species.—Typhus; 9 species.—Hæctica; 13 species; one species, the febricula vespertina of Morgan, occasioned by food; hence the morning pulse is to the evening, as 7 to 8, or as 49 to 64.—O. II. *Remittentes* — amphimerina, or continued quotidian; 24 species.—Tritæophya, or continued tertian; 12 species.—Tetartophya, or continued quartan; 6 species.—O. III. *Intermittentes*—quotidiana; 11 species.—Tertiana; 23 species.—Quartana; 17 species.—Erratica; 6 species; they have no observable type.

Pblegmasiæ—are diseases in which there is a fever and inflammation; or a fever with topical pain, heat, and buffy blood; also, if inflammation

tion externally, with redness and swelling. — Symptoms produced by the fever, and by the inflammation. — Explained on mechanical principles. — Inflammatory diseases, either attended with a putrescent state of the blood, as in the plague, ulcerous sore throat, &c. ; or without any such state of the blood. — The fever, in these diseases, is either a remittent, or continued. — 3 orders ; *exanthematicæ*, *membranacæ*, *parenchymatosæ*. — Eruptions are, phlegmonous, erysipelatous, phlyctænous, or livid and purple spots. — *Exanthematicæ*, 10 genera. — *Membranacæ*, 18 genera. — *Parenchymatosæ*, 25 genera.

Lobb ; intermittents, remittents, inflammatory and exanthematic fevers, produced by spissitude of the fluids ; the typhus, synochus, hectic, by dissolution ; by both spissitude and dissolution, the quartan, quotidian, and putrid pleurisy are occasioned. — All fevers have acrimony for their fomes. — Rejected V. S. bark, emetics, purging. — Cured by acids, alkalies, neutral salt, diluents, stimulants, refrigerants, according to the kind of acrimony supposed to be present.

Clutton; his remedy, a mixture of dulcified spirit of vitriol, and salt, with superabundant acid, as a sudorific, assisted by warm diluent drinks; six pints in twenty-four hours, for two or three days.

Sir George Baker, Bart.—account of the catarrh and dysentery of 1762.

Sir John Pringle, Bart. improved the history, knowledge of the causes, and treatment of the jail fever, of bilious fevers, dysentery, also the inflammatory fevers: — maintained and extended the doctrine of fevers depending on putrid matter.— Introduced and exploded medicines on the principle of their antiseptic and septic effects on inanimate matter. — In rheumatisms, without fever, exhibited the Dover's powder.—In inflammatory fevers, opium only used after the crisis, and in case of long watching.—Blisters early in the pleurisy.—Said he observed no critical days in bilious fevers, nor distinctly in jail fevers.—Emetics on the attack of fevers.

George Clegborn; kept a diary of the weather in Minorca, from 1743 to 1749, and observed the diseases attending it.—Principal epidemics,

mics, the tertians; the history of which, much improved. — Epidemic dysenteries, small pox, pleurifies.

James Lind; the diseases, viz. fevers, and fluxes, &c. to which Europeans are subject in hot climates, explained, and the method of preventing and curing them, related.—No critical days of the ancients observed.—Patients died in the hot, but not cold fit.—James's powders exhibited to above one thousand patients, but not found to be more efficacious, as a febrifuge, than emetic tartar.—Emetic tartar, a greater febrifuge than the vinum antimoniale.—Discovered the use of opium in the hot fit.—The efficacy of blistering plaisters in removing fevers. — Bark in remissions.

Senac; wrote professedly on intermittent fevers; relates the phænomena, investigates the causes, explains the treatment, and collected a greater number of valuable facts, than other writers.—Laments, that in physic, the advances are not proportional to those in many branches of natural philosophy.

Donald Monro ; his observations on febrile diseases of military hospitals.—In the ulcerous angina, exhibited opium with the bark.

F. Home ; an account of an endemic disease in Scotland, called the croup.

Stedman ; insalutary constitutions of the air, from a defect of winds of the higher degrees.

A. De Haen ; his practice with regard to diet, the same as that of Hippocrates.—Endeavours to shew, by two hundred clinical cases of Hippocrates, the existence of critical days—the 3, 4, 5, 7, 9, 11, 14, 17, 20, 40, most frequently critical.—In his practice, a greater proportion of patients cured, than by Hippocrates.—Clinical observations in the variola and scarlatina ; on the heat in fevers ; on fevers.—No advantage from preparation for the small pox.—V. S. repeatedly, and the bark liberally in the scarlet fever.—In the plague, liberal V. S. and acids.

J. Clark ; on the diseases of the East Indies, and long voyages ;—tartar emetic preferable to James's powder. — Mercury in the hepatitis, externally

ternally and internally.—Mercury, externally in the rheumatism.

Hewson; his experiments showed, that the buffy coat of the blood was the sign of the tenuity, instead of lentor.

W. Withering; his account of the anginose scarlet fever, at Birmingham, 1778.—Distinguish it from the ulcerous sore throat of Fothergill.

Le Roy; on prognostics in fevers; denies the influence of critical days.

D. Campbell; opium very serviceable in the low contagious fever.

M. Wall; on the good effects of opium in nervous fevers, and those called the synochus.

T. Percival; tables shewing the mortality of the measles, and of the small pox at the different periods of life.

M. de Laffone; in the small pox and measles.—Recommends milk for the drink and food, but particularly

particularly for the diarrhœa;—formerly allowed by Rhazes, Fischer, Sydenham, &c.

W. Heberden; described the chicken pox; the hectic fever.—Observations on the pulse.—On the Measles.

Sir W. Watson; his observations on the “pu-
trid measles;” at London, 1763, and 1768.

T. Dickson; improved the history of the measles.

P. Camper; on inoculation; many new, curious and important practical observation.—Tables, representing by engravings, the appearance of the eruptions at different periods.—The degree of the disease depends, not on the cold regimen, medicine, age, &c. but on the habit; the *more opaque the skin of the subject*, the more severe the disease, and if the *skin be transparent, and colour on the cheeks, and delicate*, the small pox are always mild: a table shewing that the number of pustules, and violence of the disease, is not proportional to the number of incisions, and quantity of matter applied.

James Sims ; described upon the plan of Sydenham ; the fevers during four constitutions of the air, from 1765 to 1772.—That the morbid matter of fever, lies only in the *primæ viæ*.—V. S. can never form a primary indication, only necessary to obviate symptoms.—Blisters and sinapisms probably pernicious.—Vomits and purgatives, the chief remedies.—In nervous and putrid fevers, never relied on less than six or seven ounces of bark in two or three days.—Of opinion that in fevers, the remedies discovered, are sufficient for the cure, and that “ he shall ever fear that a
 “ physician was in fault, if a person dies to whom
 “ he has been called, whilst any degree of
 “ strength remained, and the patient could be
 “ obedient to his directions.”

Roupe, Cockburn, Lind, and Blane, on the diseases of seamen—on their prevention :—see Pringle’s Discourse.

Riollay ; very judicious remarks on the opinions and doctrines of Hippocrates, Galen, Sydenham, Boerhaave, Cullen, &c. [relating to fevers. — Thinks it probable that fever is produced by a local disease.

William Bromfield; in inflammation of the brain, recommends sweating by the Dover's powder, or a mixture of antimonial wine and thebaic tincture—cordials and bark in the erysipelas, for two years epidemic in London; in other cases, V. S.

Epidemics. A short account of them, during 22 constitutions, from 1590 to 1787, by James Sims. — The *plague* vanished in London since 1665;—*putrid fevers* as common in London formerly, as at present, though only mentioned by Morton, because Sydenham's practice was not extensive in the city;—in 1772, more killed by the *small pox*, than they had ever done in one year, in London;—the *scarlatina anginosa*, in 1786, epidemic in London, and its vicinity, which probably prevailed in Morton's time, but confounded with the spurious measles.—A chronological list of the *epidemic catarrhs*, from 1323 to 1775, by Cullen:—That of 1782, described in the London observations, the medical transactions, and the medical communications.—That of 1788, described in the medical journal.—*Petechial nervous fever*, at Dijon, 1760 and 1761.—*Malignant fever* at Coutances, 1772 and 1773.—Epidemic disease of *lying-in women*, in 1787 and 1788, by J. Clarke.

Nosologists; writers who have attempted to distinguish diseases by characters, upon the plan of the systems of natural history, namely, *Cullen*, *Linnè*, *Vogel*, *Sagar*, *Macbride*.

W. Cullen, in his *system of methodical nosology*, the class, fevers, called *pyrexia*: distinguished by horror, succeeded by frequent pulse, heat, many of the functions disordered, especially prostration of the strength of the limbs; divided into five orders, viz. I. *Febres*; characterised by langour, lassitude, and other signs of debility, without any local primary disease;—sect. I. *Intermittentes*; occasioned by marsh miasmata, in which only one paroxysm daily—comprehend remittents;—three *genera*; tertian, quartan, and quotidian.—Erratics belong to tertians and quartans: sect. II. *Continuæ*; not occasioned by marsh miasmata, no intermissions, but exacerbations and remissions, two paroxysms every day:—in forty years practice never observed a febris continens, or a fever without exacerbations and remissions.—*Vogel* *De Haen*, *Brendelius*, made the same observation.—In ambiguous cases, continued, distinguished from remittent fevers, by the occasional cause.—Three *genera* of continued fevers; the synocha or inflammatory; the typhus or nervous, jail, hospital, camp, ship, petechial, malignant, pestilent, yellow,

yellow, and putrid fever; the synochus or putrid fever to which belong the depuratory fever; the epidemic, continued, of Sydenham; the continued putrid fever of Wintringham; several miliary fevers. The hectica considered to be symptomatic.—O. II. *Pblegmatisæ*, the inflammatory fevers of Hoffman and Stahl, and the acute febrile diseases of Boerhaave:—19 genera; the ophthalmia, phrenitis, pleuritis, &c.—O. III. *Exanthemata*; 10 genera.—O. IV. *Hæmorrhagiæ*, comprehending the *active* kind only.—O. V. *Profluvia*, fevers attended by non-sanguineous discharges; 2 genera; the catarrhus, and dysenteria.—*In the first lines of the practice of physic.* The proximate cause consists of a debility of the functions, succeeded by the spasm of the arterial system, especially in the capillary vessels, and this spasm, by increased action of the heart and large arteries.—The cold stage therefore is the cause of the hot.—Differs only from Hoffman, perhaps, in assigning debility, as the cause of the spasm; the remote causes are sedative powers, which act on the nervous system.—No lentor of the blood to occasion the cold stage.—Rejects morbid matter, and the doctrine of concoction, on the ground of fevers being produced by cold, fear, &c.—cured by sweating, without any evidence of morbid matter; fevers cured by a slight hæmorrhagy.

hæmorrhagy.—Often a putrescent state of the fluids, which is an effect of the fever.—Bile secreted in large quantity, in warm climates and seasons, and excreted, but not a cause of fever.—Every fever, of more than a day's duration, consists of repeated paroxysms.—These are protracted, either from too weak re-action, or the permanency of the spasm.—One common source of the contagion, producing continued fevers, viz: *human effluvia*.—Miasmata from marshes, occasion intermittents.—Exciting or concurring causes; cold, fear, intemperance, excess in venery; not certain whether they alone can produce fevers.—*Prognosis* founded on the symptoms of re-action, debility, and putrefaction.—Critical days founded, because there are periodical movements in the human œconomy readily occasioned, and because such periods are observed in intermittents; are the 3d, 5th, 7th, 9th, 14th, 17th, 20th.—Indications of cure from the *re-action*, *debility*, and *putrescency*.

It has been said, that all inflammatory febrile diseases, with topical affection, the disorder of the habit was not fever, but merely symptomatic of the local disease, which produced one of two sets of symptoms, viz. of *inflammation*, and *irritation*.

Anatomy and Physiology; the investigations of the *absorbent system*, enable us to explain better the action of certain poisonous substances, or infection, which produce fevers.

Natural Philosophy. Registers of the weather, now kept with so much accuracy in a number of places, may hereafter serve to explain the causes of febrile diseases.

Natural History, and Chemistry; furnished several articles of diet — tea — coffee: medicines; viz. the oil of the ricinus; red bark; quassia wood and bark:—acid of tartar; nitrous ammoniac; marine æther; calcined magnesia; phosphorated soda; calomel by precipitation; acid of borax; concentrated acetous acid; the aerial acid.

Having, by way of introduction, taken the preceding view of the opinions, doctrines, and degree of cultivation bestowed on the subject of fevers: in the next place, I proceed to the immediate object of this work.

F E V E R S.

IT is most probable, that in every disease considered, by the most respectable practitioners, to belong to the class of fevers, there is a preternatural *frequency*, or a preternatural *quickness*, of the pulse, and the strength of the voluntary powers is either diminished, or is in a less ratio to the action of the heart and arteries than in health. This state of the sanguiferous system and voluntary organs, is accompanied with a number of other symptoms in the functions, qualities, and excretions, none of which, perhaps, are present in every case; but among the most frequently observed, are, impaired appetite for food—pain in the head—horripilation—sensation of heat—thirst—a preternatural appearance of the eyes and countenance—foulness on the tongue.

Fevers are, with practical utility, divided into two classes, viz. those in which there is a certain set of febrile symptoms; without any considerable evident local disorder constantly accompanying them;

them ; and those in which there is a local disorder, as well as a concurrence of other symptoms.

The former are called *fevers, proper fevers, or fevers strictly so called* ; the latter received their denomination from the nature, seat, or appearance of the local disease, viz. inflammations, hæmorrhagies, eruptions. discharges, &c.

I. C L A S S.

Fevers without any accompanying local disease.

These are usefully distributed into three orders, namely :

1. Intermittent,
2. Remittent,
3. Continued Fevers.

Intermittents, are fevers, the symptoms of which disappear generally within twenty four hours, and a similar concurrence of symptoms recurs almost always within the space of three whole days, or seventy ~~hours~~ *two hours*.

Remittents, consist also of a repetition of a similar concurrence of symptoms ; but between each

of the recurrences there is either only an abatement, and disappearance of some, or many of the complaints; or a cessation of all of them for a very short time.

Continued fevers, subsist from their commencement, to their termination, without any intermission or disappearance, and recurrence at regular periods, of most of the symptoms.

O R D E R I.

Intermittent fevers.

The concurrence of symptoms, called the paroxysms, most frequently recurs in about forty-eight hours from the commencement of the former paroxysm; it also frequently returns in about seventy-two hours, and sometimes every twenty-four hours. *Similar* paroxysms which recur at these periods are tertians, quartans, and quotidians. These are called *regular intermittents*. Similar as well as dissimilar paroxysms also recur at various irregular periods, and are called *irregular intermittent, or erratic fevers*.

The space of time from the beginning of one paroxysm to the commencement of the next *similar* succeeding recurrence is termed the *period*, *interval*, *circuit*, or *revolution* of the fever.

The time between the termination of one paroxysm, and the commencement of the succeeding one, is called the *interval*.

The state of the constitution, during the absence of the paroxysm, is termed the *intermission*, or *apyrexia*.

The periods of regular intermittents are called their *types*, which are accordingly those of the tertian, quartan, and quotidian.

Very generally in the first part of the paroxysms, there is a sensation of *coldness*, which is succeeded by the sensation of *heat*, and in the latter part *sweating* supervenes: hence the distinction into the *cold*, *hot*, and *sweating fit*, or *stage*. in ~~the~~ *tertian*

It must be remembered, that there are paroxysms with only two, or one, or even none, of these distinguishing symptoms.

I. Ter-

I. Tertian Intermittents.

Description: First, During the Paroxysms.

Pain of the head; general lassitude; sense of weight of the whole body; pain of the back about the first dorsal *vertebra*, extending along the *spina dorsi* to the *epigastrium*; tension of the *hypochondria*; coruscations before the eyes; yawning; pandiculation; paleness; weakness of the limbs; anxiety; are among the most frequent symptoms at the beginning of the paroxysms:—to which supervene or succeed the sensation of coldness in various modes and degrees, generally to the degree called *rigor*; inability to stand or sit, and the limbs feel as if compressed; nausea, and oftentimes reaching; vomiting or purging; a quick, frequent, and also small, and sometimes, irregular pulse; shortness and difficulty of breathing; disorder of the intellects, or *slight Delirium*

The duration of these symptoms, in which there is a *sensation of coldness*, therefore called the *cold fit*, is generally from two to three hours; but sometimes also they do not continue one hour, at

Nineteen case of *tertian* intermittents are of ^{other} kind. Most writers have treated of intermittents and continued fevers as if ~~as if~~ they belonged to the same family as it were; this we shall see to be different, the mistake arose from supposing continued fevers consisted of Paroxysms.

other times they are present four, or even five hours.

The sense of cold gradually diminishes and the *sensation of heat* succeeds, which, by degrees increases and frequently diffuses itself from the trunk to the extremities; and sometimes the heat, which is in extremely various degrees, begins in the extreme parts—it is accompanied by a feeling as if different parts had been bruised; increased or throbbing pain in the head; thirst; dry, rough tongue; redness of the countenance; increased sensibility to light; pains of the limbs, but especially the *lumbago*; a more full, regular, and stronger pulse; hot breath, and continuance of difficulty of respiration; the natural temperature of the constitution, increased frequently 6° . to 8° .; urine transparent, flame-coloured, or yellowish; delirium; re-appearance of the cutaneous vessels; sometimes buffy blood.

The duration of these symptoms, in which there is the sense of heat, without sweating, therefore named *the hot fit*, is extremely various, but frequently for about one, two, or three hours, when, with the gradual *diminution* of the heat, and other symptoms, a slight degree of *moisture of the skin*,
and

and very soon SWEATING supervene, and further mitigation or disappearance of many symptoms; frequently in the space of three, four, or five hours after the sweating commenced, by degrees this increased excretion, with all the other symptoms, disappear. During this part of the paroxysm, or as it is usually called, *the sweating fit*, the urine, frequently on standing, deposits a lateritious sediment, or it is frothy, turbid, and it is excreted more copiously: towards the end of the *evacuation* end of this stage of the paroxysm, sometimes there is either vomiting or purging.

The above is only to be considered as, perhaps, a tolerably just description of the greatest number of cases of the tertian intermittents; for besides the great variety arising from the different degrees, order, proportion to each other, and duration, of the above-described symptoms; there are other varieties, in which so many of these symptoms are absent, and different ones present, that they have very little resemblance to the notion of the forms of this disease, conveyed by this description.

It has been the uniform practice of writers of systems, and most teachers to describe the paroxysm

roxyfms of intermittent fever as having constantly one set of symptoms, occurring in one particular order. The phænomena they have related perfectly consist with their theory, and although the induction might not establish *the cause* satisfactorily, it furnished plausible explanations. If a full induction of facts had been made, it would have exhibited arguments subversive of the most popular theory hitherto proposed. The state of the constitution during the cold fit, has been maintained to be not only the essential part, and even *the cause* of the rest of the paroxysm of the intermittent fever, but that it is the fundamental part, and *cause* of every fever. But the whole of these phænomena of the cold fit, are not uncommonly absent in continued fevers, and sometimes in intermittents and remittents; the symptoms constituting the hot and sweating fit, are present in fevers, without any antecedent cold fit; and the three successive stages of cold, hot, and sweating fit, are frequently by no means proportional to each other.

—*Second, during the intermission.*

In the intermission, the constitution perhaps never returns entirely to the same state as in

Q

~~comment,~~

health ; accordingly, languor ; sensibility to cold ; urine which is turbid, and deposits a lateritious sediment ; a predisposition which occasions a fresh paroxysm from affections of the mind, errors in diet and drink ; foul tongue ; countenance not as in health, and other symptoms may often be perceived.

Between the tertian paroxysms, one or more dissimilar paroxysms may intervene, or there may be a state of *apyrexia*. In the latter, the intermittent is called a *simple tertian*. These intervening paroxysms may occur either on the even, or odd days, or on both. They may be either irregular intermittents, or have types ; — in the latter case, if they have tertian periods, they constitute *compound*, or *double*, and *triple* tertians, or as they are sometimes called *semitertians*.

Full History.

A complete account of the facts concerning this disease, is not required in general either for its distinction, the prognosis or treatment ; but without it, the *nature* or *cause* of this fever in particular, and the whole of its class cannot be investigated ; it is the most probable means of suggesting ~~effective~~ *effective* remedies, in cases which resist
the

the ordinary practice, and of improving the present mode of cure.

The relation of such a history, is too copious for a work of this kind, or even for the usual time allotted for a course of lectures; therefore a few only of the most useful facts belonging to it are mentioned.

In this island, intermittent fevers appear, especially in the spring, and autumnal months, but they also occur at all times of the year; hence the distinction into vernal and autumnal, epidemic and sporadic intermittents.

They effect, in the greatest proportion, persons who live in or near marshy or fenny soils, and wet ground; or who have lately been exposed to their influence; but they also seize those who are differently situated.

They are contagious in hot climates, but it is not well ascertained that they are infectious in this island.

People who are natives, or have long resided near marshy ground, are not so liable to be attack-
 Q 2 ed

ed as strangers. This fever is readily produced in persons who have lately been affected with it. It supervenes to various chronic diseases, and frequently cures several of them, viz. *mania, melancholia, epilepsy, hysteria, &c.*; and may even carry off diseases of the viscera, occasioned by former attacks of the intermittent fever itself.

It is not, perhaps, well ascertained, that continued fevers are especially carried off by, or apt to change into, intermittents or remittents; and even in the hot climates, it is probable that the apparent continued fevers, which change into intermittents, are remittents. It is certain that remittent and intermittent fevers readily change into one another,

they being unquestionably of the same family, for they are produced by the same cause and cured in the same manner

The varieties of appearance of this fever, are exceedingly numerous; many of these may be ranged under the heads of,—1, difference of the duration of the paroxysms, and time of accession; hence the distinction into the *legitimate, and spurious tertian*:—2, the state of the constitution between the tertian paroxysms, or the number and kind of paroxysms in each tertian period:—3, the difference of the symptoms:—4, its conjunction with other diseases.

as Dr. Johnson, in

The

The cases of intermittents in each epidemic often resemble one another, and differ from those of former epidemics.

The progress of this fever is infinitely various:—1, the paroxysms may be longer and longer postponed, till they disappear spontaneously:—*This a fever*
2, they may occur sooner and sooner till they become remittents:—3, it may change with regard to the number, and type of the paroxysms in each tertian period:—4, this fever may change its type, or become irregular:—5, it may produce the symptoms of other disorders:—6, it may produce, and continue with other disorders:—7, its symptoms may change:—8, its symptoms may become milder or more violent:—9, it may produce visceral diseases:—10, it may go off spontaneously, but return in about fourteen days.

With regard to the terminations: the true and vernal tertian may cure itself, especially after *the warm weather*
about seven, to nine revolutions:—the autumnal intermittent, if it continues till the winter, rarely admits of a spontaneous cure till the following spring:—2, it may be carried off by various medicines, and affections, and passions:—3, it may be cured by various supervening diseases, viz.
eruptions,

eruptions, ulceration of the lips, angles of the mouth, and in the mouth; by inflammations:—4, it may kill by the severity of the symptoms during the cold fit, or in hot climates during the hot fit, by weakness, by a supervening inflammation:— it may terminate in the dropsy, visceral diseases, abscesses, perhaps several other chronic disorders.

to seldom
in this country
they die
in the hot
fit in the
fit

Appearances on Dissection.

1, In the bodies of those who have died during, and in consequence of the violence of the cold fit, the congestions of blood have been seen in the heart and lungs.

2, In those cases which proved fatal by the partial or general debility induced, the appearances observed on dissection were, 1st, in the abdomen, enlargement and induration of the liver, spleen, pancreas;— a less firm texture of the spleen—abscesses in the abdominal viscera—blood effused from the spleen into the cavity of the abdomen—inflammation and gangrene of the abdominal viscera—the liver whitish — the gall-bladder distended with bile — this fluid in the stomach and intestines—distention of the vena portarum — constrictions and distention of the intestines

intestines—the stomach distended with air.—Enlargement, schirrhosity, inflammation, and abscesses of the omentum, mesentery, and mesenteric glands—thickening and induration of the peritoneum:—2dly, in the thorax, distension of the blood-vessels of the lungs, and heart.—Water in the pericardium and cavities of the thorax:—3dly, in the brain, turgescence of the blood-vessels—Watery liquid.

3, Dissections of patients who died in great pain, and with other symptoms of inflammation, have shewn inflammatory appearances of the intestines, lungs, brain, &c. *Appearances and dissections afford little light on intermittent, except the cases of the vicaria*
Causes.

I. Remote:—(a.) *predisponent.*—1st, Weakness, not induced by chronic diseases. 2dly, Irritability, especially that state occasioned by warm climates. 3dly, Children, young and middle aged people. 4thly, Strangers to situations in which intermittents are endemic, and to hot climates. 5thly, Habits recently affected with this fever. 6thly, Probably various predispositions not yet observed.

(b.) *Occasional*

(*b.*) *Occasional*:—Miasmata, which are formed in, and arise into the atmosphere from, marshy, boggy, or merely moistened ground. Also the effluvia, vapors, or exhalations which arise from putrefying animal and vegetable substances in ditches, drains, sewers, pools, lakes, ^{ad} and other receptacles of filth, occasion tertian and other intermittents. It does not appear that these miasmata are of a different nature from those of fens.

2, Contagion, or effluvia from persons affected with the tertian intermittents. This cause rarely exists, excepting in hot climates.

Exhalations from the sea, independently of moisture, have been considered by some writers, as occasional causes, but without sufficient proof.

Cold has been usually reckoned one of these causes, but as in, perhaps, all cases, in which this agent operates in the production of the intermittent fever, miasmata may also be, at the same time applied; as these miasmata very generally occasion this disease, independently of cold; and, as the ordinary effect of cold, apparently without
the

concurrency of miasmata, is to produce disorders of a different kind, the opinion that miasmata, and contagion, are the only occasional causes, seems to be well founded.

Exciting or concurring Causes.

1. The spring, and autumnal seasons in Britain.

2. Constitutions of the atmosphere not depending on its manifest properties.

3. Certain winds, especially from the east.

4. *Ingesta*; of any kind which disorder the *primæ viæ* by their quantity, or quality.

5. The influence of the moon, at the full and change. It is, perhaps, tolerably well ascertained, that intermittents prevail especially at or near these periods; yet it has been a subject of controversy whether the moon's influence directly operated in the production of these fevers, or indirectly by occasioning the tides, and thereby moistening shores, and low grounds.

6. Heat ; this agent does not appear to produce intermittents, excepting in concurrence with moisture.

7. Cold ; though it may not occasion intermittents without miasmata, it is a frequent exciting cause, especially when applied to habits, weakened by hard labour, by low diet ; to constitutions while heated, or irritable ; and when a sudden transition is made from air of any higher, to any considerable lower temperature.

8. Depressing passions. *all by increase of irritability of the*

9. Exciting passions.

10. Probably causes, belonging to this head, not yet ascertained.

Proximate cause. This cause hitherto assigned by the most respectable and learned physicians, cannot be admitted consistently with the rules of just reasoning, because it can be shewn that the cause proposed may be present without the effect ; the effect without the cause ; and that the effect is not in proportion to the cause, nor the cause to the effect.

The phænomena on the attack, and first part of the paroxysm of intermittents, are analogous to those excited by evident irritations in other diseases as well as in health. Miasmata may occasion a peculiar irritation, the effect of which is the febrile paroxysm of intermittents.

Whatever be the proximate cause of the intermittent tertian, it is probably not essentially different from that of other intermittents and remittents; but it appears to be by no means justifiable from the facts to conclude, that it is the same as that of continued fevers,

Diagnosis. The resembling diseases which must be distinguished, are, 1, other intermittents; 2, the ephemera; 3, remittents; 4, continued fevers; 5, other periodical diseases.

Explanation of the symptoms. The ratio symptomatum, may be divided into the following heads, viz.

1. The action of the remote cause in constituting the proximate cause.

2. The mode in which the proximate cause produces the symptoms.

R 2

2, The

3. The reason of the cessation of each of the febrile paroxysms.

4. The reason of their return, after being absent a certain time.

5. Their entire cessation.

6. The action of the paroxysms, in producing diseased states, or other diseases.

Prognosis. Founded on, 1, the severity of the cold fit; 2, the violence of the hot stage; 3, the season; 4, the time of the return of the paroxysms; 5, the habit; 6, the symptoms; 7, the epidemic.

T R E A T M E N T.

I. *The prevention*, consists in

(a.) avoiding the action of the occasional causes, by

removing from the atmosphere in which the miasmata, that are the occasional cause, exist;

avoiding intercourse, in hot climates, with those affected with intermittents.

(b.) Removing the predisponent causes, viz. weakness and irritability, by

the most nourishing kinds of food;

a moderate use of vinous liquors;

exercise

exercise, moderate and long continued ;
sufficient time for sleep ;
cheerful company and agreeable amusements ;
cold or tepid bath, Peruvian bark, vegetable bit-
ters, a moderate quantity of spices ;

(c.) Avoiding the exciting causes as far
as is practicable, by

guarding against exposure to cold ;
regularity and temperance in food and drink ;
removing in the spring and autumn from situa-
tions in the air of which miasmata prevail.

(d.) Counteracting the occasional, and ex-
citing causes, by

increasing the vigor of the constitution.

In some chronic diseases, if they be of a more
dangerous, painful, or obstinate nature than in-
termittents it may be advisable not to prevent
this fever, because experience has shewn, that in
many instances, it has cured such diseases. *as they are
treated by and particularly by the quinine*

II. The *Cure* is divided into the treatment,
during the intermission, and during the paroxysm.

The arrangement of the medicines and means
according to their obvious effects, or merely their
efficacy

efficacy, learned by experience, appears to be a more unexceptionable plan, than indications founded on theory, which in the present state of the subject is fallacious and unsatisfactory.

During the Intermision.

1st, *The first rule* may be to remove, or avoid those states of the human constitution, and those extraneous agents, which may increase or continue the disease, viz.

- (a.) The remote causes.
- (b.) Irritations in the primæ viæ; by emetics*, and cathartics †.
- (c.) In the urinary passages.
- (d.) Cold and heat.
- (e.) Food and drink.
- (f.) State of the mind.
- (g.) Posture.
- (h.) Other irritations.

2nd *Rule* may be to employ those remedies and means, which experience has shewn to be efficacious in removing, or palliating this fever.

* See Formulæ, A, B, C.

† See Formulæ, D, E, F, G.

(a.) Emetics,

(a.) Emetics *, and, perhaps, nauseating substances. *These act generally by removing external agents, which the disease will some times*

(b.) Sudorifics, and diaphoretics †. *be cured by the*

(c.) Stimulants. *spontaneous action of the Body*

(d.) Opium. *At first you sudorifics you give for*

(e.) Strengtheners of the whole constitution. *some warm liquid to distend the vessels*

Peruvian bark ‡. *The quantity to stop the*
Cold, and tepid bathing. *increasing for progress is*

(f.) Strengtheners of the stomach. Vegetable bitters. *give it two ways, in*

Quassi wood, and bark. *large doses before the fit, or in small*

Camomile flowers. *doses during the intermission*

Gentian root.

Snake root.

Many other bitters,

(g.) Astringents. *as Ferr. Sul. Alum. &c*

Aluminous salts.

Metallic salts.

Vegetable astringents.

Galls.

Oak bark.

Red gum, &c.

(h.) Arfenical preparations §.

* See the Formulæ, A, B, C.

† See the Formulæ, H, I, K.

‡ See the Formulæ, L, M, N.

§ See formulæ, Q.

(i.) Salivation

Salivation is not stopped it must be continued for three intermissions and is not stopped. It will be found to act on some affection of the Liver

- (i.) Salivation by mercury.
- (k.) Exciting passions.
- (l.) Change of climate.
- (m.) Change of seasons, especially of the ~~summer~~ for the spring. *to the summer*
- (n.) Changes in the constitution of the atmosphere.
- (o.) Superstitious remedies.

3d Rule is to treat particular symptoms, the principal of which are, *these will if not removed impede the action of the medicine*

- (a.) A state of plethora, or inflammatory *that* diathesis. *to cure the*
- (b.) Local pain.
- (c.) Sickness, and flatulency.
- (d.) Purgings.
- (e.) Weakness.
- (f.) Jaundice.
- (g.) Anasarca.
- (h.) Congestions of the abdominal viscera: especially of the liver and spleen.
- (i.) Anxiety.
- (k.) Watching.

4th Rule may be to prevent the return of this fever, after it has been apparently removed, by

- (a.) Strength.

(a.) Strengtheners.

- Peruvian bark.
- Cold, and tepid bathing.
- Exercise.
- Change of air.

(b.) Metallic preparations.

(c.) Fossil acids.

(d.) Removing, and avoiding the remote

causes.

During the Paroxysm.

1st. *In the cold fit*, to palliate and remove it, or to prevent the hot and sweating stages; by

- (a.) Proper regimen. *Light diet*
- (b.) Emetics. *Spice: Symplicia Salt; etc*
- (c.) Opium.
- (d.) Diaphoretics and sudorifics.
- (e.) Stimulants.
- (f.) Particular symptoms to be treated.
- (g.) All irritations to be avoided.

2d. *In the hot fit*, to palliate it, and promote the sweating stage, by

- (a.) The remedies for the cold fit.
- (b.) Blood-letting.
- (c.) Warm

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(c.) Warm bath.

(d.) Sedatives.

3d. *In the sweating stage*, all the remedies may be employed as in the cold stage.

II. *Quartan Intermittents.*

Description; and History.

The paroxysm of this species of intermittent, resembles in its general appearance the tertian; some of the most accurate observers however allege, that in the cold fit, the sensation of coldness is not to the degree of considerable horror, or succussion; others affirm, that the rigor occurs, and to a vehement degree, but only after several paroxysms. The cold stage usually continues two, and sometimes three hours.

The sense of heat succeeds gradually, which is in a less degree, as well as the thirst, pain of the head, and restlessness, than in the tertian; but all these are more severe than in the quotidian. The hot fit is of four to six hours duration, and in the first or second paroxysm it may be longer.

Some

Some observe that the whole paroxysm is of longer duration, the sweating more considerable, the *apyrexia* more perfect, and the periods more exact, than in other intermittents; but others affirm, that in the paroxysms of the quartan, there is seldom any sweating supervenes, and in the intermission there remain symptoms.

This fever occurs generally at four or five in the afternoon. It prevails especially in autumn, in those situations in which the tertian is epidemic in the spring. This intermittent is reckoned to be more effectual than other fevers in removing chronic diseases. It is with more difficulty cured, than other species of its order: Is attended especially with diseased abdominal viscera. It may continue for a number of years. Is a rare intermittent fever.

The *varieties* may be distinguished; 1, on the grounds of the difference in the state of the constitution, between the two first occurring paroxysms.—2, Of the greater or less regularity in their recurrence.—3, Of the anomalous symptoms.—4, Of the attending diseases.—5, Of the difference of the remote causes.

Appearances on Dissection.

1. In the bodies of those who were destroyed by supervening diseases, inflammations have been found of the intestines, &c. ; and enlarged viscera.

2. Diseased viscera of the abdomen have been seen when patients died in consequence of chronic diseases, attending and induced by the quartan ague.

Causes.—The same as of the tertian. The autumn, especially, is an exciting cause.

Diagnosis. 1. The same distinctions as in the case of the tertian. 2. The quartan is distinguished from other intermittents, by the *similarity* of the paroxysms, nearly every seventy-two hours.

Prognosis. 1. On the same grounds as in the tertian. 2. From the consideration of the general obstinacy of the quartan. 3. Especially on the nature of any attending disease.

Treatment—will be, without difficulty, inferred from that explained on the subject of the tertian.

III. *Quotidian Intermittents:**Description, and History.*

The paroxysm of this species resembles, in most particulars, that of the others of the same order. There is horripilation and horror, but no rigor — generally either vomiting or purging occur.

The succeeding hot fit is moderate; and there is generally a sweating stage. The whole paroxysm seldom is of more than six hours duration, according to some, but others affirm that it extends to eighteen. It occurs especially early in the morning, from four to seven o'clock.

It is a very rare occurrence, and, in general, the double tertian has been mistaken for it. Some of the most experienced practitioners allege, they have never seen this species of fever.

Omnis quotidiana ægerrime remediis cedit, tædii, ac periculorum plena.—*Lommius.*

The varieties are, according to, 1st, the hour of invasion, — 2dly, the difference of the concurrence of
the

the symptoms,—3dly, the presence of the symptoms of other diseases.

The appearances on dissection, and causes are, as far as hitherto observed, the same as those of the tertian.

Diagnosis. It is distinguished from all other diseases by the recurrence of *similar* paroxysms, at periods of about twenty-four hours, between which there is a state of *apyrexia*.

Prognosis. Several of the grounds of judgment of the issue of this fever, are the same as of the tertian, otherwise but few observations have been made on this part of the subject.

Treatment. This will readily be applied from the plan proposed for the cure of the tertian.

ORDER II. *Remittent Fevers.*

The symptoms in the paroxysms are, perhaps, not essentially different, in any cases from those intermittent fevers.

Similar

Similar paroxysms are observed to recur at the same periods as those in intermittent fevers, and are accordingly denominated tertian, quartan, and quotidian remittents, or the *tritaephya*, *tetartophya*, and *amphimerina*. These may be called *regular remittents*. Dissimilar paroxysms, usually, and similar ones may, occur at various other, and uncertain periods; and which may be termed *irregular*, or *erratic remittents*.

In regular remittents, the space of time from the beginning of one paroxysm to the commencement of the next corresponding one, is called the *period* or *revolution* of the fever.

The state of the constitution, during the disappearance or abatement of the symptoms in general, is called the remission.

The sensation of coldness appears to be rarely to the degree of rigor, or even horror, excepting in the first, or second fits; oftentimes there is merely a chilliness, and frequently no cold fit at all.

The symptoms in these paroxysms, more frequently differ from the usual phænomena of the
cold

cold, hot, and sweating stage, than those of intermittent fevers.

The phænomena, and progress of these fevers, in hot climates, are very different in several respects, from those of intermittents and remittents in colder latitudes.

Remittents are usually epidemic, or endemic; they prevail, especially in hot climates—are most frequently epidemic in autumn—are oftentimes more violent in their symptoms; and, for the most part, more fatal than intermittents.

The varieties of each of the species may be ranged; 1, according to the duration of the paroxysms;—2, the state of the constitution, during the remission;—3, during the interval, or between the similar paroxysms;—4, the symptoms;—5, the degree of malignity;—6, the origin from, and change into intermittents, or other forms of remittents.

This fever may;—1, change into an intermittent;—2, it may become a more continued form;—3, it may observe the same progress in general, and produce the same diseases, and other effects

fects as intermittents ;—it may be carried off by, or change into the continued fever, called putrid.

It may cut off the patient by the violence of the symptoms, during the very first, or after a few paroxysms ;—it may destroy life by inducing other fevers ;—it may be cured in the same manner as intermittents.

Appearances on dissection have been seen of the same kind as those related, p. 114.

The causes ; are the same as those related p. 115, 116, 117, 118.

Diagnosis. The diseases most resembling, to be distinguished, are, 1. the ephemera ; 2. intermittents ; 3. the hectic fever ; 4. continued fevers ; 5. other periodical diseases.

Prognosis — Depends upon, 1. the symptoms ; 2. the nature of the prevailing epidemic ; 3. the habit of the patient.

Treatment. That related for intermittents, p. 120—128. It must be remembered that in hot climates, the Peruvian must be exhibited
T
copiously

copiously during the first remission; for experience has shown the delaying it, to be followed by fatal consequences.

ORDER III. *Continued Fevers.*

The species of these fevers are so extremely numerous, or, which is more probable, the essential and peculiar symptoms of them are so little known, that this order itself can only be defined by the symptoms of the class, fevers, p. 102, together, with the negative characters of the two former orders, intermittents, and remittents; and each of the commonly reckoned species of continued fevers, is rather distinguished by a number of different sets of symptoms, and negative characters of others of the same order, than by any peculiar concurrence of particular symptoms.

The definitions given by nosologists, if considered only as the most frequently attending, and peculiar symptoms, may be, however, found useful, by serving to convey a general notion, and aiding the memory in the recollection of the history at large of these fevers. But the descriptions or histories related by several of the modern systematics,

systematics, tend to communicate unjust conceptions, and erroneous principles in practice; because the phenomena are related, not as they constantly occur in nature, but as they should arise according to the theory of *spasm*, &c. and because such relations are offered as constantly just representations of such diseases.

It is however deemed most proper at present, to range the different continued fevers under the popularly known species, or heads, viz. 1. the *ephemera*, or diary fever; 2. the inflammatory; 3. the nervous; and, 4. the putrid fever.

I. *Diary Fevers.*

Description. The whole or most of the symptoms appear suddenly and together, frequently without ~~any~~ ^{much} sensation of coldness, rarely with horror, and scarcely ever with rigor; but with universal heat—the pulse strong and frequent—pain and pulsation within the head, or loins—pain, or uneasiness at the stomach and of the *præcordia*—restlessness—often nausea—thirst—sense of general inflation—the face flushed and tumid—the respiration frequent—the strength of the voluntary powers in general is little diminished.—

to these symptoms after an uncertain time, an increased excretion, usually sweat, supervenes.

This fever is not properly of more than a natural days duration ; but if it continues two, or even three whole days, it is by many physicians still called the *ephemera*.

It almost always terminates in health, and sometimes in other disorders ; and never in death, excepting the English sweating sickness, which some refer to this head of fever.

The *ephemera* may be ranged into varieties with practical utility, according to its occasional causes.

As disorders of the Prime
Quality or Quantity of the Food. The
Heat. Secondary Cold
II. Inflammatory, or Sanguineous Fever.

It may begin exactly in the same manner as the diary fever, therefore suddenly with the whole train, or most of the symptoms at once; or, which is more frequently the case, many of the symptoms, which are the same as those of the *ephemera*, appear successively, only more intense, gradually increase in degree, for three to about seven days, and then continue in nearly the same state, or gradually

dually diminish ; or the symptoms may diminish in degree, and number, from the very first day of the fever ; and there may be exacerbations, generally at uncertain times.

It may terminate spontaneously in health, from the fourth to the eleventh day, and sometimes later, with a profuse sweat, or with a *diarrhœa*, or by a nasal hæmorrhagy, or by a considerable excretion of urine. The symptoms may gradually subside without any sensible evacuation. On the decline somnolency, or deafness may supervene. An eruption may prove critical.

Its issue may be in other diseases, viz. abscesses, local inflammation, or of the brain, lungs, &c. rarely in other continued fevers, sometimes in sphacelus of the intestines, stomach, &c.

It may cut off the patient by apparently the violence of the symptoms. This fever is much more frequently fatal than the ephemera.

It has been sometimes epidemic, but then it was attended with a pretty considerable affection of the lungs.

This

*The course of this is very much varied, and
a Fever of this kind*

(138)

* This fever may remove the palsy, epilepsy, and various chronic diseases—it has been observed to accelerate growth.

*is fever with the same general position as
the reverse of the Nervous Fever following*

III. Nervous, or Slow Fever.

The appearances of this fever are extremely numerous, and many cases referred to this title, have little resemblance to each other. It is probable they were considered as belonging to this species, because they did not exhibit the more distinguishing symptoms of the other continued fevers, and because practitioners did not agree in opinion respecting the form of the nervous fever.

The symptoms in the beginning, and sometimes throughout the whole fever, are generally much flightier than those of the other continued fevers, and they increase gradually. Among the principal symptoms are, dejection of mind—languor—lassitude—no great heat—moderate thirst—clamminess of the mouth, but the tongue moist, —a quick, weak, fluctuating pulse—delirium of the low kind. This fever usually is of three, four, or a greater number of weeks duration: it generally terminates without any critical discharge.

It begins, and during the first week, is often attended by a pale, sunk countenance; altered colour of the skin; listlessness; slight chilly fits with succeeding flushes of heat; a sense of universal load; distrelth of food; nausea; a dull pain of the head, especially extending along the coronary future; a more frequent pulse; anxiety; lowness of spirits; sometimes restlessness, at other times drowfiness; pale urine.

generally a great sensation of cold followed by the warm sensation.

most usually disappears in two or three days

These symptoms may remit at uncertain times, or they may be aggravated, especially towards the evening; or the symptoms may be more severe and evident during the first week, viz. pain of the head; sickness, and vomiting; pain of the loins, or of the coccyx; general sweating, constantly or at irregular times; partial sweats; urine turbid, or which deposits a lateritious sediment; the tongue covered with a whitish mucus; quickness of the pulse coming on with flushings of the face, and growing slower on their disappearance; vertigo; *tinnitus aurium*; watching; fainting.

Continued fevers may be said to begin with cold for two or three days when it increases by the heat.

Some times the heat and cold succeed each other.

Sometimes for one, two, three, or even four weeks, previously to the above sets of symptoms, there are some very slight ailments, viz. impaired appetite

appetite

appetite for food, lowness of spirits, unusual solicitude, with sighing, timidity.

This disease either with the above, or a different concurrence of symptoms, may continue, and be attended with few or no additional complaints and appearances, two or three weeks, or a longer time; and then gradually decline, or terminate in abscesses, eruptions on the lips, nose, or skin, and perhaps other diseases. Or the symptoms may grow more severe, and others may supervene,—among a great number of which are; a greater disorder of the mind; *delirium*, usually of the mild kind; sleep disturbed by frightful dreams; prostration of strength; increased sensibility to light and noise; at other times deafness and stupor; vomiting; diarrhæa; pulse weaker, and smaller; palpitations of the heart; thirst; foulness on the tongue, sometimes cleaner than natural, or dry, chopt, black or yellow; *singultus*; fainting; the respiration short, and frequent; sometimes a cough; severe pain in the head; nasal hæmorrhagy; urine limpid:—in the third week, or later, *subsultus tendinum*; *coma*; bloody and extremely fætid stools; the pulse scarcely perceivable, and intermitting; involuntary stools
and

and urine; the lips, and teeth, dry and furred; the nails pale or livid; countenance ghastly; somnolency; exacerbations of the symptoms, especially in an evening; convulsions.

These symptoms in the third, fourth, or fifth week, or later, may terminate, 1. in death; 2. they may gradually diminish and disappear; 3. they may be carried off by some other disease, eruption, or inflammation, rarely by any critical discharge; 4. cravings, sleep, rising of the pulse, or, deafness supervening, are frequently, immediately, followed by a decline of the fever.

IV. *Fevers, called Putrid, to which belong the most frequent Continued Fevers of this Island; also the Petechial, Malignant, Hospital, Jail, Ship, and Fevers with other Denominations.*

The cases considered to belong to this head of fevers, have many of them very little resemblance to one another, yet they are classed together, because for the most part they agree in a few peculiar symptoms; because they have not the generally distinguishing appearances of the

other continued fevers ; and because their history is not sufficiently cultivated to ascertain the different species, if such a difference exists.

Sometimes these fevers begin with slight ailments which continue for a few days, or a shorter time, such as weakness, lassitude, listlessness, impaired appetite for food, dejection of spirits, &c. After, or without, this prelude, there is increased sensibility to cold, sensation of coldness and heat, alternately, often to the degree of the cold and hot fit in the tertian intermittent, but of shorter duration ;—the heat continues, or the cold fit returns at irregular times, succeeded by heat, and this frequently by sweating, for several days. Among the other more frequent symptoms in the first three or four days, or a week, of the fever, are, weakness, in various degrees, from fatigue to prostration of strength, experienced on using a little exercise ; impaired appetite for food ; nausea ; vomiting ; pain of the limbs in general, or in the head, or back ; frequent and often strong pulse ; restlessness ; foulness of the tongue ; thirst ; exacerbations at irregular times. Instead of the cold fit, the fever may begin with merely general heat, or a severe pain of the head,
back,

back, and limbs in general. These symptoms may be in various degrees.

The heat of the skin and other symptoms continue, but the cold fits disappear; the tongue grows more foul, or dry, often striped with differently coloured mucus; the urine is various, but often either flame coloured or pale; the symptoms become more severe at uncertain times.

If the fever continues, oftentimes in the second or third week, the intellects appear disordered; the delirium is of the more violent kind; the speech is altered; sweating at times; the respiration is short and frequent; in some cases the blood is buffy; in others, particular parts are affected with pain, and their functions altered as if from inflammation.

In the third and fourth week, and sometimes in the second, with an increase of the above symptoms, supervene, trembling of the hands; *subfultus tendinum*; stupor, coma, or great sensibility to light; and sound; redness of the eyes; a dry, cracked crust on the tongue; throbbing of the temporal arteries; profuse sweats; copious discharge

though this seldom happens

charge of urine; hæmorrhagy from the nose; diarrhœa; cough; a black fur on the teeth and lips; a quick, irregular or intermittent pulse; a ghastly countenance; cold sweats. *appear upon the*

*regard to the
ination*

In the first week, the symptoms may begin to diminish, and disappear; 1. without any remarkable new appearance; 2. on the coming on of an increased secretion or excretion; 3. on the super-
vention of an eruption or inflammation of the skin; 4. on the sudden return of sleep, or the appetite for food; 5. on the rise of cravings; 6. by another disease coming on; 7. death, though rarely, may be produced in the first week of this fever.

In the second, but most frequently in the third week, as well as oftentimes in the fourth, and sometimes in the fifth, these changes are observed to take place.

During the progress or continuance of these fevers, the symptoms may increase and diminish at different times; they may increase uniformly for a certain time, and then diminish or disappear gradually or suddenly; but nothing like

a re-

a repetition of similar paroxysms has been seen by the most accurate observers.

Among the considerable number of varieties, may be distinguished with practical utility;

1. that in which the prostration of strength is not considerable, but the action of the heart and arteries is much increased, and the blood buffy; in the course and latter end of the disease, there is much sweating, or some other excretion: 2. in which there is great weakness of the voluntary powers; frequent, but not strong action of the heart and arteries; a considerable irritability of the constitution in general; the symptoms gradually diminish and disappear, but not in less than three, four, or five weeks, without any evident increased excretion: 3. when a principal symptom is an increased discharge, or evacuation during the whole or a great part of the fever, without relief: 4. where a part of the constitution is very considerably affected by the fever, which affection may resemble local diseases, independent of fever of this order: 5, in which a number of black, red, or purple spots appear on the skin, attended with great prostration of strength, disorder of the sensorium, blood coagulating loosely: 6. fevers, attended with red and other coloured spots,

These kinds of fevers are divided into varieties as they require different treatments in practice

seen to be discharges are not thought to be always favourable of.

on case 5 is the only one that can give reason at all to think it putrid. without foundation for they may be affected from a cause different

not by the names of Diseases

alle?
nt Fev

on the skin, without any considerable prostration of strength, or affection of the mind, and in which the blood coagulates firmly: 7. the fevers in which a very great burning heat is felt, and the heat actually increased: 8. cases attended with an eruption of the miliary kind: 9. when the chief symptom is stupor or coma: 10. fevers distinguished by terminating in suppuration of the brain: 11.—being contagious, and non-contagious: 12.—being epidemic, and sporadic: 13.—according to the remote causes: 14.—the season: 15.—the prevailing type depending upon the atmosphere.

is a consequence of the
the body remains
A

Appearances on Dissection.

After death by the inflammatory fever, inflammation has been seen in the brain, or lungs; suppuration in the brain; a preternatural quantity of water in its ventricles; mortification of the stomach, or intestines; frequently no morbid appearances.

These are to be considered as consequences than causes

In the bodies of Persons who died in the fevers called putrid, no morbid appearances in general have been discovered; at other times abscesses in the brain; a jelly-like fluid under the *dura mater*;

water

water in the ventricles of the brain; inflammation in the head, or lungs; gangrene of the brain, stomach, and intestines.

Causes of Continued Fevers.

I. *Predisposing causes.*—To *continued fevers in general*; — 1. weakness; — 2. irritability; — 3. habit acquired, by being frequently affected with fevers; — 4. the constitution being over-heated by hot air. — To the *inflammatory fever*; 1. sanguine temperament; — 2. youth; — 3. vigor of the constitution; — 4. plethoric habits. — To the *nervous fever*, and to the *common, or putrid fever*; — 1. lax habits; — 2. phlegmatic temperament; — 3. naturally feeble constitutions.

II. *Occasional causes.* — 1. cold; — 2. confined human effluvia; — 3. putrid effluvia; — 4. infection; 5. constitutions of the atmosphere; — 6. heat; — 7. *ingesta*; — 8. affections of the mind; — 9. suppressed discharges; — 10. neglect of customary evacuations; — 11. other diseases.

III. *Exciting causes.* — 1. cold seasons; — 2. the spring; — 3. the autumn; — 4. moisture of the earth; — 5. plethora; — 6. certain winds; — 7. phlogistic

7. phlogistic diathesis ; — 8. errors in diet ; —
9. depressing passions.

IV. *The proximate cause.* No satisfactory account has been given of this cause. Among the variety of doctrines on this subject, the opinion that will, perhaps, be found the most probable, is that *irritation* is the cause of continued fevers. This irritation may be occasioned by extraneous matter, namely, contagion, miasmata, &c. or by certain altered states of the solids or fluids ; and the difference of fevers may depend on the difference of the irritating matter, or of the morbid states of a part of the human body. Whatever be the proximate cause ; its principal and, perhaps, constant effects are, increased motion, and increased irritability of the heart and arteries ; likewise generally diminished, but sometimes increased, strength of the voluntary organs. The contemplation of these conditions of the vital and animal functions, and the assigned cause of them, will furnish useful rules of practice, and instructing views of the nature of continued fevers.

Ratio Symptomatum.—1. The action of the remote causes, in forming the proximate cause, must be explained :—2. the manner in which the
proximate

proximate cause produces the symptoms : —3. the symptoms, progress, and termination.

Diagnosis. The diseases liable to be confounded with continued fevers, are, 1. remittents; — 2. continued fevers, accompanied by a local disease; — 3. the different kinds of continued fever, must be distinguished from one another.

Prognosis — founded on, 1. the degree of the fever; — 2. the kind of fever; — 3. the occasional cause; — 4. the habit of the patient; — 5. the strength, motion, and irritability of the heart and arteries; — 6. the strength and action of the animal functions; — 7. particular symptoms, of irritation; — 8. the state of the natural functions; — 9. certain appearances; — 10. congestions in the head, lungs, &c.; — 11. the duration; — 12. supervening disorders.

must consider the pulse present
TREATMENT.

I. Prevention.

- (a.) by avoiding the action of the remote cause.
- (b.) counteracting them.

X

II. Cure.

subjects suffer more from fever than any ones. especially if does not see that another disease being present the danger in fever is not

1 Name having Perop...
2 From...
very...
affection...
the head...
contem...
is to be...
to let in...
does not...
constitu...
principal part...
disease state...
the kind of...
in health...
be attended...
and whether...
patiently habit...
invariable.

II. Cure.

A. By removing, or counteracting the effects of the remote causes, if they be present, especially,

(a.) certain irritating substances in the stomach or intestines ; by

Emetics.

Purgatives.

*inc Head of
and Stated*

(b.) Contagion, and miasmata ; by

Emetics*.

Purgatives †.

*to great strength
Heart and Arteries*

Sweating ‡.

Antimony.

*increased
labily*

(c.) Suppressed, or neglect of customary discharges ; by

V. S.

Purgings.

*use a quick Pulse
being of the Pain*

Sweating.

the Head &c

Blisters.

Ulceration, &c.

(d.) The removal of spontaneous or habitual inflammations ; by

Rubefacients§.

Blisters.

Ulceration.

* Formulæ, A, B, C,

† ——— D, E, F, G,

‡ ——— H, I, K, P, Q.

§ ——— R, S.

(c.) Emo-

*single symptoms sometimes is
cause of others and requires att
with trust A 1 1*

(c.) Emotions of the mind.

(d.) Plethora.

B. By removing irritation arising from the action of extraneous substances, or circumstances, namely,

(a.) In the stomach; by

Emetics.

Purgatives.

Alkalis and Absorbents*.

(b.) In the intestines; by

Purging †.

Clysters ‡.

(c.) Heat; by

Air usually of the temperature of about

45° to 55°.

(d.) Cold.

Tepid Bathing.

(e.) Motion; posture.

(f.) External objects.

(g.) Mental exertions.

(h.) Retention of urine.

(i.) Light; sound.

* Formulæ T, V, U,

† ——— W,

‡ ——— X.

X 2

(k.) Im-

(k.) Impure, or confined air.

(l.) Filthy linen.

C. by diminishing the strength and irritability of the heart and arteries, of the constitution in general; by

V. S.

Purgings*.

Low Diet.

D. By increasing the strength of the voluntary functions, and constitution in general; and at the same time diminishing the irritability of the heart and arteries; by

Peruvian bark †, and other vegetable bitters.

Wine.

Alcohol or spirit.

Volatile alkali ‡.

Stimulants.

Serpentaria §.

Contrainerva.

Cinnamon.

Cloves and other spices.

Oil of wine ||. This should be

* Formula V.

† — Z.

‡ — a.

§ — b.

|| — c, d.

impaired from them. This should be given were you to give temporary strength and as are the formulae. more properly Oil of Alcohol may be given with other medicines. Vol Alk for that decomposition. These are more antispasmodic.

Æthers.

Æthers*.

Dulcified † mineral acids.

Of Vitriol.

Nitre.

Sea salt.

Inflammation of the skin produced by

blistering plaisters. *evidently produce temporary*
would not be used Tepid bathing.

very critical Cool air.

stage is present Opium ‡. *never produces heat*

Nourishing food. *Property of iron*
which wine some

ing to E. By diminishing the motion of the sanguiferous system; by

diminishing the Diminishing the stimulus to the heart
us to and arteries.

V. S. *But only where*
is no prostration

Diminishing the strength or ability of
the sanguiferous system to produce motion. *then*

C. *more is especially if*
strength be more

Diminishing the irritability, or the disposition to contraction of the heart and arteries. *by*

C.

Sedatives.

Tepid Bathing. *is the most*
universal

Cold drink, and cold air. *Sedative*
known

* Formulæ, e, f, g, h,

† ——— i, k, l, m, n,

‡ ——— o, p,

§ ——— q, r,

Opium.

should treat the morbid state
indicated by the symptoms; and

By *blazing* Opium. *thirst*
Acids.

Sedative salt.

Acid fruits.

Infusion of tea, or coffee.

Warm Bath. *where the vein is*

Semicupium. *and contracts*

Pediluvium. *The rapidity of*

Fomentations, with decoction of poppy *circulation may*

heads. *By these m*

Camphire.

Spirit of wine.

Mere water.

F. by removing certain topical morbid states, namely, plethora, increased strength, motion, and *accumulation* or irritability, in the head, lungs, and other viscera;

by, *which may terminate in inflammation* *and other consequences of the* *Suppuration* V. S. from the parts affected.

inflammation Scarifications and Cupping. *refusion of*

congestion Sedative fomentations.

Liniments.

Rubefacients.

Vesicatories.

G. By removing or palliating particular symptoms, viz.

Thirst, by

Acids of Tartar. *above the*

Lemon. *two pins of*

Ripe fruit. *of the*

Diluent, and sedative drink. *and cause*

Infusion *into the*

into the

Infusion of tea.
Milk and water.
Whey.

Sickness, and vomiting; by

Emetics.
Laxatives.
Stimulants.

*if there is an
irritating matter
in the stomach*

Essential oil, in distilled water, or
spirit; of

Peppermint.
Mint.
Lavender.
Cinnamon.
Cloves.
Mace.
Nutmeg.
Jamaica pepper.

*or their
Infusions*

Costiveness; by

Laxatives*.
Clysters†.

Pain of the head, side, or other parts; by the
the external application of,

Volatile alkali.
Essential oils.
Alcohol.
Æther.

*From inflammation
the part and
a spasm*

* Formulæ. f, t,

† ——— ~~u~~ v

Heated.

Heated solid bodies.

Fomentations.

Steam.

Friction.

A ligature round the head.

Is every sedative and relaxing more than London

sometimes

Difficulty of Respiration; by

Removing its causes.

Cool, or cold air.

Erect posture of the trunk.

Lying on one side, or on the back.

if from the heat of the Fever

Watching; by *In Quantities to the inroads*

Opium, *according to the inroads*

Pediluvium, *to be removed. with*

Fomenting the legs and feet, *other substances*

Semicupium, *are said to*

Attention to an even murmuring *obviate the bad effect*

noise, as of a brook or music.

Æther, *of wine is more*

Mineral anodyne liquor, *sedative than*

Dulcified acids, *less than*

Wine, *than other*

Heat; by

Cool air, *I would be better never*

Cold drink, *give wine in any*

Acid drink, *rather than give*

Acid fruits, *indiscriminately*

but in different

persons with the

same symptoms

Colliquative

has different

though it is necessary

Heat about the
in presence of
the blood

If it is very
hates is only
ably cold

Heat; by
in summer
extremely
owing to their

greater or lesser
ductors of heat

though it is necessary

...ing Patient to feel cool on the
breaking out a sweat

(157)

Colliquative Diarrhæa; by
Vegetable Astringents*.
Opium.
Absorbent earths †.

H. By remedies ascertained by experience to be efficacious, although their mode of operating be not fully understood; viz.

Antimonial preparations ‡.
Peruvian bark §.

I. By promoting salutary discharges; by
Sudorifics ||.
Purgatives ¶.
Expectorants **.
Diuretics.
Diluent drink.

K. By continuing such states, and gratifying such appetites as seem to relieve the patient, viz.

Continuing sleep.
Indulging cravings.

* Formulæ, u, w,

† ——— x, y, z,

‡ ——— aa, bb, cc, dd,

§ ——— ee, ff, gg,

|| ——— hh, ii, kk, ll,

¶ ——— mm,

** ——— nn, oo.

Y

L. By

L. By the use of that kind of food which will afford the nourishment required, and give the least irritation.

M. The return of the fever must be prevented, during the convalescent state ; by

Strengthening the constitution.

Avoiding irritations.

END OF PART I.

O U T L I N E S

O F

L E C T U R E S

O N T H E

P R A C T I C E O F P H Y S I C ,

By GEORGE PEARSON, M.D.

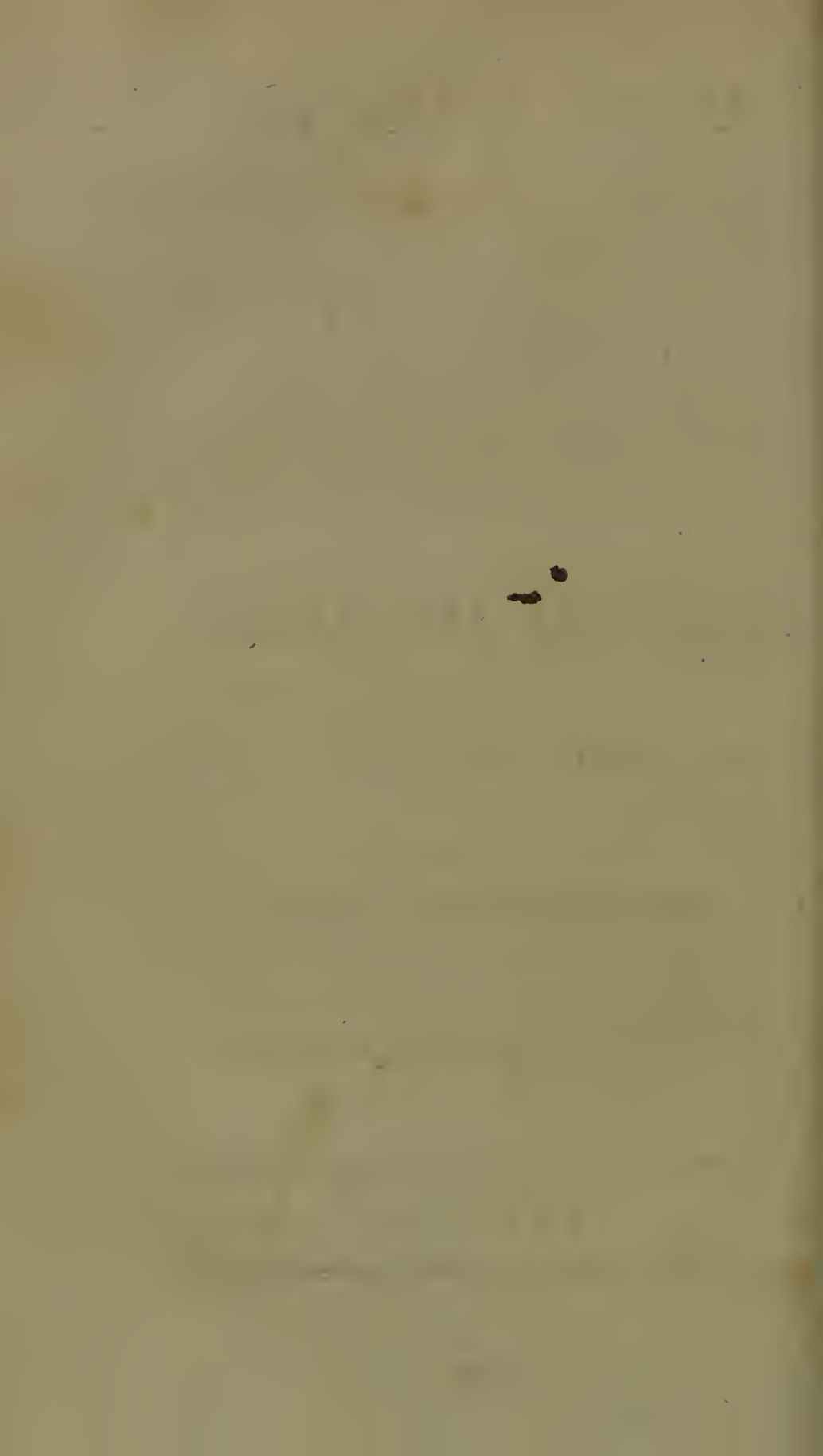
O F T H E C O L L E G E O F P H Y S I C I A N S , L O N D O N ;

A N D

P H Y S I C I A N T O S T . G E O R G E ' S H O S P I T A L .

P A R T I I .

1789.



LECTURES, &c.

PART II.

CLASS II.

Febrile Diseases consisting essentially of Fevers and a local Disease called Inflammation; and Inflammations occasionally accompanied by a Fever.

IN every species of disorder belonging to this class, there is present an affection in a part of the constitution, perhaps called originally *Φλόγωσις*, *Φλεγμονή*, *Φλεγμασία* (Galen 1, Aph. 7, Hippocrates 3, de morbis xv. 4.); and *inflammatio* (Celsus, l. iii. cap. 10); which local affection is now termed inflammation.

Certain inflammations are never present without a fever. These diseases were anciently distinguished by the name *Φλεγμασία*, (Galen); or by a word composed of the name of the part affected, and *itis*; hence *phrenitis*, *pleuritis*, &c.:

and modern writers have consequently denominated them, *febrile inflammations*; and according to the part affected, *phrenitic fever*, *pleuritic fever*: or *phrenzy*, *pleurisy*, &c.

Inflammation, or phlegmon, always signified, agreeably to the etymology, a disease in which was present a sensation of preternatural heat, or burning pain; but lately some practitioners have called every preternaturally red appearance of vessels by the name of inflammation, without observing whether *heat*, and *pain* attended it; and thereby have been the authors of erroneous doctrines, and pernicious practice.

In every disease of this class among the constant symptoms are, in a part of the constitution, a sensation of heat;—pain;—redness, or increased redness;—a preternaturally large quantity of blood, with, generally, an evident swelling;—increased or induced irritability and sensibility;—perhaps the power of absorption diminished, and the exhalation increased;—more frequent, or stronger action of the arteries;—the function altered.

The fever may be any of the continued fevers, but it is almost always the inflammatory; and, perhaps, it is often a kind peculiar to these inflammations.

The febrile affection, and inflammation of the part, may commence together; the fever may precede, or succeed a short time after, the local disease; a different disease may precede, and go off on the appearance of an inflammation; they may gradually diminish and go off; a different disease may supervene, and the inflammamatory disorder disappear; they may destroy the life of the patient.

The diseases of this class may be divided, with practical utility, into, I. those in which a fever is an essential part; and, II. those in which a fever is only accidental. They may be arranged into the following orders, and genera:

Division may be inflammation no fever and symptoms of inflammation

Order I. Inflammations of membranes that are naturally exposed to the contact of the air, and other extraneous bodies. The most frequent symptoms of the local affection, are, a burning or scalding pain — a pale rose-red, or flame colour, apt to disappear on pressure, and to return on withdrawing it — of unequal or irregular extent — disposed to spread — the swelling often not perceivable of the membrane itself:—The fever frequently not the inflammatory, but oftentimes, perhaps of a peculiar kind, and not necessarily attended by buffy blood — generally conjoined with more or less inflammation of the immediately subjacent parts.

*no fever
inflammation
the
or
the*

The diseases of this order are divided into three *genera*:

1st *Genus*. Inflammations of non-secreting membranes, or of the skin. They are not apparently attended by an increased secretion — vesications, or *phlyctæna* often appear — are apt to terminate in gangrene, and exulceration of the skin, or suppuration of the adjacent parts.

2d *Genus*. Inflammations of the secreting membranes, as of the throat, alimentary canal, urinary passages, &c.—are attended by evident increased secretion of mucous matter.

3d *Genus*. Inflammations of membranous parts, that sometimes are in a secreting, and at others in a non-secreting state, viz. of the glans penis, inside of the prepuce, perinæum, lips, nipples of the breasts, &c.

Order II. Inflammations of membranes not exposed to extraneous substances, and that have no communication with the air: the topical affection in which is distinguished by a throbbing, or sharp, or pungent pain—a vivid, a dark red, or livid colour—a circumscribed tumor—its not being disposed to spread—a fever generally of the inflammatory kind. These diseases may be referred to two *genera*:

1st *Genus*.

1st Genus. Debilitating inflammations, viz. of the intestines, stomach, heart, &c.

Division of Inflammation of Membr.

2d Genus. Non-debilitating inflammations, viz. of the dura mater, pleura, liver, &c.

Order III. Parenchymatous inflammations. In which the local disease is of the *παρέγχυμα* of the brain, lungs, liver, &c.

Order IV. Inflammations of muscles, cellular fibres, conglobate glands, or bones. *this is neural abscess*

1st Genus. Inflammations principally in the cellular membrane, immediately under the skin.

2d Genus. Inflammations of muscular fibres, or of cellular membrane, not originally, or not at all, affecting the skin, and which frequently terminate in suppuration.

3d Genus. Inflammations of muscular, or cellular fibres that very rarely terminate in suppuration. *never as of this kind is Gout Rheum*

4th Genus. Inflammations of conglobate glands,

5th Genus. Inflammations of the *periosteum* and bones.

Order V. Inflammations of *Order I.* conjoined with those of muscles, and cellular fibres.

1st *Genus.* Inflammations of *Order I, Genus I,* conjoined with those of *Order IV. Genus I.*

2d *Genus.* Inflammations of *O. I, G. 2,* combined with those of *O. IV, G. 2.*

Order VI. Inflammations of *O. II,* conjoined with those of the parts immediately subjacent.

1st *Genus.* Inflammations of *O. II,* combined with those of *O. III.*

2d *Genus.* Inflammations of *O. II,* combined with those of *O. IV, G. 2.*

ORDER I. *Genus* I.

Species I. ERYSIPELAS, or *Erysipelatous* Fever.

IT begins generally with symptoms of the same kind as those of a fever (p.); especially, perhaps, with a disorder of the stomach, oppression of the *præcordia*, and great anxiety.

Most frequently in about a day after the commencement of the fever, or disorder of the stomach, but sometimes sooner, and at other times in two, three, or four days, the symptoms of the local disease appear, often suddenly, viz. in a part of the skin, especially of the face, a sensation of heat—itching—burning pain—pale rose redness, sometimes yellowness—diminution of mobility—frequently swelling to some distance round the part affected. This topical affection more or less rapidly extends from occupying a small part to a more considerable space—on the parts first affected successively appear vesicles, or *phlyctæna*—œdematous swellings come on—the symptoms gradually diminish and disappear, and desquamation of the cuticle takes place; or a critical evacuation may carry off the disease; or
ulceration

ulceration takes place; or gangrene supervenes; or the violence of the fever and topical disorder kill the patient; or the parts immediately subjacent become inflamed and suppurate, by which the affection of the skin is frequently diminished—perhaps a *metastasis* may happen—it may leave the function of the part impaired. This disease may supervene to, and carry off other disorders.

It is It is considered, by some physicians as an exanthematic fever, in which the febrile disorder precedes the topical affection. And sometimes the febrile symptoms diminish, or cease, on the appearance of the inflammation of the skin.

The same kind of inflammation may affect the other membranes, and also, though very rarely, the cellular membrane.

The varieties of this disease are numerous, and not yet clearly distinguished; among those most known are: 1. The exanthematic erysipelas that occurs especially in autumn; and both the fever and local disease seize people suddenly while they are in the open air.

2. That kind which occurs at any season of the year, and in which the fever may precede the local disease several days, or in which there

there may be no fever till the affection of the skin appears.

3. The erysipelas, in which small eruptions occur like the nettle rash, or *phlyctānā*.

4. The Shingles, or zone.

5. That kind in which several different parts of the skin are affected. It is, perhaps, sometimes contagious.

Dissections. These have not, perhaps, exhibited any morbid appearances that are directly the effects of this disease.

Causes. 1. *Predisposing.* These are not yet well ascertained : the following are reckoned states that predispose to the erysipelas.—1. Delicate, weak, and irritable constitutions. 2. Plethoric habits. 3. Aged, and, what are called, cacochymic habits. 4. Pregnancy. 5. Infants.

2. *Occasional causes.* Many of these are not certainly known. 1. Exposure to the sun's rays, while the body is heated, especially in autumn.

2. Sudden exposure to cold.

3. Passions.

4. Cure of old inflammations, and ulcers.

5. Certain ingesta.

6. Frequent intoxication.

7. Suppressed, or neglected, customary evacuations.

8. Other diseases.

With regard to the *proximate cause*, however imperfectly it may be understood, it will not be without utility to observe, that with the proximate cause of fever, a state of præternaturally great irritability and sensibility of the inflamed parts, will best explain the symptoms, remote causes, and action of remedies.

Diagnostics. This disease must be distinguished from 1. inflammation of the skin;—2. from inflammation of parts immediately under it;—3. from other well known diseases, in which a part of the skin is inflamed;—4. *erythēma*.

Prognosis—to be founded on, 1. the extent of the inflamed part, and nature and degree of the fever;—2. particular symptoms;—3. the signs of gangrene;—4. the habit;—5. the part inflamed;—6. the occasional cause.

Treatment:—I. *Prevention.* By avoiding exposure to, or by removing, the remote causes.

II. *Cure.* If the erysipelas supervene to, and diminish, or carry off a worse disease, it will not be proper to attempt its removal; otherwise the rules of treatment may be

1. To endeavour to remove the occasional causes, if they subsist and continue to act, by

V. S.

Emetics.

Purgatives.

Restoring old discharges, or inflammation.

2. To avoid the action of *stimuli* on the inflamed part in particular, and on the constitution in general.

3. To diminish the irritability of the inflamed part, and to remove, or palliate the fever.

1st. The irritability is diminished by

A. Remedies; internally.

Opium*; Peruvian bark†; wine; alcohol; volatile alkali; serpentaria; contrayerva; cinnamon, cloves and other spices; sedative acid; vitriolic acid; nitrous ammoniac; borax; nitre; alum; dulcified mineral acids; æthers; oil of wine; animal oil; nourishing food.

B. Remedies; externally applied.

Calces of metals; viz. of lead, zinc, &c: absorbent earths; powder of astringent herbs; fomentation of decoction of astringent and sedative herbs, with spirit of wine and acetous acid.

Cataplasms with acetated lead; cerusse; poppy-heads.

Lotions with opium, spirit of wine, salts of lead, acetous acid, wine, volatile alkali, lime-water, cold water.

Ointments, or liniments, with calces of lead; zinc; cerusse; salts of lead; lime-water; opium.

Tepid bath.

2d. The fever is to be diminished, or removed, by

* Formulæ, O, P,

† ——— L, M, N, Z.

Antimonial preparations; ipecacuanha; emetics; warm bath; counter-inflammation, or irritation by blistering-plasters, rubefacients, scarifications.

4. To remove certain states of different parts; and to palliate particular symptoms, viz.

1st. Inflammatory diathesis, by

V. S.

Purging.

Low diet.

Tepid bathing.

2d. Coma, or delirium; by

Topical bleeding.

Blistering plasters.

Warm bathing.

3d. Watching; by

Opiates.

Sedatives; viz.

Oil of alcohol of wine, &c.*

4th. Other symptoms by the remedies, G. p. 154. *Part I.*

5. To treat gangrene and ulceration, if they take place, as in other cases.

6. If the inflammation of the skin should disappear, and affect a more important part, it must be removed as speedily as possible;—by inflaming or scarifying the skin,—bleeding from the part affected,—purging,—warm bathing.

* Formulæ, c, d.

Species II. Inflammation of the Skin:—Phlogosis Erythema—(Cullen's *Nofologia Methodica*, Cl. I, O. II, G. VII. Sp. II. p. 85,) from extraneous substances acting on the part inflamed.

In all the cafes of this diforder the primary affection is the inflammation of the fkin; and the fever, which is not effential to it, is fymptomatic.

The general diforder of the conftitution has been called fymptoms of irritation and inflammation; and alfo *erethifmus*; ufing this term in a different from the original fenfe: but unlefs we knew more of the nature of fever to juftify the diftinction, fuch an alteration of terms appears unwarrantable.

The fymptoms of the inflamed part are nearly the fame as thofe of the former fpecies. The *erythema*, however, is not difpofed to fpread confiderably, nor to change its fituation; and the degree of it is principally in proportion to the quantity of the *ftimulus* by which it was occafioned. The fever fupervenies, and is in proportion to the degree of pain, and the irritability of the conftitution.

It may continue for a certain time, and then diminifh and terminate in a defquamation of the cuticle: or veficles, or *phlyctænæ* may arife: thefe may burft and irritate the inflamed part, or the parts beneath the fkin, and produce inflammation; and this may terminate in ulceration or fuppuration:

tion: or the irritation of the *erythema* may produce *phlegmone* of the subjacent parts; the termination of which may be in resolution, suppuration, ulceration, or œdema: or this inflammation of the skin may end in gangrene.

This inflammation of the skin can seldom be present without that of the cellular membrane under it.

The division of this inflammation into the following varieties, may be found useful in practice: 222
to 5
222
can

1. that from heat or fire, as in burns or scalds;—
2. from intense cold, which affects especially the feet and hands; it does not terminate in a separation of the cuticle, but frequently in excoriation;—
3. from substances that act chemically;—
4. from mechanical agents;—
5. from substances that act only on irritable parts, viz. cantharides, the sting of the wasp, of nettles, &c.—
6. from contagious matter, viz. venereal infection.

Causes. 1. *Predisposing.* To the action of the occasional causes, they are either not required, or are unknown.

2. *Occasional.* 1st. *Mechanical causes*, viz. which produce punctures, fractures, wounds, contusions, abrasions, &c.—2d. *Chemical*, viz. caustic alkali, mineral acids, lime, certain metallic salts, &c.—3d. *Substances which act only on the irritability*, or which do not produce mechanical or chemical alterations, viz. mustard, cantharides, &c. or i
pa

4th. *Cold*.—5th. *Heat* or *fire*.—6th. *Contagious matter*.

3. *Proximate*. The same morbid state, perhaps, prevails in the inflamed part, as in the former species; but the state of the whole constitution is very different in the two cases, and some of the occasional causes produce other effects besides inflammation.

Diagnosis. This explained under the same head in the last species—erysipelas.

Prognosis—is to be formed on the consideration of, 1st. the extent of the inflamed part; and the injury of other parts often accompanying it;—2d. the disposition to terminate in gangrene, or ulceration;—3d. the effects on the habit;—4th. the constitution;—5th. the occasional cause.

Treatment:—I. *Prevention*. By avoiding the application of the occasional causes; and by removing or counteracting them after they are applied.

The prevention of the inflammation from the venereal contagion, requires a particular treatment. *and will be treated of when we come to speak of that Disease*

II. *Cure*. This will readily be understood from the plan explained for the cure of the former species, the erysipelas. 'The fever, however, in the *inflammation of the skin*, is merely symptomatic; the remedies for original or proper fever will seldom be useful; nor those under the 6th rule for the *metastasis*. *therefore the best way is to remove it*

G E N U S II.

Species I. Epidemic Catarrh, and Coughs, from Miasmata, and Contagion: the Influenza; Influxio; Rheuma.

FEW diseases are attended with so great a difference in the degree, and a greater variety in the concurrence of symptoms.

This disorder affects a number of people at the same time, in the same town, country, or even in different countries of Europe, Asia, and Africa. Or it occurs in some particular place, and is evidently disseminated from it successively through other countries.

It has been observed to attack people at sea on their arriving in certain latitudes, when this disorder prevailed on the continent, or islands, not far distant from them, although they had previously for a considerable time before had no intercourse with men on land.

This catarrh also frequently attacks successively several, or the whole, of each family; and may arise in one family and be gradually communicated to others till the inhabitants of a town are generally affected; and from one town it may spread through many countries.

Among the most frequent symptoms are, pain in the head, especially in the fore part of it—
languor—

languor—lassitude—general pains of the bones—debility of the voluntary powers—chilliness, horripilation, often succeeded by heat, and this by sweating—pain of the stomach or chest—impaired appetite for food—increased pulse:—soon after these symptoms, or along with them, come on heat, sneezing, and running from the nose and eyes—pain and stiffness of the neck, with some difficulty of deglutition—hoarseness—pains of the sides of the thorax—a cough—difficult or quickened respiration.

The disorder may increase for several days; or a week or ten days, during which all the above symptoms grow more severe; the fever increases in the evening or night-time—propensity to sweating, and frequently considerable sweats—the nights are passed in a restless manner—thirst—white tongue—preternatural redness of the fauces—expectoration of viscid matter—diarrhæa—soreness and heat of the nostrils and eyes—the discharge of rheum is hot and painful—blood sometimes buffy—the fever different in different epidemics—sometimes immediately very great prostration of strength—loss of smell—depraved taste—hearing diminished.

The disorder may not considerably increase for several days before it begins to diminish; or it may begin to decrease in a day or two after its attack. It may kill the patient, especially by the debility.—It may go off by a gradual disappearance, and

diminution of the symptoms; and then, when the discharge from the nose grows thicker and less acrimonious, the fever diminishes; the expectoration grows thicker and more copious:—or it may be carried off apparently by sweating, diarrhæa, scabby eruption at the angles of the mouth, and sometimes hæmorrhages from the nose—or a peripneumony, hæmoptoe, or pulmonary consumption may supervene; a cough may remain for several months; sometimes an intermittent fever; anasarcaous dropsy; or an abscess, appear at the close of this catarrh.

It may prevail at any time, perhaps, of the year, but most frequently in the Spring, and Autumn.

Dissections: have shown the same morbid states of the lungs, as in those who die of the peripneumony, pleurisy, and pulmonary consumption; and sometimes only inflammatory appearances in the bronchia, trachea, and throat.

Causes.—I. *Predisposing.* All ages, excepting less frequently infants, children, and old people—habits previously affected with catarrhs—habits with an ill-formed narrow thorax, long neck,—constitutions in which the lungs are diseased by tubercles, &c.; or affected with old coughs—habits that have been exposed in warm climates, or to several months hot weather—weakness—perhaps scrophulous habits—the body overheated—other states not ascertained.

II. *Occasional.*—1. Miasmata. 2. Infection. *From a source arising from the body*

III. *Exciting.*—Cold—depressing passions. *of those that have*

IV. *Proximate.* The principal morbid state appears to be preternatural irritability of the secreting membrane affected with a fever. *the Disease which is capable*

Diagnosis. The differences to be pointed out are between this disease and non-contagious catarrhs—the first stage of the rubeolous fever—the angina scarlatina—the ulcerating sore throat—peripneumonic, and pleuritic affections—asthma—pulmonary consumption—old coughs—hooping cough—venereal sore throat. *it to*

Prognosis—founded on 1. the nature of the reigning epidemic; 2. the degree and number of the symptoms and parts affected; 3. the habit in general; 4. the state of the lungs in particular. *Fever produced by infection always produces*

Treatment.—I. *Prevention.* By avoiding the occasional causes—by counteracting them—by removing the exciting causes. *feels prostration of strength*

II. *Cure.* The rules may be— *which is contagious*

1. To avoid exposure to, or to remove the occasional and exciting causes.
2. To remove those states or conditions of the constitution which, being present, may increase or continue the disease; especially the inflammatory diathesis; plethora; foulness in the stomach; costiveness; purging.

3. To avoid the action of external agents and states of the constitution which may aggravate or protract the disease, viz. from food; drink; temperature of the air; watching; exercise; the mind; mucous matter on the inflamed membrane.

4. To diminish the irritability of the part inflamed, by 1st. The remedies of fever, as explained under the next rule.

2d, Diminishers of irritability.

Opium*.

Peruvian† bark.

Wine.

Fossil acids.

Dulcified spirit‡ of vitriol,

of sea salt, of nitre.

Tepid bath.

Change of air.

Pure air.

3¹⁰

III. Producing an increased state of irritability in another part of the system;

Blistering plasters.

Rubefacients§.

Ulceration.

11

IV. Increasing the secretion from the inflamed part;

* See formulæ o, p.

† _____ ee . ff .

‡ _____ 'i, k, l, m, n.

§ _____ R, S.

Applications to the parts affected.

Steam of Water.

Acetous acid in vapor, &c.

Internal medicines.

Gum ammoniac*:

Sagapenum.

Afafœtida.

Myrrh.

Squill†.

Volatile alcali.

5 ~~V.~~ To remove or diminish the fever, by

Emetics‡.

Antimonial preparations§.

Opium.

Warm bath.

Semicupium.

Pediluvium.

Stimulants.

Wine whey, posset drink,

&c,

Volatile alkali||.

Infusions of gentle stimu-

lating agreeable herbs.

6 ~~VI.~~ To attend to particular symptoms, especially want of sleep; diarrhœa; costiveness; sweating.

* Formulæ pp, qq, rr,

† ——— ff, tt.

‡ ——— A, B.

§ ——— aa, bb, cc, dd.

|| ——— A.

VII. To vary the treatment according to the conjunction of inflammation of the parts subjacent to the membrane affected.

Species II.—Non-contagious sporadic catarrh and cough; catarrh and cough from cold; a cold.

Species III.—Non-contagious epidemic catarrh and cough; epidemic catarrh and cough from cold; epidemic cold.

These disorders may arise at any time of the year, in particular habits; and one of them is sporadic, and the other epidemic; and neither of them infectious.

The parts affected, and the symptoms, are the same as those of the former species; excepting that, frequently, its attack is more gradual, and the fever much less; and there is not the great prostration of strength that occurs in the contagious catarrh. The blood also is more frequently buffy, and the subjacent parts are more generally affected in the catarrh from cold.

The *causes* are the same as those of the former species, excepting that the only *occasional* cause is *cold*; and a *predisposing* cause is usually evident. Some have affirmed that this 2d. species is hereditary.

The sources of the cold applied may be, 1. the atmosphere, by sudden vicissitudes from any higher to any lower temperature—long exposure to a very cold air—a moist atmosphere—
easterly

easterly winds : 2. exposure of the body partially or generally, when heated, to a very cold air : 3. damp linen, water, &c. : 4. removing suddenly the customary cloathing : 5. the evaporation of sweat : 6. drinking cold water when the constitution is overheated, weakened, and irritable : 7. damp air of a room produced by washing, &c.

Diagnosics, and Prognosics:—These it will be unnecessary to repeat, they being delivered in treating of the former species.

Treatment:—I. *Prevention*. The means and medicines directed for preventing the morbid effects of contagion, miasmata, and cold, in the former disease, may be here employed, excepting that the precautions with regard to infection, will be here unnecessary.

These two disorders may each be divided into three varieties, according to the sole, or principal seat of the disease, viz. 1. *Coryza*. 2. *Raucedo* or *branchus*; hoarseness. 3. *Tussis*; cough.

An inflammation, with increased secretion, is possible, and does sometimes actually occur in the nostrils, mouth, and fauces, from extraneous visible substances, viz. any mechanical or chemical stimuli, or stimuli to irritable parts only. Such an inflammation would make

A IVth *Species*, of the same parts that are affected in the catarrh. It is not attended with any fever, unless a symptomatic febrile affection arise. A further explanation is not required.

Species

Pharyngitis
the neck
the throat
 Species V.—Ulcerous sore throat; malignant, gangrenous, or putrid sore throat.

Most frequent symptoms are, on the attack, languor—weakness—anxiety—dejection of spirits—sensations of chilliness, and heat alternately; or even horror succeeded by heat; and other phenomena of fever related p. ; which may precede a few hours, or a day or two, or begin with, and perhaps, sometimes, succeed the affection of the throat; viz. the sense of heat in the fauces—uneasiness or soreness of the throat, especially on moving the jaws, or deglutition—stiffness of the neck—a scarlet-coloured or fiery redness of the tonsils, *uvula*, *velum pendulum palati*, inside of the cheeks near the *fauces*, sometimes attended by a general swelling. Prostration of strength is soon perceived;—nausea, or failure of the appetite;—in the *fauces* supervene white, or ash coloured spots or crusts, surrounded by a florid red margin—fœtid breath;—increased difficulty of swallowing, soreness, sense of burning:—restlessness—disorder of the mind.—In a few days if ash-coloured spots had appeared, they cast off, and leave ulcers of a sloughy appearance, which frequently are gangrenous—blackness or livid colour of particular parts of the throat—spreading of the inflammation—alteration in the voice—difficulty of respiration—a quantity of mucous or slimy matter collects in the *fauces*—general and constant heat, but frequently greater at one time than at another—

other—sometimes *erythema* on several parts of the skin, as in the scarlet fever.

1. The symptoms may begin to diminish, or gradually disappear, generally about the 3d, 4th, 5th, 6th, or 7th day: Shown by the inflammation diminishing, or the ulcerations healing; the redness of the *fauces* growing less; the general heat diminishing; the pulse becoming less quick and frequent; return of appetite; refreshing sleep; a craving;—or, though rarely, the symptoms may suddenly diminish and go off on the appearance of a discharge or increased excretion, external inflammation, sleep. 2. The disorder may increase; particularly the ulcerations extend, and become gangrenous; the swelling of the throat, and neck, increase; the deglutition becomes more difficult; a quantity of slimy matter collects in the mouth and throat; the breath grows more foetid; the tongue furred;—the pulse becomes more quick, and frequent; the prostration of strength increases; *delirium*; heat and flushings of the face; diarrhæa; involuntary stools and urine; difficult respiration; cold sweats; stupor; irregular weak pulse; death:—It may terminate fatally in a sudden manner by hæmorrhages; apparently by catarrh, or peripneumony 3. It may terminate in swelling and suppuration of the parotid and submaxillary glands; or of the parts subjacent to the membrane of the throat and fauces.

A question has been proposed, whether a scarlet fever and sore throat has not been observed, which is of a different *species* from the ulcerous angina.

It is perhaps always infectious, though in very different degrees; and may spread from one person to others in the same family; and from one family to others through a whole town in general. It is frequently epidemic, and also sporadic. The epidemics in this disease differ from each other considerably in the degree of it, and in its fatality; according also to the disposition to ulceration and gangrene; the degree of prostration of strength; the eruption on the skin. Sometimes when this sore throat is epidemic, and generally attended with eruptions, as in the scarlet fever, the *erythema* of the skin and fever are present without any *angina*. In some epidemics the peruvian bark has been of no service; in others very efficacious.

The principal varieties seem to be according as 1. it affects chiefly the fauces and organs of swallowing—2. the trachea—3. as attended with eruptions—4. as combined with the inflammation below the membrane of the throat.

Dissections—have exhibited crusts; *aphtæ*; ulceration; gangrene; thickening of the membrane; swelling; a tough viscid covering; not only in the *fauces* but in the *trachea*, *œsophagus*, and inside of the cheeks, gums, tongue, nostrils:
in

in some cases in the stomach and intestines:—inflammation of the lungs:—glandular swellings:—a great quantity of inspissated mucus.

Causes. 1. *Predisposing.* 1. Infants and children are more liable to this *angina* than adults; and females, than males. 2. Weak habits. 3. Irritable constitutions.

2. *Occasional.* 1. Miasmata. 2. Infection.

3. *Exciting.* 1. Cold. 2. Moisture. 3. Heat and moisture conjoined. 4. Certain constitutions of the atmosphere. 5. Depressing passions.

Diagnos. To be distinguished from—1. the common quinsy: 2. the croup: 3. the erysipelas: 4. the scarlatina anginosa: 5. the measles: 6. the *angina pharyngea*, and *parotidea*: 7. *aphthæ*: 8. venereal ulcerations.

Prognosis:—founded on 1. the degree and number of the symptoms of the fever, inflammation, and ulceration: 2. the parts affected: 3. the constitution: 4. the state of mind of the patient: 5. the nature of the epidemic: 6. the effects of medicines.

Treatment:—I. *Prevention.* 1. By avoiding the application of the occasional causes: 2. by removing the predisposing causes: 3. by avoiding or removing the exciting causes.

II. *Cure:*—1st. By avoiding the application of external bodies, and circumstances;

and removing those states of the constitution, which may increase or continue the disease. To the latter belong—1. foulness of the stomach and intestines; by *emetics* and purgatives—2. phlogistic diathesis; by V. S.—3. costiveness—4. anxiety—5. acrid mucous fluids in the *fauces*.

2d. By diminishing the irritability of the inflamed part.

A. Astringents and sedatives applied directly to the parts affected :

Acids* : *vitriolic* ; *marine* ;
acetous ; *citronaceous* ; *tartareous* ; of ripe fruits.

Aluminous salts.

Salts† of lead.

Vegetable astringents : *infusion of rose buds* ; *balauftines* ; *plantane leaves* ; *tincture of kino* ; *austere wine*.

B. Remedies applied to the stomach :

Opium ; Peruvian‡ bark ;
mineral acids ; alum ; dulcified spirits ; wine ; sedative
salts ; stimulants ; pure air ; change of air ; tepid bath.

C. Increasing the secretion from the inflamed part :

Inhaling the steam of water ;
decoction of poppy heads ; steam with camphor ; acetous
acid ; myrrh in vapour. &c.

D. Removing the plethora of the parts affected :

Topical bleeding.

* Formulæ, vv, uu, ww.

† ——— xx.

‡ ——— L, M, N, Z.

E. Producing a preternaturally irritable state in another part :

Blistering plasters ; rubefacients.

F. Diaphoretics.

Dover's powder ; mixture of opium and antimony ; neutral salts ; contrayerva.

3dly. By remedies for the fever.

Antimonial preparations ; ipecacuanha ; opium and antimony ; ipecacuanha and opium ; warm bath ; tepid bath.

4thly. Particular symptoms are to be treated, viz. nausea ; vomiting ; *diarrhœa* ; swelling of the parotids ; eruptions ; thirst ; watching.

5thly. The strength of the functions in general must be supported, in order that the natural powers of the œconomy may be more effectually exerted in the cure ; or the debilitating effects of the disease be counteracted—by

Nourishing and moderately stimulating food ; vinous liquors ; spices ; volatile alkali ; æthers ; oil of alcohol of wine.

DYSENTERY ;—BLOODY-FLUX.

UNDER this denomination are to be comprehended those inflammations of the secreting membrane of the intestines which are attended by severe griping pains—frequent dejections of mucous or bloody matter—*tenesmus*—either a primary, or secondary fever—usually of more than a week's duration,

duration, and, in general, not accompanied by excessive vomitings. The principal differences between the particular cases are—1. those which are epidemic and contagious;—2. those which are necessarily attended by a fever, but are not infectious;—3. those which are produced by evident extraneous substances, and in which the fever, when present, is only symptomatic;—4. Such as are symptomatic of other diseases. Of these as many species may be reckoned.

Species VI.—Contagious and Epidemic Dysentery:—the Camp Dysentery.

On its attack the symptoms of fever (p.) may precede, from a few hours to a day or two, the affection of the intestines;—or they may begin at the same time;—or the inflammation may apparently precede a short time the fever.

The preceding and attending fever is frequently of the kind called bilious, but it is probably different in different epidemics. After the febrile symptoms, come on pains in the *abdomen*—nausea—frequently reaching, or vomiting—purging often, with slimy frothy matter, or bilious fluid or blood—distention of the abdomen and stomach with wind—*borborygmi*—eructations:—sudden prostration of strength—oftentimes cold sweats, or coldness of the extremities. The disease continuing, the weakness increases—the dejections are more frequent, and instead of stercorose mat-
ter

ter or bile, little else but slime, watery fluid, and blood in small quantities at a time.—*Tenesmus*, which grows more and more urgent—severe griping previously to the dejections—pain or soreness of the *anus*, especially just after the efforts to stool—the tongue is often covered with a white crust—the fever sometimes remits at irregular times, but in general is in a greater degree in the night-time, or evening:—sometimes in the progress of the disorder the dejections are mere blood; at other times puriform; also *scybala*, fat-like masses, and worms, appear, especially after a purgative—*apthæ* in the mouth and *fauces*—the blood is sometimes buffy—*dysuria*. After a very uncertain time, but frequently in about 14 days, the gripings grow less severe; the tenesmus gradually ceases; the dejections are more copious, and with stercorose or natural-formed *æces*; the fever abates; the appetite returns; and the whole symptoms gradually disappear soon after the natural alvine *æces* begin to be excreted; but the removal in this manner is rarely effected without the interposition of proper treatment, especially of cathartics. 2dly. A *diarrhæa* may remain for a considerable time after the dysentery has gone off. 3dly. A miliary eruption; scabby inflammation of the angles of the mouth; copious discharges by sweating, ptyalism, or other excretions may prove critical. 4thly. It proves fatal by the prostration of strength or excessive irritation. 5thly. Gan-

5thly. Gangrene may suddenly supervene.
 6thly. A painful purging of mucous and stercorose matter of a cadaverous smell, and tenesmus may continue after the fever has subsided, which gradually diminishes the patient's strength, produces dropsy, and at last, after several months duration, kills the patient usually by ulceration.
 7thly. It may terminate in ulceration of the *rectum*; iliac passion; rheumatic pains; angina, &c.

It has been observed, that different epidemics differ, in a general way, in the appearance and quantity of the alvine dejections—in the fever—in the number and degree of the symptoms—in the termination—in the degree of danger—in the duration.

In the same epidemic the disorder is often various at different periods.

It may appear suddenly among a number of people, especially strangers, near wet or boggy ground; or spread from one person to others in the same family, and from one family successively through a whole town, camp, hospital, garrison, ship, &c.

It prevails in this island especially in the Autumn; also frequently in the Spring.

It is by respectable practitioners reckoned epizootic. (*Sagar—systema morborum symptomaticum* 1776, p. 305.)

Dissections have shown, 1. inflammation, more or less, of the whole tract of the intestines, but especially

especially the curvatures of the large ones; also of other abdominal viscera. 2. Externally black spots on the intestines. 3. Large intestines, especially from the *cæcum* to the rectum, purple, black, and gangrenous. 4. Adhesions of the colon to the *peritoneum*, with abscesses between them. 5. Various convolutions, contractions, dilations with air; adhesions to each other; and tumors of the intestines, especially in the large guts and lower part of the small ones. 6. The intestinal coats much thickened. 7. Tubercles on the inside of the guts. 8. Ulceration, erosion, abscesses, gangrene, vesicles, in the internal coat. 9. Abrasion of the mucous and villous coat. 10. *Scybala*, and gangrene in the cells of the colon. 11. Other viscera of the *abdomen* variously diseased, viz. the *omentum* wasted; the spleen of a loose texture; the liver enlarged, schirrhous, and sometimes suppuration in it; the gall bladder full of bile.

Causes.—I. *Predisposing.*—1. Weakness. 2. Irritable habits. 3. An irritable state of the intestines by former diseases, mercury, &c.

II. *Occasional.*—1. Miasmata. 2. Contagion.

III. *Exciting.*—1. Cold. 2. Spring, and Autumn. 3. Errors in diet or drink. 4. Depressing passions. 5. Perhaps certain constitutions of the atmosphere.

IV. *Proximate*.—As a principal part of this cause, the constricted state of the colon must be added to that of this order of inflammations, and fever in general.

Diagnosics—to distinguish the dysentery from the diarrhæa—cholera morbus—*enteritis*—spasmodic affections—hæmorrhoids—irritations from other diseases.

Prognosics—founded on 1. the age of the patient. 2. The state of the habit. 3. The degree and number of the symptoms. 4. The epidemic. 5. The duration of the disorder, and of the epidemic. 6. Particular symptoms. 7. Effects of medicines.

Treatment:—I. *Prevention*—by

(a) removing the predisposing causes.

(b) avoiding the occasional and exciting causes.

(c) counteracting the remote causes.

II. *Cure*.—The substances and means employed for the removal and palliation may be ranged, according to the principal intentions of their operation, under the following heads:—1st. The removal of irritating matter in the stomach and intestines; or to destroy its stimulating power, by

Emetics;

Emetics*; Cathartics†; Clysters‡; Diluents§; Demulcents||.

2d. To diminish the irritability or inflammation of the secreting membrane, and to remove the constricted state of the intestines, by

Opium** ; Ipecacuanha†† ; Astringents‡‡ ; Diaphoretics§§ ; Relaxants ; Blistering-plasters ; Rubefacients¶¶ ; Cupping and Scarification.

3d. To diminish the fever^o.

4th. To prevent fatal effects of weakness^{oo}.

5th. To avoid or counteract external agents, which may increase or continue the disease; especially cold; heat; posture; impure air; dysenteric infection in privies, beds, clothes, &c.; *miasmata*; food; drink.

6th. To remove or palliate certain states of the constitution and symptoms; viz. plethoric and phlogistic diathesis; *tenesmus*; *tormina*; vomiting and *nausea*; thirst; hiccough; anxiety; iliac passion; *enteritis*; weakness in the convalescent state.

7th. To treat the chronic dysentery remaining after the disappearance of the acute febrile disease.

* Formulæ, A, B, C.

†† Formula, aaa.

† ——— D, E, F, G, I, t.

‡‡ ——— u, w.

‡ ——— X, O, P.

§§ ——— hh, ii, kk, ll.

§ ——— yy.

¶¶ ——— R, S.

|| ——— zz.

^o See p. 29, l. 8.

** ——— o, p.

^{oo} — p. 29, l. 15.

Species VII.—Non-contagious febrile Dysentery.

The symptoms are nearly the same on the attack, in the course, and termination, as in the former species. There is perhaps in general less prostration of strength than in the infectious dysentery. It is not apparently propagated by contagion. It may be divided into two kinds; the *epidemic dysentery* which may depend on certain constitutions and states of the atmosphere, as well as the other exciting causes of the former species; and the *sporadic dysentery*, which does not depend on such conditions of the atmosphere, but on the other exciting causes of the contagious dysentery. The sporadic dysentery may also be produced by, or be critical to other diseases in cases of *metaschematismus*.

Species VIII.—Dysentery occasioned by evident extraneous Substances, and in which the Fever is symptomatic, and occasional.

This dysentery is different on its attack, in its progress and termination from the two former species, as will readily be conceived from the contemplation of its occasional causes.

The varieties are according to the difference of the occasional causes.

Occasional causes are principally 1. various kinds of animal and vegetable food; from certain qualities of them; peculiarity or certain states of the habit; or excess in quantity—2. certain spring,
or

or river, or other waters, for drink—3. poisonous substances, or drastic cathartics in too large doses—4. worms—5. blood—6. pus.

The proper treatment will be dictated by the knowledge of the occasional causes,

Symptomatic Dysentery.

Severe griping pains, mucous or bloody dejections, *tenesmus*, nausea, with other symptoms, may attend and be produced by various diseases, viz. the paroxysm of intermittent, and remittent fevers; continued fevers; internal suppuration, and hæmorrhagy; suppressed *catamenia*; the gout; scurvy; scirrhus intestines; *enteritis*, &c.

In these cases the proper treatment must be inferred from the consideration of the particular disease present.

Cholera morbus; Choleric Passion; Cholera; or Gall-flux.

Under this term are to be treated those diseases in which there are frequent and violent vomitings, especially of bilious matter—purging—pains in the abdomen and stomach—prostration of strength—oftentimes coldness of the extremities and spasmodic contractions.

These are evidently two species, viz. the autumnal *cholera*; and the sporadic, from evident extraneous substances; besides a third, the symptomatic *cholera*.

Species

Species IX.—*Cholera Spontanea*; *Autumnal Cholera*; *Epidemic Cholera*.

This disease appears in this country especially in Autumn, when it is often epidemic, and prevails generally not longer than four or five weeks. It begins with the febrile symptoms, p. ; and an affection of the stomach and intestines, viz. *nausea*; pains in the belly; eructations; vomiting immediately after taking food or drink. This disorder of the *primæ viæ* rapidly increases: it is very soon attended by vomiting, and often enormously, of bilious fluid;—dejections copiously of the same matter;—excruciating griping pains in the abdomen;—*tenesmus*;—swelling and foreness of the belly;—loathing of food;—heartburn, or other pains in the stomach;—return by vomiting of *ingesta*;—deep anxiety;—great prostration of strength;—small, weak, and quick pulse;—coldness of the extremities;—spasmodic contractions of the muscles of the legs;—unquenchable thirst;—cold sweats;—syncope.—The patient may be killed by the violence of the symptoms in a day or two; or the disease may begin to diminish within that period; and, perhaps, it may terminate in other diseases, particularly *enteritis*. This epidemic differs in different years in many particulars, especially in the quantity of bilious evacuations; in the number and violence of the symptoms; in the duration of the epidemic.

Dissections—have exhibited the appearances of inflammation in the small intestines and stomach; distention with air of the *duodenum* in some parts, and contraction in others; stricture of the *ductus choliodochus*.

Causes.—I. *Predisposing*. The same as those of the dysentery, p. 33.

II. *Occasional*. Probably a peculiar constitution, or state, of the atmosphere.

III. *Exciting*. 1. Cold. 2. Disorder of the stomach by excess, or particular kinds of food and drink. 3. A preternatural quantity, or alteration in the qualities, of the bile. 4. Depressing passions.

IV. *Proximate*. A spasmodic contraction or convulsion of the intestines, as well as inflammation and fever, must, perhaps, be admitted to explain the phenomena in this disease.

Diagnosis. To be distinguished from 1. diarrhæa—2. dysentery—3. other choleras.—4. *enteritis*.

Prognosis—according to 1. number and degree of the symptoms—2. the duration—3. the habit—4. the epidemic.

Treatment.—I. *Prevention*. The same plan may be adopted as for the dysentery.

II. *Cure*. The same means and remedies are to be employed, only varying the mode and time of applying some of them.

Species

Species X.—Sporadic Cholera.

The symptoms in general are the same as in the former species; but the manner of attack, the progress, duration, and termination, are different according to the difference of the occasional causes: of which the principal are,

1. Excess in eating and drinking.
2. Particular kinds of food.
3. Poisonous substances.
4. Draught cathartics and stimulants.
5. Worms.
6. Bile.
7. Purulent matter.

It will be unnecessary to relate the other parts of the subject, they being comprehended in the former species.

The *cholera* may also be produced by, or supervene and carry off other diseases. Or other diseases which produce it may continue, in which cases it will be symptomatic.

Species XI.—Diarrhœa.

This is the disease in which the purging, vomiting, pains of the stomach, and abdomen, sickness, fever, and disorder of the whole constitution, are not so violent and frequent as in the *cholera*; it is of much longer duration; and it is not of itself fatal. The dejections are frequently stercorose matter, as well as bilious, mucous, ferous, bloody substances. The *tenesmus* is either not present, or not so distressing, as in the dysentery. The alvine excretions are more copious,
and

and the whole concourse of symptoms less formidable than in the dysentery.

The *diarrhœa* is not infectious; in other respects it resembles so much the dysentery, that the doctrine already delivered renders a further particular discussion unnecessary.

It may be useful also to observe, that a *diarrhœa*, consisting in an inflammatory state of the secreting membrane of the intestines, primarily and independently of any other disease, is hitherto observed to be a very rare occurrence: the *diarrhœa* that so frequently happens, being almost always symptomatic, or critical, of diseases different from the inflammation of this membrane.

Species XII. — Cystirrhœa; inflammation of the secreting Membrane of the urinary Bladder; Catarrhus vesicæ.

In this disorder there is an excretion of a large quantity of mucous or puriform matter with the urine—difficulty at times to excrete the urine—obstruction to the passage of it through the urethra—frequent inclination to urine, but a small quantity of it only passed at a time—sometimes *ardor urinae*—pain or uneasiness of the *hypogastrium*, sometimes of the loins, region of the pubis, hips, upper part of the thighs—lassitude, particularly of the inferior extremities—occasionally febrile symptoms—impaired appetite for food—emaciation—weakness. At last, and generally after a

G

year

year's or more duration, the pain, and hectic symptoms increase to so great a degree, as to prove fatal.

From the long subsistence of this malady, and the appearances on dissection, it may be doubted if hitherto this has been observed as a primary disease, but it probably, nevertheless, does sometimes actually occur.

It is generally symptomatic of various organic diseases of the urinary bladder, and calculous concretions; perhaps also of the palsy.

Causes. It has been said that it may be occasioned by *cantharides*, and stimulating *ingesta*;—long retention of the urine during violent exercise;—external injuries—*metaptosis*.

Diagnostics—to be distinguished from other diseases of the urinary bladder, producing excretion of mucous or puriform matter. 2. Gonorrhœa. 3. Gleet. 4. *Fluor albus*.

Treatment:—Cure by I. preventing the fresh application and removing, or counteracting the occasional causes.

II. Avoiding all irritations to the urinary organs; particularly saline matter with the food and drink, costiveness, pressure, motion.

III. The remedies for diminishing irritability and fever, (p.) and perhaps sedative and astringent injections.

IV. Palliating symptoms, especially pain and watching.

Species

Species XIII.—Infectious Gonorrhœa; Gonorrhœa virulenta; contagious urethral Inflammation; the Clap,

This disease in *men*, generally begins with a sense of itching, or pricking at the orifice of the *urethra*—heat or uneasiness in the tract of the canal—a little pain in excreting urine—at the same time, or in a day or two, redness at the orifice of the *urethra*—a small quantity of mucous matter in this part.—At other times the appearance of thick slime, or running, is the very first symptom perceived; and then, in the beginning, the soreness, or pain, is only felt during the discharge of urine. In a few days, and sometimes only in a week or more, these symptoms increase, and then appear a livid or cherry redness of the *glans penis*—sense of swelling or distention of the penis—erection at times—*ardor urinae*—*dysuria*.—The discharge increases, grows opaque, and less viscid, and yellowish—chordee. Sometimes hæmorrhagy from the *urethra*; priapisms; swelling along the tract of the *urethra*; *phymosis*; *paraphymosis*; inflammation of the skin, and œdematous swelling of the *penis*; swelling of the testicle, with frequently a temporary cessation of the running; the colour of the discharge varies; swelling of the lymphatics of the *penis*; swelling of the inguinal glands. Febrile symptoms, perhaps, always symptomatic.

The symptoms, after continuing more or less severe, or increasing for one, two, or three weeks, and sometimes four or five, begin to diminish, and the *dysuria* and running disappear; or effects remain. 2. It may kill the patients by the violence of the irritation. 3. It may produce inflammation of the bladder; inflammation and induration of the prostate gland; gangrene; suppuration; non-venereal buboes; schirrhous testicle; ischury; stricture in the *urethra*; non-contagious urethral inflammation; incontinency of urine; gleet; shankers; perhaps the infection may be absorbed without ulceration, and occasion the other forms of *lues*; but most frequently they ensue by means of ulceration, and sometimes by an accidental wound in the *urethra*.

In women the *urethra* is not so frequently affected as in men, for obvious reasons: when it is the seat of this disease, the symptoms are the same, allowing for the difference of structure and function of the organs of generation.

This disease has been observed to be produced in habits under a course of mercurial medicines for the cure of other forms of the *siphylis*. In general, in the early part of the disease, the increased secretion does not extend above two or three inches up the *urethra*: but, sometimes, either from the natural progress of the disease, or improper injections, the inflammation occupies the

the parts near the feminal vessels and prostate gland.

Some have divided the various cases into two kinds, viz. *simple* and *complicated*; or with an ulcer of the urethra, and without it.

Appearances on dissection:—1. During the clap. Redness of the urethra and no excoriation—lymphatics white and enlarged—puriform matter oozing from the membrane, especially at the *lacunæ* under the *frænum*, sometimes higher up the *urethra*—ulceration. 2. After the gonorrhœa. Contraction of the cavity of the urethra—excrescences, or tumors in it—sometimes cicatrices, at other times none—obliteration of mucous ducts, scirrhus or fungous prostate gland.

Causes, 1. *Predisposing*. These exist, but in what they consist is not ascertained.

2. *Occasional*. 1, Specific contagious matter contained in the mucus of a venereal gonorrhœa. 2. The same kind of infection in a venereal ulcer. Both of these are externally applied to the urethra. 3. Proximate cause, and ratio symptomatum, to be deduced from the nature of the whole of the present order, and the structure and function of the parts affected, with the consideration of the occasional causes.

Diagnosis. To be distinguished from—1. non-contagious urethral inflammation:—2. gleet:—3. *fluor albus*:—4. symptomatic gonorrhœa:—5. ulcer-

5. ulceration of the urethra :—6. feminal weakness, or gonorrhœa strictly so called.

Prognosis :—determined by 1. the degree of inflammation, irritation, and symptomatic fever : 2. the diminution and alteration in the symptoms, particularly the abatement of the *ardor urinæ*, the discharge becoming thicker, less copious, and whiter, or less green :—3. the supervening disorders, p. 44, l. 6.—4. the previous state of the organs of generation.

Treatment :—A. *Prevention*. 1st. By avoiding the application of the occasional causes :—2dly. By mixing or combining the venereal contagion, and thereby removing it or rendering it inactive. The substances employed are ; (a) washing the end of the urethra with any watery fluid ;—(b) drinking copiously watery liquids to increase the excretion of urine ;—(c) injections* of watery, mucilaginous, oily, liquids ;—(d) injections of spirit of wine †, metallic ‡ salts, alkali in water §.

It is impossible from the small quantity of caustic alkali in injections, that they can act by a combination of the mucus with the alkali.

B. *Cure* :—May be effected, 1. spontaneously : during which the symptoms may be palliated, and removal expedited by,

* See formulæ bbb, ccc.

† ————— ddd.

‡ ————— eee.

§ ————— fff.

(a) by avoiding irritations; and especially from such kinds of food, and drink, as afford a saline impregnation to urine.

(b) drinking copiously infipid, watery, and mucilaginous liquids.

(c) demulcent injections*.

II. Cure by medicines; performed by, 1st. destroying the infection, or rendering the secreting membrane of the urethra less irritable;—with these intentions are used;

Injections of metallic salts—of alcohol in water—of cold water—of astringent vegetables—of opium†—of mercury‡.

2dly. Treating particular symptoms, viz. (a) symptomatic fever;—(b) inflammation of the *glans penis*, prepuce, penis in general, and phymosis and paraphymosis;—(c) tumor of the testicles;—*ardor urinæ*;—(e) stricture;—chordee; (f) other symptoms and supervening complaints, p. 44.

3dly. Avoiding certain irritations; especially the application of the discharged matter to the *glans penis* or prepuce—urine highly impregnated with saline matter—costiveness—exercise—posture—heat—cold.

4thly. To the cure must be referred, the remedies for preventing the other forms of the ve-

* Formulæ, ggg.

† ——— hhh.

‡ ——— iii.

neral disease occasioned by this disorder; which usually happens by means of ulceration, but perhaps also absorption takes place without ulceration or wound. Mercury is the only well ascertained remedy for curing these forms of the venereal disease; and perhaps it has the power of preventing them. If there be signs of ulceration, this remedy is indispensable; otherwise but a small proportion of patients require it. The most prudent plan is, in every case, to apply mercury* during the subsistence of the gonorrhœa, to prevent the absorption; or destroy the infection in the constitution; and to cure ulceration in the urethra. This remedy may be exhibited in such doses as the patient can bear, without exciting salivation. The alleged effects of it on the action of the heart and arteries, and blood, as a criterion of the efficacious quantity appear to be erroneous or equivocal. It does not appear well founded that the presence of other inflammations should contra-indicate it.

Species XII.—Gonorrhœa virulenta, or Clap in Women:—Contagious vaginal Inflammation:—Malignant or venereal Fluor albus:—Blenorrhagia Syphilitica in Women.—See Swediaur, Cap. II.

This is the same disease, and from the same causes, as the former species; differing from it

* Formulæ, kkk, lll, mmm.

only in being seated in the secreting membrane of the *vagina*. The attack, progress, issue, and treatment, also are the same, allowing for the difference between the structure and function of the urethra of men, and the *vagina*.

It must be distinguished especially from the *fluor albus*.

Inflammation, with increased secretion, by the same occasional causes as the two former species affects the *labia pudendorum*, *clitoris*, or *nymphæ*; but a particular account of its symptoms, and treatment, will not be here necessary.

Species XIII. Non-contagious urethral Inflammation:—Simple Gonorrhœa:—Blennorrhœgia ab acri, aut stimulo mechanico. See Swediaur, Cap. II.

Is that inflammation and discharge from the urethra not occasioned by the venereal infection. It may be preceded, or begin with, or a fever may appear soon after its attack. It generally begins with more severe symptoms, and is more rapid in its course than the contagious *gonorrhœa*; but for the most part the inflammation is less severe than in the *gonorrhœa*. The discharge is thinner, or sometimes more viscid, and, perhaps, always transparent, or at least not so opaque, as in the two former species. It does not so frequently stain the linen of the patient. This *gonorrhœa* is apt to disappear suddenly, and return from time to time.

The *glans penis* is not apt to be of a livid or cherry redness. Many other symptoms must necessarily be the same as in the venereal gonorrhœa. When it is occasioned by coition, it arises immediately after connection. This inflammation, produced by extraneous chemical stimuli, may begin a little way within the urethra, but extend throughout the whole canal. (Swediaur, Cap. II. p. 38.) Other diseases may apparently change into this. It is a symptom of other diseases.

Causes.—I. *Predisposing.*—1. Persons who have been affected with venereal gonorrhœas. 2. Who have variously diseased urethras.

II. *Occasional.*—1. Venereal gonorrhœa. 2. Any inflammation of the *glans penis*, or prepuce. 3. Mechanical stimuli, as strains, contusions, punctures, pressure, &c. 4. Chemical stimuli, viz. injections of caustic alkali, acids, astringents, &c. 5. Stimuli to vital parts only, viz. saline urine, cantharides, acrid diuretics, &c. 6. Irritations in other parts of the system, as, drastic cathartics; dentition; gout, &c. 7. Intemperance. 8. Cold.

Diagnosis:—is to be distinguished from the same diseases as the venereal gonorrhœa.

Prognosis:—1. Founded on the general consequences. 2. The degree and number of the symptoms. 3. The occasional cause.

Treatment:—I. *Prevention.*—By avoiding the occasional causes.

II. *Cure.*

II. *Cure.*—Will be readily inferred from that delivered for the venereal gonorrhœa.

Species XIV.—*Non-contagious Inflammation of the Vagina*

May arise, but a particular account does not seem necessary; nor of the non-venereal inflammation and increased secretion from the *labia pudendorum*.

It is very probable that many other parts of the secreting membrane, besides the above, are affected with inflammation, and would constitute so many species; but their history is not at all, or but little known.

G E N U S III.

When the *glans penis*, prepuce, perinæum, lips, or nipples, are inflamed by the application of the venereal infection, or by other causes, there is sometimes no discharge from the parts affected, but at other times an evident secretion is occasioned.

The species of this genus are obviously divided into venereal, and non-venereal; and they are as numerous as the parts affected.

ORDER II. *Genus I.**Debilitating Inflammations.*

DISTINGUISHING characters of the species of this *genus*, are a great degree of prostration of strength, especially of the voluntary functions—a contracted state, and often diminished strength of action of the heart and arteries—diminished, or at least not increased, heat of the constitution in general, to the sensation of the patients, or of other persons.

Species I. Ειλεός; Volvulus; Enteritis iliaca; Inflammation of the small Intestines; Inflammatory Fever of the Intestines.

The symptoms of the inflamed part, and of fever, *p.* , may begin, and proportionally increase together; or the local affection may apparently precede the fever; and, frequently, the febrile symptoms appear before the disorder of the intestines: also a different disease may precede.

It frequently begins with pains of the abdomen, especially an acute fixed pain in the umbilical region; soreness of the part to the touch—no appetite for food; nausea; ructus; vomiting of mucous or bilious matter—costiveness; or purging;—*borborygmi*;—inflation, or tension, of the belly,

belly, particularly of the parts near the *umbilicus*—chilliness and heat alternately—quick and often hard pulse—great weakness of the voluntary powers—the trunk bent forwards.

Its progress is rapid:—the pain grows excruciating—vomiting of *ingesta*, and at last of fœtid or feculent matter—wind, from time to time, collects, and is discharged with some mitigation of the pain; at last *ileus*, or the contraction of the *anus*, and other parts of the intestines, preventing its expulsion, the abdomen feels hard, swells considerably, and the patient screams from intolerable pain—dysenteric purging?—respiration quick and short—pulse smaller; weaker; irregular; intermitting—*syncope*—hiccough—cold sweats; partial sweats—unquenchable thirst—urine sometimes limpid—tongue dry, rough, brown, cracked; at last black—the utmost prostration of strength—countenance distorted—delirium; coma—vomiting of stercoraceous matter, and of suppositories and clysters?—convulsions. It may terminate in one, two, or three days, in death, by the violence of the fever and inflammation:—in gangrene:—sometimes in suppuration:—in diarrhœa:—the symptoms may gradually diminish and disappear.

Perhaps varieties might be distinguished according to the particular small intestine most affected.

Dissections show redness of the coats of the small intestines—thickening of them—distention with air, or fæces in some parts, and contraction in others—situation of the intestines altered—contortions — herniæ—intus-fusceptions — adhesions.

Causes.—I. *Predisposing.*—Persons advanced in life. 2. Females. 3. Plethoric, irritable, weak habits; infants. 4. Unknown peculiarities of constitution.

II. *Occasional.*—1. Cold. 2. Indurated fæces. 3. *Ingesta.* 4. *Calculi.* 5. *Herniæ.* 6. Suppressed customary evacuations. 7. Other diseases, especially of the intestines themselves.

III. *Proximate.*—In this disease in particular, and in the whole order in general, perhaps, the state which will best explain the phenomena, is preternatural irritability, sensibility, and strength of the arteries of the inflamed part, together with the cause of fever.

Diagnosis—to be distinguished from 1. The enteritis of the large intestines. 2. Colic. 3. Inflammation of the mesentery. 4. Dysentery. 5. Nephritis. 6. Hepatitis, and other abdominal inflammations. 7. Worms. 8. Difficult menstruation. 9. Hæmorrhoids. 10. *Erythema.* (Cullen, Nofol. Method.)

Prognosis: grounded on 1, the frequent fatality of the disease. 2. The violence, number, and

and duration of the symptoms. 3. The kind and effects of remedies employed.

Treatment: I. *Prevention*; by avoiding removing the occasional causes.

II. *Cure.* The rules may be;

1. To diminish the inflammation and constriction as speedily as possible by the most powerful remedies and means, viz.

A. Copious blood-letting—general, and topical.

B. Removing the present contents, and increasing the secretion from the intestines; by especially

1. Clysters* injected repeatedly.

2. Cathartics†.

3. Diluent and demulcent drink‡.

C. Relaxants, and antispasmodics:—opium—oil of wine—æther—*femicupium*—fomentations—friction with oil, opium, camphor, spirit of wine, volatile alkali, &c.

D. External irritation:—blistering-plaster to the umbilical region—rubefacients—dry cupping—friction.

2. Remedies of fever to be exhibited. Antimonial preparations§.

* Formulæ, X, O, P, t, u.

† ——— D, E, F, G, s.

‡ ——— yy, zz.

§ ——— aa, bb, cc, dd.

3. Particular symptoms to be treated, viz. vomiting—nausea—thirst—pain—stricture of the anus—acid and other irritating matters in the stomach.

4. Irritations to be avoided, especially, cordials; stimulants; certain kinds of food and drink; heat; cold.

5. Occasional causes, if present, should be removed, especially, scrotal and inguinal herniæ—indurated fæces in the rectum and obstinate costiveness—irritations in the stomach and intestines.

Species II.—Κωλική; *Enteritis colica*; *Inflammation of the large Intestines*; *inflammatory Fever of the large Intestines*.

In this disease the pain of the abdomen is not confined to the umbilical region, it is of the hypochondriac and iliac regions of the *epigastrium*, loins, *os sacrum*: also of the thighs, and frequently of the *testes*. The intestine affected is sometimes palpably evident. The symptoms are not so violent, the progress not so rapid, of longer duration, less fatal, more frequently terminates in suppuration, and cures itself, than the former species. Sometimes it resembles the pleurisy.

Species III. Enteritis mesenterica; Inflammation and Fever of the Mesentery.

The pain is deeply seated in the umbilical region—burning heat of the bowels—pain increased on bending the trunk forward—fæces discharged with difficulty, or not at all, by clysters—anxiety—fever sometimes not violent—frequently attended by bloody dejections; diarrhæa; dysentery; also, it is said, by chylous stools. Resembles in general the *enteritis*, and is usually confounded and combined with it. In a slight degree supposed to be present in many fevers in which the *primæ viæ* are much affected.

Perhaps this disease does not belong to the present *genus*.

Species IV. Enteritis traumatica; Inflammation of the Intestines from Injuries by external mechanical Agents.

This inflammation arises and increases gradually after the injury that occasioned it—the fever seems to be merely from the irritation, or symptomatic—it continues, probably, as long as the injury—the symptoms in general, and, particularly, the pain, are, perhaps, less violent, and there are probably no constrictions, or distention, as in the *enteritis*. It may terminate in health by a gradual disappearance of the inflammation—in death by the irritation—in suppuration, abscess—hæmorrhagy—ulcer—schirrhus.

Causes—are mechanical, as wounds—cutting instruments—gunshot wounds—contusions—pressure.

Prognosis. In general not fatal, if the injury be slight—danger in proportion to the degree of injury and habit.

Treatment—consists in diminishing, to a due degree, the inflammation—avoiding external irritations of food, drink, and fæces.

The *enteritis* is also symptomatic of a great number of diseases, but the consideration of those cases belongs to the places in which these diseases are treated.

Species V. Carditis membranacea; Inflammation and Fever of the Membrane covering the Heart.

The fever may begin as in the *enteritis*;—symptoms of the inflamed part reckoned to be often equivocal, viz. acute pain in the region of the heart—palpitation—quick, short, and extremely difficult respiration, with a long interval between the act of inspiration and expiration—dry cough—pain increased, or inability to lie on the side affected—frequent *syncope*—inexpressibly great anxiety—vehement thirst—nausea—dry black tongue—pulse small, irregular—great prostration of strength: terminates in a few days in a gradual diminution; or death; or other diseases. Sometimes it has subsisted much longer.

Has been supposed to be the *erysipelas pulmonis* of Lommius—to produce the same symptoms as the peripneumony, but more violent.

The fore part, posterior part, or sides of the heart, may be affected.

Dissections — exhibited ulceration — polypous concretions—adhesion of the heart to the pericardium—the heart incrusted with coagulated matter.

Causes. These, perhaps, not ascertained.

Diagnosis—resembles the *pericarditis*; pleurisy; peripneumony; inflammation of the diaphragm; *gastritis*; *enteritis*; *hysteria*; worms; — perhaps cannot be distinguished from the inflammation of the substance of the heart.

Prognosis.—In general fatal.

Treatment.—I. *Prevention*; not known.

II. *Cure*; by the remedies, p. 55.

I, A, B, 2; C, ~~D H, IV.~~ 314,

Species VI. Carditis traumatica.

Injuries from mechanical agents may be inflicted on the heart, and occasion inflammation of it; during which, the symptoms and progress differ, in several respects, from the former species. This inflammation has been observed to be curable. Must consider the kind of instrument, the degree of injury, and part affected.

The inflammation of this organ may be a part, or supervene in other diseases.

Species VII. Gastritis; Inflammation and Fever of the Stomach.

The fever may begin as in the *enteritis*:—a different disorder may sometimes precede:—symptoms of the inflamed part are, acute fixed pain in the *epigastrium*—tension and swelling in this region—sensation at the stomach of burning—*nausea*; reaching; vomiting; excruciating pain, and rejection by vomiting immediately on swallowing any kind of food or drink whatever—hiccough:—the greatest prostration of strength—great thirst—dry tongue, but frequently not foul—anxiety—great restlessness.—*syncope*—oftentimes cold and partial sweats—pulse may be hard, but small and quick.—Coldness of the extremities—*subfultus tendinum*—frequently purging, or vomiting—convulsions—sopor—may be attended by inflammation of the parts subjacent:—In a few days the symptoms may begin to remit, and disappear; or evacuations, and eruptions may be critical; or it proves fatal; or terminates in other diseases of the stomach, and other parts. If the *cardia* be principally affected, *ingesta* pass with extreme pain into the stomach, and are often returned into the *fauces*; *singultus* violent, acute pain of the *cardia*. The *pylorus* being particularly inflamed, the pain is in that region, and vomiting of all *ingesta*.

Varieties—principally according to the part of the stomach affected, viz. the *pylorus*; *cardia*; the ante-

anterior; the posterior; the superior; and inferior parts.

Dissections—have shown inflammation;—gangrene;—ulceration;—adhesions.

Causes—as far as known, most of those of the *enteritis*; and certain *ingesta*; also, perhaps, retrocession of eruptions.

Diagnosics—to distinguish this disease from
 1. other inflammations and ulceration of the stomach. 2. *Peritonitis*. 3. *Enteritis*. 4. *Hepatitis*.
 5. *Splenitis*. 6. Inflamed pancreas. 7. *Carditis*.
 8. *Pleurisy*. 9. Inflammation of the muscles of the epigastric region. 10. Hysterical spasms.

Prognosis:—the grounds of it, most of those relating to the *enteritis*.

Treatment:—I. *Prevention*—by the rules for that of the *enteritis*, p. 55.

II. *Cure*.—The same as that for the *carditis*, excepting that no medicines, in general, can be applied to the stomach; and the food and drink must be of the mildest kind, and in small quantities. The strength, and life, should be supported by clysters.

Species VIII. Gastritis traumatica; Inflammation of the external Coat of the Stomach by mechanical Causes.

The fever is merely symptomatic—prostration of strength much less—the symptoms not nearly
 so

is violent as in the former species—the duration may be several weeks.

Dissections exhibit the appearances of injuries from mechanical agents.

Causes.—Punctures—wounds—contusions—*hernia*—other mechanical causes.

Prognosis depends on the degree of injury; the symptoms; and habit.

Cure,—will readily be inferred from the plan proposed for that of the former species, excepting the surgical treatment.

The *gastritis* may also be symptomatic of other diseases.

The stomach may, perhaps, be affected with the erysipelatous inflammation.—Sagar, p. 639.

Species IX, Inflammation and Fever of the peritoneal Coat of the urinary Bladder; Cystitis.

The fever may begin as in the *enteritis*; or a different disease may precede;—symptoms of the inflamed part are; very acute pain in the hypogastric region; frequently also of the back, and *ilia*—tension of these parts—*ischuria*; *dysuria*; intolerable pain just before and immediately after the excretion of urine—inclination to discharge urine—*tenesmus*; costiveness or frequent dejections, —pain increased on pressure—oval tumor in the *hypogastrium*—pulse quick and small—prostration of strength—coldness of the extremities—cold sweats—nausea—*delirium*—may be accompanied by

by inflammation of the parts below. In a few days, or a week, generally, the symptoms begin to diminish, and gradually disappear;—or, death ensues, apparently from the excessive irritation; a cessation of pain and *delirium* preceding;—increased excretions and secretions may prove critical;—other diseases may supervene, and this disappear; it may especially terminate in gangrene; induration; thickening; or ulceration of the urinary bladder.

The symptoms vary according to the extent of the inflammation, and part of the urinary bladder affected; likewise according to the occasional cause.

Dissections.—After death are found appearances of inflammation; thickening of membranes; gangrene; pus; ulceration; distention of the urinary bladder; adhesions.

Causes—most of those of the other species of this *genus*, besides, perhaps, concretions, and *stimuli* in the urine; retention of this fluid; various diseased states of the urinary organs.

Diagnosis—resembling diseases, are 1. inflammation of other parts of the bladder. 2. Of the *peritoneum*. 3. Of the muscles of the hypogastric region. 4. Of the uterus. 5. Of the rectum. 6. Symptomatic *cystitis*. 7. *Hysteria*.

Prognosis:—The grounds of it, most of those delivered on the subject of the *enteritis*.

Treatment.

Treatment:—I. *Prevention*. By the rules for that of the *enteritis*, p. 55.

II. *Cure*, by the same remedies as for the *carditis*, excepting that the pressure of external applications may do more harm than service, by stimulating immediately the inflamed part; particular attention must be paid to avoid stimulating impregnations in the urine; to render it less saline; and to draw off this fluid by art, when the retention proves irritating.

Species X. Cystitis traumatica; Inflammation of the urinary Bladder by mechanical Agents.

Here the fever is merely symptomatic, and not essential—the progress; duration; and termination differ in many respects from the former species—in particular there is much less prostration of strength, and the symptoms, in general, are much less violent.

The *cystitis* may be symptomatic of various diseases.

The *erysipelas* may, perhaps, affect the urinary bladder; but the pathognomonic symptoms of it can only be conjectured.

ORDER II. *Genus II.**Non-debilitating Inflammations.*

Species I. Phrenitis membranacea; Phrenetic Fever; Phrenzy; Inflammation of the Dura Mater and Fever.

THE symptoms of fever in general, (p. 102, part 1.) perhaps of the inflammatory fever (p. 136, part 1.) in particular, may precede, begin with, or, apparently, succeed the local affection. A different disease may, sometimes, precede.

The symptoms of the inflamed part, very frequently, are; a considerable acute fixed pain in the head—*vertigo*—*tinnitus aurium*—the countenance altered—heat of the face, redness of the cheeks, or flushings—increased sensibility to sound and light—slight degree of alienation of the mental faculties; or, sometimes, the first symptom is a furious permanent *delirium*—: in a few days the pain of the head increases to a very great degree—the face appears red—the looks wild—constant *delirium*, and often frantiness—light and sound affect the patient considerably—sometimes effusions of tears—the eyes are red; frequently rubbed; are moved about with great velocity; have a splendid appearance—

K watching,

watching, or the apparent sleep suddenly interrupted—frequent tossing of the limbs and of the body; *carphologia*—the patient talks loudly; the voice is much altered—the respirations frequent—urine is said to be copious and yellowish, and transparent, or with a cloud in the upper part of it—tongue foul, white, or dry—the voluntary functions are much increased in strength—buffy blood—all the symptoms of the inflammatory fever in a high degree. In a few days, or a week's time, the symptoms begin to diminish and gradually disappear; or the diminution may be more sudden and termination more speedy by an increased secretion, excretion, effusion of blood, or eruption on the skin; or death may be occasioned by the violence of the symptoms; or this disorder may terminate in different diseases of the brain, and other parts, especially in suppuration of the brain, water in the head, swelling and inflamed glands.—See *Cælius Aurelianus, Lib. I, Cap. III.*

Affections of the mind, sight, hearing, pains of the head, *vertigo*, are apt to remain after this disease.

Dissections show preternatural redness and turgescence of the membranes of the brain—thickening of them—suppuration of the brain itself—watery fluid upon the surface or in the ventricles—gangrene?—extravasated blood?

Causes.

Causes. 1. *Predisposing.*; as far as known, the same as of the inflammatory fever.

2. *Occasional.* 1. Hot seasons, and weather, especially insolation. 2. Inebriation. 3. Vehement affections of the mind. 4. Certain *ingesta.* 5. Plethora. 6. Suppressed discharges. 7. Unknown causes. 8. *Metaptosis.* 9. Unknown states of the atmosphere.

Diagnosics. Must be distinguished from 1. Parenchymatous inflammation of the brain. 2. *Mania.* 3. *Melancholia.* 4. *Hysteria.* 5. Diseases in which the furious *delirium* is a symptom, but in which the inflammation of the membranes of the brain is not the original, or an essential part of the disease present.

Prognosis. Judgment may be formed from 1. the number, degree, and particular symptoms. 2. The occasional cause. 3. The duration 4. The kind and effects of remedies. 5. The appearance of critical discharges, eruptions, and inflammations.

Treatment: I. *Prevention;* by avoiding the occasional causes.

Removal, and palliation; the remedies may be referred to the following intentions:

A. To remove the occasional causes if they be present, and continue to operate, viz.

(a) *ingesta;* by, emetics*; and cathartics†.

* Formulæ, A, B, C.

† ——— D, E, F, G, Y.

(b) *plethora* ; by, V. S. ; purging ; low diet.

(c) suppressed discharges ; by restoring them, or similar evacuations, if practicable.

B. To remove, or avoid the external agents and circumstances which stimulate and increase or continue the disease, especially ; light ; darkness ; sound ; the exertions of the voluntary organs ; objects of sight ; temperature of the room ; the hair of the scalp ; the society of particular persons ; posture ; costiveness ; retention of urine.

C. To diminish the strength, irritability, and sensibility of the inflamed part ; and the inflammatory fever ; by

(a) Bleeding from the jugular vein ; the temporal arteries :—from the temples, and *occiput*, by scarifications and cupping, and leeches.

(b) Purgings*.

(c) Abstinence or food which contains but little nourishment.

(d) Sedatives, 1st. topically applied to the head—fomentations, and liniments, with decoctions of poppy heads, camomile, &c. spirit of wine, vinegar, wine, opium, camphire, warm oil, &c. : 2dly. more generally and externally ap-

* Formulæ, D, E, F, G, Y.

plied—warm femicupium, and pediluvium; bath of 82°; music; *murmur undarum*; engaging the attention of the mind; cold air: 3dly. internally opium*, acids, cold water, neutral salts, infusion of tea or coffee, æthers, dulcified acids, oil of wine.

(e) Counter-irritation; produced by blistering-plasters, and stimulating plasters and liniments applied to the shaved part of the head.

(f) Antimonial preparations.

D. To remove or palliate particular symptoms; see part I. G. p. 154.

Species II. Inflammation of the Membranes investing the Brain, occasioned by mechanical Causes; Phrenitis traumatica; Cephalitis traumatica; (Sagar.)

In this inflammation the parenchyma of the brain is usually affected as well as its membranes. It is occasioned by blows on the head, concussion, fracture of the *cranium*, compression.

The fever is only symptomatic. The progress and many symptoms are different from those of the former species. It requires surgical treatment.

A 3d species probably is the *erysipelas* in the membranes of the brain.

The *phrenitis* supervenes also and is a symp-

* Formulæ, O, P.

tom in continued fevers, *exanthemata*, *hydrophobia*.
(See Sagar, p. 625.)

Species III. Pleuritis; Pleurisy; pleuritic Fever.

The fever may begin and increase with the local affection, or it may precede or succeed the inflammation of the *pleura*. Different diseases may also terminate in the pleurisy.

Besides the symptoms of fever in general, and of the inflammatory fever in particular (p. 136, part I.) those of the inflamed part, oftentimes, are, an acute fixed pain in one part of the sides of the thorax, or back, increased by coughing, and inspiration, and relieved by expiration—difficult respiration—severe cough, frequently without expectoration—hard pulse—very buffy blood—either immediately, or in a day or two, generally inability to lie on the inflamed side, at other times on the opposite side, and sometimes on neither—the pain increases and shoots up to the clavicle, or to the spine—breathing less painful in an erect posture of the trunk, and in cold air—the cough grows moist—urine turbid or very red:—the febrile symptoms increase—heat actually increased—sweating—redness of the eyes or cheeks—pulse frequent, but otherwise various; at last intermitting—*delirium*—great thirst—dry and rough tongue—*orthopnea*—watching—all the symptoms much aggravated in the evening, or
night-

night-time — *subfultus tendinum* — cold sweats — ghastly countenance.

In three to seven or ten days the symptoms may begin to diminish, and disappear;—a remission may suddenly take place on the coming on of a copious easy expectoration; a hæmorrhage; diarrhæa; copious discharge of urine; sweating; erysipelas of the skin and other parts; eruption of the skin; sleep; craving of particular kinds of food, or drink;—death may be occasioned apparently by the violence of the symptoms;—the inflammation may extend to the *parenchyma* of the lungs, the intercostal muscles, the diaphragm, the *pericardium*, &c. that of the pleura continuing, or diminishing—a *metastasis*, perhaps, may happen—a different disease may supervene, and apparently carry off the pleurisy, especially *empyema* in the thorax; *vomicæ*; abscess between the intercostals; *hydrothorax*; *phlogosis*; and suppuration of conglobate glands, and other parts; gangrene of the pleura and lungs?; general adhesions of the lungs to the diaphragm, *pericardium*, sides of the thorax.

Perhaps the not recollecting the disposition of the pleurisy to extend to, and be carried off by inflammation of the lungs, and the imperfect and inaccurate histories of cases, may have been the occasion of the opinion that the distinction into pleurisy and peripneumony was erroneous.

Varieties

Varieties may be distinguished according to 1. the part of the *pleura* affected;—2. the kind of fever; 3. the manner of the attack;—4. the occasional cause;—5. the complication with inflammation of the neighbouring parts.

Dissections; show, inflammation and thickening of the *pleura* investing the lungs, lining the cavity of the thorax, of the pericardium, diaphragm, and mediastinum:—general and preternatural adhesions:—lungs inflamed, livid, heavy:—water in the cavity of the thorax and pericardium:—*empyema*:—*vomicæ*:—ulceration:—gangrene of the *pleura*:—pericardium, lungs, &c. incrustated with, apparently, coagulated matter:—enlargement or distention of the heart.

Causes.—I. *Predisposing*.—1. Certain ages. 2. Sanguine temperaments. 3. Plethoric habits. 4. Male sex. 5. Idiosyncrasies. 6. Habits weakened. 7. Constitutions previously affected. 8. Induced general irritability.

II. *Occasional*.—1. Exposure to cold. 2. Overheating the constitution. 3. Violent exercise. 4. Excess in drinking. 5. Certain states of the atmosphere. 6. Exciting passions. 7. Retained, suppressed, or neglected evacuations. 8. Other diseases. 9. Unknown causes.

III. *Proximate*; as in the whole of the species a principal morbid state is preternatural strength, motion, and irritability of the inflamed part,

part, besides the condition of the habit present in fever.

Diagnosis: The diseases liable to be mistaken for this; are, 1. Peripneumony. 2. Catarrhal cough. 3. *Pericarditis*. 4. Inflammation of the diaphragm. 5.—Intercostals. 6.—Liver. 7.—Spleen. 8. Spasmodic pains. 9. Worms. 10. Erysipelas of the pleura? 11. Other diseases of which inflammation or pains of the side are symptomatic. 12. Pains from *ingesta*.

Prognosis: founded on the consideration of, 1. the degree, number, and particular symptoms; see Aretæus, Lib. I. Chap. X. 2. the duration and remedies employed. 3. the occasional and predisposing causes. 4. the signs of supervening diseases.

Treatment:—I. *Prevention*, by avoiding, removing, or counteracting the remote causes.

II. *Cure*, by the remedies.

A. For the phrenitis, p. 69, and attention to most of the circumstances

B. Ibid. *Page 68*

C. By diminishing the inflammation of the pleura in particular, and fever in general; by, 1. General bleeding. 2. Topical bleeding from the side affected. 3. Purgings. 4. Proper food. 5. Sedatives externally to the part affected with pain. 6. Sedatives internally, p. 68 C. (d). 7. Counter-irritation; produced by blistering and stimulating plasters and liniments, to the part

L

of

of the thorax affected. 8. Antimonial preparations.

D. By increasing the secretion from the lungs, p. 20, 21, 4. 4th.

E. Particular symptoms to be treated;—
Part I. p. 154, G.

*Species IV. Pleurisy from external mechanical Agents;
Pleuritis traumatica.*

The pleura may be inflamed in consequence of contusions; wounds; fracture of ribs, strains, &c. in which cases the fever, when present, is symptomatic:—the progress; duration; many symptoms; and some parts of the treatment are different from those of the former species.

It is said that the *erysipelatous inflammation* affects the pleura; and in such cases the pleurisy differs in several respects from the two former species. The pain is observed to be less acute, but there is a sensation of great internal heat; unquenchable thirst; dry cough; very foul tongue; fever of the remitting kind.

The pleurisy also, which is evidently symptomatic; or supervenes to various diseases; should be distinguished.

*Species V. Inflammation and Fever of the Diaphragm,
&c. &c.*

The inflammation of the *mediastinum*, of the *pericardium*, and the diaphragm, probably occur, independently of the pleurisy, but their history is
not

not hitherto sufficiently investigated to be able to relate a full and accurate account of them.

*Species VI. Inflammation and Fever of the Liver;
Hepatitis membranacea.*

The topical affection may be preceded, begin with, or be succeeded by the febrile symptoms: or a different disease may precede.

The most frequent symptoms of the inflamed part are, an acute pain or tension and heat in the right hypochondrium, and sometimes in the neighbouring parts; increased by coughing, or on pressure, or by lying on the side—hardness or swelling of this region—dyspnæa, especially on lying on the left side—dry cough—pain generally of the right, but sometimes of the left shoulder, or clavicle, increased by coughing, and on inspiration—torpor sometimes of the right hand—sometimes *aurigo*—*anorexia*; eructations; nausea; vomiting—hiccough—costiveness often, purging sometimes—icteritious urine: horripilation or horror, and heat alternately; flushings of the cheeks—dry, black, or yellow tongue—elevation of the shoulders—the fever generally inflammatory, but also remitting, and perhaps also other fevers. It may continue, probably, generally longer than the pleurisy—extend to the membrane of the adjoining parts and the *parenchyma* of the liver—it may gradually diminish and disappear—or kill by the irritation—or terminate

*The fever
in Pleurisy
is applied
to the
Inflammation*

minate suddenly by an increased secretion or excretion, especially purging; by an eruption; hæmorrhage; inflammation on the skin; or on the rise of cravings—or other diseases may supervene, especially suppuration of the liver. It is very liable to produce adhesions to the peritonæum, stomach, intestines, diaphragm, &c.

This disorder varies according to 1. the part of the membrane affected; 2. the manner of the attack; 3. the remote causes.

Dissections show, adhesions of the liver to various parts—inflammatory appearances—thickening of the membrane covering the liver—enlargement of this viscus—abscesses—gangrene—schirrhus—inflammation of neighbouring parts, especially of the diaphragm—pus in the cavity of the abdomen—gangrene of the intestines.

Causes; perhaps the same as those of the pleuritic fever; p. 72.

Diagnosis; necessary to distinguish this malady from, 1. inflammation of other parts of the liver; 2. inflammations and irritations of other kinds, and of other parts and viscera of the abdomen, especially of the *peritonæum* investing the cavity; 3. pleuritic fever; 4. peripneumony; 5. inflammation of the diaphragm; 6. spasmodic pains; 7. inflammation of the muscles of the right hypochondrium.

Prognosis; founded on 1. the degree, number, and particular symptoms; 2. the duration and
reme-

remedies employed : 3. the signs of the inflammation extending to other parts ; of suppuration ; gangrene ? 4. the habit ; 5. the occasional cause ; 6. the appearance of critical discharges, or inflammations.

Treatment :—I. *Prevention*. On the same principle as for the pleurisy.

II. *Cure*. This will be readily inferred from that of the pleurisy. The particular treatment required when the disease extends to the parenchyma, and for suppuration, will be related under the *hepatitis parenchymatosa*.

Species VII. Hepatitis from mechanical Agents.

The fever is symptomatic. The inflammation may be occasioned by the irritation of biliary calculi ; blows ; bruises ; punctures ; wounds, &c.

The liver is perhaps liable to be affected by the erysipelatous inflammation. In various diseases the hepatitis may be symptomatic.

Species VIII. Inflammation and Fever of the Membrane of the Spleen. Splenitis membranacea.

Occurs perhaps frequently, but the history of it is little cultivated. Fever may precede, begin with, or succeed this inflammation. Probably, in many symptoms, resembles the pleurisy ; those observed are, acute pain in the region of the spleen ; tension of it ; pain increased on pressure ;
and

and on lying on the left, or sometimes right, side—dyspnæa—internal heat—pain of the left shoulder, mamma, or clavicle—intermitting pulse felt in the left wrist during inspiration—coldness of the extremities. Besides other disorders, it may terminate in thickening of the membrane affected, schirrhus, suppuration, and ascites. † It has been observed to supervene in the acute rheumatism.

With regard to the other parts of this subject, but little further is known, excepting what agrees with, or may be inferred from the account of the other species of the same genus.

This viscus may be the seat of inflammation from mechanical causes, and of the erysipelas.

Species IX. Inflammation and Fever of the Membrane of the Pancreas; Pancreatica.—Vogel.

Besides the febrile symptoms, it produces pain in the region of the lower part of the stomach, in the back, abdomen, or side—tension—swelling: the symptoms of the gastritis and enteritis are absent.

Species X. Inflammation and Fever of the Membrane of the Kidneys; Nephritic Fever; Nephritis membranacea.

The fever may precede, begin with, or succeed the symptoms of the inflamed part. It produces sometimes colicky pains, but generally a sharp

sharp pain in the region of one or both the kidneys; often shooting down, or occupying the tract of the ureters, to the bladder and testicles; pain increased on standing, walking, coughing, and lying on the opposite side affected; easier on lying on the affected side, and with the trunk inclined—urine excreted with pain, in small quantity, and often; *ardor urinæ*; frequent and vain attempts to pass this fluid; difficulty to retain it; ischuria—or nausea; vomiting; flatulency; eructations—cold sweats—syncope—costiveness—fœtid, pale, or high coloured, or bloody urine—cold sweats—delirium.

This disease may gradually diminish and disappear—may be carried off by a copious discharge of urine; by hæmorrhagy; and other increased excretions, among which is the hæmorrhoidal discharge—may terminate in other diseases of the viscus affected, especially in suppuration; schirrhus; gangrene?—may terminate in diseases, of different parts of the constitution.

Dissections have shown, perhaps, only the diseases in which the nephritis terminates.

Causes.—I. *Predisposing.*—1. Certain ages. 2. Female sex? 3. Those of the other diseases, in general, of this genus.

II. *Occasional.* Perhaps these are, as far as known, those of this genus in general.

Diagnosis: to be distinguished from, 1. Inflammation

mation of the substance of the kidneys. 2. Lum-
bago. 3. *Cystitis*. 4. *Splenitis*. 5. *Enteritis*.
6. Other abdominal inflammations.

Prognosis founded on, 1. the degree, number,
particular symptoms, and duration of the disease.
2. Age of the patient. 3. Habit. 4. Signs of
critical discharges, or *metaptosis*.

Treatment:—I. *Prevention*, by avoiding or coun-
teracting the remote causes.

II. *Cure*. The same remedies as
for the hepatitis, excepting blisters by cantha-
rides; and diuretics may be exhibited to promote
the natural cure.

*Species XI. Calculous nephritis; Inflammation of
the Kidneys in general from Calculi; Nephritis calcu-
losa.*

There may be no fever, but a symptomatic fe-
brile affection. The symptoms of the local af-
fection may come on gradually, and continue
longer, but are the same as in the former species:
there are also pain, retraction, and rotatory mo-
tion of the testicles; stupor of the thighs and legs;
excretion of sand-like concretions with the urine;
frequently bloody urine, and frequent inclination
to excrete it; *dysuria*; *ischuria*; restlessness; most
acute pain in the kidneys, extending to the right
hypochonder, and to the hypogastrium and thighs;
increased by coughing, sneezing, and exercise:
pain increased by lying on the affected side:—
costive-

costiveness, or purging; pulse quick, small, sometimes intermitting; delirium; watching; convulsions; symptomatic fever. One kidney may be symptomatically affected by the other; and the inflammation may extend to the ureters and other parts.

The symptoms oftentimes return by paroxysms:—they may gradually diminish and disappear; or more speedily on the excretion of concretions, or passage of them into the bladder:—suppuration; schirrhus; ulceration; gangrene; other diseases may supervene;—the violence of the symptoms may kill the patient.

Dissections, show inflammation of the membrane, and whole substance of the kidneys; gangrene; pus; calculi in the pelvis of the kidneys, or ureters.

Causes. The matter which concretes in the kidneys is probably formed in the stomach and intestines, and is principally a species of acid; but the circumstances of the constitution, which occasion its formation and concretion, are not well understood. The *nephritis calculosa* is often hereditary. Gouty habits are, especially, subject to this disease in the decline of life.

Prognostics, from 1, Habit, duration and frequency of the attacks. 2, The degree and number of the symptoms. 3, The signs of supervening diseases.

Diagnosics—the same as of the former species.

Treatment.—I. *Prevention*; by the long continued use of alkalies, absorbent earths, and aerated alkalies and earths—by exercise and gestation.

II. *Cure*; 1, By the treatment for the former species, excepting those of fever independent of inflammation, and inflammatory diathesis:—2. particular remedies for the excretion of calculi, and for preventing bad effects from them; viz.

Opium — semicupium — demulcents—sedative and emollient clysters.

Species XI. Inflammation of the Kidneys from mechanical Agents, Ulceration, Enlargement, Schirrhus, Adhesions, &c. Nephralgia.

The fever, when present, is symptomatic. The manner of attack, progress, and duration of the symptoms are, in several respects, different from the two former species.

The *occasional causes* are obvious, viz. wounds; contusions—pressure—strains—previous diseases.

The other parts of the subject, particularly the treatment, may be inferred from the two former species.

The nephritis is also symptomatic of the gout, rheumatism, *lumbago psodica*, various diseases of the abdominal viscera.

The membrane of the kidneys is, perhaps, liable to the erysipelas or erythema.

Although the kidneys be particularly exposed

to various irritations, the inflammation and fever of them is a rare occurrence.

Species XII. Inflammation and Fever of the peritoneal Membrane of the Uterus; Hysteritis Membranacea; Metritis.

The symptoms and existence of this inflammation, uncombined with that of the substance of the uterus, are not well ascertained; nor whether it belongs to the present, or former genus, or to both occasionally.

Among the most frequent symptoms are reckoned, besides the fever, pain in the region of the hypogastrium, increased by pressure; of the *os uteri* on pressure with the finger, as well as heat; pains extending to the neighbouring parts;—tension of the lower part of the belly;—swelling;—sense of weight in the region of the uterus;—costiveness or purging;—frequent inclination to excrete urine;—*dysuria*; *ischuria*;—pains of the clavicles, difficulty in breathing;—pains of the forehead and eyes;—increased flow of the lochia; and disappearance; with collapse of the breasts;—nausea, vomiting;—singultus;—fainting;—pulse variable;—restlessness;—*hydrophobia*;—anxiety;—spasms, *tetanus*, *catalepsis*;—suppressed lochia; abortion;—*delirium*, coma;—fever, often of a remitting form;—inflammation extending to the peritonæum of the cavity of the abdomen.

It may terminate gradually by a diminution of symptoms; or more speedily by an increased discharge or eruption; or in inflammation of the substance of the uterus; or in suppuration, schirrhous, gangrene, enlargement, dropsy, and in diseases in other parts; or in death by the violence of the symptoms, sometimes in seven or eight days.

Varieties may be distinguished according to the extent, and part of the membrane inflamed.

Dissections show, inflammatory appearances of the uterus—thickening of it—schirrhosity—adhesions—ulceration—abscess—gangrene—: watery fluid, and purulent matter with blood in the cavity of the abdomen;—apparent inflammation of the peritonæum lining the cavity of the abdomen.

Causes. Predisposing: — it affects every kind of habit, but, especially, 1. The impregnated uterus, or recently in that state. 2. Irritable habits. 3. A state induced by the depressing passions. 4.—by intemperance. 5. Weakened constitutions.

Occasional. 1. Those of the pleuritic fever, p. 72, particularly suppression of the lochial discharge; of the milk. 2. Injuries during parturition. 3. Abortion. 4. Infection?

Exciting: The act of parturition.

Diagnosis — distinctions between 1. *Enteritis*. 2. *Cystitis*. 3. *Peritonitis*. 4. Inflammation of other

other parts of the uterus. 5. Puerperal fevers independent of any primary considerable local inflammation. 6. Erysipelatous inflammation? 7. Abortion. 8. *Dysmenorrhœa*.

Prognosis depends on 1. the occasional, predisposing, and exciting causes: 2. the degree, number, and particular symptoms: 3. duration: 4. means of cure already employed: 5. appearance of spontaneous cure by other inflammations, or increased excretions.

Treatment. I. *Prevention*: by avoiding, or counteracting the remote causes.

II. *Cure*. I. The occasional causes must be removed.

II. The strength, irritability and sensibility of the inflamed part must be diminished; by (a) blood-letting general and topical: (b) purgatives: (c) clysters with opium: (d) sedatives and relaxants externally—warm semicupium; fomentations of decoction of poppy-heads, &c. with spirit of wine, vinegar, camphire, &c.; liniments with opium, camphire, spirit of wine, &c.: (e) inflaming the skin over the affected part—blistering plasters?; rubefacient plasters, liniments, and fomentations: (f) sedatives internally; opium; dulcified acids; æthers; oil of wine; acids; neutral salts; infusions of tea, coffee, &c.

III. The fever to be treated by antimonial
prepara-

preparations*. Is the Peruvian bark, and in what cases, proper for the fever?

IV. Salutary discharges, especially the diarrhæa, and sweating to be promoted:

V. Irritations from extraneous substances and circumstances must be removed; see Part I. p. 151, B; also particularly pressure on the region of the uterus, and retained urine.

VI. Particular symptoms are to be treated; see Part I, p. 154, G. especially the ischuria, dysuria, constipation.

Species XIII. Inflammation of the peritoneal Membrane of the Uterus occasioned by external mechanical Agents; Metritis traumatica.

This inflammation may be produced, and is different in its rise, progress, duration, and requires a different treatment from the former species.

Perhaps the uterus may be affected with the erysipelatous inflammation; and also be symptomatic of various disorders in different parts of the constitution.

Species XIV. Inflammation and Fever of the Omentum; Epiploitis; Omentitis.

This disorder has hitherto not been much attended to; and its history is very little known.

* Formulæ, aa, bb, cc, dd.

It has, perhaps, generally been confounded with the inflammation of the liver, the pain being in the epigastric, and hypochondriac regions.

The symptoms observed are, pain in the above regions, increased on pressure; tumor of the omentum; moderate costiveness; rather frequent respiration; pulse a little increased in frequency and rather hard; little thirst; urine yellow; a very little failure of appetite; sleep not much disturbed. This disorder is supposed to be present also from the absence of the symptoms of other abdominal inflammations.

The other parts of this subject can only be inferred from the observations concerning the diseases of this genus in general.

Species XIV. Peritonitis; Inflammation and Fever of the Peritonæum.

The pain extends over the abdomen in general, and is increased when the body is in an erect posture; otherwise, as far as known, it in most respects agrees with the last species.

O R D E R III.

Parenchymatous Inflammations.

THE inflammations of the parenchymatous parts are characterised by the pain being in most cases not acute but a dull, heavy sensation—the heat not being considerable—their being very apt to terminate in suppuration—the system in general not being affected considerably with febrile symptoms—the tongue being very foul but generally moist,

Species I. Parenchymatous Phrenitis; inflammation and Fever of the Substance of the Brain; Cephalitis.

Sometimes headach, disturbed sleep, anxiety, solitude, dejection of spirits, funk, pale countenance precede. The fever may be antecedent, appear at the same time with, or, apparently, come on after, the local affection. A different disease may precede.

The symptoms of the inflamed part are, a deep seated, continual, but less acute pain of the head, than in the inflammation of the dura mater—eyes red, often full and watery—stupor—somnia—loss of memory—reaching—vomiting—blood very buffy—. Delirium often of the
mild

mild kind, at others violent, and sometimes somnolent — *carphologia* — sighing — hiccough — difficult, or sonorous respiration — pain of the neck and spine — urine very turbid; sometimes suppression — thirst sometimes great, at others none; tongue very foul — carotid arteries frequently do not throb — pulse not hard but frequent — *hemiplegia* — voluntary functions not increased but often diminished in strength — various symptoms of the *phrenitis membranacea* — a fiery kind of red spot in the internal angle of each eye — watching. In a few days may come on dilatation of the pupils; blindness — slow, or intermitting and irregular pulse — *coma vigil*; *agrypnia*; or sopor — *subfultus tendinum* — cold sweats — convulsions — death: or the symptoms may gradually diminish, and in particular the internal senses again perform their functions as in health: or the disease may be more suddenly carried off by a hæmorrhagy, increased excretion, external inflammation, and eruption: or other diseases may supervene, especially suppuration of the brain, and hydrocephalus internus. The fever may be other kinds, as well as the inflammatory.

Varieties may be 1. according to the occasional cause; 2.—the conjunction with membranous phrenitis; 3.—the part of the brain affected. One of them may be epidemic.

Dissections have shown, inflammatory appearances, or distention of the vessels of the brain

and its membranes—purulent matter in the basis of the brain immediately in contact with nerves at their exit; between the different lobes, and in the substance of the brain; in the ventricles; in greenish tumors of the size of a hazle nut or walnut—watery fluid in the ventricles, and between the membranes and brain—gangrene—extravasated blood?.

Causes. I. *Predisposing.* 1. Particular temperaments. 2. Plethoric habits. 3. Certain ages. 4. Weakened habits. 5. Constitutions subject to inflammation.

II. *Occasional.* 1. Those of the phrenitis membranacea. 2. Miasmata.

Diagnosis: to be distinguished from 1. Delirium of continued fevers. 2. Phrenitis membranacea. 3. Apoplexy. 4. *Cephalalgia*. 5. Water in the head. 6. Mania.

Prognosis founded on 1. signs of suppuration and water in the brain. 2. The considerations, p. 67, l. 16.

Prevention: by avoiding, or counteracting the remote causes.

Cure: by the same medicines and means as for the phrenitis membranacea, p. 67, 68, 69.

Species II. Cephalitis traumatica; Inflammation of the Substance of the Brain from external mechanical Agents.

In this species the meninges are, perhaps, necessarily

cessarily inflamed, as well as the parenchyma. It arises from concussions, blows, fracture of the cranium, pressure, &c. and the fever is symptomatic. The progress and duration is various according to the injury. It requires frequently chirurgical treatment.

The erysipelas may, perhaps, affect the brain itself: and the inflammation of this part may be symptomatic of various diseases.

Species III. Peripneumonia; Peripneumony; Peripneumonic Fever.

As in other species of this genus, the fever may apparently precede, begin with, or follow the inflammation; or a different disease may disappear on the attack of this species.

The symptoms of the inflamed part, frequently, are a constant difficulty, shortness, often of quickness, and heat in respiration; increased on inspiration; often intolerable in a recumbent posture, and warm air—a more or less painful sensation of weight, and oppression, or of suffocation, particularly under the sternum—cough—expectoration; often bloody—heat of the breast—pulse frequent, or quick, but generally not hard—blood buffy—heat of the system in general not considerable—tongue very foul, but often moist—frequently very turbid urine—considerable anxiety—restlessness. In a few days, or a week, if the disorder increases, the above symp-

toms grow more severe; pains are felt between the shoulders, of the back and sides—sense of suffocation—sputum changes its appearance, and frequent attempts to expectorate—sibilous respiration; orthopnœa—veins of the neck swell; the cheeks grow red; face swelled, and of a dark red colour; eyes dull; various appearances of the eyes—tongue red and sometimes swelled; dry, parched—pulse irregular; intermitting; small—partial sweats—watching; or groaning and turbulent sleep—alienation of mind. The disease may extend to the pleura. In a few days, or about a week, the symptoms may begin gradually to remit, and disappear, but generally with an increased expectoration—; they may go off more suddenly on the appearance of an increased excretion, particularly from the lungs, hæmorrhagy, external inflammation, eruption, craving for food or drink, or after liberal evacuations, by bleeding and purging—; they may be carried off by inflammation of the pleura, and other parts of the constitution, as well as by various other diseases—; the peripneumony may terminate in vomicæ; empyema; hydrothorax; universal adhesions of the pleura of the lungs—; death may be occasioned by the irritation from the difficulty of respiration, or from the violence of the symptoms in general.

The fever is generally the inflammatory, but

it may be other kinds. This disorder has been observed to be epidemic.

Varieties may be ranged, 1. according to the degree of the symptoms of fever and inflammation, and quantity of expectoration into peripneumonia vera, et notha. 2.—The parts of the lungs affected. 3.—The conjunction with inflammation of the pleura and bronchia. 4.—The kind of fever.

Dissections; show the lungs to be red, black, specifically heavier than water, turgid with blood and serum—vomicæ—thickening of the pleura; adhesions—empyema—watery fluid in the cavity of thorax; and in the pericardium—the other appearances mentioned p. 72, l. 6.

Causes. I. *Predisposing*. 1. Perhaps the same as to the pleurisy. 2. Previous diseases of the lungs.

II. *Occasional*: those of the pleurisy.

Prognosis; founded on, 1. the degree, number, and kind of symptoms. 2. The duration. 3. The remedies employed, and their effects. 4. The symptoms of critical discharges, or other supervening complaints. 5. The habit. 6. The kind of fever.

Diagnosis to be distinguished from 1. Pleurisy. 2. Catarrh. 3. Pulmonary consumption. 4. Hydrothorax. 5. Organic diseases in the chest.

Treatment: I. *Prevention*; by avoiding, or counteracting the remote causes.

II. *Cure*.

II. *Cure.* The same as for the pleurisy. The natural cure by expectoration is especially to be promoted.

Species IV. Peripneumony from external mechanical Injuries; Peripneumonia traumatica.

May be produced by a fall, blow, puncture, substances taken into the lungs during inspiration, and other mechanical agents.

The erysipelas may, perhaps, affect the lungs.

This inflammation may be symptomatic of other diseases.

Species V. Inflammation of the Parenchyma of the Liver; Hepatitis parenchymatosa.

It may be preceded, attended, or followed, as in other species of this genus, by a febrile affection. A chronic disorder, or leucophlegmatia, connected with the hepatitis, may, perhaps, be present before the attack of this disease.

An obtuse pain is felt in the right hypochonder, and near the epigastrium, or back, if the parts near the membrane of the viscus be affected, but if the inflammation be in the interior parts only, there is no pain, but a sensation of weight, or uneasiness in the region of the liver; also sense of oppression and stricture of the præcordia; pain produced or increased of these parts, as well as of the shoulders and clavicles, by external pressure, coughing, lying on the left or sometimes

sometimes right side, or a deep inspiration—sometimes hardness and swelling of the right hypochondriac region—dry cough; induced by the circumstances which increase, or excite pain.—Dyspnæa, in the advanced state of the disease—failure of appetite; nausea—costiveness; sometimes purging—elevation of the shoulders—sallow countenance; leaden hue of the skin; jaundice—pulse soft, and sometimes not increased in frequency—tongue moist, and foul—thirst and heat moderate—singultus—vomiting—horripilation at uncertain times—various symptoms of the hepatitis membranosa—the inflammation may extend to the membrane of the liver and parts adjoining.

The patient may be killed, sometimes in seven to eleven days, by the symptoms in general:—the disorder may gradually diminish and disappear; or more speedily by an increased excretion or eruption—it may terminate in suppuration, schirrhosity, adhesions of the liver; in ascites.

Varieties may be distinguished according to the part of the viscus affected; 2. the kind of fever; 3. the disposition to enlargement or suppuration; 4. the conjunction with inflammation of the membrane; 5. the previous health; 6. the occasional cause; especially climate.

Dissections; have shown the appearances described in the membranous hepatitis; especially suppuration. 2. Enlargement, without disease,
of

of the liver, often so as to occupy the epigastric, and umbilical region.

Causes; I. *Predisposing*. 1. Especially occurs in adults. 2. In sanguine temperaments. 3. Probably certain states induced by hot climates.

II. *Occasional*. 1. Perhaps all those of the *hepatitis membranosa*. 2. Miasmata, and infection? 3. Exposure to cold winds during the vernal, and winter months in the West Indies. 4. Excess in drinking spirits. 5. Inflammation of the membrane covering the liver. 6. Weakness, induced especially in hot climates.

Diagnosis: this disorder may be confounded with 1. schirrhous liver. 2. Hydatids tumefying this viscus. 3. Enlarged glands of the mesentery. 4. Enlargement of various membranes, and viscera of the abdomen. 5. Membranous hepatitis. 6. Pain from calculi. 7. Various other diseases, producing pain, in the thorax and abdomen.

Prognosis; founded on, 1. the kind of fever: 2. the remote causes: 3. the previous health: 4. symptoms of enlargement, or abscesses in the liver: 5. the remedies employed, and their effects; particularly of mercury and V. S.: 6. the degree, number, and particular symptoms.

Treatment:—I. *Prevention* depends on preventing, avoiding, and removing, the remote causes.

II. *Cure*. The remedies of the *hepatitis membranacea*, p. 77, must be here employed; and bleeding in some kinds of the disease

ease to a very considerable degree ; also mercury to produce foreness of the gums, or salivation.

Species VI. Inflammation of the Parenchyma of the Liver from external mechanical Agents, and the Irritation of Calculi.

In this species the fever is symptomatic, and not essential ; in many respects the progress, duration, symptoms, issue, and treatment, are different from the former disease.

The inflammation of this part may be symptomatic of different diseases, especially of the liver itself, viz. of schirrus, adhesions, &c.

The fever and inflammation of the substance of the *spleen, pancreas, kidneys, uterus* ; also of the *heart, and intestines*, occur ; but the history of them is very imperfect and inaccurate, so that it will be unnecessary to treat particularly of them. The symptoms of this *order*, of course, are present ; and the seat of them, as well as other symptoms, will be readily inferred from the situation, structure, and function of the several parts affected.

O R D E R IV.

*Inflammation of Muscles, Cellular Membrane, Glands,
Bones.*

G E N U S I.

*Inflammations principally in the Cellular Membrane,
immediately under the Skin.*

THE symptoms in general, are; a hard, circumscribed, often prominent, spherical tumor; while suppurating, it is conical,—of a dark red or livid colour, which does not disappear on pressure: a throbbing pain: the part feels hot: the inflammation is not apt to spread; the skin surrounding it is often inflamed. They terminate in resolution; suppuration; ulcer; cancer; gangrene; schirrus.

The species of this genus are principally objects of surgical treatment.

G E N U S II.

Inflammation of muscular Fibres, or of cellular Membrane, not originally, or not at all, affecting the Skin, and which frequently terminate in Suppuration.

The symptoms are, pain, deeply seated, often neither throbbing nor acute, even when terminating

nating in suppuration: no tumor, or a moderately large and irregular or diffused swelling, not circumscribed, but occupying, perhaps, a great part of a limb: duration may be many months, or perhaps years: during suppuration it often produces hectic fever: when suppuration has begun, it is very apt to extend to the parts in contact between the original part inflamed and the skin, or a cavity communicating with the external air: the fever is, perhaps, always symptomatic, and not essential: the occasional cause cannot be traced; excepting, perhaps, sometimes, external injuries.

This inflammation may take place among the muscles in any part of the constitution, and as many species might be reckoned as there are different situations. The present subject has been, however, but little cultivated, and the particular seat has been often known only by the issue of the case. This inflammation has been observed of the cellular membrane and muscles 1.—between ribs and within the thorax: 2.—of the anterior part of the abdomen: 3.—near the articulation of the thigh with the *ischium*; or on the outside of the pelvis: 4.—of the loins; and especially between the psoæ muscles and the peritonæum: 5.—on the thigh, and leg.

In the *first* cases the symptoms may be those of the spurious pleurisy; and sometimes of the ca-

tarrhal cough. They may continue and gradually increase for several years; and terminate in abscesses, producing tumors which open externally on the thorax; the suppuration between these muscles may extend among those of the abdomen, and the pus discharge itself externally; or the matter may destroy the muscles and membranes, and flow in the cavity of the thorax, or abdomen.

It has been produced by the pleurisy; by contusions, but most frequently by no evident cause.

In the *second* cases, the inflammation produces pain and other symptoms; but the nature of the disease has not, in general, been apprehended till matter was formed and had extended considerably among these muscles, terminating in a tumor which burst externally, and great quantities of pus were discharged; or destroying the surrounding muscles and membranes, the abscess opened into the cavity of the abdomen. This disease has been observed to succeed a tertian.

Many of the *third* set of cases are inflammation among the anterior layer of muscles, and called, *ischias*; others are seated among the muscles on the posterior and outside of the pelvis, and have no particular denomination, excepting when they are confounded with the rheumatism, &c. The suppuration produced by these inflammations, may extend under muscles down into the thigh, and then form a tumor that bursting discharges the

the

the matter externally ; or it may extend and open externally in the hypogastrium ; or make the same progress and exit of pus in the posterior side of the pelvis ; or the inflammation may extend and the matter make its way into the cavity of the abdomen, and down into the perinæum ; or adhesions being formed between abdominal viscera and the peritoneum in the pelvis, the suppuration extending, the purulent matter is discharged into the intestines. Caries of the os sacrum, and ischium, are very commonly occasioned by these cases. For the most part they come on without any observable evident cause ; they are of very long duration ; and the pain is permanent. A fever, sometimes considerable, is present, at other times there is no such affection. A few days after the aperture of the external tumor, frequently the strength fails rapidly ; great anxiety comes on, the pulse grows remarkably quick, a high degree of symptomatic fever, prostration of appetite, great thirst, watching ; the aperture enlarges, fœtid ichorose matter is discharged ; and in ten days, or about a fortnight, the patient dies.

Some of these cases have begun with a pain in the middle of the thigh only, and in a month's time removed to the hip.

In the *fourth set* of cases the inflammation may be either under the psoæ muscles behind the peritonæum, or be more superficially seated ; the
matter

matter formed may be discharged into the cavity of the abdomen; by means of adhesions, into the intestines, urinary bladder, uterus; externally in the loins; or, the inflammation and supuration extending, the pus may make its way into the cavity of the pelvis into the muscles of the hypogastric and iliac regions, posterior and outside of the pelvis, the perinæum, the muscles on the thigh: and from any of these parts the disease may destroy muscles and membranes, form a tumor, and afford a passage externally for the pus; often producing caries of the bones, and erosions of the large blood-vessels of the pelvis; sometimes paralysis of the lower extremities. See *Pearson's Surgery*. The discharge in a few cases has continued for several years, and the patient recovered.

The symptoms are such as might be inferred from the function of the muscles affected. The urinary organs especially, and also the intestines, and other abdominal viscera, may be symptomatically affected. A febrile affection is not always present, excepting when the disease is very far advanced. No occasional cause is in general observed. Scrophula has been alleged to be the cause, but, apparently, from hypothesis only.

These cases have been confounded with the rheumatic lumbago; spasmodic pains; nephritis; *hernia*; aneurysm; hæmorrhoids, and various diseases of the abdominal viscera, and of the hip
and

and thigh. They are generally fatal, excepting when the inflammation is more superficial than the psoæ muscles.

The *fifth* cases also occur—those of the leg are often of shorter duration, and not fatal. They have been preceded by pains of the knees.

In all these diseases the great object in the treatment should be to prevent, as early as possible, the termination in abscess; and if pus be already formed, to promote its absorption. With these views blood-letting, general and topical, very liberally; frequent purging; blistering plasters constantly discharging; avoiding the irritation of exercise and posture; low, or at least temperate, diet; perhaps a change of air, and pure air; are the most efficacious remedies. Setons, and caustics applied over the parts affected early in these disorders, have sometimes apparently cured the inflammation, and even carried off the matter of the abscess. The small-pox has supervened in these diseases when an abscess had already been formed, but it did not seem to have any power of curing them.

The abscess in these cases requires chirurgical treatment. *Vide Principles of Surgery, by J. Pearson, p. 102, 8vo. 1788.*

G E N U S III.

Inflammations of membranous, or cellular Parts, that rarely terminate in Suppuration.

The species of this genus often produce livid redness of the skin; soreness of it on being touched; sometimes a large diffused swelling; the fever is not of the hectic kind, but inflammatory.

Species I. Αῤθρίτις; Rheumatismus acutus; acute Rheumatism; rheumatic Fever.

Very frequently a fever of the inflammatory kind is evidently present in this disease.

The febrile disorder, and local affections, generally begin together; at other times the fever apparently comes on after, or precedes, the rheumatic pains. A different disorder may go off on the appearance of the rheumatism.

Symptoms of the topical disorder are, a gnawing pain in one, or several parts, referred to the muscles or joints; most frequently, of the larger joints of the limbs—diminution, or inability to move the parts affected—stiffness—sometimes contractions—soreness; or increased pain on pressure and motion—heat—dryness of the skin. In a few days, and sometimes a few hours, pains seize fresh parts, the former then soon disappearing, or disappearing previously; or they continue

continue, and according to the number of joints affected, the patient is deprived of the use of the limbs—the pains are exasperated at uncertain times; most frequently in the night-time—the urine exhibits various appearances—the sensorium is not affected; no depressing passions—stomach very little affected—propensity to sweating—costiveness—blood like that in the pleuritic fever. In the course of a few days, or sooner, swelling of the joints affected often appear, with redness; which may remain, although the pains diminish and other joints be affected: sometimes the pains increase after the swellings take place.

The pain may first attack any one large joint; then diminish or go off a little before, on, or soon after, it affects a different joint; disappear in this on its affecting a third; and in this manner the pain may successively occupy the shoulders, elbows, wrists, hips, knees, ancles, and feet; in the space of about two or three weeks; during which, profuse sweatings have taken place; and then go off spontaneously. Or there may be an affection of several joints at the same time, which may go off without any other parts being seized with these pains. One joint only, usually the knee, or foot, may be the seat of the pain and swelling. There may be no swelling during any part of the disease. The same joints may be affected twice or more during the same illness. If the patient be young, and the habit otherwise

P healthy,

healthy, the disorder will in most cases run its course and terminate in health, in the space of a fortnight, three weeks, or a month; provided it be not improperly treated. It generally goes off on sweating spontaneously, or produced by art; frequently without any increased secretion; sometimes by inflammations of a different kind, arising in other parts; or by other diseases, especially the chronic rheumatism. It may perhaps occasion death by the violence of the inflammation and fever, delirium supervening;—by the super-vention of the affection of vital parts;—by suppuration in the joints. It may go off and leave stiffness and immobility of the parts affected; as well as swelling and distortion.

In aged constitutions, in gouty, infirm habits, and in those who have suffered by repeated attacks of this disease, the pains are more general, affect especially the back and whole limbs, the symptoms are not so severe, but their duration often for several months.

It is apt to recur in certain constitutions.

Dissections: have been said to exhibit only the appearances of inflammation of the brain, lungs, or other vital parts from *metastasis*; but I have found suppuration in the joints and thickening of the ligaments, and cellular membrane. It is probable that many fatal cases have been erroneously ascribed to the inflammation affecting vital parts,

parts, the examination of the joints affected being neglected.

Causes; I. *Predisposing*. 1. Ages; from puberty to the decline of life. 2. Plethora?. 3. Sanguine temperament? 4. Weakness. 5. Irritability natural, or induced? 6. Certain unknown states of the constitution. 7. Habits previously affected with the same disease. 8. Constitutions previously exposed to cold climates and weather.

II. *Occasional*. 1. Exposure suddenly of a part of the body to cold air. 2. Cold from moisture. 3. Sudden vicissitudes of weather. 4. Other diseases. 5. In general, unknown occasional causes.

III. *Exciting*. 1. Spring. 2. Autumn.

Diagnosics to distinguish this disease from 1. The gout. 2. Various painful arthritic diseases called the chronic rheumatism. 3. Diseases of Gen. II. p. 98. 4. Spasmodic pains. 5. Pains in continued fevers. 6. Symptomatic pains. 7. Venereal pains. 8. Nephritis.

Prognostics: from the age of the patient—his habit—frequency of the attacks—degree and number of joints affected—symptoms of affection of the vital parts—previous treatment, and effects.

Treatment:—I. *Prevention*; by removing, avoiding or counteracting the remote causes,

II. *Cure.* The rules may be, 1. to diminish the inflammatory fever; when it is violent, and likely to increase, or continue the affection of the joints; especially in strong, young, and plethoric habits: by general bleeding—purgings*—low diet. Repeated bleeding is very rarely necessary, and it has produced considerable mischief.—2. To remove the painful affections of the joints, by (a) SWEATING†, with *opium*—Dover's powder—mixture of opium and antimonial preparations—mixture of opium and ipecacuanha—mixture of opium and white hellebore—antimonials—ipecacuanha—volatile alkali—neutral salts—warm watery liquids. (b) TOPICAL BLEEDING,—leeches; scarification and cupping. (c) INFLAMING THE SKIN OF THE PARTS AFFECTED;—blistering plasters; rubefacient plasters; volatile liniment. (d) Vapor-bath?; warm bath?; fomentations? cataplasms? (e) Peruvian-bark? (f) Mercury? 3. To remove and avoid all irritations; in the first passage; from *ingesta*—from posture and exercise—from the temperature of the air—from ligatures;—the bed clothes, and clothing.

Species II. The Gout; Arthritis; Podagra.

It is a disorder of the whole habit, and parti-

* Formulæ, D, E, F, G.

† ——— hh, ii, kk, ll, aaa, H, I, K, P, Q.

cularly a painful affection of the joints, which recurs by paroxysms.

Though the seat of the local affection be only in one, or both *feet*, in those cases which are unequivocally the gout, and which are called the *regular gout*; yet, frequently, also, other parts are affected, and these instances are named the *irregular*, and *anomalous gout*.

The paroxysm comes on sometimes suddenly and without any prelude, in seemingly good health; at other times precede, a disorder of the stomach, occasioning failure of appetite for food, *dyspepsia*, acid and nidorose eructations, flatulency; constipation; swelling of the abdomen; a general disorder—languor, lassitude, sensibility to cold, sensation of cold water trickling down the thighs, torpor, aversion to exercise, sensation of general weight: frequently the day before the fit a voracious appetite, and swelling of the veins of the leg, or *varices*.

The patient is attacked in the night-time; he is awaked, frequently, about two in the morning by a stretching, lacerating, compressing pain of part of the foot; frequently of the joints of the great toe, at other times of the other toes, tarsal bones, heel, or ankle; the pain also resembles that from a dislocation, and with a sensation of cold water poured on the part affected. Horripilation, horror, or rigor followed by heat and other febrile symptoms succeed. The pain in many instances

instances soon remits, but again increases and extends to the whole of the joints of the metatarsus and tarsus; resembling gnawing of the tendons and ligaments by the teeth of a dog, or pain from a fractured bone, cutting instrument, hot iron—the foot cannot now bear pressure with the hand, or even bed-clothes, nor shaking of the bed—the foot affected is perpetually moved, and its situation changed; it feels as if a considerable weight was appended, or pressing upon it—the night is passed in a most restless manner—. Frequently there is no remission till the morning following, or 24 hours, when the sufferer, rather suddenly, is relieved, falls asleep—moisture of the skin comes on, and he awakes with a swelling and redness of the part affected. During the following and several days, the pain is not entirely absent, and in the evening it recurs with more or less severity, and remits towards morning.

In a few days, frequently, the other foot begins to be affected in the same manner; the pain, for the most part, ceasing in that first seized, but sometimes it harrasses the patient in both feet at the same time.

Relief immediately succeeds the swelling and inflammation of the skin.

In the above manner the pains may recur in the evenings, and abate in the morning and day-time

time for about a fortnight, and then go off, provided the patient be young, and of a tolerably strong habit; but in subjects advanced in life, and weak habits, it may continue two months, or even during a whole year; perhaps the warmest seasons excepted.

The inflammation and pain go off and leave a sense of itching; and desquamation of the cuticle of the feet takes place. Urine in small quantity and high coloured, but in the decline copious and turbid. Sweating said to be of acid matter. Costiveness for most part during the first fortnight.

It has been observed that the mind becomes so irritable in the fit, that the paroxysms may be called those of anger, grief, fear, and other passions.

During the fit there is sometimes an uncommon flow of spirits and clearness of understanding. Lameness remains after it.

The pains are more severe, and of shorter duration, in strong and younger habits; and less severe, and of longer duration, in those who are in the decline of life, and weakened by repeated attacks of this disease.

“ *Dolores semper ea ratione decrescunt qua vires.*”

The exacerbations in the evenings and night, have been called *paroxysms*; and the series of these during one illness, have been termed a *fit*.

The

The disorder may gradually go off;—or it may prove fatal by the violence of the symptoms, but usually, the pain and swelling suddenly disappearing, by falling upon the viscera; perhaps by suppuration in the joints;—or it may be cured more speedily, and suddenly, by an increased excretion, or inflammation of other parts.

There is perfect health after the fit, and frequently removal of former complaints. The interval between the fits is oftentimes in proportion to the violence of the pain;—generally a year, but sometimes two or more:—they return for the most part in the spring and autumn, especially in cold, wet, stormy seasons, but at other times also if the remote causes be present.

The fits may disappear at the age of about fifty, especially if they come on early. The habit may be debilitated, and then this disease affects the knees, elbows, wrists, and hands, and other joints, instead of the feet; in these cases it is called the *irregular gout*. The fits then are less severe, but, often, longer than in the *podagra*; the intervals are shorter; the swelling less; and the constitution and *primæ viæ* more disordered both before and during the paroxysm. Sometimes there are slight attacks of it which do not confine the patient, but go off naturally, or by exercise, proper evacuations, and temperate living. It may terminate in other inflammations, and

and different diseases of the joints affected, as well as in different parts. Violent emotions of mind have carried off a fit.

In naturally feeble habits, or broken by repeated attacks of the podagra or other diseases, the gout appears, with various symptoms, to affect other parts instead of the joints, viz. the stomach, intestines, urinary organs, the head, lungs, &c. thereby disordering any function of the constitution, and producing apoplexy, palsy, diarrhæa, enteritis, ischuria, dysuria, &c. These sometimes alternate with swellings and pains of the joints; at other times there is no such alternation, but both are present together. By external applications, and other improper treatment, the disorder suddenly removes from the joints, and affects the internal parts.

The gout in the stomach, and perhaps other parts, is of two kinds, viz. attended with *inflammation*, or, seemingly, merely *spasmodic*. These forms of the gout are called the *anomalous*, or *wandering gout*, and are too numerous to describe.

Repeated attacks, for many years, produce lameness; rigid joints; constant swelling; distortions; *tophi*; probably *calculi* in the urinary passages; and diseases of ligaments and bones.

Varieties may be distinguished according to 1.—the particular joints affected: 2.—other parts affected, and the presence of inflammation, spasm, or weakness: 3.—the number of fits, and their

effects on the habit: 4.—the remote causes: Hence the *Regular*,—*Irregular*,—*Atonic*,—*Spasmodic*,—*Anomalous*,—*Retrograde*,—*Wandering Gout*; &c. There appears to be no foundation on facts, for the varieties of this disease called *rheumatic*, and *scorbutic gout*; nor are any determinate ideas annexed to these terms. Some physicians allege that the gout and rheumatism may be present at the same time, in the same habit.

Dissections have shown 1. inflammatory appearances of the viscera: 2. concretions near the joints: 3. diseased states of the membranes, ligaments, tendons, and bones.

Causes. I. *Predisposing.* 1. Hereditary disposition. 2. Certain ages—meridian or decline of life. 3. Certain temperaments—persons of particular mental endowments—of particular proportions and make of their bodies: 4. Male sex: 5. Irritability of habit.

II. *Occasional.* 1. Excess in eating. 2. Intemperance in drinking vinous liquors. 3. Indolence. 4. Excess in venery. 5. Immoderate study. 6. Any vehement affections of the mind. 7. Suppressed evacuations. 8. Exposure to cold. 9. External injuries of the feet, viz. strains, blows, strait shoes, excessive walking. 10. Contagion?

III. *Exciting.* 1. The spring and autumnal seasons. 2. Ingesta producing indigestion and acidity, and other disorders of the stomach.
3. Any

3. Any sudden changes of diet. 4. Bathing?
5. Drinking certain mineral waters?

Diagnosis. It is liable to be confounded with
1. the rheumatism: 2. the diseases under Genus II.
O. IV. p. 98: 3. the hysteria: 4. pain in
continued fevers: 5. the anomalous gout is lia-
ble to be overlooked in many diseases of every
part of the constitution.

Prognosis: founded on the consideration of
1. the form or seat of the disease: 2. the strength
in general: 3. the former attacks: 4. the num-
ber and violence of the symptoms: 5. the signs
of retrocession: 6. the remote causes, particu-
larly the hereditary predisposition. *Age of the Patient*

Treatment.—I. *Prevention*; when advisable, by
avoiding, removing, or counteracting, as far as
practicable, the remote causes.

The treatment varies according to the *kind* of
gout;

I. With a view to *the regular gout*, the princi-
pal measures are, (a) temperance in the use of
vinous liquors, or abstaining from them: (b)
plain dressed food, chiefly of milk and vegeta-
ble matter: (c) exercise and labour; more or
less constant, and severe: (d) travelling; agree-
able society; and amusements: (e) V. S.; purg-
ing; discharges by setons, issues: (f) guarding,
by proper cloathing, against the vicissitudes of
the weather, and cold seasons: (g) temperate or
warm climate: (h) removing indigestion, and
acidity,

acidity, by especially emetics; purgatives; a course of alkaline medicines; food of easy digestion:

II. In order to the prevention of *the irregular gout*; the regimen and medicines are principally, (a) strengtheners of the organs of digestion, and constitution in general, viz. emetics* of vitriol of zinc and of bitters; preparations† of iron and zinc; bitter laxatives‡; stimulants moderately used; tepid bathing; warm bathing; cold bathing; mineral waters; change of air; pure air; friction; nourishing and moderately stimulating food; moderate use of wine and spirits: (b) the medicines and regimen for preventing the regular gout above-mentioned, excepting (e); and those of p. 115, marked at (a) and (b) are not necessary, and sometimes improper:

III. With views of preventing *the anomalous gout*: the same measures are proper as for the prevention of the irregular gout, and perhaps stimulating and strengthening the stomach will be here particularly appropriated—the effects of the Portland-powder, and other bitters, to be considered.

II. Cure and Palliation.

I. In the regular gout.

A. All irritations from extraneous and other circumstances must be avoided, or removed, particularly from (a) the

* Formulæ, nnn, ooo.

† ——— ppp, qqq.

‡ ——— rrr.

weight of the bed-clothes; (b) motion of the part affected; (c) the state of the stomach and intestines; by emetics*, and laxatives†, or clysters‡; (d) the food and drink; (e) temperature of the air.

B. The inflammatory fever and local inflammation may be diminished if they be violent and dangerous; regard being paid to the age, strength, habit, season, occasional cause;—by, bleeding general, and topical with the lancet and leeches; antimonial emetics; cathartics; low diet; opium§? sedatives, viz. dulcified acid of vitriol, nitre, sea salt, vinegar; æthers; infusion of tea or coffee; emollient poultices; vapor bath; fomentations; anodyne liniments; covering the part with flannel; antimonial preparations||.

C. Symptoms to be palliated, are, especially, pain; restlessness; watching; flatulency; nausea; sickness; vomiting; heat; thirst; headach; acidity in the stomach.

D. In the convalescent state; the principal measures are, to avoid the occasional and exciting causes, external irritations; and to promote the recovery of strength.

* Formulæ, A, B, C.

† ————— D, E, F, G, s, t.

‡ ————— v, u.

§ ————— o, p.

|| ————— aa, bb, cc, dd.

II. *In the irregular gout.* If the constitution be strong, plethoric, and the inflammation or fever considerable, the remedies and means may be employed as pointed out for the regular gout: but if the habit be weak, aged, irritable, and the internal parts be affected with spasmodic, pains alternating with those of the extreme parts, nourishing food, stimulants, especially to the stomach, are indicated; such as, a moderate quantity of spirit, wine, spices, oil of wine, æthers, dulcified acids, volatile alkali, opium, Peruvian bark? perhaps, also externally, rubefacients, vesicatories, actual cautery, the warm bath, friction.

III. *In the anomalous gout,* the treatment must be dictated to be one of the above plans, according to the strength, habit, remote causes, parts affected with inflammation, or a spasmodic state.

In any kind of the gout, when the topical affection of the joints retrocedes, and the brain, lungs, heart, liver, stomach, intestines, urinary bladder, and other parts vital or necessary to life are seized with inflammation, the antiphlogistic plan to its fullest extent must, as speedily as possible, be put in execution. If the stomach and intestines be affected, in such cases, with spasmodic contractions and distention with wind, sense of coldness, &c. spiritous liquors, and the hottest cordials and spices, and also æthers, oil of wine and opium, have been found necessary:

also

also inflammation, by acrid cataplasms, plasters, cantharides; semicupium, &c.

GENUS IV.

Inflammations of the conglobate Glands.

In these diseases there is a roundish swelling of the gland inflamed, and pain, not, in general, very acute, but frequently throbbing.

The *species* may be according to the gland affected, viz. the parotid, maxillary, axillary, inguinal, &c.

They are frequently the *sequela*, and suddenly supervene and prove critical in acute diseases. One of them is the *mumps*, branks, or *cynanche parotidea*. They are symptomatic of the *scrophula*, venereal disease, &c.

GENUS V.

Inflammations of the Bones, Cartilages, Periosteum, Medulla, Tendons.

These may be; in the less compact part of the bones, viz. at the extremities, or joints—in the more solid and compact parts, the middle—in the medullary part—of the periosteum investing the convex or external surface—of the internal periosteum investing the medulla. To these belong the *spina ventosa*, *pedarthrocace*, *anthracace*, one species of *paronychia*.

ORDER.

ORDER V.

Inflammations of Order I, p. 3, conjoined with those of the immediately subjacent Parts.

GENUS I.

Inflammations of the Skin combined with those of Parts immediately under it.

Species I. *Phlegmo-Erysipelas.*

II. *Erysipelatous-Phlegmon.*

II. *Œdematous phlegmonic Erysipelas.*

IV. *Inflammations of the skin; vide Species II, p. 13. conjoined with those of the parts under it.*

GENUS II.

Inflammations of Genus II, p. 16, conjoined with those of the subjacent Parts.

Species I. *Inflammatory Angina, or Quinsy.*

II. *One species of Gastritis.*

III. *Enteritis.*

IV. *Cystitis.*

V. *Dysentery*

and Cholera Morbus.

VI. *Cough.*

ORDER

O R D E R VI.

Inflammations of Order II, p. 4, combined with those of O. III, p. 5.

G E N U S I.

Debilitating Inflammations combined with those of the Parts subjacent.

G E N U S II.

Non-debilitating Inflammations conjoined with those of the Parts subjacent.

The species will readily be arranged, and the history and treatment also inferred from the discussion of the simple inflammations of which they are composed; vide p. 4, 5, 6.

The species of these two last orders are the most frequent occurrences in practice.

END OF PART II.

FORMULÆ MEDICAMENTORUM.

- A. R Antimonii* tartarifati.. *Grana duo, tria, vel quatuor;*
 solve in Aquæ distillatæ bullientis, Mensura,
drachmis sex, et adde Vini, Mensura, *unciam di-*
midiam. Misce, fiat *HAUSTUS EMETICUS.*

Vel

- R Antimonii tartarifati - - - *Grana octo,*
 Acidi Tartari - - - - - *Grana quatuor,*
 solve Aquæ distillatæ ferventis, M., *unciis tribus,*
 et adde Vini albi Hispanici, M., *unciam unam.*
 Misce. Sumat cochleare dimidium quaque qua-
 drante horæ donec vomitio plena cieatur, vel alvus
 moveatur.

Vel

- R Antimonii tartarifati . . . *Grana duo—tria,*
 Vini Ipecacuanhæ, M., . . . *Unciam dimidiam,*
 Aquæ fontanæ, M., *drachmas sex.* Misce, fiat
HAUSTUS.

- B. R Radicis Ipecacuanhæ, in pulverem tritæ . . *Grana*
sex ad viginti,
 Aquæ Menthæ piperitidis

Vel

- Pimento, M., . . . *Unciam unam,*
 Syrupi Zingiberis, M., . . . *Drachmam dimidiam.*
 Misce, fiat *HAUSTUS EMETICUS.*

* The Emetic Tartar should be prepared with the *Algaroth Powder.* See BERGMAN'S *Dissertation on antimoniated Tar-*
tar.

Vel

R Vini Ipecacuanhæ, M., *drachmas sex ad decem.*

- C. R Radicis Ipecacuanhæ contusæ . . *sesquidrachmam*;
 Aquæ fontanæ, M., . . . *uncias duodecim*;
 coque ad *uncias. quatuor*, et cola; deinde adde
 Spiritus Cinnamomi.

Vel

Pimento, M., . . . *unciam unam.*
 Syrupi Zingiberis *drachmas tres* :
 Misce, fiat *DECOCTUM*, cujus sumat cochleare
 unum aut alterum omni quadrante horæ ut vo-
 mitus, vel profluvium alvi, provocetur.

- D. R Sodæ phosphoratæ . . *drachmas sex—decem.*

Vel

Salis amari purgantis.

Vel

Salis Glauberi.

Vel

Salis Rupellensis . . *drachmas sex—octo.* Sumat
 ex Jusculi cujusvis, vel decocti farinæ avenæ,
 (sine sale marino), M., *Libra dimidia, aut una.*

- E. R Cryfallorum Tartari, in pulverem tritorum,
drachmas sex ad unciam,
 Mellis despumati, vel syrupi violæ, quantum
 fatis sit ut fiat *ELECTUARIUM.*

- F. R Radicis Rhabarbari, in pulverem tritæ, tostæ . .
Grana viginti—quadraginta.
 Olei Cinnamomi . . *Guttas duas.* Misce, fiat
PULVIS.

G. R Radicis Rhabarbari incisæ . . *Drachmam unam cum semisse,*
Corticis Cinnamomi contusi . . *Grana viginti,*
Aquæ fontanæ bullientis, M., *uncias quinque :*
Macerata vase operto, leni calore, per horas sex vel octo ; deinde cola, et adde fyrupi
Zingiberis *drachmas tres,*
Fiat *INFUSUM* partitis vicibus sumendum.

H. R Pulveris opii, Ph. Lond., . . . *Grana quinque—viginti.*
Fiat *PULVIS*, ex Cyatho Aquæ Pimento, capiendus.

Vel

R Opii purificati duri *Granum dimidium ad Grana duo,*
Extracti Glycyrrhizæ . . *Grana sex,*
Syrupi Zingiberis, quantum sufficiat, Misce,
fiant *PILULÆ DUÆ.*

Vel

R Tincturæ Opii *Guttas sex—triginta,*
Aquæ Cinnamomi . . . *Unciam unam,*
Syrupi Zingiberis, M., . . *Drachmam unam.*
Misce, fiat *HAUSTUS.*

I. R Opii duri—*Granum dimidium ad Grana tria,*
Ipecacuanhæ, in pulverem tritæ,—*Granum unum ad Grana tria,*
Cornu cervi usti—*Grana decem.* Misce, fiat
PULVIS ex cyatho Aquæ cinnamomi sumendus.

Vel

R Pulveris Ipecacuanhæ compositi, Ph. Lond.,—
Grana decem—triginta. Fiat *PULVIS.*

K R Pul-

K. R Pulveris Opiati, Ph. Lond., *Grana decem—triginta,*
Antimonii tartarifati—Granum dimidium ad Granum.
Misce, fiat *PULVIS.*

Vel

R Tincturæ Opii - - *Guttas decem—triginta,*
Vini antimonii tartarifati Ph. L.,--Guttas viginti
ad drachmas duas,
Aquæ Pimento - - Unciam unam,
Syrupi Zingiberis - Drachmam unam. Mi-
sce, fiat *HAUSTUS.*

L. R Corticis peruviani pulverati . . *Drachmam dimi-*
diam ad drachmas duas. Fiat Pulvis, ex Cyatho
Aquæ cinnamoni; vel ex Solutione extracti
Glycyrrhizæ, Sumendus.

Super-
lactan
other
is seldom ap

M. R Extracti corticis peruviani duri, triti . . *Grana*
decem—viginti. Fiat *PULVIS,* quem capiat ex
Vino, Cerevisia, Lacte, Aqua Cinnamoni, vel
Decocto Corticis Peruviani.

N. R Decocti corticis peruviani, Ph. L., M., *Libram.*
Tincturæ Cinnamoni . . M., Uncias duas.
Misce, fiat *DECOCTUM* cujus Sumatur Cyathus
unus aut alter pro dosi.

Vel

R Corticis peruviani, in pulverem triti, . . *unciam*
unam.
Aquæ ferventis , M., uncias octo :
terantur simul per horæ quadrantem; dein digere,
leni calore, per noctem, et cola. Liquori colato
addē

adde Tincturæ cinnamomi *unciam unam*. Fiat
INFUSUM.

O. R Arsenici albi pulverati

Alkali tartari . . . singulorum, *Grana tri-*
ginta duo,

Aquæ distillatæ. M., *Uncias duo-*
decim: coque, vase vitreo, ad uncias octo, et
macera per noctem; dein cola. Fiat *SOLUTIO*;
cujus Guttæ duæ—quatuordecim, ex cochleari
aquæ fontanæ, pro dosi, Sumantur.

Vel

R Acidi Arsenici, pondere, . . . *Drachmas duas*,
Solve aquæ distillatæ ferventis . . *uncia una*; adde
Lixivii tartari, vel salis sodæ, vel salis ammoni-
aci volatilii, quantum sufficiat ad saturandum
acidum; deinde cola et sepone ut fiant Crystalli.
Capiat Grani octavam partem ad Grana duo pro
dosi.

Vel

R Acidi Arsenici, in pulverem triti; . . *Grana tria*,
Aquæ distillatæ , M., *Uncias tres*.
Misce fiat *SOLUTIO*; cujus Sumantur Guttæ
viginti ad cochlearia duo minora, pro dosi.

P. Sumat Vini Antimonii *cochleare unum minus* ad
cochlearia duo ex infusi Menthæ Sativæ Cyatho
uno.

Vel

R Ipecacuanhæ pulveratæ *Granum unum* ad *Grana*
duo. Fiat *PULVIS* ex Aquæ Cinnamomi Coch-
leari uno exhibendus.

Q. R Ra-

Q. R Radicis Contrayervæ pulverati . . *Grana tri-*
ginta,
 Aquæ pimento *Unciam unam,*
 Syrupi Papaveris albi . . . *Drachmam unam.*
 Misce, fiat *HAUSTUS.*

Vel

R Radicis Serpentariæ—*Drachmas duas;* coque
 Aquæ unciis novem ad uncias sex; liquori colato
 adde Tincturæ Cinnamomi *unciam unam.* Misce,
 fiat *DECOCTUM.* Cochlearia duo vel tria pro
 dosi fumenda.

Vel

Sumat spiritus Ammonizæ compositi, Ph. L., *Guttas*
quindecim—triginta ex seri lactis vinosi semilibra.

R. R Aquæ Ammonizæ puræ, Ph. L.,
 Olei Olivarum *singulorum,*
unciam. Agita ut fiat *LINIMENTUM.*

S. R Euphorbii *Drachmas duas,*
 Emplastri Picis Burgundicæ, Ph. L. *Uncias duas:*
 Colliquando misceantur ut fiat *EMPLASTUM.*

Vel.

R Seminum Sinapeos pulveratorum . . *Uncias tres,*
 Farinæ tritici *Uncias duas,*
 Aquæ . . . *quantum sufficiat.* Misce, fiat *CA-*
TAPLASMA.

T. R Natri præparati, Ph. L.,—*Drachmas tres,*
 Aquæ distillatæ bullientis. *Unciam unam cum se-*
misse;

Fiat *SOLUTIO,* cujus sumat cochlearia duo
 minora ad quatuor, ex Cyatho Decocti hordei, fa-
 rinæ avenæ, vel Jusculi cujusvis.

V. R Salis

V. R Salis alkalini Tartari . . . *Drachmas duas,*
Aquæ distillatæ *Sesquiunciam,*
Misce. Signetur ut Supra.

U. R Magnesiæ albæ . . . *Grana quindecim ad Drachmam.*
Signetur ut Supra.

Vel

Sumat Olei Ricini cochleare unum cum Spiritus
Menthæ piperitidis cochleari uno.

X. R Salis amari cathartici . . . *Unciam unam cum se-*
misse: Dissolve Decocti capitum papaverum al-
borum unciis decem, et adjice Olei olivarum
uncias duas. Fiat *CLYSMA*, quod injiciatur
tepidum.

Y. R Sodæ phosphoratæ
Salis Glauberi
Rupellensis.

Vel

Cathartici amari . . . *Sesquiunciam.*
Dissolve in Decocti Hordei, farinæ avenæ, vel
juris, libra una. Bibatur hæc *SOLUTIO* partibus
vicibus.

Z. R Decocti,

Vel

Infusi corticis Peruviani . . *Libram dimidiam*
Tincturæ ejusdem . . . *Uncias duas.*

Misce, fiat *MIXTURA*. Sumantur cochlearia
tria cum corticis peruviani pulverati drachma
dimidia, vel drachma una pro dosi.

a. Sumat

- a. Sumat Liquoris cornu cervi *Guttas decem—vigi-
nti* ex Cyatho Serii lactis vinosi, vel ex Decocto
Corticis Peruviani, pro dosi.
- b. Capiat Radicis Serpentariæ Virginianæ *Grana
tria—quinque* ex cyatho Decocti ejusdem pro dosi;
interdum adde Tincturæ Serpentariæ Coch-
leare minus unum.
- c. R Olei Alcoholis vini . . . *Guttas viginti,*
Spiritus Vini rectificati, M., *Drachmas quinque.*
Misce, fiant *GUTTÆ*. Sumat cochleare unum
minus ex cyatho Aquæ fontanæ, vel ex infuso
Theæ.
- d. R Olei Alcoholis Vini . . . *Drachmas duas.* Signetur
GUTTÆ; quarum fumantur *Guttæ tres—sex* ex
cyatho Vini, vel ex Aqua cinnamomi.
- e. R Ætheris vitriolici . . . , M., . . . *Unciam unam.*
Sumat cochleare minus dimidium, aut unum, ex
Cyatho aquæ.
- f. R Ætheris vitriolici . . M., . . *Drachmas quatuor,*
Spiritus Vini rectificati, M., . . *Unciam unam.*
Fiat *MIXTURA*. Capiat cochleare minus unum,
aut alterum, ex Aqua; Vel, loco Spiritus Vini
adde Tincturam Cardamomi.
- g. R Ætheris vitriolici . . M., . . *Drachmas quatuor,*
Spiritus Carui . . . M., . . *Unciam unam,*
Aquæ . . . M., . . *Uncias sex.*
Fiat *MIXTURA*, cujus Sumat cochlearia duo,
vel tria.

h. R Ætheris vitriolici . . . M., . . . *Drachmas octo*,
 Extracti Glycyrrhizæ . . . *Drachmas sex*,
 Spiritus Vinosi tenuioris, M., *Uncias octo*.
 Solvatur Extractum in Spiritu, deinde addatur
 Æther. Fiat *MIXTURA*. Sumatur coch-
 leare dimidium, aut unum pro dosi.

Eodem modo Sumantur Æther nitrosus, muri-
 aticus, acetosus.

i. Sumat Spiritus ætheris vitriolici, Ph. L., *coch-
 leare minus unum*, aut *alterum*, ex Aqua.

Eodem modo exhibentur

k. Spiritus ætheris nitrosi, Ph. L.,

l. Spiritus falsi dulcis.

m. R Alcoholis Vini . . . M., . . . *Uncias duas*,
 Acidi vitriolici . . . , pondere, *Drachmas duas*.
 Gradatim misce. Stent simul per plures dies.
 Fiat *MIXTURA ACIDA ÆTHEREA*. Do-
 sis cochleare minus dimidium ad unum ex Aqua.

o. R Tincturæ Opii M., *Drachmam*,
 Ætheris vitriolici M., *Drachmas duas*,
 Misce. Capiat Guttas quindecim—Drachmam
 unam cum semisse, ex cyatho aquæ fontanæ.

p. R Tincturæ Opii M., *Drachmam*,
 Mixturæ acidæ ætheræ, M., *Drachmas duas*.
 Misce, fiat *MIXTURA*. Sumat cochleare mi-
 nus pro dosi.

f. R Pulpæ Tamarindorum *Uncias duas*,
 Cryfallorum Tartari pulverati . . *Drachmas duas*,
 Acidi tartari *Grana decem*.

Misce,

Misce, fiat *ELECTUARIUM*; de quo sumatur magnitudo castanæ, secunda quaque hora, donec respondeat Alvus.

†. R Crystallorum tartari, minutim pulverati . . *Drachmas tres*,
Decocti Hordei Compositi, Ph. L., M., *Libras duas*. Decoque ad sesquilibram. Fiat *DECOCTUM LAXATIVUM* de quo bibat Cyathos duos Singulis horis ut moveatur alvus.

v. R Salis amari purgantis

Vel

Glauberi . . . *Sescunciam*;
Solve in Decocti pro Enemate. Ph. L., vel Decocti Capitem Papaverum Alborum . . *Unciis decem*,
et adde Olei Olivarum . . . *Uncias duas*.
Misce, fiat *CLYSMA*, quod injiciatur tepidum.

u. R Catechu pulverati . . . *Unciam dimidiam*,
Aquæ *Libram unam*.
Coque ad *Uncias septem* et adde Syrupi papaveris albi *Semiunciam*, Tincturæ Cinnamomi *unciam unam*. Fiat *DECOCTUM*. Capiat Cochlearia duo pro dosi.

w. R Corticis radicis Simaroubæ contusi *Drachmas tres*.
Aquæ *Libras duas*.
Coque ad uncias duodecim, et adde Tincturæ Catechu *unciam unam*, Syrupi papaveris albi *sescunciam*. Sumat Cyathum dimidium ad unum pro dosi.

- x. R Cretæ præparatæ . . Grana decem—drachmam,
Fiat *PULVIS* ex Aqua Anethi Capiendus.
- y. Sumat Pulveris e Creta compositi, Ph. L., Grana
decem ad Drachmam. Signetur ut Supra.
- z. R Gummi kino pulverati . . . Grana quinque.
Sacchari purificati . . . Grana viginti.
Misce, fiat *PULVIS* ex cyatho Decocti Cornu
cervi capiendus.
- aa. R Pulveris Antimonialis Ph. L., Grana tria,—quin-
decim. Fiat *PULVIS* ex cochleari Infusi Theæ
Sumendus.
- bb. R Antimonii tartarifati pulverati . . Grani octavam
partem ad Granum ;
Nucis Moschatæ pulveratæ . . Grana quinque.
Fiat *PULVIS*; ex Cochleari Aquæ Cinnamomi
Sumendus.
- cc. R Pulveris Algarotti . . Granum unum ad grana tria,
Sacchari purificati pulverati . . Grana quinque.
Fiat *PULVIS*. Signetur ut supra.
- dd. Sumat Vini Antimonii tartarifati, Ph. L., Gut-
tas viginti ad sexaginta ex cochleari Aquæ Men-
thæ Sativæ.
- ee. R Corticis peruviani rubri pulverati . . Grana vi-
ginti ad Drachmam unam,
Nucis Moschatæ pulveratæ . . Grana quatuor,
Misce fiat *PULVIS*.
- ff. R Extracti

ff. R Extracti Glycyrrhizæ . . . *Drachmas duas,*
 Dissolve Aquæ distillatæ ferventis *Unciis sex;*
 adde Corticis peruviani rubri pulverati *Unciam di-*
midiam, Tincturæ Cinnamomi *Unciam.* Fiat
MISTURA. Sumat Cochlearia tria pro dosi.

gg. R Gummi Arabici *Drachmam unam,*
 Aquæ ferventis *Unciam unam:*
 post Solutionem adde,
 Corticis Peruviani pulverati *Grana quadraginta,*
 Spiritus pimento,
 Syrupi Corticis Aurantii . . Singulorum *Drach-*
mam. Misce, fiat *HAUSTUS.*

hh, ii, kk, ll—*Vide H, I, K, P, Q.*

R Lactis Ammoniaci . . . *Unciam unam,*
 Aceti Scillæ *Drachmam dimidiam,*
 Syrupi Papaveris albi . . *Drachmas duas,*
 Misce, fiat *HAUSTUS.*

oo. R Sagapeni *Drachmam,*
 Radicis Scillæ siccatae . . . *Grana tria,*
 Kermis mineralis *Grana sex,*
 Syrupi Zingiberis *Quantum satis sit.*
 Contundantur simul in massam pilularem, et di-
 vide in *PILULAS* quindecim. Capiat duas aut
 tres pro dosi ex Cyatho Aquæ Cinnamomi.

pp. R Lactis Ammoniaci, Ph. L., . . . *Uncias octo,*
 Oxymellis Scillæ, Ph. L., . . . *Uncias duas.*
 Misce, fiat *EMULSUM.* Sumat cochleare unum
 aut alterum pro dosi.

qq. R Gummi

- qq. R Gummi Ammoniaci . . . *Drachmas duas,*
 Opii *Grana duo,*
 Saponis *Drachmam dimidiam,*
 Syrupi papaveris albi . . . *Quantum sufficiat.*
 Misceantur simul et divide in *PILULAS TRI-*
 GINTA SEX: quarum duæ—quatuor pro dosi
 capiendæ.
- rr. R Gummi Ammoniaci *Drachmam,*
 Extracti Glycyrrhizæ . . . *Sesquidrachmam,*
 Olei Cassiæ *Guttas quinque,*
 Syrupi papaveris albi . . . *Quantum sufficiat.*
 Contunde simul ut fiat massa in *PILULAS TRI-*
 GINTA dividenda. Sumat tres vel quatuor pro
 dosi.
- ff. R Scillæ recentis *Grana decem—viginti,*
 Extracti Glycyrrhizæ . . . *Grana viginti,*
 Contundantur et misceantur ut fiat *BOLUS*; quo
 deglutito superbibat Cyathum Aquæ Cinnamomi.
- tt. R Scillæ exsiccatae . . *Granum dimidium ad Grana duo*
 Natri præparati, Ph. L., *Grana quindecim,*
 Olei Cassiæ *Guttas duas.*
 Misce, fiat *PULVIS* ex Cyatho Aquæ hordeatæ
 Sumendus.
- vv. R Acidi Vitrioli *Guttas triginta,*
 Vini rubri Oportensis . . . *Uncias sex.*
 Misce, fiat *GARGARISMA*; quo colluantur et
 gargarisentur os et fauces sæpius die; vel Ope
 Siphonis injiciatur.

- uu. R Petalorum exsicicatorum rosæ rubræ nondum
 explicitorum, dentis unguibus *Drachmam unam,*
 Aquæ distillatæ ferventis . . . *Uncias sex.*
 Macera, vase clauso, per horas duas, deinde
 cola, et adde
 Acidi muriatici . . . *M., Drachmam.* Misce.
 Signetur ut Supra.
- ww. R Acidi Tartari *Grana viginti,*
 Vini rubri Oportensis : . . . *Uncias sex.* Misce,
 et Signetur ut Supra.
- xx. R Plumbi acetati *Grana decem,*
 Aquæ distillatæ *Uncias octo.*
 Misce, fiat Gargarisma, quo colluat et gargariset
 fauces, et expuat una cum saliva et mucō.
- yy. Bibat Decocti Hordei, Decocti Hordei compo-
 siti, vel Emulsionis Seminum Papaveris albi, Cy-
 athum unum aut alterum quaque Semihorâ, vel
 Sæpius die.
- zz. R Gummi Arabici *Unciam;*
 Corticis Cinnamomi . . . *Drachmam dimidiam;*
 solve in Aquæ bullientis . . *Unciis sex;* deinde ad-
 jice Acidi Tartari *Grana decem,* vel succi limonis,
Unciam dimidiam, Syrupi Corticis Aurantii
Drachmas tres. Fiat *MIXTURA,* cujus Su-
 mantur cochlearia duo, calidè, quaque hora vel
 sæpius.
- R Lactis Amygdalæ *Libras duas,*
 Syrupi papaveris albi *Uncias tres.*
 Misce, fiat *EMULSIO,* cujus bibat Cyathum
 unum Sæpius die.

aaa R Radicis

aaa. R Radicis Ipecacuanhæ contusæ.. *Drachmas duas* :
 Decoque in Aquæ *unciis duodecim* ad *uncias sex* :
 Liquori colato adde Tincturæ Corticis Aurantii
 Ph. L., *Unciam*, Sacchari purificati *Drachmam*
unam. Misce, fiat *DECOCTUM*, cujus sumat
 cochlearia duo vel tria unaquaque hora.

bbb. R Gummi Arabici *Drachmas tres* :
 Solvantur in Aquæ ferventis *Unciis tribus*. Fiat
INJECTIO. Hujus quantum meatu capi po-
 test, in urethram vel vaginam, sæpius quotidie,
 per dies aliquot injiciatur.

ccc. R Saponis *Drachmam unam* :
 Solve Aquæ distillatæ ferventis *Unciis duabus*.
 Fiat *INJECTIO*. Signetur ut Supra.

ddd. R Spiritus Vini tenuioris . . *Unciam*,
 Aquæ distillatæ . . . *Uncias quatuor—octo*.
 Misce, fiat *INJECTIO*. Signetur ut Supra.

eee. R Cerussæ acetatæ , *Grana viginti* :
 Dissolve Aquæ distillatæ . . *Unciis duabus*.
 Fiat *INJECTIO*. Signetur ut prius.

fff. R Aquæ Kali puri Ph. L., M., *Drachmam*,
 distillatæ . . . M., *Uncias tres*.
 Misce fiat *INJECTIO*. Signetur ut Supra.

ggg. R Gummi Arabici *Unciam*,
 Dissolve in Aquæ ferventis *Unciis sex*. Fiat
INJECTIO. Hujus tepesactæ parum sæpius
 die injiciatur.

hhh. R Tinc-

- hhh. R Tincturæ opii, Ph. L., . . . *Drachmas duas,*
 Aquæ distillatæ *Unciam.* Misce,
 fiat *INJECTIO*, Signetur ut supra,
- iii. R Gummi Arabici *Drachmas tres,*
 solve Aquæ distillatæ ferventis . . *Unciis duabus;*
 deinde, adde Hydrargyri muriati mitis *Grana vi-*
ginti. Misce, fiat *INJECTIO*. Signetur ut
 prius.
- kkk. R Hydrargyri muriati mitis . . *Grana ij—iv;*
 Opii *Granum dimidium;*
 Conservæ Cynosbati *Quantum satis sit.*
 Misce, fiat *PILULA* pro dosi.
- lll. R Calomelanos *Grana ij—iv,*
 Opii *Granum dimidium.*
 Conservæ cujusvis *Quantum* sufficiat ut fiat
PILULA; pro dosi sumatur.
- mmm. R Hydrargyri *Drachmas duas,*
 Conservæ Cynosbati *Quantum satis sit.*
 Teratur Hydrargyrus cum conserva donec glo-
 buli visum fugerint. Fiant *BOLI DUODE-*
CIM. Deglutiat unum pro dosi.



