



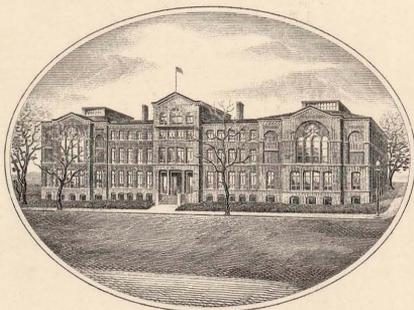
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CHABERT - ASIATISCHES CHOLERA

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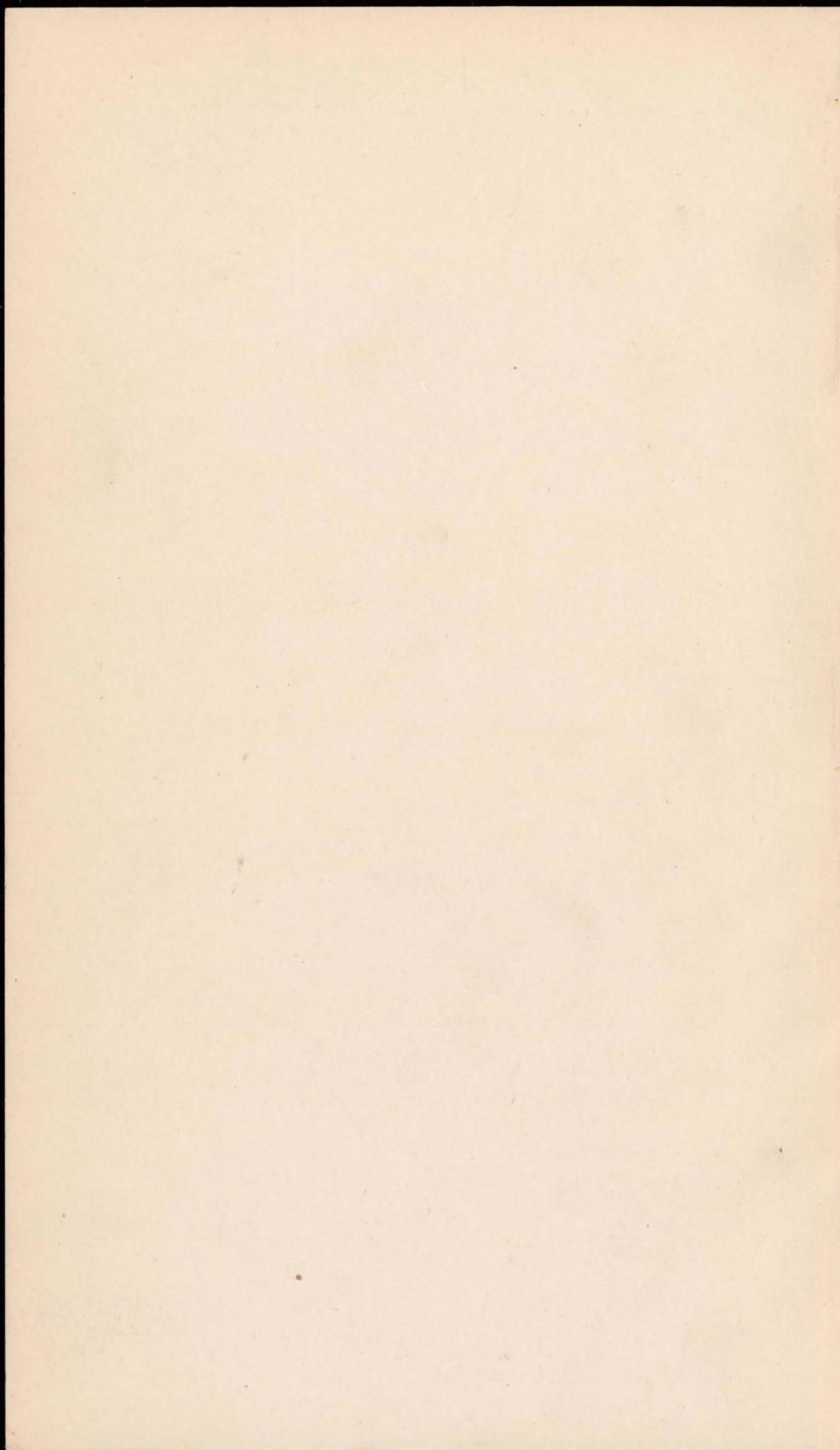


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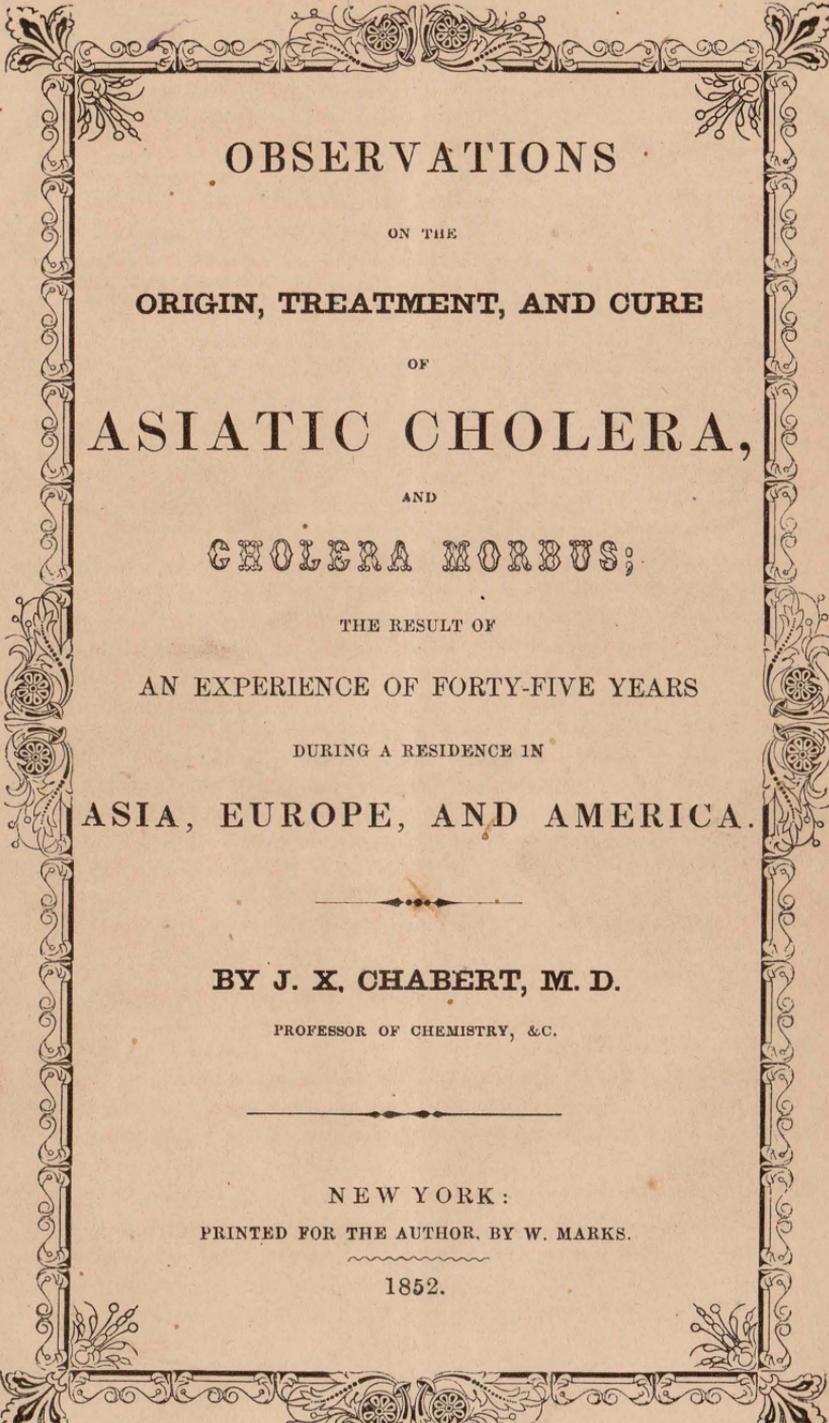
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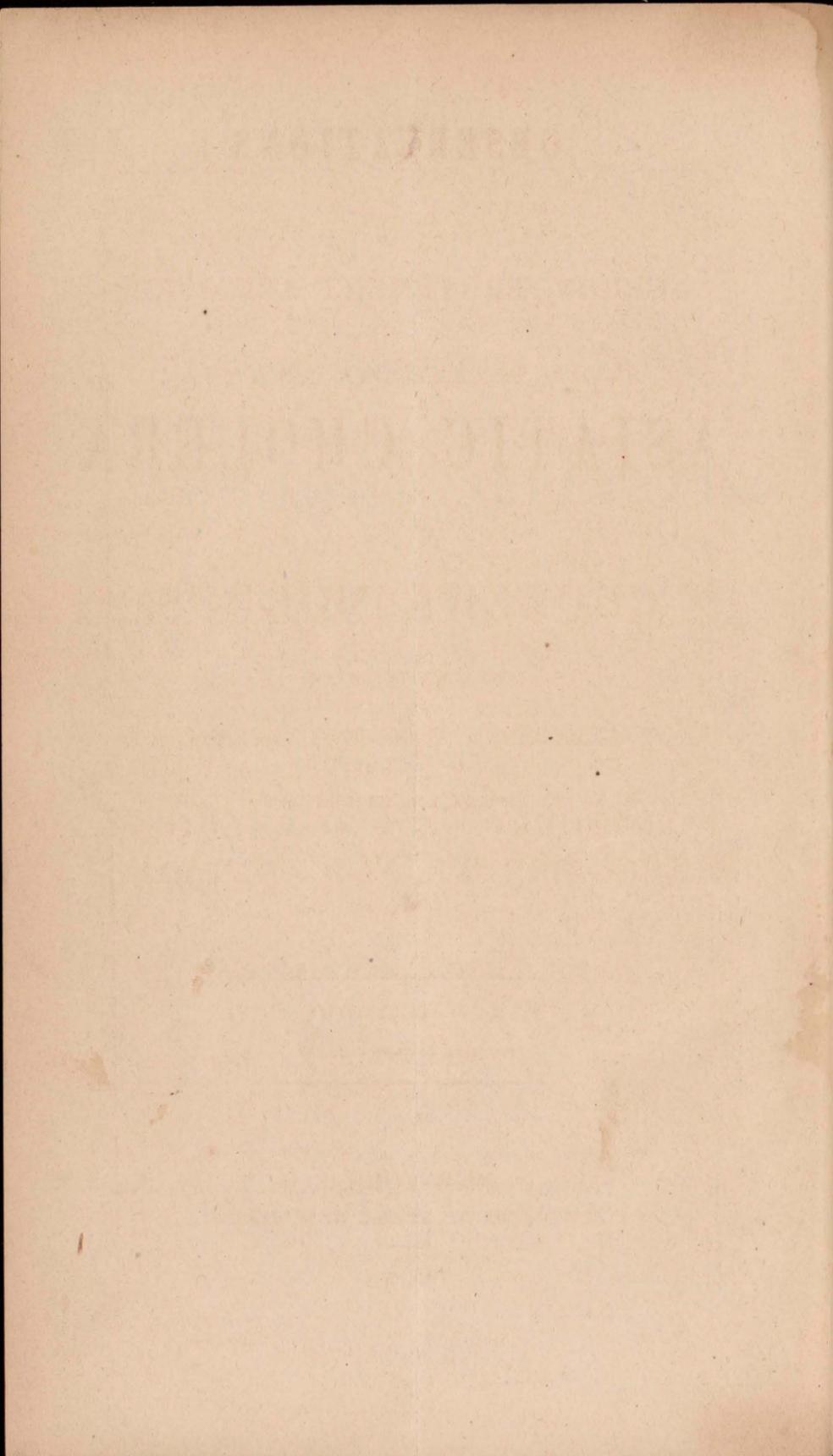
OBSERVATIONS
ON THE
ORIGIN, TREATMENT, AND CURE
OF
ASIATIC CHOLERA,
AND
CHOLERA MORBUS;
THE RESULT OF
AN EXPERIENCE OF FORTY-FIVE YEARS
DURING A RESIDENCE IN
ASIA, EUROPE, AND AMERICA.

BY J. X. CHABERT, M. D.

PROFESSOR OF CHEMISTRY, &C.

NEW YORK:
PRINTED FOR THE AUTHOR, BY W. MARKS.

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OBSERVATIONS

Annex

ORIGIN, TREATMENT AND CURE

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CHOLERA MORBUS

ANNEX

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W. H. C. CHESTNUT, M. D.

PROFESSOR OF MEDICINE, &c.

NEW-YORK:

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INTRODUCTION.

BEFORE presenting to the profession and the public my ideas of the origin and cause of Asiatic Cholera, I deem it proper to explain my reasons for doing it now, and also why I have not done so *before*.

I am a native of Avignon, in the South of France, and have travelled over the four quarters of the globe, but am now a citizen of the United States of North America, and have been so for the last twenty years. It would be indeed surprising, if, during a series of travels over so extensive a portion of the globe, I had not encountered that fatal disease, Asiatic Cholera. Long before it made its appearance in Europe, I was in Asia and India, when it was raging with fearful mortality, and I had therefore peculiar and ample opportunities to observe its origin, cause, and progress, and the nature of the practice pursued, both by the native physicians and the surgeons of the British army, in their vain efforts to subdue and exterminate the scourge. I took every opportunity to investigate all its peculiarities, and to seek out a mode of treatment which would have the effect of arresting the fell destroyer. The result of these observations will be found in the following pages.

My reasons for presenting this paper *now* is that, in anticipation of another visitation of cholera in the United States, every physician can have it in his power *instantly* to place a person attacked with it out of danger, and arrest the disease; and I trust that physicians, in other parts of the world, where the disease now exists, will also give it a faithful trial. I believe, in this treatment, I have discovered the only reliable method of arresting this deadly poison, and I will present it to the profession, provided the Government will give me a reasonable compensation after it has received a fair trial, as I am now so far advanced in years, and so situated in life, as to be able to set at nought the opinions of all those who may wish to traduce my character or motives.

My reason for not having given it to the profession before, is, that previous to the cholera of 1849, in New-York, although I had saved

the lives of thousands during the cholera of 1832, 1834, and lastly 1849, yet I did not feel so perfectly satisfied with its certainty of arresting the disease, as to warrant me in giving it publicity as I will now do. Next, I wished to test it in a public manner, under the authority of the Common Council of the City and County of New-York, and for that purpose petitioned the Corporation to that effect, guaranteeing to cure *ninety-nine* out of every hundred persons attacked, provided I was sent for immediately on the first attack, and the Corporation would pay my expenses in doing so, as I had not the means; but they declined, and I had the only resource left, to confine it to my own immediate practice. I would have given it even then to the profession, had not my experience in 1832 and 1834 warned me against it. In that year I gratuitously gave the medicine I then used so successfully, to numerous physicians, who, in order to break down my reputation, most shamefully adulterated it, and rendered it inert, and I was fearful to entrust it to them again, lest, by not using proper discretion in the treatment, they would thus cast odium on me. I wished first to convince them of its practicability, and then let them employ it themselves. But I will now present it to the profession and the public at large, so that the proper remedies may be placed in all our police stations, public institutions, &c., where it can be readily procured and instantly administered on the spot where any person in future may be attacked; and I trust, when the time comes for its employment, that physicians will throw aside all prejudice, and having only in view the wish to preserve life, will use it in good faith and become satisfied of its miraculous power, and also award to me whatsoever meed of praise or censure may be my desert.

I feel no fear for the result, for if it is adopted and used by discreet and scientific physicians, it will, in almost every case, insure perfect success.

J. X. CHABERT, M. D.,

Professor of Chemistry, &c.

ASIATIC CHOLERA.

CHOLERA ASPHYXIA, SPASMODIC CHOLERA, OR EPIDEMIC CHOLERA.

It has been usual with writers on Cholera to dwell at large upon the supposed origin of the disease, and follow with an almost tiresome minuteness its migrations from that portion of the hemisphere where it is supposed to have originated. As I cannot perceive that any useful object can be obtained by these details, I will not swell the volume of this pamphlet by repeating them; but, were their publication useful, I should readily be excused for the omission from their having been so repeatedly laid before the public. I will now, as briefly as possible, state my opinions, supported by such facts as are well authenticated, as to the primary cause of the disease, under the names of Asiatic Cholera, Spasmodic Cholera, and Cholera Asphyxia, and then enter at once *in medias res*.

The Spasmodic Cholera was for many years considered to be *endemic*, from its not having extended beyond the boundaries of that portion of the globe where it is supposed to have first originated. But those natural boundaries, which, it was supposed, would secure the rest of the world from a similar affliction, were soon as nought in its way—the giant monster strode triumphant over the burning desert and boundless ocean. Europe soon felt the scourge—Science and Art stood paralysed, while conjecture filled the throne of reason, and, aided by ignorance, added to the already too numerous victims of the direful malady.

Cholera! what is it? The question has been asked innumerable times. I will endeavor to give my opinion of it in as concise a manner as possible.

Cholera is the first stage of a fever of a particular type, viz: intermitting or simple continued fever. It is also endemic or epidemic.

Fevers pass through various stages: the collapse stage, the cold or shivering stage, the hot stage, and the sweating stage. They are always uniformly linked together, and although putting on such different appearances, are, in fact, only the separate links of one disease; each however, assumes its distinctive character, and when either of them is morbidly increased, may be called or mistaken for another disease. The first of these stages which I will consider,

viz: the collapse stage, or cholera morbus,—does not advance to the shivering nor hot stage; if it does, it ceases to be cholera, but is fever. During the prevalence of epidemic cholera, numerous instances are on record where patients have been visited at night and found in the collapse stage of fever, and been reported as cases of cholera, which in the morning were found in the advanced stages of fever. When cholera or fever are either endemic or epidemic, if a person resides in a place, the atmosphere of which is impregnated with the miasma or poison which constitutes the element of these diseases, he inhales it, and it will display its power and virulence in proportion to the quantity he has imbibed, and generally during the following night; he may sink under the first stage, the choleric collapse stage, or rise into fever. The disease develops itself in its various stages, in proportion to the extent the poison has acted on the system: If it has gone through such a change as to render the blood too thick to flow through the lungs, then a fully developed case of collapse ensues, and this is Cholera Asphyxia. The blood cannot pass through the veins to the arteries; it collects and swells out the veins, producing the blue color. The vomiting and spasms coming on, the blood in the veins is squeezed with such force as to force from it its serum, and hence the profuse cold clammy sweat. The crasamentum is left in the veins in a solid or tarry mass, incapable of motion; hence, there is no pulse, as there is no blood in the arteries; there is lassitude, debility, oppressive breathing, caused by the solid part of the blood remaining in the veins and the serum expelled. The other symptoms are connected with the stomach and intestines. The symptoms connected with either are of too much importance to be overlooked; they spring from the same poison, the functions of digestion become deranged, consequently it does not furnish secretion to the bowels, and the consequence is stagnation of the blood in the veins. A process of fermentation then commences and goes on in the stomach and bowels; the abdomen becomes swollen, and they are more or less irritable in proportion as this process of fermentation progresses, till at length nausea sets in, followed by vomiting and purging, and if there is not immediate evacuation of the stomach and bowels, spasms set in. No secretion of any kind is carried on in fully developed cholera, because the blood does not circulate; the blood is too thick, but the serum is squeezed out of it at each spasm or fit of vomiting. Observe the chain of actions; the poison inhaled into the system, the blood thickened, the digestion stopped, fermentation progressing in the alimentary canal, the mucous membrane consequently irritated, and vomiting, purging and spasms, all combining to produce collapse.

Whether the extension of the cholera was the effect of contagion alone, noxious exhalations from the bowels of the earth, or

decaying vegetable and animal matter, is still a subject of dispute, which I do not pretend to settle; but my experience and observations, which will readily be allowed to have exceeded those of most physicians in this country, will, I hope, entitle me to the privilege of giving my opinion. From an accumulation of facts and circumstances, which have been observed by others as well as myself, I am strongly impressed with the belief that the disease is at once aerial, epidemic, and contagious. That it is aerial and epidemic is plainly proved by its irruption in towns, and even islands, which had had no communication with places where the malady existed; numberless facts have no doubt come to the knowledge of my readers which will at once convince them as to its contagiousness. It usually makes its first appearance in the vicinity of rivers, lakes, or marshes. I account for this by supposing that the miasma adds to the specific gravity of the lower strata of air, which naturally gravitates to those depending situations in which water is lodged. As the air becomes more loaded with the deleterious particles, those basins or natural cavities in which its vitiated portions had collected, overflow, extending the disease far and wide, aided undoubtedly by the influence of contagion.

What is Cholera? I believe Asiatic Cholera is, as I said before, an aerial epidemic, or a *poison* diffused through the atmosphere. THIS POISON is a *small green insect, invisible to the naked eye, but easily to be seen under the action of a powerful microscope.* This insect is inhaled from the atmosphere, and by fixing itself into the mucous membrane of the stomach and lungs, produces irritation and inflammation of the lungs, stomach and small intestines; which irritation is transmitted to the liver, through the duct leading from the stomach to the gall-bladder, and extending itself to the spine, brain and heart, through the irritation of the nerves, and thus producing all the symptoms of cholera. Of the existence of this green insect there is no doubt, *and only where cholera exists.* I have made numerous experiments in regard to them. Among the most important is this: in a place where cholera exists, I bare my arm to the shoulder and hold it over my head for some time; when I take it down, it has a perfectly natural appearance, but, on submitting it to the action of the microscope, it appears to be covered with millions of these green insects *alive.* They will not be found where cholera does not exist in some form. These insects are no doubt the exhalations (malaria) of decaying animal and vegetable matter, caused by the heat of the sun acting on low, wet, or marshy places, or where the ground is subjected to frequent changes from wet to dry. These exhalations, by the pressure of the atmosphere from above, are compressed into a stratum of but a few feet from the surface of the earth, and by their continually increasing density, are naturally forced out laterally in different directions,

generating the disease at the place of their origin, and, being carried along by various currents of air, scatter the disease far and wide till it becomes epidemic. It has also been proven by like experiments, that the atmosphere above this stratum of insects is perfectly free from the contagion of cholera—as, for instance, when it comes in contact with an abrupt ridge of mountains, it will not ascend them, but will girt their base and pass through the defiles into the valleys beyond—and these propagate the disease in every direction.

This is also illustrated in a philosophical point of view, by the well known *Cave of Dogs*, in Italy, so fatal to dogs, while man enters unharmed, merely because of his superior stature, which enables him to breathe an atmosphere untainted by the impure or poisonous vapor which lurks at the bottom of the cave. So, in endemic cholera, there is a certain line of altitude beneath which disease will certainly take place, in proportion to the susceptibility of the inhabitants dependent on the conditions before named. It is rare that the disease ever rises above this line; and, with this knowledge, it behoves the inhabitants to remove from an infected district, and get to some place of greater elevation.

“In the blood is the life of man;”

to contaminate or poison its source is death. The cause of the blue appearance of persons attacked with cholera, the cold sweat, the watery evacuations from the stomach and the bowels, and the peculiar pinched up and shrunken appearance of the face and hands of cholera patients in its last stages or collapse, is caused by the separation of the constituent parts of the blood. The serum or watery part of the blood separates from the crasamentum or red and solid part, is discharged from the pores of the skin in the cold sweat, and from the stomach and bowels in the watery discharges, leaving the crasamentum behind in a solid form, choking up the veins, and thus suspending the circulation of the blood and producing death.

From the foregoing observations, it is obvious that the great indication in the cure of cholera is to prevent the separation of the constituent parts of the blood, and thus prevent collapse—that being done, the cure is easily perfected by the other means described in the article, “TREATMENT OF CHOLERA,” (to be published hereafter, when the various Governments have compensated me for my discovery,) but the remedy must be applied immediately on the spot, or as soon as it can be procured, without waiting till the patient has been taken home, or to the hospital, if success is desired.

The remote or predisposing causes of the disease are a residence in low marshy situations, on the borders of rivers, lakes, or other collections of water; insufficiency of the necessaries of life, confinement, living in ill ventilated rooms, or holds of vessels where a large number of persons are congregated, exposure to night dews, intempe-

rance, fear and enervation from whatever cause. It is true, that persons who are perfectly temperate, and who are not otherwise subject to predisposing causes, are frequently attacked by the disease, and even fall victims to it; but these instances, when compared to the intemperate who fall victims to its ravages, are rare. It has been observed that very few addicted to intemperance, recover. Where fear exists to any extent, the body is easily influenced by the poison; death, under these circumstances, finds numerous and easy victims. Amongst the exciting or immediate causes of the disease, may be enumerated all those substances which directly or indirectly act intensely on the stomach or bowels. For the most part the disease shows itself when indigestible, acrid or heavy food has been taken, such as pork; pastry prepared with rancid lard or butter; the roe of fish, especially when these are salted and damaged; wines which have not properly fermented, or which are in a state of fermentation; acid or high colored wines; iced drinks; acid or watery fruits, such as melons, cucumbers, pine apples, and, lastly, poisonous mushrooms, irritating poisons, emetics, drastic purges, or even laxative medicines when injudiciously administered.

To these causes, which act directly on the stomach and intestines, may be added the following, which act primarily on the skin and lungs, on the venous and muscular system, and on the nerves: excessive heat, and especially the heat of mid-day alternating with the coolness of night; laborious work; excessive mental exertion; violent fits of passion; the depressing passions; the drying up of old ulcers, and the retrocession of chronic cutaneous diseases.

I will now enter upon a part of my subject, to which I most particularly call public attention—I mean the *premonitory symptoms* of the disease, for I am convinced, that if they were extensively known as such, many valuable lives might be saved, as during their existence proper remedial means rarely, or I may say *never, fail* to prevent an actual attack; hundreds, nay thousands have, from their ignorance on this point, been torn from the bosoms of their families, and descended to an untimely grave. The importance which I attach to these symptoms being given correctly, will be my excuse, should my description of them be considered too minute.

The premonitory symptoms of the disease precede its actual attack from a few hours to several days. Sometimes, and that too in the most severe cases, the disease comes on suddenly and without any previous warning; the vomiting at times preceding the purging, coming on instantaneously, as if by a simultaneous contraction of the abdominal muscles; the evacuations from the bowels being occasionally no less sudden or unexpected. The following are, however, the most common premonitory symptoms: a sensation of uneasiness over the whole body, accompanied by a sweet and disagreeable taste in the mouth, the tongue having a pasty feel; cold

chills, which are principally felt along the spine; then general weakness, but which mostly affects the arms, legs, and loins; difficult respiration, with a heavy beating of the heart—this state lasts for a greater or less period, but an hour rarely elapses before it is followed by a state of anxiety and lassitude—the skin being covered by a cold perspiration, but particularly that of the face and extremities; there exists a strong desire to vomit, and then sudden and copious ejections, which are at first composed of ill-digested alimentary matter, but soon assume the appearance of dirty water, and sometimes of a perfectly limpid fluid.

There is a sensation of extreme heat and violent pain in the *epigastric region*; tightness and contraction of the *hypogastrium*; violent colic, with copious and frequent ejections of matter similar to that vomited; tenesmus, or violent bearing down in the fundament; the lower and then the upper extremities become cold; the features are sunk and livid; there is a remarkable alteration in the voice from the very beginning, and towards the latter stages it appears to be formed much lower down in the throat than naturally; the nose becomes pinched up and the eyes are sunk and surrounded by a dark ring; burning and insatiable thirst, the patient seizing the vessel in which drink is presented to him with a convulsive grasp, and swallowing its contents with avidity, especially if it be cold; but like a drop of water thrown into a blazing furnace—the consuming fire is damped but to burst out with renewed vigor—the calls for cold water are more frequent and energetic—no quantity seems sufficient—all the patient's energies are concentrated in the reiteration of this one prayer; willingly would he barter his worldly wealth for one long, cold, and unceasing draught. It has excited the wonder of others as myself, that the mental functions could, while the body was writhing in so constant and almost unceasing pain, remain intact; nay, in some cases, which I have seen prove fatal, there have been an elevation of mind and loftiness of language (unconnected with delirium) quite superior to any that had existed previous to the attack.

There frequently exists a horror for all kind of food; flatulency, with a rumbling noise in the stomach; the pulse, at first frequent and contracted, soon becomes small and deep-seated; the patient wastes with a rapidity which is perceptible to the by-standers; complete or partial prostration (and sometimes fainting); frequent hiccup; the eyes haggard—at first bright, and then dull and void of expression; and in the last stage the body is generally cold and blue, in proportion to the severity of the cramps which have existed—the patient remaining immovable on his back. This state terminates either in the speedy death of the patient, or recovery from the disease. Where cerebral congestion, whether spontaneous or produced by the injudicious use of stimulants, exists, the eyes become bright and restless; there is more than a natural heat in the back of

the head; the language is incoherent; the vomiting being more constant than in other cases; and the patient requires to be narrowly watched lest he jump out of bed.

The duration of the disease varies from a few hours to eight or ten days. It has been observed, that during the prevalence of the cholera, almost every individual has more or less felt the effects of the vitiated state of the atmosphere, which produces, besides indescribable sensations of uneasiness (wholly unconnected with fear), spasmodic twitchings in the muscles forming the calves of the legs, in the soles of the feet, and sometimes in the hands and arms.

The coldness of the extremities, which is perceptible from the first, continues to increase and spread over the whole body, but with no moisture in the skin, until the severity of the pain and cramps force out a clammy sweat, which soon becomes profuse. The profuse cold sweat is one of the most pernicious and fatal symptoms of the disease, both from the effect it has of exhausting the strength and abstracting heat from the system. In most cases the stomach is so irritable, that everything that is drunk is spouted out immediately, without straining or retching. Towards the end of the disease, when it is about to terminate fatally, the respiration is laborious, the abdominal muscles not participating in the act.

PROGNOSIS.

There is a probability of a fatal termination when the person has been long exposed to the predisposing causes, where the attack has been sudden; where the extremities retain their livid appearance after the cramps have ceased; where the patient remains perfectly quiet and listless after throwing his arms and legs about the bed as if in want of air, the face, tongue, and neck being cold; the respiration being laborious and performed wholly by the pectoral and intercostal muscles, the movement of the sternum and ribs being, of course, almost horizontal, as the patient lies on his back; complete or partial deafness, with ringing in the ears; spasms and pain in the region of the kidneys; where from plethora or abuse of stimulants cerebral congestion exists, the lips alternately appearing livid and of their natural color; whilst in this state the irritability of the stomach is greater than in any other, the slightest movement exciting efforts at vomiting, succeeded by more or less cramps, the bowels being in such a torpid state as not readily to be excited to the evacuation of their contents. This last symptom is, however, not constant, for I have seen some cases where the cerebral congestion had ranged to a high degree, attended with frequent though not copious dejections, which were towards the last mixed with blood.

The symptoms are favorable when the disease does not come on suddenly; where the constitution is good and not undermined by previous illness or debauchery; where the vomiting is easily allayed,

and the cramps are not severe or frequent; and lastly, when the matter voided upwards or downwards assumes a green tinge, and is accompanied with fœtor.

In the Edinburgh Medical and Surgical Journal for the month of July, we find under the head of "Medical Intelligence," an article from the Archives Générales de Médecine, comprising an "Historical Examination of the Epidemic Cholera at Paris: and an account of the different modes of treatment during the different forms and periods of the disease; and an estimate of the result of these methods."

From this I shall give a condensed view, for the information of the medical readers.

The sanatory state of the large hospital in Paris, called the Hotel Dieu, always furnishes the exact standard of what is going on in the rest of the city. After the disease became very prevalent, this establishment was crowded with the sick from all the neighboring districts; it became necessary to increase the number of medical attendants accordingly. All the heads of the faculty being assembled, it was resolved that a certain number of beds should be allotted to each; and in consequence thereof, nine physicians and three surgeons divided the 168 beds contained in two wards, making to each 14, or 7 men and 7 women. These physicians and surgeons were MM. Petit, Racamier, Guenèa de Massy, Husson, Majendie, Honoré, Bally, Gendrin, Cailard Depuytren, Breschet, Sanson. Each head of the service had his internal pupil and his externals. Very varied prescriptions, very different methods, Measures executed at the same time, or at different hours, produced a degree of confusion which caused much suffering to the patients, and which the zeal and intelligence of the most able assistance could not prevent. On the 3rd of April, after which it became imperative to distribute the patients in all the wards situate on the left bank of the Seine, 388 patients had been treated in the wards of St. Martin and St. Monica, and next day 281 deaths were to be divided among the twelve physicians specified above. Some days after, one-half at least of the residual 107 had expired, and 60 only quitted the hospital recovered.

It would be too tedious and un consequential here to give an abstract of the pathological principles on which the treatment was founded by those gentlemen. It is enough to know that it led them astray from facts—obstinate, palpable facts; and that whilst they theorized and experimented, death was commenting on their sagacity. The first patients brought to the hospital were in a state of deep collapse, of general cold, with the circulation almost at a pause, the large arteries alone presenting feeble oscillations. The beats of the heart were scarcely heard; and the ear, applied to the chest, perceiv-

ed only a dull sound, denoting that the ventricles did not expel the blood they contained. These patients expired speedily, whatever efforts were made to warm them; and many thus died in 6, 8, 10, or 12 hours at most. To re-establish the circulation, to induce reaction in the sanguiferous and nervous system, and to put a stop to that state of slow asphyxia which directly threatened life, M. Majendie administered several glasses of spirituous punch, spoonfuls of hot spiced wine, frequently repeated, and Malaga and other spirituous wine.

Many physicians regarded the disease as characteristic of the painter's colic; hence they employed sulphate of alumina, sulphuric lemonade, and other remedies which peculiarly modify the intestinal tube when under the influence of the oxides of lead. This method MM. Gendrin, Sanson, and others, employed without any success.

M. Depuytren, considering the most frequent symptom that of the colliquative extenuating diarrhœa, as the one which most urgently demanded the attention of the practitioner, prescribed acetate of lead, and the preparation of opium. He believed that these remedies, administered in large doses, would victoriously oppose the extreme determination to the small intestines, and re-establish the balance by the sole operation of their astringent and sedative properties. This theoretical view derived more or less plausibility from analogy; but it gave way under clinical experiment, and it was requisite to abandon it, after some trials, conducted with becoming precaution.

The therapeutic measures underwent several modifications, suggested by the leading symptoms. Each physician had a peculiar method; and in these we observe great diversity, if not in substance, at least in form.

In the refrigerating or cold period, M. Majendie gave internally diffusible stimulants; MM. Petit, Honoré, Gendrin, and several others, employed frictions of the trunk and extremities, with hot aromatic liquors; some physicians placed the patients in a vapor bath; others enveloped them in woollen coverings, and conveyed under them, by means of appropriate tube, a large supply of alcoholic vapor. M. Recamier employed cold affusion for one or two minutes over the whole surface. The extremities of the patient were surrounded with hotbricks, hot smoothing irons, bags filled with hot sand, bottles of hot water, &c.

At a period less advanced, when the patient, yet retaining a little heat, was suffering from vomiting and purging so profuse as to threaten immediate dissolution, means also very varied, and suggested by some peculiar systematic notions, were adopted. Thus the physiological physicians applied leeches to the epigastrium, opened the veins of the arms, administered soothing drinks, and, in short, studied to allay the irritation of the digestive apparatus. Others, attaching less importance to these symptoms styled inflammatory, did not hesitate to employ means more active, more direct,

and more likely to augment the disturbed action of the disordered organs. This revulsion, as the followers of M. Broussais termed it, brought about most happy changes. Tartrate of Antimony, (tartar emetic,) in the dose of two or three grains, Ipecacuanha in a quantity varying from fifteen to eighteen grains to a scruple, and even more, was administered boldly, and with the happiest effect. In this M. Recamier imitated the Germans, who have long boasted the superiority of this substance in the treatment of dysentery, and other acute affections of the intestinal tube. The vomiting increased at first, soon ceased, and with it the intestinal discharges; and gentle uniform warmth then followed, the skin was covered by sweat, the cramps ceased, and tranquillity of the system was restored. These effects, obtained in a great number of patients, induced almost all the other physicians to employ the same remedy, and at present ipecacuanha is in frequent use in the treatment of cholera. Under the influence of the same idea, the same physician employed the sulphate and the carbonate of soda and magnesia, in ordinary purgative doses. The choleric diarrhœa was by this simple remedy very promptly controlled, and we owe to it numerous cures.

A view is then taken of the method employed by each of the physicians of the Hotel Dieu, and the results obtained in their different departments.

The first seven beds of the St. Martin Ward were under the care of M. Honoré. He distinguished two well-marked periods in the progress of cholera, and prescribed the following treatment. During the attack, that is, when vomiting and looseness, cramps, refrigeration, and more or less aphonia, were urgent, friction on the extremities and the præcordial region from half hour to an hour, with flannel soaked in a mixture of two ounces of camphor, and half a drachm of tincture cantharides; 2nd, To administer every half hour enemata, consisting of rice decoction 1 pint, extract of rhatany 2 drachms, laudanum 40 drops, and ether 4 drachms, the whole divided into 4 enemata; 3rd, Every half hour a spoonful of Malaga wine; 4th, Carbonated water, or sugared tea for drink; and 5th, the anti-emetic of Dehaen, with 15 drops of laudanum, and half a drachm of the anodyne liquor of Hoffman. If in spite of all these means the vomiting continues, a large blister was applied to the middle of the back, and in the night Malaga wine and the syrup of diacodium, and revellents applied to the feet.

About forty patients, of both sexes, were treated in the beds allotted to M. Honoré, during the first seven days of the epidemic, and half of the number expired. After this period, that is, during the succeeding eight days, nearly the like number of patients entered the same division, and the results were the same.

M. Gendrin, who comes next in the numerical series, distinguishes four degrees of the disease: 1st, precursors, lasting for days; 2nd,

vomiting and cramps; 3rd, violence of the face and extremities; and lastly, reaction. He prescribes sulphate of alumina and barley water; syrup of quinces in a glass of cold water; a bladder full of pounded ice to the belly, and the extremities rubbed with balsam floraventi and traumatic alcohol; and finally, the cold affusion in the stage of stupor and asphyxia. These measures not proving successful, he varied his directions, and ordered bleeding, revellents to the inferior extremities, and the internal use of ipecacuanha. It is stated that in the beds of M. Depuytren, occupied by a very great number of severe cases, more than two-thirds sank. Many of these cases were, however, brought moribund, or in a dying state. The treatment of this physician, beside the acetate of lead already mentioned, was cauterization of the epigastrium, mustard, alcohol, and fomentations covering the body, leeches, &c., &c. M. Petit, perhaps, was the first to entertain the opinion of acting in a continuous manner on the spinal chord, and producing changes in the phenomena of innervation. He consequently caused to be placed, along the whole of the spine, a piece of cloth, soaked in a liniment composed of one ounce oil of turpentine and a drachm of hartshorn. Over this was drawn a very hot smoothing iron. This produced speedy vesication. To this he adds hot bricks steeped in vinegar, frictions, mustard, laudanum, camphorated liniment, &c. His success, however, was like all the rest, showing a due proportion of loss.

M. Husson employed the diffusible stimulants, tonics, and external revellants, orritants. The unsuccessful results were very numerous, and other methods were practised. Leeches, bleeding, mild drinks, the anti-emetic portion of Riverius; then, protracted baths, anodyne clysters, &c.: all this proved equally unsuccessful; for, on the fourteenth day of the epidemic, of 140 choleric patients on his beds, he counted only five or six established cures.

M. Majendie gave his patients punch, and, like all his colleagues of the Hotel Dieu, witnessed more than one-half of his choleric patients expire. Occasionally he substituted for the punch a vinous liquor sugared and spiced, with a tincture of cavella. This treatment has been followed by a degree of reaction which it is often difficult to control. The circulation, excited by alcohol, soon produces congestion in the head and digestive apparatus, and more than one patient sank with delirium, and afterwards deep coma.

M. Gueneau De Mussy modified his formulæ according to the particular cases which were presented; and recognizing the usefulness of a great display of resources against cases which the simplest examination showed to be fatal, he was contented to treat those which might reasonably become so.

M. Bally has tried the efficacy of many energetic remedies. Opium, given in large doses, by all channels, but this he very soon abandoned, as injurious in the period of collapse, and useless in

others. The sulphate of quinine, the croton tiglium, local and general bleedings, iced waters, and other means, were successively relinquished.

M. Recamier states that he has ascertained that opium, camphorated ether, acetate of ammonia, sulphate of quinine, and the other fixed or diffusible tonics, are absolutely useless in the blue period; and that sinapisms, and all the rubifacients, are equally unavailing. The blue period is, in his opinion, utterly beyond the resources of art, vital resistance is extinct, and the means employed serve only to accelerate death.

M. Breschet gave diffusible stimulants of every kind: he bled, cupped, and scarified the epigastric region, and gave cool liquors for drinks. He employed vol liniments, affusions, external revellents of every kind, but nothing in particular.

In conclusion, to establish in a general manner the value of the different curative methods adopted at the Hotel Dieu, and to avoid all unjust division of unsuccessful issues among the twelve heads of the service, we shall give the general results, leaving to each of these gentlemen to furnish the individual returns. Thus, on the 17th of April, at midnight, 1,771 choleric patients had been admitted into the Hotel Dieu; of this number 1,054 died, 344 went out cured or convalescent, and the residual 373 are still under treatment, and several must die. This shows that these deaths are in the proportion of two-thirds. The other physicians in Paris, adopted, generally the same method of treatment as that at the Hotel Dieu. Professor Chomel, M. Rullier, M. Lerminer, Dance, Rayer, Andral, Bouillard, Clement, Du Chatelet, Velpeu, Alibert, &c., all, all trod the same path, and, of course, all arrived at the same goal.

The Val De Grace and Gros Callou were under the immediate influence of M. Broussais. It appears that as late as the 9th of April, M. Broussais had not cured a single patient; and it is equally certain, that of 189 cases received at the Val de Grace, 36 had died; and yet it was eagerly announced in the journals that the cures were prompt and numerous. M. Broussais does not allow his patients to drink, but allows them fragments of ice to melt in the mouth. He employs astringents, and laudanum in clysters. He farther employs external means to restore heat, vapor baths, aromatic fumigations, hot dry frictions, hot cataplasms and sinapisms. Such is the treatment pursued by M. Broussais; yet, we have seen, not only are the results not more favorable than those of the other physicians, but, all allowance made, they appear to have been less so.

From the 1st of April to the 18th inclusive, 6,094 cholera patients have been admitted to the hospitals in Paris; 3,673 have died, 1,504 have gone out or are fully convalescent, and 837 remain under treatment.

From the various and opposite modes of treatment adopted in this disease, and many of them with success, one cannot help arriving at the conclusion, that the superinduction of any new action in the system will cure the disease, provided the vitality be not so far lost as to have become insensible to the impression of external agents, or the constitution so diseased as not to rally after the shock. The irritating, soothing, stimulating, and depressing plans have been put into practice in a number of cases, taken *en masse*, without discrimination, and still all with some success. That many, likewise, have been killed by these various treatments, can be matter of little doubt, where the degree of counter-irritation has been carried to an extent incompatible with human life, and bearing no proportion to the disease. That the wholesale plan of treating cholera should have been followed by, if not success, at least no unequivocally bad results, can only excite our surprise at the powers of nature, and still greater wonder that intelligent men can be found to put in practice such treatment.

I have now proved by an extract from a foreign journal, that the treatment of cholera was no better understood in other countries than in this. The practice of physicians in this country has been to dose their patients unmercifully with calomel, and what is still worse, calomel and opium; and without having recourse to other remedies. Without disputing the good effect which calomel may have when given early to expedite the recovery of the patient, should he get over the actual attack of the disease, I think it absurd to give it as a remedy for the disease itself; it may be advanced, and I readily admit the fact, that more patients have recovered in the hands of physicians generally, when calomel has been administered as a remedy. This does not arise from any specific action produced by the calomel to overcome the disease; but from the reaction which nature produces in the system, and which would, in two-thirds of the cases which occur, lead to a perfect cure. The grave does not owe half so many of its tenants to cholera, as it does to the mal-practice of physicians in its treatment. Time and future experience will, I have no doubt, bear me out in this statement. In cholera, the remedies which are given should from the nature of the disease be prompt in their action. Is it so with calomel, I would ask? And what is the action of opium on the system? Acting at first as a stimulant, it becomes a direct sedative, and requires to be frequently repeated to keep up its stimulating effects, the natural consequence of which is, that the disease is, as it were, paralyzed, (but not cured,) and that poisonous drug soon manifests its usual effects in the system; the patient falls into a state of lethargy, the victim of the most foolhardy ignorance. I have seen more than one case of this kind,

and that very lately. Should proof be necessary, I can easily satisfy the most sceptical. Those who have recovered where opium has been made use of, I can say with confidence, recover rather in spite of the physician than by his help.

I am decidedly averse to emetics in any state of cholera asphyxia. I have almost invariably seen their use followed by the most severe cramps, and the debility which they produce stands in the way of that degree of reaction which is necessary to effect a cure.

During the premonitory symptoms, I have invariably found the greatest benefit from the use of astringents, tonics and diffusible stimulants, in small doses, and frequently repeated; these usually prevent the further progress of the disease. The vomiting is the stage easily controlled by the judicious use of the mineral acids, and especially the nitric. Heat is to be restored to the extremities either by means of dry frictions or an embrocation made with the best vinegar and cayenne pepper. I do not approve of spirits for this purpose, as its speedy evaporation only tends to increase the coldness; flannels wrung out of hot vinegar to be applied to the abdomen, and to be repeated until the pain which usually exists in that region ceases; the cramps, when existing only in the extremities, can invariably be stopped by properly stretching out the limbs, and consequently extending the muscles. The most proper drinks for allaying the continual thirst, and those which exert the most happy influence over the progress of the disease, and which are most grateful to the patients, are warm lemonade and iced waters, given alternately, about every minute, by spoonfuls at a time. In giving ice, the object is to allay the burning heat felt in the stomach. Now, it is absurd to suppose that when it is put in the mouth and there allowed to dissolve, it can fulfil this object; for this reason, I prefer iced water. To prevent cerebral congestion, sinapisms should be applied to the extremities, but by no means to the chest; for when placed in this situation, they not only increase the sufferings of the patient to an unbearable degree, but add to the violence of the disease. During that stage of the disease where the cramps are violent, with inability to retain any thing on the stomach, and blueness of the extremities, all internal remedies are, to say the least of them, perfectly useless; it is only necessary in this stage to give the warm lemonade and iced water, and continue the extension of the muscles; the evacuations downward are to be encouraged, after which the patient is generally safe. Where the vomiting has existed a long time, and bilious matter is thrown off, a troublesome and sometimes fatal hiccup supervenes. These are the means that I have found the most successful in ordinary cases, but it sometimes assumes a form which baffles all the usual remedial means. In these cases I make use of a remedy perfectly different from any hitherto employed, and by means of which I can guarantee the recovery of ninety-nine cases.

out of a hundred, however bad they might be, provided cerebral congestion had not taken place.

I will present to the profession and the world a detailed statement of my successful mode of treating Cholera, when I receive from various Governments assurance of adequate compensation for my doing so, after it has been fully tested by them—they authorizing a commission to that effect, and at their expense.

J. X. CHABERT, M. D.

CERTIFICATES.

New-York, August 1st, 1832.

To Dr. Chabert:

We individually certify that we have made use of your diffusible stimulant in cases of asphyxiated cholera, and with surpassing good effect. Also believe it to be the best among the class of remedies that can be used in this disease.

CHARLES CLEVEE, M. D.,

Treasurer of the Medical Society of the city and county
of New-York.

WM. ANDERSON, M. D., LL. D.,

Of the Royal College of Surgeons, Edinburgh, Professor
of Anatomy, New-York, &c.

FRANCIS W. WALSH, M. D.,

Secretary of the Medical Society of the city and county of
New-York.

JOHN D. COUNSELL, M. D.,

J. F. DANIEL LOBSTEIN, M. D.,

Of the Civil Hospital at Strasburg in France, Member of the
Medical Societies of Paris, Philadelphia, city and county
of New-York. &c. &c., Physician and Practitioner of Mid-
wifery.

S. R. KIRBY, M. D.,

ALWYN BOGART, M. D.,

Member of the Medical Society of the city and county of N. Y.
(Copy.)

I certify that the above is a true and faithful copy of the original,
and which at the time I also willingly signed.

WM. ANDERSON, M. D., LL. D.,

Of the Royal College of Edinburgh.

Sworn before me this 24th of December, 1839,

A. L. AMOUREUX,

Commissioner of Deeds.

United States of America,—City and County of New-York.

On this twenty-fourth day of December, A. D. 1839, personally appeared before me, A. L. AMOUREUX, a Commissioner appointed by the Governor and Senate of the State of New-York, to take acknowledgments and proofs of Deeds, Wm. Anderson, M. D., LL. D., Professor of Anatomy and Surgery, of Rutgers' College, New-York, and duly acknowledged the preceding documents to be a true duplicate of the original certificate.

A. L. AMOUREUX,
Commissioner of Deeds.

New-York, September 10th, 1832.

To Mons. Chabert :

Sir,—We cannot withhold from you our sentiments in regard to the medicines you recommend for those under the different stages of Epidemic Cholera, and in conformity with the remarks of Dr. C. C. Yates, in his lately published pamphlet upon Asiatic Cholera, without the least hesitation assert that if your medicines were generally made use of, we should soon get rid of the dreadful malady. We were struck with astonishment while perusing the book of Cholera, published by Dr. Ashbel Smyth, of North Carolina, and lately from France, in finding the serious predicament in which M. Broussais of Paris has placed himself, as will be seen by the subjoined extract. "There is one example so noticeable that I think the cause of truth and humanity requires it to be particularly mentioned; invidious as this duty is, nothing but the celebrity of the author, in some respects well merited, and likely to produce an ill-founded reliance on the treatment commended by him, could induce me to perform so disagreeable a task. M. Broussais, to sustain his well known doctrines, asserts that he cured during the first period four out of six colorignes, and subsequently thirty-nine out of forty. It has been shown by the official documents of his hospital, signed by his own hand, that he has been on the whole much less successful than many other practitioners"—page 66. This is M. Broussais who attended the Prime Minister of France and other distinguished men of that nation. And astonished are we indeed, that our medical profession of New-York should blindly adopt such a practice as that recommended by M. Broussais, without being able to render even a plausible rationale for the use of *opium, ice, bleeding, cupping, scarifying, blistering, and burning*, in the present epidemic. We have to congratulate the public, however, that some of our intelligent medical men are beginning to take other views of this disease, and to treat it as one exclusively of the nervous system, which practice, when it shall become general, will certainly eradicate this tremendous sickness.

Yours, with consideration,

WM. ANDERSON, M. D.,
ALWYN BOGART, M. D.,
J. F. DANIEL LOBSTEIN, M. D.

Board of Health,
Paterson, New-Jersey, 12th Aug., 1832.

Mons. J. X. Chabert, Professor of Chemistry, &c.

Sir:—The bearer of this, D. Holsman, Esq., a member of our Board, has been requested by the Board to call upon you to ascertain your method of treatment of the Malignant Cholera, so far as you make it public, and also to obtain your price for your medicines or specific. You will of course be aware that all patients sent to our hospital are of the destitute class.

By the order of the Board,

JNO COLT, President.

New-York, 21st July, 1832.

Dear Sir:—I have taken the liberty of giving to a doctor of medicine, part of your medicine, but I hope you will excuse it, knowing the admirable effect produced by it. I was called to fulfil my duty as a clergyman to 34 Augustus street, where I found Mr. James Callagher in the greatest pains and cramps, and three or four men employed in rubbing with hot water, under the direction of Dr. Hogan. I told the doctor that I had a little of your specific in my house, and proposed to him to administer it to the sick. He consented to it, and I sent for the medicine. The doctor himself gave it to the patient, and in less than a quarter of an hour Mr. James Callagher was easy in his bed, and out of danger. When I approached him to excite him to give thanks to God for his recovery, he told me the last drinks stopped the cramps, and that was your antidote. You may suppose the blessing you have received from a family about to become desolate—from a family who expected to lose at the next moment their only support. As for Dr. Hogan, as much praise is due to him for his talents, activity, and condescension, as to any I know, and as such I must consider him a real charitable and learned man, who puts all prejudice aside when charity requires it. I cannot finish this letter without thanking you for your exertions, and praising God for your success in curing my friend the Rev. Timothy M'Guire, of East Broadway, Pastor of St. Mary's Church. I went to see him, and I was extremely pleased to hear from him that you were the instrument employed by God to preserve him for his congregation, as he had indeed a very severe attack. I hope you will not be offended with me for employing for the benefit of others, the little bottle that you sent me for my own use as a preventive; but, dear sir, I beg you to send me a little more, if you can spare it.

Respectfully, your most obedient,

FELIX VARELA,

Pastor of Christ Church, New-York.

The following are among a multitude of certificates rendered M. Chabert, from his grateful patients. The reader in perusing the certificates, will see the intrinsic character of cholera; they speak the feelings of the heart; and as a man, who had broken his arm would testify his complete recovery by demonstrating his power to use it, so, by the manner of these certificates, cholera is proven to be a disease of the nervous system, depending principally upon fear as its exciting cause

New-York, 23rd July, 1832.

I most earnestly take this opportunity to offer my thanks to Dr. Chabert, for the cure he has effected upon myself and wife, having cholera, &c. I have lost with this disease, within nine days, five of my children, and child-in-law, two in Reade, and three where I live, Madison corner of Montgomery. Had Divine Providence permitted that Dr. Chabert's advice had been followed, my children, who are now dead, would have been alive. As he has yet preserved their aged parents through scenes faintly shown, I recommend Dr. Chabert to the public.

WM. MCKINNEA.

New-York, July 28th, 1832.

Dear Sir:—I have been surrounded by death in my family and neighborhood, and render heartfelt thanks for the escape of myself, wife, and remaining five children, through the means used by you.

Respectfully, yours,

R. NESSELL, 208 Mott street.

To Dr. X. Chabert.

New-York, August 28th, 1832.

I, Edward Merry, residing at No. 19½ Cross street, feel myself in duty bound to bear my testimony to the exemplary philanthropy and skill of Dr. Chabert, in restoring me from a state of apparent death. I was attacked with the cholera, and the disease had proceeded to that state denominated asphyxia, when the Rev. Felix Varela, seeing my hopeless condition, recommended that Dr. Chabert should be sent for to see me. He immediately came, and by the administration of his remedies, through God, was the means of restoring me in a great degree: when numerous persons, physicians and others, and some one actuated by jealousy of his success, (for I can attribute it to nothing else,) administered to me some noxious drug, which threw me again into a state of utter helplessness. Dr. Chabert was again called, and some antidote destroyed the effect of it, and thus again raised me a new man. Twice has my life been saved by him; first the disease, secondly, from the poison given me. I am now at my work again in Mr. M'Queen's Foundry, enjoying good health.

EDWARD MERRY, 19½ Cross st.

Witness—PATRICK FEGAN, 19½ Cross street,

New-York, August 21st, 1832.

To Professor J. X. Chabert, M. D.:

Sir,—We, the subscribers, belong to Mr. Sabbaton's Iron Foundry and Engine Factory, in which there are usually from 70 to 80 hands employed, when shortly after the breaking out of the cholera in this city, although that would have been attended with heavy expense and our employment, still, to remain, appeared like death, for it was next to impossible to obtain prompt medical aid; and reflecting that independent of the number of shop hands, that including our wives and relatives, there were nearly 300 souls depending on our employment—our situation was indeed painful. In this state of suspense, two of the hands with cholera and several labored under premonitory symptoms.

Just in this state of things, which is nearly four weeks ago, we made up our minds to call on you, and after stating our case, you at once requested us not to leave our work, and that if we followed your directions, not one of us would suffer an attack, and gave us medicine accordingly. Before using your antidote several of the men were attacked with the cholera, more or less severe, but which were promptly relieved by your directions, and have worked ever since; and since that time not a single one of us have suffered an attack; and although some left the shop for different parts of the country on business connected with their occupation, and others for want of employment, not one has been sick. Under these circumstances, we cannot refrain from expressing our conviction that we owe our present state of perfect health to having adopted your method of preventing the cholera.

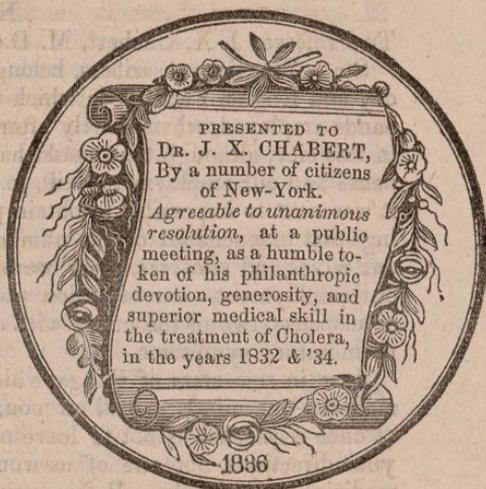
Isaac Marshall, J. J. Tobey, William Shaw, Jacob Vanderpool, John Riley, Frederick Janin, Thomas Wilson, Alexander Ewing, Frederick Gordon, Edward McKenney, Patrick Danvers, W. W. Butler, David Rice, John Larkin, Jacob Underhill, Nichols Messel, Henry Beasley, John Ewing, John Boyce, John Sweeney, Peter Sadley, John Thompson, A. Sanford, J. Felletier, John Maher, John Maher, jr., Patrick Ellis, Jacob Hagadorn, Michael Doyle, A. Farseilles, Thomas Marquis, &c. &c.

Copy of a letter voted by a numerous and respectable meeting of the citizens of New-York, held at No. 533 Pearl street, on the 10th August, 1836, for the following purpose:—

New-York, August 10th, 1836.

To J. Xavier Chabert, A.M., M.D., &c.:

Sir,—You will please permit us, through the medium of this meeting, to express our sincere thanks and warm approbation for your superior and philanthropic medical skill, as well as kind attention to the poor, during the cholera of 1832 and 1834, and also the



goodness you have since manifested, in assisting and healing many poor and needy persons of various maladies to which human weakness is subject. Attentive to your merits, we also take the liberty of presenting you with a gold medal, which you will please accept from the committee appointed for that purpose; and we trust you will find therein that token of gratitude which a few would ungenerously withhold, but which a grateful and enlightened people never deny to genius, no matter who may be the possessor. We also present you a lithographic likeness, published by the order of the committee; and furthermore you will not be offended, should they think prudent to publish these proceedings. Wishing you health and length of days, is the sincere desire of your many friends.

The above being moved and seconded, was unanimously carried.

A. Ross, Chairman.

PETER BYRNE, Secretary.

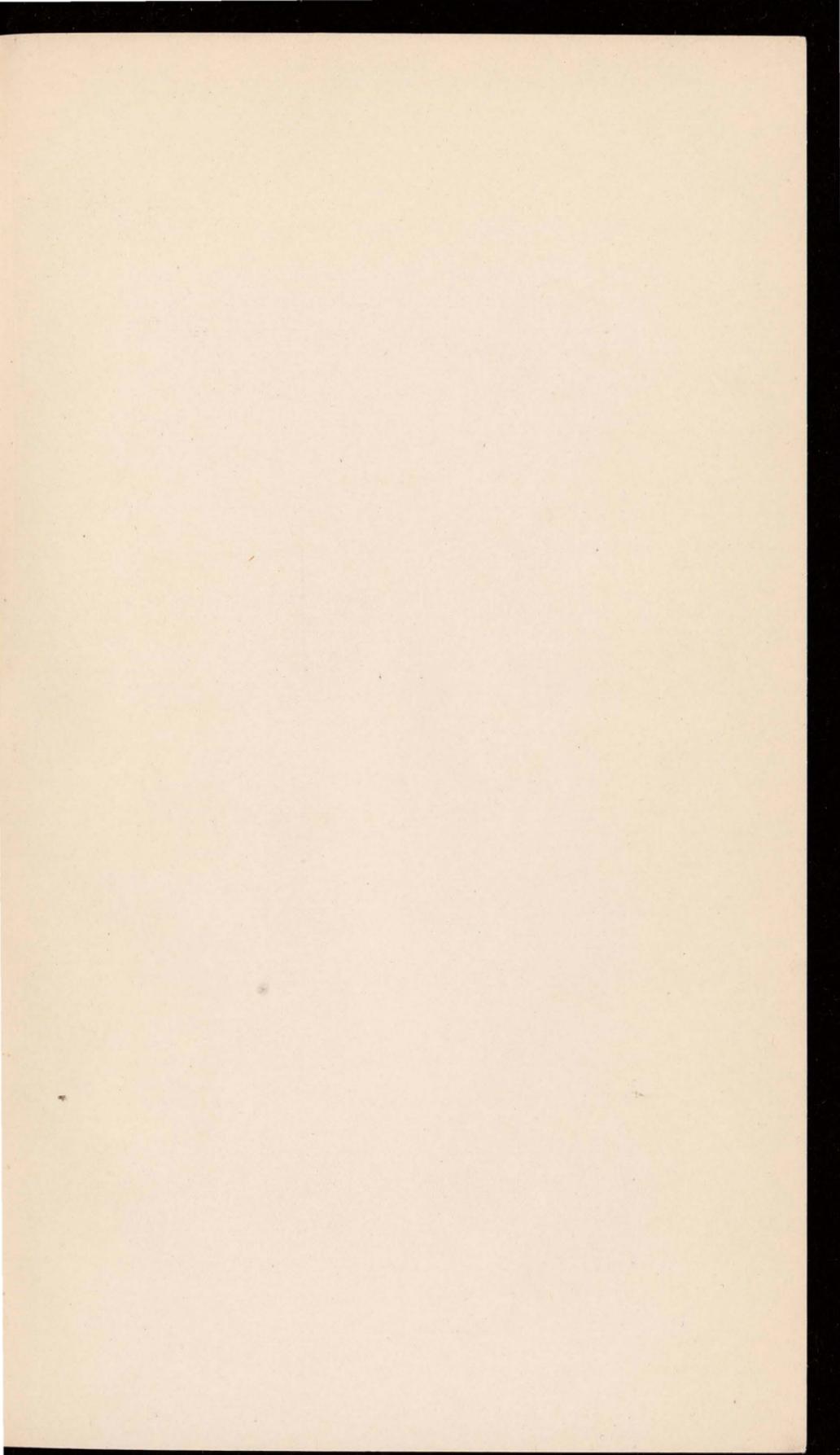
United States of America, }
City of New-York. }

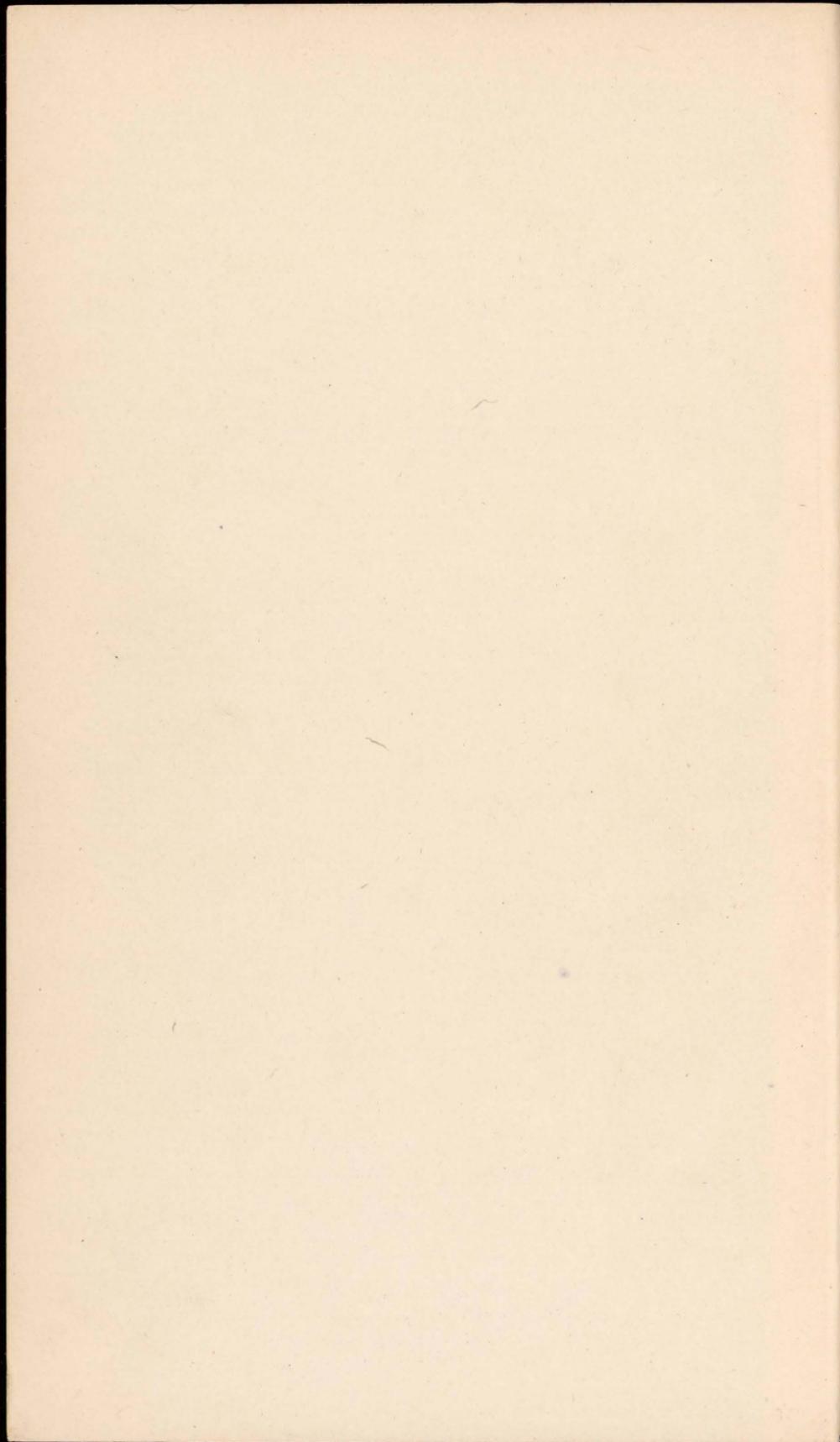
On the 21st day of December, 1839, before me came Philip Bennett, jun., Esq., and duly acknowledged he was present at the delivery of the above, which he hereby certifies to be a duplicate of the original.

PHILIP BENNETT, JUN.

Sworn before me 21st day of December, 1839,

A. L. AMOUREUX, Commissioner of Deeds, &c.





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