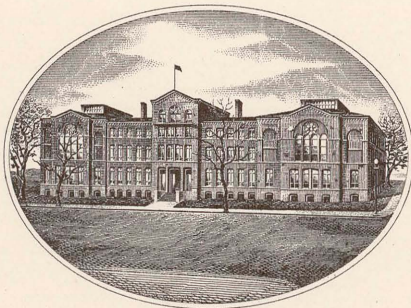


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RATIONAL VIEW OF THE SPASMODIC CHOLERA 1832

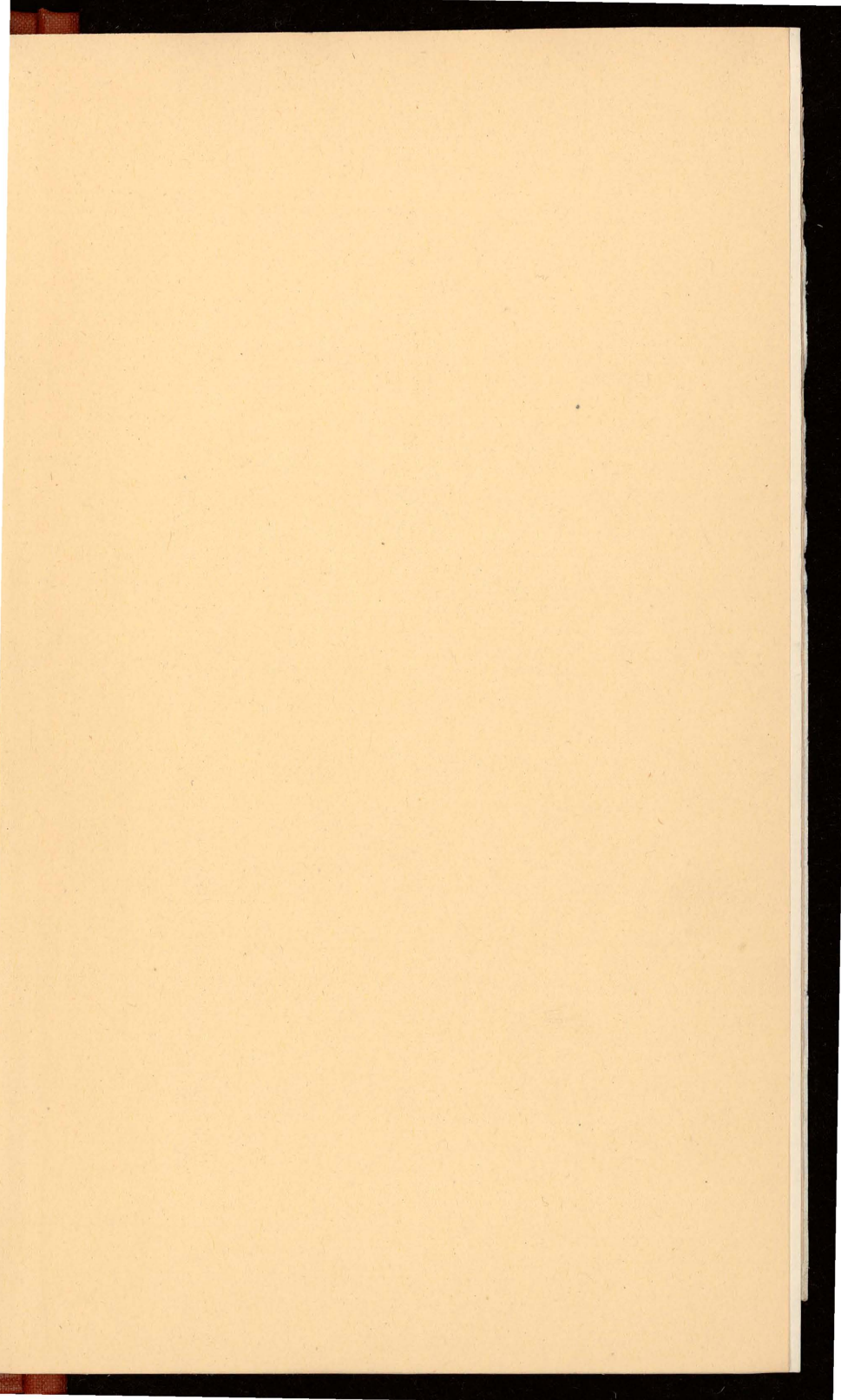
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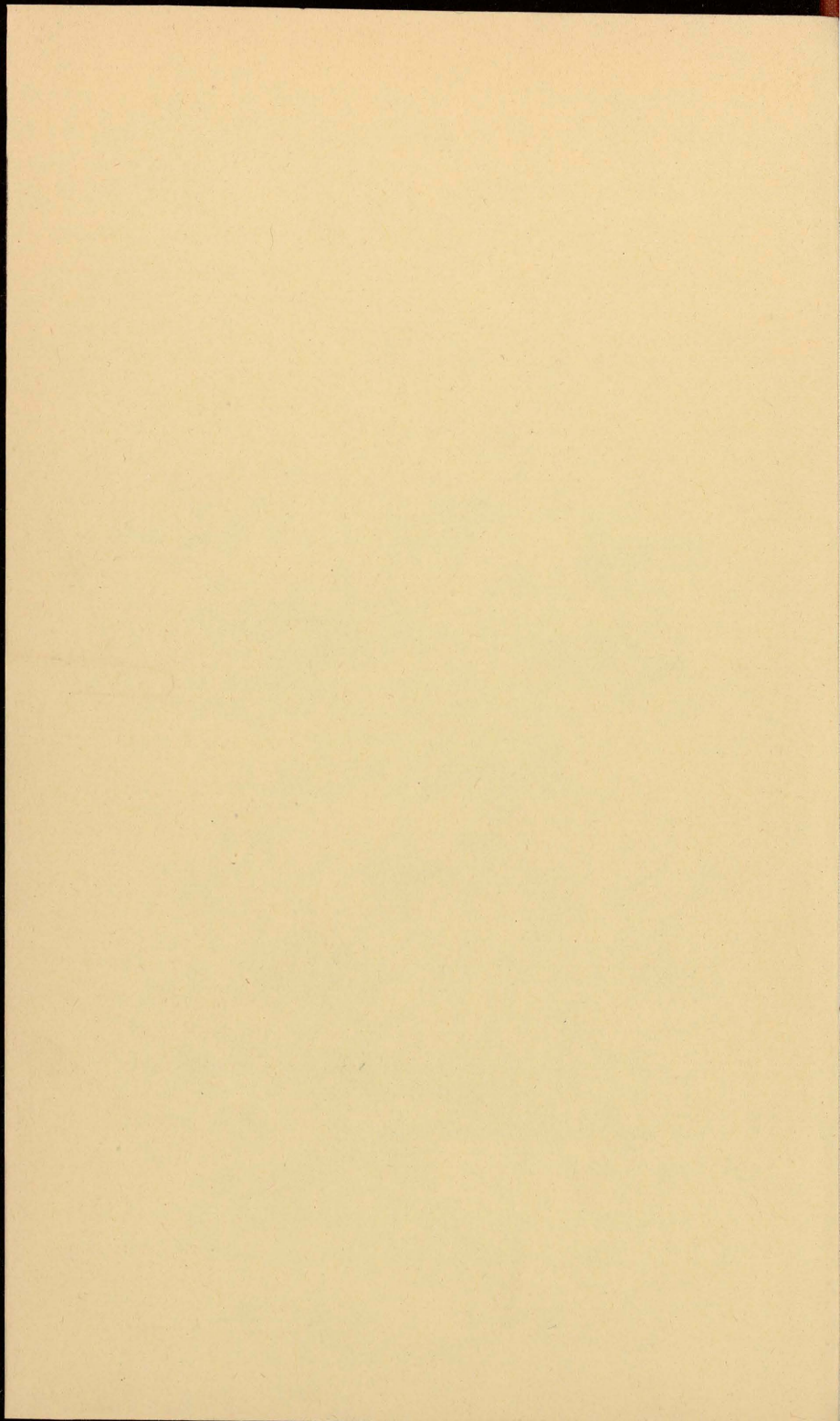


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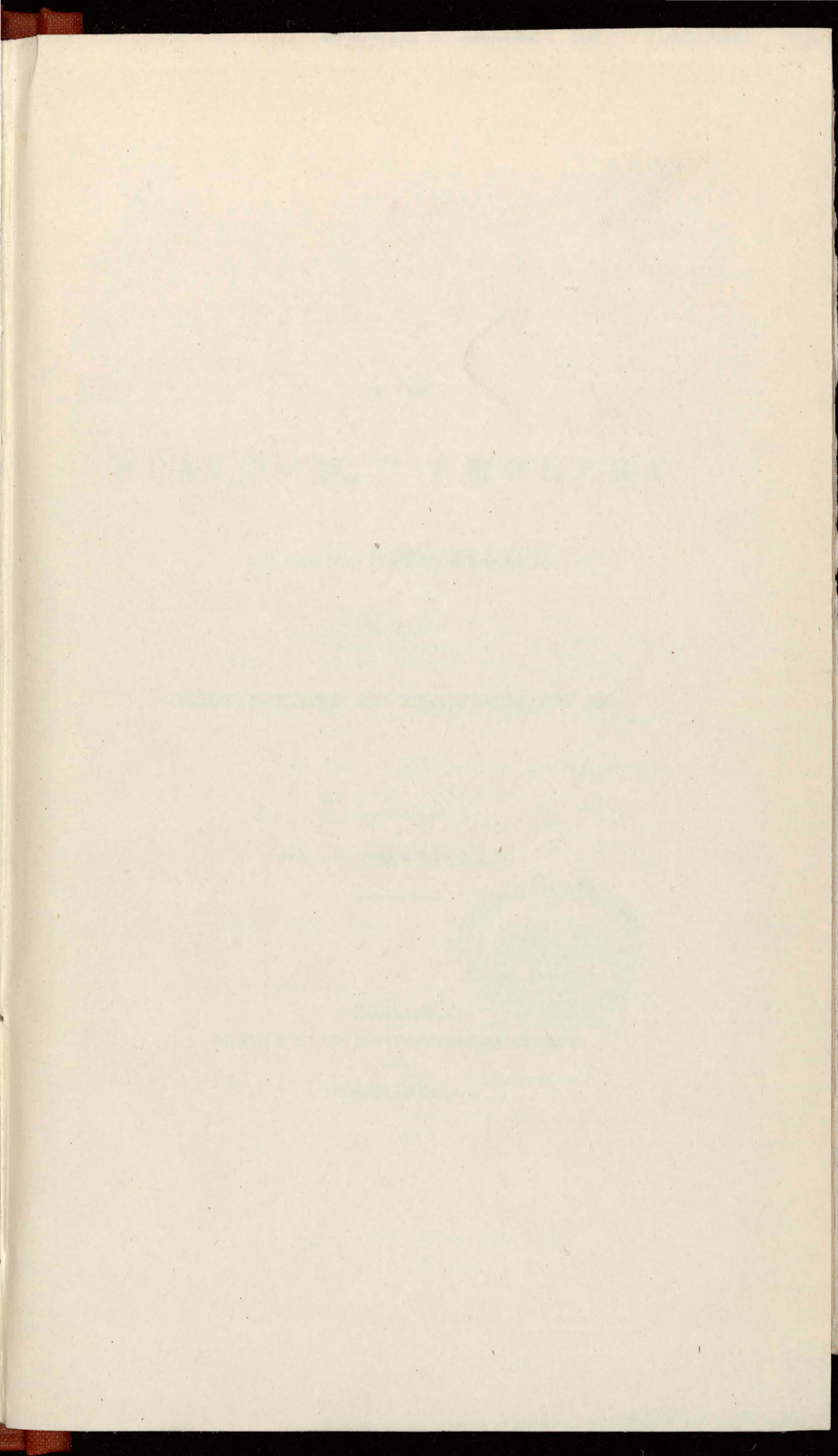
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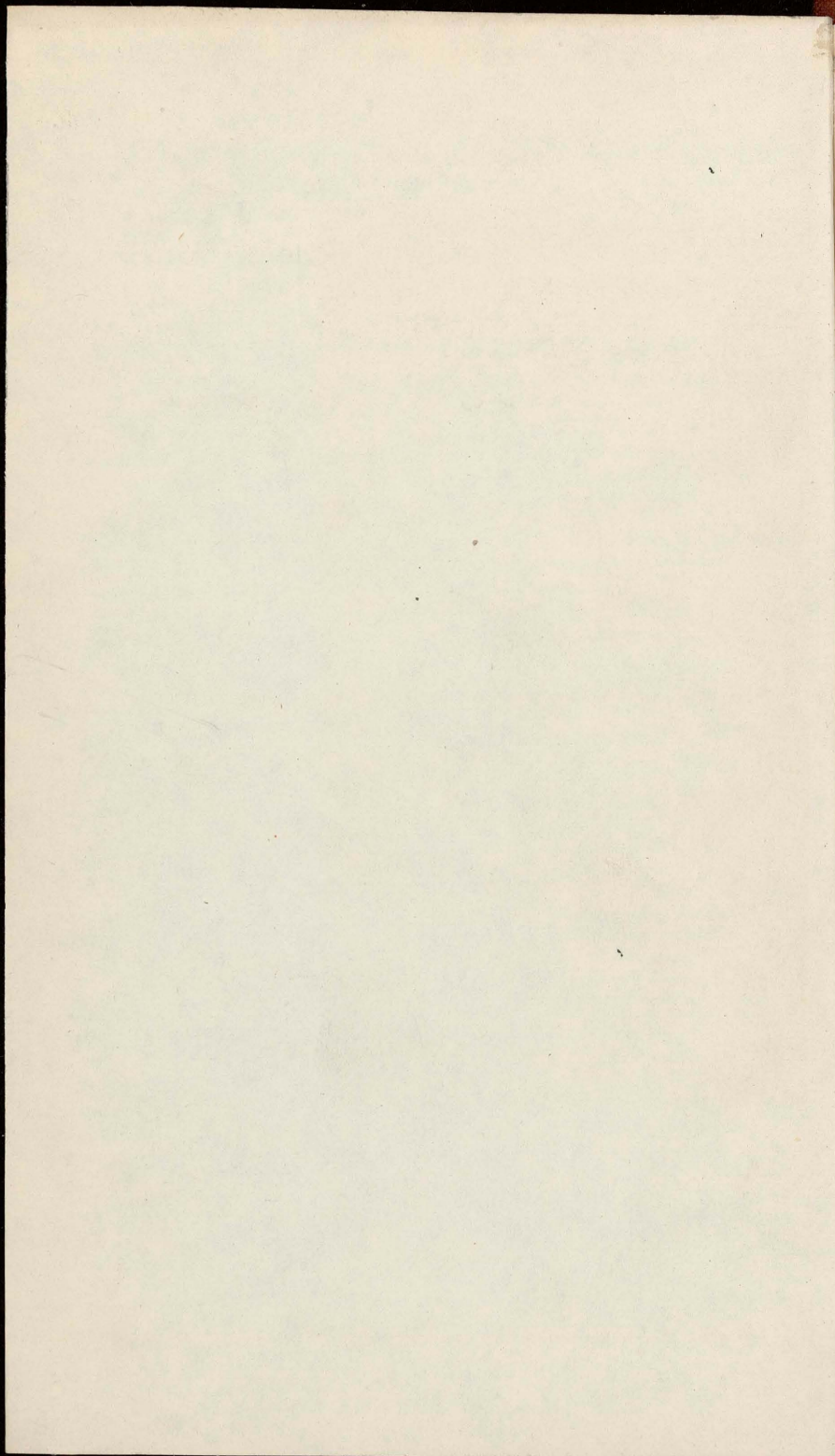














A  
RATIONAL VIEW  
OF THE  
SPASMODIC CHOLERA,  
CHIEFLY WITH REGARD  
TO THE  
BEST MEANS OF PREVENTING IT.

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BY A PHYSICIAN.

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BOSTON :  
CLAPP & HULL, 184 WASHINGTON STREET.

Price 12 1-2 Cents.



WCB  
R236  
1832

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## PREFACE.

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MUCH has been said and written on the Spasmodic or Asiatic Cholera—and much that is truly valuable. But to those who view the subject only through the medium of the public papers, many things, both as regards prevention and treatment, appear discordant and contradictory; and not a few individuals are *confounded* with the specifics and nostrums which quackery has suggested. In the view of the writer of the following pages, there is more harmony of opinion among medical men, in regard to the causes, as well as means of preventing this disease, than is generally supposed.

The Cholera is now in the United States, and its ravages will probably extend, in a greater or less degree, to most of our cities, towns and villages. But if the opinions of those physicians, whose talents and experience have secured public confidence, are at all to be regarded, the disease is not much to be dreaded; because, however formidable when it has made an attack of the malignant kind, yet God has given us abundant means of *preventing* it, if we can be roused from our native indolence, and induced to make use of them.

The purpose of the writer has been to embody, in a *plain, practical* form, all the important *FACTS* and suggestions for *preventing Cholera* which experience has deve-

loped on this continent, and, as far as his means permit, in other countries. With this view, authorities have been extensively consulted, and sometimes liberally quoted. It has also been thought best to *condense* the facts as much as possible, so as to form a manual which, from its *cheapness*, may be within the reach of those citizens to whom, on account of their condition and circumstances, it is most necessary. *Style* and *appearance* have been considered as secondary, in point of importance, to *utility*. Technical terms have also, in general, been avoided.

After adverting briefly, in this little treatise, to the CAUSES of the disease, attention has been chiefly directed to the means of PREVENTION. Under the general head, PREVENTIVES, are embraced *Courage, Cleanliness, Temperance, Camphor and other Aromatics, Early Hours, Flannel, Free Perspiration, and Free Respiration*. These are followed by a few remarks on MANAGEMENT and MEDICAL TREATMENT. Any farther directions in regard to *treatment*, would probably be injurious, rather than useful, to those into whose hands this manual is likely to fall.

It may be proper to observe that several extracts from essays first communicated by the writer to the American Traveller, have been inserted in the following pages; but they have mostly been altered or abridged for the present purpose.

*Boston, July 17, 1832.*



the 50,000 to be absent from the city, the loss from Cholera cannot exceed one in twenty-eight or thirty of the whole population, even estimating the whole loss of the city at 50,000, which is probably too high. The mortality is almost equal to one in twenty-five. But in several of the large cities of Europe the proportion is only one to twenty-five.

## RATIONAL VIEW

OF THE

## SPASMODIC CHOLERA.

### INTRODUCTORY REMARKS.

It is a consoling reflection, that dreadful as have been the ravages of that modern scourge of nations, the Spasmodic Cholera, it has no where in Europe, or America, carried off so large a proportion of the inhabitants as the Plague in its ravages during the last five centuries. Its progress is indeed more rapid, and the proportion that die, out of those who are attacked, is perhaps as great; but the destroying angel passes over much sooner. The following table, which is generally accurate, though incomplete, will serve to give some idea of the mortality of the plague.

		Containing	Lost	Proportion.
London in	1347	250,000	50,000	1 to 5
"	1400	300,000	30,000	1 to 10
"	1500	500,000	30,000	1 to 17
"	1604	700,000	175,000	1 to 5
"	1665	700,000	100,000	1 to 7
Constantinople	1611	500,000	200,000	1 to 2 1-2
Bassorah	1773	120,000	80,000	2-3 whole number.
Tunis	1784	130,000	32,000	1 to 4
Smyrna	1784	150,000	20,000	1 to 7 1-2
"	1814	150,000	30,000	1 to 5
Egypt	1792	4,000,000	800,000	1 to 5
Philadelphia, } yellow fever, 1793 }		34,000	2,000	1 to 17
Fez (prov.)	1799	1,000,000	247,000	1 to 4
Morocco	1800	100,000	1,800 a day.	
Rome	78		10,000 a day.	

It is thus seen that the least proportion here specified is one death to seventeen inhabitants. But in Paris, allow-

ing 50,000 to be absent from the city, the loss from Cholera cannot exceed one in twenty-eight or thirty of the whole population, even estimating the whole loss of the city at 30,000, which is probably too high. The mortality in Montreal may be equal to one in twenty-five. But in several of the large cities of Europe the proportion is only as one to several hundred—and in London, one to about a thousand.

It often happens that a mortality greater than that of any city in Europe where the Cholera has appeared, except Paris, prevails in our healthy country towns. For it is not at all uncommon for one person in a hundred of the whole population to die during the progress of an epidemic disease, and that too without exciting any considerable alarm. Nay, there have been seasons when the mortality in nearly all the towns in a county, and sometimes a much larger section of the country, has been equal to a *hundredth* of the whole population. It is occasionally a *fiftieth*; and in a few instances, has been known to be even *one thirtieth*—or equal to that of Paris. But there are few cities in Europe, except Paris, that have lost more than a *hundredth* of their population from the Cholera. Yet London, as has been shown, and it is believed the cities of Europe generally, have *often* lost upon the average at least *one ninth* of their population from the plague.

The loss of even one inhabitant in a hundred is indeed a serious evil; and these comparisons are not made with a view to represent it otherwise. A mortality which amounts to one in thirty is, of course, still more so. But surely it is consolatory to know that *one thirtieth* has hitherto been the maximum loss from Cholera in Europe. In the prospect, therefore, of its speedy extension through the United States, instead of indulging in unnecessary fears, we ought to confide in the belief that the mortality will not be greater than it has been in Europe—varying from 1-1000 to 1-30 of the population of our cities. This is by no means so great an affliction as has often been the lot of humanity.

There is another consideration which might serve to mitigate our fears. Taking Europe together, I believe that *five-sixths* of the mortality has been confined to the haunts of gluttony, intemperance, and debauchery. The real mortality, then, from which the temperate and virtuous



have anything to fear, is as one to one hundred and fifty for the maximum, and one to *five thousand* for the minimum.

Dr. Bronson, of Albany, who lately visited and spent some time in Canada, and whose standing and professional character give great weight to his opinions, in a letter from Plattsburg of June 26th, has the following remarks in regard to the nature and progress of this epidemic in the places which he visited.

"I think I may say with perfect truth, that the number of those who have been attacked with cholera, who were sober, temperate, regular, cleanly, well-clothed, calm and fearless of death, and who used no medicine, have not been in the proportion of one in fifteen of the whole number of the seized. The deaths compared with the total amount of mortality have been in a still less proportion, probably not one in thirty or forty. I think I don't exaggerate. Cholera, considered in this point of view, is a less formidable complaint than is generally thought; or rather, it is more within human control, than almost any great epidemic which has ever visited our world."

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#### CAUSES OF CHOLERA.

WITHOUT entering upon the inquiry whether the Cholera is contagious or not, I will make the following extracts from the Reports of the Physicians, who were recently deputed by the Board of Health of Hartford to visit New York, and by that of Philadelphia to visit Canada. It is indeed (so far as I can learn) very generally believed that the disease, in this country, originated in Canada, and never was imported by the *emigrants*, as was at first hastily concluded. Drs. Brigham and Barry, from Hartford, state as follows :—

"We conversed with no person who had seen any cases of the disease, that supposed it to be contagious, and we learned no fact that tended to show that it was so; and from its appearance nearly at the same time in various parts of the city, and from very numerous facts of a similar character, we are decidedly of the opinion that it is not a contagious disease, but may depend upon a change in the state of the atmosphere not cognizable by our senses; but which affects only those whose deranged digestive organs predispose them to the disease."



Drs. Jackson, Harlan, and Meigs, of Philadelphia, also report :—

“That they have not been able to ascertain any positive unequivocal fact to justify a belief that it is a disease communicated by those affected with it, or is one of importation.”

It is generally admitted that filthiness, drunkenness, debauchery, bad food, want, excess, indigestion, scanty or improper clothing, cold, fear, fatigue and anxiety, are *predisposing causes* ; and that although the atmosphere of the sick may sometimes form a focus of *infection*, yet even this is not dangerous except to such as have been subjected to one or more of those *causes*.

On this subject, Dr. Bronson remarks as follows :—

“Intemperance of any species, but particularly intemperance in the use of distilled liquors, has been a more productive cause of increased susceptibility to Cholera than any other—and, indeed, all others. Drunkards and tipplers have been searched out and transixed with such unerring certainty, as to show that the arrows of death have not been dealt out with indiscriminate aim. An indescribable terror has been spread through the ranks of this unfortunate class of beings. They see the bolts of destruction aimed at their heads, and every one calls himself a victim. There seems to be a natural affinity between Cholera and ardent spirits.—Squalidness and filth, low and unventilated habitations, and meagre and unwholesome diet, have also had a powerful effect in preparing the system for the reception of the epidemic. The hovels of the poor and the wretched have been entered by the insatiate monster, and nearly depopulated. In this state, it is not unusual for every surviving member of the family to desert their habitation—leaving their friends or relations, their parents or children, to expire in solitude. The bonds of parental, fraternal or conjugal relations, are feeble under these circumstances—they drop, and are consumed like flax in fire.

“Though many valuable lives were lost in Montreal in the decline of the disease, whose circumstances were good, whose habits were for the most part regular and temperate, yet in many of these cases the mind had been for a long time in a state of extreme agitation, or medicine had been injudiciously used. After nights of sleeplessness, and days of anxiety, the body had become worn out under the accumulated sources of trouble and exhaustion ; or the system had been unhinged, and the digestive powers debilitated by tampering with prophylactics” [preventives].

The Board of Health and the physicians, both of Quebec and Montreal, so far as they express their views freely, confirm these opinions.



Dr. Rhinelander, who, with Dr. De Kay, was deputed to visit Canada, and spent some time there, in a letter to the Editor of the New York Standard, writes thus :—

“We may ask who are its victims? I answer, the intemperate—it invariably cuts them off. It is a mistaken notion that stimulus is necessary; wine may and does do service, while we are under the influence of this poisonous atmosphere; but spirituous liquors as a preventive always do harm, and hurry the drinker to his fate.”

The testimony of Dr. Kane, of Plattsburg, who also spent some time in Canada, is in perfect accordance with these views. So is that of the physicians of Russia, France, England, and Scotland; and indeed of all the countries of Europe and Asia which have been scourged by this pestilence.

It is also a well-attested fact, that in Poland, nine-tenths of those who died of the Cholera were known to be brandy drinkers. In Paris the victims of the disease were, with few exceptions, among the lower classes, all of whom drink intoxicating liquors to excess. In one street in which dwelt thirteen hundred public women, twelve hundred were swept away by the disease. In another, containing sixty inmates, *every one died*. In Montreal, after 1200 had been attacked, a Montreal paper says, “Not a drunkard who has been attacked has recovered of the disease, and almost *all* the victims have been at least *moderate* drinkers.” In the eastern countries, where the use of opium is prevalent, it has raged more furiously than any where else.

This pestilence broke out in this country among emigrants who had been living for weeks in numbers of from 500 to 1000 in confined vessels.

After the Cholera had begun to abate in Quebec, a religious festival occurred, at which the people indulged to excess, and the ravages of the disease again increased.

After the decline of the disease at Riga, the occurrence of the Whitsun holidays caused a temporary augmentation of new cases, from an indulgence in intoxicating drinks, and other irregularities incident to a popular festival.

In Gateshead, and other places in England, the same general fact was strikingly obvious.

Even in New York, there was a disproportionate in-



crease of new cases immediately after the celebration of Independence.

Dr. Rieche informs us that in China the disease selected its victims from among such of the people as live in filth and intemperance. Dr. Jæhnichin, of Moscow, declares that drunkenness, debauchery, bad food, and *personal indiscretions*, were incontestably its predisposing causes.

During the prevalence of the Cholera in Petersburg and Moscow, the average number of deaths in the bills of mortality was no greater than during the usual months of health. This is ascribed to the fact, that previous to and during the pestilence they ceased to drink brandy, and by temperance the great number of deaths from other causes was diminished.

The following striking facts are from the British Temperance Record.

"The first case of Cholera that occurred in Gateshead, was in an aged female, who for many years has been remarkable only for her filthiness and intemperance. Her time was spent chiefly in begging and gathering up any kind of filthy offals which she could exchange for money. The money so obtained was generally *spent in drink*. In a state of *extreme intoxication* she was carried home, and in a few hours she was attacked by the Cholera, of which she died in a very short time, under awful circumstances.

"During the week immediately preceding Christmas day, some of the Glass Houses presented scenes of excessive drinking. When some of these persons were reproved for their excesses, they jeeringly replied, '*We are drinking to keep the Cholera away.*' [I have often heard similar remarks from tipplers in this city and elsewhere. 'Brandy is good for the Cholera,' say they; accompanying their remarks with an oath.] The sequel proved the reverse of their bravado; for some of those very men were among the first whom the Cholera fatally seized!

"About noon on Christmas day, (which was also on the Sabbath!) in the lower part of this town and in Bottlebank, such scenes of drunkenness and outrage were witnessed, as would be disgraceful in a heathen country. Men and women were staggering in a state of complete intoxication. Some were brawling and fighting, while crowds were collected as spectators to glory in their shame. Streets in this case were almost impassable. *That night and the two following days*, no less than 98 persons were smitten by this pestilence, a large proportion of whom died in a few hours. From the 25th of December to the 5th of January,



325 cases were reported, and 102 deaths in Gateshead alone!! One of the worst streets, parallel with the Tyne, was swept of confirmed drunkards from one end to the other, with a very small exception.

"The day following Christmas day, two men (one living in the town and the other a few miles in the country) attended a cock fight in the afternoon; and at a public house partook of a supper with the company that had been engaged in this cruel and wicked sport, and without doubt enjoyed the concomitant drink. While at supper the townsman was seized with the Cholera, and was a corpse in about 12 hours; and the countryman was assailed by the same messenger of death as soon as he got home, and within two days was also in eternity!

"An aged woman, who was seldom sober when she could procure enough drink to intoxicate her, got to the door of her habitation about midnight on the 24th, and found her door locked against her. Her husband and son were *in a similar condition*. After she had effected her entrance, the Cholera followed, and she speedily became its miserable victim!

"A pensioner in the lower part of Gateshead, who was accustomed to see the money through before he ceased drinking, was cautioned by the gentleman who signed his certificate, on the 26th, to guard against his usual practice, *lest that should be the last pension money he should ever receive*. He unhappily disregarded the caution, took his place in a public house, drank to excess till midnight, was attacked by this fatal disease about two o'clock, and died about half past six the same morning!

"Another person, who had listened to some warnings upon this subject, went home and said to his wife, 'They say that the wickedest, and drunken people, are the first attacked by this disease, and I have been very wicked.' This his wife admitted, and advised him to amend his life. That night he was seized, and the next day he died.

"A pitman, at Byker, who had received his fortnight's wages, gave his wife twenty shillings of the money to maintain the family for an equal period, and, with the rest, (amounting variously from ten to twenty shillings,) he set off to a public house with the declared intention of spending it. While there, his wife obtained another shilling from him, for urgent purposes. He afterwards staggered his way home, found where the shilling was laid, returned and drank the whole. The Cholera followed this bout, and he was presently in his grave.

"It is reported at a village on the Tyne, one R. was drinking to intoxication, and jovially sporting at the Cholera. Capering merrily, he called out, 'Play us the Cholera,' and danced about to his own tuning. Then sprawling on the floor, he mimicked the agonies of spasmodic pain, and shouted, 'I've got the Cholera,

and many more from a mild disease, transformed into a



bring me some brandy.' The derided Cholera, so to speak, marked him for its prey, soon after smote him, and he fell its victim! An awful warning of approaching horrors to merry drunkards, and a dreadful proof that hardness of heart is a *sorry defence* against the arrows of death."

Similar facts have been observed in Quebec, Montreal, Plattsburg, and New York; but I have no room for particulars.

It is singular, that of more than 1,000 deaths in Montreal, only two were members of the Temperance Society which exists there, and which it is believed numbers no less than three or four hundred members. A London paper says—"It is a remarkable fact, that in no part of England, Scotland or Ireland, has any member of the numerous Temperance Societies now in progress, fallen a prey to Cholera." The latter statement is almost incredible, when we consider that the number of deaths from the disease in those countries has been at least 5,000; and yet, if untrue, why has it not been contradicted?

But it would be idle to cite further testimony to show what are the predominating causes of this disease, especially as I shall have occasion to advert to the same subject in speaking of preventives.

It is true we occasionally hear of temperate and healthy people falling victims; but it remains to be proved that these persons had been subject to none of the ordinary predisposing causes. Mr. and Mrs. Adams, of Montreal, formerly of this State, might be deemed prominent exceptions to the truth of these remarks. But Mr. A. was much alarmed, and used powerful medicines as preventives of the pestilence; and Mrs. A. had scarcely recovered from a recent illness, and was poorly able to withstand her fatigue and trials. Perhaps, also, *she* used the supposed antidotes.

It is highly probable that most if not all the cases of Cholera which have proved fatal among the cleanly, regular, temperate and virtuous, were either induced or greatly aggravated by fear, and those improper measures to which it leads the individuals who are under its influence.



## PREVENTIVES.

## COURAGE.

NOTHING is more important in resisting epidemic disease, than moral Courage. It is, then, a point of primary importance, to *banish fear* at once.

Many newspapers of the day recommend *heedlessness*. This seems to me carrying the point too far ; though it is much better to go to this extreme, than to that of excessive anxiety and terror.

A volume of considerable size might be filled with facts which show the ill effects of care, anxiety and grief, and, above all, of *fear* and *terror*, in predisposing the human constitution to disease—facts, too, than which none are better authenticated.

But Fear can do more than *predispose* the system to disease. The universal rigor, the contracted and pale countenance, the deep-sunk eye, the quivering lip, the chilliness, torpor, prostration of strength, the insupportable anxiety about the region of the heart, &c., are so analogous to the symptoms of fever, that no reasoning person can doubt for a moment the pernicious tendency of this passion. It not only disposes to disease, but actually induces it in some instances ; and where it already exists, always greatly aggravates its symptoms.

Fear has instantaneously changed the complexion and character of wounds, and rendered them fatal. It has occasioned gangrene, indurations of glands, suppressions of natural or beneficial secretions, epilepsies, and—when it proceeds to the more dangerous extreme of terror—apoplexies. It has sometimes induced a permanent stupor of the brain, amounting to *idiocy*. Extremes often meet ; and as joy on the one hand has produced sudden death, so on the other the agonizing effects of fear may result in complete palsy of the vital powers, and, like the Plague, Cholera, and other pestilential disorders, when they appear in their worst forms, instantly produce the torpor of death. From the best accounts we have of the progress of the Cholera, it appears that many have died from *fear alone* ; and many more from a mild disease, transformed into a



severe one by anxiety, fear or terror. Awful consternation pervades those who live in fear of death. Although the mortality from the disease, which the temperate have to fear—judging by the course of the disease in Europe—is but 1 in about 2,000, yet this fear of disease and death regularly causes the subjects of the panic to fall victims.

In every species of contagious disease, fear is peculiarly dangerous. More than this, it is in itself contagious. He who is under its influence, is not only rendered miserable for the time, but is a source of misery to others. His very features have a tendency to produce a state of mind in others, similar to his own. The whole tribe of depressing passions produce, in some degree, similar results.

There is, however, a fear which cannot and should not be avoided, since it rouses us to take prudent and precautionary measures. I condemn only that anxiety and terror which undermine health.

Why are physicians no more liable to infectious or contagious diseases than other men? The principal reason, no doubt, is, because they are not afraid of them. On this subject there is much mistake abroad, even among those who would take it ill to be classed among the vulgar. An opinion prevails, to a very great extent, that physicians *take something* to guard against disease. Nothing can be more erroneous.

There may indeed be timid persons among them, as among other classes of men; but if there are those of this description, they usually lose their health. Physicians of sense are among the last persons in the community to resort to drugs and medicines as preventives of disease—a measure, they well know, calculated to *invite* rather than *repel* it. But the idea that they medicate for this purpose certainly prevails, and cannot at once be eradicated.

A gentleman in one of our country towns (and a gentleman regarded as intelligent, too) said to me not long since, “I have observed a peculiar appearance in the eyes of all physicians who have had much practice, which I suppose to be produced by taking powerful medicines to guard against disease.” I found the impression so deeply fixed in his mind, that it was useless to attempt to laugh him out of it; and more useless still to reason with him on the subject.



There are many attendants and nurses of the sick to be found in our cities, who have followed their avocation through every epidemic which has prevailed for forty years, and without contracting disease. These persons, like most physicians, have become habituated to these scenes, and have learned to meet them fearlessly, and without much anxiety as to results. They *eat*, and *drink*, and *sleep*, if possible, just as they have done before. They have no idea of any great or sudden changes in these respects, simply with a view to meet the particular disease which prevails. If they were temperate and regular before, they continue so; if not, they *ought* to change. They have no "smelling bottles," or "herbs," or "drugs," about them. They would as soon rely on beads or charms to defend them from death. Nor do we find them holding their breath in the sick room, or placing much confidence in burning little bits of paper, vinegar, &c., or in scattering camphor and other aromatics about the room. Rigid cleanliness they observe, no doubt, in person and dwelling—this subject cannot be too much attended to; and, if infection or contagion really exist, they make use of means which have some efficacy—such as chloride of lime, &c.—not on spells, or charms, or cobwebs.

Is it asked—How can we divest ourselves of fear, and acquire the courage and confidence of which you speak? Look at *existing facts*, as I have endeavored to present them. If you believe these statements—and it seems to me you cannot reasonably reject them—there is no great danger. If you are involved in any of the errors which are there mentioned as predisposing to the disease, avoid them at once. This is easily done; and when done, and other preventive measures are taken which I am to describe presently, set your mind at rest, and dismiss all fear. The danger will be very slight indeed. But there is *one* thing more.

When Franklin had given what he deemed appropriate directions for obtaining *pleasant dreams*, he observed, in closing, that there was one thing to be secured, without which other means would be ineffectual—viz. *a good conscience*. In like manner, "a conscience void of offence towards God and man" is a *sine qua non* in the case before us. It is the *first*, and not the last requisite; and without



this, the efforts of reason, and philosophy, and common sense, will not be very effectual. The influence of a rational confidence in God—its *medical* influence, I mean—not merely as a preventive of alarming epidemic disease, but of all the ills which “flesh is heir to,” deserves a more attentive consideration than it has hitherto received.

#### CLEANLINESS.

One of the most important measures which can be suggested or adopted, with a view to the prevention of disease, is a strict attention to cleanliness. Neglect on this point, always reprehensible, is more especially so in warm weather, and in the face of an epidemic disease.

Decayed vegetable matter appears to be more fruitful of disease than animal substances. Everything of the vegetable kind which is decayed, ought to be as speedily removed as possible from our cellars, drains, streets, vaults, &c. The least inattention here is perilous.

*Personal* cleanliness is of still greater importance, and cannot be neglected without immense hazard. To awaken the community to this subject, however, is a work of difficulty. This seems strange, when every one is ready to admit its importance. But it is from this very cause that the difficulty arises. Reformation is never more hopeless, than when everybody admits its necessity in *words*, and no one *feels* it.

The physician will tell us—and common sense tells us—that the pores of the skin should be kept open; that the lungs require pure air, the stomach pure water and wholesome food: and the universal reply is, “Oh, yes.” We all *know* that poisons in our food, drink or air, cannot be carried through ten thousand blood vessels to all parts of the human system every four or five minutes, without producing mischief. We also know, or *may* know, that there is not a spot on the surface of the skin of the size of a pin’s head, but what has hundreds of little openings for the transmission of the fluids of perspiration; and if there is no unnatural obstruction, these fluids are passing off in the form of a gentle moisture every moment of our lives.

It must also be obvious that to have one thousand of these pores obstructed for a single day, is an *evil*, since they no longer serve the purposes for which they were de-



signed. But to suffer this obstruction to be continued for weeks and months, is an evil of still *greater* magnitude. What then must be the consequences of stopping up, not merely *one* thousand, but *thousands* of thousands of these little outlets, and continuing the blockade through the season—and perhaps through life?

We are all familiar with the results that sometimes follow from checking the perspiration suddenly—which are not merely colds, but rheumatisms, pleurisies, fevers, &c. And is it possible that the pores can be extensively obstructed by dust and filth for a great length of time, and no injury follow?

If these queries were to be formally made to every individual in the land arrived at years of discretion, it is believed the answer would, in every instance, be the same.

But does one individual in a hundred *act* in accordance with these sentiments? Now, so far as my observation extends, not 200 persons in 1,000 bathe or wash their whole bodies in water, once in a year. Multitudes never do so, during a long life. In many country towns, where the inhabitants of both sexes are engaged in those occupations which create the most imperious demand for bathing, at least, in summer, one half of the population seem to be exempted, by common consent and immemorial usage; and a majority of the remaining half excuse themselves from mere habits of indolence. The hands and face are perhaps washed daily; and the neck and feet once a week. And here the matter usually ends.

With cities I am less acquainted. But indolence might more properly plead inconvenience, and poverty more naturally dread the *expense*, in city, than in country. *Warm* baths, which are generally believed to be the most salutary, are, indeed, from the very nature of the case, inaccessible to the lower classes of dense villages and cities. Yet on some accounts they are more *necessary* in city than in country. But they are indispensable everywhere.

But is not frequent bathing as necessary to the poor as to the rich? Nay, is it not even more so? And is it not then a matter of *public policy* as well as duty, to make gratuitous provision for this purpose?

In ancient times, the utility of public baths was well

understood. But modern cities, with a very few exceptions, seem to have forgotten the subject.

The city of Boston, with a wisdom which is worthy of all commendation, has voted to appropriate \$50,000 to such measures as are best calculated to defend the city against the ravages of the approaching pestilence. Among the rest, public bathing houses, it is said, are in contemplation. I sincerely hope it is so. Such a measure is loudly called for. It is the voice of humanity ; it is the voice of christian benevolence ; it is *the call of pecuniary interest*. The example—the mere *example* of Boston would be of immense value.

Should the Asiatic Cholera drive the inhabitants of the earth to habits of cleanliness—should it prove the means of establishing public baths in every city, village, and town, and of compelling people to use them frequently—the ravages of the destroyer, dreadful as they are, can hardly be regretted.

But there are difficulties. If baths were established, and made free to every individual who was unable to pay for them, much would still remain to be done. Probably 500 persons in 1000, in most instances, would still neglect them. It is a Herculean task to break the chains which indolent habits impose—a task too powerful, I fear, even for the Cholera in its worst forms.

On the subjects of Cleanliness and Ventilation, I cannot forbear to add the following judicious remarks. The Boston Consulting Physicians say :—

“Cleanliness, domestic and personal, is of the first importance in the prevention of Cholera. Every house and shop, especially provision stalls, should be made clean and sweet. Out-houses should be freed from all offensive matter. Cellars especially should be cleared of putrid vegetables, ventilated, and thoroughly dried. Beds and bed clothing should be daily exposed to currents of fresh air.

“Personal cleanliness must be carefully attended to. Those who *can* do so, should, in hot weather, bathe in sea water two or three times a week, and others should wash the whole body with warm water and soap, at least twice a week. Children should not be omitted in this process. As few individuals as possible should live in the same room, and where a number are found together, means for dividing and giving them more healthy lodgments should be provided at the public expense.



"Crowded meetings, especially in the evening, should be avoided."

Dr. Rhinelander says, "Above all, avoid crowds and impure atmospheres."

The Edinburgh Board of Health, in like manner, advise

"Strict attention to personal cleanliness and the ventilation of dwelling houses,—to warm clothing,—to regularity of hours for sleep,—to keeping as much as possible within doors at night,—and to take food before going out in the morning."

Dr. Gideon Mantell, a distinguished Surgeon in one of the British Hospitals, has these excellent remarks :—

"Cleanliness and temperance are the grand preservatives. Every apartment should be thoroughly ventilated ; if the windows be made close, they should instantly be altered, so as to admit of being opened ; if the weather be damp, make a fire, particularly in bedrooms, as nothing promotes thorough ventilation so much as a brisk fire with the door or windows open. Drains and sewers should be removed from the vicinity of dwellings. Pig-sties particularly require attention. This caution is most requisite in country towns and villages. Where whitewash is necessary, it should be used without delay, but the room should not be slept in till it be thoroughly dry and aired. Blankets and other bed-clothes should be exposed to the air or fire every day. A notable housewife can more effectually keep away the Cholera than a host of physicians.

"Cleanliness is next to godliness, says the proverb ; and it deserves to be written in letters of gold. Personal cleanliness will do more to preserve health, and prevent the attack of Cholera, than a chest full of medicine. If a man cannot have a clean shirt every day, he can at least have a clean body. The feet are too generally neglected—like faithful servants they labor all day and are forgotten at night ; washing them every evening, and, if they be cold, immersing them in hot water, is highly conducive to health."

#### TEMPERANCE.

Much is said at the present time of *good living*, as a preventive of the Cholera. Of its importance there can be no doubt ; but the term *good living* is liable to great abuse. The fact is, *good health is the most effectual preventive of disease* in every form. So that the question becomes, rather, What kind of living is most conducive to health ?

The position that good health is the best preventive of disease, is often met by a hasty assertion that some epide-

mic diseases are most apt to attack the healthy and robust. *This is a mistake.* The utmost that can be said, is, that smallpox, and other diseases decidedly *infectious*, do not generally *spare* the healthy. I have witnessed the ravages of epidemic diseases, where the general voice of public sentiment was that the strong and healthy were the most apt to suffer ; and I know that many of these *strong* persons were *not* healthy. They were generally in the habitual use of brandy, or large quantities of other stimulating or narcotic drinks or drugs, as wine, cider, coffee, tobacco, or opium ; or were gluttons or gormandizers, or given to other forms of sensuality equally pernicious and incompatible with good health.

Many who are denominated *good livers*, and who suppose themselves so, are *plethoric*. The half-bloated features of many of the yeomanry of New England, indicate a condition of body nearly as far removed from the *line of health*, as the pale visage of too many of her *city* inhabitants. Both are extremes, and neither is compatible with perfect health. Both are more or less exposed to disease, according to their departure from the line of health in either direction.

Under the impression that they must *live well* to prevent disease, many change the character of their diet for one more stimulating. The diet of the people of the United States is already too stimulating, without any *increase* of stimulus. We already use by far too many condiments, as well as too large a proportion of animal food. Better abandon all condiments but *salt* ; and, where practicable, all drinks but pure water of the temperature of the surrounding streams.

In confirmation of these views, and instead of encouraging the use, even of an increased proportion of animal food, the Committee of the Massachusetts Medical Society, in their late Report, (an interesting volume of 190 8vo pages,) expressly say : "It is rather necessary to encourage the use of vegetable food among a large portion of our citizens. To the young and vigorous, this should be especially recommended." But they add that more care is desirable "in the selection and preparation of vegetable food."

The Boston Medical Association, convened in Boston, June 25th, 1832, UNANIMOUSLY direct as follows :—



"They recommend that violent and sudden changes should not be made in the habits of living, of those who have hitherto enjoyed health, any farther than to reduce such habits within the limits of caution, if they have been irregular or excessive. Those persons who are accustomed to live without stimulants, should not now resort to them."

The Board of Health in Montreal, recommend

"No alteration to be made in the mode of living, except as regards quantity, viz. not to eat unless the appetite be keen, and even then not to gratify the appetite to its full extent. Cucumbers, Melons, and Radishes, and *all green fruits*, are decidedly injurious."

A writer in the National Gazette, who has thoroughly investigated the subject of Cholera, both of this country and India, says :—

"To prevent the accession of Cholera, care must be taken to avoid every article of diet that may tend to create acidity in the stomach or bowels, such as unripe and acid fruits of all descriptions, turnips, radishes, &c. Avoid rancid bacon, rancid oil, sour milk, sour cream, and all indigestible food. Food of any kind that a person knows does not agree with him, should be avoided. *All persons should live sparingly, and avoid any food in great quantity.* A bland, abstemious diet should be preferred, consisting of small quantities of well-dressed meat, fowls, fresh fish, rice, potatoes, dry toast, &c.—sedulously avoiding late hours and hearty suppers of every kind, and if supper at all, let it consist of a little weak tea, or warm milk and water, a little plain bread or dry toast, &c. Fruits of all kinds should be avoided at the latter part of the day or evening; also, sour wines, strong liquors, &c."

Dr. Blicke gave it as his opinion, before the English Westminster Medical Society, that excessive eating is one of the strongest predisposing causes of the Cholera. In proof of this position, he adverts both to the quality and the quantity of food taken by the free livers in Paris, where that disorder has proved so mortal, as being monstrous in the extreme. "The quantity of food consumed by a Parisian male or female," of that class, he says, "is, without exaggeration, twice that of a London drayman." The Cholera has raged not a little among that class.

Not unlike these are the views of the Consulting Physicians of Boston :—

"In a disorder which affects the stomach and intestines, all

attempts at prevention would be useless, without a most strict attention to food.

"*Excess of solid food* is a sure preparation for the disease. The best articles of food are bread, eggs, fresh meat, fresh fish, rice. Perfectly good and thoroughly boiled vegetables stand next, as potatoes, asparagus, etc. All uncooked vegetables, as salads, are dangerous. Fruits, unless very fine, had better be avoided. Strawberries, taken by themselves, or with the addition of a little wine, are the least likely to do mischief. Pastry, preserves, pickles, scarcely need be mentioned as requiring a total prohibition."

But I forbear to quote farther on this point at present—a point conceded by all, or nearly all, whose opinions are of any value. This certainly does not look much like that *kind of good living*, into which many plunge to save themselves from *Cholera*.

Others increase the number of their meals ; or, what is the same thing, eat between meals. This is pernicious. There are few who do not already eat three regular meals in 24 hours, and there are few adults who ought to eat oftener. But whether the number of our meals be two, three, or five, let there be no eating at other times.

An opinion has gained currency, that in order to resist disease effectually, we must keep a full *stomach*. Hence arises much of that eating between meals, which is nothing less than one form of an *irregularity* always reprehensible, but especially so when practised in the face of a violent epidemic disease.

The stomach, like every part of the system which is essentially muscular, needs intervals of rest. It should no more be kept perpetually in action, than any set of the large muscles. We should think a man mad, who should compel himself to support a considerable weight on his shoulders *for days together*, or even for 24 hours. Yet it is almost equally unreasonable to keep the powers of the stomach in constant requisition, and the system will sooner or later suffer for it.

A French lady was suffering from indigestion ; she applied to a physician, who, on taking her case into consideration, found that however her disorder might have originated, it was kept up by constantly *plying the stomach*. How great was her surprise, when, instead of a long and sage prescription, the son of Galen only observed, with a



smile, "Madame, your stomach is *fatigued* ; you must let it rest !"

But there is no rest for the stomachs of those who are among the sick, *or who fear they shall be*. Under the idea of living well as a preventive of Cholera, many are guilty of that irregularity which is a sure *preparation* rather than a preventive. I am sorry to say that the advice of some of our physicians is construed by many into a license to this effect.

Nor does *good living* consist in *substituting food for rest*. No error is more universal than that of eating and drinking, when the system only demands mental or physical rest. Thus the inexperienced or timid, who are fatigued with their labors in the sick room, resort at once to food, if not to stimulating drinks. Many, if not *most* persons of this description, not only eat *oftener* in such circumstances, but in greater than the usual *quantity*. Thus they break in upon their ordinary habits, and impose an increased task upon a *debilitated organ* ; for the stomach always sympathizes with the suffering system. In both these points of view they render themselves more susceptible to disease than before. And if under such circumstances disease is contracted, it is always apt to put on the form of the prevailing epidemic. There is no doubt but a very large amount of sickness and death have their origin in this source. People under these circumstances, often complain that they cannot sleep, if they lie down ; and that they may, therefore, as well sit up. This is not true. A recumbent position will rest the *body*, if not the *mind* ; and thus do some good. At all events, the practice of eating, as a substitute for rest, is wretched.

Is it not truly surprising that we impose a task upon our own stomachs, which no person of experience ever presumes to impose on a horse, or ox, or any beast of burden ? While we are compelling a beast to a severe day's work, do we feed him more highly than usual ? Never. He is sometimes fed better the day before, but never, by any person of experience, during the hours of excessive toil. Yet the *owner* of the beast is very apt to eat in proportion to his labor. Indeed it is a common remark, that the harder we work the more we should eat.

The truth is, that both he who is idle, and he who labors

to excess, should eat *little*. He who exercises both his body and mind rationally, and in due proportion, avoiding excess, demands, as a general rule, the most and strongest food. In proportion as he departs from this medium, either by exercising the mind more, and the body less, or *vice versa*, or by inaction or excessive labor of either or both, just in the same proportion should his diet be light, and less than usual in quantity.

But what is the common practice? The harder men labor, the more they eat. And especially at the close of a day of severe toil, when the stomach in kindness to the individual is disinclined to food, how often is it goaded and spurred on by stimulating drinks, till a morbid appetite is created, and a load imposed which is wholly unreasonable, and which if it do not cause nightmare and apoplexy, at least produces disturbed and unsatisfying sleep, as well as plants the seeds of incipient disease!

The wiser and more experienced attendants of the sick, take care to pursue a regular course in regard to food and drink, and, if possible, sleep. But if their sleep is interrupted, they do not expect an extra meal or two, or a quantity of punch or bitters, will compensate for the loss. They know the loss of sleep is an *evil*, and they embrace the earliest opportunity of correcting it; but they know well, too, that to load the stomach with food under these circumstances, would only be an *additional* evil.

That a person may safely eat a *very small amount* of food, during a long night's attendance at the sick room, I am far from denying. But anything more than a little light food taken once during the night, with water for drink, will generally be hazardous.

What then shall we say to those who go so far beyond these limits as to ply their stomachs with food or stimulating drink, or some medical mixture, every hour, or half our? The practice is ruinous.

On this point I am much pleased with the views of Dr. Mantell:—

“Temperance in mind and body is as important as cleanliness; excess of any kind is most injurious. The most simple and nutritious diet is the best. The rich can obtain and select what they please; but the poor must do the best they can, and to them



this advice is particularly addressed. Avoid spirits; instead of spending your pence on gin, put them in the Savings' Bank. But mental is as necessary as bodily temperance; suffer not your passions to be over excited; guard against being overcome by fear; nothing produces such depressing effects, and renders the body so susceptible of disease. The only charm which a medical man has against infection, is confidence; he visits the most loathsome diseases with impunity, because he has no fear. And what have you to fear? A man with a water-proof coat defies the storms and rain; so he who, by attending to the above simple rules, maintains his body and mind in a sound state, may be considered cholera-proof, and need not fear the invasion of the enemy."

It may not be out of place to observe that the habit of *eating something*, the moment any disagreeable sensations are perceived, is early formed. Many families of children never think of going to church or school, without a supply of aromatics, or some other eatable. Fennel, cinnamon, cloves, orange peel, and a hundred other things, are thus swallowed to afford a little temporary relief;—always, however, at the expense of healthy digestion.

The reader will observe that it is *acid, crude, and unripe* fruits, and *green or unwholesome* vegetables, which are so universally condemned. These are always bad, but especially so when there is such a tendency to derangement of the stomach and bowels.

The Report of the Massachusetts Medical Society shows that *bad diet* is by no means confined to the poor; but that while "crude fruits and indigestible vegetables," used as they are by great multitudes, are very fruitful sources of mischief among all classes, "the variety of rich dishes used by the luxurious" are (so far as they are indulged) equally so. Addison somewhere said, that when he saw a table spread with a great *variety*, he used to fancy he saw gouts, dropsies, and a host of other diseases, lying in ambush among the dishes. In like manner, and with much greater propriety, might a lively imagination see *Cholera* in all its horrors lurking about a table set in the present fashionable manner. A variety of high-seasoned dishes, at the same meal, has always been regarded by the medical world as injurious.

While it is admitted on all hands that if we use *unripe* fruit, or bad vegetables, we must inevitably suffer, it is

also admitted that *bad cookery*, even of *good vegetables*, is of evil tendency. Vegetables, for example, which are *boiled*, should be *thoroughly* boiled; and not merely *half* cooked. *Meat*, rarely cooked, *may* be salutary; it is the contrary, however, with vegetables.

There is one very common error, which it were highly important to correct. *All* fruit, whether ripe or unripe, is supposed to be hurtful when stomach or bowel complaints are prevalent. This is not so. If some physicians, either as individuals, or as acting in a public capacity, have gone so far as to inculcate this idea at the present time, it is probably because there is so much danger of our going to excess. The abundance which the people of this country enjoy, exposes them to excess in the use of *fruits* and *food*; and excess in quantity is no less injurious than error in quality. But the Boston Report, already so often referred to, says expressly: "*The temperate use of good and ripe fruit will be found salutary.*"

Let the reader observe, however, that the fruit must be *good* and *ripe*. Strawberries are one of the wholesome fruits which the Author of nature has given, and when perfectly ripe, and all their juices well developed, must, in small quantities, and eaten as a part of our regular meal, be salutary; and so far from producing disease, tend to prevent it. It is even believed by many that coming, as they do, at a season when there is a tendency to bowel affections, not only strawberries, but many other fruits are kindly and providentially designed as a prevention of disease. Still (allow me to repeat it), great caution is necessary. They should not be eaten between meals, nor after a full meal of other food; because in this way there is danger of loading the stomach, or of disturbing it in its functions.

The juices of summer fruits are not so well developed in some seasons as in others. Perhaps the present season is unfavorable in this point of view. However this may be, one thing is certain; there have been no strawberries in market at the present season, one fourth part of which were fit to be eaten under any circumstances. Those which appeared to be *ripe*, were not *good*. The same is true, though not to the same extent, of cherries. Let people then beware.



One cause of the inferior quality of fruits in market, is a cause which always exists, viz., the foolish demand for everything *early*. This, of course, *tempts the seller* to bring vegetables and fruits which are unripe and unwholesome into market ; and things have, in this respect, arrived at a strange pass. All this prepares us for Cholera.

If ripe and sweet, and their juices well developed, strawberries, whortleberries, blackberries, bilberries—and, in their season, apples and pears—may be eaten moderately *as food* (I mean as a part of our meals), whether Cholera prevails or not. They would even operate as preventives. Their wholesome nourishment and cooling juices would probably supersede the use of too much salt, high-seasoned, and stimulating food ; and of harsh or stimulating drinks. Of cherries and currants, we should be more cautious. The stones and skins of the former are decidedly injurious, if eaten ; and the keen acid of the latter, even when fully ripe, is not safe except in extremely small quantity.

So much has been said of cucumbers and melons, that it is doubtful whether any good will be done by adverting to the subject at present. [But I must be permitted to say, at the risk of being tedious, that the former, as commonly eaten,—that is, both *unripe* and *uncooked*, are always injurious. What other vegetable do we eat both *green* and *raw* ? Did we eat them when they are ripe (not decayed or putrescent) the case would be altered. As now used, they are *always* productive of disease ; *this* year, they may be of *death*.

Potatoes, which appear early in market, cannot, in general, be ripe, and are highly improper for culinary use. Indeed the same remarks will apply to almost every esculent vegetable. If they are fit to be eaten before they are ripe, why did the Author of Nature make arrangements to have them ripen ? Or rather why should not that which is now their immature state, have been constituted their maturity ?

Of apples, pears, peaches, &c. a judicious and learned physician says that he never knew them hurt anybody (if used properly) after the first of October. This is sufficient to show how much error, in his opinion at least, prevails on *this* subject.

Much has been said by a few physicians, *theoretically*, in favor of spirituous liquors in small quantities as a preventive of Cholera. Wine, especially *port wine*, has been sometimes recommended. But a better view of the subject is now taken by almost every *practical* physician, at least in this country. To show clearly what the views of the wisest and most experienced physicians are, on this point, it will be necessary to cite the following authorities. In doing this, however, I shall probably incur the charge of occasionally repeating what has already been said, and of introducing other subjects occasionally, as dress, diet, &c. But my apology is, a wish to give the *real sentiments* of those whose language is quoted. When we extract an insulated sentence or paragraph from any writer, there is more danger of misrepresenting him than when we introduce the whole paragraph with which it stands connected.

Dr. Bronson writes from Montreal as follows :—

“Excess of every description has been followed by almost certain death. The least irregularity in diet or drink, whether in quality or quantity, too severe or protracted exercise, bodily or mental, or exposure to a hot sun, &c. &c. have rarely been unattended with injurious or fatal consequences. Those who have presumed on the vigor of their constitution, or yielded in the slightest to an unhallowed appetite, have generally paid the forfeit of their lives. On the contrary, those whose constitutions had not been previously impaired by intemperance of any species, whose habits during the epidemic were sober and regular, whose bodies were not debilitated by too protracted exertion, whose minds were undisturbed by apprehension, escaped almost to a man.

“Cholera has stood up here, as it has done everywhere, the advocate of temperance. It has pleaded most eloquently, and with tremendous effect. The disease has searched out the haunt of the drunkard, and has seldom left it without bearing away its victim. Even moderate drinkers have been but a little better off. *Ardent spirits in any shape and in all quantities have been highly detrimental.* Some temperate men resorted to it during the prevalence of the malady as a preventive, or to remove the feeling of uneasiness about the stomach, or for the purpose of drowning their apprehensions; but *they did it at their peril. It is believed never to have done good, but nearly always injury.* The slight indigestion which was so common, was best relieved by regulating the kind and quantity of food, and by great moderation in the use of the ordinary drinks.”



Nine physicians of New Bedford unanimously say :—

“Every species of excess will prove prejudicial by producing general debility, which is the principal predisposing cause of the disease under consideration. With reference to the use of *ardent spirit as a preventive of Cholera or any other disease*, we are of the opinion that it possesses *no such property*. On the contrary, we believe that the use of it *will increase the liability to diseases of every kind*, and render them more unmanageable and fatal when contracted.”

Dr. Rhinelanders advises, as “the best means of preventing an attack, *entire abstinence from spirituous liquors*.”

The Boston Consulting Physicians say with truth, that it is “a fact established by the experience of all Europe and Asia, that ‘the Cholera attacks the tippler,’ and makes him his first victim. A little excess, even in wine, exposes to the disease. Liquids of *all kinds* should be moderately used. The safest are common tea, and teas made of domestic herbs, taken warm. *Acid drinks* are pernicious. Cold water, if pure, may be taken in moderate quantity; but when the weather is hot and the thirst great, the mouth, the hands, and the face, should be previously washed.” But how much of the wine commonly used in this country is *not acid*? And if “common tea,” and herb teas, and “cold water,” are *SAFEST*, why resort to those which are *LESS SAFE*? When these cease to quench human thirst, then a reason may exist why we should resort to others. But the experience of the Montreal physicians, according to their Reports, ought to settle the question forever.

In closing these remarks on temperance, it may be well to observe, that a rational confidence in God, with devout submission to His will, together with a steadfast determination to perform our duty towards our fellow men, even under the worst circumstances, will have no small influence, as facts have proved in Montreal, in preventing this disease.

#### CAMPBOR AND OTHER AROMATICS.

Aromatics, such as camphor, ammonia, &c. whether taken, or carried about our persons, are perfectly useless, if not mischievous in their tendency. A belief in their efficacy as preventives has opened a door to a speculation in the former article, which is to be regretted. All the cam-

phor in the United States is useless either as a preventive of Cholera, or a disinfecting agent. Neither are its curative powers of much value. It only stands in the way of more efficient remedies. That my views in regard to this and other fancied preventives are not singular, might be shown from eminent and multiplied authorities; but I will only quote the opinion of Dr. Bronson:—

“Fires were kindled and cannon and musquetry discharged here during the height of the epidemic, to disinfect, as it was said, the atmosphere. These means have been often used for the same purpose during the raging of pestilence, but with no known advantage. Tar and sulphur were burned with the same design, and with a similar effect. Camphor was a favorite article with the timid; that is to say, with a great part of the community. It was put into a bag and worn round the neck; it was carried in the pocket; it was sprinkled on the handkerchief. If two passed each other in the street, the nose was diligently plied with the camphor bag by the respective parties. Every beggar or unfortunate emigrant was supposed to personify the Cholera, and render the camphor bag an indispensable companion. It would have been well had these ‘preventives’ been attended with only negative effects. It is the opinion of some of the physicians, that they were sometimes positively injurious. Some of them exhale noxious fumes, which, when respired, act injuriously upon the system. The effluvium of camphor is powerful and penetrating, which cannot but do harm when constantly in contact with the sensible olfactories. The same objection applies to all those substances which give out a strong and disagreeable odor.”

Is there nothing, then, in the whole range of *medicine* which can be used as a preventive of the Cholera? Is this the impotence of the Healing Art? After physicians have devoted years of days and nights to the study of *the materia medica*, can they do nothing to shield man from the attacks of one of his most formidable foes?

It is not the legitimate office of drugs and medicines to *prevent* disease. They are reserved for a last resort. To *prevent* disease, requires proper exercise, air, food, drink, &c. But let us hear Dr. Kane on this subject:—

“Are there preventives, and if so, what? The answer to this question is, *no*, save in regularity of habit; avoiding as far as possible all powerful impressions, either on the body or mind, and dispensing with the use of medicine, unless directed by a physician. Much injury has been done, in the opinion of the physicians, by medicines being used by way of prevention as preparation, and by fear.”



Five eminent physicians of Montreal, Drs. Nelson, Holmes, Caldwell, and the two Arnolds (and I believe Dr. Stephenson), use the following language :—

“Our injunctions therefore, are, that no medicine be kept in the possession of any individual for the purpose of being taken, either as a precautionary step, or before calling in medical aid.

“That no person feeling indisposed take medicines from anybody but a professional man.

“That no person should rely on the efficacy of any of those drugs that are vended as specifics ; every one of our fatal cases having been preceded by the exhibition of these drugs, or the opium pills, so generally supposed to be the first step towards the cure, the folly of which cannot be too strongly reprobated.”

Dr. Bronson says :—“The disastrous effects of that tampering with medicine which is so prevalent during the ravages of an epidemic, was here witnessed on an extensive scale. The evil was of such a serious magnitude, that an injunction was laid on apothecaries not to sell drugs except to the order of a physician. It was a common thing, in the commencement of the sickness, for persons in health to take vomits, purges, &c. as preventives. *The consequences were often fatal.* In such instances an attack followed. Let the *wares of the apothecary* be reserved for the hour of decided sickness. Then, if adapted to the case, they cannot be too promptly used.”

The Boston Medical Association, the physicians of New Bedford, and the Hartford delegation to New York, concur in similar sentiments.

Among the persons of distinction, who were martyrs to supposed preventive measures, in Montreal, were Hon. Mr. Beaujeu, Stephen Sewall Esq., M. M'Intyre Esq., and L. Adams Esq. whom I have before mentioned.

#### EARLY HOURS.

It seems unfashionable to retire early. Dr. Good, a physician of London, in giving directions to a gouty patient, advised an early hour of rest. “How early ?” said the patient. “By eleven o'clock,” was the reply.

Are our cities very far behind London and Paris in this respect ? Do we not hear of parties commencing at 9 o'clock in the evening, or even later ?—In a civilized, and, above all, in a *Christian* community, such things are intolerable ; and I am surprised that the good sense of our citizens should not regard it so.

*One hour of sleep before midnight is worth two afterward.*

So says an old maxim ; and, like many other maxims, it appears to be founded in truth.

Much is said of the value of early rising. But it seems to me people will never be persuaded to this, until they can be *dissuaded* from sitting up till midnight, or after. Most of those who *retire* early, *rise* early. In connection with the importance of avoiding the night air, and of retiring and rising early, those who have had experience in the Cholera observe : "Early hours are important, for exposure to the night air generally brings on the attacks. Persons are taken more often at night, than during the day." Another says : "Return home at an early hour, in order to avoid the cold and damp of the night air." A third suggests that "Early to bed and early rising is one of the golden rules for the prevention of Cholera."

If the Cholera should become common in this country, and pay us visits every few years, some of our *present fashions* in regard to food, drink, dress, and hours of retiring and rising, will be set aside. Mankind will be driven to many habits which were *always* for their interest as well as happiness. In this view, "the Cholera," as some have suggested, "may be a blessing." It will speak to erring nations and individuals in a language that cannot very well be misconstrued.

#### FLANNEL.

I have been forcibly struck with the importance of wearing flannel, even in the warm season, by finding it very extensively used in this way in the Southern States. In a climate as changeable as ours—and exposed to diseases which depend in a great measure on a want of proper action of the skin, or a suppression of that action, it seems to me indispensable. The testimony of high authority is in favor of its use, especially at the present time. A physician of much experience in Cholera thus remarks : "Flannel should be worn next the skin and over the bowels, and often changed. The stockings should be often changed, and the feet kept warm and dry." Another says : "Let the clothing be flannel, to keep up an action upon the skin, and let a belt of the same material be worn." A third advises : "Above all, be clothed sufficiently warm." Similar views are inculcated by the Boston Reports, to which I have already referred ; by the "Boston Medical and Surgical Journal," the "Journal of Health," &c.



## FREE PERSPIRATION.

The Cholera is most apt to make its attacks at evening. There are various reasons for this. The system is weakened ; it is of course more irritable—and sometimes the debilitated stomach is loaded with as great an amount of food, as if it were vigorous. Besides, few people are so vigorous as not to be a little *feverish* towards evening.

But one fruitful source of such results, is, the *checking of the perspiration* by the damp evening air. Evening concerts, parties, balls, or meetings of any kind, where the assemblies are crowded, are pernicious, because the air becomes very impure : and they are rendered much more productive of disease, by the common practice of rushing out without sufficient additional clothing.

But perspiration may be checked in a thousand other ways, such as by taking cold drinks ; eating food too cold ; going with wet feet ; lying on the ground, as is done by some laborers, &c.

It is also of importance to avoid too much exposure to the hot sun in the middle of the day, and to avoid sleeping with windows open at night.

## FREE RESPIRATION.

*Respiration*, no less than *perspiration*, should be free. This injunction may be deemed *idle* by many ; but I am fully convinced that to a very considerable portion of those who have intercourse with the sick, *it is not so*. Wherever a disease is supposed to be contagious, or in any way communicable, it is a very common thing for respiration to be more or less constrained. It is not merely a few children or timid adults to whom these remarks are applicable ; there are *multitudes* who *hold their breath* or *muffle their faces* as a means of security from contagious or infectious disease. I have known individuals hold their breath, till the effort became excessively painful.

Hardly anything can be more injurious, or better calculated to defeat our very purpose. The health of the system is finally impaired, it is true, if the lungs do not receive a full supply of pure air. But when air is rendered impure in the sick room, as must necessarily often be the case, shall we mend the matter by holding our breath ? Obviously not, as every one ought to know.

The quantity of air received should be *increased*, not *diminished*. True, more impurity is thus inhaled ; but there is also an increase of *pure* air in the same proportion, to counteract its tendency ; besides which, we have the positive and decided advantage of a free and unconstrained motion of organs which were *made* to move, and whose liberty cannot be invaded without suffering the penalty which God in nature has annexed.

If the motion of the lungs is obstructed in *any other* manner, evil results follow in a greater or less degree. That most unreasonable modern fashion—I was going to say *cursed* one—which denies to half the world the free and healthy exercise of the lungs, heart, and stomach, even while in health, is still more to be lamented in its bearing on the present case. For whether the disease be Cholera or something else, let it be remembered, the free action of the lungs cannot be *hindered* by *stays*, or *corsets*, or *tight belts*, except at our peril.

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#### MANAGEMENT OF THE FIRST SYMPTOMS.

It seems that Cholera rarely, if ever, makes a sudden attack, without being preceded by certain *symptoms*, which, if attended to in proper season, can be removed. These are a looseness of the bowels, a sickness of the stomach, dull pains in the limbs, heaviness or giddiness, and sometimes pain in the head, a feeling of oppression, uneasiness in the chest, heart-burn, colic, &c. When these symptoms come on, the person should “omit the use of solid food, and take as little as possible of anything into the stomach. A proper nourishment in this state, is arrow-root and rice water. For drink, small quantities of pure water, when water which is pure can be obtained, or tea. Let him abstain entirely from medicine ; and in the meantime it will be well to send for a physician.” The advice of Dr. Kane and others, who have had experience, is : “Immediately on becoming affected with sickness, medical advice must be resorted to, and no beverage of any description whatsoever taken, until leave be had from the medical attendant.” When we have put ourselves under the care of a medical man, we should continue to follow his prescriptions solely.



## MEDICAL TREATMENT.

It scarcely need be said, that in regard to *external* treatment there is an almost entire uniformity in practice throughout all countries which the Cholera has visited. This consists simply in endeavoring to restore action and heat to the surface and extremities, which is done by various means, but dry heat seems more generally preferred. Dry flannels, hot bricks, blocks of wood, &c. are used,—and sometimes mustard is sprinkled over the flannels which are used. A gentle perspiration seems to be more desirable than profuse sweating.

The *internal* treatment which has been most successful in Canada, consists in a total abstinence from all liquids, from the moment a person feels himself threatened with an attack. The two Dr. Arnolds, of Montreal, say :—

“The peculiarity of our plan, and to which we ascribe our whole success, consists in obtaining the arrest of the urgent symptoms by the least possible doses of opium, *and absolutely doing nothing*. The plan is too simple to be generally credited, but hundreds have experienced the efficacy of it.”

This plan, in substance, is warmly approbated by Drs. Nelson, Holmes, and Caldwell, of Montreal ; and also by Dr. Stephenson, though the latter sometimes added assa-fœtida. As to the results, Dr. Stephenson observes :—

“I have saved every case of Cholera to which I have been called *within one hour* after the attack, when no *collateral circumstances* have baffled my efforts—such as much cold fluid taken, cold water, cider, vinegar, and the nostrums of apothecaries—and when the patients have *closely adhered to my directions*.”

Dr. Kane says that the Montreal physicians consider the Cholera as strictly a curable disease, if early and properly attended to. If called in the early stage, they are able to save nine in ten ; if not, however, they cannot save one in ten. Other physicians make similar statements.

From the Ganges to America, opium, in greater or less doses, has been the sheet anchor of physicians ; but it is a two-edged sword, at once curing and killing the patient, unless under judicious management. It should be observed, that some practitioners consider the small quantities of opium which they give, as less liable to be rejected when pulverized finely, than when taken in pill. But they reject, *almost* with one voice, the use of brandy and

other active or acrid stimulants, and of liquids generally. A few still speak of the importance of *laudanum*; which, owing to the small quantity in which it may be given, is probably less objectionable than any other liquid. But Dr. Wakefield, of London, gives neither opium nor laudanum, but only an alkaline mixture; and yet, out of 96 cases, he lost but 3. *Many reject laudanum.*

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In review of the subject, as here presented, I must be allowed to close with the following extracts from the Report of Drs. Jackson, Harlan and Meigs, to the Sanitary Committee of Philadelphia, on this subject, presented immediately on their return from their late mission to Canada.

"During the prevalence of the epidemic constitution or influence, a general predisposition exists in the whole community, from which very few individuals are exempt, productive of a liability to the disease.

"This predisposition is manifested by embarrassed and difficult digestion, sense of heat, fulness, uneasiness or pain in the abdomen, irregularity of bowels, a furred and pasty tongue, with frequency of cramps or constrictions in the muscles of the extremities, especially at night.

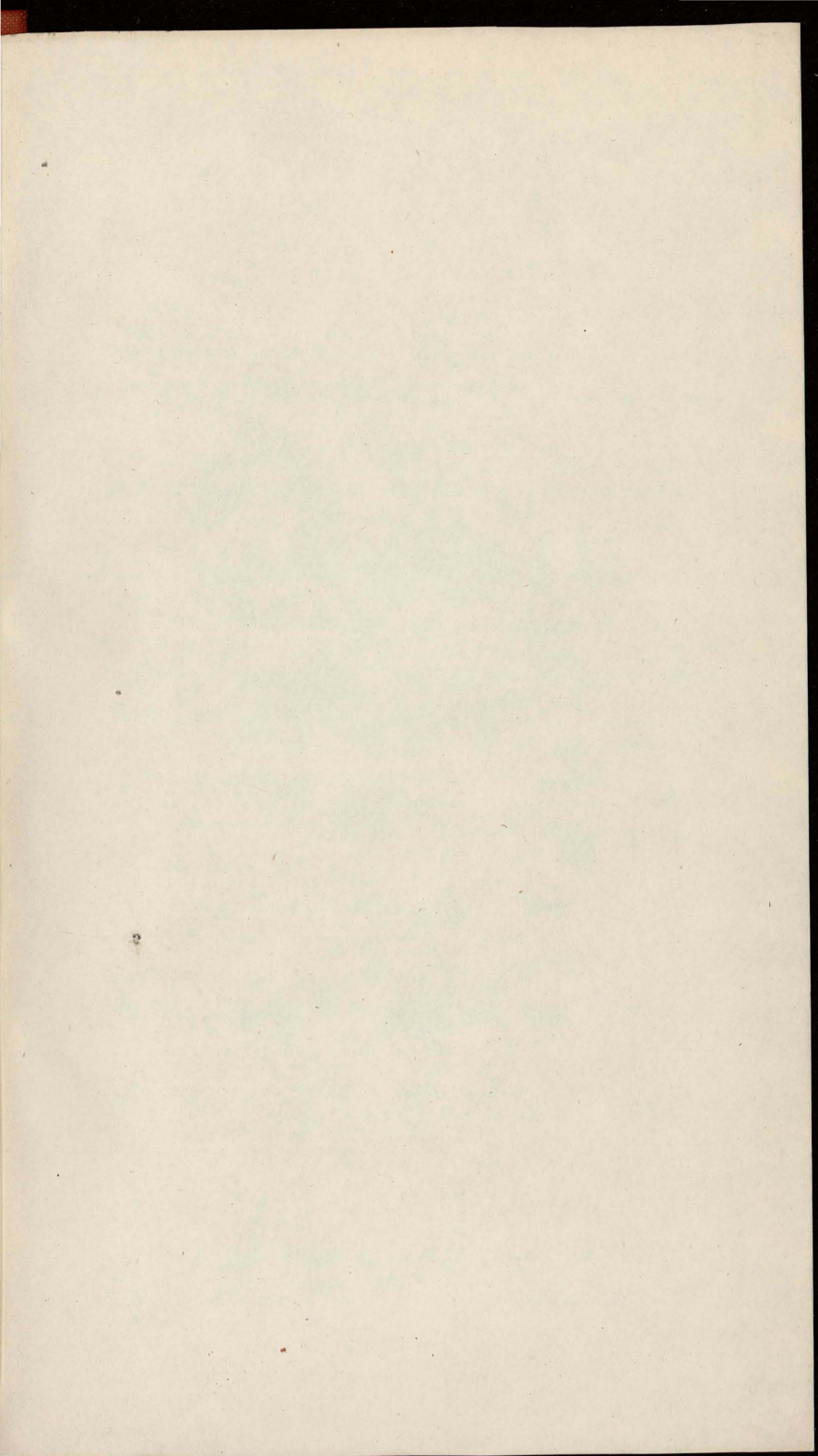
"This state of predisposition will not give rise to an attack of the disease, without the application of an exciting cause.

"The exciting causes of the disease are moral excitants, especially fear and anger; intemperance in the use of fermented and spirituous liquors, or in eating, overloading the stomach; acid drinks, or large draughts of cold water; the use of crude indigestible food, whether animal or vegetable, particularly the latter; excessive exertion or fatigue in the heat of the day; exposure to the night air, sitting in currents of air, and particularly sleeping with too light covering, and with the windows raised, except the rooms are very small and confined. Most of the attacks occur in the night, from 11 or 12 o'clock to 3 or 4 in the morning.

"Prudence in living during the epidemic period, which continues from six weeks to three months, the wearing of flannel particularly on the body, keeping the feet warm and dry, the avoidance of improper food and drinks, tranquillity of mind and body, are almost certain guaranties against the assaults of the disease, and disarm the pestilence of its malignity.

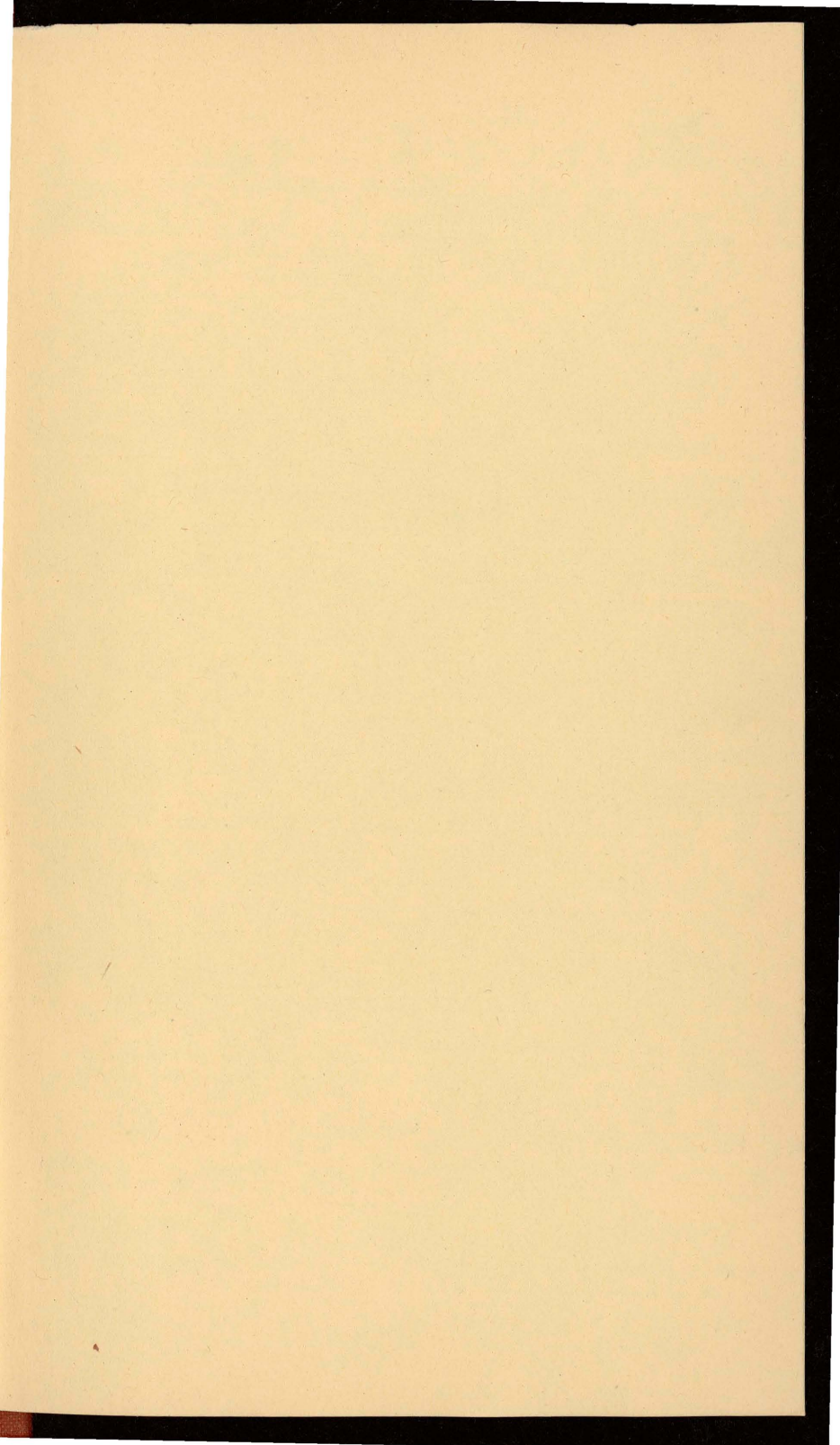
"The disease, when abandoned to its course, passes through different stages, in all of which it is easily controlled, except one—the cold stage, or period of collapse, and which is in almost every instance preceded by the symptoms of the forming stage, when the disease, if timely treated, is arrested with facility."















Physician, *Rational view of the spasmodic cholera...*,  
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