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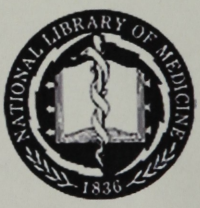

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BRONCHITIS,

AND

KINDRED DISEASES.

BY

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THROAT-AIL—BRONCHITIS—CONSUMPTION.

WHAT IS THROAT-AIL?

It is called by physicians *Chronic Laryngitis*, pronounced *Lar-in-GE-tis;* by others it is known as *Clergyman's Sore Throat*, from the fact that so many of that class of persons have been troubled with it of late years.

It is an affection of the *voice-making* organs, which are at the top or beginning of the wind-pipe, answering to that moveable protuberance in the throat, in the act of swallowing, familiarly called "Adam's Apple," very prominent in men, less so in women.

The one great distinguishing symptom in *Throat-Ail*, present in every case, absent in none, is an *alteration of the voice*, its tone is not so clear as usual; or to make it so, there is an instinctive effort by hawking or hemming to remove something which is felt to be an obstacle to a full and free utterance.

In the first stages of the disease, nothing perceptible is cleared away. When farther advanced, a little mucus, or pearly phlegm is brought up, not half a tea-spoonful, perhaps; but as the malady progresses, this pearly phlegm becomes thicker, more and more yellow, and in greatly increased quantities, from a tea-spoonful to twenty or more in the course of four and twenty hours, when it uniformly terminates fatally.

Of this disease, ending in consumption, the celebrated clerical orator, Edward Irving, died.

WHAT IS BRONCHITIS?

It is an affection of the branches of the windpipe—a simple, common cold at first. These branches are hollow, like their parent stem, the windpipe itself; but they become filled with a glairy, sticky, tough, pearly-like substance, which not only causes the person to cough a great deal, night and day, but prevents the air from passing into or out of the lungs as fully as it should. Hence the prevailing complaint in Bronchitis, (pronounced *bron*-KEE-*tis*) is a feeling of "fullness," an "oppression," a "difficulty of breathing." When the symptoms are urgent, it appears as if a cord were drawn tightly across the breast.

WHAT IS CONSUMPTION?

Consumption, commonly called a "Decline," and by physicians "Phthisis," is a gradual wasting away of the lungs, by which they become disorganized, or rotten, and are spit out of the mouth in the shape of yellow matter, which, as the disease advances, usually sinks in water, and in three cases out of four, is, or has been, more or less tinged with blood at various intervals.

COMPARISONS.

It is thus seen that Throat-Ail is a disease of the top of the windpipe, Bronchitis a disease of the branches of the windpipe, and Consumption a disease of the little air cells, which are situated at the extreme ends of the branches of the windpipe, as leaves are at the extremity of the branches of a tree. These cells or bladders are of all sizes, from that of a pea, downwards.

CAUSES.

Throat-Ail is generally the result of accidental and temporary causes, such as indigestion, over-exertion of the voice, suppressions, sitting or standing on damp places.

Bronchitis is brought on by the application of, or taking cold, in some way or other.

Consumption is most generally an inherited disease, and it is sufficient for one of the parents only to have had a weakly or diseased constitution; but in the present day it is constantly becoming more common, in consequence of its being generated in persons whose parents, grand-parents, and in many instances, they themselves, had a strong robust constitution, by irregular habits of life, indulgence of the passions and appetites, by over-efforts of body or mind, by corroding care, by deep grief, by protracted sufferings, by late hours, damp clothing, damp sheets, damp rooms, and very often by unwise efforts to "*harden the constitution*," by needless exposures to heat and cold, and over-exertion—forgetting that a man's constitution is like a good garment, which lasts the longer for being the better taken care of, and is no more improved by hard treatment, than a new hat is made better by being banged about.

SYMPTOMS.

Throat-Ail is a disease of the voice-making organs at the top of the windpipe; its distinguishing symptom, an impairment of the voice.

Bronchitis is an ailment of the branches of the windpipe; its prominent indication being a difficulty of breathing, and harassing cough at any and all times.

Consumption is an affection of the lungs themselves,

at the ends of the branches of the windpipe; its universal symptom, a wasting of flesh and strength and breath.

TREATMENT.

Throat-Ail requires mainly external applications, washes, gargles, fomentations, and the like.

Bronchitis is cured by internal remedies.

Consumption itself, the great giant of Death, calls for none of these things necessarily, unless complicated with other ailments.

WHAT ARE THE SYMPTOMS OF THROAT-AIL?

The most universal symptom is an impairment of the voice, which is more or less hoarse or weak. If there is no actual want of clearness of the sounds, there is an instinctive clearing of the throat, by swallowing, hawking, or hemming; or a summoning up of strength to enunciate words. When this is continued for some time, there is a sensation of tiredness about the throat, a dull heavy aching, or general feeling of discomfort or uneasiness, coming on in the afternoon or evening. In the early part of the day, there is nothing of the kind perceptible, as the voice muscles have had time for rest and the recovery of their powers during the night. In the beginning of the disease, no inconvenience of this kind is felt, except some unusual effort has been made, such as speaking or singing in public; but as it progresses, these symptoms manifest themselves every evening; then earlier and earlier in the day, until the voice is clear only for a short time soon in the morning; next, there is a constant hoarseness or huskiness from week to month, when the case is most generally incurable, and the patient dies of the common symptoms of Consumptive disease.

In some cases, the patient expresses himself as having a sensation as if a piece of wool or blanket were in the throat, or an aching or sore feeling, running up the sides of the neck towards the ears. Some have a burning or raw sensation at the little hollow at the bottom of the neck; others, about Adam's Apple; while a third class speak of such a feeling or a prickling at some spot along the sides of the neck. Among others, the first symptoms are a dryness in the throat after speaking or singing, or while in a crowded room, or when waking up in the morning, or after unusual exertion. Some feel as if there were an unusual thickness or a lumpy sensation in the throat, at the upper part, removed at once by swallowing it away; but soon it comes back again, giving precisely the feelings which some persons have after swallowing a pill. Sometimes, this frequent swallowing is most troublesome after meals.

Throat-Ail is not like many other diseases, often getting well of itself by being let alone. I do not believe that one case in ten ever does so, but on the contrary, gradually grows worse, until the voice is permanently husky or subdued; and soon the swallowing of solids or fluids becomes difficult, food or drink returns through the nose, causing a feeling of strangulation or great pain. When Throat-Ail symptoms have been allowed to progress to this stage, death is almost inevitable in a very few weeks. Now and then a case may be saved, but restoration here is in the nature of a miracle.

WHAT ARE THE SYMPTOMS OF BRONCHITIS?

Bronchitis is a bad cold, and the experience of every one teaches what its symptoms are. The medical name for a cold is *Acute Bronchitis;* called *acute*, because it comes on at once, and lasts but a short time—a week or

two generally. The ailment that is commonly denominated *Bronchitis*, is what physicians term *Chronic Bronchitis;* called *chronic*, because it is a long time in coming on, and lasts for months and years instead of days and weeks. It is not like Throat-Ail, or Consumption, which have a great many symptoms, almost any one of which may be absent, and still the case be one of Throat-Ail, or Consumption; but Bronchitis has three symptoms, every one of which are present every day, and together, and all the time, in all ages, sexes, constitutions, and temperaments. These three universal and essential symptoms are—

1st. A feeling of fullness, or binding, or cord-like sensation about the breast.

2d. A most harassing cough, liable to come on at any hour of the day or night.

3d. A large expectoration.

This expectoration is of a tough, stringy, tenacious, sticky, pearly or greyish-like substance, from a tablespoon to a pint or more a day. As the disease progresses, this becomes darkish, greenish, or yellowish in appearance; sometimes all three colors may be seen together, until at last it is uniformly yellow, and comes up without much effort, in mouthfuls, that fall heavily, without saliva or mucus. When this is the case, death comes in a very few weeks or—days.

WHAT ARE THE SYMPTOMS OF CONSUMPTION?

A gradual wasting of breath, flesh, and strength are the three symptoms, progressing steadily through days and weeks and months, which are never absent in any case of true, active, confirmed Consumptive disease that I have ever seen. A man may have a daily cough for fifty years, and not have Consumption. A woman may

spit blood for a quarter of a century, and not have Consumption. A young lady may breathe forty times a minute, and have a pulse of a hundred and forty beats a minute, day after day, for weeks and months together, and not have Consumption; and men and women and young ladies may have pains in the breast, and sides, and shoulders, and flushes in the cheeks, and night sweats, and swollen ankles, and yet have not an atom of Consumptive decay in the lungs. But where there is a slow, steady, painless decline of flesh and strength and breath, extending through weeks and months of time, Consumption exists in all persons, ages, and climes, although at the same time sleep, bowels, appetite, spirits, may be *represented* as good. Such, at least, are the results of my own observation.

The great, general, common symptoms of Consumption of the Lungs are night and morning cough, pains about the breast, easily tired in walking, except on level ground, shortness of breath on slight exercise, and general weakness. These are the symptoms of which Consumptive persons complain, and as they approach the grave, these symptoms gradually increase.

HOW DO PERSONS GET THROAT-AIL?

C. M. "noticed that public speaking was followed by some soreness in the throat, which usually wore off in a day or two; in a year or two it was painful to make a speech, and he was compelled to desist altogether from making public addresses. In time, every attempt to speak a word required an effort followed by weariness; there is a constant disposition to swallow or clear the throat, increased by taking cold — appetite good—sleep sound—general health uninjured. If there is several days rest, begins to feel well, but if any at-

tempt is made to speak for fifteen minutes, the soreness in the throat returns."

A woman, while sitting on a stone bench in February, was attacked with sudden hoarseness, this continued, grew worse until the voice was lost altogether; a little pain in the throat, shortness of breath on the least exercise; was three months getting well.

Mrs. P. took cold by being exposed in the Park in Versailles, in August, followed by a hoarseness which nothing could control. In two years her voice was altogether extinct. In two months more there was oppression and shortness of breath if she walked fast; in two weeks more this oppression became constant during the night, often threatening suffocation; and death took place in two years and a half from the first hoarseness.

A tall man, strong constitution, good figure, aged thirty-three, had hoarseness every winter for five years, then there was cough, irregular chills, clear expectoration, very sensitive to cold, copious night-sweats, daily fever, voice then changed some, throat became painful, then drinks began to return by the nose, appetite bad, digestion imperfect, casting up after meals, gradual falling away, heat in the throat, loss of voice, thick greenish expectoration, diarrhœa, and death.

A man thirty years old, delicate, subject to frequent colds for eighteen months past; with pains in the throat and hoarseness; voice hoarse and broken; expectoration thick and tough; often put his hands to his throat as if there were some obstruction there; had fits of coughing which were stifling, this grew painfully severe, and finally died from suffocation.

A gentleman, aged forty-two, was attacked in the street one morning in August, with a fit of suffocation;

he could not proceed; a dry, rough, hoarse cough came on, with shortness of breath. In two weeks had another attack and died.

A vigorous Dutch courier, was subject to cold every winter for eight years, but last winter it was worse, with sore throat, and obstinate hoarseness; emaciated very rapidly, with complete loss of voice; acute pain in the throat when he swallows either liquid or solid food; a tender spot on the side of Adam's apple when pressed with the finger; expectoration streaked with yellow at times, at others, it is viscid, small, opaque, and swimming in a sort of mucilage; night sweats on face and chest; general debility and death.

A gentleman, aged fifty, had an eruption over the body; it disappeared, but a pain in the throat came on immediately, with a feeling of oppression; expectoration smelt badly. In a year or two there was a cough, hoarse voice, with a tough, sticky expectoration; acute pain in the throat, especially on swallowing—and even of liquids; falling away; loss of voice and death.

A large, spare man, of fifty-two, a porter, noticed his voice changing for thirteen months, becoming hoarser for the last six weeks, until the voice was almost lost; difficult breathing; painful swallowing; wakes in starts from sleep, and died of suffocation.

B. W. felt uneasy about the throat frequently, inclining him to swallow or to clear the throat, as something appeared to be sticking there; now and then there was a little hoarseness, especially towards evening, or after speaking or reading; occasional dryness of the throat; some burning feeling at the side of the neck; unnatural sensation at top of breast bone; sometimes a feeling of tightness there; in the course of the year he found it re-

quired some little effort, when after silence, he began to talk, a kind of instinctive summoning of strength about the breast, in order to enable him to speak clearly and distinctly; after awhile, whenever spoken to, he would be compelled to give a hem or two before attempting to reply, as if conscious that something must be cleared away first.

A clergyman says: "I had spoken a great deal for six weeks, which left some hoarseness, otherwise quite well. Soon the hoarseness was such as to reduce me to a whisper if I conversed only a few minutes; the throat inside looked very red, with large blotches or hillocks on the back part of it, and a slimy stuff was always collecting there, and when I would hawk it away, there would sometimes be streaks of blood in it; occasionally a little pain there. I quit preaching, and kept the house for several months, and nothing does me any good."

A physician was called to ride on a January night, and contracted a hoarseness, which continued with very little cough and no expectoration; his general health continued excellent; no one could have supposed anything the matter with him. His voice became more and more hoarse, until it was entirely lost, and in a few months afterwards he died.

A lady was attacked with fits of dry cough, and subsequently lost her voice; there was a sense of scraping in the throat; sometimes obstinate sneezing; the cough was a little soothed by drinking water; the breathing gradually became difficult, swallowing painful, and she died.

A gentleman observed for a year past, that his voice was occasionally a little cracked, and soon became permanently hoarse, and at last it was entirely lost. There

was no pain, no swelling, no spitting of blood; he seemed to enjoy the fullest health; yet the symptoms gradually grew worse until he died.

P. T. "slept on an ice-box one summer's day two years ago, and waked up with a sore throat, it has never since ceased to hurt me, and has been steadily getting worse."

835. "I worked in a damp cellar in winter, two years ago, in striking off a newspaper; a short, dry cough appeared, which has steadily got worse; the voice became hoarse and husky, until I cannot speak above a whisper without considerable effort. I now cough night and morning, an hour at a time often, and am weak and emaciated, chills, fevers, and night-sweats." He soon died.

A man had suffered a great deal from sick headache; he was advised to have cold water poured on the top of his head; he did so; he had headache no more. The throat became affected; had frequent swallowing, clearing of throat, falling of palate, voice soon failed in singing, large red splotches on the back part of the throat, and white lumps at either side; but the falling of the palate and interminable swallowing were the great symptoms, making and keeping him nervous, irritable, debilitated, and wretched. He was advised to take off the uvula, but would not do it. Had the nitrate of silver applied constantly for three months. Tried homœopathy. After suffering thus two years, he came to me, and on a subsequent visit, said, "It is wonderful, that for two years I have been troubled with this throat, and nothing would relieve it, and now it is disappearing in a few days." That was four months ago. I saw him in the street yesterday. He said his throat gave

him no more trouble; that he had no more chilliness, and had never taken a cold since he came under my care, although formerly "it was the easiest thing in the world to take cold."

A merchant (1002) slept in a steamboat state-room in December, with a glass broken out; woke up next morning with a hoarseness and sore throat; for several months did nothing, then applied to a physician. Counter-irritants were employed without any permanent effect. At the end of four years, he came to me with "a sort of uneasy feeling about the throat, more at times than others; not painful; sometimes a little hoarseness, with frequent inclination to swallow, or clear the throat. At the little hollow at the bottom of the neck, just above the top of the breast-bone, there was a feeling of pressure, stricture, or enlargement—no pain, but an unpleasant sensation, sometimes worse than at others. It is absent for days at a time, and then lasts for several hours a day."

A clergyman (1012) has a hoarse, cracked, weak voice, easily tired in speaking; a raw sensation in the throat; and in swallowing has "*a fish-bony feeling.*" He had become over-heated in a public address, and immediately after its close started to ride across a prairie in a damp, cold wind in February. Had to abandon preaching altogether, and become a school teacher." This gentleman wrote to me for advice, and having followed it closely for eighteen days, reported himself as almost entirely well.

I greatly desire it to be remembered here, that in this, as in other cases of Throat-Ail, however perfectly a person may be cured, the disease will return as often as exposure to the causes of it in the first place is per-

mitted to occur. No cure, however perfect, will allow a man to commit with impunity such a thoughtless and inexcusable act as above named, that of riding across a prairie in February, in a damp. cold wind, within a few minutes after having delivered an excited address in a warm room. None of us are made out of India rubber or iron, but of flesh and blood with a reasonable soul, subject to wise and benevolent conditions and restrictions; and it is not to the discredit of physic or physicians, that being once cured, the disease should return as often as the indiscretion that originated it in the first instance is re-committed.

Three weeks ago, one of our merchants came to me with a troublesome tickling in the throat. At first it was only a tickling; but for some weeks the tickling compels a frequent clearing of the throat; and without a cough, each clearing or hemming brings up half a teaspoonful of yellow matter, with some saliva. On looking into his throat, the whole back part of it was red, with still redder splotches here and there—epiglottis almost scarlet. On inquiry, I found he had for years been a chewer of tobacco; then began to smoke; would day after day smoke after each meal, but especially after tea would consume half a dozen cigars. In time, the other naturally consequent steps would have been taken—to consumption and the grave. Among other things, I advised him to abandon tobacco absolutely and at once. In two weeks he came again. Throat decidedly better; in every respect better, except that he, in his own opinion, "had taken a little cold," and had a constant slight cough—not by any means a trifling symptom. Let the reader learn a valuable lesson from this case. This gentleman had the causes of cough before;

he found that smoking modified the tickling, and taking this as an indication of cure, he smoked more vigorously, and thus suppressed the cough, while the cause of it was still burrowing in the system and widening its ravages. It will require months of steady effort to arrest the progress of the disease, and he may consider himself fortunate—more so than in any mercantile speculation he ever made—if he gets well at all. If he does get well, and returns to the use of tobacco, the disease will certainly return, for the following reason.—Throat-Ail is inflammation; that is, too much heat in the parts. Tobacco smoke being warm, or even hot, is drawn directly back against the parts already too much heated, and very naturally increasing the heat, aggravates the disease. Again, any kind of smoke—that of common wood—is irritating, much more that of such a powerful poison as tobacco—soothing, indeed, in its first transient effects, like many other poisons, but leaving behind it consequences more remote, but more destructive and enduring.

A gentleman, just married, clerk in a Southern house, applied to me to be cured of a sore throat. He was permanently hoarse: swallowing food was often unendurably painful, besides causing violent paroxysms of cough. He said he knew no cause for his complaint, except that he had smoked very freely. On inquiry, I found that for the last two years he had used, on an average, about "a dozen cigars every day; perhaps more." He died in six weeks.

In several instances, persons have applied to me who had been advised to take brandy freely for a throat affection. Such advice is warranted by no one principle in medicine, reason, or common sense. Were I to

give it, I should feel myself justly liable to the charge of being an ignorant man or a drunkard. The throat is inflamed; inflammation is excitement; brandy and tobacco both excite, inflame the whole body; that is why they are used at all. The throat partakes of its portion of the excitement, when the throat, body, and the man, all the more speedily go to ruin together. I have in my mind, while writing these lines, the melancholy history of two young men—one from Kentucky, the other from Missouri—who were advised "to drink brandy freely, three times a day, for throat complaint." One of these became a drunkard, and lost his property, and within another year he will leave an interesting family in penury, disgrace, and want. The other was one of the most high-minded, honorable young men I have lately known. He was the only son of a widow, and she was rich. He came to see me three or four times, and then stated that he had concluded to try the effects of a little brandy at each meal. A few weeks afterwards he informed me, that as he was constantly improving, he thought that the brandy would certainly effect a cure. Within seven months after his application to me, he had become a regular toper; that is, he had increased the original quantity allowed, of a tablespoon at each meal, to such an amount, that he was all the time under the influence of liquor. His business declined; he spent all his money; secretly left for California, many thousand dollars in debt, and soon after died. The person who advised him is also now a confirmed drunkard; but in his wreck and ruin, still a great man.

A gentleman from a distant State wrote to me some months ago for advice as to a throat affection. He is a lawyer of note already, and of still higher promise, not

yet having reached the prime of life. By earnest efforts as a temperance advocate, in addition to being a popular pleader at the bar, his voice became impaired, with cough, spitting of blood, matter expectoration, diarrhœa, debility, and general wasting. He was induced to drink brandy with iron, but soon left off the iron and took the brandy pure. The habit grew upon him; he *sometimes* stimulated to excess, according to his own acknowledgment; his friends thought there was no interval, and gave him up as a lost man to themselves, his family, and his country; but in time, the virulence of the disease rose above the stimulus of the brandy, and in occasional desperation he resorted to opium. He subsequently visited the water cure, gained in flesh and strength, and was hopeful of a speedy restoration; but he took "an occasional cigar"—the dryness in the throat, hoarseness, pain on pressure, and soreness still remained! He left the water cure, and in a few months wrote to me, having, in addition to the above throat symptoms, a recent hæmorrhage, constipation, pains in the breast, nervousness, debility, variable appetite, and daily cough. Within two months, he has become an almost entirely new man, requiring no further advice.

Further illustration of the manner in which persons get Throat-Ail, may be more conveniently given in the letters of some who have applied to me, with the additional advantage of having the symptoms described in language not professional, consequently more generally understood.

A PRESBYTERIAN CLERGYMAN.

(1059.) "I have had for three years past a troublesome affection of the thorax, which manifests itself by

frequent and prolonged hemming or clearing the throat, and swallowing: both more frequent in damp weather, or after slight cold. General health very feeble, sleeplessness, waste of flesh, low spirits. Visited a water cure, remained two months, but my hemming and swallowing were not a whit improved. Touching with the nitrate of silver slightly makes the larynx sore. I have been always able to preach. It has never affected my voice until very recently. Two weeks ago I preached two long sermons, in a loud and excited voice, in one day. During the last discourse my voice became hoarse, and my hemming has become very bad; and there has been a slight break in my voice ever since. Hem, hem, hem, is the order of the day; clearing the throat is incessant, swallowing often, and a slight soreness of the larynx, particularly after a slight cold, or after several days' use of nitrate of silver, with a scarce perceptible break in the voice. These are my principal symptoms."

A LAWYER.

(1016.) "Aged thirty-seven. Have been liable, for several years past, in the fall, winter, and spring, to severe attacks of fever, accompanied with great debility, loss of flesh, appearing to myself and friends to be in the last stages of Consumption; in fact, the dread of it has been an incubus on me, paralyzing my energies and weighing down my spirits. In the summers, too, I have been subject to attacks of bilious fever and bilious colic. A year ago, I attended court soon after one of these attacks, and exerted myself a great deal. My throat became very sore, and I had hæmorrhage—two teaspoons of blood and matter. My health continued feeble. I went last summer to a water cure, and regained my

flesh and strength, but the weakness in my throat and occasional hoarseness continued all the time. Afterwards, by cold and exposure, I became worse, continued to have chills and fever and night sweats, accompanied by violent cough and soreness of the throat. I got worse; was reduced to a perfect skeleton, and had another hæmorrhage. Mucus would collect in the top of the throat, and was expectorated freely. I am still liable to colds. The seat of the disease seems to be at the little hollow in front at the bottom of the neck, just above the top of the breast-bone. At my last bleeding, the pain seemed to be in the region of Adam's-Apple. The principal present symptoms are soreness in throat, dryness, pain on pressing it, and hoarseness; pulse from eighty to ninety in a minute; irregular appetite. These symptoms, together with my fear of Consumption, serve to keep me unhappy. I find myself constantly liable to attacks of cold, sneezing, running at the nose even in the summer time. My mother and sister have died of Consumption, as also two of my mother's sisters. Feet always cold; daily cough."

OPINION OF THE CASE.

There is no Consumptive disease: it is impossible. No personal examination is needed to tell that. The foundation of all your ailments is a torpid liver and a weak stomach. If you are not cured, it will be your own fault.

The treatment of this case was conducted by correspondence, as he lived six hundred miles away, and therefore I had not the opportunity of a personal examination. Within a month he writes:—"I am gradually improving; feet warm; all pain has disappeared from

the breast; appetite strong, regular, and good; pulse seventy-two; breathing eighteen; all cough has disappeared." At the end of two and a half months, no further advice was needed, as he wrote—"I have not written to you for a month, being absent on the circuit. I have not enjoyed better health for years than I have for the month. Weight increasing; no uneasiness or pain about my breast; pulse seventy-five; less in the morning. The only trouble I have is costiveness, from being so confined in court, and being away from home deprived of my regular diet. We were two weeks holding court, last of November, in a miserable room, the court-house having been recently burned; kept over-heated all the time. I made four or five speeches, and suffered no inconvenience whatever. I have no cough. I now weigh about as much as I ever did, and my average health was never better, I have no ailment whatever except slight constipation."

A CLERGYMAN

(1024) called over two months ago, having had at first an ailment at the top of the throat, apparently above or near the palate. It soon descended to the region of Adam's-apple, and within a month it seemed to have located itself lower down the neck, giving a feeling as if there were an ulcer there, with a sense of fullness about the throat, hoarse after public speaking, lasting a day or two, with attacks every few weeks of distressing sick headache. As the disease seemed to be rapidly descending towards the lungs, a rigid, energetic treatment was proposed, and at the end of ten weeks he writes—"I take pleasure in introducing my friend ——, to you. He has suffered many things, from many

advisers, with small benefit. I have desired him to consult with you, hoping that he may have the same occasion to be grateful for the providence which leads him to you, which I feel that I myself have for that which guided me to your counsels. I suffer but little, very little from my throat, and confidently anticipate entire relief at no distant day, for all which I feel myself under great obligation both to your skill and to your kindness," &c.

SICK HEADACHE

is a distressing malady, as those who are subject to it know full well, by sad experience. In this case, this troublesome affection had to be permanently removed before the throat ailment could be properly treated; when that was done, the throat itself was comparatively of easy management.

A MERCHANT

(947) wrote to me from the South, complaining chiefly of
Bad cough, sometimes giving a croupy sound;
Throat has a raw, choking, dry, rasping feeling;
Soon as he goes to sleep, there is a noise or motion, as if he were going to cough;
Startled in sleep, by mouth filling with phlegm;
Expectoration tough, white, and sticky; darkish particles sometimes;
Flashes or flushes pass over him sometimes;
Sick stomach sometimes, acid often, wind on stomach oppresses him greatly;
A lumpy feeling in the throat;
On entering his house, sometimes falls asleep in his chair, almost instantly;

In walking home, at sundown, half a mile from his store, is completely exhausted;

Slightest thing brings on a cough; never eats without coughing;

If he swallows honey, it stings the throat;

Got a cold a month ago, which left the palate and throat very much inflamed;

Throat and tongue both sore;

A hooping, suffocative cough; can hear the phlegm rattle just before the cough begins;

A dry, rough feeling from the little hollow at the bottom of the neck up to the top of the throat.

One night after going to bed, began to cough, choke, suffocate; could not get breath, jumped out of bed, ran across the room, struggled, and at length got breath, but was perfectly exhausted; could not speak for half an hour, without great difficulty.

In addition to his own description of the case, his wife writes—"Ten o'clock at Night.—I am no physician, nor physician's wife, but am his wife and nurse, and an anxious observer of his symptoms, and can see his throat inflamed behind the uvula. He says there is a lump somewhere, but he cannot tell where. Sometimes he thinks it is in the little hollow at the bottom of the neck, sometimes just above, and sometimes in or about the swallow. A recent cold has aggravated his symptoms. His cough to-day has been very frequent and loose. He has emaciated rapidly within a month, and is now a good deal despondent. As for myself, I feel as one who sees some fair prospect suddenly fading away. I had fondly hoped—oh! how ardently!—that he might be restored. If a knowledge of the fact would give any additional interest to the

case, I will only say, he is one of the loveliest characters on earth. None in this community has a larger share of the respect and confidence of their acquaintance."

The opinion sent, for I have not seen the case, was as follows:—"The whole breathing apparatus, from the top of the windpipe to the extremity of its branches, is diseased; the lungs themselves are not at all affected by decay. Your whole constitution is diseased; and yet there is good ground for hope of life and reasonable health."

In three months this patient writes—"I am glad to inform you that I think I am still improving in health and strength. My bowels are sometimes disordered by eating melons and fruits; but I felt so much better that I thought I might indulge. Pulse sixty-five to seventy; an almost ravenous appetite." A month later he writes—"My health and strength are still improving; cough not very troublesome; increasing in flesh," &c. I believe this gentleman now enjoys good health.

A LADY,

(948) teacher of vocal music, writes—"There is a peculiar sensation in my throat for the last two months. Whenever I attempt to swallow, it feels as if something were in the way; a swelling under the jaws, a soreness on the sides of the throat, extending to the ears, and occasioning throbbing painfully. I have a dull aching at the top of my collar-bone, and an unpleasant sensation of weakness and heaviness in my chest; a bad taste in my mouth frequently. Have been regular, but have been afflicted for a few years past with sickness at the stomach and vomiting, attended occasionally with

great pain for a few hours. During these attacks, the complexion changes to a livid hue. I have been very much troubled with dyspepsia. On recovering from the attacks above mentioned, I have experienced a feeling of weakness almost insupportable. Am very costive; and my spirits are greatly depressed. Within a day or two I have taken a violent cold, which has affected me with sneezing, running from the eyes and nose, together with a slight hoarseness. I was advised to apply caustic to the throat, and Croton oil to my neck, chest, and throat. I have since discontinued these, not having received any permanent benefit from them. On two occasions, from over-exertion at concerts and examinations, I was unable to speak a loud word, from hoarseness, for several days. I am extremely anxious to learn your opinion. In about two months my public concerts take place, and it is absolutely necessary that something should be done for me."

OPINION.

Yours is general constitutional disease. There is no special cause of alarm. A weakened stomach, a torpid liver, a want of sufficient air and exercise, are the foundations of all your ailments, and by the proper regulation of these, you may expect to have good health and a stronger voice. You must have energy and patient perseverance in carrying out the prescriptions sent to you.

In one month this lady writes, and the letter is given to encourage others who may come under my care, to engage with determination and energy in carrying out the directions which may be given them. The reader may also see what great good a little medicine may do when combined with the judicious employment of rational

means, which do not involve the taking of medicine or the use of painful and scarifying agencies and patent contrivances :—

"I began your prescriptions at once. Having followed them for some time, I was obliged to intermit them for a few days, in consequence of having to conduct a concert, besides having to travel by stage and railroad seventy or eighty miles. During this time I was up every night until twelve o'clock, and was much exposed to the night air. On returning home, I re-commenced your directions, have made it a point to attend to them strictly, and have very seldom failed of doing so. In consequence of two omissions in diet, I suffered from headache, which disappeared when I observed your directions. My appetite is good; my food agrees with me. I sometimes feel dull and sleepy after dinner. I drop to sleep immediately. Seldom wake in the night. Sleep about seven hours, and generally feel bright and strong in the morning, when I take a brisk walk of two miles and a half; the same after six, P.M. My walks at first fatigued me considerably; generally, however, I have felt better and better from their commencement to their end, and have perspired very freely. The exercise I take seems rather to increase than diminish my strength. I have not been prevented from taking exercise from any dampness in the atmosphere. I have sometimes been exposed to the night air in going to church and other places, but without any perceptible injury. The means you advised produce a general glow, and invariably remove headache, which I sometimes have to a slight degree after dinner. I think my throat is better. There is no unpleasant feeling about it at present, except the

difficulty in swallowing, and even that is better. Pulse sixty-seven."

I had for some time ceased to regard this energetic young lady as a patient, when she announced a new ailment, a difficulty at periodic times:—"I walked two miles every day, and every thing was going on well, until one evening after walking very fast, I sat awhile with a friend, in a room without fire, in November. The weather was chilly and damp; was unwell, suppressed: had a chill and incessant cough for several hours, ending in something like inflammation of the lungs."

These things were remedied, she now enjoys good health and is engaged in the active discharge of her duties. This last incident is introduced here to warn every reader, especially women, against all such exposures at all times, most especially during particular seasons. Such exposures, as sitting in rooms without fire, in the fall and spring, after active walking, have thrown stout strong men into a fatal consumption; and it is not at all to be wondered at that delicate women should lay the foundation of incurable disease in the same manner. I will feel well repaid for writing these lines, if but here and there a reader may be found to guard against such exposures. Our parlors and drawing-rooms are kept closed to the air and light for a great portion of the twenty-four hours, and unless the weather is quite cool there is no fire in them. Thus they necessarily acquire a cold, clammy dampness, very perceptible on first entering. A fire is not thought necessary, as visitors usually remain but a few minutes; but when the blood is warmed by walking in the pure air and the clear sunshine, it is chilled in a very short space of time,

if the person is at rest, in the cold and gloom of a modern parlor, especially as a contemplated call of a minute is often unconsciously extended to half an hour, under the excitement of friendly greetings and neighborly gossip. There can be no doubt that thousands every year *catch their death of cold*, to use a homely but expressive phrase, in the manner above named. Young women, especially, cannot act thus with impunity. Men perish by multitudes every year by exposures of a similar character; walking or working until they become warm, then sitting in a hall or entry or a cold counting-room; or standing still at the wharf or at a street corner; or running to reach a ferry-boat until they begin to perspire, and then sitting still in the wind while the boat is crossing. It is by inattention to what may be considered *such trifling little things* that thousands of valuable lives are sacrificed every year.

A YOUNG GENTLEMAN,

(950) from Washington City, complained of

Uneasiness at throat, caused by repeated colds; late hours, hot rooms;

Cough most of mornings—dry, tickling, hollow;

Expectoration a little yellow;

Bloody, streaked expectoration, six months ago;

Breathing oppressed, if sit or stoop long;

Take cold easy, in every way;

Throat has various feelings, tickling, heavy aching, raw, dry, from palate to depression;

Swallowing a little difficult at times;

Voice not much affected;

Headache, costive bowels, piles occasionally;

Pain about shoulder-blades and at their points;

Soreness under both ribs sometimes;

Pains in the breast—more of a soreness from the top of the breast-bone to the pit of the stomach;

Have been ailing fifteen months;

Father, mother, sister, uncle, aunt died of Consumption.

OPINION.

You cannot have Consumption now: you are decidedly threatened with it. With proper attention, persevering and prompt, you may ward it off effectually, and live to the ordinary term of human life to those of your occupation. It is my opinion, that without this care, you will fall into settled disease within a year.

In two months, this gentleman called to see me for the first time. His lungs were working freely and fully, over the natural standard; pulse seventy-two; appetite good; bowels regular. I did not think he required any particular medical advice; and it is my present belief, that with proper attention to diet, exercise, and regular habits of life, his health will become permanently good.

(952.) Took a severe cold last winter, which left a severe cough. Every morning the breast feels sore, until stirs about some. Pain in the left side, running through to the left shoulder blade, and between the shoulders; pain in the breast-bone, and in the centre of the left breast. Chief complaint is pain in the chest, left side, and a constant raising of frothy, thick, tough, and yellow matter, with frequent hawking, hemming, and clearing of the throat. Age 22.

OPINION.

Your ailments are all removable by diligent attention to the directions I may give you. I very much

hope you will spare no pains in carrying them out most thoroughly. You certainly have not Consumptive disease.

He called upon me some months afterwards, when I saw him for the first time. He had nothing to complain of; pulse sixty; his lungs working freely and fully, being considerably above the natural standard; and as far as I know, he continues well to this day.

(973.) "Am officer in a bank. Was at a fire during Christmas, seven months ago. Used my voice a great deal; began to be hoarse; very much so by morning. This lasted a week, and went off; but in three weeks there appeared to be something about the palate which wanted to come away. Throat seemed inflamed, and ever since then have had a clogging feeling in the throat, that does not affect my voice, unless I read aloud, when I soon become hoarse. Two days ago, spit up a spoonful of dark blood; never before or since. I have a binding sensation across the top of the breast, and three months since had a pain up and down the breast-bone. Have used iodide of potash; have had the throat pencilled, and then sponged with nitrate of silver, without benefit — pulse, one hundred and ten."

OPINION.

Yours is a throat ailment, at the entrance of the wind pipe, not as low down as the voice organs. There is very considerable active inflammation there. Your lungs are a little weakened, nothing more; the pains in the breast are not serious at all, and I see no obstacle to your entire recovery.

I received letter after letter from this young gentleman, stating that no perceptible benefit seemed to fol

low what I advised. He was encouraged to persevere, and finally his symptoms began to change, and then disappeared; and in two months from his first consultation, he wrote me to say that he had steadily improved; pulse, permanently at sixty-five; expressing his obligations, &c. This case shows strikingly the advantage of perseverance.

A CLERGYMAN

(844.) Wrote to me for advice in reference to a throat complaint. I prescribed, and had entirely forgotten the circumstance, when the following letter was received:—

"I began to follow your directions on the 4th day of May, not quite three months ago, and have adhered to them strictly ever since. I am evidently a great deal better. I have lost no flesh; although it is summer, my weight has not varied three pounds since I wrote to you; it is now one hundred and forty-nine pounds. My tonsils are diminished, and give me no uneasiness, except in damp weather. From my throat, which is now generally perfectly comfortable, I am continually bringing up a pearly substance. Sometimes it is perfectly clear, and like the pure white of an egg. But this is a mighty change. At first, I could not talk five minutes in the family circle. My throat was constantly tickling and burning; so that a mustard plaster, which took all the skin off my neck in front, was a comfort; but now I can talk as much as I wish, read a page or so aloud, and am almost tempted to sing a little."

On the 9th of March, a distinguished clergyman, young, and of great promise, made to me the following statement: "Unusual circumstances compelled me to perform an immense amount of clerical labor, the work

of three men; but it seemed unavoidable. I broke down, and was attacked seven months ago, in apparent health, with a sudden fit of coughing, which lasted three hours. I lost my voice; went to New York for medical advice; thence to Jamaica, in the West Indies; returned to the United States still an invalid, not having dared to preach since my first attack."

He had night and morning cough, and the usual auscultatory signs of the loss of the upper portion of one lung. He was spitting up daily, quantities of thick, heavy, yellow matter. He said he was engaged to be married to a lovely woman, but that if his was a hopeless case, he could not reconcile it to his conscience to marry. He had great personal popularity, was almost idolized by his people, and a large circle of family connections. Here was a case well calculated to excite the highest interest of a physician.

He wrote April 3d, "My voice and throat are as clear as they ever were in my life." Some months afterwards he called to see me, to say that he was well and was married. Two years later I heard that he continued well.

In many of the above cases, it may be seen how often a permanent hoarseness or huskiness, or loss of voice; or soreness in the throat, or painful pricking sensation in swallowing; or a gradual change of voice, end in death, sooner or later, if neglected; and the hope is, that the reader will take warning by these, and by timely application, save himself from a death at once painful and often extremely sudden, coming on in the dead hour of night, when there is no unusual or alarming symptom the preceding day.

It was of the acute form of this disease General Washington died after an ilness of about 24 hours.

HOW DO PERSONS GET BRONCHITIS?

In the same manner as a common cold, for Bronchitis is a common cold protracted, settling not on the lungs, but on the branches of the windpipe, clogging them up with a secretion thicker than is natural; this adheres to the inside of the tube-like branches, and to a certain extent closes them: hence, but a small portion of air gets into the lungs. Nature soon begins to feel the deficiency, and instinctively makes extra effort to obtain the necessary quantity, in causing the patient to draw in air forcibly instead of doing it naturally and without an effort. This forcible inspiration of external air drives before it the accumulating phlegm, and wedges it more compactly in a *constantly-diminishing tube*, until the passage is entirely plugged up. The patient makes greater efforts to draw in the air, but these plugs of mucus arrest it, and there is a feeling as if the air did not get down to its proper place, or as if it were stopped short, causing a painful stricture, or cord-like sensation, or as some express it, *a stoppage of breath.* If relief is not given in such cases, either by medicine judiciously administered, or by a convulsive effort of nature at a cough, which is a sudden and forcible expulsion of such air as happened to be *on the other side* of the plug, the patient would die; and they often do feel as if they could not possibly live an hour. This is more particularly a description of an attack of Acute Bronchitis. Chronic Bronchitis is but a milder form of the same thing, very closely allied in the sensations produced, if

not indeed in the very nature of the thing, to what may be considered a kind of

PERPETUAL ASTHMA,

which may in most cases be removed and warded off for an indefinite time by the use of very little medicine if the patient could be induced to have a reasonable degree of self-denial and careful perseverance.

HOW DO PERSONS BECOME CONSUMPTIVE?

It is in many cases inherited from parents or grandparents; but as countless thousands bring it on themselves, it may be more instructive to know how it was done, in some of the cases coming under the Author's notice.

S. T. "Healthy until thirty months ago, when a slight cough was first noticed, often returning at shortening intervals, and continuing longer, until eighteen months since, when I spat a teacup of clear blood. Soon after, a continued cough came on. Seven months later had another spitting of blood." Has now a fixed cough, and is in the advanced stages of consumption.

J. J. S. "Three years ago rode to church, in September; sat by an open window, took a bad cold, neglected it; chills came on, followed by fever and night sweats; in a month had a first spitting of blood, a pint at once; in a year had a settled cough, another hæmorrhage and wasting of flesh."

J. M. "Was perfectly healthy until two and a half years ago, when had frequent attacks of chill and fever; has fallen off a great deal; thin face, flabby muscles, dark hair, freckled skin, great weakness, distressing cough; lungs half gone." Death inevitable.

J. R. M. "Was perfectly healthy until eighteen months ago. After being very much fatigued and overheated, in summer, laid down on a sofa, in a passage, both doors open, a considerable draught of air, no covering, fell asleep, waked up in a chill, got up, became temporarily blind, and have had a cough from that day to this. In six months after that first chill, spat blood, a pint, and once since, a little. First wife died of consumption. We had five children; all died before her." This case utterly hopeless.

H. F. R. "Had robust health until three years ago, when travelling in mid-winter, took a bad cold, which made me feel as sore as if I had been beaten all over. This wore off, but cough came on, gradually increasing, until it became so violent that a blood-vessel was ruptured, causing profuse bleeding, followed by great weakness." His lungs have decayed away until more than one half of them are useless to him.

W. A. B. "Went a hunting; it rained in the morning, wet all my clothing; still hunted on till night; was then taken with a terrible chill and hoarseness; did not speak above a whisper for a week; was confined to bed several weeks, with a very sore throat, headache; gradually got about, but a settled cough was left behind, which has constantly grown worse." This patient has now all the worst symptoms of advanced consumption.

D. B. "Worked hard all day; came home, laid down on a settee in an open porch, and slept until ten o'clock; waked up, felt chilly and bad; cough came on, most troublesome on getting up and on lying down; now expectorate large quantities of yellow matter, extreme prostration, strength and flesh nearly all gone." No hope of cure.

N. K. "Took cold a year ago, from walking in the rain; this was repeated several times; a cough came on, scarcely noticeable at first, but has steadily increased, until it now troubles me night and day, attended with night sweats, large yellow expectoration, great debility, almost out of breath if I walk up a few stairs." On examination, half the lungs were gone.

C. H. "While heated from exertion, made a mis-step in crossing water, and fell in; neglected to change the clothing, felt chilly, cough came on next day, and constantly increased," with the ordinary symptoms of consumption, of which she died a short time after I saw her.

E. H., the daughter of a Southern Planter, at the age of seventeen, was riding on horseback to a fourth of July celebration, at a critical time; a shower came on, the ride was continued, the clothing unchanged; cessation came, cough, wasting, weakness, and death in eighteen months.

M. H., aged eighteen, sitting in a porch at Long Branch until ten o'clock or later, of a summer evening, became chilly; continued the practice; a slight cough came on; then a small expectoration of blood, cessation followed, no alarm; the sea breeze appeared perfectly delightful; the practice was continued, followed by death in fourteen months.

J. A. "Worked hard for several days in a mill-race, with lower limbs in the water from morning until night; took cold, cough followed," and died in two years.

P. G. "Was engaged in drawing plank from a raft, at Pittsburgh, in November; feet were in water nearly all day for weeks together; took cold, left a cough, night sweats came on," and died in eighteen months.

S. R. "Was a stout, healthy farmer; went to the

Legislature in mid-winter; was confined a great deal in small heated rooms; going out often, day and night, into the cold, piercing, damp air; took a bad cold, which left a settled cough; spitting of blood and general decay followed."

B. S. started to a party in a carriage, in winter, having on a warm pair of woollen stockings, put on in her mother's presence and by her requirements, but changed them for a silken pair at the door of the ball-room; feet became very cold before leaving the room; waked up next morning with a sore throat; a slight cough followed in a few days; parents became alarmed. She was sent abroad; no improvement; and as the vessel entered the bay of New York she died—in sight of home. And thus perished one of the loveliest women the writer ever knew, in her nineteenth year.

C. M. A young man of great promise and worldly expectations, became possessed of the idea, that by accustoming himself to hardships, he would establish his constitution; therefore, whenever he rode, he would ride in a gallop—if it were in heat, or rain, or snow, all the better. Often, while bathed in perspiration, and weakened by long rides and fasting, he would, on coming to a creek or bayou, swollen by recent rains, plunge in —horse, clothing, and all—and then ride five, ten, or twenty miles, home. He died of confirmed, unmistaken consumption, in my presence, having just looked over his merchant's account rendered, of the sales of a large crop of cotton.

All the above cases were fatal from undisputed consumptive diseases. They were selected purposely to show that such causes, trivial as they may appear, do lead to a malady which baffles all human skill; and they

are wisest, who take most pains to avoid them, and to impress upon the minds of their children, as a part of their education, the importance of taking care of their health; and not only this, but *how* to do it; for the heritage of millions of money does not weigh a feather in the scale, against a young body full of health and manly vigor.

Very many persons trace their Consumption to a slight cough, which followed an attack of Fever, or Pleurisy, long continued Chills and Fever, Measles disappearing too soon; and very few ever recover who have Consumption from this last named cause.

THE PHILOSOPHY OF THROAT-AIL.

In other words, how do the circumstances which have been named as the causes of this malady, operate so as to develope it?

Pain, sickness, and disease, arise from a faulty circulation of the blood, fast or slow. A needle cannot be pressed on any spot in the body, without drawing blood, showing that blood vessels are everywhere, that these vessels are too small to be seen by the naked eye, and that the blood must be confined to them, and not flowing about in the system. As the sap of a tree flows from the trunk through every spreading branch to the farthest extremity of the smallest twig, so the blood gushes out from the heart, running through all the branching arteries, growing continually smaller, and spreading wider, until they are too minute to be seen by the naked eye; but when this blood has reached the ends of the arteries, it does not stop, but passes on a space, and enters the veins, which gradually become larger and fewer, until they form one trunk, which

empties all its blood into the heart again, as the great Mississippi is formed by innumerable smaller streams, growing larger, fewer, concentering, finally making one great flood, opening into the boundless sea. But each minute artery does not empty itself directly into some viewless vein: a smaller tube than either, connects the two; these tubes are called *Capillaries*, from their fineness, being hair-like, as the Latin word *Capilla* means a hair; and as the finest hair of the Caucassian race, is a hollow tube, so are these connecting capillaries hollow, and in the transit of the blood through them are all the issues of life and death to men. When these hair-like tubes are in natural, healthful working order, they are strong enough to pass the blood from the arteries to the veins in natural quantity and proportion, but if they are weakened, or too much blood is presented for transmission, that instant disease begins, for not being passed off soon enough, that is, not as fast as it comes in, an accumulation is inevitable, the capillary becomes clogged up, distended with blood, and is soon large enough to be seen, just as when the eye is injured, red streaks appear on the white of the eye, which were not observed in health; becoming distended, these capillaries take up more room than is natural, and must inevitably crowd upon some other part; and as nerves are everywhere, it crowds, presses on them, and gives pain, more or less, according to the amount of pressure, that is, of room taken up by the swoln capillary; every one knows that the slightest pressure of a needle on the skin gives pain, because it touches a nerve, and where there is no nerve, there is no pain. Now these little capillaries, when thus clogged up, must get rid of the extra blood, or they will burst. Nature first endeavors to re

move the accumulation, and the thin substance of which these capillaries are made, is distended, and the thinnest part of the blood oozes through the sides, and stands on the outside, in the shape of a distinct globule, small as the tiniest dew drop upon the leaf of spring; any one may observe the like process in a leathern hose pipe at a fire; it soon becomes wet on the outside from the great pressure from within, and however muddy may be the water in the hose, that on the outside is clear; but if the pressure were to be continually increased, the impurer portions of the water would begin to exude, until actually muddy water would be seen, or the pipe burst: now for the application of this to the explanation of the phenomena of Throat-Ail, Bronchitis, and Consumption.

In Throat-Ail, the voice making organs are first affected, and then the voice itself: these organs are four little muscles, or tendons, or strings at the upper end of the windpipe, at Adam's Apple, two on each side, one above the other, some quarter of an inch apart, running front and rear; the blood vessels of the system spread out over every part of the body, as a vine spreads itself over the side of a wall, and just so are they spread over the voice strings, and when, by any means, they become weakened, the blood accumulates, distends them, and the clogging up still going on, the thinner portions escape, or ooze through the sides, and become a little thickened, that instant the voice strings do not vibrate freely, do not give a natural sound, any more than a violin string would give a clear sound, if any gluey substance were put on it; hence, *hoarseness* and *huskiness*, the great, the distinguishing, universal symptom of Throat-Ail. But as soon as the thinner portion of the blood becomes separated from the blood itself, and gets

on the outside of the capillary, instead of the inside, it becomes a foreign body; nature gets weary, and seeks to cast it out; hence the instinctive hawking, hemming, or endeavoring to swallow it away, just as many persons endeavor to swallow a pill away, for some minutes after it is taken; and no one ever has Throat-Ail who is not troubled, more or less, with this incessant hawking, hemming, or fruitless swallowing. At this stage of disease, a perfect cure is easily performed in a few days, simply by using rational means to aid nature in getting rid of the accumulation of blood in the capillaries of the part; on the other hand, if neglected, it goes on uniformly to a fatal Consumption, as follows:

After the thinner portions of the blood have escaped, the clogging still going on, a thicker substance exudes, and the patient expectorates a great deal; it does not necessarily produce a cough, it is not far enough down to require that: a hawk or hem, or violent clearing of the throat is all that is requisite to get it away, but the cause remaining, it begins at once to gather again; if no relief is now afforded, the blood vessels, by the continued strain, lose all their power, the blood bursts out, a sore is formed, this becomes an ulcer, the chords are eaten away, and the voice is gone forever! Ulceration now progresses rapidly, the windpipe is eaten through, or it runs down to the lungs, and all is over.

THE PHILOSOPHY OF BRONCHITIS.

When more blood is in an artery than there ought to be, it is called "*inflammation;*" if more in a vein, it is called "*congestion;*" there is no special name for there being more blood than is natural in a capillary; but the word *congestion* answers well for all three. The little

word of four letters, *itis*, pronounced always *etis*, means *flame-like*, or reddish, and when any part of the body is permanently redder than it ought to be, in consequence of too much blood being in the arteries of that part, as in the white of the eye, when injured, that part is said to be *inflamed*, and it is not only *flame-like* in appearance, but is also warmer than natural: the word *itis*, then, invariably means, when attached to the name of any particular part of the body, that such a part has more blood in its small blood-vessels than is natural. Thus, the word Bronchitis, means simply more blood in the small blood-vessels which spread themselves over the inside walls of the branches of the windpipe, than there ought to be. These branches of the windpipe are called Bronchi, or bronchial tubes, from a Greek word *Brecho*, which means *to moisten*, because the ancients thought, as solid food was conveyed into the stomach by the gullet, which is behind the windpipe, so fluids were conveyed into the system by means of the windpipe and its branches, thus, *itis* added to *Bronchi*, means more blood than is natural in the small blood-vessels which spread out over the inner walls of the branches of the windpipe, being an admirable illustration of the beautiful correctness, succinctness, and expressiveness of medical terms, "*hard*" as they are generally thought to be, ten letters being made to express what would otherwise require twenty-five words.

The philosophy, then, of Bronchitis is, the smaller blood-vessels spread out over the inner walls of the branches of the windpipe being so congested, clogged up with blood, that the thinner watery portions of the blood are made to ooze through the pores into the bronchi; hence, in the first stages of bronchitis, there is a water

ing of the nose, which is a part of the air-passages; as the clogging goes on, it begins to ooze out more, accumulation takes place, the bronchial tubes begin to be filled, the air cannot pass freely through them, into and out of the Lungs, and the patient complains grievously of "*fullness*," of "*oppression*," of a "cord-like feeling across his *breast*," of a "*want of breath*," and, without relief he would soon die, but Nature comes to his aid by an instinctive cough, which is nothing more than a sudden forcing of air through a bronchi, for the purpose of loosening and carrying before it, the obstruction, that is, the oozed-out substance just spoken of, just as boys at school, by a sudden and forcible breath, cause a feathered arrow to be ejected through a long reed; hence, the three inevitable and universal symptoms of Bronchitis, *difficult breathing*, *violent coughing*, and *large expectoration* of a most gluey, tenacious, sticky, pearly-like substance, sometimes half a pint or more in a day, for days and weeks in succession. It is often so sticky, adheres so closely to the insides of the Bronchi, that the efforts of Nature to dislodge it by cough become so violent and exhausting, that the patient feels that if he had to cough a single time more, he would die, and falls back on his bed, perfectly exhausted and helpless, and wringing wet with perspiration, only to be renewed again in a short half hour or less, day and night, for weeks together, unless relieved. At this stage of the malady, relief and cure are prompt, uniform, and permanent, by simply giving such mild medicines as will dilute this tough, adhering substance, and thus make its detachment from the sides of the Bronchi easy; the next step is to give other remedies which will afford additional strength to the capillaries, by which they will be able to transmit

larger quantities of blood, until equilibrium is restored; this is to be done by thinning the blood, diminishing its quantity, and improving its quality, thus strengthening the whole system, and in proportion, every part of it. But if neglected, instead of being cured at this point, the clogging goes on, as in Throat-Ail—the blood-vessels burst, ulceration begins, the parts are eaten away, large quantities, not of a glairy, pearly look, are spit up, but of a heavy, yellow, darkish, greenish, or rusty-color—a tea-cup full or more in a day, the drains of the system tend that way, as drift-wood tends to a broken part of a mill-dam, and the patient, imagining that he is spitting away his lungs, concludes that they must be almost entirely gone, and gives up all hope of life, yet he can be cured at this point, and in a fortnight be walking the streets, because the lungs themselves were not touched by disease, it had not reached that far; but now, if there is further delay, ulceration rapidly progresses, and Bronchi, Lungs and all, break down together in death.

THE PHILOSOPHY OF CONSUMPTION.

Consumption is a disease of the lungs themselves, which are little cells or bladders at the extremity of the branches of the windpipe, are of all sizes, from that of a pea, downwards; and millions in number; when the blood-vessels which spread out on the inside of these little cells, as a vine spreads over a wall, become too full of blood, the thinner portion oozes out, as before described in Throat-Ail and Bronchitis, and stands at first, a clear little drop, then thickens, increases, hardens, and becomes a hateful tubercle! and two results follow. It has become a foreign body, small as a crumb of bread

though each tubercle be, yet like a crumb of bread which has "gone the wrong way," it excites a tickling cough, trifling at first, but constantly increasing in violence to the end of life; thus cough is the general attendant of consumption, from its stealthy access, to its dreadful end.

A second result of the presence of tubercle is, that each one takes up a little room, no larger perhaps than the head of a pin, yet when these amount to thousands, the room for air in the lungs is materially diminished; hence consumptives not being able to take in air enough, *always* complain of so easily "*getting out of breath*," of being "*so easily tired.*"

And here let the reader's attention be drawn to what the Author considers the happiest thought of modern times, the most magnificent application of a scientific principle ever made, as to medicine, dimly outlined by Abernethy, but not matured and made practical until within a very few years, that of determining the beginning of Consumption, to be at a point when the lungs first begin to consume the first cubic inch less of air than they ought to do, which is generally long before the slightest cough has ever been observed. To do this, two things are necessary. 1st. To know how much air any given man's lungs hold when in full and healthful operation. 2d. To be able to measure the amount accurately, infallibly, mathematically, down to a single cubic inch. It is sufficient to say here, that the first is certainly known, and that the second is as certainly and demonstrably done. Each person requires a given amount of air, in proportion to age, size, sex, &c., but every person of given physical requirements must consume the same minimum amount of air, or disease is

inevitable. It is easy then to perceive, that if a man should measure two hundred cubic inches of air in health, he would, if half his lungs had consumed away, measure only one hundred inches; and so of any other proportion, larger or smaller. And as the lungs begin to be filled up with tubercles, long, long, before they begin to consume away; and, as previous to the consuming process, every body knowing anything at all medically, knows that consumptive disease is permanently removable, it follows demonstrably, that if proper means were used *when the breath* FIRST BEGINS *to fail*, that consumption is, at that stage, as certainly curable as certainty can be affirmed of any therapeutic agency on record. And if the public could be induced to take up this fact, and act upon it rationally and practically, and could prevent its being turned into ridicule by ignorant and unprincipled peripatetic lecturers, not one need die of consumption, where thousands now do.

The Author dislikes hobbies, and will not here further insist upon the application of the principle in certainly determining the first, faint, far-off approaches of consumptive disease, but will state that to the judicious application of this principle, with the aids of auscultation and general medical experience, he owes the ability to give the plain, and specific written opinions of a previous page, *every one of which time has confirmed.*

GENERAL HISTORY OF THROAT-AIL.

The general history of the beginning, progress, and end of a case, is as follows:—

An uneasy feeling is present in the upper part of the throat, causing a frequent tendency to swallow, as if

some obstruction might be removed thereby. In other cases, there is a constant hemming or hawking, in order to clear the throat of some sticky or glutinous stuff, adhering to the back part of it; then the voice is not of that clear, ringing sound as formerly: or if it is made clear, it requires an effort, which shows that something is wrong; for nature works without an effort; after a while the effort becomes such as to cause fatigue. The voice has to be pushed out as it were; at length it becomes hoarse or cracked, after unusual speaking or reading; this is more perceptible after meals, or towards evening: some soreness begins now to be felt in the region of Adam's-Apple. There may be as yet no cough; and for weeks and months it may make no perceptible progress, even getting better; but sooner or later it becomes worse again from exposure to changes of weather and other causes; and thus it alternates, until the patient becomes exhausted in his efforts to get rid of it; the strength declines; the cough appears; the constitution yields, and death closes the scene.

It must be remembered that, sometimes, no cough makes its appearance until within a few weeks of death, but the voice becomes more and more cracked, discordant and husky; it requires the utmost effort to enounce a word above a whisper; the whole body seems to exert itself in the pronunciation of every syllable, and not only the throat, but the whole system is wearied with the effort; yet generally unattended with extreme pain, in or about the throat. Sometimes the voice becomes utterly extinct previous to dissolution.

In the progress of the disease, ulcers form in the throat, so far down as not to be visible to the common eye, and these ulcers pour out, day by day, enormous quantities

of the most offensive stuff, matter, blood, mucus, pure or mixed, a great deal of which is got rid of by expectoration, a whole pint of it in a day sometimes; another part goes by way of the stomach, destroying its tone and power of digestion, and the patient wonders "where so much corruption comes from!" and assures the physician that he "must have spit up all the lungs before now;" and yet, on a proper examination, the lungs will be found unbroken and undecayed. While this affords encouragement to persons who appear to have consumption, to have their cases properly examined, perchance the lungs may happily be sound, notwithstanding the threatening nature of appearances; it at the same time points out the necessity of prompt attention in all cases where there is any ailment about the throat, or any alteration of the voice whatever.

Many distinguished names, such as Piorry, Chomel, Louis, Belloc, Andral, Columbat De L'Isere, Sir Charles Bell, Stokes, Horace Green, and others, bear the most unhesitating testimony to this important and interesting truth: "There can be no doubt that a person may have all the apparent signs of consumption of the lungs, in consequence of the throat affection, and the lungs themselves be free from disease."

In view of this, how strongly does the irresistible conviction fasten itself upon the mind of every reflecting reader, that many have been hastily abandoned, as being in the last stages of Consumption, because they had cough, emaciation, night sweats, and difficult breathing, when a skilful physician would have detected in the throat alone, a sufficient cause for these alarming symptoms, and, by a short course of judicious treatment, have rescued them from an untimely grave.

A clergyman called upon me, in New Orleans last winter, for an examination and opinion of his case, which his friends had supposed hopeless consumption. I considered it one of throat disease in the main, and treated it accordingly. In two months he writes to me:

"*Dear Sir:* Your prescriptions began in a few days to act very favorably. My cough is more than half abated—digestion improved fifty per cent., strength and spirits in like proportion—nothing seemed against me but too frequent pulse. My throat and voice improved wonderfully, and my respiration very much helped," &c.

The rapid improvement in this case could only have taken place on the ground of my opinion being correct as to the character of his ailment—and yet he had been sent an interminable journey south, from Kentucky through Florida, and, as he informed me, "got worse all the time." What a world of distress and anxiety, and what a large expenditure of time and money might have been saved to this gentleman, had a more truthful opinion been formed of his case before he left home.

Another clergyman, after having been under treatment for some time, writes me, and after relating the favorable changes which had taken place, says:

"And, permit me to say, Doctor, that I shall ever cherish, with grateful remembrance, the day I first visited your office for advice and prescription, and that you may long live to relieve the sufferings of the human family, and enjoy that happiness which a consciousness of doing good gives its possessor, is the prayer of your obedient servant."

A gentleman, whose life was of considerable importance to the community, called at my office wishing to

know my opinion of his case. On a careful examination, I told him he was suffering more from a throat disease than anything else, and that there was no efficient remedy. As I could do him no material good, I dismissed him, expecting to see him no more. Early next morning he returned, and said, "you must do something for my throat." I prescribed, and he got better rapidly, very rapidly. Knowing, however, that he could not recover, and seeing that every day he was cherishing new hopes of life, I thought it best to acquaint his wife, to whom he had not long been married, that I considered him in a dangerous condition, and advised an immediate return to his friends, assuring her, at the same time, in the most positive terms, that he was liable to die within any hour. He could not be induced to assent to my views, and I advised him to call in another physician. He did so, and I withdrew. Within ten days, though apparently better, his wife heard a singular noise while her husband was sleeping, and before she could go to the family apartment, to give the alarm and return, he was dead. This sudden death sometimes arises from ulcers forming in the windpipe or its branches, and closing up the passages so that no air can pass; or an ulcer bursts and fills up the passages with matter, so as to suffocate. Sometimes the ulcers eat through the sides of the air passages, and making communications with adjoining parts, produce irritation, inflammation, and death.

A gentleman called at my office with a distressing hoarseness of voice, but no soreness; it required a great effort for him to speak distinctly. He had just placed himself under the care of a physician, who was said to have had some success in curing throat diseases; but

hearing that I was in town, he called on me to know what I thought of his condition. I was obliged to say that he would die in a few days, and declined prescribing; first, because I knew that I could do him no material good; and second, I considered it would not be just toward his physician, to abandon his treatment without giving it a fair trial. I saw him on the street several times afterwards, but within ten days I was hastily summoned to see him, and found him dead from suffocation.

It ought to be extensively known that there are several forms of throat disease, which render those who have them liable to sudden death; this is especially true of acute and chronic Laryngitis, from swelling, inflammation, or exudation about the upper part of the Larynx, which close the sides, and prevent breathing. This is very liable to come on in the night, during sleep; the breath is gradually stopped, the person becomes unconscious; instinctive struggles may give the alarm, but death usually ensues, before any person can be called; of this Washington died, after an illness of a few hours.

GENERAL HISTORY OF BRONCHITIS.

It begins as a common "bad cold," the eyes are weak and watery; there is a running from the nose, chilliness, appetite fails, general weakness; there is a feeling of fullness all over the breast, of being stuffed up, great difficulty in drawing in the breath; cough commences, spiteful, quick and dry at first, then more loose, and expectoration begins, of a tough, tenacious, gluey, pearly substance, a cup full in a day. These coughing spells are usually most severe of mornings on first waking up; at length, as the patient gets weaker and worse, the expectoration becomes yellow, greenish, black, bloody or

rusty colored—sometimes of a bad smell, indescribable. The cough, which at first was curative, is now tearing, exhausting, and almost insupportable—aggravating every symptom, and wearing the patient to a welcome grave.

GENERAL HISTORY OF CONSUMPTION.

No two cases of this disease are precisely alike in every particular; yet, in general, the feelings and symptoms in its beginning, progress, and end, are as follows:

In nearly every case, Consumption begins with a slight, short, tickling cough in the morning; but as it occurs only now and then, and is so very slight, that only one or two efforts at coughing are made on getting up, it is not noticed at this stage; after a while, this cough occurs occasionally during the day; it may be next observed on lying down at night, or some minutes after being in bed; a single cough or two; coming on quite suddenly, as if produced by a particle of dust in the throat, from the pillow or bedding. Soon the morning cough increases, and the night cough comes on regularly; damp weather, or a sudden spell of cold weather, increases it, and the person says he has "caught a cold, some how or other;" but it does not go off of itself, like a cold used to do; it "hangs on," and is increased by every slight change in the moisture or temperature of the atmosphere. The patient now begins to think he had "better take something" for his cold. He might discover, however, by this time, that it does not affect him as a cold used to do; for several years ago, when he took a cold, he remembered that it made him "feel bad all over;" his appetite decreased; his nose would run almost constantly; occasioning a snuffling every few minutes, with a stopping up in the head; and he would

cough, and cough hard, any time during the day, spitting up more or less of heavy yellow matter; and he describes himself as being "out of sorts;" but the cold he now has is quite a different thing; his head is not stopped up; his nose does not run; his appetite is quite good; he does not feel bad at all; he spits up no yellow matter during the day or night either; but he has simply a dry, short, tickling cough, which keeps him from going to sleep when he first gets into bed at night; and which comes on in the morning as soon as he gets up, and begins to stir about; and with the exception of this, when he goes to bed, and when he gets up, he says he "feels well enough," having no headache, no fever, no burning feeling about the nostrils, and repeats for the hundredth time, "if I could only get rid of this cough, I would be as well as I ever was in my life." He then determines to "take something." Every body has a prescription that cured such and such a one, who "had just such a cough, only worse and of a longer duration, and it is so simple that it could not possibly hurt any one." Some of these do no good whatever; others give relief, but soon appear not to have the desired effect, and something else is resorted to, with similar results. But long before this time, a practiced observer will have noticed that other changes have been taking place; because. every hour, the disease has been digging its way deep down into the vitals. The pulse is more rapid than natural, has more of a quick, thread-like, spiteful beat; and too weak, besides; the patient is more easily tired than formerly, especially in going up stairs, or walking up a hill or gentle ascent; when he attempts to do any thing, he "gives out" sooner than he used to, causing him to have an occasional shortness of breath; about this time,

he finds occasionally that he cannot take a full long breath as formerly; something seems to cut it short, leaving an unsatisfied feeling; his friends observe that he is as lively as usual, and indeed more so; he feels, and appears cheerful; and is quick in his movements; but before he does much, or walks far, he becomes very weak about the legs and knees; and there is a great craving for a place to sit down upon, and rest awhile; and if a sofa or bed is near, it feels at first so comfortable that he is inclined to stay there; now and then there is a feeling of weight in the breast, dull, heavy, or cold-like; if he leans forward much, his breast gives way; pains, more or less transient, or permanent, are felt in some part of the chest; often these are at the lower edge of the ribs; there is now an occasional feverishness; the bowels become costive and loose alternately; sometimes the feet or hands, or both, burn very much; at others, they are uncomfortably cold; the patient begins to think that he is "falling off" some; and turns to weighing himself with very unsatisfactory results; he perceives that although his appetite is quite good, his food does not seem to do him as much good as formerly; there is unusual thirstiness during some part of the day; if the weather is but a little cool, he gets very chilly; after a while, chills frequently run all over the body, and along the spine, without any apparent cause; an emotion of the mind, a drink of cold water, is sufficient to send a succession of chilly sensations all through the system; while these symptoms are presenting themselves, the original cough, although sometimes better, has, in the main, become decidedly worse, and continues from ten or fifteen minutes to two hours, according to circumstances; throwing the system into a

nervous irritable condition; effectually preventing sleep for half the night, perhaps, when he falls into a doze from mere exhaustion; and in the morning he wakes up, pale and wan and haggard, without seeming to have derived any benefit whatever from his repose; and weak and wretched as he feels, the morning cough now attacks him, hard and dry at first, but in a few minutes he is relieved, by bringing up more or less of yellow matter, mixed with something of a whitish, frothy, bubbly character. Coughing comes on after meals, with heaving, and in some cases vomiting, although not specially attended with sickness at the stomach. As the disease progresses, he emaciates more and more, the weakness of the lower limbs increases, the amount of yellow matter expectorated becomes greater from day to day, while the frothy substance is less; there is more or less of thirst or chilliness between breakfast and dinner, with decided fever in the afternoon, which subsides during the fore part of the night, and goes off towards morning with a copious, exhausting, and death-like sweat, carrying damps and chilliness to the very heart. These sweats are accompanied or alternated, with frequent and thin, watery, light colored passages from the bowels, from two or three to a dozen or more in the twenty-four hours, attended sometimes with horrible griping pains in the bowels; at other times, there are dull pains in the muscles and bones of the limbs, occasionally almost insupportable. Even yet the patient may keep about, and appear quite cheerful; but his steps are slow, measured, and careful; his body bent forward; his shoulders inclining upon the breast, and towards one another; if he sits down a moment or two, his legs are crossed, his arms laid across his thighs,

presses on his breast by leaning forward, and thus throws the whole strain and weight of the body upon it, hastening his death by imposing an unnatural and unnecessary weight on the struggling lungs, already enfeebled and wasted by disease; he begins now to feel best in bed, where he spends the greater portion of the twenty-four hours; his ankles swell, generally the left first, often extending to the feet and legs, sometimes painfully; he cannot walk with comfort; and soon his mother earth receives him to her bosom, where myriads of her weary children have already gone, to be wasted with sickness no more.

The Author has now given a parallel history of the three diseases, in the regular order of *Throat-Ail*, at the top of the windpipe, *Bronchitis* in the branches of the windpipe, and *Consumption* in the air cells at the extremity of the branches of the windpipe; and for the interest the fact will excite in all who have little children, he here states, that *Croup*, of which so many die in spring and fall, is a disease of the windpipe itself; as soon as the small blood vessels on its inner walls become clogged up, they begin to exude through their sides, the thinner, the more watery portion of the blood, this begins to harden and toughen at once, as the gum does, that oozes out on the bark of a tree, that is wounded or injured; and the windpipe of a child being small, it does not require much to fill it up, and the little sufferer dies of suffocation; and when the windpipe is cut open after death, its inside is found lined all around (as the spout of a tea kettle, in limestone districts, is with lime) with a leathery substance, which, to use a strong expression, is almost as "*tough as a hide.*" The reader may now see the beautiful order, clearness and arrange-

ment of these most fearful and fatal diseases of the air passages; and can also so clearly understand their nature as never to forget. Hitherto, the terms employed have not conveyed to common minds any clear, definite, distinctive idea; but have left an impression, ill-defined, mysterious, unsatisfactory and obscure.

Throat-Ail, (Chronic Laryngitis, Clergyman's Sore Throat, all mean the same thing,) is a disease at the top of the windpipe, where the voice organs are.

Croup or *Tracheitis*, (because trachea is the Latin name for windpipe) is a disease of the windpipe itself.

Bronchitis is a disease of the branches of the windpipe.

Consumption is a disease of the air cells or lungs themselves, which are at the ends of the branches of the windpipe, as leaves are at the ends of the branches of a tree.

This appears to the Author, to be the plainest and most satisfactory, as well as the most rational theory of these diseases; he has entertained them for twenty years; when a better one is presented, he will change. Young physicians, and some older ones, may not accord with these views, but when these older ones have fallen into the slumber that wakes no more, and the juniors have had a quarter of a century's more experience and observation, the Author believes that the above theory will be generally entertained; most certainly, the extraordinary physiological developments of Carpenter and Liebig, and others, within five years, are strongly confirmatory of these views.

PARALLELS.

Throat-Ail is characterized by hawking, hemming, frequent swallowing away of something that appears to stick in the throat, and when swallowed away, rises back again; by inconvenience, if not actual pain in swallowing, by pain sometimes running up to the ear; by hoarseness or huskiness of voice, without cough necessarily, at first, or much expectoration.

Bronchitis never exists without distressing, exhausting cough, and with copious and weakening expectoration.

Consumption is a gradual wasting of breath, flesh and strength, sometimes without any cough or expectoration, until within two or three weeks of death.

Throat-Ail has the uniform symptom of impaired voice, or some unnatural, troublesome sensation about the "*swallow.*"

Bronchitis is always attended with watering of the eyes or nose, or both, a binding sensation across the breast, a *stuffed up* feeling, large expectoration.

Consumption has a short, dry, hacking, tickling cough at first of mornings on getting out of bed, then on going to bed, quick pulse, short breath, easily fatigued in ascending a pair of stairs, or walking up a hill or even gently rising ground.

Throat-Ail is at one end of the breathing organs.
Consumption is at the other end.
Bronchitis is between the two.

In *Throat-Ail*, there is constant forebodings and apprehension of ill; the patient lounges and mopes about,

and when he sits down, feels as if he would never want to get up again.

In *Bronchitis*, the cough is so exhausting and distressing, the invalid often feels as if death would be a welcome event.

In *Consumption*, the spirits are usually good; the patient is full of hope, busy in laying out plans for the future; how he is going to manage his business, and take care of his health hereafter, whatever else may suffer; and to every inquiry as to the state of his health, the ready answer is, "I'm better."

PHTHISIS—SCIENTIFIC DEFINITION.

Consumption is the Oxydation of the Exudation Corpuscle.—This corpuscle, *this little body*, this tubercle, this seed of consumption, is an albuminous exudation, as minutely described on a preceding page, and being deficient in fatty matter, its elementary molecules cannot constitute nuclei, capable of cell development; therefore, these nuclei remain abortive, are foreign bodies in the lungs, and like all other foreign bodies there, cause irritation, tickling. This tickling is a cause of cough, as itching is a cause of scratching, both being instinctive efforts of nature to remove the cause of the difficulty. The oxydation, that is, the burning, the softening of this corpuscle or tubercle, gives yellow matter as a product, just as the burning, that is, the oxydation of wood, gives ashes as a product. Thus the yellow matter expectorated in consumption is a sign infallible, that a destructive, consuming process is going on in the lungs, just as the sight of ashes is an infallible sign that wood or some other solid substance has been burned, that is, destroyed.

But why is it that this albuminous exudation, this tubercle, this exudation corpuscle, should lack this fatty matter, this oil, this carbon, which, did it have, would make it a healthy product, instead of being a foreign body and a seed of death?

Consumption is an error of nutrition. The patient has soliloquized a thousand times, "I sleep pretty well, bowels regular, and I relish my food, but somehow or other it does not seem to do me the good it used to. I do not get strong." The reason of this is, that the food is imperfectly digested, and when that is the case, acidity is the result, which is the distinguishing feature of consumptive disease. This excess of acid in the alimentary canal dissolves the albumen of the food, and carries it off into the blood in its dissolved state, making the whole mass of blood imperfect, impure, thick, sluggish, damming up in the lungs, that is, congesting them, instead of flowing out to the surface, and keeping the skin of a soft feel and a healthful warmth. Thus it is that the skin of all consumptives has either a dry, hot feel, or a cold, clammy dampness; at one time having cold chills creeping over them, causing them to shiver in the sun or hover over the fire; at another time, by the reaction, burning hot, the cheek a glowing red, the mouth parched with thirst. Another effect of the excess of acidity dissolving the albumen and carrying it into the blood is, that the blood is deficient in the fat, or oil, or carbon, which would have been made by the union of this albumen with alkaline secretions; the blood then wanting the fat or fuel which is necessary to keep the body warm, that which was already in the body, in the shape of what we call flesh, is used instead, and the man wastes away, just as when steamboat men,

when out of wood, split up the doors, partitions, and other parts of the boat, to keep her going; she moves by consuming herself. So the consumptive lives on, is kept warm by the burning up, the oxydation of his own flesh every day and every hour; this same wasting away being the invariable, the inseparable attendant of every case of true consumption. He lives upon himself until there is no more fuel to burn, no more fat or flesh, and he dies—"nothing but skin and bone." What, then, must be done to cure a man of consumptive disease?

He must be made more, as it is called, "*fleshy*;" that is, he must have more fuel, fat, to keep him warm.

The acidity of the alimentary canal must be removed, in order that the food may be perfectly digested, so as to make pure blood, such as will flow healthfully and actively through every part of the system, and become congested, sluggish, stagnant nowhere.

To remove this acidity, the stomach must be made strong, and healthfully active; but no more than healthfully active, so as to convert the food into a substance fit for the manufacture of pure blood.

To make the stomach thus capable of forming a good blood material from the aliment introduced into it, as a perfect mill converts the grain into good flour or meal, there is behind the mill a power to turn it, there are behind the stomach powers to be exerted. These are those of the glandular system, the liver being the main one of all. This must be kept in healthful, operating order; if it acts too much or too little, the food is badly manufactured, and the blood, which is made out of the food, and of the food alone, is imperfect and impure.

After all this is done, there is one more operation, which is the finishing touch, and the one by which pure life-

giving blood is made; ☞ a sufficient amount of pure air must come in contact with it before blood is constituted. This contact takes place in the lungs; not such a contact as the actual commingling of wine and water, for the air and what is soon to become blood are not mixed together; they are kept separate in different vessels. The air is in the lungs; that is, in the little bladders or cells, and this fluid, which is to be converted into blood, is in the little veins or tubes, which are spread around over the sides of the air-cells, as a vine is spread over a wall; but these little vessels have sides so very thin, that the life-giving material of the air passes through into the blood, just as the warmth of the sun passes through glass; but while this life-giving quality of the air passes into the blood, making it perfect, the impure and deathly ingredients of the blood pass out of it, into the air, which has just been deprived of its life. Thus it is, that while the air we draw in at a single breath is cool and pure and full of life, that which is expired is so hurtful, so poisonous, at least so destitute of life, that were it re-breathed, instantly, uncombined with other air, by a perfectly healthy person, he would instantaneously die. So that pure air in breathing is most essentially indispensable; first, to impart perfection, life, to the blood; and also to withdraw from it its death. No wonder, then, that a plentiful supply of pure air is so essential to the maintenance of health, so doubly essential to the removal of disease and restoration to a natural condition. No wonder, then, that when a man's lungs are decaying, and thus depriving him of the requisite amount of air, he so certainly fades away, unless the decay is first arrested, and the lung power or capacity restored.

The great principles, then, involved in the cure of Consumptive disease, or, professionally speaking, the great indications, are—

To cause the consumption and healthful digestion of the largest amount possible of substantial, nutritious, plain food.

To cause the patient to consume more pure air.

To bring about the first condition, requires the exercise of extensive medical knowledge, combined with a wide experience and close and constant observation. To regulate healthfully the digestive apparatus—that is, to keep the whole glandular system of the human body in healthfully-working order—requires remedies and treatment as varied in their combinations almost as the varied features of the human face. Scarcely any two persons in a hundred are to be treated in the same way, unless you can find them of the same size, age, sex, constitution, temperament, country, climate, occupation, habits of life, and manner of inducing the disease. Here are ten characteristics, which are capable, as every arithmetician knows, of a thousand different combinations; so that any person proposing any one thing as a remedy, a cure for Consumption, applicable to all cases and stages, must be ignorant or infamous beyond expression.

The two things above named will be always curative in proportion to their timely accomplishment. The ways of bringing these about must be varied according to constitution, temperament, and condition. The *mode* of doing the thing is not the essential, but *the thing done.* Beyond all question, the thing can be done; Consumption can be cured, and is cured in various ways. The scientific practitioner varies his means according to the existing state of the case. The name of the disease is

nothing to him: he attacks the symptoms as they are at the time of prescribing; and if he be an experienced practitioner, he will know what ought to be done, and how it should be attempted, just as a classical scholar knows the meaning of a classical phrase or word the first time he ever sees it, as perfectly as if he had seen it a thousand times before. And without setting myself up as an instructor to my medical brethren, I may here intimate my conviction, that the cure of Consumption would be a matter of every day occurrence, if they would simply study the nature of the disease, read not a word of how it had been treated by others, but observe closely every case, and treat its symptoms by general principles, as old as the hills, and follow up the treatment perseveringly, prescribe for the symptoms, and let the name and disease go. But, then, they must first understand perfectly the whole pathology of the disease —its whole nature. That, however, requires years of laborious study and patient observation.

The above things being true, as perhaps none will deny, it is worse than idle to be catching up every year some new medicine for the cure of Consumption. The readiness with which every new remedy is grasped at, shows beyond all question that the predecessors have been failures. Scores of cures have been eagerly experimented upon;—naptha, cod-liver oil, phosphate of lime, each will have its day, and each its speedy night, simply because no one thing can by any possibility be generally applicable, when solely relied upon. The physician must keep his eye steadily upon the thing to be done, varying the means infinitely, according to the case in hand. Therefore, the treatment of every individual case of Consumption should be placed in the

hands of a scientific and experienced physician, and in time, and not wait, as is usually the case, until every balsam and syrup ever heard of has been tasted, tried, and experimented upon, giving the practitioner nothing to work upon but a rotten, ruined hulk, leaving scarcely anything to do but to write out a certificate of burial, and receive as compensation all the discredit of the death.

The necessity of keeping the whole digestive apparatus in high and healthful operation in the successful treatment of Consumptive disease, is illustrated by a description of the mode of nutrition, as connected with

CELL DEVELOPMENT.

The human body is in constant transition. The particles of which its structure is constituted are not the same in position and relation for any two minutes in succession. Thousands of atoms which compose it the present instant, are separated from it the next, to make a part of it no more; and other thousands, which are a portion of the reader's living self while scanning this line, will have been rendered useless and dead on reading the next. There are two different armies of workers, whose occupations cease not from the cradle to the grave. One army, composed of its countless millions, is building up the body; the other removes its waste; one party brings in the wood and the coal for the fireplace and the grate, the other carries away the ashes and the cinders:—the builders and the cleansers. When the builders work faster than the cleansers, a man becomes fat, and over-fat is a disease. When the cleansers are too active, the man becomes lean, and wastes away to a

skeleton, as in Consumption. Health consists in the proper equilibrium of these workers.

Every movement of the body, every thought of the mind, is at the expense of a portion of the material frame; that is to say, certain atoms of the living body are killed by every action of the mind, by every motion of the body, and being dead, are useless. But they must be removed from the body, or these "heaps of slain" would fill up the workshop of life, and the whole machinery would stand still; the fire-place would be filled with ashes, the furnace clogged with cinders, and the grate be useless. Vast masses of these dead atoms are pushed, worked out, or thrown from the body at the surface. At any night, on undressing, the cleanliest person may rub from the body countless numbers of these dead atoms, a teaspoon-ful of them may be gathered from the feet at a single washing, if long neglected. Hence the value of thorough daily frictions to the skin, as promotive of health, because, on an average, we all eat about one-third more than is needed; thus throwing on the cleansers a third more labor every twenty-four hours than they were designed to perform. By the frictions we come to their aid artificially. They are wise who perform these frictions daily and well; but wiser they by far who do not eat the extra one-third, and consequently do not need to be scrubbed and bathed and washed every day of their existence, to save them from the effects of over-feeding. Better eat less and save trouble. The surplus third would feed half the poor of the land.

But a larger portion of these dead atoms are scattered in the more interior parts of the body, and the cleansers remove them by first rendering them fluid, as solid ice

or snow is made fluid by heat. It is then, as it were, sucked up by these cleansers, and conveyed finally to the blood, just at the heart, where they are mingled together and sent direct to the lungs, where they meet with the pure air that is breathed. Here an exchange takes place between the air and the blood. The air gives to the blood its oxygen, its life, while the blood gives its death to the air. Hence it is that the air gives life as it goes into the lungs, but gives death if breathed unmixed as it comes from the lungs; that is, if a healthy person were to breathe for three minutes, no other air than that which has just come off the lungs of another man, in three minutes he would die. Hence the double reason for my insisting so much on causing consumptive persons to breathe the largest possible amount of pure air; it unloads the blood more perfectly of its dead atoms, and also gives life to the essence of food which it also meets in the lungs; that is, puts the finishing work to its becoming living blood.

Let us notice next the builders, whose work is to supply new and living particles as fast as the old ones fall off and die. These new particles are in the blood, which delivers its living freight as it flows through the body, as a steamer delivers its freight to the thousand different ports as it ploughs along the majestic Mississippi. Whenever a living particle comes to the point where it is needed to supply the place of one just fallen or dead, by some inscrutable, inexplicable agency, as quick as electricity itself, a vesicle, a cell, a little boat, as it were, is formed, which floats it to the spot, delivers its charge, and bursts and dies, its duty done, the objects of its creation having been performed:—an apt type of the whole and living man, who, when the great object of his crea-

tion is performed on earth, himself passes away in death; and happy indeed would he be, were that work so fully, so well, and so invariably performed. These little wrecked, these bursted boats, have been collected, and ascertained to be made invariably and almost wholly of two materials—phosphorus and lime, which also are constituents of the brain itself. This phosphorus and lime are supplied by what we eat and drink. If we do not eat and drink enough, or if what we do eat and drink has not enough of these constituents; or if, again, it is not perfectly digested, then there is not enough of these constituents to make the necessary boats to freight the living particles to their destination; hence, the man wastes away to skin and bone, and dies—not because he does not eat, but because what he does eat, does him little or no good. Especially thus is it in Consumption; a man dies of inanition, or, as physicians say, *an error of nutrition.*

Consumptive people die for want of strength, want of flesh, want of nutriment; not for want of lung substance, as is almost universally supposed. They die, in almost every instance, long before the lungs are consumed, so far as to be incapable of sustaining life. Numerous cases are given where men have lived for years with an amount of available lungs not equal to one-fourth of the whole. They were there, perhaps, but not available, not efficient. The majority of persons who die of Consumption, perish before a *third* of the lungs have consumed away, in consequence of loose bowels, torpid liver, indigestion, night sweats, want of sleep, clogging up of the lungs with matter and mucus by the daily use of cough drops, balsams, tonics, or other destructive agents. These symptoms need but be con-

trolled to protect life, indefinitely; that is to say, if the symptoms were prescribed for according to general principles, and properly nursed, letting the consumptive portion of the disease alone, it would sometimes cure itself, or at least allow the patient to live in reasonable comfort for a number of years.

The reader may almost imagine that he has a clue to the cure of Consumption, if he could but give the patient phosphorus and lime, or phosphate of lime—that is, burnt bones—eight or ten grains, with the first mouthful of each meal, so as to let it be mixed with the food and carried with it into the blood; from twenty to thirty grains being daily needed in health. The scientific world were charmed less than a hundred years ago by the discovery of oxygen. It was supposed that as oxygen was the constituent of the air which imparted vitality to the blood, gave it its purity, its activity, and filled the man with life and animation, nothing was needed but to take enough oxygen to purify the blood, and thus strike at the root of all disease. Accordingly, the oxygen was prepared and administered. The recipient revived, was transported, was fleet as the antelope, could run with the wind. He smiled, he fairly yelled for joy, and—died, laughing, or from over excitement. The machine worked too fast; it could not be stopped, and pure oxygen has never been taken for health since.

Thus it will, perhaps, always be with artificial remedies; they cannot equal those which are prepared in Nature's manufactory. The phosphate of lime, in order to answer the purposes of nature, must be eliminated from the healthful digestion of substantial food in the stomach, and the only natural and efficient means of obtaining the requisite amount is, to regulate the

great glands of the system in such a manner as to cause the perfect digestion of a sufficient amount of suitable food, and this is within the power of the scientific practitioner, in the great majority of cases of consumption, when attempted in its early stages; but for confirmed Consumption—that is, when the lungs have begun to decay away, it is criminal to hold out any promises of cure, or even of essential relief, in any given instance.

In illustration of the subject of a perfect digestion in its relation to food and fresh air, the following incidents are here given:

"SUICIDE BY STARVATION.

"A very curious example of suicide by means of starvation occurred some years ago in Corsica. During the elections, the Sieur V. rushed into the electoral college armed with a dagger, which he plunged into the breast of a man who had done him some injury. The man fell dead at his feet. The assassination was committed in the full light of day, and in the presence of an assembled multitude.

"V. was tried, found guilty, and condemned to death. His high spirit and resolute character were well known, and it was suspected that he would seek, by a voluntary death, to evade the disgrace of perishing on the scaffold. He was therefore vigilantly watched, and every precaution taken to deprive him of the means of putting an end to his existence.

"He resolved to starve himself to death during the interval which elapsed between the sentence of the Court or Assizes, and the reply which the Court of Cassation would make to the appeal he had addressed to it.

"He had succeeded in concealing from the observation of his jailers a portion of the food with which they supplied him, so as to make it be believed that he regularly took his meals. After three days' abstinence, the pangs of hunger became insupportable. It then suddenly occurred to him that he might the more speedily accomplish the object he had in view by eating with avidity He thought that the state of exhaustion to which he was reduced would unfit him to bear the sudden excess, and that it would inevitably occasion the death he so ardently desired. He accordingly sat down to the food which he had laid aside, and ate voraciously, choosing in preference, the heaviest things. The consequence was that he was seized with a violent fit of indigestion, of which, contrary to his expectation, the prison doctor speedily cured him.

"He then resumed his fatal design. He suffered again what he had undergone before. The torture was almost beyond his strength. His thirst, too, was intolerable. It overcame his resolution. He extended his hand towards the jug of water which had been placed in his cell. He drank with avidity, and, to use his own expression, *was restored to life.*

"To avoid yielding again to a similar temptation, he daily took the precaution of overturning the jug of water which was brought to him. Lest he should be induced to raise it to his lips, he threw it down with his foot, not venturing to touch it with his hand. In this manner he passed eighteen days.

"Every day, at different intervals, he noted down in his album, a minute account of his sensations. He counted the beatings of his pulse, and marked their number from hour to hour, measuring with the most

scrupulous attention, the gradual wasting of his strength. In several parts of his melancholy *memento*, he declares that he felt it harder to bear the agonies of thirst than those of hunger. He confesses that he was frequently on the point of yielding to the desire of drinking. He nevertheless resisted.

"He was surprised to find his sight become more and more clear, strong and accurate; it appeared to him like the development of a new sense. The nearer he approached his latter moments, the more his power of vision seemed to increase. On this subject he thus expresses himself: 'It appears as though I could see *through* the thickest walls.' His sense of feeling likewise attained the most exquisite sensibility. His hearing and smelling improved in a similar degree. His album contains many curious statements on these subjects.

"The Sieur V. had devoted some attention to anatomy and physiology; and he attributes the increased acuteness of his senses to the way in which the intestinal irri tation acted on the nervous system.

"His ideas, he says, were numerous and clear, and very different from anything he had experienced in moments of excitement or intoxication. They were all directed to logical investigation, whether he applied them to an analysis of material objects, or to philosophic contemplation. He also felt himself inspired with a singular aptitude for mathematical calculation, a study for which he had previously felt very little inclination. In short, he declares that he never derived so much gratification from his intellectual condition, as throughout the whole duration of his physical torture.

"He made notes in his album to the last moments of

his existence. He had scarcely strength sufficient to hold the pencil with which he traced the following words: 'My pulse has nearly ceased to beat—but my brain retains a degree of vigor which, in my sad condition, is the greatest solace Providence could bestow on me. It is impossible that I can live out this day. My jailers watch me, and fancy they have adopted every precaution. They little think that I have outwitted them. Death annuls the sentence which has been pronounced on me. In another hour, perhaps, they will find nothing but a cold corpse.'

"V. expired as he foretold. His album has been carefully preserved. It is a record replete with interest to medical professors. The slow torture, endured with so much courage, and described with such remarkable clearness, renders it one of the most curious documents in the annals of medical science."

Illustrating the same point, a gentleman, Mr. I. F. H. stated to the Author that he was once under medical treatment for some affection of the eyes, requiring a very scanty diet. His general health was excellent, but he was always hungry; yet so far from having any sense of debility, he had, when he went out into the street, an elasticity of mind and body, an instinctive desire of locomotion, which caused him to feel as if he could almost fly, and a joyousness of spirit, which was perfectly delightful.

These two cases strikingly show, that with a smaller amount of food, and consequently of blood, men are cheerful in mind and active in body; ☞ therefore, a small amount of food, perfectly digested, gives more health and strength than a larger, if not so. It is better,

incomparably better, to feel a little hungry all the time, than to feel full, oppressed, heavy, with over eating.

Every patient of mine, who ever expects to get well, must keep this fact constantly and practically in view. It is too much the custom to measure one's health by the avidity of his appetite and his increase in flesh, as if he were a pig; forgetting that a voracious appetite and fat, are always indications of a diseased body. A uniform, moderate appetite, is the attendant of good health. A racer's ribs must be seen before he is fit for the track, because then he is most capable of endurance.

The next incident shows, that with a moderate amount of substantial food and cold water, such being prisoner's fare, men may live for many years, with but little exercise, in the dark vaults of a prison, breathing all the time an atmosphere not very pure, as may be readily supposed. And it is earnestly hoped that the incidents narrated will leave upon the mind of every reader a life-long impression as to the value, both to the sick and the healthy, of living habitually on a moderate allowance of plain, substantial, nourishing food. It may be well to recollect here, that it is not the quality, so much as the quantity of food, which lays the foundation every year of innumerable diseases and deaths. Let it be remembered, also, that men need a variety of food; living on only one kind for a length of time will always undermine a healthy constitution. Milk only, has all the elements of life; and any other one kind of aliment, used indefinitely as to time, will as certainly deteriorate the constitution, bodily and mental, as anything that is planted will deteriorate, if kept for successive years in the same field, unrenewed. The popular notion that one or two kinds of food at a meal is *most whole-*

some, is wholly untrue. On the contrary, several kinds at a meal, other things being equal, are more conducive to our well-being. Quantity, and not quality, is the measure of health.

COUNT CONFALIONERI

wrote from the great jail of Vienna as follows:—

"I am an old man now, yet by fifteen years, my soul is younger than my body: fifteen years I existed, for I did not live. It was not life in the self-same dungeon, ten feet square. During six years I had a companion; nine years I was alone. I never could rightly distinguish the face of him who shared my captivity in the eternal twilight of our cell.

"The first year we talked incessantly together. We related our past lives, our joys forever gone, over and over again.

"The next year we communicated to each other our ideas on all subjects.

"The third year we had no ideas to communicate; we were beginning to lose the power of reflection.

"The fourth, at intervals of a month or so we would open our lips, to ask each other if it were indeed possible that the world was as gay and bustling as it was when we formed a portion of mankind.

"The fifth year we were silent.

"The sixth, he was taken away, I never knew where, to execution or to liberty. But I was glad when he was gone: even solitude was better than that pale and vacant face. After that, I was alone.

"Only one event broke in upon my nine years' vacancy. One day, it must have been a year or two after my companion left me, my dungeon door was

opened, and a voice, I knew not whence, uttered these words: 'By order of his Imperial Majesty, I intimate to you, that one year ago, your wife died.' Then the door was shut. I heard no more. They had but flung this great agony in upon me, and left me alone with it again."

Having shown the bearing which food has on health, I desire to make some statements as to the value of air and exercise in the same direction. These will be given succinctly, in the hope that the intelligent reader will study them and apply them at length, especially if he should come to me for medical advice. My habit is not merely to cure, when I can, the patient who comes to me, but to induce him to study and understand his own case and constitution, so that by the application of general principles, he may afterwards be able to regulate his health under all ordinary circumstances, as far as it can be done by diet, air, exercise, and regularity of personal habits: but never venturing to take an atom of medicine, however simple, except by the special advice of an educated, experienced physician.

IMPORTANCE OF PURE AIR TO HEALTH.

Men are reported to have lived three weeks without food, but without air we cannot live three minutes. The lungs of a full-sized man weigh about three pounds, and will hold twelve pints of air; but nine pints are as much as can be inhaled at one full breath, there being always a residuum in the lungs; that is, *all* the air that is within them can never be expelled at once. In common, easy breathing, in repose, we inhale one pint. Singers take in from five to seven pints at a single breath. We breathe, in health, about eighteen times in

a minute; that is, take in eighteen pints of air in one minute of time, or three thousand gallons in twenty-four hours.

On the other hand, the quantity of blood in a common-sized man is twenty pints. The heart beats seventy times in a minute, and at each beat throws out four tablespoons; that is, two ounces of blood; therefore, there passes through the heart, and from it through the lungs, an amount of blood every twenty-four hours equal to two thousand gallons.

The process of human life, therefore, consists in there meeting together in the lungs, every twenty-four hours, two thousand gallons of blood and three thousand gallons of air. Good health requires this absolutely, and cannot be long maintained with less than the full amount of each; for such are the proportions which nature has ordained and called for. It is easy, therefore, to perceive, that in proportion as a person is consuming daily less air than is natural, in such proportion is a decline of health rapid and inevitable. To know, then, how much air a man does habitually consume, is second in importance, in determining his true condition, to no other fact; is a symptom to be noticed and measured in every case of disease, most especially of disease of the lungs; and no man can safely say that the lungs are sound and well and working fully, until he has ascertained, by actual mathematical measurement, their capacity of action at the time of the examination. All else is indefinite, dark conjecture. And I claim for myself to have been the first physician in America who made the measured amount of consumed air, an essential element, as to symptoms, in ascertaining the condition of persons in reference to the existence of consumptive disease, and made

a publication thereupon. The great and most satisfactory deduction in all cases being this, that if, upon a proper examination, the lungs of any given person are working freely and fully, according to the figures of the case, one thing is incontrovertibly true, demonstrably true, that whatever thousand other things may be the matter with the man, he certainly has nothing like Consumption. And Consumption being considered a fatal disease by most persons, there is quite a willingness to have anything else: and the announcement and certainty that it is not Consumption, brings with it a satisfaction, a gladness of relief, which cannot be measured.

On the other hand, just in proportion as a person is habitually breathing less air than he ought to do, in such proportion he is falling fast and surely into a fatal disease. This *tendency* to Consumption can be usually discovered years in advance of the actual occurrence of the disease; and were it possible to induce the parents of children over fifteen years of age, to have an investigation as to this point in the *first place*, and *then* to take active, prompt, and persevering measures to correct the difficulty, and not one case in a thousand need fail of such correction, with but little, if any medicine, in most instances none, many children would be prevented from falling into a premature grave, and would live to be a happiness and honor to the old age of those who bore them. Persons who live in cities and large towns think, and wisely so, that the teeth of their children should be carefully examined by a good dentist once or twice a year; but to have the condition of the lungs examined, and, if need be, rectified, few, if any, ever think of such a thing. And yet, as to practical importance, it immeasurably exceeds that of attention to the teeth. The latter are cared for as a

matter of personal appearance and comfort; the lungs are a matter of life and death. We can live and be happy without a tooth, but without lungs we must prematurely die. Were the condition of the lungs, after such an examination as I have suggested, a matter of opinion or conjecture only, I would not propose it; but it is not: it is a thing of numerical measurement, of mathematical demonstration, as to the one point, Do the lungs work freely and fully or not? If they do not, declining health is inevitable, sooner or later, unless their activity is restored, which, however, can be done in the vast majority of cases.

The actual practical results correspond with the above statements. A man came into my office who had lost half his measurement. I told his brother that although appearances were against the opinion I was going to give, and he had walked to my office from his own apartments, several squares off, without much fatigue, yet I felt bound to say he could not survive three weeks. Within that time he died with unmistakable consumption.

Another gentleman came to me from North Alabama, attended by his brother, who was extremely anxious to know his condition, but desired me to withhold my opinion from the invalid. He told me his brother had been improving of late, was greatly better, and stronger, and livelier than he had been for some time past. On examination, I found he had lost two-fifths of his measurement; and felt compelled to say, that he could not under any conceivable circumstances live six weeks, and that he ought to be taken to his family without the least possible delay. He died in about five weeks from that time. These are given as examples from many others.

In short, the use which I make of these things is simply this,—if a man is deficient in measurement, and under my treatment, lessens that deficiency every week, I encourage him to persevere, for he is evidently and substantially improving. If, unfortunately, on the other hand, the deficiency increases every week, notwithstanding all I can do, I send him home, because he is declining every day, and must inevitably die; and I desire no man's money, unless I believe that I am doing him a commensurate good. A highly respectable physician of extensive practice, from Kentucky, called to see me. I explained every thing to him as fully as I could, and on submitting himself to examination, he said at once, in a manner and tone so despairing I can never forget it, "*I see it—it is of no use to try anything; I may as well go home and die.*" He started on his return the next morning, and died not long after his arrival. With facts like these constantly occurring, I look upon this new diagnostic with increasing admiration.

A deficiency of measurement arises from two principal causes.

An actual loss of the substance of the lungs; or an infiltration, or inaction or solidification. Auscultation must decide which of these it is. A young gentleman came to me from one of the western counties of Missouri. He was sent by an elder brother who had been cured by me of cough, pain in the breast, &c., several years before. His principal symptoms were distressing pains about the breast, no appetite, sleepless nights, and such an inveterate spitting of blood, that walking two or three squares would cause him to bring it up by mouthfuls. His deficiency of lung measurement was nearly one-third; but auscultation showed that it came from the

air cells of the lungs being filled up with collections that did not properly belong there. His brother was greatly alarmed : his family physician said it was useless for him to come to me, as it was a clear case of tubercular consumption. I at once informed his brother that I thought he could be cured, that so far from its being a dangerous case, he could safely and profitably leave for home in a week. I gave him some vegetable pills, administered quinine and elixir of vitriol three time a day, and required him to walk about the city from morning till night; never carrying his exercise to fatigue or exhaustion. Within a week he ceased to spit blood altogether; his appetite returned, his sleep became sound, unbroken and refreshing; his bowels regular daily, without medicine for that purpose; whereas, before, they had kept obstinately costive; his strength returned so that he could walk for hours at a time without special fatigue; and on the eighth day when he left, his lungs measured to the full healthy standard. With results like these, I should be excused if I speak enthusiastically in these pages. These are facts, and I consider them triumphant, and in recording them, enjoy the pleasurable feeling which a man possesses when he knows he is right, and sees that the multitude, now incredulous, will sooner or later agree with him.

In confirmation of my views in relation to the importance and value of this new method of determining the actual condition of the lungs, what proportion of them are in healthful and efficient operation, I will give the testimony of two of the most respectable and extensive periodicals in the world. The London Lancet, one of whose Editors has been for some years a member of the British Parliament, and who is honored every session by

appointments on committees, among the most important to a nation's interest, says: "This mode of distinguishing Consumption at an earlier period than by any other means, has been actually proved."

The British and Foreign Medical Review, while edited by Dr. Forbes; and which has been conducted with such signal ability for the last quarter of a century, that it is now circulated in every part of the globe, says: "We have no hesitation in recording our deliberate opinion that this is one of the most valuable contributions to physiological science that we have met with for some time."

I consider the stethescope and percussion as mere toys, which do well enough to excite the wonder of the credulous. I must confess they never gave me any satisfaction, I never could learn anything by them. It may be different with others, but I believe that the ear laid upon the patient's breast, with nothing intervening but a single thickness of the inner garment, stretched without a wrinkle and laid smoothly on the skin, is immeasurably preferable to any stethescope ever invented, it tells us more certainly and in louder tones by far, all that stethescopy and percussion pretend to, and in a more simple and natural manner. In all cases I use the ear directly, to ascertain the more prominent sounds, but the stethescope and percussion never; nor do I place any dependence on the eye, nor the moving of the extended hand over the chest. In forming an opinion in a case of Consumption, the main foundations are,

1st, The condition of the pulse.

2d, The degree of the emaciation.

3rd. The measurement of the lungs.

4th, The sounds given to the ear when it is laid on the patient's breast, while standing; or back when stooping forward; a single thickness only intervening of the inner garment stretched smoothly over the skin.

Cough, spitting of blood, and expectoration, I consider, of themselves, of little consequence, for the simple reason that they cannot be relied upon, until too late a stage in the progress of the disease. No one pretends that either of them has an invariable cause, an invariable effect, or an invariable tendency, therefore, by themselves, they are symptoms of little value. In reference to this new method of determining the early existence of Consumptive disease, the London Lancet says: "It is proven by actual experiment, that a man's lungs, found after death to have been tuberculated to the extent of one cubic inch, had been by that amount of tuberculariza tion controlled in their action to the extent of more than forty inches." It is very apparent then, that this mode of examination detects the presence of tubercles in their earliest formation, which is in fact the only time to attack Consumption successfully and surely; and when attempted at the early stage, before it is at all fixed in the system, the certainty of success in warding off the danger, of curing the disease, is as great as that of warding off the cholera or perfectly curing it, if attempted at the first appearance of the premonitory symptoms; and as when cholera is present in a community, every person who has three or more passages from the bowels within twenty-four hours, ought to be considered as attacked with cholera, and should act accordingly, so when a man has tubercles in his lungs to the extent of impairing their functions for a dozen inches, that is, when his lungs do not (with other symptoms) hold enough air

by a dozen inches, he should consider himself as having Consumption, and should act accordingly and with the assurance that in four cases out of five, human life would be saved by it. And as thousands have died with cholera by hoping they did not have it, or denying they had it, although warned by the usual symptoms of its commencement, until its existence was so apparent to the commonest observer as to render a hope of cure impossible, so precisely is it in Consumption: people will not take warning by the symptoms in their own persons, which have in thousands of others terminated in certain death, but go on day after day without reason, hoping that the symptoms will go away of themselves, and steadily deny that they have the disease, until remedy is hopeless. If, then, a man should take the alarm, as soon as he perceives that he is habitually consuming a less amount of air at each act of breathing than he ought to do, whatever may be the cause of it, so on the other hand, if he finds, on examination, that his lungs contain fully as much air as the system requires, then is it beyond all question, that all his lungs are within him, in healthful action, and therefore must be perfectly free from Consumptive disease; that whatever else may be the matter with him, it most evidently is not Consumption.

THE MANNER OF DYING.

It has been elsewhere remarked, that when persons die of consumption, it is not from the amount of lung substance actually destroyed, because many persons have been known to live for years with an amount of lungs only equal to one-third of the whole, while from actual inspection of the lungs after death from phthisis, seldom as much as one-third of them have decayed

away. The more immediate cause of death therefore in consumption is inanition, wasting away, inability of the glandular system to derive sufficient nourishment from the food eaten, or from the want of a more direct control over the disorder of some more critical part or function of the system. Every thing, every part wastes away but the brain, that maintains its integrity, with but few exceptions to the very last effort of expiring nature. Hence, however much the consumptive may suffer in other respects, he has at least this satisfaction, that in the last earthly conflict, he will have his senses fully about him. When persons die from other diseases, the senses die one by one, the sight first, then the smell, the taste, the speech, the touch, and last of all the *hearing*, hence no whisper should ever be uttered in the chamber of death, except it is intended for the dying, for the softest voice in the most distant corner is conveyed in loudening tones to the departing, and for an equally good reason, should all loud words be avoided, because they grate painfully on the increased sensibility of the ear. While in other diseases, the senses die one by one, in consumption they all pass away together, (except the sight, which goes first) and at the last moment. The reason that consumptives maintain their senses to the last is, that the brain is the last part of the human body that feels the effect of inanition, of starvation. The incident given on page 72, illustrates this fact; there are, it is true, circumstances which may modify this explanation, as there are but few statements which apply universally.

In the following list of the dying words of the distinguished dead, are confirmations of the general principle laid down.

"Head of the army."—*Napoleon.*

"L'Isle D'elbe, Napoleon."—*Josephine.*

"I must sleep now."—*Byron.*

"It matters little how the head lieth."—*Sir W. Raleigh.*

"Kiss me, Hardy."—*Lord Nelson.*

"Don't give up the ship."—*Lawrence.*

"I'm shot if I don't believe I'm dying."—*Chancellor Thurlow.*

"Is this your fidelity?"—*Nero.*

"Clasp my hand, my dear friend, I die."—*Alfieri.*

"Give Dayroles a chair."—*Lord Chesterfield.*

"God preserve the Emperor."—*Hayden.*

"The artery ceases to beat."—*Haller.*

"Let the light enter."—*Goethe.*

"All my possessions for a moment of time."—*Queen Elizabeth.*

"What! is there no bribing death."—*Cardinal Beaufort.*

"I have loved God, my father, and liberty."—*Madam De Stael.*

"Be serious."—*Grotius.*

"Into thy hands, O Lord."—*Tasso.*

"It is small, very small indeed," (clasping her neck).—*Anne Boleyn.*

"I pray you, see me safe up, and for my coming down, let me shift for myself," (ascending the scaffold).—*Sir Thomas Moore.*

"Don't let that awkward squad fire over my grave."—*Robt. Burns.*

"I feel as if I were to be myself again."—*Sir Walter Scott.*

"I resign my soul to God, and my daughter to my country."—*Jefferson.*

"Am I so far gone ?"—*Niebuhr.*

"There is not a drop of blood on my hands."—*Fred. V., of Denmark.*

"Let me hear once more those notes which have so long been my solacement and delight."—*Mozart.*

"A dying man can do nothing easy."—*Franklin.*

"Let not poor Nelly starve."—*Charles II.*

"Let me die to the sounds of delicious music."—*Mirabeau.*

"Remorse."—*John Randolph of Roanoke.*

"The Lord reigns, let the earth rejoice."—*Rev. Dr. E. Cornelius.*

"Doctor, I think I am getting weaker, feel my pulse."—*John Newland Maffit.*

"Adieu my beloved Cuba; adieu my brethren," (the instant before his execution.)—*General Lopez.*

"Sister, I am weary, let us go home."—*Neander.*

"But even the log on the Delaware, has its care taker."—*Dr. Joseph Parish.*

"How violent is this disorder, how very extraordinary it is!"—*Stephen Girard.*

"I forgive the authors of my death, and I pray that my blood may not fall upon France," (the moment before he was guillotined).—*Louis XVI.*

"I'm most gone."—*Rev. Andrew Todd.*

"It is well."—*Washington.*

"Independence for ever."—*Adams.*

"It is the last of earth."—*J. Q. Adams.*

"I wish you to understand the true principles of the government. I wish them carried out. I ask nothing more."—*Harrison.*

"I have endeavored to do my duty."—*Gen. Taylor.*

"Doctor, I am dying very hard, it seems as though I shall never get through with it."—*Vice Pres. King.*

"I could wish this tragic scene were over."—*Quinn, the Actor.*

'God bless you all."—*Dr. Chalmers.*

"I still live."—*Daniel Webster.*

"My son, don't leave me, I'm going soon."—*Henry Clay.*

COUGH

is an instinctive spasmodic effort of the lungs to expel the air which they contain, through their "pipes," or their bronchial branches, for the purpose of carrying before it, and out through the mouth, any thing which is in the lungs or air passages, and which ought not to be there. It is a law of the animal economy to relieve itself; not the least of all the wonderful adaptations which Infinite wisdom and benevolence has ordained for our preservation. The eye begins to water and wash out with tears the particle of dust or sand which offends it. The stomach revolts instantaneously at the presence of poison, and ejects it. The tongue repels any thing placed upon it, that is not adapted to the well being of the system. And if the lungs were less vigilant, accumulations would take place from time to time, and they would eventually fill with solid substances, air could not enter, and we would die. Cough is excited by putting a straw or feather or other offending substance in the ear, thus if a person is asleep, and an insect were crawling in, the cough would arouse him.

Cough is the common attendant of Consumptive disease. Although it does not imply that because a man has a cough he must necessarily have Consumption, yet no one can have Consumption without a cough sooner or later, with extremely rare exceptions.

This cough is an effort of nature to remove from the lungs that which ought not to be there, that which is causing mischief, just as vomiting is an effort of nature to remove from the stomach that which, if permitted to remain longer would cause increasing mischief. Therefore to take medicine to repress cough is to counteract

nature, and if persevered in will always hasten death. Hence opium, paregoric, laudanum, morphine, or any other anodyne known to men, when taken day after day, will inevitably and under all circumstances make death the more certain in all forms of Consumptive disease, unless there is a physician in attendance to counteract their mischievous effects. And as every intelligent druggist knows that of all the patent or secret medicines sold for coughs, colds and consumption, there is not a single one that does not contain an opiate or anodyne in some shape or form, so they all fight against nature, derange her machinery, lock up the glands of the system, disorder the secretories, and therefore must prepare the way for a more certain decline and death. It is therefore suicidal to use them.

ILLUSTRATION.

An error which many persons fall into, in the treatment of Consumption, is in meddling with the cough. In standard medical works, cases are often given, to show that a troublesome and long continued cough may exist, and nothing be the matter with the lungs. In all such cases, all remedies addressed to the lungs must fail; and he who in a real case of Consumption, at once sets about to destroy the cough, destroys the patient. Many a person says, "If I could only get clear of this troublesome cough, I would be as well as I ever was in my life." Another will say, "there is nothing the matter with me but a little cough." A third will come in and say, "Doctor, I am not sick, and I don't want to go through a course of medicine, I only want you to give me something to cure this cough. I have a good appetite, and sleep sound when I do get to sleep; bowels

regular, and I feel hearty and strong, but this cough is always pestering me; just give me some drops to take it away, and I will be as well as ever I was in my life." A case:—I was once called to see a very estimable lady, whose worst symptom was a distressing cough; she complained of pains about the breast and neck, and of several other things of minor importance. I told her the cough was deep seated, that it would require all her efforts to get rid of it, and that this would have to be done in a very gradual manner; that I would prevent her coughing at night, but that the cough during the day must be borne with, as it aided in bringing away the constant accumulations, otherwise her lungs would very soon fill up, and she would suffocate. She, however, became impatient, and being remiss in following some of my directions, I ceased to prescribe for her, after seeing her four or five times. Some one was called in who had "cured several cases worse than she was, in a few days." His medicine seemed to have a good effect; in a day or two the cough sensibly declined, and finally ceased altogether, and with it the expectoration, and about the same time she died. And it is thus that thousands are destroyed every year; they purchase various syrups and cough remedies, and because they moderate the cough, they think they are getting well; losing sight of the fact, that they are getting no stronger, or losing flesh, or that the dose has to be increased; and as soon as they cease taking it, the cough returns, proving conclusively that it is only a palliative, while the main disease is working its way deeper into the system.

MORNING COUGH.

It is not as extensively known as it ought to be, that, in the large majority of cases, Consumption begins with *a slight cough in the morning on getting up.* After a while it is perceived at night on going to bed; next, there is an occasional "coughing spell" sometime during the night; by this time there is a difficulty of breathing on any slightly unusual exercise, or in going up stairs, or ascending a hill; and the patient expresses himself, with some surprise, "Why, it never used to tire me so!" Next, there is occasional coughing after a full meal, and sometimes "casting up." Even before this, persons begin to feel weak, while there is an almost imperceptible thinning in flesh, and a gradual diminution in weight —harassing cough, loose bowels, difficult breathing, swollen extremities, daily fever, and a miserable death! Miserable, because it is tedious, painful, and inevitable. How much it is to be wished that the symptoms of this hateful disease were more generally studied and understood, that it might be detected in its first insidious approaches, and application be made at once for its arrest and total eradication; for certain it is that, in very many instances, it could be accomplished.

It must be remembered, that cough is not an invariable attendant of Consumption of the lungs, inasmuch as persons have died, and on examination, a large portion of the lungs were found to have decayed away, and yet these same persons were never noticed to have had a cough, or observed it themselves, until within a few days of death. But such instances are rare, and a habitual cough on getting up, and on going to bed, may be safely set down as indicating Consumption begun. Cough as

just stated, is originally a curative process, the means which nature uses to rid the body of that which offends, of that which is foreign to the system, and ought to be out of it; hence the folly of using medicines to keep down the cough, as all cough remedies sold in the shops merely do, without taking means at the same time for removing that state of things which makes cough necessary, that is, the congestions, the cloggings up, which occasion the exudations previously described.

SPITTING BLOOD.

All that the Author aims to do in these pages, is to speak his own sentiments, as formed from what he has seen; and it is perhaps the best method of preventing the perpetuation of error. *Authority* has most unfortunately too often rolled back the tide of true progress for ages. The Author has observed, that spitting of blood, in any manner or form, does, in an overwhelming majority of cases, when neglected, terminate, sooner or later, in confirmed Consumption; hence the instinctive shudder or appallingness which dashes over a person, the first instant of his noticing that he has spit blood; in vain may the physician in his kindness and sympathy, talk about its coming from the throat, or the gums, or from congestion, it is but too often, as intelligent practitioners know full well, not a cause of Consumption, not a symptom of threatened Consumption, it is an effect of Consumption begun, of progressive lung decay: not always so, most assuredly, but it is so, in more than a large majority of cases, except in women.

Some persons spit a little at a time, the expectoration is merely tinged with red, it ceases, and after various intervals, returns.

Others bleed a pint or more at a time, coming on often without any appreciable or adequate cause, ceasing spontaneously almost, and the person fancies himself as well as he ever was in his life, and in a few months the fact of the hæmorrhage has been forgotten; but sooner or later, another attack, and another, until a fatal issue. As a general rule, a man does not have more than three or four large hæmorrhages before death steps in. In many cases, there is not the slightest cough noticed, until some months after the first or even second expectoration of blood; it is the absence of cough that encourages the patient to believe that it cannot possibly be Consumption. Consumptives who expectorate blood have usually less cough at first than those who have never had a hæmorrhage, it is because the hæmorrhage relieves the clogging up, which is the immediate cause of tubercles, which are again the more immediate cause of cough, hence small and frequent hæmoptoes retard phthisis.

In women, spitting blood is not a specially dangerous symptom, unless attended with one or two other symptoms, which the watchful physician will readily detect. Sometimes hæmorrhage from the lungs may occur in men without involving the existence of consumptive disease. See the case mentioned on page 82.

In this and similar cases, it is of the highest importance to determine the nature of the hæmorrhage, for upon that depends the subsequent treatment and result. Spitting of blood therefore, as it is so generally an indication that a fatal disease *is in progress* in the system, should decide the person to call in a physician at once, for it is a symptom which should excite alarm in all cases whatever.

EXPECTORATION.

Its sinking in water is, *of itself*, no sign of Consumption, as all yellow expectoration will sink in time. Let the reader remember to spit out every atom possible, and never swallow it; better out than in; otherwise it soon fills up the lungs, and there being no room for air, suffocation soon takes place, or being re-absorbed into the blood, it poisons and putrifies the very fountain of life. Usually, the expectoration of Consumption is of a heavy, yellow nature, that of Bronchitis is varied, yellowish, dark, greenish, stringy, tenacious.

But it is a fact not to be disputed, that up to this time the expectoration gives no reliable indication as to the existence of Consumption, until the patient is in the very last stages of the disease, therefore a more definite description of it has not been given, especially as by it alone, the physician forms no opinion. But a daily expectoration, of *any amount*, of a yellowish nature, over a month or two, should excite attention, for it is an ominous symptom.

CHILLS AND FEVERS.

This is a frequent symptom in the graver forms and advanced stages of Consumption, and very many persons are hurried to the grave by treating them as a kind of Fever and Ague; the already weak system is shocked by immense doses of quinine and other powerful tonics, which, while they sometimes only remove the chill for a day or two, very greatly aggravate the cough, and soon the symptom returns with greater violence, in a weaker body. Very many instances of this kind have come under the Author's notice; and the patients were de-

stroyed, from a misconception of the nature of the symptom; they are more of the nature of the rigors of disorganization and of absorbed matter, than of the chill of Fever and Ague, but treated as this latter, every dose administered, only kills the surer and the sooner.

LOOSE BOWELS,

by which is meant, three or more stools in twenty-four hours, of a lightish color, and thin as common mortar or even whitewash; this is a symptom of the later stages, but if properly controlled, persons often live in comfort for months, and sometimes years, who otherwise would have perished in a few days.

The condition of the bowels is a matter of the first importance in all stages of consumptive disease, more especially in the advanced stages, when they are inclined to be loose.

If the passages are dark or greenish, they are favorable, although they may be thin. In proportion as they are *thin* and of *a lightish color*, they are debilitating and dangerous, whether few or many. The first best advice is, send for a physician at once; in the meantime, be quiet, lie down *on* a bed or sofa, eat not an atom of any thing, except as much ice as may be desired, and drink nothing but thick flaxseed tea, or gum arabic, or slippery elm bark mucilage, that is, water thickened with these.

Many a valuable life has been shortened, if not lost, by taking something for loose bowels, that is, diarrhœa, by following the over-confident advice of a well meaning neighbor or friend, who has no life to lose by the inefficacy or over efficacy, or inappropriateness of the means which he himself recommends. Over confidence is

always the result of ignorance, inexperience and reck lessness. In all forms of loose bowels, it is as danger ous to arrest it too soon, as it is to neglect it too long. When arrested too soon, the brain becomes affected, and drowsiness, insensibility, and death soon follow. When the patient dies by being let alone, or by taking salts, castor oil, or other such things, which only aggravate the disease, he retains his senses to the very last, as is commonly observed in cholera, which is nothing more than a violent diarrhœa.

IS CONSUMPTION COMMUNICABLE?

Some of the most eminent writers on the subject have died of Phthisis, Laennec, Hastings, Wooster and others, whether from thinking about it so much, or from being so frequently where it was, I cannot say; I only state a known fact. Again, most assuredly the large majority of widowers and widows who apply to me, have had their companions to die of Consumption. The use the reader should make of these facts is, habitually not to eat, or drink, or sleep in a room where a consumptive person is confined. If called to sit up with them, eat some plain food every four hours during the night, in another room; and let a door, or window, or fire-place be partially open all the time. Impure air of any kind, if habitually breathed for a long time, especially if the person be sitting about in comparative rest, is capable of generating consumption from the beginning; and much more, if a person be inclined that way, or have had near relations die with it.

IS CONSUMPTION CURABLE?

In its first stages, that is, previous to the commencement of any actual decay or destruction of the lungs, it is certainly, and often, and permanently cured.

In its last stages, that is, when the lungs have begun to decay away, never!

The reader may consider this answer sufficiently definite, and to the point, but without an explanation, it will convey an erroneous idea, as to the second statement. No one will deny the full truth of the first. When a man's arm is cut off, and it heals up, he goes about his business, as if nothing had ever happened, and he is said to be a well man. In one sense of the word he is well; but he can never be a whole man again, can never be fully well, for the lost portion of the body cannot be restored; therefore, he cannot be said to be a perfectly well man. So when a man is in the last stages of consumption, he has lost a portion of his lungs, the disease may be arrested, no more lungs may decay, all cough and expectoration may disappear with night sweats, and pain in the breast, or sides, and years afterwards, he may die of a disease wholly different, as in the case of Mr. Justice, and of Mr. Babbington in subsequent pages, cases occurring in the Author's practice. And as in the case of the celebrated medical writer and philosopher, Andrew Combe, of Edinburgh, and Dr. Joseph Parish, of Philadelphia, mentioned hereafter. But these men could never be said to be well, they had lost a portion of their lungs, and there can be no re-growth, no new creation of lung substance, hence they were delicate persons ever afterward, but enjoyed for many years, after the lungs had begun to decay and healed up, a rea

sonable and comfortable degree of health But the scientific gentlemen making an examination of the lungs after death, saw with their eyes, in the broad light of day, *first*, that there was no disease in the lungs, and *second*, that death was wholly the result of ailments in other portions of the body, in the nature of ship fever in Dr. Combe's case. They were weakly or frail ever after, because a part of their lungs were gone, and they had to live on a smaller amount of air from day to day, than was natural, and but from the accidental attacks of other diseases, they might have been alive and in comfortable health to this day.

Attention is requested again to the case of Mr. B—. At the outset I gave it as my opinion that so much of the lungs had decayed away, that he never would be wholly well again. But at the end of eighteen months, twelve months after he had ceased to be under my care, when he came to see me as a friend, I had the curiosity to weigh him, and to measure his lungs, when he weighed as much as at any previous period of his life, and his lungs reached the full healthful standard.

I feel fully authorized to boast of this case, and give it as an encouragement to others to persevere in the observance of the directions given them, as long as they appear to do them the slightest good; and to fight resolutely and courageously against every rising symptom, until there is not an ache or ail, or pain in the whole body.

But how is it, that after he had lost a part of his lungs by decay, he should recover his full healthful measurement?

A kind Providence never gives, but that he gives abundantly. All men in health have more lungs than

are actually necessary for the ordinary wants of the system, as something to fall back upon, in case extra efforts are needed, as often occurs in the emergencies of life.

Again: in the by-gone days of wagon driving over mud roads in winter, just as the six horse team is almost in sight of its night's resting place, one of the horses is taken sick and dies; it has often happened in the necessities of the case, that each of the five remaining, is made to perform an extra amount of labor, and by so doing, all reach their destination; five horses doing the work of six. When one kidney is destroyed the other enlarges and will perform for life the work of two; thus in the lungs, although a portion of them may have been destroyed, the remainder, by proper exercise and education, may be so strengthened and enlarged in their capacities and capabilities, as to be enabled to perform an amount of service equal to that which the entire lungs did before. Such was the case with Mr. B. But while I speak of this as a matter of encouragement to all who read this book, I deem it due to truth and justice to say, that such a result is never to be attained, except by energetic attentions, *long continued;* and even with these, there are destined to occur, but too many failures, simply, because of too long a delay in the beginning.

The opinions of great men on any point, are entitled to our respectful consideration; but when men of distinction give their opinion on a subject which they have made their daily study for ten, twenty, thirty years or more, that opinion becomes in a certain sense, a fixed fact, and the denial of that fact, simply from a prejudice, or an impression to the contrary, without ever having made a single examination, or knowing any thing as to the nature of the points to be investigated, a de-

rial I say, under such circumstances, is not worth a thought, as it is worse than lost time to argue with ignorance. I propose therefore to give some of the opinions of medical authors on the curability of consumption, men of eminence in their profession the world over, men who have made consumptive disease their constant and almost only study for the greater part of their lives, studying the cases while alive, and examining them after death, men, whose opinions on other medical subjects are considered as standard authority on both sides of the Atlantic, and having done so, I will leave the reader to form his own opinion, with this remark, viz., that I have always found those persons exhibit the most uncompromising hostility to the idea that consumption is to be cured under any circumstances, who feel themselves to be in perfect health, and are pretty sure, that they have nothing like the disease in their own person; they will really become even angry at the very expression of an opposite opinion, exhibiting an impatient intolerance, wholly inconsistent with a high degree of intelligence. This circumstance has given an eminent English writer, Dr. Williams, Physician to the University College Hospital of London, occasion to observe in the "Medical Times," No. 230. "Many persons are set down as quacks, if they utter the words, 'cure of consumption,' and if a case does occur, it is said that it was not consumption." There is full reason in the United States, for the utterance of this sentiment, although designed for British ears.

In the discussion of this question, there is a most unfair and illogical commingling of ideas, by not acknowledging a case to be Consumption, until the person is dead or in a dying condition; and then, because there

are few, if any recoveries from this stage, the sweeping announcement is made, that Consumption cannot be cured, that it is inevitably a fatal disease. This is allowing Phthisis only a single stage, and that is the last stage; leaving the first half of the disease without a name or appropriation. On the same principle, any other disease is incurable. It would be just as insequent to say that a man has not cholera, unless he is in the last stage, that is, collapse, and then to argue that because few, if any, recover from the collapsed stage, cholera is incurable, leaving all the premonitory symptoms nowhere, wholly unclassified. The truth is, all that is said about Consumption being curable or incurable, except by scientific men, is the merest jargon imaginable; and the truly intelligent unprofessional reader will express his opinion on the subject hesitatingly and with modest moderation. But when an intelligent man has examined a subject, especially if it be in close connection with the main business of his life, he has a right to speak confidently and without equivocation. Such are the opinions which follow, and no wonder, because it is with them, not a thing to be reasoned about, whether, when the lungs have once begun to decay, they can heal up, and be sound again; it is a matter of ocular demonstration; it is a thing to be seen, for the lungs, like any other part of the body, when wounded, divided by a knife or an ulceration, leave a scar in the healing, just as certainly as a gash in the arm or an ulcer in the flesh, will, when healed, leave a scar. If when a surgeon examines the bones of a dead man, he sees a certain mark, he knows that that bone has been broken, because the appearance could not present itself without a previous fracture, which fracture cannot occur, and unite, without such a

mark being left. It is precisely so with the lungs, and from such evidence it is announced by the most skilful anatomists and surgeons the world ever saw, that there are few of all who die in civilized society, after forty years, who have not the unmistakable, ocular marks in the lungs, that at some previous time, they had begun to decay, that such decay had been arrested, in most cases spontaneously, without the use of any remedial means whatever, and the persons had died of wholly different diseases, without ever having had the slightest suspicion that any thing had been the matter with the lungs. It is true, these decays were slight, still they establish the great fact, that so far from its being a rare occurrence, that the lungs heal, it is a thing which takes place every day of the world. Small scars are frequently seen, several in a single pair of lungs sometimes; large ones very seldom, bringing us back to the point from which we started, that the cure of Consumption in its first stages, is of common occurrence, but in its last stages never to be promised.

It was in reference to these after death, ocular signs of the cure of consumption, that the celebrated Abernethy exclaimed, "Can consumption be cured? why that's a question which a man who has lived in a dissecting room would laugh at." He considered it so evident, so demonstrable to the external senses, as to be beyond argument.

It has been said that the lungs are never at rest, and therefore can never heal. But the heart has been wounded with bullets, bayonets and daggers, and the persons have recovered, and the heart moves twice, while the lungs move once. Many persons have been stabbed in the breast or side, or have been shot through

and perfectly recovered; the gallant General Shields, a member of the United States Senate, is a living example of the fact, a ball from one of the enemy in the Mexican war, having passed entirely through the lungs. I would not have taken so much time on this subject, but from the wish that more truthful views should prevail, for until a more proper understanding of the nature of consumption becomes prevalent in the community, it must continue to be the scourge of humanity.

As the general reader could not be expected to know the position which the witnesses have occupied in the world, it will add to the weight and proper appreciation of their testimony, for me to state in what situations they were placed, and in what estimation they were held by the communities in which they lived.

John Hunter, the Napoleon of medicine says, certain things "tend much to cure scrofula, and consequently to CURE CONSUMPTION, which is clearly scrofula, and admits of CURE."

Dr. Carswell, an English physician of great eminence, who spent many years in examining consumptive cases, while living, and the appearance of the lungs after death, uses this remarkably strong and decided language:

"Pathological anatomy has perhaps never afforded more convincing evidence, in proof of the curability of disease, than it has in that of tubercular consumption."

This same gentleman, who is one of the most elegant, and popular writers of modern times, says in another place:

"The important fact of the curability of consumption has been satisfactorily established, and its PERFECT CURE DEMONSTRATED BY SCARS IN THE LUNGS."

Dr. Evans, another English author, who has had a

most extensive practice in lung affections, for many years, says, "I promise you, that by pursuing a proper line of treatment, you will be enabled to cure many cases of consumption in EVERY STAGE."

In reference to the above statement, the editors of the London Lancet, one of whom is a member of the British Parliament, and an educated physician, says, in a recent number of that work, which is, by the way, the first and best medical publication of the kind in the world:

"On this point we entirely agree with the author, that recovery from phthisis pulmonalis, is much more frequent than is generally supposed, is an opinion daily gaining ground. The press at present, is teeming with works on this subject, and the numerous facts that are daily brought forward can no longer be met or put down by charging those who publish them with want of knowledge. * * * We deprecate that condemnation which those receive who maintain its curability. * * * * There is necessarily nothing malignant or fatal in tubercle itself, and by treating the constitutional disease, its further deposition may be checked."

Dr. Weatherhead, a veteran physician of London, says:

"It is now too much the fashion with a certain class of our profession, when they find or fancy, that lesion of the lungs is present, to condemn the patient to inevitable death, and thenceforth abandoning all active measures for his recovery, adopt a mere palliative mode of treatment, under which, time never to be regained is lost, and the patient glides into that incurable stage, in which they had at first pronounced him to be."

The following extract from a French author, who has had extensive opportunities of making observations in

diseases of the lungs, and who for a number of years has given them special attention, is worthy of all consideration:

Curability of Phthisis.—M. Fournet alludes to his having met with, in the course of one year, no fewer than 14 cases of confirmed phthisis that were cured; besides 10 other cases, in which dissection revealed the traces of caverns that had become perfectly healed.

He goes on to remark, that "these 14 cases of phthisis cured in the living subject, have proved to me—

"1. That certain persons who have exhibited the most decided symptoms of the disease, in its most advanced stage, may yet be restored to excellent health.

"3. That even hereditary phthisis, in its most advanced stage, is susceptible of cure; although such an occurrence is certainly much more rare than in cases of the accidental disease.

"5. The capital fact which seems to spring from these inquiries is, that tuberculous disease is not, like cancer, essentially incurable; on the contrary, that it is often curable, and that its extreme and most disheartening fatality is referable rather to the circumstances of its being seated in one of the vital organs of the system, and to its tendency to frequent relapses, than to its primary and essential nature."

Dr. James Johnson, physician to King William IV. of England, quotes, in No. 82, of the Medico Chirurgical Review, from Bulletin de Therapeutique, the following decided language in reference to Consumption—"by such means, we may reasonably hope to arrest the evil in not a few cases, which if improperly treated, will hurry on to a fatal termination."

The Bulletin of Medicine, published in Philadelphia, by Dr. Bell, Professor in the Philadelphia Medical School, says, "Dr. Stokes speaks more especially of the curableness and cure of Consumption, in its earliest stages. Andral, Carswell, Williams, Morton and Rogee, assert, *on evidence*, its curableness and cure, *in the most advanced stages.* Dr. Rogee's essay, contains the result of observations made in a careful examination of more than two hundred subjects, in which the removal of tubercle by absorption, or cicatrices of pulmonary tissue, or the substitution of cretaceous or calcareous concretions for open tubercles, were manifest. The MOST eminent pathologists of the PRESENT DAY concur in the opinion, that PULMONARY CONSUMPTION is most certainly curable in the LAST and WORST stages of the disease."

Since the preceding pages were sent to the printer, I have derived sincere satisfaction in meeting with the strongest confirmation of some of the more important sentiments advanced. The following are quotations from a late number of the London Lancet, a "Journal which has long been celebrated as the most valuable periodical for medical practitioners ever published, while an uninterrupted existence of more than twenty years, has long produced for it a most elevated standard and character."

The editor, Mr. Wakely, a member of the British Parliament, says in relation to Consumption, "WE HAVE NEVER HAD A DOUBT OF ITS CURABILITY. In a former volume, this important question was considered, and the experience which we have since had, fully confirms the truth then expressed, that "Physical diagnosis and pathological research show us that recovery takes place in many cases of true tubercular deposite in the lungs.

One fact is worth a cart load of opinions. What then must be the value of the hundreds of accumulated facts which support this view? Thus M. Boudet states, that in the post mortem examination of forty-five subjects, between three and fifteen years old, he had observed the cure of Consumption in twelve cases.

"In one hundred and sixteen individuals, aged between fifteen and seventy-six years, tubercles in the lungs or bronchial glands had become innocuous in ninety-seven cases, and had wholly disappeared in sixty-one.

"In one hundred and ninety-seven autopsies, promiscuously taken, he found ten instances in which, at least, one cavern completely cicatrized, existed in the lung; and in eight cases one or more cavities were found in different stages of cicatrization.

"There can be, therefore, no question as to the curability of Consumption."

The belief in the curability of phthisis is gaining ground every day, on both sides of the Atlantic, because the facts presented are absolutely incontrovertible; no sane man, (I mean medical man,) can resist them, who will acquaint himself with them. And I have great hopes, that, in a few years, a disease which now destroys one in six of the inhabitants of New York, Philadelphia, Boston, Baltimore, Washington, and of other large cities, and perhaps not a less proportion in the country, will be as often and as perfectly cured, as bilious fever. It is true, that the mode and means of cure may be various in different hands, just as in any other disease; fever and ague, for example, is cured by different remedies, but the principles of cure must be forever the same.

The populace generally, many common physicians, and even a few educated ones, believe it incurable

There are, however, many great names bearing unequivocal testimony that it can be perfectly cured, even in its last stages, by healing with a scar, just as a gaping cut finger will heal in a healthy person, if you press the sides together. That such scars are found in the lungs, and Consumption cured, the following testimonies are offered. Not the assertions of men, who have never examined the lungs in a dozen dead bodies, but of those who have examined many thousands, and have a right to know and to be relied on.

I found an encased cavity, on an almost healthy lung tissue.—*Louis.*

That a tubercular excavation is ever capable of a cure, is an important fact; and IT IS SO, independently of all medical aid.—*Cowan.*

"It is next to impossible to open a dozen bodies without meeting with positive proof of the curability of Consumption,"—in the presence of cicatrices, scars, in the lungs.—*Dr. Ramadge, of London.*

DR. CLARKE, of England, who wrote a book to prove that Consumption could not be cured, admits that "cavities in the lungs may remain a long while stationary, gradually contract, and become obliterated!"

DR. LATHAM, another English physician of distinction, who also endeavored to prove the same point, distinctly says, "we occasionally find traces of cavities, which have healed, in persons who have died of Consumption."

The important fact of the curability of Consumption, has been satisfactorily established, and its *perfect cure demonstrated.—Cyc. Prac. Med.*

A French physician, who died a few years ago, and is believed to have taught the world more that was new on the subject of the same disease, than any one man

who had ever lived before him, and who spent many years among consumptive patients, inquiring into their symptoms, and feelings when alive; and examining the lungs of those who died, writes in this manner, "When I first asserted the evidence of pulmonary cicatrices, it directed the attention of the hospital physicians to the subject, and so many of these evidences existed, they concluded it could not be that, but was something else An ulcer in the lungs may be cured in two ways, by a scar, or by turning it into a fistula; these scars and fistulas in the lungs, are extremely common; and considering the great number of consumptive, and other subjects, in whom they are found, the cure of Consumption ought not to be considered impossible; for cavities in the lungs may be completely obliterated. It has been shown that its cure is not beyond the power of nature, it is possible for nature to cure it."—*Laennec.*

"Heat is generated in proportion to the size and vigor of the lungs. Many persons with imperfectly developed lungs and a predisposition to Consumption, complain habitually of a coldness of the surface and feet. And many who were in previously good health, become more and more sensible to cold, in proportion as the approach of the disease, weakens the functions of the lungs. I have noticed this, both in myself and others, before any other evident symptom had appeared. And I have seen *its further progress arrested*, by a timely use of the proper means, where much greater difficulty would have been experienced, had the warning not been attended to."—*Dr. Combe*, of Scotland.

Marshal Hall says, Obs. 2316, "The usual appearances of a cavity in phthisis and of the subsequent cicatrix," &c., and then proceeds to give engravings to show

how they look. "The utmost resources of our art often avail us nothing. But scars are seen in the lungs, establishing the fact that a tuberculous cavity heals, after the matter is expectorated, and I will tell you how to remove the tuberculous matter by absorption and prevent its formation."—*Dr. Weatherhead.*

Tuberculous cavities are healed in three ways.—*Dr. Hope.*

Dr. Weatherhead, one of the most honored of the London Faculty, writes: "With the superior advantages of treating Consumption on this plan, I was early impressed, from observing *more recoveries* under it, while employed during the late war at Hasler, one of the largest hospitals in England. And more lately, Dr. Giovanni di Vittis, physician of the Military Hospital at Capua, bears similar testimony to its efficacy in the Medical Annals of 1832, where he states that "between the 1st of May, 1828, and the 28th of January, 1832, forty-seven patients affected with Consumption in the first stage; one hundred and two in the second; and twenty-seven in the third or last stage, had left the hospital PERFECTLY CURED!!"

It is recorded in the "Transactions of the Path, &c., of Philadelphia," which society is composed of the most distinguished medical professors and physicians of that city, that "Dr. Parish, who during his life was the ornament and the honor of his profession, was, at the age of twenty-five years, attacked with Consumption in its hereditary form; having lost a brother and sister by that complaint. He finally died in his sixty-first year, thirty-six years after his attack of Consumption." His body was examined by eight physicians of standing, among whom were several professors, who reported that "there

was no recent tubercular granulations or deposits, but there were numerous cicatrices, depressions, puckerings, &c., proving that his apprehensions in early life were well founded, and giving the strongest evidence of the efficacy of his prophylactic measures." Here is a case of Consumption arrested in its progress, and effectually and permanently cured; the patient, at the end of a third of a century, dying after a three weeks' illness of a complication of ailments, not specially referable to the lungs at all, as the seat of tubercular disease; a case of Consumption cured, known to every respectable medical man in Philadelphia; known too by evidence which no medical man can resist, for it is a demonstration!

Dr. Carswell is one of the most eminent British physicians living: he is referred to by medical writers both in Europe and America, and is considered as the highest authority in lung affections, because he has for many years made tubercular disease a special study, and few men stand higher in the profession than he does. In writing an article on the general subject for the Cyclopædia of Practical Medicine, one of the most extensive and useful medical publications of modern times, every article being written by men of established reputation, a book designed to be a standard work, and to be placed, as it deserves to be, on the shelf of every respectable physician in America and Europe, for daily reference; especially in this country, being adapted to the wants of the American practitioner, by Dr. Dunglison, himself perhaps the most popular medical writer in the United States—in a work of such a high character Dr. C. says:

"We shall confine ourselves to a statement of those facts, more especially those of an anatomical character, which *demonstrate the favorable termination or cure* of

tubercular disease. The cure of the disease is indicated, first, by the cessation of those symptoms which are peculiar to it; or the restoration of those modifications of function, to which its existence gives rise. Second, by the disappearance of the local cause of the disease, or by the presence of certain lesions, which are known to follow, as the consequence of such cause, and no other. Such indications of the CURE of tuberculous disease have been observed, even in those organs, the lungs, in which this disease was long considered, and still is by most (?) medical men, to prove inevitably fatal. Traces of cure have frequently been observed in the lungs of persons whose *history left no doubt* as to their having, at some former period of their lives, been affected with Consumption. The important fact of the curability of this disease has, in our opinion, been satisfactorily established by Laennec. All the physical signs of tubercular phthisis have been present, even those which indicate the existence of an excavation, yet the disease has terminated favorably, and its *perfect cure has been demonstrated.*"

Dr. C. here means to say to the common reader, "That Consumption can be perfectly cured, even after a part of the lungs have rotted away, is as plain to my mind as that two and two make four!"

In another part of the same article, he enumerates certain visible signs of the perfect cure of Consumption, and says of them, "There must be few practical pathologists, who will not consider these anatomical facts as evidence that Consumption is curable. No objection has been brought forward calculated in the slightest degree to invalidate the conclusion that they are positive indices of the removal of the material element of the disease,

even at an advanced period of its progress. We cannot avoid repeating the fact, that pathological anatomy has perhaps never afforded more conclusive evidence in proof of the curability of a disease than it has in that of Consumption!!"

Laennec, whose knowledge of the lungs, their diseases, &c., was more extensive than that of any half dozen physicians of modern times, and perhaps all of them, together, up to this day, was so entirely convinced that the cure of Consumption was of frequent occurrence, he says: "*I think it is more than probable that hardly any person is carried off by a first attack of Consumption!*"

To the above, I may add the testimony of Sir James Clark, whose reputation is such, that he was employed to write the article on phthisis for the Encyclopædia, as being, from his extensive experience and great learning, the most competent person in England to perform the duty in a manner worthy of the high character of the work. It is the more valuable, as Sir James is rather averse to considering the disease curable, except in its forming stages, even he acknowledges it is practicable "to prevent tuberculous disease if it has not already shown itself, or to check its progress if it has already taken place, as there are many instances where the further progress of the disease may be stayed. I am acquainted with some striking examples of persons now living, a considerable portion of whose lungs is incapable of performing its functions, and yet, with care, they enjoy a reasonable share of health. Under such circumstances, lives may be preserved that are of vast importance to their families and to society. Indeed we are satisfied that there are far more individuals in this state than is generally believed; and it is well known, that

tubercles are frequently found after death in the lungs of persons, in whom their existence had not been even suspected. We have already stated our conviction, that the *great cause of our want of success in the cure of tubercular disease, arises from the advanced stage at which its real nature is discovered, and from the late period at which the physician is consulted.* If Laennec's opinion be true, that few die of a first attack of Consumption, we have still more reason to hope that the disease may be cured, that is, that a second attack may be prevented, by preventing a relapse into his former state."

After having prepared the above for the printer, I found an interesting article in the third volume Nov. of the N. Y. Jour. of Med. and Col. Sciences, by Dr. Forry. It is a short review of a treatise on pathological anatomy by Carl Rokitanski, Anatomical Professor in the University of Vienna, 1844. Of this work, Dr. Forry himself gives the following high praise, " We prize it as an acquisition to our medical literature; and will say without hesitation, that as a work on pure pathological anatomy, it has not been surpassed by any that has yet appeared! And we will conclude this notice, by quoting the remarks on '*The curative processes in tubercles of the lungs*,' as one of the best portions of the book, and as illustrating the admirable manner in which the author unites clearness of description, with conciseness, the best internal evidence of accurate original observation."

Professor R. observes—" Tubercular pulmonary Consumption is doubtless curable, as may be inferred from not unfrequent appearances in the dead bodies of those who formerly had more or less suspicious affection of the chest, from which they recovered. We can only

expect to arrive at a truly rational and certain method of treatment, by an investigation of the circumstances under which such spontaneous cures have taken place; and the consequences of such treatment will be the more beneficial, as it will be directed not merely against the tuberculous dyscrasia also. Pulmonary Consumption* and tuberculous abscesses may be cured after the general disease, and hence that process which lies at the foundation of its local effects, viz.: the tubercles and abscesses, has been eradicated. Under such conditions it has been proven, by numerous incontrovertible facts, that tuberculous abscesses may heal, and in fact in several different ways.

First. Reactive inflammation, deposites a gelatinous infiltration, which obliterates the air cells, converting the adjacent parenchyma into a dense, fibro-cellular tissue of varying thickness, lining the whole tuberculous abscess, which secretes through life, a serous, sticky, synovial fluid.

Second. If the abscess be not too large, it may close by a gradual approximation of its walls, which finally touch and unite with one another. We then find a cellulo-fibrous stripe (a white scar) in the place of the former cavern; the bronchii terminate in it, in a cul-de-sac. *The approximation and agglutination of the walls of the abscess may be essentially aided by various occurrences*, among which belong the sinking in of the walls of the chest; the compression of the lungs by the diaphragm; by the enlargement of the abdomen, or some of its organs; the emphysematous dilatation of the parenchyma adjacent to the abscess; bronchial dilatation, &c. If the curative process sets in, and proceeds very

rapidly, the cicatrix may enclose chalky concretions of various sizes.

Third. The abscess may be filled with a mass of fibro-cartilaginous tissue, in which case, only a slight contraction of the lungs and breast ensues."

Here is testimony of the highest kind; stronger, and more competent cannot be given; and what is more, its truth is endorsed by one of the best medical journals published in this country. And the amount of this testimony, in more familiar language, is simply this, that "after a part of the lungs are lost, if it be but a small cavity, it may be perfectly healed by bringing the sides together, only leaving a long, whitish, fine scar, just such an one as is left from the healing of a gash on the finger, or on any other part of the body: but if a larger amount of lungs are gone, so much so, that the sides of the cavity cannot be made to meet, these sides are lined with a material of nature's own manufacture, which prevents the progress of the decay." And this is precisely the principle advanced by me, in the first publication I ever made on the subject, and which appeared in print long before the publication of Professor Rokitanski's work.

So far then from its being true that Consumption cannot be cured, it is here proved that it is effectually cured, even in its last stages; that is, after the tubercles have softened down, and a portion of the lungs have decayed away. Attention is invited to a declaration of that great and remarkable man, Mr. Abernethy, "Can Consumption be cured? that's a question which a man who had lived in a dissecting room, would laugh at. How many people do you examine who have lungs tubercular, which are otherwise sound? What is Consump-

tion? It is tubercle of the lungs—then if those tuber cles are healed, and the lungs otherwise sound, the pa tient MUST GET BETTER. But if the inquirer shift his ground and say 'it was the case I meant, of tubercles over the whole lungs,' why then he shifts his grounds to no purpose, for there is no case of any disease which, when it has proceeded to a certain extent, can be cured."

Louis, Laennec, Ramadge, Marshall Hall, Stokes, Combe, Corrigan, Copeland, Clark, Mudge, McIntosh, Beddoes, Rush, Bennet, Crichton, Cruvenheiler, Williams, Green, Hope, Burton, Ryan, Scudamore, this last, a gentleman and a scholar, an honor to the medical profession, whose reputation and success have extended to both sides of the Atlantic: these, and a host of others, alike eminent for their learning, and honored for their talents and their devotion to the pursuits and studies of their profession, and whose writings have so much tended to enlighten the age they live in—these, I say, are the men, in whose company I am found, in advocating the curable nature of common consumption of the lungs. And in attempting to do, what so many great names say can be done, and is done constantly, I think I do an infinitely higher good to society, even if I but mitigate the sufferings of the doomed, and keep them at home among their kindred, than men of lesser note than those above, whose names will scarcely in a life time travel a dozen miles from their office door, whose theory is "Consumption can't be cured, and it is useless to try," and whose practice is the stereotype recipe of the last hundred years, "go to a milder climate."

The People's Journal, for July, of the present year, one of the most popular European publications, has an

interesting article in relation to the Consumption Hospital, founded at Brompton, five years ago; and few institutions have risen so rapidly; it has a long list of noble and wealthy subscribers, with the Queen and most of the Royal family at its head. "As death has abundantly proved the mortality of the disease, so, paradoxical as it may seem, death also supplies us with evidence that the chief structural lesions of Consumption, tubercles in the lungs, are not necessarily fatal. The writer of these lines can state, from his own observation, (which has not been limited, and is confirmed by that of others,) that, in the lungs of nearly one half of the adult persons examined after death from other diseases, and even from accidents, a few tubercles, or some unequivocal traces of them, are to be found. In these cases, the seeds of the malady were present, but were dormant, waiting for circumstances capable of exciting them into activity, and if such circumstances did not occur, the tubercles gradually dwindled away, or were in a state of comparatively harmless quiescence. This fact supported by others, too technical to be adduced here, goes far to prove an important proposition, that Consumptive disease is fatal by its degree, rather than by its kind; and the smaller degrees of the disease, if withdrawn from the circumstances favorable to its increase, may be retarded, arrested or even permanently cured. There are few practitioners of experience who cannot narrate cases of supposed Consumption which, after exhibiting during months and even years, undoubted symptoms of the disease, have astonished all by their subsequent, more or less, complete recovery. Cautious medical men have concluded themselves mistaken, and that the disease was not truly tuberculous; but, in these days, when the de-

tection and distinction of diseases is brought to a perfection bordering on certainty, the conclusion that recoveries do take place from limited degrees of tubercles of the lungs, is admitted by the best authorities, and is in exact accordance with the above mentioned results of cadaveric inspection. Consider properly, and you will be ready to admit the truth of what has been already established by experience, that Consumption may be often prevented, arrested, or retarded by opportune aid. On this point we know that many medical men are utterly incredulous, and stigmatize others who are less so, in no measured terms; but, with the present rapid improvements in all the departments of medical knowledge, there is less ground for such incredulity than there was for that which opposed and ridiculed Jenner in his advocacy of vacination as the preventive of small pox."

In view of the above, and other testimonials, elsewhere of the most distinguished living writers in favor of the curability of Consumption, it is impossible for a well informed and well balanced mind any longer to deny it. We cannot conceive it possible that so many great men should be so much deceived on a point which they have made it the business of a life time to investigate and study.

The following articles are interesting and corroborative. "Littell's Living Age," No. 379, for August, the most popular and best conducted journal of the kind in America, copies from the London "Spectator" the following highly interesting and well-written article. Every line of it merits the mature consideration of the intelligent reader.

"NEW HOSPITAL FOR DISEASES OF THE CHEST.

"While one-third of the deaths in the metropolis are ascribable to diseases of the chest, the hospital accommodation devoted to that class of diseases has heretofore been only one-tenth; that is to say, the most prevalent and destructive class of diseases has had the least counteraction among the poorer classes. This peculiar, if not studied neglect, must be ascribed to a notion, now happily dying out, that diseases connected with the respiratory organs, and especially the lungs, were virtually beyond the reach of certain or effective treatment. It was in deference to this old notion that Lord Carlisle made an admission, in his address to Prince Albert, on laying the first stone of the City of London Hospital for Diseases of the Chest—'We admit,' he said, 'that hospitals ought to give the preference to those maladies which afford a prospect of cure, rather than to those of a less hopeful character.' Now, this admission, especially as compared with the qualification which followed it, that very much may be effected by precaution and a timely counteraction, is far too strong for the truth. Without accepting as literally true the inference of a physician eminent in the treatment of pectoral diseases, that all persons are at one time or other visited by maladies of that class, we believe it is certain that the proportion of mortality, enormous as it is, scarcely represents the comparative extension of such diseases. In the practical and popular sense of the word, it may be said that cure is as common in the class of pectoral diseases as in any other class. It has become much more common, indeed, since the great advance that has been made with the knowledge of such complaints in our

own day. This advance has been of a two-fold character. The immense progress of physiological inquiry has thrown great light on the connection and common causes of most cognate diseases, not only with each other but with the general health, and has thus enormously augmented the power of the physician in treating them by medicine and regimen. The invention of the stethescope, by placing the exploration of the inner chest within reach of observation, has given a distinctness of knowledge on the most characteristic and dangerous symptoms, heretofore unattainable: it has thus completed the round of evidence which establishes the connection of diseases, and at the same time guides the nature and application of topical treatment.

In discovering that the prevalency of pectoral diseases was far greater than had been supposed, science has also discovered how much more they are under subjection to the general laws of physiology and medicine. This branch of science, however, is younger than others—a fact which teaches us to remember how much is to be expected from the active and vigorous intellects now devoted to its exploration. We may also remember that while the primary object of hospitals is the relief of sufferers who are too poor to obtain it for themselves, they are also great instruments for the benefit of society at large, by checking the inroads of disease where it could not otherwise be encountered. They were all still more signally valuable as great schools for the study of the diseases to which they are appropriated. They exemplify most powerfully the double blessing of charity, for him that gives as well as him that receives; the aid extended by a hospital to the poor is returned to the rich in the knowledge which it collects; for in rescuing

from untimely death the assembled children of poverty, science learns, as it could in no other way do, methods which enable it to rescue the children of wealth.

"The more hopeful character of the most modern science had been in great part anticipated by the brave intellect of Andrew Combe. Before his time, it was too generally, if not universally assumed, that the symptoms of Consumption were a death-warrant; he proclaimed the reverse truth, and established it. He became in his own person the teacher and exemplar, both to physician and patient; and in his compact popular volume and regimen, he has recorded, in a form accessible to all, the conclusions of his practical experience. He did away many of the old coddling notions, which helped to kill the patient by stifling the pores of the skin, filling the lungs with bad air, softening the muscular system with inaction, and deadening the vital functions; a service scarcely more useful in reconciling the patient to the restorative influences of nature, than in returning hope to the afflicted relatives, and in showing what might be done by common sense and diligence. At an early age, Andrew Combe was found to be in a Consumption —words which were formerly accepted as a death-warrant, in submission to which the awed patient duly laid down and died; Andrew Combe lived more than twenty years longer, a life of activity, usefulness, and temperate enjoyment."

In 1841, Sir James Clark, with Dr. James Cox, examined the lungs of Dr. Andrew Combe, whom all considered in the last stages of Consumption. Sir James said to his brother, "I am grieved indeed to find that the lungs on one side are affected to a considerable extent; this examination has given me great distress, more than

I ever *suffered* from the examination of a patient, because it gives me the painful conviction that his life, in all human probability, cannot be long preserved; I consider him a great benefactor to his race, and were he spared a few years longer he would do still more to promote the welfare of mankind. I am anxious to make you fully aware that he might die before the end of the winter; therefore I give up all idea of recommending him to go abroad." Dr. Combe himself said in October, "I am now told it is scarcely expected I shall survive the winter, or go much beyond it."

And yet without taking any medicine, except to regulate his general system, and by using all the means in his power, and which his extensive medical knowledge so well qualified him to employ, he survived the winter and died six years afterwards of diarrhœa in connection with ship fever, and on examining his lungs, they "were found not worse than usual, and that his death was to be ascribed solely to disease of the bowels." And yet, in 1831, sixteen years before his death, he had lost his health, and considered himself so much of an invalid, that with Spurzheim's advice, he went to spend the winter in Italy, saying of himself, "Taking the whole aspect of the case, it would be difficult to find any characteristic symptom of phthisis wanting."

I give space to this narrative the more willingly, in the hope that it may afford rational ground for encouragement to the frail and feeble, as to what may be expected in the way of prolonging life for many years in reasonable comfort, by a patient and judicious attention to symptoms as they present themselves; not by the constant taking of medicine, for they who are always swallowing drops, or pills, or tonics, are always sick,

but by a wise conduct as to the habits of life, using medicine only as an occasional, indispensable aid, for this, it is invaluable. And for further encouragement, I take occasion here to state in reference to

FRAIL AND FEEBLE PERSONS,

that they often outlive by half a life-time the robust and the strong, because they feel compelled to take care of themselves, that is, to observe the causes of all their ill-feelings, and habitually and strenuously avoid them. Our climate is changeable, and in proportion unhealthful. In New York City, for example, during one week in December, in which the thermometer ranged from five degrees above Zero to fifty-five, there were forty-one deaths from inflammation of the lungs, while the ordinary number is about fifteen. The healthy disregard these changes to a great extent, and perish within a few days. The feeble are more sensitive to these changes; they increase their clothing and their bedding with the cold, and with equal care diminish both, *with the amount eaten, as the weather grows warmer*, and thus, long outlive their hardier neighbors. These same precautions, with others, must all observe, THROUGH LIFE, who have been cured of an affection of the throat or lungs. Let this never be forgotten, for the oftener you are re-attacked, the less recuperative energy is there in the system, and the less efficient will be the remedial means which once cured you, unless by months of continued attention and wise observances, you give the parts a power and a strength they never had before. This can be done in many cases.

But once cured, avoid the causes which first injured you. If you put your hand in the fire, you may restore

it, but however magical may be the remedy, that hand will be burned as often as it is placed in the fire, without any disparagement of the virtues of the restorative. No cure of your throat or lungs will render you invulnerable. What caused the disease in the first instance will continue to cause it as long as you are exposed to it. No promise is given you of permanence of cure longer than you are careful of your health. The safer plan by far will be, to consider yourself peculiarly liable to the disease which once annoyed you, and make proportionate endeavors to guard yourself habitually against its advances. All assurances that any mode of cure will afford you a guarantee against subsequent attacks, are deceptive. No medicine that any man can take in health will protect him from disease. There is no greater falsity than this, that if you are well, a particular remedy, or drink, or medicine, will fortify the system against any specified disease, whether cholera, yellow fever, or any other malady. So far from this being so, it is precisely the reverse. Doubly so; you are thrown off your guard, and in addition you make the body more liable to the prevalent malady by poisoning the blood; for whatever is not wholesome food, is a poison to the system, pure water excepted. Nothing, therefore, will protect a healthy man from disease but a rational attention to diet, exercise, cleanliness, and a quiet mind; all else will but the more predispose him to it. But when once diseased and then cured, these things are not sufficient to keep him well; he must avoid what first made him an invalid, otherwise permanent health is not possible, but a speedy relapse and death are inevitable, as to Throat-Ail, Bronchitis, and Consumption.

The opinion as to the curable nature of consumption

of the lungs has gained extensively within the last few years among medical writers of repute, so that a respectable medical journal can scarcely be opened without there being found in it statements more or less favorable to its curability, ☞ by which I desire to be understood always, in these pages, merely an indefinite arrest of the disease in its last stages, but in its first stages, a thorough and permanent cure.

Dr. John A. Swett, while he was physician to the New York Hospital, and member of the New York Pathological Society, has, in an elegantly executed octavo volume of six hundred pages, published in 1852, on "Diseases of the Chest," written much that is new, truthful and valuable. The book should make a part of the library of every medical scholar. Although in general he writes discouragingly as to the cure of consumption, yet in view of incontrovertible facts presented, he closes all that he has said on the subject, as follows:

"Thus, by carefully watching the symptoms, by avoiding the causes of irritability and irritation, opposing their progress by suitable remedies, life will certainly be prolonged, and sometimes a more or less complete recovery will reward a judicious exercise of medical skill."

Again, he says, "The cicatrization of a tubercular abscess is NOT A *very rare* occurrence."

"Another change much more frequently noticed, must equally be regarded as a curative process—exhibiting one of the methods which nature employs to cure the disease."

"Expectoration of chalky secretions indicates a curative effort."

"Abnormal circulation and cough are the last symptoms which disappear in cases that recover."

"Some of these cases undoubtedly terminate in a restoration to health, yet after a long struggle."

"You will find him after many years, without any symptom of pulmonary disease, and finally dying of some malady, quite independent of the tubercular diathesis."

"I have briefly recapitulated some of the leading changes that mark the cure of tuberculous disease."

"I have known a number of patients, during the last fifteen years who have had the evidences of Consumption, and sometimes in an advanced stage, who finally recovered, and are now in the enjoyment of good health. I have been in the habit of examining the lungs of all my patients, dying of every form of disease, independent of Phthisis, for the traces of Phthisis that has been cured, and have been astonished at the number of cases which have presented evidences of this favorable result."

"It is not uncommon to find in patients who have died of various diseases, and in which no suspicion of tuberculous disease existed at the time of death, cretaceous masses and cicatrices"—which the author repeatedly declares elsewhere, are evidences of the cure of tubercular disease. In corroboration of these views the Author records the statement of the "Physician to the Salpetriere Hospital in Paris, that in one hundred women, all above sixty years of age, and dying of various diseases, fifty-one presented curative indications of Consumptive disease, and chiefly, by the formation of chalky concretions. This result did not surprise me, as it would have done many of the profession, who believe that tubercles are equivalent to a death warrant. Indeed I am inclined to think that many cases will be found presenting undoubted evidences of Consumption,

which yet recover, and the common expression, "The patient could not have had Consumption, because he recovered," will cease to be believed. Anatomical facts prove beyond a doubt, that cases do recover, and that they are not very rare. "I remember a gentleman, now alive and well, most of whose brothers and sisters had died of Consumption, who was himself attacked with the symptoms of the disease in the most decided manner, these symptoms continued two years."

In justice to the reader, as well as the Author, whom I have quoted so largely, I make another extract, to show his candor, and more than all, his kindly consideration, in endeavoring to repress any too sanguine expectations in the hearts of those who may have Consumptive disease, which strongly contrasts with the conduct of the ruthless impostor, the unprincipled pretender, who unblushingly promises relief, and cure to all who come, scarcely excepting those in the very last stages of the disease.

"I do not wish to state this case too strongly, I admit, as all must do, that Consumption is a most fatal disease, and that the prospect of a cure is always unfavorable. Take as cheerful a view of this melancholy disease as circumstances will admit."

I very much hope, that every medical scholar, who may chance to read these lines, will procure "Swett on Diseases of the Chest," and I doubt not, that the cause of humanity will be promoted thereby. The work is valuable, because it is superior to any previous American publication—superior, inasmuch as the Author writes from what he has seen, he writes from fifteen years experience, and advances opinions contrary to those entertained by the profession generally, with a

modest confidence, which belongs only to a mind in formed and disciplined. And if but one sentence of al. I have quoted should be remembered by the physician, let it be this, the propriety and humanity of which, I myself have often and deeply felt, "I shall never entirely despair of the life of a patient with Consumption," nor will the experienced practitioner cease his efforts, or cease to hope for cure, until the day of death, in any ordinary case of Consumptive disease; for certain it is, that persons do sometimes recover, and live for years, who were supposed to be in a dying condition. Such were the cases of Mr. J——, and Mr. B——, already mentioned in these pages; and who can say that the same thing shall not occur in the case of any other patient hereafter? Each reader of these pages will be willing enough, when he comes to die, that every possible effort shall be made for his restoration, as long as the breath of life is in him; let him not therefore attribute it to ignorance or stupidity, when the conscientious physician, faithful even unto death, labors anxiously to the last hour, for one who has placed his life in his hands. It is an easy matter to prophesy of any particular case that he will die, and if he does die, to claim some credit for foresight, and in consonance with the prophecy, intermit all efforts, except to palliate suffering, but it is as heartless as it is easy; it is the dictate of one who is alike ignorant, lazy and unfeeling. The enlightened and humane practitioner knows and feels that in Consumptive disease, while there is life there is hope, and acts accordingly; he therefore works and works hopefully too, long after his mere judgment is satisfied that the die is cast.

Dr. Quain is a medical writer of high authority on both sides of the Atlantic; his anatomical plates are the

most beautiful ever published: in 1851, he "presented to the Pathological Society of London, a specimen of lungs, showing the arrest of Consumption in its last stage." This statement is made in the London Medical Gazette of June 20th, 1851, p. 1086, and copied by Braithewait's Retrospect, on p. 86, part 24. These references are given purposely at length, that the medical scholar may know that higher and more respectable authority among Allopathic or Old School practitioners, cannot be given. The concluding sentence only is quoted, "This case affords an additional illustration of the great extent to which the ravages of Consumption may proceed, and its progress yet be stayed. Such cases happily, are now oftener met with, nor did he know one, which afforded after death, so striking a result."

The above was the case of a young woman who was considered in the last stages of Consumption, the lungs having partly decayed away, yet she recovered, had good health, and died finally of inflammation of the stomach, when the lungs were taken out and preserved, as ocular demonstration of the fact, that Consumption in its last, that is, its decaying stages, admits of arrest and permanent cure.

That Consumption admits of cure, that is of permanent arrest, is advocated in No. 45, for January, 1852, of the American Journal of the Medical Sciences, second to no medical periodical in America, published in Philadelphia, and Edited by the Surgeon of Wills' Hospital, and now an eminent Professor in one of our oldest medical colleges. In reviewing "Walsh on Diseases of the Lungs and Heart," published in London eight years before, who speaks of "curing the disease," as a matter of course, the editor observes,

"It is cheering to every humane physician, that one so capable and impartial as Dr. Walsh, should take a view of the tendencies of Consumption, very different from what has been almost universally entertained by writers upon this fell disease. He believes that the treatment of Consumption may confidently aim at slight improvement, at totally removing the subjective symptoms, at ameliorating, or rendering quiescent, the physical signs."

In a note to a subsequent remark, the Editor says, p. 189, "That such cures really occur in rare instances, is indubitable, and they are as perfect as in any other organic disease, when they do occur. It has been the vanity of late years to deny this absolutely, because a scientific explanation of the fact cannot be found. I am not one of those who refuse to accept the evidence of my senses, because I am unable to comprehend what they teach me, &c."

"This is not a treatise, but rather a mode of calling attention to a new and effective mode of curing Consumption."—*Dr. Cronin, Surgeon.*

"Uniform and complete success having resulted in the treatment of several cases of tubercular Consumption, the Author deems it his duty to publish them."—*Mr. Bodington.*

"So many persons affected by incipient Consumption, have been benefited and restored to perfect health, by what I am about to mention, I cannot but think that they possess great efficacy."—*Marshal Hall.*

Taken from London Lancet for April 20, 1844, and copied by the London and Edinburg Medical Journal.

In Moreland's extracts from the records of the Boston Society for Medical Improvement, Dr. Ware pre-

sents a case which is republished in Hay's Philadelphia Medical Journal, where a woman 34 years old, came under medical treatment in August, 1850. By June of the following year, she had no apparent symptom of consumptive disease, and "died in August, 1851, with all the symptoms of acute inflammation of the bladder." On examining the body after death, "the lungs were perfectly healthy, excepting there were numerous cretaceous masses, with the lungs contracted hard about them, no crude tubercles, no cavities," thus showing, that consumptive disease had existed, but that a complete cure had taken place. On this case the able Editor of the Journal remarks:

"This case is interesting, from the patient dying of another disease, and establishing the fact of her having had consumption, by a post mortem examination. There can be no doubt that patients do recover from unequivocal consumptive disease, under other treatment. But it is an extremely rare thing for a person so reduced by tubercular disease, to so far recover. Dr. W. has never (before) met with an instance where there was not a doubt as to the character of the disease. This would have been an unsatisfactory case had the party survived."

Dr. Gillerstedt says, in a large work on Consumption, published in 1847, "Cases certainly do occur where every symptom of tubercular disease exists, but the patients nevertheless recover their original health." See British and For. Med. Rev., 1847, p. 437.

Drs. G. and Reynaud, p. 434, say that, "Caverns in the lungs, may heal in different ways, in one case, the parenchyma surrounding the cavern, becomes indurated; in the other, it shrinks, draws together, and forms a

long, firm, white cicatrix, or scar. The fibrous bands which traverse and surround the pulmonary parenchyma in Phthisis compress the tissue of the lung, by contracting, and thus materially assist the healing of the excavations."

Dr. Addison, of Guy's Hospital, London, says, "The natural cure of an excavation in the lungs, consists in the formation of a more or less permanent lining membrane, the true cicatrix of such ulcers."—*Ib.* 1847, *p.* 423.

Dr. Hancock says, "Rush, Portal, and the most judicious physicians, have constantly regarded Consumption as a disease of the constitution; and in the times of Moreton, and Sydenham, and Bennett, and others, it was not regarded as an incurable disease."

The writings of Laennec, Andral, Cruveillier, Stokes, Williams, and others, prove that many cases of pulmonary (Consumption) have, contrary to all expectation, recovered; and that, at a subsequent period, death having occurred from some other malady, the lungs have been found puckered and cicatrized from the healing of the tubercular cavern. The more recent researches of Rogee and Boudet, in Paris, and J. Hughes Bennett, in Edinburg, have shown, from the indiscriminate examination in large hospitals, that puckerings, cicatrices, cretaceous concretions, and other evidences of former tubercles in the lungs, occur in at least *one-third of all who die* after the age of forty, in this climate. Facts, therefore, indicate that so far from pulmonary tubercle being necessarily fatal, it is spontaneously cured by nature in a vast number of cases, and that not in a few, this is accomplished even when large ulcers have been formed in the lungs, and all those symptoms present which are considered evidences of so-called Consumption.

The curability of (understanding by that term recovery from) phthisis pulmonalis, is a matter, therefore, which no longer admits of a dispute. It is a fact as certain as the curability of pneumonia, or the union of a fracture, and, like the latter, is susceptible of demonstration by means of well-preserved preparations.—*Monthly British Med. Jour.*

In his "Notes of Practice," by Dr. Henry Hartshorn, of Philadelphia, in October 1848, in a case occurring in the hospital at that time, during the service of Dr. W. Pepper, (see Hay's Med. Journal, p. 351, October 1848, case 4.) "A man named Evans, aged 27, admitted in the fall of 1845. He had then all the marks of confirmed consumption; emaciation, hectic, night sweats, debility, cavernous respiration, and dulness or percussion over the right lung. * * * On the 5th month, 4th, 1846, he leaves the house to-day *in good case*, the ulcer healed. We can consider this nothing else than *a recovery from consumption*, under circumstances of the greatest disadvantage." This case is the more valuable, as an illustration of the curable nature of consumptive disease, since it comes from the hand, not only of a most eminent and deservedly honored practitioner, now gone up higher! but of a Friend, who expresses himself with that moderation, and freedom from expletives, for which that class of persons, who still adhere to the faith of their fathers, are so remarkable, and on that account we may repose in it our most implicit reliance. He left the house "*in good case.*" He does not say *fully restored*, that he left *in perfect health;* that *he never enjoyed better health in his life before*, but simply he left *in good case*, which means in reasonable health, considering the nature of the disease.

From the extracts which I have made, it appears that the greatest names in medicine, and the most respectable medical journals in this country and in Great Britain, advocate in the most confident, decided and fearless manner, the curability of consumptive disease, even when the lungs have already begun to decay away; it is therefore a moral impossibility that *they* should be wrong, and that the vulgar opinion to the contrary, should be nearer the truth. The error of the popular sentiment on the subject consists in resolutely denying that any given case which recovers, had consumption, and as pertinaciously insisting that another dying with similar symptoms had consumption, thus practically making the word "consumption" a synonym with "death." It is as unfair to say that a person has not cholera, until he is in the collapsed stage, and deduce that cholera is incurable, because those in the collapsed stage uniformly die, as it is to affirm that no person has consumption, until he is in its very last stages, and because these stages uniformly end in death, that consumption is incurable. This is simply a confounding, a commingling of ideas, only possible to an uninformed mind. The evils which result from this untruthful popular view, cannot be computed, although but mainly two in number.

1st, The patient is paralyzed the moment he believes that he has consumptive disease, and loses all the sustaining influences of hope.

2d, It being the general impression that consumption is incurable, there is an irresistible repugnance against admitting that any set of symptoms are those of phthisis; every one sees it but the patient himself; like a man in business, however desperate may be his condition, he is

the very last one to admit that he is a broken merchant; it has long been understood in the street as inevitable, yet the conviction is not made in his own mind, until the sheriff turns the key on his door. The practical effect of this is, to prevent a person from making a systematic, rational effort for the removal of the symptoms, while such a thing is practicable and probable; at the last hour only, does he wake up to a sense of his real condition; and because all remedies *then* fail, it is taken as proof additional to thousands of *similar* ones preceding it, that consumption is indeed, a hopelessly incurable disease.

Another mischief, resulting from false views on the subject, and one too, which beyond all question, causes the sacrifice of thousands of valuable lives is, that persons are not unfrequently pronounced consumptive, when such is not the case, and thus abandon themselves to die, and do die, not from the effects of existing disease, but from the depressing influences of hopelessness of recovery. The commonest observer must feel conscious of the truth of this sentiment as applicable to diseases in general. It is a truth which has a practical bearing on the health and happiness, and lives of thousands. These things being so, and they cannot be otherwise, every man, however circumscribed may be his influence, commits the great crime of doing humanity a wrong, when he asserts that consumption is an incurable disease. I call it a *great* crime, it is "great" to him, because, small though his influence be, he does all he can with it, he exercises all he possesses in the wrong direction. Most truly do I trust, that Clergymen and Editors, the most widely influential professions by far, in our country, and long and worthily may it be

so, will give this subject the mature and deliberate consideration which it merits, and hereafter, wholly abstain from the expression of adverse opinions, until they investigate this point thoroughly, *or*, are willing to abide by the opinions of those whose proper work it is to examine the question, and who have, with that devotion which only a true love for science can inspire, given all the energies of educated minds for years and years together, to the study and elucidation of the subject.

It is not worth the ink that would be expended, to hold an argument on this point with non-medical persons; it is the most worthless of all possible efforts, to discuss any question with a party wholly ignorant of the point involved, who has given it no critical investigation, who has no views but simple impressions, a feeling sense, an intuitive conviction, as some express themselves. But there are some medical men who truly believe, that for a case of undoubted Consumption there is no cure. This proves one thing certainly, and only one, that they themselves have never been able to effect a cure in any case.

I have before me now a book, apparently just from the press, but issued in 1844, containing lectures delivered in the most celebrated medical school in the United States, by a gentleman of high repute, so high indeed, that his name gives honor to the school, without the school returning any to him. On pages 77 and 78, this gentleman makes the assertion, and gives the reason above stated. In 1847, one of the most worthy and substantial citizens of New Jersey applied to a colleague of this gentleman for advice in his own case, which was pronounced to be 'Consumption, that he could not live

six months.' This patient visited me in Cincinnati the same year. He complained of "a pain running from the centre of the left breast to the inner edge of the left shoulder blade, half way to the point, just as if some one were pressing with the weight of a heavy hand, more or less every day; a dull, heavy, leaden-like feeling through the breast; a good deal of general chilliness at times, feet always cold; sleep, bowels, appetite, all irregular; some difficulty of breathing; cough not very troublesome, but a great deal of clearing of the throat, without bringing up much; spitting of blood for a number of years in specks, mucus is sometimes stained with it; palpitation, more or less an invalid for fifteen years; pulse one hundred and ten in a minute, breathing sixteen. Conversation or reading causes an aching or pain in the throat, with a prickling sensation sometimes in swallowing, together with an unpleasant vacuum feeling; for a good many years, a good deal of pain in the breast, and weakness in the back, pains in the head and sides; a feeling of heavy weight at pit of stomach."

My opinion of this case was, that he had not Consumption, that there was no disease of the lungs, and that if he did not get well, it would be his own fault. At the end of five years, this gentleman is busily engaged in active outdoor life; winter and summer he gets up at five o'clock in the morning and goes to work, has a good appetite, no pains, no cough, no throat feelings; and that he ever had anything like Consumption is simply ridiculous, as the reader would imagine, if he could see him ride or work on a winter's day by early light, which he does, not of necessity, but choice, he being a substantial, independent farmer. He has no symptom of disease whatever, except of a dyspeptic

character, which are present or absent, according to the amount of food he eats. This case simply proves that this gentleman either had Consumption or not. If he had Consumption, it demonstrates its curability; for now, at the age of thirty-eight, he has a regular full pulse of sixty-eight, breathing sixteen, weight one hundred and forty, vital capacity three hundred, height five feet eleven inches. If he did not have Consumption, then it is very certain that this distinguished practitioner made a great mistake. It adds to the value of this history, that I did not know, until within two weeks past, that this gentleman had been consulted, or that such an opinion had been given.

The truth is, the mere opinion of a medical man as to the curable nature of Consumption, is if possible more worthless than that of the non-medical, unless he has had frequent opportunities of examining the lungs of three classes of persons: 1st, those deprived of life while in perfect health; 2d, those who died of palpable Consumption; 3d, those who died of other diseases. Besides the usual facilities afforded to medical students in our own medical schools, I have had whole barrels of lungs of the dead at a time, in London, with the advantages of the finest pathological museum in the world, and I can truly say, that I have never observed a fact, or a specimen, which did not afford an explanation in accordance with the views I have presented. And the reader, for his own satisfaction, has simply to ask a question or two of any physician, old or young, who opposes the opinion advocated. Have you ever attended a dozen persons, or half a dozen, who had apparently Consumption, and who died at the time, or years afterwards, and when they did die, did you open their

bodies, and carefully examine their lungs for facts bearing on the question of the curability of common tubercular Consumption? If they have never had such opportunities of observation, their testimony is nothing in comparison with that of several of the men I have given, who spent from ten to twenty-five years in examining the lungs of the dead, with *especial reference to the point in hand.* And even if they have had the dozen opportunities, and have formed adverse opinions, they are only valuable in the proportion of a dozen to many thousands.

Dr. Chapman, of Philadelphia, who thinks himself that while decided Consumption is not curable by any means now known, is forced to confess that "The annals of medicine of every period contain instances of ENTIRE *cures* of the disease." And that "Many are the instances I have known of this disease, in its early stage, entirely obviated." It is to direct attention to these *early* stages that this book is mainly written; to describe plainly the nature, the character of the symptoms which indicate this early stage, thus putting the community on their guard, in the hope of inducing them *to act promptly*, and by doing so, save life.

While I have advocated the curable nature of Consumption of the lungs, in the most decided manner, I do not wish to be considered as adopting ultra or extravagant views of the subject. My opinion is;

1. That at any stage, previous to the commencement of actual decay of the substance of the lungs, Consumption is completely and permanently and uniformly curable.

2. That even after the lungs have begun to decay

away, the disease may be permanently arrested, but that such an arrest, is not of common occurrence.

3. That when the lungs have begun to decay away, in any particular person, that person will most probably die, at no far distant day.

4. That when such decay is present, if to a small extent, its arrest may be striven for hopefully, but,

5. That it is wrong to hold out high probabilities of recovery, and to promise it *certainly*, infamous!

6. That in all stages of the disease, up to the last day of life, the physician should labor resolutely, steadily and hopefully, for the restoration of the patient.

But after all, I scarcely expect a revolution on this great question to begin with educated men. Reforms come from the people, and to them must we look for a change of opinion.

The following are apt and authentic illustrations of some of the sentiments just proposed, showing that leading men, not only do not begin reforms, but have in all ages of the world been its bitterest opposers, more especially in medicine:

"Surgery once staunched the blood, by applying boiling pitch to a wounded artery. Ambrose Pare introduced the practice of tying the artery with a ligature; and for this, the faculty hissed him to scorn, as one who would hang human life upon a thread.

Antimony, which was introduced by Paracelsus, as a medicine, and is now generally regarded as a potent remedial agent, was at first proscribed by the French parliament, at the instigation of the college, and to prescribe it was made a penal offence.

Protestant England originally regarded Peruvian

bark as the invention of the devil, because introduced by Jesuits.

Dr. Groenvelt, who, in 1693, discovered the curative virtues of cantharides in dropsy, was committed to Newgate by warrant of the President of the College of Physicians 'for prescribing cantharides internally.'

Lady Mary Montague, who introduced the practice of inoculation, was hooted at by the Doctors, and denounced from the pulpit by the ministers, as presumptuously taking events out of the hands of Providence.

Jenner, the discoverer of vaccination, one of the greatest benefactors of the human race, was run down by the Royal College of Physicians, at London, for what they chose to consider his monstrous quackery; and one Errham, of Frankfort, undertook to prove from the holy scriptures and the fathers, that vaccination was the real Anti-Christ!

Harvey lost his practice at first, and was proscribed from the consultations of his fellow-physicians, because he proclaimed the circulation of the blood. They would not believe that a theory which had descended from the wise men of Greece and Rome, could be false."

What has been, will be again, and we must expect for years to come, that leading men in the community will be the most obstinate opposers of the doctrine, that Consumption can be cured; and they, *with those whom they influence*, will be the last to derive any benefit from more truthful views.

It certainly does not follow that because these names were on the side of truth, all who advocate new views, in opposition to the common sentiment, will prove also in the end to be on the right side: but it does follow that

Nothing should be opposed simply because it is new.

Nothing should be rejected without an investigation adequate to the importance of the subject.

Contempt proves nothing.

In fact it is too much the tendency of the times to summarily reject what conflicts with long held opinions. The people seem to be averse to investigation. Ideas are not palatable, unless they are made to be comprehended at a glance. What requires severe study, patient research, and thoughtful discrimination, is too often disposed of by the immense saying, *It's a Humbug*. Such was the designation applied to the first golden stories from California, and yet they have been realized. Such was the epithet more recently given to the value of the quartz formations of that country, the same to the magnificent project of the Pacific railway, and yet the quartz formations are as valuable as was at first claimed, and the Pacific railroad will be built.

Within the writer's recollection, the Morse telegraph was declared an impracticability, and was even in Congress simply laughed at, and yet it has already become a glory of the age, and given immortal honor to the man.

CLIMATE.

Almost every one admits, that a mild southern clime is beyond all question, the best calculated to promote the recovery of persons who have consumptive disease, or are falling into it. In all that I have written on the subject for the last 10 years, this opinion has been opposed, and I am constantly receiving additional proofs of the fact, that a warm climate, aggravates consumption in all its stages, hastening a fatal termination, and that the best possible latitude for the prevention, arrest,

and permanent cure of the disease, is that which affords a cool, still, dry air.

It is then a great mistake, that the "*South*" is favorable to consumptive constitutions; the climate is too foggy, too damp, too wet; too much at one time of suffocative sultriness; at another, too much of piercing cold winds after the frequent rains. The changes of the weather are too great and sudden, often forty degrees in half a day. It is frequently too cold; for the universal dampness of the atmosphere in winter, continued more or less throughout the twenty-four hours, abstracts more vital heat from the system, especially when there is wind, than a still atmosphere of a temperature many degrees lower, without imparting the bracing and life-giving influences of a clear, dry, frosty air, and to such, a consumptive should repair, if he leaves home at all. One of the most eminent of British authors in reference to this subject, says: "The advantages of breathing warm air in consumption is very much overrated, as it runs its course rapidly in Italy or any warmer climate." Such is the experience of Azarel and others; and that the "deception has arisen, from persons not really consumptive, being sent to warm climates, who have, from the comparatively trifling nature of their ailment, returned cured, if not worse. In some of these cases, erroneously called consumption, the progress of the disease is said to have been checked, by the influence of the milder climate. This popular prejudice has still, however, a strong hold on the minds of men, but for all that, it is unnecessary, and generally worse than useless to send patients away from their friends, and often at an enormous expense, which in very many instances they are not at all able to bear, and under the circumstances,

the recommendation is a cruelty, unless a striking benefit is a certainty. Dr. Chevane says: "If they are consumptive they will thus die in exile, and if not, they may be cured at home: of this, there are many marble records in the West Indies, Madeira, Leghorn, the South of France, Paris, Florida, and Louisiana; can anything then be more absurd or cruel? If there be any disease which requires the comforts of home and good nursing, it is consumption."

I resided for eight consecutive winters in the South, besides spending a considerable time among the islands of the Gulf of Mexico, watching the progress of the disease in those affected, and receiving statements from the lips of educated persons, year after year, as to their own experiences; in addition to this, I have had the opinion of a class of men who travel and observe for themselves, and from these observations form their opinions, matter of fact men, on whom the mere belief of others has no influence. In the same direction is the very general sentiment of eminent Southern practitioners. And taken altogether, the testimony from these and other sources is overwhelming, that "*the South is no place for a person having consumption.*"

It is an easy thing to say that a person has consumption, and advise him to "go to the South," to some milder clime, far away from all the endearments of home and kindred, but too often is it to die there. If one must die, home is the best place to die at, and there should the consumptive be sent, if sent anywhere. It is a terrible thing to die among strangers. In the sufferings of cheerless days and weary nights, to have no friendly look, no kindly smile, no tone of tenderness to go down with you into the darkness of the tomb. In

stead of a mother's angel ministerings, to extract from voracious hirelings, their impatient attentions; no sleepless anticipations of a thousand little wants, no look, nor tear of sympathy. I have sat by the bed-side of the "stranger" alone, in the weary hours of midnight, and closed his eyes in the long sleep which knows no awaking, for no one seemed to care how or when he entered on the unending journey. "Can I live to see my mother once more?" said a young gentleman on his way to one of the West India Islands. "No, my friend," said I. "Well, it is hard, I did not think I was so near the grave." And yet he had left mother and sister, and a home which commanded every comfort, many hundred miles behind him.

A worthy and respectable gentleman from Ohio, arrived in New Orleans, on his way to one of the islands of the Gulf, for the benefit of his health, having left behind a young wife and child. He consulted me merely for the purpose of enabling him to continue his journey. "My dear sir, you are not able to leave your room, and probably will not be." "Write to my wife, then, and tell her to come to me and bring our child along." He died that night. These cases are given to show, that if a man is so far gone with the general symptoms of consumption, that his physician can do no more than advise him to go to sea, or to a milder climate, he is too far gone to recover his health by any such indefinite and hap-hazard prescription. And under such circumstances, the only possible chance for getting better, is to remain at home, where he can have every comfort and every attention which affection can bestow. If with all these little, but essential aids, he does not improve, he cannot expect to be restored, when subject to the in-

numerable discomforts and exposures inseparable from invalid journeying, to say nothing of the hourly and irri tating annoyances which always accompany hired attentions, while the only counteracting influence to all these, is a milder climate. The great John Hunter very sarcastically observes of London physicians, in his day, "They keep their patients, as long as they can, and then send them away to other places to die." I will here state one fact, of a thousand like it occurring yearly, which every consumptive, by which I mean any person who has had for some time, any one serious symptom of Consumption, should give the most candid and mature consideration, before he decides leaving home and friends and country. Several years ago, while at Matanzas de Cuba, on a visit from Havana, I frequently went down to the wharf early in the morning and in the cool of the afternoon, but seldom went at any hour, without seeing a young man at the farthest extremity of one of the piers intently gazing seaward; he seemed to notice nothing of all the busy bustle and merry song of the workmen about him. I sometimes endeavored to catch a glimpse of some object on the distant sea, but whether I observed any thing or not, he appeared to feast on the very nothingness, with so fixed a look, and yet so mild and gentle, so full of melancholy, that I at length became interested in his history; it was this: he was from Boston, had had a bad cough for some time, which had begun to undermine his health before he left home. He had heard a great deal of the refreshing breezes of Cuba, its orange groves and its flowers, its spicy odors and its eternal spring, and felt assured that if he could only get there, his return to health would be speedy and perfect. But after a few days, he began to

discover that there was no charmed influence in a Cuban atmosphere, that he was not perceptibly better, but rather growing weaker, and was reluctantly releasing his hold on the last cherished hopes of life. His only expectation now, his highest wish was, that he might see home once more, and have his mother beside him when he died. "I am willing to die," he used to say to me, "if I could only die at home!" He was expecting a vessel every day, and as day after day passed by, and it did not arrive, he used to beguile his weary hours by looking in the direction of his own loved Boston—it was all that he could do. Whether he ever saw it again, I never learned. And it cannot be denied, that such is the too frequent history of those who visit the islands in the hope of removing Consumptive symptoms. They indulge in the most extravagant anticipations of rapidly regaining health, of soon returning to the loved behind them, with the rosy cheeks and the freshness and strength of youth, and begin in advance, to drink in the fond congratulations which they will receive from kind hearts at home. But when day passes day, yet brings to them no life-giving influences; and one by one their fond imaginings fade in the distance; when the unwelcome reality forces itself upon their attention, that they are homeless, friendless, sick and sinking, among strangers in a strange land, hope sinks within them, and all is over. When such is the history of some hundreds every winter, I cannot conceive of any adequate cause for that infatuation which repeats ceaselessly from year to year in reference to Consumption, "you must go to a milder climate."

Dr. Armstrong, an English author and lecturer, in a celebrated medical school, says, in reference to this same

subject, "with regard to climate, I thought favorably of a change some time ago; but so many appalling facts have come to my knowledge, that I have been induced to change my mind. If Consumption be threatened, the patient has the best chance at home. If he be in threatened Consumption, to remove him from his friends, is to wrench him from all the affections which have held him from the time of his birth; and no man can bear this, without receiving a shock which may be exceedingly injurious. Besides which, the fatigue of travelling, the risk of cold, the worry and bustle of inns, the diet, which becomes in some measure dependent upon chance, on the road, the danger of damp beds, and the necessity of changing the abode at different seasons of the year, must all be taken into the account: they more than counterbalance the good which might arise from a less variable climate; and many persons, who have left this country in a state of *threatened* Consumption, have returned with *confirmed* phthisis."

When a person is determined that he will go from home, if he can possibly get away, my advice is "go north." I know very well it requires a generation to dislodge what "everybody believes." But if the reader will think awhile, without prejudice, he will discover that cold air is purer than a warmer one, that under equal circumstances, the more pure air a man consumes, the better health he will enjoy; that the larger amount of lungs a man has, the more air he can consume; much more then has the Consumptive, whose disease is a deficiency, in quantity and action, of lung substance, an urgent need for the largest amount of pure air. If you shut a Consumptive man up in a warm room, he never will get well. A uniform, cool, dry atmosphere, away

from piercing winds, is infinitely preferable to Cuba, or any other latitude south of the thirtieth parallel. A Consumptive will sooner get well in Greenland, qualified as above, than in the South.

If a man is really Consumptive, a warmer climate will inevitably hasten his death; and it is wonderful, that it continues to be the stereotyped advice given by Northern medical and non-medical men, without the slightest consideration of the ability of the patient to meet the expenses of such a journey; and more, without any opportunity of personally observing, on the spot, whether such advice is for life or death. Having been alone in these views for some years, I feel not a little gratified, in inserting here a letter to the New York Observer, by one who seems to have formed his opinions from what he saw, and appears to have taken a common sense view of the subject, not being himself a physician.

STAY AT HOME TO DIE.

New Orleans, *March* 21, 1851.

The climate of New Orleans, owing to the position of the city, and particularly during the winter months, is damp and exceedingly variable, the same weather seldom remaining unchanged in winter for more than three days. Since the 12th of December, the thermometer has not fallen below the freezing point, but the range above that has often been very great within a few hours. Indeed I have never known more sudden or greater changes in any climate, than I have experienced here. I speak of the climate simply to discharge a duty, in saying that this is not the place for invalids to resort to in quest of health during the winter months, and particularly for those who are suffering from pulmonary dis-

ease. Some classes of invalids may be benefited by a residence here, and those whose lungs are but slightly affected, are frequently relieved, or entirely restored, by spending a winter in New Orleans; but where disease of this nature has become serious, and particularly in its more advanced stages, the climate of this region has a decided tendency to precipitate a fatal termination. I have known many, who came here with the hope of having a radical cure effected, whose disease has been aggravated by the change, and in some cases death has hurried them to the tomb precipitately. The climate is not only damp, but relaxing to the system, and there is such a tendency to diarrhœa, particularly in the use of the river water, that consumptive persons, having this latter tendency already fastened upon them by disease, are liable to run immediately down. In this opinion of the influence of this climate upon those who are suffering from pulmonary complaints, particularly from the Consumption, I am confirmed by the views of many of the ablest physicians resident here, and I feel, that I am but performing an act of humanity in expressing it.

In my sojourn here, I have met with so many sad cases of those who are sick and suffering, far away not only from the endearments, but also from the comforts of home, that I am more and more confirmed in the opinion that I have long entertained, that it is far better, as a general thing, for advanced invalids to remain at home, than to wander away, and be sick, and perhaps to die among strangers. Many are the couches by which I have stood this winter, in the discharge of ministerial duty, when the patients have sighed with bitter tears for a mother's heart, and a sister's hand to be near them, and where the only request of an earthly nature they

have desired me to make in prayer for them has been, that they might live to reach home. I have always admired, from my heart, the beauty of the Eastern salutation, "*May you die among your kindred*," but I have never known so much of its beauty as now. It is true, heaven is as near to one place as another, and if we are prepared to enter it through the grace of our Redeemer, when once the last scene is o'er, it matters little to one who is gone, where, or in what circumstances, the last agony was endured; but there is much suffering before this hour arrives, and it leaves a lasting and bitter regret in the hearts of surviving friends, that they were able to do nothing to cheer the last hours of those who have been tenderly beloved. Unless there is a very strong ground to hope for actual restoration by a change of climate, I would advise any actually suffering invalid to remain at home. It has comforts, and palliatives, and anodynes, which are not to be found among strangers, in the most genial clime on earth.

Yours very truly, ———

Under all circumstances, the colder out door air is, the purer it is, and *other things being equal*, the more healthful it must be. During the year (1850) there was one death for every sixty persons in Maryland, one for every sixty-six in New York, and one for every seventy-seven in Maine, one to one hundred in Vermont.

A clergyman under my care a short time, for some throat affection, with cough and pains in the breast, wrote to me that he felt himself almost entirely well; but to make assurance doubly sure, and also for the pleasure of a winter in the South, he left home, and within a month has written to me from a Southern city

saying, "I have been here six weeks, and in consequence of the wet weather, want of exercise and a suitable diet, I regret to say that my throat does not feel as well as when I left home." And it is precisely this "wet weather, want of suitable food, and opportunity for exercise" that will meet the invalid wherever he goes, to say nothing of comfortless rooms, nights disturbed by musquitoes and sand flies, the long sultry days; the weeks of fogs and damps and rains, houses seldom plastered, sometimes without windows, often without fireplaces, meeting with invalids at every turn, worse than yourself, herded together from two to six, or more, in a room, no wife, no sister, no brother, no friend, to interrupt the unmitigated misery, all this is to my mind very disagreeable to think of, and it is worse by far to witness it, as I have done; but to experience it all in a distant land, makes up an amount of suffering which I cannot adequately describe, unless it be in the language of a gentleman of fortune, who having made a large offer for some trifling comfort, without being able to get it, bitterly exclaimed, "I could not wish the worst enemy I have on earth, a greater curse, than to be sick in such a place as this." The next day he died, and this was at the seat of the State Government.

I have never been an invalid in the South or anywhere else, but in travelling, have seen all that I have uttered; and it is in every word, a picture of the reality as to the majority of the sick who seek a milder climate. And if any thing I have said in these pages shall have the effect to prevent one Consumptive from leaving home, to tempt the terrors of the sunny South, I will feel highly gratified.

One year ago, a merchant, M. M., from a northern city, applied to me; his general symptoms were pains between the shoulders, oppression in the breast, difficulty of breathing, considerable emaciation, pains in the side, great chilliness, tickling cough, and of a Consumptive family. I heard nothing of him for twelve months, when I received a letter from him saying, "My general health and appetite are good, and I believe every thing like a tendency to Consumption, is removed." This was a case where the symptoms had been gradually becoming more aggravated for two years, and when in addition to this, it is remembered that several members of his family had died of the disease, it should be regarded as a beautiful illustration of the facility with which persons may relieve themselves of suspicious and threatening symptoms, even though of a hereditary character, while remaining in the North. And it is in contemplation of cases like this, that the happy effects of a proper plan of treatment are seen, in restoring the health or protracting the lives of the suffering, without tearing them away from the sustaining influence of home and kindred.

In official reports to the British Parliament, it is stated that soldiers who leave England in good health, for the West Indies, oftener die with Consumption than if they had remained at home. That the number of soldiers attacked with Consumption in England, is just one half the number attacked in Jamaica and other English islands. The same principle holds good in the Mediterranean stations, yet to a less extent.

In London, two hundred and thirty-six persons out of a thousand die of Consumption, in Sweden, only sixty-three, although six hundred miles farther North. The

number of persons who suffer from Consumption in the rude and ice-bound regions of Russia, is incomparably smaller than in Great Britain, as far as reports are given.

In Canada, but half as many soldiers as in the West Indies, are attacked with Consumption, and fewer than in Great Britain.

In statistics of the United States army, Consumption is more fatal along the southern Atlantic coast, than on the northern. On the northern Atlantic and lake posts, nine men in a thousand have Consumption, at the southern Atlantic posts, thirteen. It is stated that the British government send Consumptive soldiers from the West Indies to Canada, from the conviction that they are more likely to recover.

A Consumptive person has a less amount of lungs, therefore consumes a less amount of air, that is, a less bulk, than is needed for the wants of the system. The warmer air is, the less nourishment does it contain, hence a pint of cold air contains more nutriment than a pint of warm air, and inasmuch as the Consumptive is already living on short allowance, the more need that every inch he does consume, should be such as will afford him the largest amount of nutriment. But there is another consideration of equal importance: warmth dissolves substances, decayed wood, vegetables, grass, offal of every description, which rises up and fills the air, impregnates it, each filthy particle takes up so much room; where it is, air cannot be, so that on this account also, there is less substance in a cubic inch of warm air, than in a cubic inch of cold. The reflecting reader will make the application for himself.

SEA-SHORE.

There is a general impression that there is something refreshing and health-giving in the pure air of the sea-shore. It does give, when uncombined with the 'land-cough' air from the shore, health and vigor to those who are already well and strong, but it uniformly aggravates consumptive symptoms, and hastens death. There can scarcely be selected a more dangerous location for persons threatened with Consumption, or having it already, than one on the sea-coast, or the shores of a lake, or on the borders of a prairie. A person *threatened* with Consumption will have it fixed by a coast situation, and throat affections are uniformly aggravated thereby. The reason for this is, not that the air is not pure, but because it is for a great part of the year too damp and raw, and the wind which blows more or less every day of the year, carries the vital heat from the body with too great rapidity, and leaves the person chilly; on the same principle precisely, that when it is desired to cool anything we blow upon it. The universal symptom of persons who have Consumption, or are falling into it, is, that they are chilly, it is hard to keep them warm, they hover around the fire, or bundle themselves up in padded clothing or blankets; and to go where constant breezes are passing over the body, and carry away the remnant of vital heat that remains, cannot but be fatal in its results. Several cases have recently occurred within my notice, where persons who went to our fashionable sea-shore summer resorts in reasonable health, came away with a fatal disease; and many there are who have come away worse than when they went. I am

confining my remarks to affections of the throat and lungs; therefore,

The farther consumptive persons can get from the lake or sea-shore or prairies, the better for them. The statistics of the U. S. Army show that while *eleven* soldiers out of a thousand die of Consumption on the Atlantic and lake coasts, only *five* die at the forts stationed away from the sea or lake shore. It requires a fact and a theory in unison to make a truth, and on such a truth can our practice, our habits of life, safely rest.

SEA VOYAGES,

In a vast number of cases, hurry consumptive people to the grave. Doubtless many who go to sea regain their health, who in some respects appeared to have Consumption, but it will be a rare exception, if the reader can bring to his remembrance a single instance of a person deriving any material *lasting* benefit from a passenger sea voyage, who had the following general symptoms of actual or threatened Consumption: a constant dry hacking cough, with a decrease of flesh and strength and breath, of six, eight, or ten months' continuance. If the reader can remember such an instance, he will promote the cause of truth and science by communicating it in a letter to my address, and at my expense.

When persons then inquire if I would advise a sea voyage in a case of actual Consumption, I reply in the negative, for it oftener aids to kill than cure. Those who have tried it for the removal of consumptive symptoms, have so often assured me of its inadequacy, that although once an advocate for it, I have been compelled to abandon it from the multitude of strong facts against the practice. Many seem surprised that I should not

be in favor of breathing the fresh air as it came from the ocean, and begin with great energy to reason about its purity, and to theorize about its freshness and bracing nature. Those who love argument, too often seek for victory and not information; and I have generally found that men are oftener reasoned into their opinions than out of them. As for theories, I am afraid of them. They all appear plausible enough, until you come to look at the items which compose them. It constantly happens that a theory is proposed, criticised, abused, pruned, trimmed, embraced, defended, fought, and died for; when some new fact is brought to light, sweeping away its broad foundations, and in a few years afterwards we can scarcely persuade ourselves to believe so great an absurdity ever had an advocate. Revolutions like these are constantly going on in every department of human knowledge, and he perhaps is the wisest who keeps himself unwedded, and follows without reluctance wherever well authenticated whole facts may lead him.

But to return to the benefit of the pure ocean air in tubercular disease. I have elsewhere declared with sufficient plainness, that without a large and frequent supply of fresh air, no Consumptive person ever did get well—nor ever will. But I have travelled many thousands of miles, in all kinds of sea craft, for months at a time, and have never yet found fresh air on any ship that ever floated, unless in the main top, and invalids do not often mount such places. I do not mean to say that there is no pure air at sea; but I do assert, that invalid passengers never get enough of it to do them any material good. Let any ship traveller look at the items of a voyage. You are in the cabin while you eat sleep and

lounge, which, at the very lowest calculation, is twelve hours, supposing the weather ever so favorable. But how many days in a month is it suitable weather for an invalid to be on deck in any latitude? Three-fourths of the time it is too hot, or too cold, or windy, or rainy, and were it neither of these, every morning, as regular as the morning comes, the decks are too damp for an invalid to stand or walk on, until a long time after breakfast; and thus the freshest and loveliest part of the day is lost. As for taking exercise, it is a thing almost impracticable; for in the first place, there is no time; and if there were, there is no place; and were there both time and place, you cannot do it to any serviceable extent; for if the weather is fine, the greater part of the deck is occupied by the men repairing the sails or other rigging; and if the weather is foul, you do not want to be there. It is true that passengers have the privilege of the quarter deck, but I do not consider that much better than walking around a tub, bottom upwards. There is only one conceivable way by which a Consumptive person can be benefited by a sea voyage, and that is by performing sailor's duty, and living on sailor's fare, regardless of weather, taking it as it comes; making it, however, an indispensable consideration, to have full, regular uninterrupted sleep, dry and warm, and never go below decks. But as not one Consumptive in a million would have energy enough to undertake such a means of cure, it is not worth while to recommend it. Nor is a residence on the coast any better, because all coast situations are subject to sudden and piercing cold winds, producing chills, colds and pleurisies—counteracting in an hour, the benefit of a whole week's judicious nursing. A cool, dry, still atmosphere, is the grand de-

sideratum for a Consumptive, and to secure this, should be his only inducement to leave home for any length of time; and when by suitable remedies, in careful and experienced hands, the system is first placed, and then kept in a condition to derive the greatest advantages from these circumstances, the restoration to health and life and friends, will be with great uniformity, speedy, regular, perfect and permanent, under suitable modifications.

Dr. Chapman, whose name is authority anywhere, said, nearly twenty years ago, that he had ceased to advise Consumptive persons to go south, from various considerations, want of adaptedness, want of accommodations suitable, indispensable. He says, "The coldness of a climate is not necessarily adverse to the Consumptive, neither promoting its development nor hastening its career, as proved by the limited prevalence of the disease in the extreme north of Europe."

If then consumptive disease is not as prevalent in northern latitudes as in southern; is incomparably less in the rude climate of northern Russia, in proportion to population, than in Great Britain, in Italy, in North America; and if England sends her consumptive soldiers from the West India stations, to recover their health in Canada, it is very conclusive of the fact, that the prevalent opinion which sends consumptive persons indiscriminately to the south, is not merely an error, it is a fault, and one which involves the sacrifice of health and life. The subject demands the mature investigation of all intelligent minds.

Two lawyers visited New Orleans several years ago; both had Consumption unquestionably; one aged twenty-two, the other about thirty-five. The younger was able

to walk about very conveniently, and had no particular symptom except an unfavorable pulse, frequent fevers, and a constant, distressing dry cough; these he had been troubled with for several months; both parents remarkably healthy and well made. The elder had been an invalid for several years, cough, vomitings, night sweats, spitting blood; sometimes blood and matter together; at other times a heavy yellow matter, to the amount of a quarter of a pint in twenty-four hours; his clothes hung on him like bags, and he was too weak to walk a hundred yards. They being friends, held a consultation whether to apply to me or not. It was at length decided that the younger, as he was stronger and better, should go to Havana, especially as he wanted to see the country; the elder came to me, remained a few days, returned home, closely followed my directions for three months, and has not had better health for many years than he enjoyed two years after. The younger went to Cuba, remained three months, returned home and died. I know that one fact proves nothing in medicine, but similar cases are constantly occurring, and force upon the most unwilling mind the conviction of the truth of the views advocated.

There can be no doubt that those who do not practice exclusively in consumptive diseases, do frequently pronounce persons to have Consumption, which there is no hope of curing, unless by removal to a milder climate, however inconvenient or impossible such a removal may be, when, upon examination by a more competent and experienced practitioner, no proper foundation for such an opinion existed, as subsequent and speedy restoration to perfect health, by means not intended to reach the lungs, most conclusively demonstrated. The mischievous

and cruel effects of an opinion so erroneously formed, can scarcely be imagined; and doubtless, by its despairing influences on the mind, has hurried many a one to the grave, who else might have lived in happiness many years.

Dr. Dujat says that he saw as many cases of Consumption in the Hospital at Rio Janeiro, as in those of Paris. Sir James Clark declares, "though the climate of Madeira may be very beneficial to the consumptives of other countries, there is no disease more frequent than Phthisis among the native inhabitants." A resident physician in Madeira says that "of nineteen cases of persons in the advanced stages of Consumption under his care, not a single one recovered, every one died."

And yet Madeira, by common consent on the part of those who advocate a milder climate for consumptives, is generally considered the most favorable in the world to those suffering from Phthisis. As for *Italian skies* and their health-giving influences, Louis says he has "seen entire wards of consumptives at Naples." And if the statement of Dr. Giovanni be true, that in the Military Hospital at Capua he cured two hundred and sixteen cases of Consumption in less than four years, it either must be a very curable disease, or of very common occurrence in that delightful clime.

The truth is, that the idea of benefiting consumptive persons by sending them to a milder climate, is becoming an obsolete idea, at least among medical men of learning and of wide and long experience; and the hope is, that the day is not far distant when it will be as to all classes, among the things that were. If it was simply not hurtful, neither beneficial nor injurious, the question might have remained undisturbed in these pages; but it

has been discussed for the sake of our common humanity, because the amount of pecuniary embarrassment, of social deprivations, of physical discomfort, of bodily pain, of mental sufferings and disquietudes, and of ceaseless unavailing longings to the last hour of life, to be permitted *to see home once more*, which it has entailed, is beyond calculation. They only can have any adequate conception of it who, like myself, have lived for so many years in the "sunny south," and for myself have seen of what I write. Sunny and beautiful indeed to those who have health, and time and money without stint, but not to the weak and worn and weary invalid.

If a person is in the beginning of consumptive disease, he can get well without going to the south; if he is in the advanced stages—and it is not until in these advanced stages that there is any idea of going anywhere—why then going to the south will most certainly hasten a fatal termination, and of this southern physicians of distinction have, as a public warning, given wide and willing testimony.

It will not answer to form adverse opinions from isolated cases of persons *appearing* to be in a decline, who went south and returned improved. The first step to be taken is, to know certainly, of any particular case, that it was Consumption previous to the journey; to know it, not from an impression, but by all the means of careful medical examination. Let any reader, who is that much interested in the well being of humanity, take the trouble to inform me of a single case coming under his own observation, of the following character: A person having a night and morning cough, as steadily as the night and morning come; decided tiredness or shortness of breath on going up stairs, or walking a little fast up

a gently inclined road, who has been steadily declining in flesh for twelve months or more; who has during the whole day, from the time of his rising in the morning until he retires at night, a pulse always above ninety-one beats in a minute; if such a person has gone to the south, and returns with a pulse of seventy, with no night or morning cough, weighing as much as he did in ordinary health, and feels no special fatigue, or difficulty of breathing, viz. no shortness of breath in walking a little fast up a gently rising ground, then will I admit that such a person had Consumption, and by going to the south was cured.

All I desire is to get facts, *whole facts*, so as to arrive at a great practical truth; one which is to influence the health of millions living now, of millions yet unborn. And if the reader has such a fact in his possession, he may become a co-worker, in advancing the highest interest of his kind, by communicating it to my address. On the other hand, those who advise a Consumptive to go to a more southern clime than his own, for the purpose of regaining his health, without having investigated the subject critically, and without having numerous facts to ground that advice upon, such an one should pause a moment, and consider whether he is not possibly shortening the life, which he desires to prolong, whether he is not extinguishing the last hope of health. What I desire is, that every adviser, should advise knowingly, and feel ever, that a holy human life is at stake.

SPIROMETRICAL OBSERVATIONS.

Shortness of breath is a universal attendant on Consumptive disease. Spirometry is the measurement of the breath. Allusion has already been made to this

subject on page 83. Several difficulties will at once present themselves to the reflecting reader, viz.:

To know how much air a person's lungs should hold, or will expire, when in perfect health, and in full working order.

To know how to make an exact measurement.

To know some principle applicable to the fact, that different persons must hold different amounts of air.

It is sufficient to say that these things are known to the medical profession, and that they only are able to apply the principles involved, in a manner practicable, useful and reliable. I propose to offer some illustrations as to these points. The cases will be designated by numbers for convenience of reference hereafter; all of them have been measured by myself, and were recorded at the time.

863. Had lost five-tenths of her lung measurement, and died in twelve days.

883. Had lost five-tenths, and died in eight months.

890. Had lost four-tenths, and died in two months.

908. Had lost two-tenths, and died in six months.

919. Had lost four-tenths, and died in two weeks.

923. Had lost four-tenths, and died in two weeks.

932. Had lost six-tenths, and died in two weeks.

938. Had lost four-tenths, and died in four months.

996. Had lost three-tenths, and died in three months.

997. Had lost three-tenths, and died in four months.

1013. Had lost three-tenths, and died in three months.

1014. Had lost three-tenths, and died in two months.

I have thus given twelve consecutively fatal, measured cases, occuring during twelve consecutive months, known to have died from direct observation or information, by which it will be seen, that persons having Consumptive

symptoms, and who had *lost the use* of three-tenths of the lungs or more, died in four months; three only having lived longer.

It will be seen that some, for example 883, with a loss of the use of five-tenths, which is one-half, lived eight months, while 908 with a loss of two-tenths, or one-fifth only, lived but six months, and 919, with a loss of four-tenths, or two-fifths, lived only two weeks; this difference arises from the fact, that the loss of measurement, in all cases, arises from two causes; 1st, the loss of lung substance; 2d, the loss of lung function only; the greater the loss from the loss of lung substance, the sooner the patient dies; but vice versa, when the greater portion of the loss is, not because the lungs have decayed away, but because they work imperfectly from being filled up with matter, or mucus, or tubercles, or from mere inaction. Auscultation must decide what proportions of the deficit is attributable to the respective causes, and from that, we must judge as to the probable time of termination. When the deficiency is small, the lungs cannot have decayed away to any critically hurtful extent.

When the deficiency is larger, much larger, and auscultation shows no decay, no actual loss of lung substance, there is encouraging ground for restoration, if prompt and persevering attention is given to appropriate means. And it will be more satisfactory to the reader, for me to go back several years, and coupling this with the fact that the persons are still alive, in good health, and not needing medical advice, assurance may be felt that the restoration of the lungs to their full and perfect action, was a substantial, a real, a permanent restoration.

391. Nov. 24, '47. Deficiency from full measurement one-tenth.

March 11, '48. Dismissed cured with full measurement, and four years after remains well as far as I know.

407. Dec. 18, '47. Deficiency two-tenths.

Jan. 14, '48. Fully restored, and known to be in good health four years after.

407. S. Dec. 18, '47. Deficiency three-tenths.

April 17, '48. Deficiency nearly restored, and enjoyed a good degree of health for three years after, since when I have lost sight of this case.

410. Dec. 24, '47. A small deficiency, which was soon repaired, and four years after was in good health; since lost sight of.

414. Jan. 4, '48. Deficiency three-tenths, pulse 120.

March 22. Restored within a fraction, pulse 72, was dismissed as cured; since lost sight of.

419. Jan. 4, '48. Deficiency one-tenth, pulse 100.

Feb. 18. Fully restored, pulse 76, was in good health four years after; since lost sight of

421. Jan. 9, '48. Deficiency four-tenths.

April 3. Deficiency two-tenths, and still decreasing, when he had to rejoin his family; a year or two after he wrote to me that he was working on his farm, and his health continued reasonably good.

432. Jan. 29, '48. Deficiency two-tenths.

May 1. Fully repaired, since when I have heard nothing of this case.

453. Feb. 17, '48. Deficiency one-tenth.

March 29. Fully restored, and four years after in good health.

461. March 2, '48. Deficiency one-tenth.

July 28. Fully restored, and remained in good health four years after.

463. March 4, '48. Deficiency one-tenth.

April 2. Fully restored, and remained well four years after.

469. March 9, '48. Deficiency three-tenths. This case returned home at once, and from the fact that he was occupying a responsible government office four years after, it is reasonable to infer that the deficiency has been made up, in whole or in great part.

The object in these pages is to arrive at truthful views, if possible; there is no wish to stretch or bend facts. Indefinite statements, mental reservations, omissions of slight things, or substitutions, have done much to pervert truth and to retard the advancement of useful knowledge. I have endeavored to present facts as they are, that they may be reliably used by others hereafter, and perhaps by myself. It is therefore that I have taken occasion to qualify the statements in reference to case 469; and all that I do know of the man is, that within a month of this present writing he was not dead, but was in the exercise of his responsible official duties.

Other cases cured might have been given, much more conclusive than these, but I wished to give an equal number with the preceding class, of such as were consecutive of the kind, within a period of four months.

The prominent points to be noticed in the twelve cases just given are—

1. That when there is but a small deficiency in the measurement of the lungs, it is uniformly restored by appropriate means, persevered in.

2. That when such deficiency is made up, the system returns to good health.

And the great practical lesson to be derived from the two classes of cases is—

That inasmuch as when the deficiency is large, persons usually die within half a year,

That when, on the other hand, the deficiency is small, health is generally regained in a reasonable time;

Therefore, safety consists in detecting the *first decrease* of lung action, and in making prompt and appropriate and sufficient efforts to remove such deficiency; and that this can be done, the class of cases just given demonstrably show. It is very true that it cannot always be done, but it is accomplished with encouraging frequency.

MISTAKEN PATIENTS.

It frequently occurs, that persons coming to me, believe themselves to be consumptive, when such is not the case. In every such instance, the measurement of the lungs indicated their full and healthful action.

B. W., aged 50, Jan. 12, 1844, came to me from a private hospital. His friends did not think he could live. He complained chiefly of pains in the side and breast, yellow expectoration, binding across the breast, a feeling of rawness up and down the breast bone, chilliness, bad sleep, and a constant hack of a cough, pulse eighty-six. It was very evident to me that he had not Consumption, yet he and his immediate friends appeared perfectly certain of it. In a few weeks he got well, not needing any farther medical care. Over seven years after he was in my office, and having a wish to take his lung measurement; they were working fully and well, as they had been doing from the beginning; pulse seventy-two, lungs measure two hundred and sixty-two.

A married lady applied to me, June 3d, 1844, believing herself to be the subject of Consumption; she had pains in the sides, chilliness, flushes, frequent clearing

of the throat, expectoration of a whitish phlegm, occasional palpitation of the heart, burning in feet and face, tightness across the chest, and coldness between the shoulder blades behind, with other minor ailments. At the end of six years she is a strong, healthy, hearty woman, weighing fifteen pounds more than she ever did in her life, her lungs measure to their full standard, and she is in all respects well.

C. W. T. Sept. 30th, 1847. Pulse 120, dry hands, a harsh, jarring cough, has to clear his throat a great deal, numerous large red splotches on its back part, as if the skin were peeled off, steady morning cough, with other symptoms. I informed him that he had nothing like Consumption, and treated him accordingly. Two years later he remained well, was actively engaged in preaching, with his lungs to their fullest healthful standard, and so remained two or three years later. Since lost sight of.

W. H. L. aged 31, applied Nov. 25th, 1847, under the full conviction that he had Consumption, especially as a sister had died of it. He had cold feet, general chilliness, pains in the left side, restless sleep, a troublesome cough at night, a little on getting up in the morning, with expectoration of a darkish matter, high pulse, and had fallen away some ten pounds; there were other ailments. His lungs measured to their full standard. He soon got well, and near four years after, he enjoyed excellent health, his lungs working fully and perfectly.

J. T. aged 22, Feb. 7th, 1848, applied. Having had a hacking cough, and clearing of the throat, with spitting of blood, and pains in the breast. With all these symptoms, his lungs measured to their fullest standard.

Three years later he was an active, healthy man of business.

S. G. R. aged 32, Feb. 16, 1848, complained of shortness of breath, daily chill from 9 to 11 o'clock, great general chilliness, a burning sensation about the breast-bone, pains in the sides, ill feeling between the shoulder blades, a frequent clearing of the throat, with dryness and hurting there, great depression of spirits and nervousness, had been troubled with night-sweats. This was not Consumption. His measurement was fully up to the healthful standard, where it remained four years later, when he was engaged in the active duties of his profession.

A. W. aged 30, March 6th, 1848, pulse 100, morning cough, expectoration of a greenish, ill-smelling stuff, with previous night-sweats, some difficult breathing and troublesome cough. He soon got well, for he had no lung disease, he measured to the full healthy standard, and did so four years later.

Mrs. J. T., March 29, 1848, complained of difficult breathing very often on exercising, palpitation, night sweats previous, bloody expectoration, bad taste in the mouth of mornings, weakness and pain in the small of the back, a frequent burning pain between the shoulder blades behind, and very severe sometimes; very much oppressed at times; pains about the shoulder points; pains about the edge of the ribs, which three seatons, blistering, and cupping, failed to remove; a great deal of "bad feeling" at the pit of the stomach pretty much all the time; good deal of general chilliness, feet cold more or less every day, cold as ice, sometimes restless sleep, palpitation; had fallen off twenty-five pounds; it appeared sometimes as if breathing made the throat feel

raw; she had been four years suffering from these symptoms. The lungs measured full. Her case progressed favorably and readily yielded to treatment. Several years later she continued in good health. Since lost sight of.

It is perhaps not necessary to multiply cases. The point which they are designed to prove is, that however many of the common symptoms of Consumption a man may have, if the lungs measure to the full healthful standard for that man, those symptoms are capable of uniform removal, and restoration to good health is an ordinary event.

My decided opinion of all these cases was, that they were not cases of Consumption; others thought they were, and the inevitable inference is either that my opinion was correct in every case; or if it was not correct, Consumption is a very curable disease, if treated judiciously and promptly, when the common symptoms of its approach first present themselves. It is to secure this, that this book is mainly written. My whole desire is, not to insist that Consumption is curable in its advanced stages, or that it is easily cured in any stage, but that if the symptoms are properly attended to on their first appearance, a perfect and permanent cure is almost as certain as the cure of ordinary diseases.

In 1848 I made a publication of a hundred pages, detailing more at length observations on the lung measurement method, showing its practical bearing; giving statistics, to show the gradual increase of lung measurement in those who recover, and the inevitable death of those who decrease from week to week. The treatment of several cases is also given in detail. But enough copies were not sold to pay for the paper, no

person having been requested or paid to give a review or favorable notice. The whole edition therefore was given away with the exception of a few copies.*

But to show how unreliable all other modes of determining whether a person has Consumption or not, and how important it is that something more certain should be *added*, the following cases are given:

"A person had severe cough for some time, and was treated without benefit by several physicians; on examination it was found that a large amount of "wax" had collected in the ear and become hardened; it was taken out, and speedy recovery followed. A straw, or the end of the finger introduced into the ear, produces an active dry cough."

Common hysteria often produces cough, expectoration and spitting of blood, giving rise to alarming apprehensions of Consumption.

Disease of the liver sometimes occasions cough, expectoration and hectic, and is pronounced with great confidence, to be "Consumption;" when even a superficial examination might have shown the contrary.

Dry cough, pain in the back, and difficulty of breathing, are sometimes caused by hardening of the liver.

"A lady had a cough and loss of voice; and for two years was shut up in the house, for fear of catching cold, and of course got weaker and worse every day. She was made to abandon her room, go out of doors, eat and drink substantial aliment, and with a little simple medicine got well.

"A gentleman had been ill two months, with all the ordinary symptoms of Consumption, such as cough, ex-

* Sent p. p. by the author for one dollar.

pectoration of a yellowish substance with a little blood, night sweats, pain in side, falling away, &c., with hectic fever; but it was active inflammation of the lungs, and was cured accordingly in a few days, but by a very different mode of treatment from what Consumption would have required.

"A young gentleman was condemned by high medical authority to go to the island of Madeira, as "nothing else could save him;" but his business required his personal attention, and besides, he was going to be married. On seeking new advice he was counselled differently, got well in a month, and is now the father of a family.

"Another person had consumptive symptoms; was shut up in a warm room, dieted and physicked, waiting for a vessel to go abroad. A different course was recommended. In ten days his cough disappeared, and at the end of five years had not returned."

Dr. McDonnell, in the Lancet for April, 1844, gives a case which greatly perplexed the Dublin physicians. It had every prominent mark of consumption in its last stage. Its origin, its general symptoms and many of its physical signs were those of true tubercular phthisis. There were present emaciation, purulent expectoration, hectic fever and a blubbering of matter at every breath, at the top of the affected side of the chest, and various other signs, which would at once have led a superficial or ignorant investigator to pronounce it Consumption in its very last and most hopeless form. But a more experienced practitioner confidently declared that it was a very different disease, and treated it accordingly. The subsequent history and perfect cure of the case by means not applicable to Consumption, proved beyond all question, that it was not a case of phthisis. Other cases

might be given, having quick pulse, night sweats, emaciation, and other hectic symptoms, all of which got well as above. Had these cases come under the examination of a common physician, they would have been declared hopeless cases, having no special experience in Consumptive cases, and that the only possible chance of recovery would be to go to the South.

But whatever may have been the indifference manifested some years ago to lung measurement in reference to Consumption, I think that a change is occurring in public medical sentiment. The first instrument ever made in the United States, after the model, was made to my order, but I have never seen one in the office of an American physician, yet they are becoming so common in Great Britain, that their most eminent lecturers, in discoursing on Consumptive disease, give the capacity of a man's lungs for holding air as a matter of course, as much so as giving his pulse, and so will every reader of the standard current British medical publications find it, indicating that a change is taking place as to the points which are hereafter to determine, whether a man has Consumption or not, foreshadowing the comparative disuse of stethescopes, plessimeters and percussion, when the stripping of a man, turning him over and over, striking every inch of his breast, will be considered a useless labor and a useless infliction, when will become obsolete the words Ralé, soufflez, ronchus, sibilant, ægophony, &c.; when a world of professional perspicacity and hair-breadth discrimination, in determining the exact point where disease is located will be spared, for the simple reason, that it never made the slightest practical difference, whether the top or bottom, or side, or interior, or exterior of a lung was affected, the treatment being

——— the same, but rather an injury is done the patient in designating the exact locality of disease, by causing his mind to revert constantly to it, and producing more incessant and unavailing disquietude.

I here give two cases, practically illustrating the new method, which may be termed *Spirometrical Diagnosis*, that is, determining the condition of a consumptive person, by means of measuring the lungs; one showing a gradual increase of lung capacity, ending in permanent health, the other, a constant decrease, terminating in death.

656. W. B., a merchant from Kentucky, aged 33, pulse 96, taking in at a full breath 170 cubic inches of air, instead of 254, that is, one-third of his lungs were useless to him, either because they were hopelessly decayed away, or collapsed, infiltrated with mucus, &c. The instrument which I use for measuring to the fraction of one cubic inch, how much air a man's lungs hold at a full inspiration, does not indicate in any way the cause of inoperative lungs; it only shows the fact that they are inoperative, and the physician must determine by auscultation and other general symptoms, whether the lungs are decayed away or whether they are merely engorged, collapsed, infiltrated or the like; and this is a matter of vital importance, for if they are gone, their restoration is hopeless; if, however, they are within a man, and are merely rendered useless by the latter named class of causes, these causes of inaction may be removed; so that with the instrument which I employ for measuring the capacity of the lungs for common air, a man must be a finished auscultator, and must be most thoroughly acquainted with the whole catalogue of symptoms of diseases to which the human frame is liable. But before I give the opinion rendered in this man's

case, I will detail some of his other prominent symptoms.

He was a tall, spare bachelor, with a white dry tongue, a great deal of pain in the small of the back for the last two years, constant pain in the breast, and frequent ill feeling between the shoulder blades behind; he had a great deal of general chilliness, (and no wonder when he had lost the use of one-third of his lungs,) burning feet and hands in the afternoon, costive bowels, linen generally damp from night sweats, a dry hacking cough night and day, always on getting up in the morning; had spit blood at different times for four years past; at one time he spat up clear red blood every day for three weeks; the cough was his greatest inconvenience. He thinks his ailment was brought on by having had the measles some years ago, they did not come out well. Complains of being always chilly, and looks as if he were almost frozen; he has fallen off, from his best weight, twenty-seven pounds. With these symptoms, I gave him the following opinion:

"Your general constitution is much impaired by long standing disease, and your lungs have suffered much in consequence, so much so, that a large portion of them are useless to you; they are inoperative, inactive, and do not answer the purposes of life. *A part of your lungs have decayed, but that was some time ago;* that decay is not progressing at this time; your lungs are not decaying now; but they are in such a weak condition, that you are liable at any time, by any debilitating sickness, or by a succession of bad colds, to be thrown into a rapid decline. It is my opinion that your lungs can be restored to their full action, and your health placed on a good foundation."

The reader will please notice the words above in italics. After he had read my opinion, he said to me for the first time, that about five years ago he went to the South for his health, and the physicians told him that he was in the last stages of consumption; shortly after a running sore appeared not far from the socket of the thigh bone; he at once began to recover and got well.

When he first came to me, his pulse was 96, and his lung capacity 170; on the 27th of June his pulse was as low as 90, and his capacity 186; on the 24th of August, pulse was 80, and his capacity 230. I have not seen him since, (some six weeks ago,) but I have no doubt I shall find a continued improvement, and a dimunition of six or eight for the pulse, and an increase of 24 cubic inches of lung capacity for air, would restore him to his healthy standard. The reader will here note the correctness of my opinion, not only in telling him that his lungs had been previously diseased; but that he could get well again, notwithstanding night sweats, constant chilliness, and an incessant cough. Not only his pulse and breathing improved, but he had a correspondent increase of strength, flesh and appetite, no sweating, no blood, bowels regular, and he did not complain of cough at all.

On the 21st of June of the following year 1850, thirteen months after I first saw him, he called to see me, not for further advice, but as a kindly remembrance. His condition was satisfactory as detailed in the recapitulation. I have not since heard from him.

Date.	Pulse.	Breathing.	Lung measure.
May 23, '49	96	25	170
June 23, "	90	22	186
Aug. 24, "	80	20	230
June 21, '50	—		242
Healthy condition	72	18	246

The pulse and breathing are left blank in the last examination, because he remained but a few moments, having walked a considerable distance in mid summer up a hill, that is, from the Ohio river to Fourth Street, Cincinnati.

The pulse beating and lung measurement, designated "healthy condition," are such as would be healthy in a man of his temperament, age, height, weight, habits.

A. M. Y. 349, tall, slim man, dark hair and skin, aged 32, applied for advice August 16, complaining of pain between the shoulder blades behind, weak breast, hectic fever in the afternoon; spits up several spoonfuls of yellow matter every day, costive, bad cough, unrefresh ing sleep, constant pain in the breast, with other minor ailments.

Date.	Pulse.	Breathing.	Lung Measurement.
August 14	100	18	168
October 15	90	17	184
October 23	80	14	192
Dec. 8	112	22	160
December 24 Died.			

It will be perceived that up to October 23, there was a steady, gradual, admirable improvement, and he felt that he was getting well. Being a very close man, he thought he would obtain such remedies as I thought he would require, and dispense with the cost of advice. I did not see him again until December 8, a period of near seven weeks, during which time he had exposed himself a great deal on the wharf, in the mud and rain, and had injured himself by over-exertion. He applied to an eminent surgeon, but not getting better, and becoming alarmed, he called upon me again, and made the statement just given December 8, but he had too far receded

and died in sixteen days. It is interesting to notice the steady improvement towards health in the pulse, breathing, and lung measure, and the subsequent receding to death in the same person.

The error in this case was the patient's, in not remaining under the physician's care as long as he continued to improve, and until every remnant of disease was eradicated. An equally fatal error is sometimes made in having an over confidence in one's own opinion, on subjects not in their own line of life. This occurs most frequently in persons in authority, who are accustomed to dictate to others, and when needing counsel or aid have to depend on themselves, and having acquired such a habit of self-reliance in their own proper sphere, they find it difficult, out of that sphere, to throw that staff away, and be led submissively by another; this is particularly true of clergymen, lawyers, masters of steamers, ships, boats, &c.

AN ILLUSTRATION.

A very popular clergyman, on the point of being laid aside from a painful and threatening affection of the throat, wrote to me for my advice and bill therefor. I prepared such directions as his case seemed to require, and that was the last of it. Not feeling satisfied, I wrote at the end of six weeks to know if my instructions had been received, and to what extent they had been observed. The following is an extract from the answer received:

"My Dear Sir,—

"I received your first letter in due time, and will very frankly inform you why I have not written to you as in your written instructions you requested. I have not

adopted your recommendations. So far from intending any disrespect for you in so doing, I can safely say, that I would not have followed such recommendations from any physician in the United States; and lest you fancy that I esteem you less than any other physician, I can truly say that I was pleased with your printed remarks, thought them written with spirit and talent, and according to my judgment, with a great deal of truth. Why then not follow the prescription? 1st, because I was perfectly satisfied that under your system of dieting, I would rapidly lose strength and flesh, and spirits, and (therefore) never practiced your rules; 2d, your (recommendations) after meals, I tried twenty-five years ago, and several times since, and never will try again; 3d, I never swallow pills, unless driven to extemity, and cannot take pills for a chronic disease, for anybody; 4th, I have effectually tried what I consider a splendid remedy for an acute affection of the throat, but found it ineffectual for a chronic case. I have tried your other suggestions, and after two weeks omitted them, to see if they made any difference, and resorted to them again. I think they are good, and will continue to employ them. One strengthens my breast and enables me to dispense with a Burgundy Pitch Plaster, which I have used for years; it is to me a valuable remedy, and for which I feel greatly obliged to you, and also for the gargle recommended. ———— It is proper that I should tell you that I employ no physician in my own case, but whenever I am sick, I manage my own case, and have done so for twenty years. Hence, I took upon myself to reject your prescription, without calling in any other physician.

"Permit me to say to you, that the two prescriptions

named, will amply repay me for the trouble of seeking your assistance."

This is designed to be a practical book, hence I comment on the above letter.

It is putting the physician to a considerable and unrequited trouble, to send for advice, unless there be an honorable determination to follow it, as long as it does not do an appreciable injury, and for a reasonable time.

No physician who properly respects himself, will give advice to any man, or for any compensation, who reserves to himself the right to decide upon its propriety and observance; the application itself implies a total relinquishment of private judgment, and a promise of attention to the instructions given.

On looking over the letter again, it will be seen that what he did do was of special service to him.

That of some other things advised, he *thought* no good would result, and therefore declined them.

The after meal preparation was to be taken in connection with the pill, and his taking it alone years before without benefit, was no sufficient reason for their not being of service when taken in conjunction.

The same in reference to the "splendid remedy" for the throat. I directed him to use it *in connection* with the liniment, of which he had never heard before, and for which he expresses special thanks twice, that is, one was unavailing formerly, therefore both would not effect anything.

In another part of the letter, not quoted, he says the gargle was a good palliative, but would not be a permanent cure, when he had only used it two weeks, and that with such advantage as to cause him to express his obligation for the recipe *twice*. It could not be supposed

that a throat affection could be removed in two weeks, which had been existing for years; and that it should have given some alleviation after being used so short a time, in such a case, ought to have been at least presumptive evidence of increased benefit, from its continued employment.

I advised him to take *four* pills, *one a week*, but this he could not do, because he did not take pills, until the last extremity.

He thought that by the diet allowed him, he would lose flesh and strength. I allowed a cup of weak tea, or coffee, or chocolate, at each meal, with butter, and a pound of a particular kind of bread a day, for five days, and then to add some beef for dinner until further notice. In the passage of the Cuban prisoners to Spain in 1851, one of them states, "we esteemed it a broad grin of good fortune, if we realized seven spoonfuls of beans for dinner, and half a pint of bread soup or mash for supper; two such strokes of good luck rarely came together," this was perhaps in addition to the "buggy biscuit which, with incredible exactness was portioned out, each pile, to a crumb, the prototype of its neighbor, and as nicely apportioned, as if the scales of the bank of England had been employed in weighing it." And yet, after a long voyage, in a crowded vessel, they reached their destination in safety, not a death on the passage nor special sickness, except that of the sea.

One pound of wheat a day, will feed a man well, yet with a pound of bread a day, besides tea, and coffee, and butter, this man thought he would lose flesh and strength. A person in ordinary business should have one and a half pounds of solid food a day; sedentary persons one-third less, that is, one pound. Captain Perry

in his account of one of the Polar expeditions, states that experience satisfied him that the following daily allowance, was quite enough to support his crew *on ship-board*, that is, while performing the ordinary or regular ship duties. Ten ounces of biscuit, one once of cocoa powder, and nine ounces of beef pemmican, that is, beef sliced thin, smoked over wood, pounded, and then an equal quantity of its own fat mixed with it, making twenty ounces in all, and that for working men, in the coldest climate in the world. It is true they had in addition a gill of rum, and half an ounce of tobacco a day, but this so far from adding to their strength, decreased it, for in reference to it, Sir John Ross, in his "Arctic Expedition," says, "When men under hard and steady labor, are given their usual allowance; viz., a draught of grog, or a dram, they become languid and faint, losing their strength in reality, while they attribute that, to the continuance of their fatiguing exertions. He who will make the corresponding experiments on two equal boat's crews, rowing in a heavy sea, will soon be convinced that the water drinkers will far out-do the others."

Two pounds of solid food, or twenty-four ounces a day is allowed in Great Britain to healthy, able bodied paupers, who are made to work; if they do not work, sixteen ounces, if in good health; and yet we have an intelligent man *imagining* that he would lose flesh and strength, if confined to twelve ounces a day, for five days, with some meat thereafter for dinner, and he an invalid. "We need not fear that ten ounces of solid food a day is too little," says Dr. G. K. Chambers, in one of the Gulstonian Lectures, delivered in London in 1850, "for here is a gentleman who confined himself to this quantity for a long period, and found his mental

and bodily powers always equal to the strain, which the pursuit of a laborious profession in London demands."

When Washington and his army were encamped at Morristown, New Jersey, in mid-winter at "the Orchard," his troops were served with one gill, a fourth of a pint of wheat a day. After they had borne it for some time, he went among the soldiers, and was so deeply moved at witnessing their privations, he exclaimed with the greatest kindness of manner,

"Men! can you bear it?"

"Yes, General, and if you want us to do anything, we are ready."

These things show how much less food men can subsist upon, than most persons imagine. There can scarcely be a doubt, that we, as a people, would live longer, be happier, would have better health, greater strength, and more robustness of constitution, if we consumed at least one-third less of food and drink at each meal than we do, provided we ate nothing between meals, and took but three a day. The soldiers above-named, may have been able, now and then to obtain something additional, but all their certain reliance from the public stores, was a measured gill of wheat a day. I speak of this the more at length purposely, to have an opportunity of impressing on the mind of the reader, especially if he should afterwards come under my care, a most important practical fact, perverted every day, every day confirming disease in multitudes, and making countless others invalids, who would have returned to health from the simple influence of the recuperative powers of the system, had the error been avoided. The supposition is, when a person feels unwell he *must eat something*, whether he

feels like it or not, *to give him some strength.* And therefore the more he eats the more will he be strengthened as he supposes. The brutes, governed by their low instincts, do not eat, when sick, or excited, and yet they get well. An invalid is just as much indisposed to eat as a person in health, the moment after sudden alarm, or in half an hour after a usual meal, and firmly resists all solicitations to do so, and perhaps turns away with a secret feeling of loathing, and yet this species of martyrdom are invalids constantly called to suffer by mistaken kindness.

But the great fact is the general law of our being, that the sensation of hunger is proportioned to the wants of the body. When there is no hunger, there is no want. And if under such circumstances food is introduced into the stomach, there is nothing there to receive it, it remains a labor and a load, to oppress and to irritate, and in proportion debilitates. If any sustenance is derived from it, it is imperfectly eliminated, because it has not been done *with a will*, and being imperfect, it is thrown into the blood, and renders imperfect and impure the whole mass.

Another important fact is, that the amount of strength derived from food, is not in proportion to the quantity eaten, but in proportion to the amount that is perfectly digested. Therefore when the stomach is feeble, it will derive more nourishment, and more strength from a small amount of food than from a larger amount, for there may be enough of the digestive juices to digest perfectly a small amount, but if a larger quantity is added, it may indeed work up the whole, but it will be an imperfect work. The hopper will grind well, a moderate amount of wheat, and it will be good flour, but if the hopper be crowded, choked,

it may still grind, but *the whole* will be a bad article of flour. A man may do a moderate amount of work well, but if you give him too much to do, it may all be done, but it *will all* be done ill. Thus, if an invalid wishes his food to strengthen him, he must in the first place eat less than a hale, hearty, workman requires, that is, twenty-four ounces; he must eat less than a healthy, sedentary man requires, that is, sixteen ounces; and if while sick, and doing nothing, he consumes as much food as a healthy man, who does nothing, and expects to gain strength, and regain health, he will be a disappointed man to the end of life, and merits that disappointment well, for reason has been wisely and beneficently given us, and it is criminal not to employ it.

"Whenever I am sick, I manage my own case, and have done so for twenty years." I happened to be acquainted with this gentleman's history, without his knowledge, for this same twenty years and more; and it may be interesting to the reader to know, that during that long period, he had never seen a well day. And with great uniformity, will it be thus with those who are their own physicians. And it is precisely for the reason that he will be his own physician, that he will remain an invalid until a premature grave shuts him from the world. The number of persons who "doctor themselves to death," is saddening to contemplate. To live on physic, is the weakness of the age. None but a practising physician, especially in cities and large towns, can have any adequate conception of the extent to which it obtains. To a humane practitioner, it is a melancholy reflection; the constitutions ruined by unwise tamperings; the lives lost by fatal delays from the use of inert or deceitful remedies! Pecuniarily, it is an advantage to the prac-

titioner, for when the constitution is blasted, the body bed-ridden, when *every thing* has been taken, haphazard, and increasing pain and suffering compel a different course, the scientific practitioner is called in, and a case, which a single visit or prescription might have cured at first, now requires an attendance of weeks, perhaps months, with a proportional bill in the end.

It is the custom not to call in a physician for what is supposed a slight ailment, for fear of having to take *strong medicine*, as it is called, and yet, the same person will purchase bottle after bottle, the constituents of which he is utterly ignorant, and take it for weeks and months together, not knowing that nearly every article, sold as a patent medicine for coughs, colds, and consumption, contains opium, arsenic or prussic acid, while the physician's prescription could be known by asking the druggist who prepares it. These are suggestions for the thoughtful reader. I hope they will not be altogether unavailing, and that here and there one may be found, who will, when he is complaining, take advice from his family physician, and *follow it*, and never take an atom of the *simplest* thing in existence, without that advice; and it is certain, that by this course, many a good constitution will be preserved good, and many a useful life will be saved to society.

In the next case, 636, is another illustration of the effects of a patient following the dictates of his own judgment.

Capt. B. came to me on the fifteenth of March for an opinion of his case; his lungs should have contained two hundred and forty-six cubic inches of air, whereas they contained but one hundred and ninety-two, with a weak pulse of one hundred and a respiration of thirty to the

minute. I told him that he had true consumption, that his lungs were in a state of decay, and if not arrested, he would certainly die within a few months. He called on the twenty-second and said that he had been conversing with an old friend now in good health, an old associate of his, for whom he had a very high respect; he had at one time been very ill, as all supposed, with consumption; however, by the use of medicinal remedies he recovered. In detailing his symptoms, the Captain thought that they bore a remarkable similarity to his own, and became fully possessed with the idea that his, also, was a liver affection, and that a course of blue mass would cure him. I represented to him that he was mistaken, and as an inducement, offered to give him advice and remedies without charge; but he declined them, saying he would follow his own course, and if he did not get better, he would call and see me in two months, as he was compelled to go to Pittsburgh.

In my notes of the case, I find the following remarks.

Thursday, March 22d.—This case has not confidence in the treatment proposed.

2. He will die this summer, or, at least, before next winter, first,

3. Because he believes it is his liver solely, and will act accordingly.

4. He will die, because he consumes an amount of air one-fifth less than he ought to have at each full inspiration. His pulse is still one hundred, his cough I consider a terrible one, and there is an alarming thinness of flesh.

I never saw him afterwards; he died on the twenty-fifth of June following.

There is another item in this case worthy of remark. When he came into my office on the fifteenth of March, he was weak and emaciated, and coughed badly; he had a severe pain in the right side, no sleep, no appetite, tongue dry and rough; he had an exhausted and haggard expression of countenance, and was greatly dispirited. With some minor directions, I gave him to take at bed-time a small alterative pill. He returned in two days, saying, as he entered the door, "I could not have believed that so great a change could have taken place in so short a time." He continued to improve for the week he was under my care, and the action of his lungs had regained one-seventh of their deficiency.—His cough had diminished, slept well, without any kind of anodyne, appetite good, and in other respects was doing well. But in spite of all this improvement, and his own acknowledgment, he became possessed of an unfortunate idea, that the liver and not the lungs, was at fault, and perished, the victim of a mistaken opinion. Perhaps the two illustrations given will show the danger of any uneducated person taking his case in his own hands; of relying upon his own judgment, and experimenting accordingly, and yet it is often done with results not less disastrous to health and life than those occurring to Capt. B—.

Persons who apply to a physician for advice, should first be prepared to yield implicit submission to his judgment in all respects, and throw upon him the responsibility. With any thing short of that confidence, it is far better to remain at home.

In order to let the reader see how beautifully, as I think, the system of lung measurement diagnosis operates I will give a case illustrating this point: that persons under

treatment for Consumption, who measure less air than they ought to do, fast pulse, fast breathing, &c., provided their cases are curable, do, from time to time, measure more air, the pulse falls, the breathing is less rapid, the strength improves and flesh increases.

August 2*d.*—A tall, spare, raw-boned man, six feet one inch high, with black hair and eyes, aged forty-nine, weighed once 180 pounds, now 135, only. "I caught cold," said he, "two years ago by getting wet, it settled on the breast; was in excellent health until that time; have taken a great quantity of patent medicines since, but have got steadily worse; I now sometimes spit up in a day half a pint of thin, pure, yellow, ragged matter; I cough a great deal, sometimes two hours before I go to sleep, then I wake up about midnight and have another spell of coughing, and another as soon as I get up and stir about a little."

He was greatly dejected, had three spells of spitting of blood within two years, mixed with matter; his cough was most distressing, coming on about every two hours during the night, so that when he gets up in the morning he feels weak, exhausted, and wretched. I fear that too many of my readers can fully appreciate the meaning of his statement by sad experience. The opinion I gave is as follows, verbatim. "You have Consumption. One-tenth of the lungs have decayed away, therefore you can never get entirely well again. No medicine known to me will do you any good, but an injury; anything that will speedily stop your cough will kill you before spring; except by accident, you will not die soon, but by proper exercise, avoidance of fatigue, &c., you may live for years to come."

I gave him the usual advice, and in a week or ten days he returned, to all appearance worse than he was before, more feeble; he now could not sleep at all, except by snatches of a few minutes at a time; he said he could hear the clock strike every hour of the night, and that toward morning he was drenched with sweat. He insisted upon it, that without speedy and very marked relief he would soon die; that he could not stand it; he could get no sleep; his fits of coughing were so frequent and so long continued, that when they were over he sank down perfectly exhausted; they left him feeling as if he would rather die than continue in such a horrible state of endurance.

I told this man that I saw nothing to change my views of his case, that he certainly was not going to die, and that all that was required in addition to what he was already doing, was to go home, and at bed time every night follow closely the additional directions which I gave him. I gave such instructions in addition as would keep him from taking cold. He said he was afraid it would injure him; yet he was willing to try anything that would do him any good.

In a week he returned. He said the first morning after using the means advised, his inner garment, by the exhalations from his body, smelled so badly, that he was obliged to fling it away from him; this odor gradually diminished, and finally disappeared. He could sleep some, and his cough was not so bad.

At the end of two months, viz. Oct. 4, I find the following entry: "Walked four miles this morning, and feel stronger and better than when I first started; appetite good, strength keeps gaining, bowels regular; my disease has changed, I cough only by spells, and do not

cough much at night; when I cough and spit up freely in the day-time. The tickling and soreness at the little hollow place at the bottom of the neck in front is not so bad now, and when I sleep it does me good; breast is well enough now; sometimes I do not cough once in half a day. As his bowels, sleep, appetite, were all good, no sweating, almost no cough, all soreness around the middle from coughing and straining had disappeared, was getting stronger, and gaining flesh every day, he wanted to know if he needed any farther attendance."

August 2—32 respirations in a minute.
Sept. 26—28 " "
Oct. 15—20 " "

This case is to show, that as a man gets well of an affection of the lungs, the breathing becomes slower and slower, until it gets down to the natural standard, which is generally from 16 to 20 in a minute.

This person was living two years later, as I was informed. It will be perceived, that when he ceased to be under my care, he still had some cough and expectoration, and he will continue to do so, for the following reason. The disease was arrested, but the cavity in the lungs remained; but nature had thrown out a lining membrane all around this cavity, which, while it effectually prevented farther injury to the lungs, would naturally throw out a substance similar to what is thrown out in healthy cavities, the back part of the mouth for example, to lubricate the parts, and when it has answered its purpose, it is ejected, as common saliva is, but that which comes from a cavity is of greater consistence. When a cavity is small, it gradually closes up, when all

expectoration and cough cease. But when it is too large to admit of closure, it will continue to pour out more or less of a secretion during life, as an old sore on the outside of the body, the leg, for example, will do.

There is one other point in this case which I wish particularly to mention. It will afford unmixed satisfaction to persons applying hereafter, who have lost a portion of their lungs, and the decay still progressing.

Date.	Healthy measure.	Actual measure.
Aug. 2,	270	244
Sept. 10,	"	224
Sept. 26,	"	208
Oct. 4,	"	200
Oct. 15,	"	230

In this case there was a constant decrease in his lung measurement for two months after he applied to me, and this was one cause of his discouragement, yet there were other symptoms present, which enabled me to speak encouragingly and confidently to him, and as the result showed, truthfully. When the measurement reached the lowest figure, it began to increase. The reason of it is this. When he first came, the lungs had not only decayed, were decaying, and a portion of them were too far gone to have the decay arrested as to them, and they also finally gave way; but when this had taken place, the remainder of the lungs not only continued to work well, but by training were made to do more than their natural share of labor, as has been stated already in page 101. And although at the highest point of improvement he lacked nearly one-sixth of his full measurement, yet having a natural pulse, and natural breathing, he was living several years after, in the enjoy-

ment of reasonable health, proving the literal truths of the written opinion I gave him.

With results like these, being aided by the lung measurement method of conducting the cases under my care, I think I will be excused when I express a high estimate of its value. It relieves the physician from the most annoying uncertainty. Improvement, substantial improvement, is not a matter of conjecture, of judgment, but of actual measurement; on the other hand, the patient need not be led by deceitful ameliorations; if the measurement steadily decreases, with unfavorable pulse and breathing, he may know that he is going to the grave, however well he may feel. And then again, there is another point, already referred to, but repeated here, from a conviction of its high value. ☞ When it is known, *as it is in all cases*, how much a man's lungs should measure, were they in perfectly healthful operation, in full working order, if he applies to me for a thousand ailments, and on measuring him I find that he reaches the full healthful standard, I know that he cannot have consumptive disease, nor anything like it, whatever else he may have.

ILLUSTRATION.

W. H. L. applied to me with various ailments, the more alarming to him, as his sister had died of Consumption some time before. On examination, his measure was full, and with a corresponding pulse and breathing, I felt authorized to give him the fullest assurance of the perfect integrity of his lungs. Being a man of liberal education, I was at some pains to explain to him the grounds of my opinion, which proved most convincingly satisfactory to him: HE FELT *that what was told*

him must be true, and in expressing his gratification in a letter afterwards, he said, "you cannot imagine the load that was taken off my mind on leaving your office; I felt pleased with every body; I felt as if I were in love with all mankind, and in my gladness, came near running over half a dozen people in the street before reaching my hotel." And at the end of four years there is scarcely a healthier man in a thousand; in every respect healthy. This I know from his having continued to make me a yearly visit from old associations.

E. R. E. 877. Applied to me in considerable alarm, from several suspicious symptoms, among which were gradual weakness and decline of flesh. He was not satisfied with my assurances of the perfect soundness of his lungs, as they exceeded the natural standard, but insisted from day to day, on repeated examinations. I refused to give him any medicine whatever, and with great misgivings he reluctantly turned his face homewards. I gave him some few directions as to his general health, which, he wrote me the next year, "was entirely restored; was in every respect well."

It cannot be necessary to give farther illustrations, and I accord fully with the sentiment expressed by Samuel Hare, M. R. C. S. E., of London, in his medical reports for 1847, having employed this means of diagnosis "for several years, the value of which I am constantly witnessing." See London Lancet, vol. 10, p. 38, for Nov., 1847. Since this date, this new means of diagnosing; viz., of determining the existence of Consumption, became more and more common with European physicians, until its indications are given as a matter of course, without explanation, as if every medical reader was expected to understand it. See Theophilus Thompson, F.

R. S., &c., Physician to the London Hospital for diseases of the chest, reported in Braithwaithe, for January, 1852. "W. G. age 42, pulse 84, respirations 28, height five feet two and a half inches, vital capacity 140."

It will be seen by some extracts below:

1st. The presence of "pus" in the expectoration, is *no evidence* of the existence of Consumption.

2d. That the inspection and measurement of the chest is not a reliable means for determining incipient Consumption.

3d. That auscultation, nor stethescopy, nor any other means, can be depended on in any given case for determining whether Consumption exists or not, whether or not the lungs are in a state of decay.

These things being true, we bring the new method to our aid, with increasing satisfaction, premising however, that no one should be so thoughtless as to rely exclusively on any one, or two, or three symptoms in making up his mind as to the presence of Consumption in any case.

"It is now known that the old supposition, that the presence of pus in the expectoration indicates the existence of Consumption is *totally incorrect*, as it may be present in bronchitis and yet absent in Consumption." *Ed. Braith., Ret. p.* 78, *part* 24, 1852.

"From the preceding observations, I think it must be evident that inspection and mensuration of the chest, (viz., taking the girth,) can seldom afford assistance in determining incipient Consumption." *London J. Med. July*, 1851, *p.* 616. *R. P. Cotton.*

"I do not believe that in the present state of our knowledge we have any means of deciding positively, *in many instances*, between Consumption and dilated bron-

chial tubes." *Dr. Bennett, of St. Thomas's Hospital, London.* 1850.

That all other means are insufficient in determining correctly as to the existence of Consumption, I will give a case reported in the London Lancet for May, 1850, p. 460. It occurred in 1828, the physician who was the reporter, was also the subject. "I expectorated a considerable quantity of pus, had constant, harassing, distressing cough, spitting blood, night sweats; and all the train of Consumptive symptoms were existing, and there was every appearance of a fatal termination. Dr. Hope, Dr. Wilson Philip, Dr. Maton, Dr. Ramadge, Dr. Thomas Davies, all considered the case hopeless." And yet this gentleman recovered, "and has continued *in perfect health ever since;*" viz., from 1828 to 1850, a period of twenty-two years. This very interesting case proves several important points.

1st. That all the means known to men among the most eminent in the medical profession in 1828, were not sufficient to enable them to form a correct opinion, or,

2d. That a man may be in the hopeless stages of Consumption and yet recover, and be in good health twenty years afterwards.

3d. That however *hopeless* a man may appear to be in Consumption, steady, unwavering, hopeful efforts should be made for his restoration to the last day of his existence, although every one may consider it a hopeless case, and may think aloud that the physician knows but little, who persists in his efforts to save one so evidently near his end.

4th. That all the old means of deciding being thus evidently insufficient, the new method at least merits a thorough examination, as it professes to do more towards

supplying the want than all other physical means together. And when it is known that an eminent professor has lectured approvingly on the subject, there is hope of its ultimate adoption in this country, his name carrying with it an authority, not exceeded by that of any other physician in the United States.

With the advantages then which spirometry gives in detecting the early onset of consumptive disease:

With my opinion as to the uniformity with which Consumption can be permanently cured in its first stages:

With the idea that Consumption must be treated as a constitutional, and not a local disease:

With the belief, that a cool and not a warm climate is better adapted to restoration from the ravages of Consumption in any and every stage:

With the sentiment that cough is a curative process, and should not be repressed, as all opiates, anodynes, and patent medicines do, but should only be reached by *eradicating* the cause of cough, in using authorized means for building up the general health, such as the principles of scientific medicine indicate, principles advocated and practised upon by Hunter, Abernethy, Rush, Physic, and Hossack, of honored memory, and which the educated physician will fully understand at once without further designation:

With the conviction that cod liver oil has no general applicability in consumptive disease, being injurious to some, impracticable to others, and inefficient as to a third class of patients, as its stoutest advocates, its warmest admirers allow, that in no case has it any directly curative effect, being applicable mainly, if not ex-

clusively to persons who are quite young, or to those who when well, were inclined to be corpulent, to be "fat:"

With the proofs that statistics afford, that a sea or lake shore, or a prairie locality, aggravate Consumption:

With strong practical evidence that sea voyages, unless continued for many months, far from shore, from "land cough" influences, are unfavorable in their influences upon Phthisical disease:

With these sentiments in reference to the nature of Consumption, adverse to the generally received opinions on the subject—what are the successes in the treatment, which after all is the highest proof of their correctness?

I will, in addition to those already given in these pages for the purpose of illustrating particular points, give two classes of cases, a *few only* of each, and I trust they will be conclusive as to the following points.

First, showing with what uniformity persons are cured, and remain so after the expiration of years, who had the symptoms which usually attend the beginning of consumptive disease, and which are uniformly complained of by persons dying with Consumption, as the first symptoms which attracted their attention.

Second, showing that persons, who to all appearance, and from the best means in our power for ascertaining the fact, give us reason to believe that they have Consumption in its advanced stages, do sometimes recover under a practice which the principles advocated in this book indicate, and for years after remain in reasonable good health.

Examples of cases cured, having the usual symptoms of threatened or beginning Consumption, such as cough, pains in the breast, falling away, shortness of breath.

Miss M. E., Oct. 4th, 1843, pulse 90, pains in the small of the back, between the shoulder blades behind and through the breast; cold feet and hands; taken with a slight cough from exposure to cold twelve months before; chilliness, with white and frothy expectoration. She recovered her health in a short time, married, and was alive and well, the mother of a family of children eight years afterwards as her husband informed me at my office in New York, at a subsequent date.

W. S., aged 30, pulse 100, weakness and pain in small of back; soreness between the shoulders all the time; pain in the breast in front; pains in both sides; breast feels cold and chilly all over; great deal of general chilliness; expectorates a dark yellow matter; severe night sweats; great deal of palpitation, poor appetite; sleep very restless; friends much alarmed. He recovered, married, and was the father of a family, and well in 1846, since when I have heard nothing.

T. B., aged 20, October 23d, 1843, pulse 83; bad taste, pain in head and both sides; bad appetite, constant expectoration; principal symptoms cough, with gradual weakness and wasting. He recovered and was alive and well four years later, since when I have heard nothing.

E. D., aged 20, Oct. 26, 1843, pulse 85, bitter taste, pain in head, small of back, hands and feet generally cold, costive; cough very troublesome and dry; expectoration streaked with blood; was taken eight months be-

fore with a bad cold; slim form, dark hair and eyes. She married, and was well six years later.

N. M., aged 30, Nov. 7th, 1843, merchant, pulse 96, bad taste, dry tongue; pain in head and small of back; and sometimes so much pain between the shoulder blades, as to prevent sleeping, pains along the breast-bone, and wheezing in breathing; flying pains in both sides; difficult breathing in ascents; expectorated a tough phlegm; linen made wet with sweating at night; was taken seven months before with a very bad cold and cough, by exposure to a variable atmosphere and an open window; his chief complaint was shortness of breathing; he recovered his health, which remained good eight years later.

M. J. W., aged 20, Nov. 10th, 1843, pulse 84, bad taste, tongue white and very dry of mornings; pains in the shoulders and both sides, soreness between the shoulders, tolerably constant for six years; frequent attacks of something like water brash; chills run along the back; general chilliness; heat in hands sometimes, mostly in right cheek; very troublesome cough; blood expectorated several times; tough, whitish expectoration, hard to come off until moving about freely; was taken with pain in the right side, from being overheated six years before; father, uncle and mother's relatives had died of Consumption; tall, dark hair, black eyes. She regained her health, married, became the mother of a family; and at the end of eight years was alive and well.

N. F., aged 22, Nov. 20th, 1843; bad taste; headache; pain in the side; great deal of general chilliness; feet often cold; difficult breathing; troublesome cough after lying down three or four hours; hard at night, not

so easy as in the day time; expectorated a yellow stuff with white frothy, bubbly substance. He regained his health, and August 12th, 1848, pulse 72. Measured 300, and weighed 150 lbs.

The above are cases taken from my note book in the fall of 1843, consecutive, of their kind, and from the fact of their being in good health some years later, it is evident that the good derived from the treatment was permanent. They are not given as cases cured of Consumption, but to show that persons who have the general, prominent features of Consumption, do readily get well and remain well for five, six, eight years after; and the fair presumption is that,

The same principles of treatment applied to persons having similar symptoms, will obtain equally gratifying results.

Other like cases have occurred every year since, but these are considered sufficient to establish the principle, that the ordinary symptoms of beginning Consumption, are permanently removable when promptly attended to.

SECOND CLASS OF CASES.

Believing themselves, supposed by their friends and attending physicians, and to all appearance seeming, to be in the advanced stages of Consumption, WHO YET RECOVERED, AND, SEVERAL YEARS AFTERWARDS WERE TO ALL APPEARANCE IN GOOD HEALTH.

I. N. J. October 13th, 1843, aged 26, having a wife and one child. He was building a bridge at Louisville, Kentucky, was very much exposed to wind and water, and took a bad cold, which lingering some time, he called in a physician, who prescribed for several months,

and the patient still getting weaker and worse, he advised him to return to his family, that he was in Consumption and he could not do anything for him. He did so, and two neighboring physicians were called in, one of whom had practised medicine in Pittsburgh for *thirty years.* After treating his case for several months without any apparent benefit, the man in the meantime having got so weak that he was only able to sit up in an arm chair while the bed was made up, they abandoned it as hopeless, and I was sent for.

On entering the room I found a number of the neighbors present, the wife weeping by his side, the patient himself was asleep, lying on his back, his mouth open, his eyes half closed, showing the whites; the face was very pale except some redness in the cheeks. He woke up with a wildness of expression in his eyes, and for a while spoke incoherently. His pulse was ninety-five, his breathing short and rapid, bad taste in the mouth, pains between the shoulder blades behind, along the breast bone, through the breast and at the pit of the stomach, some little pain in the side, headache, bowels costive, great nervousness with difficult breathing, cough very troublesome, exciting nausea and vomiting; had frequent night sweats and spitting of blood a year ago, had great weakness and was much emaciated, had a daily morning chill and a craving appetite. He was taken two years before with weakness and spitting of blood, occasioned by lifting and hard work in making bridges.

Having left a prescription with the family, I heard nothing of this man for four days, not knowing whether he was living. His physician having stated he would give me a thousand dollars if I would raise him up, I had some desire to succeed.

On the fourth day I received a note, saying: "night sweats gone, feel very well this morning, pulse ninety; am walking about." Whether this was written by himself or by his direction, I do not now recollect.

On the fifteenth day from the time I first saw him he rode to my office, four miles, and returned without any inconvenience.

At a later date he sent me word that he believed he had caught cold by loading a wagon with corn in the corn-field; this was about the first of November. He continued to improve, and was dismissed. The next summer he called to see me, having gained in flesh some fifty pounds.

In July, 1847, this patient reported himself at my office, and appeared to be in every respect a well man. He was on his way to the South, where I believe he afterwards died of yellow fever. The treatment of this case was published several years ago in the book previously referred to.

The same principles of treatment were equally efficient in a case of a more recent date.

517. June 10th, R. B., aged 28; merchant, six feet high, wanting half an inch, slender made, had weighed one hundred and sixty pounds, now weighed one hundred and eighteen, pulse 100 in a minute, had a constant pain in the breast, could not cough without pain; he was very sorely afflicted with piles, exhausting night sweats, great weakness, jaws were flat, thin, and sunken, the eyes were large, round, and blue; thin, lank, light hair; he would stagger out of my office with sheer debility; he was a Scotchman; I never knew a man of more honorable bearing; he was possessed of singular mildness of character; under the most acute suffering,

when calamity was piled upon calamity, he seemed to have increasing acquiescence in the Almighty's will, and yet was resolute in his endeavors for a restoration to health. His night sweats became perfectly drenching, and nothing could control them. There seemed to be a large collection of matter in the hinder part of the lungs, and the accumulation became so great at length, that the pain was almost insupportable day and night. The piles were so bad as to prevent his sitting down without pain, and for the same reason the pain in his breast would not allow him to lie down in any natural position: his lungs contained 172 cubic inches of air instead of 258, and altogether the case was discouragingly hopeless. I told him that it was essential to his safety to get clear of the large accumulation of matter in the lungs, and that I knew no way of accomplishing that but by increasing his cough, in the hope that it would enable him to throw it up freely. As most consumptive persons are inclined to cough more in some positions than in others, I directed him to observe what position in his case inclined him to cough most, and to maintain that position for a great part of the time; but this did not avail; fomentations of strong liniment, the skin rubbed and cloths saturated in hartshorn and alcohol bound on the parts seemed to do no good, while the daily accumulations were going on; he could get no rest at night; I was afraid for his mind, as want of sleep is a frequent cause of insanity. As a last resort, I administered, freely, quinine and elixir vitriol to have a constringing effect on the system. I was induced to do this, from having persons tell me after taking it for several days, that their cough was worse. I took means at the same time for relieving the piles; his strength improved

a little, and the pain decreased from freer expectoration. It was now the middle of July, and the city was insufferably hot and dusty, and although he was scarce able to walk across the street without great fatigue, I advised him to go at once to Canada, believing that a fresher, purer, and cooler air at a country residence would do him more good that all the medicine. I told him I thought he would die if he remained in the city—and although his recovery was extremely doubtful under any circumstances, I believed that such a change of locality presented the highest probability of recovery. He did not think he would be able to reach the lakes, but undertook the journey. He reached the Falls of Niagara in safety; but on his arrival a horse fractured one of his leg bones by a kick; and to show his own views of his condition, I here give a few words from a letter dated July 23: "I hope to spend the few days I shall linger out here, in making a perfect preparation for that place where our state is irreversibly and forever fixed."

Six months afterwards, I met a gentleman in New Orleans, in crossing a street, and thinking him the brother of this patient, I stopped him to inquire, although he was walking rapidly; but it was my patient himself, just returned in a ship from New York. He had no symptoms of any disease, and seemed in every respect well, his lungs having nearly regained their natural capacity: they never could do that altogether, unless by long training, because they had in part decayed away.

In all my practice, I never had a more remarkable case of recovery than this; by the mercantile house in New Orleans through which he was introduced to me it was regarded and spoken of as "almost miraculous." As far as I know, he remains well to this day. He cor

responded with me while he was in Canada, and kept up rigorously, the directions given him.

In reference to the fears which consumptives have of going out of doors, and their imagined inability to take exercise, the Author gives, as a confirmation of his views, an extract from a letter, written by this gentleman, a few days after he left; the reader bearing in mind, that he himself feared he would not reach Canada, by rail-road.

"I take the liberty of informing you how I got along since leaving Cincinnati. I am happy to say, that notwithstanding the fatigue I experienced during the journey, having had to sit up all night in the cars, I have stood it beyond my most sanguine expectations."

More than a year after the above was first written, a gentleman came into my office, the picture of health, in manly prime, to make some adequate return for benefits derived from my treatment; as he was wholly unknown to me, I requested his name, and experienced a quiet and pure happiness, on hearing the name of the above case. On examination, he weighed more than he had ever done in his life, his lungs reached over their full, requisite measurement, he had long ceased to use any medicinal means, and since our last interview, had enjoyed uninterrupted good health.

Whatever success the Author may have had in the treatment and permanent cure of the diseases named in this book, and in the cure also of aggravated cases of dyspepsia, which accompany these ailments often, and has to be cured before the treatment of the principal disease can be successfully prosecuted, he attributes it to the application of the principles involved in the illustrations above given: modified, indeed according to

symptoms, causes, age, sex, and constitution. He trusts that their application will hold good, with increasing success, in all time to come.

A class of cases having the prominent symptoms of Consumption in its advanced stages, and yet known not to have Consumption, because the lungs maintained their healthy standard.

Dec. 4th, 1848. C. A. G. applied for medical advice. The principal symptoms were cough, weakness, and falling away, with a severe pain in the right side, low down, and rather behind. While under my care he rapidly declined in flesh, and strength, and at the end of two weeks was not able to leave his bed. The cough was such, that it was not possible for him to have any continuous sleep, and in the mornings he appeared weary, haggard, and wretched. In the meantime his appetite declined, the pain at the part designated, became gradually worse, and when he would cough, it was almost insup portable; large quantities of yellow matter were expec torated; at length he exclaimed, "I must have relief or die." The persons about him fully believed that he was sinking with Consumption, and were confirmed in their views by the opinion of a young physician, a relative of the patient, which was, that he was in a dying condition, that he could not recover, and that it was confirmed Consumption. So far from coinciding with these views, I informed the patient that the worst was over, and that I believed he would recover without the use of any more medicine. In a short time he was able to leave town with such general directions as the case seemed to require, taking only some application to apply to the whole surface of the body daily, to cleanse and stimulate the skin.

In a short time the whole surface of the body broke out in pimples or splotches, and he got rapidly well, and remained in good health, at the end of three years weighing over two hundred pounds.

The experienced physician will recognize this as a case of abscess of the liver, and to this were all my remedies directed at the time. During his whole illness his lungs measured to their full standard.

677. D. C. P. A woman in middle life entered my office from a carriage at the door, so exhausted when she came in, that she was compelled to lie at full length on the sofa, with a cushion and pillow under her head. After resting some time, her pulse was 110, and breathing thirty times in a minute; conversation tired her very much, so I questioned her husband. "Has been complaining and doctoring for the liver three years, has had five children, with several miscarriages; but for several weeks past has been complaining, and generally getting worse, until she is now just moving about, lying down a great deal, and for the last day or two lying down most of the time, her back and left shoulder hurting her so; her medical attendant has been sent for three times, but has not come, as (so reported) he can do nothing more for her. She has exhausting fever coming on regularly every day, with drenching and debilitating night sweats, most distressing and exhausting cough all night, spitting up large mouthfuls of heavy yellow matter, no appetite whatever, and bowels bound up. The cough is so distressing that she can scarcely sleep at all; a deathly chill comes on every morning about five o'clock, and at that time the cough is terrible; she has lost forty pounds of flesh."

I told her husband that I could not promise anything, that cases of the kind generally died in from three to thirty days, and if she did not die in that time, she would get well. I told a gentleman, a near neighbor of her's, who felt interested to inquire about her, that she could live but a short time, in all probability.

Two or three days after she first came to me, her husband called upon me in considerable alarm, as he thought her to be in a dying condition.

I name these things to show how low she was to all appearance.

Within five weeks she walked to my office without special fatigue, a distance of half a mile, up and down hill, of a cold windy day. Pulse sixty-eight, regular, strong and full, breathing twenty-four, no cough at night, none at all at any time worth naming, appetite very good, bowels regular, no pain, no night sweats, no fevers.

In ten days more she called again, breathing twenty, pulse seventy-six, and the capacity of her lungs for holding air very near that of health, not needing farther medical advice. Here was a case that I considered almost hopeless, believed by the patient herself, her husband, her physician and her neighbors, to be one in the very last stages of Consumption, and yet she got well.

Two days ago she came to my office, having walked the distance with a child nine months old in her arms, about which she wished to consult me. She seemed herself in excellent health, stating that she weighed one hundred and forty-five pounds; at the time she came to me her reported weight was one hundred pounds, whether from conjecture or actual weight I do not know.

She stated also that during the last week she had done the cooking and washing of the whole family, consisting of nine persons, besides nursing her infant a great part of the time, as it was barely expected to live.

This patient was too weak at her first visit to allow me to examine her by the new method, and I was obliged to form an opinion from the old mode of examination, auscultation, &c., and from her remarkable and rapid recovery and restoration to her full flesh in the space of two months, I feel certain that her's was more a case of liver abscess than of lung disease.

Two important lessons may be learned from this interesting case:

First, That no one ought to be given up to die without a strenuous effort to save, however forbidding the symptoms may be.

Second, That other ailments strongly simulate Consumption.

Three years after, I learned that this woman was in the enjoyment of reasonable health, having borne one child in the mean time, besides raising one who was an infant of a few months old when I was first called in.

A Southern planter called upon me, on his way to the West Indies, in pursuit of health. His prevailing symptoms were a most incessant cough, day and night; it had taken away his appetite and sleep; he had been a large portly man, but had fallen off so much that his skin was wrinkled, and his clothing appeared lost on him; he was haggard and dispirited in the extreme. He had night sweats, and a constant, fixed pain in the centre of the breast. His friends had given him up. His banker said to me, in a very cold, business-like, confident way—"He is too far gone to be saved. Do you

think you will be able to do the old gentleman any good? His family scarcely expect to see him return." He was very costive, and complained much of debility; that his coughing and expectoration weakened him very much. His tongue was dry and furred, and he was very much troubled with shortness of breath. Conversation, exercise, going up stairs, coming into a room from out doors, invariably excited a most distressing dry cough, and he had no appetite for anything. His pulse was ninety-five a minute. Upon examination, I gave my unhesitating opinion, that his was not a case of Consumption. This opinion gave him great uneasiness, for he had evidently come to me with high expectations, and that I should give such an opinion, in the face of what every body believed, himself included, caused him to apprehend that I did not understand his disease, and of course could do him no good; it was like abandoning a last hope of life. Had I told him at once, that it was a plain case of Consumption, but that I would certainly cure him in a short time, he would have been much better satisfied. He had a great many questions, unanswerable, as he imagined, to propose to me. How is it that I cough so much? Where do these night sweats come from? If my lungs are not diseased, how is it that I have this incessant pain in the breast? If my lungs are not giving way, why have I fallen off so much, and have such shortness of breath, that I am tired to death when I go up stairs? Every day or two he wanted me to examine him again, saying he was afraid I had made a mistake. To all this I replied, that his was a clear case of Throat disease, and that he would soon be satisfied of that fact. I gave several prescriptions for the throat affection, and by properly regu-

lating the general system, I find an entry in my note book, some eight weeks afterwards to this effect:

"Returned in good health and fine spirits; appetite excellent; sleep is delicious, without any artificial means; breathing sixteen; pulse seventy-two; natural ruddiness returned to him; sleeps on either side with perfect ease, which has not been done for a long time before; not the slightest remnant of pain in the breast, for the last month; weariness in walking, and shortness of breath have entirely disappeared."

In this case, the cough was not entirely removed, which was attributable to a singular accident which had befallen him, and which would probably cause some cough, as long as he lived; but not sufficient to make it necessary to take anything for it, or to be called troublesome. At the same time, I believe, if he could have been induced to live on plain diet, and to leave off the use of tobacco altogether, the remnant of cough would soon have entirely disappeared. The immoderate use of tobacco, by smoking or chewing, is a cause of disease of the throat, in a number of instances; and whether a cause or not, a perfect cure is almost impossible, unless it is wholly abandoned, in every shape and form.

About one year after the above was first published, I learned that this gentleman died from "free living;" what was the full meaning of that expression I do not know.

Other cases might be given from my own practice, but I will give the five following from the medical reports of others, showing how many of the symptoms of Consumption persons may have, and yet the lungs be entirely sound; and showing, at the same time, the

necessity of applying to competent and experienced persons to decide so important a question.

A female, aged 30, was very subject to taking cold; this ended in spitting blood, and great difficulty in breathing; pain in the throat; hoarse voice; frequent pulse, night sweats; she died in six months, and on opening the body the lungs were found to be entirely healthy, and the whole disease seated in the larynx and windpipe.

A man, aged 30, very liable to take cold, had been sick a long time; considerable spitting of blood, at different times; face lean; loss of voice; painful and fatiguing cough; brings up mucus and yellow matter; obstinate diarrhœa. He died; the three last days being passed in extreme suffering and agony. On opening the breast, the lungs presented no unusual appearance. The disease was at the upper part of the windpipe, which was ulcerated.

A youth of 18, had pain in the throat; voice changed; spit up sometimes mouthfuls of frothy red blood; frequent general chills; great falling off; pale and sharp features; cheeks red; spit up lumps of yellow matter; frequent pulse; night sweats; difficult breathing; and death within a year. On opening his body, there was found no ulceration in the lungs, but the upper part of the windpipe, about the voice-making organs, was ulcerated.

A man, aged 49, had a harsh dry cough; expectorated a whitish, thick stuff, sometimes with blood, frothy, with little masses of matter scattered through it. He died, but no tubercles were found in the lungs.

A boy, of 15, became addicted to bad habits; in four years he began to experience pain in the throat; the voice altered, became shrill at first, and was then entirely lost; swallowing liquids became impossible; he

expectorated large quantities of matter, and died after year's illness. The lungs were found entirely sound, but the whole throat was ulcerated.

From a similar cause, cases are reported, in which Bronchitis, or a form of it arises, ending fatally. In cases of Throat-ail and Consumptive disease, this cause and even marital allowances, too much extended, debilitate the system sometimes, and baffle all the efforts of the physician. All persons under treatment will be benefited by a practical remembrance of this item.

If there are exhausting occurrences, communication should be made to the physician frankly, without the necessity of special inquiry, in order that either of the difficulties above named may be remedied as soon as practicable, for the cure of the main disease cannot be forwarded, until this is done; and considering the uniformity of, and the means used to accomplish both the above, it is rather surprising, that so much suffering in body, and wretchedness and depression of mind, should be endured so long by many, before efforts are made for cure.

SUSPICIOUS SYMPTOMS.

It may be of practical advantage to name some of the far off symptoms of approaching Consumption, any two or three of which, existing for two or three months or more, should excite watchful attention, and I state them, from a fixed conviction of their truth, founded on repeated observation.

A pulse habitually accelerated beyond the natural standard.

An occasional slight hack or cough, on lying down at night, without apparent cause, as if a particle of dust had got into the throat; or on getting up in the morning.

A frequent feeling as if you wanted to do something with the arms, seeking some kind of support for them.

A striking, remarkable weakness, or giving way of the knees and legs on going up stairs, or ascending a hill.

To be in a condition in which "the least thing in the world gives you a cold."

When coldness of the feet strikes on the throat, and produces a slight burning or sore feeling.

To be very easy to have a chilly feeling run over you, on going out of doors when it is a little cold.

To feel chilly when you get up from your meals.

To be restless, and "can't go to sleep," when you first retire to bed, for months together.

Spitting blood in any quantity, from a drop to a pint or more, once in a few days, or weeks, or years.

A feeling of weakness, which has crept on you so gradually, you do not know when it began; and yet, without apparent cause, it seems to be increasing.

No special relish for food, yet no uneasiness amounting to actual pain anywhere, together with a want of interest in what is going on around you; a growing indifference to every thing.

It frequently occurring that one, two and three days will pass without an action of the bowels, unless medicine is used.

Frequently recurring, although slight pains in the breast, side, or between the shoulders.

A general decline of flesh and strength, painless and without appreciable cause.

These are the far off friendly monitors of danger, the faint beginnings of disease. They do not constitute Consumption. In some instances they mean nothing, for

they pass off in a few days; but when weeks go by, and any two or three of them still stick to you, there is reason for alarm; and not a day should be permitted to pass, until you have commenced measures, under the advice of a careful physician, for their removal. A drop of water may check the spark which would lay the fairest city in ruins, and the unmoved avalanche be kept in its place by an infant's arm, but, a moment's delay, and how resistless!

THE PRINCIPLES OF CURE.

The mode and means of cure may be various in different hands, just as in any other disease; fever and ague, for example, is cured by different remedies, but the *principles* of cure must be forever the same, and which in phthisis are—

To secure the highest possible general health.

To relieve the system of the slightest febrile condition.

To secure a free, regular, daily action of the bowels without medicine.

To obtain the absorption of tubercles.

To evacuate abscesses, and cause their immediate and permanent healing.

To bring about promptly, an immediate reduction and banishment of all inflammatory action, and at the same time, add to the strength of the patient, discarding absolutely the employment of any debilitating remedies, even for a single day.

To bring into the fullest requisition, the complete and healthy action of every line of lung substance, so as to secure, day and night, without intermission, the largest supply, reception, and consumption of pure, fresh, bracing air, that it is possible to obtain. These are the points

which in every instance I labor to attain, and without which, no case of tubercular Consumption ever has been cured or ever will be. These objects are to be reached by no routine practice, but by adapting the nature, and strength, and constituents of the remedies, to the particular and varying condition of each individual patient, taking into minute account, in every case, the previous history, size, age, sex, strength, constitution, temperament, occupation, habits and hereditary influences, as far as it is possible to ascertain these facts.

The grand and essential points in any case of phthisis cured are these:

To subdue entirely congestion or inflammation, and build up the strength of the constitution at the same time.

To promote absorption of tubercles.

To evacuate abscesses, bring their opposite sides in contact and cause them to heal.

In reference to the lung measurement method, by by which Consumption may be determined in its forming stages, *when alone a cure can be reasonably hoped for*, the London Lancet says, "In this way it is proven by actual experiment, that a man's lungs, found after death to have been tuberculated to the extent of *one* cubic inch, had been by that amount of tubercularization controlled in their action to the extent of more than *forty inches*." It is very apparent then, that this mode of examination detects the presence of tubercles in their earliest formation, which is in fact the only time to attack Consumption successfully and surely; and when attempted at the early stage, before it is at all fixed in the system, the certainty of success in warding off the danger, of curing the disease, is as great as that of warding off the cholera

or perfectly curing it, if attempted at the first appearance of the premonitory symptoms, and as when cholera is present in a community, every person who has three or more passages from the bowels within twenty-four hours ought to be considered as attacked with cholera, and should act accordingly, so when a man has tubercles in his lungs to the extent of impairing their functions for a dozen inches, that is, when his lungs do not, with other symptoms, hold enough air by a dozen inches, he should consider himself as having Consumption, and should act accordingly and with the assurance that in four cases out of five, human life would be saved by it. And as thousands have died with cholera by hoping they did not have it, or denying they had it, although warned by the usual symptoms of its commencement, until its existence was so apparent to the commonest observer as to render a hope of cure impossible, so precisely is it in Consumption, people will not take warning of the symptoms in their own persons, which have in thousands of others terminated in certain death, but go on day after day without reason, hoping that the symptoms will go away of themselves, and steadily deny that they have the disease, until remedy is hopeless.

I have already said, that when Consumption has once fixed itself in the system, recovery is not probable; but if the disease is not fixed, and is only in its commencement, it may be with great certainty distinguished in its early stage, by the new means which I have advocated; and in very many instances averted; not so much by "taking things," as by letting them alone: not by confining the natural motion of the limbs by braces and supporters, but by allowing them the freest possible action: not by the application of Blisters and Plasters, which

only interfere with the natural action of the skin, but by exciting and promoting that natural action: not by administering expectorants, which only weaken the system by hastening its drains, and producing nausea, but by regulating and controlling these drains, the expectoration being loosened by nature's means, when desirable. In consumption, I give nothing to purge, or which can have any continued weakening effect; I give no artificial stimulant, which requires to be increased in frequency or quantity, or loses its effect altogether, or at last requires so much as to injure the tone of the stomach by preventing it from deriving proper nourishment from the food, while the patient rapidly sinks into the grave after having given a glowing certificate, or told dozens of people what a wonderful effect the syrup was having in his case. This is the true history of all the "syrups," "cough mixtures," and "wild cherry balsams," sold in the shops for coughs, cold and consumption; and without doubt the reader can easily recollect cases among his neighbors, such as I have detailed.

I give no medicine to increase the expectoration, because the lungs are already expectorated away too fast. I give no medicine to remove the cough or smother it, for cough is the agent which nature sends to remove accumulations from the lungs, otherwise they would fill up and the patient would suffocate. I do not confine a patient in-doors, but keep him out as much as possible. I do not send them to a warm climate, if sent they must be, but to a colder and more bracing one—to a more condensed and purer atmosphere. I do not counsel them to leave the facilities and comforts and attention of home, to pine away in some distant country tavern, or boarding house, or fashionable hotel—these

are not the places for a body worn away by disease, and wasted by long nights of incessant cough or drenching night sweats, cold and clammy as the grave; nor for a mind made timid by constant pain, and weakened by its own incessant and restless workings. If any man in the wide world needs them, it is the consumptive, who should have around him every comfort, every convenience, every facility which unbounded wealth or undying affection can procure. The light step, the soft whisper, the affectionate inquiry, the cheerful voice, the friendly smile, the tireless watching, and the sleepless eye—all these, and a thousand other nameless attentions, he needs, and needs them every day and every hour. To leave home for any length of time is advice which ought never to be given in a case of decided consumption; it is not applicable in any stage of actual consumptive disease, and an observant practitioner will never give it. Voyages at sea, and locations on the seashore or lake coasts, are unsuitable, pernicious, and deadly in their ultimate effects.

I wish it could be as deeply felt as it is strictly true, throughout this broad continent, in every mansion of its merchant princes, in every fisherman's hut and squatter's cabin, that the permanent arrest of consumptive disease in its latter stages and its effectual eradication when only in its first beginnings, is to be accomplished by one and the same system of means, and which no *internal medicine* hitherto known to man has ever yet been able singly to accomplish.

In the treatment of any case purely consumptive, two things only are needed, and they are needed always, and under all circumstances:

A greater consumption of pure, fresh, cool air.

A greater digestion of nutricious food.

A man must have more air for his lungs, and more flesh for his body. A consumptive is always short of breath and deficient in flesh. No medicine can ever give air to the lungs, nor can it impart nutriment to the system. It is the pure air which the lungs receive which purifies the blood, and it is plain, substantial food introduced into the stomach which gives nutriment and strength and flesh to the system. My practice, therefore, in simple consumptive disease is, to force the lungs to consume a larger and larger quantity of *pure*, *fresh*, *cool* air every day, and to cause the digestive apparatus to derive from the food a greater and greater amount of nutriment; hence, as my patients are getting well, they walk faster, run farther without fatigue, eat more food, digest it better, and consequently increase in flesh, and while this is going on, the cough, in all curable cases, gradually and spontaneously disappears, without doing anything for it; it disappears because it is *eradicated*, and not because it is *smothered* up by balsams, drops, syrups, and all the long catalogue of life-destroying poisons, which are sold under the name of patent medicines, by the unsuspecting in their credulity, or by the unprincipled, in their wilful recklessness of human life.

One of the greatest difficulties in the successful treatment of Consumption is, that the stomach and bowels are deranged; the appetite may be moderately good, and the bowels for the most part regular, yet for all that, they are not in a condition sufficiently healthful to impart to the system the nutriment which the food contains, but which they are not able to eliminate; hence, the universal complaint, *what I eat does not seem to strengthen me any;* but this very condition is always and

inevitably aggravated by every dose of patent medicine swallowed for coughs and the like; because every one of them, without any exception, as every respectable physician knows, and every honest, intelligent druggist will acknowledge, has more or less opium in some form or other, and this is impossible to be taken, even a single time, without having a tendency to make the liver torpid, to derange the stomach, and to constipate the bowels.

I do not wish it to be understood that I give no internal medicine under any circumstances, nor that I undervalue its remedial efficacy, but simply that it ought not to be taken except by the advice of an experienced physician, and not on the responsibility of the patient or some more ignorant adviser.

The best physicians in the land, with the experience and skill of a quarter of a century, but too often fail to conduct a case of common consumption of the lungs to a favorable and successful termination. I must say that any unprofessional man who could be tempted to tinker with his constitution, from any knowledge which he could gain from any source in a month or in a much longer period, when he would not be willing, without special instruction, to attempt the mending of an old shoe, such a man, to say the least of it, runs a fearful risk.

DISEASES OF THE THROAT.

I here confine my attention to the one disease called variously Chronic Laryngitis, Clergyman's Sore Throat; Throat-Ail. There are two forms of it: one, coming on in the course of a night, ending in restoration or death in a few days or hours sometimes, is called *Acute Laryngitis*. By this disease, then known little of, Washington

was attacked on Friday night, and died Saturday night, in consequence of being out on his farm during Friday, a cold, raw, drizly day in December, at Mount Vernon. The account given is as follows:

"Some time on the night of Friday, December 13, 1799, General Washington, having been exposed to rain on the previous day, was attacked with an inflammatory affection of the upper part of the windpipe. The disease commenced with a violent ague, accompanied with some pain in the upper and lower part of the throat, a sense of stricture in the same part, a cough and a difficult rather than a painful breathing deglutition, which were soon succeeded by fever and a quick and laborious respiration. The necessity of blood-letting suggesting itself to the General, he procured a bleeder in the neighborhood, who took from his arm in the night twelve or fourteen ounces of blood. He could not, by any means, be prevailed on by the family physician to send for the attending physician till the following morning, who arrived at Mount Vernon about eleven o'clock on Saturday. Discovering the case to be highly alarming, and foreseeing the fatal tendency of the disease, two consulting physicians were immediately sent for, who arrived, one at half after three, and the other at four o'clock in the afternoon. In the mean time were employed two pretty copious bleedings; a blister was applied to the part affected, two moderate doses of calomel were given, and an injection was administered, which operated on the lower intestines; but all without any perceptible advantage, the respiration becoming still more difficult and distressing. Upon the arrival of the first of the consulting physicians, it was agreed, as there were yet no signs of accumulation in the bronchial vessels of the lungs, to

try the result of another bleeding, when about thirty-two ounces of blood were drawn without the smallest apparent alleviation of the disease. Vapors of vinegar and water were frequently inhaled, ten grains of calomel were given, succeeded by repeated doses of tartar emetic, amounting in all to five or six grains, with no other effect than a copious discharge from the bowels. The powers of life seemed now manifestly yielding to the force of the disorder. Blisters were applied to the extremities, together with a cataplasm of bran and vinegar to the throat. Speaking, which was painful from the beginning, now became almost impracticable. Respiration grew more and more contracted and imperfect, till half after eleven on Saturday night, when he expired without a struggle, retaining the full possession of his intellect.

"He was fully impressed at the beginning of his complaint, as well as through every succeeding stage of it, that its conclusion would be mortal; submitting to the several exertions which were made for his recovery, rather as a duty, than from any expectation of their efficiency. He considered the operation of death, upon his system as coeval with the disease; and several hours before his death, after repeated efforts to be understood, succeeded in expressing his desire that he might be permitted to die without further interruption.

"During the short period of his illness he economized his time in the arrangement of such few concerns as required his attention, with the utmost serenity; and anticipated his approaching dissolution with every demonstration of that equanimity for which his whole life had been so uniformly conspicuous.

"This account is dated Alexandria, Virginia, Decem-

ber 21, 1799, and signed by Dr. James Craik, his attending physician, and Dr. Elisha Dick, his consulting physician. Thus died one of the greatest and most distinguished men of any age or nation, in the last hour of the last day of the week, in the last month of the year in the last year of the last century, in his 68th year. The violent ague with which this commenced was doubtless the rigor of incipient inflammation.

"The pain and sense of stricture in the upper and fore part of the throat, and the labor of breathing, showed that the inflammation was seated in the larynx."

The more immediate cause of the attack was standing on the damp ground for some time, looking at some workmen. Inflammatory diseases are more violent and fatal in large persons like Washington, who was six feet high; his head measured seven and a half inches, and he weighed, in 1778, two hundred and nine pounds.

And it is not uncommon for persons to feel a kind of burning or raw sensation in the throat when their feet have become damp or cold, and remained so for some time. In others it is the first warning that a cold has been taken, given sometimes at midnight when the person had retired in usual health; this was the case with Washington. In all such sudden attacks at night, a person should send for a physician at once, then have a mustard plaster put to the throat, a thin piece of wetted paper or muslin intervening between the mustard and the skin, to keep it from raising a blister and breaking the skin; let the plaster be made of vinegar and mustard only; then put the feet in hot water, with one or two, or three tablespoons of ground mustard stirred up in a gallon of the water, which should be in a wooden vessel, this will bring the water over half leg deep

keep adding more hot water from time to time for half an hour, so that the water shall be hotter when the feet are taken out than when put in; at the end of the half hour, the patient being wrapped up well all the time in a good thick blanket, drinking as much cold water as he desires, wipe the feet dry, hold them by the fire, rubbing them with the hands until perfectly dry and warm, especially between the toes and at the heels, get into bed with bottles of hot water to the feet; these bottles should be only three-fourths filled with water, should be well stopped, and be wrapped up, each bottle in a small piece of woollen flannel, with the edges of the flannel turned in so as to be an additional aid in keeping the cork in; additional bed clothing should be placed from the upper part of the thighs downwards, and as little as consistent with preventing chilliness on the upper part of the person, the bed clothing to be well tucked in at the sides, until the arrival of the physician. These directions are given, not as a cure, except in mild cases, but in order to save time, for, as is seen above, it is, if at all violent, a rapidly progressing, and speedily fatal disease.

The reason of its fatality is, that there is inflammation. The minute blood vessels are over distended with angry, inflammatory blood, and the *chink of the glottis*, that is, the entrance at the top of the windpipe, through which the air must pass to the lungs, and it can reach them in no other way, is very narrow, and is easily filled up by these blood vessels being so swollen with the unusual amount of blood in them, that they more or less completely occupy the passage designed for the breath, and besides this, the more watery portion of the blood is exuded through the delicate sides of the little blood

vessels into the interstices, and causes additional swelling of the parts.

CROUP OF CHILDREN,

is precisely the same thing, only occurring in the body of the windpipe instead of at the top, and as the windpipe is more roomy, and from its unyielding gristly nature, not inclined to swell, the more watery portions of the blood are differently disposed of: they harden and form a tough, leathery kind of substance like the exuding and hardening of gum on a tree, this thickens and thickens until the whole cavity is filled, is choked up, and the child dies from suffocation; an operation similar to that of the filling up of the boilers of steam-boats, or the spout of the tea-kettle where limestone water is used. And as many a lovely child is destroyed in a single night, and many young mothers are wholly ignorant of the dangerous nature of the ailment, it may be useful to state here what should be done *while the messenger has gone for a physician.*

SYMPTOMS OF CROUP.

It almost always comes on at night, after the child has been some time in bed, and generally after having been out of doors of a damp, raw day. He is restless, and gives an unusual sounding cough, without its wakening him; a cough so peculiar that a parent who has heard it once, will never fail to recognize it afterwards, a kind of ringing, husky, muffled cough, with something of a hoarse barking sound; it is from a Scotch word, which means a croaky or husky sound; after a while the child coughs again, and is roused up, and after each cough the breath is drawn in with a hissing noise like a chicken with the pip, the breathing becomes slower as the open

ing becomes smaller by the gradual filling up as before described, the face is flushed, the eyes red, tearful, blood shot, skin dry and hot, or face bathed in perspiration, the hand is frequently carried to the throat, as if distress were felt there, great thirst, urine high colored, great uneasiness, restlessness between the fits of coughing; a mother who has ever heard it once, needs no description to enable her to recognize it again. The first born are most likely to perish with it; simply because the parent has no experience of its nature, and hence is not alarmed in time, or knows not what to do, while the physician is being sent for. In the hope of being instrumental in saving some little sufferer, whose life is inexpressibly dear, at least to one or two, I will make some suggestions, not for the cure of the patient, but to save time. The instant you perceive that the child has *Croup*, indicated by the *barking Cough*, *uneasy breathing*, *restlessness*, send for a physician, and as instantly wrap a hot flannel around each foot, to keep it warm; but while the flannels are being heated, dip another flannel, of two or more thicknesses, in spirits of *turpentine*, or spirits of *hartshorn;* or have a large mustard plaster applied, one that will reach from the top of the throat down to some two inches below the collar bones, wide enough at top to reach half-way round the neck on either side, and nearly across the whole breast at bottom. But it will take time to send for a physician, to prepare flannels, and to make the plaster or obtain the turpentined flannel, and in some cases fifteen minutes is an age—is death, if lost; therefore, while these things are preparing, give the child, if one year old or over (and half as much, if less), about half a teaspoonful of Hive Syrup, and double the dose every fifteen

minutes until vomiting is produced; and every half hour after vomiting, give half as much as caused the vomiting, until the physician comes, or the child ceases to cough, when he breathes free, and is safe. If you have no Hive Syrup, give a teaspoon-ful of Syrup of Ipecac, and double the dose every fifteen minutes until vomiting is produced. If you have nothing at all, boil some water, keep it boiling, dip woollen flannels of several folds into it, squeeze it out moderately with *your hand*, and apply it as hot as the child can possibly bear it to the throat, and in from one to three minutes, according to the violence of the symptoms, have another to put on, the instant the first is removed, and keep this up until the breathing is easy and the cough is loose and the phlegm is freely discharged, or until the arrival of the physician.

The second form of Throat-Ail is called Chronic Laryngitis, from its long continuance, this is the real Throat-Ail, which for some years past has been becoming increasingly common, and which from neglect, is so frequently ending in a general decline and death, usually running its course to a fatal termination in a year or two, or three.

The nature, causes, and symptoms of this disease have been described in previous pages. The object now is, to attempt to induce persons TO ATTEND TO THE FIRST SYMPTOMS, for the simple reason, that in perhaps a majority of cases, *they are the symptoms of coming Consumption.* Some physicians of great eminence, men of learning, and of patient, long continued research, have so generally seen the symptoms of throat-ail end in Consumption, as to have expressed their opinion, that the symptoms of chronic layringitis are *the effect* of Consumptive disease already present in the system; and I

have reason to know, that it is in very—very many instances but too true. ☞ The tickling, which causes cough, *seeming* to be in the larynx, at the top of the windpipe, when in reality, it is in the depression, at the bottom of the windpipe, the irritation coming from the lungs close by, and not from the voice organs, which are from three to six inches above.

A tickling in the throat of clergymen, in other words, throat-ail, in that class of persons, is not as commonly a symptom of Consumption in progress, or threatened, as in others, because the manner in which they use their voice, makes them liable to a local disease, confined to the voice making organs themselves; but in a large class of other cases, there can be no doubt, that throat-ail symptoms are nothing more nor less than *accompaniments* of Consumptive disease, to say the least of it; leaving the question of the relations of cause and effect open. The amount of the whole matter is simply this,

As a general rule, the fact of the existence of a throat affection for six or eight weeks, is presumptive evidence of a Consumptive constitution, public speakers excepted, and even many of them are in the same category.

It is on this account that so many of these throat affections, unless taken in the beginning, are exceedingly intractable, requiring sometimes, months and months of tedious persevering effort to *wholly eradicate* the symptoms.

For these two serious reasons am I at not less pains to designate the particular symptoms of Throat-Ail in the beginning, in *the very first beginning*, than those of Consumption. Nor do I think it possible to certainly designate between the two, without the aid of lung measurement; if they measure full, if they meet all the

requisitions, then is it certain that the Throat-Ail symptoms are confined to the throat; but if with Throat-Ail symptoms, there be a decided defective lung measurement, then, beside the Throat-Ail treatment, I habitually manage the case as if it were one of evident Consumption; this I do, to be on the safe side, and I think I have saved human life by it.

I will here give a single case, proving conclusively the two points just stated.

First, The difficulty, or rather the length of time required to eradicate a slight form of the disease.

Second, Where it was certain that no consumptive ailment was present.

A merchant of this city, aged 38, applied Oct. 30th, having

Tiredness in the throat.

Weakness of the voice.

Hoarseness.

Constant tendency to swallow.

Burning feeling, at times, in the throat.

Back part of the throat very much inflamed.

Uncomfortable cough.

Expectoration of unmixed yellow matter, readily brought up with a hem.

His measurement reached the full standard, pulse 78, and weight 178, which was rather above what it was ordinarily.

This was pronounced a clear case of uncomplicated Throat-Ail.

On the 29th day of February following, just four months after, during which time he had most rigidly observed all the directions which had been given him, he had not the most remote remnant of any one symptom

above named. While under my care, I gave this gentleman no internal medicine, except perhaps one, or may be, two pills in the beginning; nor did I see him a dozen times perhaps; the directions were simple and safe, the main thing was, *the persevering observance of them.* On this point many persons fail of health and life. Because they do not get well in a week or two, they become tired, and want to try some thing or somebody else, or getting almost well, imagine that the danger is over, and that the rest will be accomplished of itself; in these ways relapses occur, the system is trifled with, time is lost, and the patient dies. I very greatly desire to excite no expectations which may not be realized, and therefore state to the reader very plainly, that unless this Throat-Ail, this Chronic Laryngitis is of a mild form, and of but a very few months standing, it is not probable that the symptoms can be removed, the disease *eradicated* and a *habit of health* restored, short of several months constant, thorough and persevering attention. I would be glad beyond expression to be able to propose a safe, a prompt and permanent cure, but I possess no such knowledge; and from the number of persons applying to me from various parts of the country, who have vainly tried every conceivable remedy, I feel convinced, that there is no instantaneous cure, no rail-road route to the thorough eradication of Chronic Laryngitis; that nothing can accomplish it but a thorough, systematic effort, and generally long continued. Usually but little internal medicine is required, unless there are complications, nor is frequent medical interference requisite, for in a comparatively short time, sometimes by a single set of prescriptions, the system is placed in a condition, which requires nothing thereafter

but a safe and simple treatment, but safe and simple as it is, it must be persevered in, often for months together I trust that these sentiments will be thoroughly impressed upon the mind of the reader, and that he will make a wise and practical use of them.

Illustrations have already been given on page 11, showing how certainly apparently slight symptoms of Throat-Ail end in death when neglected; on the other hand, it is seen in the case last given, and in others scattered through the book, with what regularity thorough cures take place, when the symptoms are attacked in the beginning, and persevering attention is given to them until every symptom of disease is not only eradicated, but even a little longer, so as not merely to get into health, but to *establish a habit of health.* To do this does not involve the taking of medicine, nor costly, nor painful observances, but it does involve the rational continued and systematic observance of safe and effective practices. And when it is known that the continued presence of Throat-Ail symptoms for months in succession, is presumptive evidence of a consumptive condition of the system, the reader is placed fully on his guard, health and life being the forfeit of inattention.

NITRATE OF SILVER

applied to the throat itself is now a common remedy, and has been favorably spoken of. From the year 1846, its employment has rapidly extended, until there is scarcely a town in the United States where it has not been tried. In many cases it affords immediate and grateful relief. I have never known a case where that relief was effectual and permanent. Persons have come

to me, who have had it applied by the most skilful and experienced hands for days and weeks, and months without a cure. In some cases the ailment has been aggravated.

It is not my business to decry any remedy, provided it is a remedy; but when it is sometimes an alleviant only, at others inert, occasionally an aggravant, and in no one known case effectual when alone used, it is perhaps a common due, to draw attention to the facts of the case.

I have employed it in my own practice some years ago, and with results so unsatisfactory, that I have laid it aside, and only use it in rare instances.

It has most notoriously disappointed the expectation of physicians all over the United States.

It is an old practice revived; not that there is no merit in what has become obsolete; but from the circumstance that it was wholly lost sight of for a decade or more, it is reasonable to suppose that such a disuse arose from the fact of its general inefficiency. Trousseau and Belloc made a publication on the subject in Paris, May 15th, 1837; a translation appeared in Cincinnati, in September, 1839, by Dr. J. A. Warder; and yet, so completely had the practice passed from the medical public, that when it was revived in 1846, it was regarded as a *new discovery* throughout the Union. Trousseau is still living, and although he maintains a high reputation, and has written much since he first proposed the topical application of nitrate of silver as a cure for several forms of throat disease in 1837, I am not aware that these sentiments were reiterated, or that the original, or the translation, ever passed to a second edition. It is scarcely possible, therefore, if the topical application

of the nitrate of silver had been really a *permanently efficient* remedy, that it should have so soon fallen into desuetude.

If the throat symptoms arise from the condition of the stomach, the application of the caustic to the throat cannot cure, since it does not remove the cause. If the symptoms originate from the condition of the lungs, there can be no cure, since the nitrate cannot reach them.

If the throat feelings depend upon spinal derangement, as is not uncommon, an interesting case of which is now in my hands, no washes to the throat can avail.

In these three kinds of cases, where the throat symptoms, the tickling cough, more or less dry, arises from the condition of the stomach, the lungs, the spine; the application of the nitrate of silver not only does no good, but harm; it merely smothers the complainings of nature; it deadens the sensibility of the throat, and thus muffles watchful Nature's voice, without removing the thing which caused her to cry out; stifling her complaints, while the cause of them remains in action. It is precisely like closing the hatches when the hold is on fire, *and there resting!* It is only covering with white wash the black spot on the wall; it is gone to all appearance, but that black spot is there still. The fire is in the hold, and sooner or later will break forth with the more fury, and leave the noble vessel a ruin.

I do not doubt that while using the nitrate of silver, the throat symptoms do sometimes disappear; I do not doubt that it sometimes, in the hands of a judicious physician, may have a serviceable effect as a second or third rate aid; but that the nitrate of silver applied in solution to the throat, has of itself, ever permanently cured

one single case of serious chronic laryngitis, I do not believe. If other means were used in conjunction, then is the nitrate not *the* remedy.

A CLERGYMAN

having abandoned preaching from hoarseness and a feeling of rawness of the throat after speaking one year before, had the nitrate of silver applied as well as it is possible for a physician to apply it, he gave up public speaking altogether, and yet with this entire abandonment of his calling, and the use of the nitrate, he was not restored, and came to me for advice, complaining most of a weakness of voice which disabled him from reading aloud for five minutes at a time. In one month he could read thirty minutes at a time with ease, and in all respects felt well, with a clear, strong voice, system regular. I advised him to resume his duties, as I thought he could do so not only without harm, but with decided advantage. See his condition on the day he first came, and on his return one month after:

Age.	Date.	Pulse.	Breathing.	Weight.	L. measure.
24	Feb. 2	100	20	110	200
"	Mar. 4	72	16	114	220

SPINAL DISEASE.

A young lady had been suffering two years with oppression, cough, distressing irritation in the throat, shortness of breath, pains in the breast, suffering between the shoulder blades. She had undergone a variety of treatment, had taken cod liver oil, and had used the nitrate of silver to the throat to remove the troublesome irritation and tickling; every few minutes, sometimes every minute there was a short hack, with every

now and then a hoarse, deep, distressing hollow cough which jarred and pained the whole frame, pulse 130 a minute, and breathing thirty-six and over. Every thing done for her had not availed. On examining this deeply interesting case, it was found all the throat and lung symptoms arose from the condition of the spine, and the case was treated accordingly, and without regarding the throat affection; but directing attention to the spinal symptoms, the hacking cough was removed, the pulse fell a third, and the breathing likewise, and every symptom connected with the throat or lungs had a steady and encouraging abatement, promising now, an ultimate restoration.

These cases are given as a warning to guard against loss of time in using the nitrate of silver to the throat, unless it is as certain as such a thing can be, that the ailment is confined to the upper part of the windpipe, ☞ in which case other things may be more successfully used, avoiding the discomfort of the nitrate applications, and the irreparable injury the teeth are liable to suffer, their certain and permanent discoloration, if the nitrate of silver forms any part of the gargle employed. The means referred to are the gargles, fomentations and constitutional remedies already known to educated physicians, as it is no part of the design of this book to aid the reader in ruining his constitution, his health, and his life, by teaching him to practice on himself.

COD LIVER OIL

has been given freely for affections of the throat as well as those of the lungs. I believe it to be the best known remedy for general scrofula of the system. It often

gives flesh and strength to consumptive persons who take it; but,

It has no direct effect upon the lungs in any way.

It sometimes causes spitting of blood.

It sometimes, nay, often, causes looseness of bowels.

It often deranges the stomach.

It is impossible for numbers to take it.

It is, when applicable, adapted to two classes of persons mainly, if not exclusively; first, to the young; second, to those who, when in health, were inclined to be *fleshy* or fat.

For these reasons it is not a reliable remedy, not generally applicable, and should not be taken except under the supervision of an experienced physician; and by itself should never be relied on, for I have never seen a case of Consumption cured by it, and have never read of a case that was cured by the use of it alone. I know that cases have been reported in the public prints, and in medical journals, where persons taking it have appeared to do well. But to the best of my recollection one, if not both of the circumstances which I shall name, has attended its administration in every reported case.

First, some one or more symptoms always remained; or, second, there is a failure to report the condition of the case a year or two or three after.

I would not oppose its use in Consumptive disease, for it does, in quite a number of instances, impart flesh and strength to the patient, and thus far, it is well; and better still if these improvements are taken advantage of to employ them in proper out-door exercise, thus will it be a valuable aid, but if it fails

To increase the flesh,

To increase the strength,

Or, if on the other hand it tends
To cause spitting of blood,
To loosen the bowels,
To derange the stomach,

Then, by all means, should it be abandoned, because these occurrences are fatal in their tendencies, always weakening the general system.

TO CLERGYMEN AND THEOLOGICAL STUDENTS.

Ministers and mothers are our country's hope. As is the mother, so is the man. But in this happy land, where every one can worship as he chooses, the minister moulds the mother, and from his teachings do her principles take their coloring. Making it true "as is the priest, so are the people." Every good citizen will, therefore, naturally desire, that there should be a sufficient number of ministers of religion, to meet the wants of our growing country. It is however but too true, that the number of ministers for the last few years *of all denominations*, has relatively decreased, there are fewer clergymen in proportion to the population, than there were twenty years ago. One cause of this is, their early death, or their premature disabling, from loss of health.

Every year that a faithful clergyman lives, that life becomes more valuable to the church, in consequence of his increased experience, prudence, forbearance and kindly feeling to his fellow race. The less he moves by terror, the more by love; the more valuable he is to the church to which he has dedicated himself and all he has, the greater is his obligation to take care of, and watch over that health, without which, his life is comparatively useless.

A man who lives as he ought to, should be in his very prime at fifty years of age. But how many of our clergymen, some of the brightest among them, have passed away, long before that time. How many others incapacitated from efficient labor before they reach the age of fifty years! And how many too, in the vigor of manhood's physical power, and mental energy, have fainted under the burden and heat of the day!

To the little army of theological students, does the church look for recruits, to supply the places of the disabled and the dead. But in very many instances, these reasonable expectations have been disappointed; and in every direction are found young men, who have just left the seminary, wandering *down* to other occupations, from want of health, to become teachers in schools, in academies, in private families, to take agencies for books or religious newspapers, to assume the editorial pen, or having "married well" in the phrase of the times, settle quietly and conscientiously down, as invalids for life!

To old fathers and mothers at home, whose whole lives are bound up in the advancement of religion, it is the sweetest and purest of all earthly pleasures, to look forward to the day, when their son, now at the seminary, shall have completed his studies, shall return to his native village, and among the neighbors and friends of his youth, shall stand up "a man of God," to deliver messages of high import to men. To maintain him at the seminary, how cheerfully do they labor by day on the farm, and by night at the needle or the wheel. With what willing frugality do they practice a thousand self-denials; and the brothers and loving sisters, how gladly do they lend a hand, to help him so far

away, and whom they already begin to regard as higher than they, mingling reverence with affection. In a thousand other cases, with what a sacred ambition does the childless widow in her age and poverty, strive to lay aside a penny now and then by extra labor or extra deprivation; but not alone, there are the maiden workers in the hard-lifed city, in the cheerless garret, in the damp basement, in the dingy rooms at the top of crazy stairways, or at the ends of dark passages; the poor mechanic, how do all these labor to save by the penny, that a little sum may be raised for an Education Society, to help such young men at the seminary to books and clothing, and board, as have no means of their own, so that they may the sooner enter upon their labors; we cannot otherwise than imagine that many a solitary hour is cheered by the reflection that they are thus doing something towards bettering the common cause of great humanity; and that for these little efforts, there is the sweet recompense of hope, that some one will be made better and happier for time and for aye. But when the student, for whose aid they have been struggling in these ways for long years, has almost completed his course, and the reward is just about to crown their willing efforts, what a blasting must there be of hope deferred, to know at such a time, that the health is gone; and the savings and denials, and labors of years irrecoverably lost, as far as all direct practical effect on society is concerned!

Men and mothers of the church cannot but feel the truth of the statements made, and must regard with high interest, any proposition which looks to the abatement of a common calamity. The plan I propose is, that clergymen and theological students should consider it a

sacred duty *to be well.* Certainly, the maintenance of health is a duty to all, but more sacredly so is it the duty of the two classes just named, and for the reasons stated. Health, a good constitution, is as much a "*talent*" entrusted to our care as any thing else. I know of no talent half so valuable; for without health—family, friends, wealth, the world and every thing in it and about it, is a comparative blank, and the invalid is a blank, and more than a blank, because he is not only of no account himself, but by compelling the care of others, hinders them that much. He is not only troubled himself, but is a source of wasting solicitude to those who love him. Men are not naturally sick. Except in hereditary cases, they bring disease upon themselves. And even when diseased, these bodies of ours are made with such wonderful wisdom and kindness, that they have within them *as a part of their being*, a principle, recognized for centuries among medical men as the "vis medicatrix naturæ," *the power of nature of curing herself*, if simply let alone, if her *instinct dictates* are wisely regarded. A man in ill health is very much like one who has failed in business. I never knew a person to attribute his failure to himself. It is always done by having endorsed the paper of others. Invalids are too prone to attribute their want of health to causes out of themselves. But it is a deception. There is perhaps not one case of disease in a hundred, in the ordinary walks of life, which does not owe its origin directly to the unwise conduct of the person himself. And one of the most valuable secrets of health is simple and eminently practical ☞ *when a man becomes unwell, let him rigidly, and at once, investigate the cause, and with conscientious care, ever after, make it his study to avoid*

that cause. This is certainly not an unreasonable course, and if it be not wickedness to neglect it, then I do not know what sin against the Creator of our being is. And surely a stronger appeal than its sinfulness, cannot be made to the minister that is, or is to be. What I am most anxious to impress on the mind is "STUDY TO TAKE CARE OF YOUR HEALTH WHILE YOU ARE WELL." If not well, instead of tampering with your constitution, seek advice promptly from your physician, and follow it, and do not by your example, teach your physician to be his own minister.

Let then the minister now, or to be, study well the symptoms of that disease which has disabled so many eminent and useful men, and be prompt to check them in the budding. I will name here two causes, which perhaps, more than any others, lay the foundation for the ultimate abandonment of ministerial duties.

First, *Exposure to a colder air, too soon after speaking or singing.*

Second, *Speaking or singing, when it requires an effort, or gives pain to do so,* as in hoarseness from a cold.

If every air cell of the lungs were spread out on a wall, a space would be covered several times larger than the surface of the body—thirty times larger.

If the hand is dipped in cold water and suddenly placed on any part of the body which is usually covered, a most unpleasant shock is imparted to the whole system.

If then, when the lungs have been preternaturally heated by speaking in a warm room, the person immediately goes out into a colder air, a dash of that cold air is made, not over a few square inches, but over a surface of many square feet; not over the comparatively

hardened skin, but over the delicate fibres of the internal throat and lungs. It is true, that the lungs do not make such a loud complaint, although the actual violence is very many times greater; still, it is a violence, and not the less injurious because it at first complains but little, for it is a law of the internal organs, that they suffer disorganization to a wonderful extent without complaining, almost to within a few hours of death.

AN ILLUSTRATION.

The case is published in the New Orleans Medical and Surgical Journal for September, 1850, and was reported by Dr. J. C. Nott, of Mobile, to whom Dr. G. P. Gaines, who attended the patient without ever having seen him before, furnished the following notes:

"Monday, May 27th, 1850, between 7 and 8 in the evening, I was called to see a gentleman aged fifty-six, who was staying with a friend, three miles from Mobile, where he had spent the previous two months under circumstances of high mental excitement, in the discharge of the offices of his profession. Found him in great pain, which he referred to the lower portion of the breast. Suspecting immediately an affection of the heart, I questioned him if he had ever had any pain in his heart before; he answered that he had had, on several previous occasions, some slight pain in his left side, with slight palpitation, but not of much moment. Auscultation detected no abnormal sounds, no palpitation, but the heart beat regular and slow. He belched up great quantities of wind, but there was no distention of the epigastrium, or tenderness. He vomited occasionally undigested food, but said he had no nausea. He was perfectly cold all over, and bathed in a cold

sweat. I administered anodynes and carminatives, applied a warm poultice with mustard to the seat of pain, endeavored to bring about reaction by warmth to the extremities, but nothing gave relief. He still complained of the pain, and would beat his breast with his clenched hands. At ten o'clock I gave him a large dose of calomel and morphine, also gave several enemas, under which, in the course of two hours, he seemed to react and get warm, and he remarked, 'Doctor, I feel better everywhere else, but that pain still remains; it is a persistent and abiding pain, that seems to press through me against my spine.' All this time his pulse was regular, full, strong, but rather slow. His strength was good, for he got out of bed several times without help. At one o'clock I repeated the calomel and morphine. At two o'clock he said 'the pain has left my breast, and gone to my heart and left arm; do you think that is a good sign?' I asked him if in changing it still retained its severity, and he answered me 'yes.' I applied my hand over the heart, but there was no palpitation. He also said, 'Doctor, I think I am getting weaker—feel my pulse.' I felt it, and although it beat regularly, it seemed slower and weaker. I left the room for about fifteen minutes, and was suddenly called in to see him die. He breathed two or three times after I reached his bedside."

His body was opened after death. His lungs were perfectly sound throughout, and were free from any signs of disease, acute or chronic. In the left ventricle of the heart "there was an irregular bruised looking patch, about the size of a dollar, and on the outer edge of this was the fatal rupture!" The patient had died literally of a *broken heart.* This bruised looking patch presented

a dark, bloody appearance, the fibrous, muscular portion being destroyed. The patient had been laboring under a slight diarrhœa for several days, but his friends believed him to be in vigorous health; and says Dr. Nott, "It is remarkable that so much disease should have existed, with so few symptoms to indicate it, though similar examples are on record. There can be no doubt that *organic disease* had existed for months, *leading inevitably to death.*"

This case is given with the express purpose of impressing upon the reader's mind, that the internal organs of the body are actually disorganized, destroyed sometimes, without giving any indication of it, until within a few hours of death. And that because the throat does not complain of such sudden changes as I have spoken of, it nevertheless does suffer from each repeated violence, until destroyed irreparably. ☞ And so is it with the lungs, very many persons die of Consumption, and after death a large portion of their lungs are found on examination to have decayed away without the patient ever having complained of pain in the breast until within a week or ten days of death, though the distressing cough and emaciation gave sufficient evidence of the nature of the disease.

Before remarking on the second cause of frequent loss of voice in clergymen, I will step so far out of my way as to mention a few more items in reference to the death above described, the patient having been the most celebrated clerical orator of the present century, at least in the denomination to which he belonged for the greater portion of his life, JOHN NEWLAND MAFFITT.

He had been preaching in Mobile for some weeks; "immense crowds were attracted day after day by his

extraordinary pulpit eloquence. When at the zenith of his success evil reports pursued him. He became very much excited, was much occupied in writing for several days and nights; in writing was suddenly taken ill on the evening of the 27th of June, 1850, and died in seve hours. What influence his protracted mental excitement exercised in causing the disease, must remain in doubt; and though the malady is one which marches steadily onward, it is highly probable that its termination was hastened by moral causes." It is thus seen that he died of disease of the heart, which must have been in progress for many weeks, and that it is impossible for him to have died of any other cause. Peace to his memory!

SECOND CAUSE OF LOSS OF VOICE,

Speaking or singing, when it requires an effort, or gives discomfort or pain to do so.

A clergyman has a cold, he is hoarse, he feels compelled to fulfil an engagement, and begins to speak with labor; as he proceeds or *warms up* he speaks more easily, and at length one would not suppose that anything was the matter with him; but when it is over, he in a short time begins to suffer, sometimes actual pain, at others utter prostration of the whole man, a heavy tiredness in the throat, or raw burning feeling; this lasts from a few hours to some days, and before he is fully well, inexorable *appointments* tempt him to a repetition, until all recuperative energy of the parts is lost, and the voice is gone for life, which, with a few days rest and care, might have been raised on the side of good morals and virtue, and religion, for a quarter of a century. The reasons which have been given in my office for such a course are: "I was compelled to;" "I could not help

it;" "The appointment was out, and it was too late to recall it;" "The people would have been disappointed." The question which presents itself to my mind on such occasions is simply this—"*Can it ever be necessary to sacrifice the health, to ruin the constitution, and to risk life, in order to advance the interests of religion in such cases?*" *Do her true interests require it? Is it true economy?*

It may be useful to give some rules to be observed on the part of public speakers.

1. Speak in a conversational tone, with very much the same pause and emphasis as judges employ from the bench. This cannot interfere with earnestness or impressiveness of address, but really adds to both.

2. *Never begin* to speak on a high key; commence in a low tone and gradually rise, feeling your way to the most distant hearer.

3. Do not continue utterance until the lungs are almost entirely emptied of air, but take breath when they are about two-thirds exhausted.

4. Do not speak with greater rapidity than will prevent your giving a complete and perfect enunciation to each syllable; endeavor if possible to sound every letter in every word; this will compensate to a wonderful extent for loudness and vehemence of tone and gesture, and consequently husbands the physical strength both of the body in general, and the voice organs in particular. Rapidity of enunciation depends to some extent on temperament and other circumstances. Franklin says that Whitfield articulated his words so perfectly, that he could distinctly hear him at the distance of several squares, viz: Whitfield spoke from the top of the steps at the door of the court-house in Market

street, Philadelphia, west of Second-street, "and his voice was distinct until I came near Front-street, when some noise in the street obscured it, and I concluded he could well be heard by thirty thousand people."

It is said of the oratory of Jonathan Edwards, that "ere he reached the climax of his terrible appeals, the whole audience had risen up in one tumult of grief and consternation. And amid all this, there stood the calm, imperturbable man, reading on as *softly and gently* as if he were in his own study."

5. Unless the effort to speak is painful, or tiresome to the whole body, it is best, when there is merely weakness in the vocal organs, to use the voice at three or four regular times a day, by reading, conversation or declamation, *to the extent of not making an effort;* the moment you become sensible of an effort in speaking, cease, *instantaneously cease;* at each exercise of the voice, stop before you are tired; but gradually increase the time. Do not speak at one hour, or day, much louder or longer than you did the hour or the day preceding; in this way you will gradually invite the natural strength to the voice muscles, just as the muscles of the other parts of the body, when weakened by disease, regain their natural power by moderate and gradually increasing exercise. It is generally *irregular speaking* which is so injurious to public men—making no effort for a day, or week, or month, and then all at once delivering a speech, or sermon, or oration. By observing these principles, a man by speaking every day, may every day get better until he is perfectly restored; the opposite course, or even simple neglect of a slight chronic throat ailment will almost inevitably terminate fatally.

6. After delivering an address, do not go immediately

into a colder atmosphere; remain after the assembly has dispersed for five, ten, twenty minutes, or more, according to the difference between the internal and external temperature of the air. And even after having waited some time to allow the system to become cooled, close your mouth resolutely, then hold over it and the nose a handkerchief, and *then* leave the house, walking briskly for five or ten minutes, or until the blood has begun to circulate freely, then remove the handkerchief, but still keep the mouth closed until you have entered your dwelling. If practicable never ride, but always walk from the place of your public exercise, as walking tends more to prevent chilliness. These suggestions are applicable to night air all the year round, but only to cool weather in the day time. Their observance should be rigid in proportion as the weather is cold. Never retire to bed or undress within an hour of speaking or singing.

The reader will perceive that all the above suggestions under the sixth head are in reference to one principle, *the avoidance of cooling off quickly after exercises.*

There are many other points in reference to the general subject of equal importance to clergymen, but it is not practicable to present them here.

FOR CLERGYMEN.

All that I have said is to induce clergymen and others to take warning from the first slight symptoms of disease. To accomplish this, I will, in addition to those already given, present two cases; one showing how insidiously the symptoms grow, and how easily they

may be removed when promptly attended to; the other being an example of their certainly fatal tendency when long neglected.

FIRST THROAT-AIL SYMPTOMS,

As described by a clergyman, in February, 1852, (1105.)

"Eighteen months ago I noticed *the first very slight symptoms* of interference with my voice, in the collection of phlegm, obliging me *occasionally to clear my throat.* But I felt no uneasiness about the matter at that time, and never examined to see if there were any inflammation. Six months later, which was about a year ago, I began to feel, during my afternoon sermon, some *irritation* in the throat, extending down to about the top of the breast bone, with something like a *raw sensation*, which, however, would pass away during the evening.

"In the course of the summer and fall my *voice became more affected*, although still not very decidedly, but as if I had a slight cold, and there was a *deficiency in clearness* when I attempted to sing.

"I now scarcely ever have any sensation of *soreness* so low down as the top of the breast bone, but there is usually some feeling of that kind in the region of 'the apple.' There is a decided redness of the parts about the palate and of the back wall of the throat, with a decided roughness, especially of the latter, and an elongation of the uvula. There is a constant collection of phlegm, generally of a light color; of no great consistency, but sometimes having a nucleus of more substance. The tendency to clear the throat by hemming or swallowing is quite decided and frequent, but not painful nor *very* troublesome. There is no soreness in swallowing, nor any difficulty in ordinary speaking. I

can go through one preaching service without inconvenience, excepting a slight hoarseness towards the close, which remains through the rest of the day, but is not felt the following morning. So long as I practiced the indulgence of a second service on the Sabbath, which was until about six weeks ago, I found that the effects of that second service were a decided increase of the hoarseness, and some soreness felt in speaking towards the last.

"I have only occasionally been troubled with a dry tickling in the region of the voice organs, and it has then been only of a few moments' continuance. There is a redness in the tonsils and in the parts a little anterior as well as behind them. The uvula does not occasion cough or tickling, or other uneasiness, except a very slight sensation when the parts are at rest, as if something were resting there.

I have a decided *tendency* to costiveness, and usually there is something of a bad taste in the mouth on rising and *sometimes* to a considerable degree. Seldom any unpleasant feeling at the pit of the stomach."

Within two months this gentleman was able to conduct a service of an hour and a half without any felt inconvenience, and I considered him able to preach daily to advantage.

THROAT-AIL NEGLECTED.

"C. C. C., aged 40 years, married at eighteen, five children, delicate constitution naturally, but never had any seated disease until two and a half years ago, when I was first *slightly* troubled with a sore throat, this continued month after month; a slight cough came on; after several months I found that when I had been silent for sometime, I could not speak without moistening my

throat with a little water. Shortly after I raised a small quantity of blood, and generally had a severe coughing spell night and morning, but never at all through the night, and very little through the day. These symptoms continued the same until ten months ago, when I had in May another attack of spitting blood, which has since become more frequent, until at present I expectorate blood mixed with heavy yellow matter. Now my cough troubles me through the night. The phlegm raises very easily, almost without an effort, it is dark and greenish, gummy and heavy. My bowels for several months are much relaxed, and there is a feeling of weakness about them. Have had night sweats at times for six months, and have them now towards morning. I have pain and weakness in my limbs; a little fever sometimes. Have been quite irregular for a year, with a great deal of pain in both breasts and sides, changing often, except that in the centre of my breast from the throat down, where appears to be the seat of my disease, and often when I cough, the soreness flies from that point to both breasts. My stomach is weak; the food sometimes sours, and is thrown up."

Such is the description of the commencement, progress, and termination of a *slight* affection of the throat. Slight indeed at first, but terminating in two years in the decaying stages of consumptive disease.

ASTHMA.

Its great distinguishing symptom is a difficulty of breathing, coming on at various intervals of days, weeks, months, years. The air is in the lungs but can't get out, swelling, distending, and causing an intolerable feeling of oppression of suffocation. The sensation arising

from not getting fresh air into the lungs and that which is caused by not getting it out is the same. It is a *smothering*. A sense of *suffocation;* of impending death. Of this, Whitfield died.

A fit of asthma usually comes on about midnight, from eleven to two o'clock. The patient is aroused from sleep with difficult breathing, and a most distressing feeling of tightness across the breast which impels him to sit upright in bed, the head leaned forward, the arms stretched out, the shoulders raised, the mouth open, the eyes protruding, the breathing heavy, loud labored and wheezing, the feet and hands cold, and of a deadly dampness. The patient speaks by signs or in monosyllables. He feels as if he could not spare the time to utter the shortest word. He has not breath to do it. The attempt to do so in a severe attack, would in reality almost kill him. A very strong lunged man may count a hundred above his breath, but it wearies an asthmatic more to speak a single word. Showing that at the time he is living upon a hundredth part of air less than a person in health, of course relief or death must take place in a very few hours.

While an attack is present, a most distressing cough comes on, dry and harassing at first beyond description; but it cannot be controlled, although it is worse than having to talk, and with a desperate energy all the strength of the system is summoned to the effort, but when once begun, there is no stopping it, and at last with the most inconceivable and utter prostration the patient falls down in hopeless helplessness, scarcely knowing whether death or life is to be the issue of the next moment. When death does not take place, the symptoms begin to abate about two o'clock in the morn-

ing, by free urination and by the phlegm which *caused the cough* and which *prevented the pent up air from passing out*, loosening a little, then more and more until large mouthfuls are expectorated at a time, and by early day light the patient is sound asleep. At length he wakes up, spends the day in comparative comfort with the prospect, however, of a similar night, but not so violent, the attacks become more and more moderate until the patient regains his usual health, and in a few days after, one would not suppose any thing had ever been the matter with him. And thus he remains until a fresh cold, a torpid liver, constipated bowels, or over feeding calls him to a new reckoning, and the bill, the penalty, like a bank notice, "*must be paid.*"

I consider asthma as an incurable disease. That is, incurable by artificial means. Children who have it sometimes grow out of it. It sometimes wholly disappears during the marriage state. At the "turn of life" in women it occasionally leaves the system, not to return.

When I say that asthmatic disease is incurable, I mean only that the system will be always liable to an attack. A fit of asthma cures itself generally. Like a common cold, it runs its course just as measles or small-pox, if nothing is done until it is fully established. But if attacked in the very beginning of its onset, asthma, like a common cold, can be cut short off. Persons subject to asthma have generally some feeling a day or more beforehand, which warns them of its approach, and if proper means are at once employed, the attack is almost, if not entirely forestalled. But when the person delays, in the hope that it may not come on, that it may pass off of itself, as it sometimes does, but not generally,

then they have to suffer, and sometimes die for their inattention.

All persons are liable to take colds as long as they live; that liability may be very greatly diminished, but never can be wholly got rid of. In the same manner an asthmatic person will be always liable to an attack of asthma, but, as in the case of a common cold, proper care and attention, and habits of life, will indefinitely postpone both. In this sense only is asthma curable—it may be indefinitely postponed. By regulating the general system, by using means to make it less susceptible to taking cold, by suitable attentions to the skin, the feet, the condition of the stomach, liver and bowels, a person who is liable to an attack every few weeks may not have one in five years. This I have succeeded in doing wherever a patient is found willing to use systematic efforts for the accomplishment of the object.

There is one form, which may be called *Chronic Asthma*, not amenable to remedial means. It is a kind of perpetual asthma, seldom very violent, never wholly absent. The person always feels stopped up or bloated. Such patients are generally of full habit. They are always taking cold or getting *bilious;* constipation, snuffling of the nose, discharges of "thickish stuff" from the nose and lungs; tongue furred, dry, whitish, or of a red or yellow tinge; no appetite, even a loathing of food. In the intervals of a cold or biliousness these symptoms are not present, except in part and to a slight extent; but all the time there is a distressing breathlessness. Going up a few steps, walking a little fast, causes them to pant for breath; and often in walking along the street at a moderate gait, they are compelled to stop to get breath. Looking so well all this time,

and not being willing to be considered invalids, they employ themselves in looking around while thus panting to get breath, as if they were expecting some persons, or were examining an object at a distance.

This is a most distressing affection, because it is always present in a greater or less degree, and is aggravated by so many slight causes. Much may be done to mitigate this form of asthma, and make it bearable, but it lasts with life.

It may be of some satisfaction to the asthmatic to know that it does not destroy life soon, except now and then. Usually asthmatic persons live to the age of fifty and sixty years or more, with good health between the attacks. It is generally an inherited disease, not always. Asthmatic people do not die of consumption, at least I have never known a well authenticated case of the kind. Consumptive persons usually recover when asthma supervenes, provided there is no serious disease in other important parts of the system. I consider asthma curative of consumption. In consumption the air cannot get into the lungs, in asthma it cannot get out in quantities sufficient to answer the purposes of health and life.

A NEW CLASS OF CASES.

Applications are made to me by persons who have one or all of the following three complaints:

1. Some slight affection in the throat;
2. Cough more or less troublesome;
3. Pains of various kinds and degrees about the chest.

But in connection with one or more of these ailments, which indeed are slight of their kind, there are symptoms of another character more or less annoying, far more dis-

tressing than the three first named. I will name and number the more prominent of these symptoms, not meaning that any one person has them all at one time; but the most of them are present in the course and progress of the disease, with varied degrees of aggravation.

1. Feet uncomfortably, painfully cold.
2. Pit of stomach has a raw, burning, sore or heavy feeling.
3. Spirits more or less depressed all the time.
4. Frequent feeling of chilliness.
5. A sensation of discouragement.
6. Oppressed with forebodings of the future.
7. Difficulty of mental concentration.
8. Pain or weakness in small of back.
9. Swelling or tight feeling over the stomach.
10. Great thirst, causing fullness or oppression if satisfied.
11. Food sours in the stomach.
12. Pure water causes sourness sometimes.
13. Food is sometimes retched up or spit up.
14. Distressing gnawing or sinking at stomach.
15. Frequent sensation of sinking or faintness.
16. Alternate flushing and chilliness.
17. Disposed to sweat on falling asleep.
18. Wandering, shifting pains all over the body.
19. Burning spots on top of head, shoulders, back and elsewhere.
20. Sleep restless, unsound, unrefreshing.
21. Disturbed by disagreeable dreams.
22. Bad taste in mouth of mornings.
23. Lumpy feeling in throat and at edge of the ribs.
24. Burning feeling in throat or along breast bone.
25. Great deal of wind on stomach.

This long array of symptoms arises from a single form of disease, and are often complicated with slight affections of the throat and lungs, and strange as it may appear to the general reader, I look upon such cases as more hopeful of cure than when the lungs or throat alone are decidedly affected, inasmuch as other parts of the body divide the violence of the disease with the lungs. Sometime ago I saw a tall spare gentleman, 1104, aged 38; had been ailing fifteen years; symptoms became gradually worse until he had to give up his business, and when I saw him he had been confined to his home for some weeks, not being able to go from one room to another without discomfort, causing cough, chilliness, fatigue. He had constant night sweats, great constipation, unsatisfying sleep; large expectoration of whitish mucus, and greenish yellow thick matter; coughing it up day and night, a teacupfull perhaps in twenty-four hours; appetite variable and poor; pain, heaviness, weight, load in stomach all the time; pain in the forehead, temples, between the eyes, aching of the limbs, great thirst, extraordinary chilliness, pulse weak and very rapid, spirits depressed, had fallen away very much.

This was certainly a formidable array of symptoms, but considering their character and connection, I expressed an opinion that there was greater hope of arresting the progress of the disease than if the lungs only had been affected.

I saw him next, fourteen days after my first visit. His appetite was regular and good; his sleep satisfactory; constipation removed, night sweats entirely gone, walked half a mile out of doors daily in March, with comfort and advantage; expectoration entirely changed, and cough very much abated, although nothing had

been done expressly for it, and the only remnant of pain was in the stomach, and even that was almost entirely gone, and the future looked hopefully bright.

So much for having a disease divided, and entering courageously upon a course of treatment, however numerous may be the symptoms. But let not the reader imagine, that with similar symptoms, he would derive a like benefit, and so speedily. Such an improvement does not take place sometimes in the practice of months. In many cases not at all, much depending on the energy of the patient, the facilities of good nursing, and affectionate, willing attentions. And particularly do I wish the same thing to be understood in reference to all the cases of remarkable improvement and restoration which have been already given. The vast majority of cases, when they do get well at all, do so by slow degrees, through various drawbacks, hindrances and discouragements; and at a great expense of time, of patient attention, and of energetic determination to follow implicitly the directions which are given from time to time. It is no child's task to get rid of diseases which have been burrowing in the system for years and years. A constitution which has for many months been subjected to a pulling down process, is not to be repaired in a day or week, or month, by a few drops or pills. If built up at all, it is to be done by a systematic effort, long continued, to invite back the strength, to husband its resources, more by natural and safe means, than by uncertain and violent and frequent medicines. In such cases, physic is an occasional aid, nothing more. Let the invalid consider these remarks well, and repress all extravagant expectations of instantaneous effects, of speedy cures, unless he applies within the first month,

or two of the first appearance of his symptoms, then indeed, *but only then*, may a speedy and permanent restoration to substantial health be confidently anticipated in affections of the throat and lungs.

UNSEEN CASES.

A large proportion of the persons for whom I have prescribed, I have never seen, or have seen but once. Perhaps the majority of the cases already given in these pages is of this character. Any one who fabricates an article from a pattern furnished, soon learns to work without that pattern. There is in the diseases to which this book is devoted a routine course of symptoms, a kind of family likeness. It is true, that scarcely any two cases occurring in a month, are in all respects the same; age, sex, constitution, habits of life, all modifying the symptoms, aggravating some, ameliorating others, but the great general, prominent, distinguishing features are similar, requiring a similar general treatment. In acute, in critical diseases, it is important that the physician should see the patient daily, sometimes hourly; but in those of a chronic character it is widely different, as changes take place slowly, and are not of a speedily threatening character. The comforts, conveniences, facilities of home, very far outweigh any advantage to be derived from the daily inspection of a physician. And it is my hope that hereafter, as heretofore, by means of my general publications, and by private instructions adapted to individual cases, as their varying circumstances may require, I may be able to place within the reach of many whom I may never see, the means of cure, and thus be of some little use, now and then, to the world I live in. It is certainly more satisfactory to first

see a person desiring advice, and I prefer it, when it can be done without inconvenient expense, trouble, or exposure, but this advantage is often more than counter balanced by the loss of time occasioned by persons making preparation to leave home, sometimes requiring weeks if not months, the disease in the meanwhile infixing itself more deeply, and now and then, in the delay, passing the Rubicon of life. Therefore when persons cannot come at once, the better plan is to place themselves under treatment without delay, and make their visit at some more convenient season afterwards. The great fatality of throat-ail and consumptive disease, as in cholera, is in the delay of the proper attentions, and not in the nature of the ailments themselves. This sentiment should *never be forgotten.*

TUBERCLE.

I am anxious to compensate the reader for any time he may have expended in perusing this book, although he may never come under my care. I think I may do so by divesting him of some of the terror of tubercles under which he may very possibly suffer. Many persons seem to think, that if they have tubercles on the lungs, death is inevitable. It is true, that tubercles are the seeds of death, but in a qualified sense. They do not always spring up. They must soften, ripen and rot, else they may exist in the lungs for life without doing any appreciable injury. They are made to decay by a succession of bad colds, by long continued weakening sickness, or discharges from the body, by riotous living, by irregular practices and habits of life, by for bidden indulgences. These things can be avoided by all, and to those who have the strength of will to avoid

them, tubercles have no terrors. HEALTH IS A DUTY: a duty which all can perform. Perhaps there is not an exception in a million. Let the reader discharge that duty by avoiding what I have named, and in addition by practicing regular, systematic habits of life, studying and striving to be temperate in eating, in drinking, in sleeping, in exercise, in business; maintaining a quiet, steady, unanxious, ungrasping, cheerful frame of mind: these are antidotes to tubercles; under their influence tubercles can never ripen, it is a medical impossibility.

Tubercles attack various parts of the body, each part giving a different name to the disease.

Tubercle in the lungs, is consumption.

Tubercle in the neck, is king's evil.

Tubercle in the joint, is white swelling.

Tubercle in the back bone, induces spinal disease.

Tubercle in the hip joint, is hip disease.

Tubercle in the loins, is lumber abscess.

Tubercle in the abdomen, or rather in the mesenteric glands, is called in the South, Negro consumption, the proper name is Tabes Mesenterica. It causes death by the glands of the abdomen hardening and preventing the nutriment which is derived from the food, from passing into the general circulation, hence such persons waste gradually away to skin and bone, painless and without cough or expectoration often, to the very last hour.

Tubercle in the bowels is a frequent cause of chronic diarrhœa, especially in high livers, such as eat high seasoned food, and drink freely of wines and stronger liquors. Such usually die in the prime of life, which ought to be between fifty and sixty years of age. It is almost always fatal.

Tubercle in the lining of the nostrils of a horse, is called "*glanders.*"

Tubercle in the brain causes symptoms varying according to the locality of their deposite. Miss Ophelia W—, a young lady of rare excellence of character, and of great mental promise, was attacked with this fatal form of disease. Her first symptoms were extraordinary mirthfulness and talkativeness, succeeded by a distressing silence for weeks together, and an expression of countenance so desolately sad that it was painful to contemplate it. And thus she died in her nineteenth year. For this disease there is no remedy.

Tubercles are not necessarily fatal or even appreciably injurious in the lungs, for in numberless instances they remain dormant for life. In fact, few persons die after forty years of age of any disease, in whose lungs are not found tubercles which have remained innocuous. It is only when made to soften, ripen, and cause destructive decay by repeated bad colds and weakening diseases, that they become so ruinous to human life. Nor does it follow that their softening must necessarily destroy life, it is their nature, like that of a common boil, to soften, increase, turn yellow, burst, discharge, and then heal up, as it does in innumerable instances in the lungs, in white swelling, in king's evil; and the scientific method of conducting them all, is to treat them as a constitutional disease. Their nature is, when thus aided, like many other diseases, to cure themselves, and that they do so without any aid, spontaneously, no physician thinks of denying. But the misfortune is that nature is not let alone, she is thwarted at every turn, the invalid turns at once to medicine, to warm rooms, to bundling up the body, to forcing himself to eat, to repressing his

cough, to torturing his body by all sorts of contrivances, tiring some muscles, over-straining others, forcibly constraining a third class, and interfering with the circulation of the whole, for it must be apparent to the least thinking reader, that if one spot of the body is pressed upon, the blood is kept from flowing through that spot, it stagnates there, and instantly there is a tendency to putrefaction; water itself becomes putrid if it is kept from motion, and so with the blood, and one drop of blood being tainted, aids that much towards tainting the whole mass, and thus it is that as far as the lungs are concerned, braces of every description must under all conceivable circumstances be injurious in their tendency.

Tubercle and cancer are much alike, both begin by a hard lump, both are separated from depraved blood either by exudation, deposition, or secretion, the great difference is two fold.

Cancer is organized, living; tubercle is unorganized, lifeless. Cancer cannot but be fearfully painful. Tubercle may be painless. Tubercle and cancer are not the beginning of the disease, they are the result of depraved blood. Consumption begins in reality before tubercles are deposited, and of course before cough commences, and it is before there is any cough, before there is any tubercle, that consumption is to be most confidently attacked, and *then* its arrest and perfect cure is as certain as any thing can be. The question then arises, how can the existence of consumptive disease be discovered in these impalpable beginnings?

Imperfect circulation of the blood;

Imperfect respiration of the air;

These both must and do always exist for some time, before the blood becomes impure, before the tubercle is

deposited, before the cough takes place, before softening occurs, &c.

The pulse and the breath must therefore be watched over. But there is no invariable rule for the pulse, some persons seem to have good general health with a pulse of fifty in a minute. I recently received a letter from a gentleman saying, "My pulse formerly averaged sixty-eight beats in a minute, but in 1847, in a passage from Hong Kong to Amoy in China, feeling a little unwell, I found it to be forty-five, at which it has continued ever since, full and strong, and my general health is good."

On the other hand persons may be in good health with a pulse which beats eighty times in a minute; but these are both exceptions; as a very general rule I do not feel satisfied if the pulse is over seventy-two; from sixty-eight to seventy-two is the general number of persons in the enjoyment of substantial health, and of the two, I feel safer to have it sixty-eight in men of mature age, and two higher in women.

The pulse then being variable, there is no standard in reference to health of unvarying applicability. It must therefore be taken in connection with the breathing, not as to the number of respirations in a minute, for although grown persons in good health breathe about eighteen times in a minute, yet good health may be present at any number from fourteen to twenty-two, but any number over eighteen, is suspicious. The pulse and the breathing should be taken when the person has been sitting quietly some half an hour, and not within two hours after eating a regular full meal, for motion and digestion excite both the pulse and the breathing. A person can never accurately time his own breathing, for

the moment his attention is drawn to the subject it becomes unnatural; it must therefore be counted by a second person when the subject is wholly unconscious that the observation is being made.

A good general rule of health is when the breathing multiplied by four, gives the pulse of the same individual. Thus a breathing of seventeen in a minute, gives sixty-eight pulsations in a minute. But when the multiplication exceeds eighty, there is danger. The number of pulsations and the number of respirations per minute, being different in different persons without impairing the health under certain limitations, that is, not over eighteen and seventy-two, the action of the lungs must be estimated in some other way which is uniform, which has one standard to *every class of circumstances.*

Spirometry meets these conditions, and with the pulsations and respirations, constitutes an unfailing test. It is therefore that I consider it one of the most valuable ideas of modern medicine. As previously explained, it is the measuring of a man's breath. The common sense and ingenuity of the people has led them to experiment on the best method of doing this, and to conclude that those men are not likely to die of consumption who have large chests. Why? Because the larger the chest, the more lungs, the more air. The same remark is made of good runners, good divers, of those who can count a hundred audibly at a single breath, holding the nose all the time with the thumb and finger, and being careful not to draw in more breath through the lips during the experiment. Others have made the measurement by competition as to who could blow out a candle at the greatest distance. A person who can blow out a candle fairly burning, not near a wall, at the distance of

thirty inches between the candle and the mouth, may be said to have a good pair of lungs. But all these are only approximative, something is due to tact, something more to practice, and after all there is an unsatisfactory indefiniteness. In spirometry these objections do not apply. It is a mathematical measurement designated by figures, which answer to a certain set of conditions. The amount of air capable of being expired from a man's lungs is accurately measured to a single cubic inch or half inch. Different persons require a different amount of air, but these are regulated by nature herself, who modifies them by certain fixed proportions.

Sex.	Age.	Breathing.	Pulse.	Height.	Weight.	Capacity
Male	40	17	68	6 feet	140	262

These seven correspondences occurring in one man, are unfailing indications of the full healthful condition of the lungs, and when the pulse and breathing are steadily over these and the capacity is under in such a man for a month or two, or more, *then are the foundations of Consumption being laid*, and infallibly so as far as my experience has gone. But these three deviations are seldom if ever alone. Notes of alarm are sounded in other parts of the empire of life. Some two or three, or more of the forms of ailments named on page 262, are present in a degree more or less decided, some shortness of breath, some weakness in legs and knees in ascents, a little decline in flesh either in weight or firmness of feel, some tendency to chilliness not usual, a growing susceptibility to take cold; sleep not as satisfactory as it used to be; not that substantial relish for food as in other years, and not as perfect comfortableness after meals; perhaps the skin is dry, or there is a

feeling of feverishness at times, a bad morning taste, and a whitish or rough tongue.

I hope the reader will not misunderstand what I have said. The last symptoms enumerated are of themselves no more the sign of founding consumption than they are of a north-wester, for if they were let alone, and every atom of food were let alone for a day or two, they would in myriads of instances disappear of themselves. They must be in connection with a wrong condition of the pulse and breathing and lung measurement. And more, these things must co-exist for weeks together, if not months. What I mean to say is this: that if these circumstances are present in a marked degree all the time, for two or three months, then is it as certain as any thing else in medicine is certain, that such a person is inevitably falling into consumptive disease, unless mild, moderate, safe and continued means are taken to *correct* these conditions and *eradicate* the causes of them. And it is to the detection of, and attention to these early indications of approaching consumption that all my published efforts are directed. And if I can only succeed by these efforts, continued for a life time, in securing an early attention to these things on the part of any considerable number of my countrymen, then shall my own decline towards the grave be cheered with the reflection that I have left a useful mark behind me. For it is impossible of denial, that if these things were properly regarded *in their beginnings*, Consumption would be a rare disease, instead of being so common, that perhaps never an eye shall trace this line which shall not one day fill with tears by reason of the ravages of this same universal scourge.

I have no sympathy with those who hold out induce

ments to the common multitude, that by their medicines, their contrivances, or their skill, the cure of fixed Consumption is an event of common occurrence, for in any given case it is possible, not more; while it is in the highest degree probable in any given case, that such case will die, and that at no distant day. A cure, that is, a permanent arrest of unmistaken Consumption, ought in all cases to be striven for, resolutely, hopefully, to the last day of life, ☞ but assurance of probable success in any instance is a wrong done to a weak and trusting fellow man.

CLUSTERS OF TUBERCLES.

I here give the reason for the statement just made, that the permanent arrest of consumptive disease in its advanced stages should be always striven for to the last. To a person in actual Consumption, what I am about to say will afford more solid, rational comfort and encouragement than will repay him for the trouble of reading this book. And knowing as I do the full truth of the statements, and which too will be corroborated by any intelligent physician, I will make them in a manner not capable of misapprehension, every word has its full natural meaning, there are no mental reservations, nothing to be "understood" in the sense of the agreements of nominatives and verbs, so inscrutable and perplexing to the young grammarian.

I wish to direct very special attention to these remarks in reference to Consumption, since many have been hastily abandoned, and have died in consequence of their neglect, who otherwise might have lived.

A person never dies from a first or single attack of Consumption. Persons generally get well of one, two,

three, or more attacks of this disease; but each attack weakens and impairs the constitution, and these continuing to follow one another, there is at length a wreck and ruin of the whole. I mean by an attack of Consumption, as follows:

From causes previously named, tubercles, which may be termed the seeds of Consumption, form about the lungs: not over the lungs generally, but in small patches or clusters, as large as a half dime piece, and many times larger; between these patches the lungs are healthy and sound; these patches of tubercles would produce no inconvenience, if they did not ripen; that is, enlarge, turn yellow, and run together a liquid mass, as small shot if laid side by side on a shovel in the fire, will run together, when melted. When this ripening process commences, by the tubercles beginning to increase in size, preparatory to softening, the person begins to cough more, and he thinks he has taken a fresh cold; as the mass becomes more liquid, it moves more or less by change of position, or by the air, in breathing, passing through it; this motion causes it to act, as any other foreign body would act in the lungs, a crumb of bread for example; that is, produces a tickling sensation, which causes irrepressible cough; this cough is an effort of nature to rid the lungs of this foreign, irritating, inflaming substance; it is an effort of nature to cure the patient; as soon as it is all out, the cough subsides, and the patient begins to get well; just as a boil begins to get well when all the matter is removed from it, *and never before.* Tubercles ripen in spots, as berries do in a berry patch. But, unfortunately, no sooner is the patient rid of one ripening process, feels better, and begins to hope anew, when another cluster begins to ripen, and the same pro-

cess has to be gone over again; and thus it is in ceaseless succession for months and even years sometimes, until the poor suffering body is wearied and worn to a skeleton, and death at last ends the tedious conflict.

This is the case where there are a number of clusters of tubercles, in different parts of the lungs. But sometimes, from causes unknown to us, there is but a single cluster, while the lungs are in every other part perfectly sound. In a case like this, a person goes through all the symptoms of regular Consumption, more or less violent, according to the size of the patch, and strength of his constitution; and when the last remnant of matter is coughed up, the cough ceases, the system gets repose, gains strength, and the man gets permanently well, because there is no other cluster of tubercles to carry him through a similar process. The most of constitutions are able to go through several such attacks; any one, on reflection, will find that those whom he has known to die of Consumption, did not do so until they had gotten better and worse many times, and the appearance of the lungs after death confirms this view of the case.

From this we may see the propriety of *resolutely battling* with Consumption *to the very last*, in the hope that each may be the last cluster to contend with; for very often, even if a final cure is not effected, a year or two more of life is added, in a considerable degree of healthfulness and comparative enjoyment. And although I would not say anything to excite strong hopes of life in a person who is *already confined to his room and bed* from Consumption fixed in the system, yet what has been stated in reference to *clusters of tubercles*, should not be lost sight of, as the following case will show, taken from the London Lancet, p. 185, March 1852, giving a report

of a medical lecture by T. Thompson, M. D., F. R. S., where the patient having all the prominent marks of Consumption in May, 1848, was treated accordingly, and to all appearance was cured, and remained so for two years, when she died of bilious diarrhœa. There was naturally a strong desire to see her lungs, to decide whether she did really have Consumption, and whether or not the disease had been permanently arrested. The lungs were taken out and carefully preserved by Dr. Quain, in London, and may now be seen at any time as "*an example of what in conventional language may be termed a* 'CURE' *of Consumption in the* THIRD STAGE." The full account is given in the "Transactions of the Pathological Society for 1851–2." The lungs have five lobes or divisions, three on the right side, two on the left; nearly the whole of the upper lobe of the left lung was destroyed by tubercular disease, but it was so contracted as to present a cavity about the size of a large walnut, containing about half a teaspoonful of a *whey-like fluid.* The left lung displaced nine inches of water, while the right lung displaced twenty-three inches. This shows how large a portion of the lungs may decay away, and yet recovery may take place, and good health be enjoyed. Giving ocular proof, as Dr. Quain observes, "of the great extent to which the ravages of Consumption may extend, and yet be stayed."

The whey-like substance contained in the cavity, is in the nature of a lubricant thrown out by nature to keep the parts from becoming rigid and dry, and which may keep up through life, in persons who have been cured, some cough and expectoration, which in such a case are of healthful tendency.

The reader has perhaps had opportunities of noticing in his own sphere of observation, proofs of the fact stated above, that persons do not die of first attack of Consumption, in dialogues of this kind: 'How is such an one? He is quite well now, but sometime ago we thought he was going into a decline.' Such cases are where the cluster of tubercles was single, and limited; they softened, decayed away, emptied by cough and expectoration, and a little fever or hectic; a cavity was left, which being small soon healed up, and health was restored; and dozens of such attacks may occur before the lungs are sufficiently impaired to cause loss of life. Therefore

It is rational and right to make determined and hopeful efforts to arrest Consumption in every stage.

TUBERCULAR DISEASE HEREDITARY.

Consumption, scrofula, insanity, are hereditary diseases, as much so as peculiarities of constitution or personal appearance.

"A peculiar thickness of the under lip has been hereditary in the imperial House of Hapsburg, ever since the marriage, some centuries ago, with the Polish family Jagellon, whence it came. The thick and hanging under lip, is in this case, alike the sign of royalty and animalty, all such persons being dear lovers of the good things of this life, especially of good eating. In the English royal family a fullness of the lower and lateral parts of the face is conspicuous in the portraits of the whole series of sovereigns, from George I. to Victoria, and has been equally marked in other members of the family. The females of the house of Gordon have long been remarkable for a peculiarly elegant conformation of the neck. The Clackmannanshire Bruces, who are descended from

a common stock with the famous Robert Bruce of Scotland, are said to have that strongly-marked form of the cheek bones and jaws which appear on the coins of that heroic monarch, as it did in his actual face when his bones were disinterred at Dumfermline, about thirty years ago. The prevalent tallness of the inhabitants of Potsdam, many of whom are descended from the gigantic guards of Frederick I.; the Spanish features observable in the people of the county of Galway, in which, some centuries ago, several Spanish settlements were made; and the hereditary beauty of the women of Prague, are well-known facts which have frequently attracted the attention of chronologists. The burgesses of Rome (the most invariable portion of every population) exhibit at the present day precisely the same type of face and form as their ancestors, whose busts may be seen carved in relief on the ancient sarcophagi; and the Jewish physiognomies portrayed upon the sepulchral monuments of Egypt are identical with those which may be observed among modern Jews in the streets of any of our great cities."

The great mass of consumptive persons inherit it from their parents: from fathers who were impregnated with *disease* before marriage; from mothers who never had any constitution, having been brought up to do nothing but read novels, lounge about and eat during the day, and spend their nights in crowded, heated rooms; who were guiltless of ever having used a broom, or baked a loaf, or broiled a steak, or arranged their own rooms, or darned a stocking, or made a dress; but who would sit by the hour and allow a mistakenly loving mother of twice their age, wear out her life in doing these same things for her, while she is doing nothing for herself but sowing

the seeds of a blasted constitution which is to make her a puling invalid for life, not however to '*break out*' until a short time after marriage, when having no stamina of constitution, she dies in her first confinement, or lives along only to give birth to a degenerate, effeminate race, who live a brief day of pain and sickliness and suffering, and die before they pass their "teens," or very soon after.

But there is even a worse picture than this to be drawn from the actual life of these frail scions of a better stock. In many instances there is not stamina enough for reproduction, as if nature, with instinctive providence, stepped in to save the race. Soon after marriage, if not revealed before, ill health appears. This renders the young wife unfit to discharge her domestic duties; some one must be obtained to supply her place, as she now has no affectionate mother "to slave" for her. In addition, the young husband is naturally disquieted at his wife's suffering from sickness, his attention is drawn away from his business, a physician is called in, and a yearly bill is the consequence. These different items become a serious drawback on a young man's income. He begins to see that he is not laying up any thing, next, that it is as much as he can do to make "*both ends meet.*" He now begins to think that he is spending the prime of his life to no purpose, and for the first time the terrible reflection flits across his mind, "It is not worth while for me to attempt to get rich." Then he's lost! When once a young man is discouraged from his ambition to be rich, I say he is lost—that is, lost to high purposes, to manliness, to eminence, position, influence. A few, it is true, are content *to live along*, without plunging into deeper depths, but the majority, perhaps the

great majority, losing their ambition, other greater losses follow, of pride, of self-respect; then comes the want of excitement, to be gratified by other *leaks* from the income,—the theatre, the circus, the negro songs, the society gatherings, the porter bottle, the lager beer, the gin sling, the brandy toddy, and the drunkard's grave. And all this from having a sickly young wife, made sickly by being brought up to do nothing, at the expense of a mother's life-long slavery. This is not imagination. It is an uncolored picture of a sad reality. My practice brings me in contact with persons whose histories are similar to the sketch I have given, so much so, that in being counselled as to the proprieties of marriage on the part of that worthier class of young men, who have to depend on themselves in the world, it has been a standing advice: Of two young women, one of a pale, frail look and form, with ten or twenty thousand dollars, the other with nothing but a strong healthful body, and a *will to work*, by *all odds* take the latter, for should they both live fifteen or twenty years, the former will spend and be a drawback to more than the amount she brought, while the latter will save, if indeed she does not do something towards making that amount, with the infinite difference between a family of puny, sickly, complaining children, and one of cheerful, hearty healthfulness. For aside from criminality, no more poignant pain pierces a parent's heart than to see a darling child suffering from a diseased body, to know and feel that for life long it must painfully strive in a hard world, where it is often a struggle for subsistence even with good health, but to have to engage in these struggles in a body of pain and feebleness, and suffering, what parent's heart can contemplate it without the saddest of all emo-

tions! Therefore, if the reader wishes to have no part nor lot in fathering upon society a family of children whose constitution is blasted at the root, let such reader make health a personal duty, and take care also, that the companion for life have substantial health and good principles, if nothing else, not even a penny's dower, not a second coat.

Consumption and insanity, and idiocy are transmissible: are given to the children by the fault of the parents. And it is a fearful fact which statistics verify, that more than two-thirds of all idiotic children are born of parents, one or both of whom would get drunk. No man is so perfectly like a fool as when he is completely drunk. At such times the animalties of our nature are rampant, and the type of "fool" is indelibly fixed upon the future being. This does not happen to the habitual drunkard only. It happens in the act, if either parent had never been drunk before, and should never be drunk again. By all the holy considerations of a parent's nature, let this fact be never forgotten through life.

FOOD.

As the preservation of health, and recovery from all forms of disease have inseparable relations with what we eat, several tables of food are given for reference.

FOOD, its DIGESTIBILITY, NUTRITIVENESS and time required for its DIGESTION.

The following table is one of very general interest and utility. The food easiest digested, does not always contain the most nourishment; nuts, for example, and oils are more nutritious than boiled rice, yet the latter is digested in one hour, while the former require several hours. Food which is most nutritious is marked the

highest; wheat, for example, is marked ninety-five, because out of one hundred parts, ninety-five, that is, 95 per cent. of it is taken up by the nutrient vessels, and applied to the nourishment, and support, and strength of the system.

The article of food most difficult of digestion, is marked one, the easiest, one hundred. For the table giving the time in which food is digested, the world is indebted to Dr. William Beaumont, of St. Louis, Missouri, to whom was allowed the rare opportunity, never thus afforded to man, before or since, of looking into the stomach, while digestion was going on, watching its progress from hour to hour; hence his statements are taken for granted by all eminent medical writers throughout the world. The orifice, which is still open, was made in the stomach of Alexis St. Martin, who is yet living, on the sixth of June, 1822, by the accidental discharge of a musket, loaded with powder and duck shot.

Dr. Beaumont has informed me that it was his intention to visit St. Martin in Canada, and make further experiments. The lovers of science throughout the world and throughout all time, would be laid under still greater obligations to this gentleman, if he fulfils his intentions, for a thousand years may pass without repeating the rare opportunity.

In the following table the digestibility of oils, means the time at the end of which they pass out of the stomach.

Boiled rice and soused pigs' feet being the easiest of digestion, that is, soonest prepared to leave the stomach, are marked in the last column, one hundred; they are digested in the shortest time, that is, one hour. While fresh beef suet boiled, requires five hours and a half.

TABLE OF FOOD.—No. 1.

NAME.	Mode of preparation.	Time of digestion.	Digestibility 100 easiest.
Aponeurosis	boiled	3	33
Apples, mellow	raw	2	50
Do. sour, hard	do.	2 50	35
Do. sweet, mellow	do.	1 50	54
Barley	boiled	2	50
Bass, striped, fresh	broiled	3	33
Beans, pod	boiled	2 30	40
Do. and green corn	do.	3 45	26
Beef, fresh, lean, rare	roasted	3	33
Do. do. do. dry	do.	3 30	28
Do. do. steak	broiled	3	33
Do. with salt only	boiled	2 45	36
Do. with mustard, &c.	do.	3 30	28
Do.	fried	4	25
Do. old, hard, salted	boiled	4 15	23
Beets	do.	3 45	26
Brains, animal	do.	1 45	57
Bread, corn	baked	3 15	30
Do. wheat, fresh	do.	3 30	28
Butter	melted	3 30	28
Cabbage, head	raw	2 30	40
Do. with vinegar	do.	2	50
Do.	boiled	4 30	22
Cake, corn	baked	3	33
Do, sponge	do.	2 30	40
Carrot, orange	boiled	3 15	30
Cartilage, gristle	do.	4 15	23
Catfish, fresh	fried	3 30	28
Cheese, old, strong	raw	3 30	28
Chicken, full grown	fricassed	2 45	36
Codfish, cured dry	boiled	2	50
Corn (green) and beans	do.	3 45	26
Custard	baked	2 45	36
Duck, domesticated	roasted	4	25
Do. wild	do.	4 30	22
Dumpling, apple	boiled	3	33
Eggs, fresh	hard boiled	3 30	28
Do. do.	soft boiled	3	33
Do. do.	fried	3 30	28
Do. do.	roasted	2 15	44
Do. do.	raw	2	50
Do. do.	whipped	1 30	66
Flounder, fresh	fried	3 30	28
Fowls, domestic	boiled	4	25
Do. do.	roasted	4	25
Gelatin	boiled	2 30	40
Goose, wild	roasted	2 30	40
Heart, animal	fried	4	25
Lamb, fresh	boiled	2 30	40

TABLE OF FOOD.—No. 1.—*Continued.*

NAME.	Mode of preparation.	Time of digestion.	Digestibility 100 easiest.
Liver, Beef's, fresh	boiled	2	50
Marrow, animal, spinal	do.	2 40	37
Meat and Vegetables	hashed	2 30	40
Milk	boiled	2	50
Do.	raw	2 15	44
Mutton, fresh	roasted	3 15	30
Do. do.	broiled	3	33
Do. do.	boiled	3	33
Oysters, fresh	raw	2 55	34
Do. do.	roasted	3 15	30
Do. do.	stewed	3 30	28
Parsnips	boiled	2 30	40
Pig, sucking	roasted	2 30	40
Pig's feet, soused	boiled	1	100
Pork, fat and lean	roasted	5 15	19
Do. recently salted	boiled	4 30	22
Do. do.	fried	4 15	23
Do. do.	broiled	3 15	30
Do. do.	raw	3	33
Do. do.	stewed	3	33
Potatoes, Irish	boiled	3 30	28
Do. do.	roasted	2 30	40
Do. do.	baked	3 20	40
Rice	boiled	1	100
Sago	do.	1 45	57
Salmon, salted	do.	4	25
Sausage, fresh	broiled	3 20	30
Soup, barley	boiled	1 30	66
Do. bean	do.	3	33
Do. beef, vegetables, and bread	do.	4	25
Do. chicken	do.	3	33
Do. marrow bones	do.	4 51	23
Do mutton	do.	3 30	28
Do. oysters	do.	3 30	28
Suet, beef, fresh	do.	5 30	18
Do. mutton	do.	4 30	22
Tapioca	do.	2	50
Tendon, boiled	do.	5 30	18
Tripe, soused	do.	1	100
Trout, salmon, fresh	do.	1 30	66
Do. do.	fried	1 30	66
Turkey, domestic	roasted	2 30	40
Do. do.	boiled	2 25	51
Do. wild	roasted	2 18	43
Turnips, flat	boiled	3 30	28
Veal, fresh	broiled	4	25
Do. do.	fried	4 30	22
Vegetables and meat hashed	warmed	3 30	40
Venison, steak	broiled	1 35	63

In the next table are found articles whose amount of nutriment is ascertained. That is, in one hundred ounces of roasted beef there is an amount of nourishment equal to twenty-six ounces. The use of the table is this, that as a general rule where persons are costive, they should use such food as has most bulk and least nutriment.

TABLE OF FOOD.—No. 2.

KIND OF FOOD.	Mode of preparation.	Amount of nutriment.	Time of digestion. h.m.	Ease of digestion.	
Almonds,	raw,	66			
Apples,	do.	10	1 50	5	sweet and mellow.
Apricots,	do.	26			
Barley,	boiled,	92	2	5	
Beans,	dry,	87	2 30	4	boiled.
Beef,	roasted,	26	3 30	3	fresh, lean, rare—broiled is dig.
Beets,	boiled,	15	3 45	3	[in 3 h.
Blood,	do.	22			
Bread,	baked,	80	3 30	3	warm corn bread, is easier of dig.
Cabbage,	boiled,	7	4 30	2	raw cabbage " "
Carrots,	do.	10	3 15	3	
Cherries,	raw,	25			
Chickens,	fricasseed,	27	2 45	4	
Codfish,	boiled,	21	2	5	
Cucumbers,	raw,	2			
Eggs,	whipped,	13	1 30	7	
Flour, bolted,	in bread,	21			
do. unbolted,	do.	34			
Gooseberries,	raw,	19			
Grapes,	do.	27			
Haddock,	boiled,	18			
Melons,	raw,	3			
Milk,	do.	7	2 15	5	digest in 2 hours if boiled.
Mutton,	roasted,	30	3 15	3	" 3 " broiled.
Oats,	oat meal,	74			
Oils,	raw,	96	3 30	3	
Peas,	dry,	93			
Peaches,	raw,	20			
Pears,	do.	10			
Plums,	do.	29			
Pork,	roast,	24	5 15	2	raw or stewed, digest in 3 h.
Potatoes,	boiled,	13	2 30	4	broiled or baked, " 3½ h.
Rice,	do.	88	1	10	
Rye,	rye bread,	79			
Sole,	fried,	21			
Soup, barley,	boiled,	20	1 30	7	meat soups digest in 3 to 5 h.
Strawberries,	raw,	12			
Turnips,	boiled,	4	3 30	3	
Veal,	fried,	25	4 30		broiled digests in 4 hours.
Venison,	broiled,	22	1 35	6	
Wheat,	in bread,	95	3 30	3	

The next table is added simply as a matter of convenience, to save time in ascertaining the easiest articles of digestion at a glance.

TABLE OF FOOD.—No. 3.

ARTICLES OF DIET.	IN STOMACH.	
	Preparation.	Time of digestion. *h. m.*
Rice	boiled	1
Pigs' feet, soused	do.	1
Tripe, soused	do.	1
Eggs, whipped	raw	1 30
Trout, salmon, fresh	boiled	1 30
Trout, salmon, fresh	fried	1 30
Soup, barley	boiled	1 30
Apples, sweet, mellow	raw	1 30
Venison steak	broiled	1 35
Brains, animal	boiled	1 45
Sago	do.	1 45
Tapioca	do.	2
Barley	do.	2
Milk	do.	2
Liver, beef's, fresh	broiled	2
Eggs, fresh	raw	2
Codfish, cured dry	boiled	2
Apples, sour, mellow	raw	2
Cabbage, with vinegar	do.	2
Milk	do.	2 15
Eggs, fresh	roasted	2 15
Turkey, wild	do.	2 18
Turkey, domestic	boiled	2 25
Gelatine	do.	2 30
Turkey, domestic	roasted	2 30
Goose, wild	do.	2 30
Pig, sucking	do.	2 30
Lamb, fresh	broiled	2 30
Hash, meat and vegetables	warmed	2 30
Beans, pod	boiled	2 30
Cake, sponge	baked	2 30
Parsnips	boiled	2 30
Potatoes, Irish	roasted	2 30
Potatoes, Irish	baked	2 30
Cabbage, head	raw	2 30
Spinal marrow, animal	boiled	2 40
Chicken, full grown	fricasseed	2 45
Custard	baked	2 45
Beef, with salt only	boiled	2 45
Apples, sour, hard	raw	2 50
Oysters, fresh	do.	2 55
Eggs, fresh	soft boiled	3
Bass, striped, fresh	broiled	3
Beef, fresh, lean, rare	roasted	3
Beefsteak	broiled	3
Pork, recently salted	raw	3
Pork, recently salted	stewed	3

TABLE OF FOOD.—No. 3.—*Continued.*

ARTICLES OF DIET.	IN STOMACH.	
	Preparation.	Time of digestion. *h. m.*
Mutton, fresh	broiled	3
Mutton, fresh	boiled	3
Soup, bean	do.	3
Chicken soup	do.	3
Aponeurosis	do.	3
Dumpling, apple	do.	3
Cake, corn	baked	3
Oysters, fresh	roasted	3 15
Pork, recently salted	broiled	3 15
Porksteak	do.	3 15
Mutton, fresh	roasted	3 15
Bread, corn	baked	3 15
Carrot, orange	boiled	3 15
Sausage, fresh,	broiled	3 20
Flounder, fresh	fried	3 30
Catfish, fresh	do.	3 30
Oysters, fresh	stewed	3 30
Beef, fresh, lean, dry	roasted	3 30
Beef, with mustard, &c.	boiled	3 30
Butter	melted	3 30
Cheese, old, strong	raw	3 30
Soup, mutton	boiled	3 30
Oyster soup	do.	3 30
Bread, wheat, fresh	baked	3 30
Turnips, flat	boiled	3 30
Potatoes, Irish	do.	3 30
Eggs, fresh	hard boiled	3 30
Eggs, fresh	fried	3 30
Green corn and beans	boiled	3 45
Beets	do.	3 45
Salmons, salted	do.	4
Beef	fried	4
Veal, fresh	broiled	4
Fowls, domestic	boiled	4
Fowls, domestic	roasted	4
Ducks, domestic	do.	4
Soup, beef, vegetables and bread	boiled	4
Heart, animal	fried	4
Beef, old, hard, salted	boiled	4 15
Pork, recently salted	fried	4 15
Soup, marrow bones	boiled	4 15
Cartilage	do.	4 15
Pork, recently salted	do.	4 30
Veal, fresh	fried	4 30
Ducks, wild	roasted	4 30
Suet, mutton	boiled	4 30
Cabbage	do.	4 30
Pork, fat and lean	roasted	5 15
Tendon	boiled	5 30
Suet, beef, fresh	do.	5 30

The per centage of Carbon and Nitrogen in some kinds of food is as follows:

NAMES.	Carbon.	Nitrogen.	NAMES.	Carbon.	Nitrogen.
Gum Arabic	36	0.14	Cabbage		.28
Sugar	42	00	Turnips	3	.12
Starch	37	00	do. dried	43	2 00
Arrow Root	36	00	Artichokes	9	—03
S. Almond Oil	77	0.29	Blood	10	.03
Olive	77	0.35	Milk	10	.03
Lard	80	00	Lean Meat	13	15.
Suet	79	00	Mixed	22	18.
Butter	65	00	Soup	75	.75
Wheat	39	2.	Apricots		.17
Rye	38	1.	Peaches		.93
Oats	40	2.	Cherries		.57
Rye Bread	31		Gooseberries	1	
Peas, dry	36	39.	Apples	45	
Peas, green.	42	4.	Beef, roast	53	15.
Beans	88	38.	Veal, roast	52	14.
Lentils	37	38.	Venison, roast	53	15.
Potatoes	11	0.36			

The Carbon in food supplies elements of respiration, of warmth. The Nitrogen supplies elements of nutrition.

AMOUNT OF DAILY FOOD.

Perhaps few readers know how much food one person ought to eat in twenty-four hours. Twelve ounces of wheat a day will feed a man well. The common allowance of food to the inmates of Penitentiaries in the United States is one pound of meat, one pound of bread, and one pound of vegetables a day. A person in ordinary business should have one and a half pounds of solid food a day; sedentary persons one-third less. Eight hundred convicts, who did not work, had their diet reduced to half a pound of bread, and one ounce and a quarter of meat, made into soup: in a few weeks one half of them were afflicted with scurvy and other diseases.

Always, Consumptive persons fall away, and are chilly. The whole object of food to all, is to supply nourishment

and fuel; the amount of each is given as to a few articles. The first column gives the *proportion* of nutriment, the second the amount of fuel, or elements of heat.

Milk	one,	Nutriment	2	Fuel.
Beans . . .	one,	"	2½	"
Oat meal .	one	"	5	"
Barley . .	one	"	7	"
Wheat . . .	one	"	8	"
Potatoes . .	one	"	9	"
Rice	one	"	10	"
Turnips . .	one	"	11	"
Arrrow-root, Tapioca . . Sago	one	"	26	"
Starch . . .	one	"	40	"

Hence, the last named articles are given to young children, requiring as they do a great deal of warmth; but they would not live long if fed on these alone. They must have milk in addition, or some other article containing a larger amount of the flesh-forming principle.

One pound is equalled in weight by about twenty-eight silver half dollars.

PREPARATIONS.

60 Drops	make	one Teaspoon.
4 Teaspoons	"	one Tablespoon.
2 Tablespoons	"	one Ounce.
2 Ounces	"	one Wine-glass.
2 Wine-glasses	"	one Gill or Teacup.
4 Gills	"	one Pint.

PREPARATIONS, RECIPES, ETC.

which follow, are frequently referred to in my practice in conjunction with dietetics.

1. *How to Toast Bread.*—Keep the bread a proper distance from the fire, so as to make it of a straw color. It is spoiled if it is black, or even brown.

2. *Toast Water.*—Take a slice of bread about three inches across and four long, a day or two old. When it is browned, not blackened, pour on it a quart of water which has been boiled and afterwards cooled. Cover the vessel, and after two hours, pour off the water from the bread gently. An agreeable flavor may be imparted by putting a piece of orange or lemon peel on the bread at the time the water is first poured on the bread.

3. *Barley Water.*—Take two-tablespoons of pearl barley, wash it well in cold water, then pour on it half a pint of water, and boil it fifteen minutes; throw this water away, then pour on two quarts of boiling water, and boil down to a quart; then strain it for use. An ounce of gum arabic dissolved in a pint of barley water is a good demulcent drink.

4. *Flax-seed Tea.*—Take an ounce or full table-spoon of flaxseed, but not bruised, to which may be added two drams of bruised liquorice root; pour on a pint of boiling water, place it covered near the fire for four hours, strain through a cotton or linen rag. Make it fresh daily, may add a little lemon juice or vinegar or loaf sugar.

5. *Tamarind Whey.*—Two tablespoonfuls of tamarind, stirred in a pint of boiling milk; then boil for fifteen minutes, and strain.

6. *Wine Whey.*—Take a pint of milk, put it on the fire; as soon as it begins to boil, pour on eight or ten tablespoons of Madeira wine, in which has been stirred two teaspoons of brown sugar; stir the whole until it

has been boiling for fifteen minutes; then strain through a cloth.

7. *Boiled Flour and Milk.*—Take a pint of flour; make it into a dough ball with water; tie it tightly in a linen bag; put it into a pan of water, (milk is better), covering the ball, and let it boil four or five hours; place it before the fire to dry, cloth and all; take it out of the cloth, remove the skin, dry the ball itself. Grate a tablespoon of this, and stir it into a pint of boiling milk, until a kind of mush is formed.

8. *Boiled Turnips.*—Small turnips boiled make one of the best articles of food which invalids and convalescents can use. Carrots may be added; half and half. Boil them once; repeat the boiling in fresh water until they are quite soft; press the water out through a coarse cloth; then mix enough new milk to form a kind of pulp; season with salt, and then place them before the fire until it is a little dry or crusted.

9. *Beef Tea.*—Cut into thin slices a pound of lean meat, pour on a full quart of cold water, let it gradually warm over a gentle fire; let it simmer half an hour, taking off the skum; strain it through a napkin. Let it stand ten minutes, then pour off the clear tea.

10. *Cracked Wheat.*—Dry some common wheat, then grind it in a coffee mill; boil it three or four hours, or until it is of the consistence of well boiled rice; add a little salt, a little milk, butter, cream, or molasses may be added, as in using hominy. It should be always washed clean, and then boiled long enough to become of the consistence of boiled rice or hominy. A pint of wheat dried and ground is enough for two days; not to be used for supper.

11. *Dandelion Diet Drink.*—Take three ounces of the bruised root of the dandelion flower, which should be gathered in July, August, and September; pour on a quart of water, boil it to a pint, and strain it.

12. Blackberry cordial is the most agreeable of all non-medicinal agents, in diminishing the frequent, thin and light colored passages; to be prepared thus:—

Put the blackberries in a pot of water, boil until the juice leaves them, strain through a flannel bag; add spices, loaf sugar, cinnamon and cloves to the taste, then boil again for twelve minutes, skim, and let cool. To three quarts of this juice add one quart of the best French brandy.

13. *To Boil Rice.*—Take a pint of rice, wash it well, then soak it two hours in cold water; have ready two quarts of boiling water with a little salt in it, in a stew pan. Half an hour before you wish to use the rice, pour the water from it, in which it has been soaked, and with a tablespoon shake the rice gradually into the stew pan without stirring it; let it boil ten minutes, then strain the liquid from the rice; return the rice to the stew pan, and let it steam fifteen or twenty minutes, a short distance from the fire, it will then be done, and the grains will be separate; add a *little* butter, and send it to the table.

In graver cases, it should be prepared as follows:—Wash it well, then parch it brown or black like coffee, and while a pot of water, with a handful of salt in it, is boiling, sprinkle in the rice, bad grains being removed, and let it boil twelve minutes by the watch, stirring it all the time; pour off the water, cover up the vessel, place it a little distance from the fire, and when cool enough, eat it with a little butter or sugar.

14. *Mulled Wine.*—Pour half a pint of boiling water on a dozen bruised cloves, a quarter of an ounce of bruised cinnamon, and half a nutmeg grated; let it stand an hour, strain, and add a full teaspoon of sugar; then pour this into a pint of hot sherry or port wine.

15. *Gum Arabic Water.*—Dissolve two or three tablespoons of the gum in a pint of water.

16. Rice water is made like barley water.

17. *Oatmeal, or Water Gruel.*—Oatmeal two tablespoonfuls, water one quart. Mix well, and boil for fifteen minutes, stirring it often. Strain through a sieve, and add sugar and salt to make it agreeable.

18. *Sago.*—Sago one tablespoonful, water one pint. Boil them gently, stirring often till the mixture is smooth and thick, then add sugar. When proper a little wine and grated nutmeg may be added.

19. *Arrow Root and Tapioca.*—Prepare like sago.

20. *Oyster Broth.*—Cut into small pieces one or two dozen oysters, and boil them with their liquor in a pint of water for ten minutes, adding a little salt. This forms a very pleasant and sufficiently nourishing drink in the convalescence from many diseases.

21. *Egg Soup.*—The yolk of one or two eggs, butter the size of a walnut, sugar to suit the taste, water one pint. Beat up the yolk with the water, and then add the butter and sugar. Stir it all the time it is on the fire, and when it begins to boil pour it between the saucepan and mug till well frothed, when it is ready for use.

22. *Chicken Water.*—Half a chicken, the fat removed and bones broken, water two quarts. Boil for twenty or thirty minutes, and add a little salt. When a very nourishing article is required, add a tablespoonful of

rice, and boil very slowly for two hours, skimming off all the fat.

23. *Beef Tea.*—Lean beef cut into small pieces, one pound, water one quart. Boil for twenty minutes, removing the skum as it rises. When cold, strain, and add a little salt.

24. *Foot Bath.*—Add four ounces of nitric acid to four of muriatic acid in a glass bottle or vessel; to this add eight ounces of water, that is, half a pint; of this solution take from three to five ounces, measured in a glass or wooden measure, and put it in three gallons of water as much as ninety-six degrees of heat; this must be in a wooden vessel, and narrow enough to make the water come well up to the knees. Put the feet in at bed time for half an hour; if it does not cause a prickling feeling in the feet, add more of the acid mixture next night. At the end of the half hour, have the feet and legs wiped dry, and then hold the feet to the fire until the heels and between the toes are perfectly dried, get into bed and have a bottle two-thirds full of hot water to each foot. The bottles should be well corked and rolled up in a piece of flannel, diagonally with the covers of the flannel turned in so as to be an additional protection to preventing the corks from coming out. Warm bricks or irons are objectionable as being liable to set the bedding on fire.

25. *Shower Baths, Cold Baths, &c.*—The best bath is a plunge in a running stream; next to that, is a towel bath, to be described. Shower baths are too powerful for consumptive persons, and those who are not consumptive do not need them. I know very well, that at this time there is a great rage for baths and bathing, and it

may be well enough, for those who have these varied fixtures to sell, and for those who are rich enough to buy, and in a month or two to throw one away, and get a newer and better patent; this promotes trade, encourages industry and wit, and circulates money; but there is a species of cruelty, of great inconsideration and want of sympathy, in endeavoring to make that essential to good health, which is not only not essential, but by its expensiveness is utterly beyond the reach of half the population, and perhaps three-fourths of it. That is best, which, in addition to its answering all essential purposes, can be placed within the easy reach of the humblest day-laborer, or failing needle-woman. Hence I propose, for the benefit of many a reader whom I may never see, but whom I have some desire to compensate for the trouble of reading these pages, a substitute which has been recommended by Sir Astley Cooper, one of the most renowned surgeons and physicians of his time.

"Immediately on rising from bed, having all previously ready, take off your night dress, dip your towel in a basin of water, quite wet, but not dripping; begin at your head, rubbing hair, face, neck and ears, well; then rub yourself, behind and before, from neck to heels, reaching every portion of the body. Wring out the towel, charge it afresh with water, and repeat all, except as to the head, unless that be in a heated state, when you may do so with advantage. Three minutes will now have elapsed. Then take a long coarse towel, and scrub your head, face, and body at every point, and four minutes will put you in a glow. Next, wash and hard rub your feet, brush your hair, and complete your

toilette; and trust me, this will give a new zest to your existence. A mile of walking may be added with advantage."

Women and those who are delicate, and very easily chilled, may modify this, as described in the following language of a lady to a lady.

26. *A Lady's Bath.*—"You only want a basin of water, a towel, a rag, and five minutes' time. When you get up in the morning, pin a petticoat very loosely at the waist, draw your arms out of the sleeves of your chemise, and let it drop to your waist. Take your rag, well wetted, and slap your head and shoulders, rub your arms and chest, and throw handfuls of water around your ears and back of the neck. Then throw your towel across your back and 'saw' it dry. Rub fast, until you are quite dry. Put on your chemise sleeves, draw on a night gown to keep from chilling, while you tuck your skirts up under one arm, until you wash and dry one limb; drop that side and do the other likewise, and be sure that the small of the back and the sides get their full share of rubbing. This done, sit down, dip one foot in the basin, rub and *dry* it, put on your stocking and shoe, and then wash the other."

Baths like these are easily performed, cost nothing, and are practicable wherever there is a towel and a pint of cold water; effectually taking away any ground of excuse for not attending to them, and leaving no obstacle to their general employment *when needed.* It is my opinion, founded on observation, that a daily bath, to a man in health, is not advisable, for he deprives himself of a valuable prophylactic should he get sick. *A man who is well, should let himself alone.*

27. *The Feet.*—The Author hopes to save himself much trouble, by naming here the kind of shoes all his patients should have, who at all suffer from damp feet. The upper leather of a shoe is not so easily made wet, and is easily dried, but the soles are soon penetrated, and become of a soaking dampness, and there are objections to India-rubber shoes. When you order a boot or shoe made, have pieces of canvas cut of a proper shape, dip them in melted tar or pitch, and let one be laid between the upper and under sole; this will effectually prevent dampness from striking into the foot, a thing which so often gives sore throat, colds, and death.

28. *Enema.*—A tablespoonful of salt to a pint of water or gruel; neither should be cold nor warm, but a little cool, say sixty degrees Fahrenheit. Retain it if you can, a few minutes. Repeat in half an hour if not efficient, five or ten degrees colder.

EFFECTS OF MEDICAL SCIENCE.

It is often stated as disparaging to physicians, that, notwithstanding the general increase of knowledge in all departments, and the claim that medicine is reduced almost to a science, human life is gradually shortening. There is great reason why men should not live so long as formerly. As a nation, we live more luxuriously; our habits of eating and sleeping have become more artificial, more irregular. Large numbers of people have no regular occupation. Our young women are trained in female boarding-schools, which, with some exceptions, are academies of mental, moral, and physical depravation; where novel reading in secret, and a smattering of everything in public, with a thorough practical knowledge of nothing, is the order of the day. From

graduation to marriage, nothing is done to establish the constitution, to make firm the health—no instructions given as to how that health may be preserved, no active teaching as to household duties, no invigorating morning walks, no wholesome, elegant, and graceful exercises on horseback. The days are spent in eating, in easy lounging, in ceremonial visiting, in luxurious dreaminess over sentimental fictions; the nights in heated rooms or crowded assemblies of hot and poisoned, if not putrid air. No wonder that with educations like these, the girls of our cities and larger towns fade away into the grave long before they reach the maturity of womanhood.

Our young men also, in cities and large towns especially, grow up in too many instances without any stamina of constitution. Bad practices—drinking, chewing, smoking, theatre going, secret society gatherings—involving late hours, late suppers, late exposures, private indulgences—these destroy the health, deprave the morals, and waste the energies of the whole man. Many are permitted to grow up without any trade, trusting to a wealthy parentage, or political influence, or the name of a profession, intended only for show and not for practical life. Others become clerks in stores, banks, offices, with good salaries it may be; but when the merchant has become a bankrupt, the offices failed, the banks broken, the party in power defeated, their occupation is gone, their resources are exhausted; they lounge about waiting for a place, the clothes are wearing out, the board bill is in arrears, independence lost, spirits broken, mind irritated, disposition soured, and the first crime is committed—that of engaging board without any certain means of paying, or leaving a struggling widow in

arrears;—the proud, the high-minded, the well-dressed, courteous, and cheerful-faced young man of six months ago has made his first step towards degradation, by making a toiling woman give him for nothing the bread and meat which she had earned in toil and sweat, and tears perhaps, and which the children of her own bosom needed. When the honor is lost, low habits and loss of health and life soon follow. Let every young man from the country hesitate to come to the city to try his fortune, unless he has *learned well* an honest and substantial trade; then he may work his way sternly and steadily to usefulness, influence, and wealth. It is for want of a suitable education and occupation that such numbers of the young go down to a premature, if not dishonored, grave. But notwithstanding these errors as to the education and employment of our young men and young women, medical writers have been extensively disseminating useful knowledge by means of books, pamphlets, lectures, newspaper articles and the like, in reference to the preservation of health in the nursery, the school-house, the academy, the college—in factories, work-houses, penitentiaries, as to diet, exercise, ventilation, drains, sewerage, house-building; and the general result is, that, within three hundred years past, the average length of human life has been increasing, and not diminishing. The average age increased two and a half years for the twenty years ending 1820 in the United States. For the fifty years ending in 1831 in France, it increased from $28\frac{1}{2}$ years to $31\frac{1}{4}$, notwithstanding the devastations of the wars of Napoleon and the French Revolution. In London, for the century ending 1828, the average age of all who died had increased $4\frac{3}{4}$ years

In Geneva, three hundred years ago, it was 21 years; it is now 41.

Europe is computed to have a population of two hundred and thirty millions. Not a hundred years ago, Gibbon, the great historian, estimated it at less than one-half. This immense increase has taken place notwithstanding the millions who have emigrated to this and other countries—notwithstanding, too, the far greater drawback, that during a considerable portion of the time the most desolating wars were waged that were ever carried on there. This can only be accounted for by the reforms which medical science has introduced, and the more general diffusion of practical knowledge as to the preservation and promotion of health, in publications made by eminent physicians and surgeons.

As therefore a higher degree of medical intelligence has extended the average of human life—in some places fifty per cent., taking all disease together—it is reasonable to suppose that increased intelligence as to one class of diseases would, in the course of time, have a like happy effect; that if more truthful views as to the nature, *causes*, and *symptoms* of diseases of the lungs, were extensively promulgated among the people, their fearful ravages would be diminished in corresponding proportion.

In 1851, the deaths in Boston, from Consumption alone, were about thirty per cent. of the entire mortality, and the Medical Association announces that it "is steadily on the increase from year to year." If this is the case in Boston, where such large quantities of cod-liver oil have been purely made, and hence more easily and cheaply obtained, it presents a striking and practical contradiction of its curative powers in Consump-

tion, and calls upon us in louder and louder tones to look less to the cure of this terrible scourge, and more to the detection of its early symptoms and its prevention, by scattering intelligence to every family, and on the wings of every wind, as to what are its causes and what these early symptoms are. Such is the object of this publication.

PATENT MEDICINES

are those whose contents are not made known. A physician who has any respect for himself would scarcely use them, or advise their use. It is a universal custom among all honorable practitioners, to communicate to their brethren any valuable discovery; thus, any one of them is benefited by the discoveries of all the others; they hold their knowledge in common. A remedy discovered to be truly valuable in New York to-day, in the cure of any disease whatever, is, in a few months, known wherever the English language is read and spoken. Thus thousands, scattered over the world, whom the discoverer never could see, are benefited and blessed by his discovery, through the regular practitioner. Some other person obtains this knowledge, prepares the ingredients, disguises them with some inert substance, and sells it as a secret remedy, leaving those to die, as far as he cares, who do not buy from him or his agents; while thousands of others, in other states and countries, perish for the want of a knowledge locked up in his bosom. Any patent medicine is a cure for a given disease, or it is not. If it is not a cure, it is false and criminal to sell it as a cure. If, on the other hand, it is what it professes to be, it cannot be much better than murder to withhold it from those who cannot purchase it, and to allow thousands, at a distance, to die from

the want of it, who never heard of it, or if they did, live too far away to send for it in time. Let those who purchase these articles think of the argument, and aid and abet no more, by their patronage, those who allow their fellow-creatures to die by thousands every year, who would be saved (if what is said be true) by the knowledge of the remedy whose composition is so carefully concealed.

Many things have been passed over in the foregoing pages, which might satisfy the curiosity or interest a large class of readers, but it is not necessary that they should be known, and if known, might have an injurious effect, considering the present state of knowledge on the subject of consumptive disease; such, for example, as stating what symptoms are infallibly fatal, what kind of persons, as to sex, temperament, color of hair, eyes, skin, make of body, are most liable to it, or having it, have less hope of recovery. For similar reasons I have given but few fatal cases and their symptoms; for persons having one or more of these same symptoms might conclude that they too must die, when those same symptoms, in combination with others, would indicate a very different result. I do not wish the reader to suppose that I do not lose any cases—that few or none die in my hands. I lose patients as other physicians do. I have lost some whom I expected would recover. Nor do I wish to make the impression, that it is a frequent occurrence that persons in the advanced stages of Consumption are restored to comparative health; for it is not a frequent occurrence—it is a rare thing. My object is, first, to show what the early symptoms are; and, second, to induce the reader to make early application to his physician, with the full assurance of my

belief, that thus one person would not die of disease of the throat or lungs where one hundred now do. In truth, I had greatly rather that persons in the advanced stages would not apply to me: for it at once involves a degree of responsibility and solicitude, which is to extend through weeks and months, and for which any money paid is not the shadow of a remuneration.

I greatly desire it to be understood that I have no magical means of cure. Ailments of the throat and lungs are not to be removed by a box of pills or a bottle of balsam. It is not the work of a day, nor a week. These cases often require weeks and months of treatment, and of a treatment constantly varying, to meet the varying phases of the disease. Sometimes it occurs, but not often, that a person writes for advice in full, and it is given, and the single prescription, PERSEVERED IN, has effected a happy cure, and months and years after, such persons have come to see me, to express their gratification. At other times, prescriptions are sent, and the persons are never heard of afterwards. In nearly all cases, these are young people, or such as have no energy of character, no perseverance, no determination. For a few days or a fortnight they give a general attention to the directions, and because they are not cured, break off and apply to some other physician, to follow the same course, or become negligent of themselves, and eventually die. It is a most hopeless task to attempt to cure any of Throat-Ail or Consumption who have no energy of character. It is time, and trouble, and money lost, as they are not diseases to be eradicated in a day, by a drop or a pill. It is to be accomplished, if at all, by a determined, thorough, and persevering attention, for weeks, and sometimes many months, to

rational means, ☞ calculated to build up the constitution, with a decreasing use of medicine, and an increasing attention to habits of life.

RESPIRATION

consists in two operations of the lungs; inspiration, by which the lungs are filled with air, and expiration, by which they are emptied.

In health, inspiration requires a longer time than expiration, the reverse of this is an indication of consumptive disease—the expiration being too long, the aorta is pressed too much and too long, and the circulation is increased in rapidity, hence another sign of consumption is a pulse permanently faster than the average, which is seventy beats in a minute while at rest.

The expiration being too long, the inspiration is too short, consequently enough air is not taken into the lungs for the wants of the system, the blood therefore not having enough air to purify it perfectly, becomes thick and flows sluggishly, does not carry as much fresh life to different parts of the body as it ought to, does not nourish any portion as it should do, hence there is general wasting away, the most universal and essential sign of consumption, very appropriately designated by the popular epithet, "A DECLINE."

The blood being thick, it becomes packed up, congested in the lungs, throws out an unnaturally thick mucus among the air-cells, which, filling them up to some extent, prevents the air from getting in, for in proportion as a cell is filled up with mucus, there is no room for air, and this want of air produces what consumptives always complain of, especially in exerting themselves,

even to walk fast, or go up a pair of stairs, that is. want of breath, shortness of breath.

When this accumulation of mucus reaches a certain point, a tickling sensation is produced, this in turn causes cough, which is nothing more than a spasmodic effort of nature to relieve herself; at first little or nothing is brought up, not perceptibly thicker than common spittle, but after a while, it is thicker and even more copious, comes up freer because it exists in larger quantities; the more freely it comes up though not yellow, the more decided the relief, and there is no more cough until there is another accumulation. At first these accumulations only excite cough once in twenty-four hours, in the vast majority of instances coming on, on getting out of bed in the mornings; in due time the intervals are less distant, and a spell of coughing comes on at bed time, after a while another at midnight, until at length there is but a few minutes interval or cessation night or day, and wearied, wasted, and exhausted, the wretched patient finds relief only in the grave.

The tickling which excites the cough is referred to the top of the breast bone, the little depression at the bottom of the neck in front, and persons please themselves by calling it Bronchitis or some other name, persuading themselves that as it is at the bottom of the windpipe, the lungs cannot be effected; this is a pleasing but often a fatal deception. The point of sensation is not always the point of ailment. You strike your elbow but feel it at the ends of the fingers.

The real reason why the tickling is felt at the bottom of the windpipe is, that its own natural supply of mucus is always there, and it does not feel it, nor does it feel it if there is a little more than a natural supply—but we

have just seen that there is more than a natural supply of mucus in all parts of the lungs, and this extra amount is forced along the smaller branches of the windpipe by the air in expiration, and then the whole extra supply of mucus from the entire lungs is deposited at that one point, the little depression where all the branches of the windpipe meet and unite to make one; this collection being so much larger in quantity than is at all natural, tickling is produced, this excites what we call cough, which is a forcible expiration of a volume of air coming from the lungs towards the throat which carries all before it, from the bottom of the windpipe to the top above Adam's apple, or the voice-making organs, there it produces another sensation, which induces what we call hawking, this brings it still farther up to the tongue, there it produces another sensation different still, causing such an adjustment of the parts as throws it from the mouth, and it becomes no longer a part of us. Occasionally, however, the cough is so violent, or the mucus so plentiful, that the cough alone throws it at one operation from the bottom of the windpipe clear out of the mouth. Sometimes a single hem or hawk brings it away, this is when it is very copious or an ulcer is formed at the upper part of the windpipe, both sometimes fatal signs, the former indicating the latter stages of consumption, the other that the windpipe is being rapidly broken down, and will soon be eaten through, and death is inevitable when the expectoration is pure matter.

Stokes gives a case, pulse 144; respiration 17; and another pulse 65; respiration 50, for the last month of his life; both died, and post mortem indicated extensive lung decay from phthisis, showing that in all cases of consumption, the pulse and respiration are not both neces-

sarily accelerated, but this is the general rule, and the exception, is an extraordinary acceleration of one and slowness of the other. (See page 350, of Stokes on the Chest, Phil. 1844, edition.) In this statement is a strong proof that additional aid is needed in determining the existence of consumption, and that aid spirometry gives in determining with numerical and unerring precision, *what amount of lungs is in operation.* It may result from decay, from filling up with mucus, or from feeble action, but the effect on the general system is the same as to the imperfect purification of the blood.

AN INQUIRY

may have often occurred to the thinking reader why a cold should settle

In the head, and give one man catarrh in the head:

In the larynx, and give a second throat-ail:

In the windpipe, and give a third croup:

In the branches of the windpipe, and give a fourth bronchitis:

In the lungs, which are the air cells at the ends of the branches of the windpipe, giving consumption in a fifth:

Every man has some *weak spot* in the body as well as in the head. Not so naturally, but made so by his own conduct, and whenever disease invades the human frame it fastens on that weak, undefended part. The clergyman or singer, or public speaker, makes his throat weak by improper use of the voice. The sedentary man makes his lungs weak by want of exercise, by stifling them in warm rooms, and by depriving them for perhaps twenty hours out of the twenty-four, of their natural stimulus and food, pure, cool, out door air. Wherever a part of the body becomes weakened, the

small blood vessels of that part take their share of the weakness and lose their power of transmitting the blood, it thus accumulates, dams up, distends the vessels, stagnates, becomes impure, exudes, and there is congestion or clogging up in the veins or inflammation in the arteries, which is heat, redness, swelling, pain, and the part is thoroughly diseased.

DANGER OF CUTTING TONSILS.

M. Landouville removed an enlarged tonsil for a woman, aged 21. In eight days she had uncontrollable spitting of blood, which was constant, besides vomiting a large quantity. Small pulse: extremities cold. The danger was imminent. Various means had already been adopted in vain: such as ice externally, styptics internally; then pressure with lint dipped in lemon juice; but it was at length controlled by pressing ice against the spot with forceps. (See *Hays' Med. Jour.*, October, 1851.) Other cases are given in medical publications: they are not of frequent occurrence, but each one operated upon is liable to experience disagreeable results. An operation is seldom necessary, not one case in a dozen. And as in the case above, the danger was not over for a week after the operation had been performed, others, who have the tonsils taken out, have cause for a lengthened and most unpleasant suspense.

In young children the tonsils are sometimes swollen so much as to nearly meet, and materially affect the voice and impede the breathing; but even in such cases I prefer using safer and milder means, which if persevered in seldom if ever fail. He who cuts skilfully and cures, does well; but he does better who cures without

cutting at all, and thus lets the patient go from his hands as perfect as when he came.

RELAPSES.

Persons under treatment are sometimes doing remarkably well, when suddenly the progress of the cure is arrested, and they often die, not from the want of skill in the physician, not because the means advised are insufficient to keep up a continued improvement, but from the inattention or want of consideration on the part of the patient or attendants. It may be useful to give a few illustrations of the manner in which relapses are sometimes brought about.

A gentleman from Kentucky called upon me, apparently in the advanced stages of consumption.

	Pulse.	Breathing.	Weight.	Lungs held
May 18,	100	20	128	$3\frac{1}{2}$ pints of air.
Nov. 3,	80	16	136	$4\frac{1}{2}$ " " "

For near eighteen months afterwards he was engaged in active business, reporting himself by letter every few months as doing well, not requiring any medicine whatever. Near two years after he first saw me, he became "chilled through and through frequently," by riding in the cold damp winds of February, attending to some urgent business; this gave him a terrible cold, which fell on his throat, and gave him horrible pains to swallow any thing. I wrote to him he must soon die, and he did so. It is a standing direction given to all my patients IN PRINT, not to ride on horseback in cold weather, especially in damp piercing winds, and yet in the face of this, regardless of his delicate constitution, a course of conduct was pursued repeatedly which was sufficient to

have endangered the health of the most robust. May this incident warn every reader.

A lady sent for me two years ago. She was supposed to have consumption, had been confined to her bed for some weeks. She was propped up with pillows, pale and emaciated. Her case had been abandoned. She expectorated large quantities, drenching night-sweats, and a cough so incessant, as not to allow sleep day or night, except for short intervals, and so exhausting that she expressed herself as feeling often, that if she had to give another single cough, she would die. I did not consider it a case of consumption. At the end of two or three months she was able to come to my office, saying that she desired to visit some friends in a distant state. She did so with constantly improving health, but having occasion to return to New Orleans, she fell asleep in a steamboat berth, with the doors closed; this being in summer time, she very naturally perspired freely, her clothing was almost damp; a friend of hers chanced to open the state room door, and wishing to do her a kindness, opened both doors and fastened them open to cool her; this threw a strong draft of wind upon the sleeper, the perspiration was checked, and in a short time she waked up in a terrible chill, and the result was an eight months confinement to a sick chamber. She rallied however, and so recently as four months since, was in the enjoyment of better health than she had known for some years.

A young lady whom I have never seen, had been under my care for five months for a throat affection, combined with dyspepsia. At the end of that time, considering herself "about well," she wrote for her bill. In a few days I received another letter detailing alarming

symptoms, of a more critical nature and different from the others. She had, while "unwell," taken a long walk at sundown of a chilly day in November, causing some perspiration; in this condition she sat a considerable time in a cold room, in which there had been no fire, conversing with a female friend whom she was visiting. Within an hour she had a chill, with immediate and complete suppression, followed with pleuritis, and a long confinement. To-day, however, I have received a letter from her, stating that she believes herself well, and that she "will be more careful for the future."

A lady applied to me, having severe cough, yellow expectoration in large quantities, sore throat, pains in the breast, sides and pit of stomach, entire suppression for months. Every thing she ate gave her pain, often exciting cough, bringing it all up. Burning hands, cold feet, great depression of spirits; had been confined to one room for six months. Friends as usual prognosticated she was dying of consumption, and approached her with the same tell-tale expression of countenance. But they had been doing this for a year or more, and still she did not die, reprieves were granted to spring, then to fall, and then to winter. I thought she was suffering from a form of dyspepsia, and treated her accordingly, ☞ as the only means of relieving the throat, the cough and pains in the chest. In two months, she was able in the month of December to walk daily for hours together out of doors, "and felt the better for it," and was evidently getting well, when she visited some friends at a distance. By some misunderstanding, after riding sometime in a warm rail-car, she was left with her husband at a station-house in a cold damp day in winter, and remained there two hours, which was very naturally followed by

a cold, causing a return of suppressions and other unpleasant symptoms; in the course of a month, however, these things passed away, and she is doing well.

A lady, (1014) aged 21, married eight months before, complained most of

Cough on retiring and rising, besides severe spells of coughing in the day time.

Very easily tired in walking.

Pain at the point of right shoulder-blade behind, coming through.

She had fallen away twenty pounds within six months.

Dryness and irritation at the throat at times.

Expectorated yellow matter now and then.

Had been troubled with night sweats.

She had been troubled with cough for three or four falls before, which would last about two months, but when the weather became settled cold it passed away, and she was well as ever. Some three months before she applied to me, she took a walk about sun-down in June, became heated and tired, and before she reached home became chilled, cough came on, and with other symptoms grew apace until they were as above described.

I informed her in writing, that "with proper attention and without accident, good health might be reasonably calculated upon."

For more than a month this patient steadily gained in health and strength, and I calculated upon her recovery. But soon after, she was attacked with chills and fevers, all her symptoms returned, and she died in three months after I first saw her. She had visited some friends at a distance, and rode home on horseback. When she reached the house after sun-down, she was wearied and

chilled, and in addition went into a room where there was no fire, with the results as above.

A lady (997) whose mother was asthmatic, complained of cough, pains in the breast, night sweats, great acidity of stomach, even cold water produced sourness; obstinate constipation, feet steadily cold, distressing thirst.

My opinion was that her lungs were weak, were tuberculated, but that they were not in a state of decay; that the prominent feature of her case was not consumptive disease, and that she might regain her health.

In about two months she was safely confined; the child and mother did well; she left her bed in two weeks, gained in flesh, and I had no fears of her restoration. Soon after, the child met with a physical accident, and in the course of ten days died in convulsions. During its sickness, she would get up several times of a night in the cold winter of 1851–2, and walk the floor in her night dress, without any shoes on, and I think without stockings, but of this I am not certain. But getting out of a warm bed, walking the floor of a winter night with the child in her arms, in her loose night clothes, and this repeated once or more before day-light, and continued for several nights, getting more or less chilled on each occasion, naturally had the effect to close the pores of the skin, checking that insensible perspiration which is always present when in bed, and falling with all its force upon some internal organ. In this case it fell on the liver with the following prominent symptoms:

An unquenchable thirst.

Abhorrence of food.

Yellowness of face and eyes.

Distressing cough night and day.

A pain about the edge of the ribs on the right side,

exceedingly severe at any time, but when she would cough, almost insupportable.

Steady pain also in the right shoulder.

When she would turn on her left side there was such a dragging, uncomfortable sensation on the right, that she would be compelled to turn back.

The symptoms at length abated, the obstinate constipation gave way, succeeded by several discharges daily of a very black character, of sufficient consistency to maintain the shape for the most part, leaving a distressing feeling of weakness in the abdomen. At length the appetite returned, the pain wholly disappeared, she was able to sit up and sew a little, the discharge from the bowels became almost natural, but asthmatic symptoms intervened, coming on usually in the after part of the day and passing off towards morning. She did not regain her strength, declined steadily in flesh, with occasional exceptions; still she sat up a greater part of the day, the asthma becoming of the continued kind, made that position the most comfortable. On Monday morning I was called urgently to see her. She was sitting up in her chair, head thrown back, her arms resting on the sides of the arm chair, the mouth open, the lips shrunken, pale and dark; she could speak but a word or two at a time; would call out suddenly for the doors to be opened; nothing gave any special relief, and she died that night, and thus passed away in the prime of womanhood, L. O. T. one of the loveliest of her kind; of a character so beautiful, so pure, that it will be given to few in the course of a life time to meet its like.

Exposures are sometimes unavoidable, and the wisest may commit gross indiscretions. The elder John Adams says, "I have heard that in the opinion of his own able

physician, Dr. Franklin fell a sacrifice, not to the stone, but to having caught a violent cold by sitting for some hours at a window with the cold air blowing upon him."

The reader will have no difficulty in tracing the immediate cause of death in each case given; in every instance it was amply sufficient to have impaired the health of persons who were entirely well, and we therefore cannot be surprised at its effects on the frail and feeble. I know that exposures are to some extent unavoidable, and that the wisest are liable at times to fall into inexcusable indiscretions, still such things should be watched against. Persons often reply that they "could'nt help it; they were obliged to." I do not admit the validity of any such excuses. Besides, were they ever so good, the necessity of a thing does not relieve it of disastrous consequences. Because there is a necessity for blowing up a house, to arrest a conflagration, that necessity does not indemnify the owner. If a man has to jump overboard in mid ocean to escape from being burned up in a ship, that necessity does not make the leap less dangerous. Therefore, if the reader imagines, for it is only imagination, that he is "obliged to," that he "can't help" exposing himself, thus risking health and endangering life, he must remember that the necessity does not guarantee impunity any more than a man's being obliged to let his note go to protest will save him from discredit, although he had the best double reason in the world, he had not the money himself, nor could he find any one who would confess its possession.

I have thus sought at length to impress the mind of the reader with this *little thing*, because I have too often

been pained to see my own attentions of many weeks' duration baffled by a "had to," or a "could'nt help it," and by which a patient who was "in sight of health," has gone down to the grave.

On looking back at the incidents named, we would think that almost any one would have known better, but it is easy to be wise a day after the deed. The only safeguard is to act with our thoughts about us, to *act deliberately and rationally, by habit.*

SUN-SET.

Mention has twice been made of injuries received about this time of day. In proportion as the weather is warm, in such proportion is it unhealthy to be out at sun-set and sun-rise. The higher the thermometer rises above sixty degrees during the day, the more pernicious are the effects of being out of doors at sun-rise or sun-set, unless the person be in sufficient motion to be free from chilliness or fatigue.

During the whole twenty-four hours, the hour including sun-rise and sun-set is the most pernicious to health, and more particularly so in Southern latitudes. The night air from nine at night until an hour before sun-rise in the morning, is comparatively innocuous. At the setting of the sun, there is a more or less chilly dampness in the air, and the malaria which the warm sun rarified during the day and carried upwards a half a mile or more, begins to cool, condense, and rest within five or ten feet of the surface, where it is breathed freely. In the mornings, the first rising of the sun causes it to ascend from the earth, slowly at first, when it is also breathed, and being taken in also upon a weak stomach, not having been fortified with food for twelve or four

teen hours, it has a still worse effect. From this cause arise most of the fever and agues, diarrhœas, dysenteries, and bilious fevers of the Western and South Western States.

If two simple precautions were observed, Fever and Ague, the great scourge of the west, would in twelve months be almost banished from the country. How many readers will take these precautions resolutely from April to November, and thus save money, health, and life?

1. Never leave the house until the regular breakfast has been taken, including a cup of some drink, almost hot.

2. Leave off work time enough in the afternoon to be ready to sit down to supper half an hour before sunset, and go out no more for the night, unless it be an hour or more after sundown.

As to women and children, they should be in a room where a fire has been kindled and allowed to burn down half an hour before they get up, and take their breakfast before they go outside of the door. The same at sundown in the hottest weather of summer, in the hottest portion of our country. By these means the Malaria, which is simply *Bad Air* arising from decaying vegetation, or Miasm, which means *polluting*, and may be regarded as different words for the same things, although the latter more strictly means polluting emanations, by these means, I say, the Malaria is antagonized, if not destroyed, and the stomach and lungs are fortified against its influence on the blood, by the strength and additional excitement which eating gives.

No medicine will prevent Fever and Ague, or any other disease, but that the course which I have named

will almost infallibly do so, under all circumstances, I fully believe. I know infallible is a strong word, but I employ it to express the strength of my conviction. I tested it in my own practice in 1836, in the hottest, most miasmatic part of the south, called by common consent the "*natural grave-yard*," from the fearful mortality among all classes of the various higher grades of fever. I rode wherever called, in the hottest mid-day, in sunshine and in storm, in those fuming suffocative sultry showers so common to the south, and at midnight. But on no account did I neglect for a single time the precautions I have named. In a whole season's practice I never missed a call, never missed a meal, never had a moment's sickness, and had a convenient purse at the end. A young gentleman, with a more robust constitution, with far greater capabilities of endurance, was settled near me. While I was seated in a large room with a moderate fire after tea, he sat in the piazza, immediately in front of which was a very large garden of the rarest flowers, and the most delicious fruits, and in front of that a stream of water. We often conversed together between the closed doors and windows, and from his description the air must have been delightfully cool and refreshing. He knew it was a test of theory, but felt willing to abide the issue, always concluding that the danger was on my side. The result was, that within two months he was attacked with fever, and remained ill until the fall of the year, when he was hardly able to ride; he did not make a penny, and lived at my expense.

As to the morning, the common sense of the people in the south has led them to a custom which is almost universal, especially is it observed among the creole

population, to take a cup of cream and hot coffee, with sugar, *before they leave their beds*, as regular as the morning comes. All the southern steamboats have coffee and crackers on their table by sunrise every morning.

This statement has been made at length, to impress upon the mind of my patients the necessity of

Avoiding the out door air of the hour, including sunrise and sun-set;

To take something warm on the stomach before going out of doors in the morning. If the person is not much of an invalid, a crust of cold bread, or a cracker or two, will be sufficient.

What I have said is intimately connected with the general subject of consumptive disease, for it is no uncommon thing for persons applying to me from the Western States, and evidently suffering from consumption, to attribute the foundation of their disease to fever and ague frequently repeated, or long continued. I know that medical writers have affirmed that fever and ague was rather a preventive of consumption; and that a consumptive would find benefit from settling in a fever and ague country. But it is simply not so. Those who have written thus have not lived for a length of time in the west and south-west, and their opinions have been formed from isolated cases, from insufficient data. I have lived in the midst of such a country for a quarter of a century and more, and speak from my own observation and from that of persons who have applied to me since. Fever and ague, long continued, debilitates the whole system, as they too well know who have had the misfortune to suffer from it; and all medical men know that protracted debility, from whatever cause, tends to consumptive disease.

It is on the same principle that dyspepsia lays the foundation for consumption in great numbers of people.

Dyspepsia is simply *difficult digestion*, that is, the stomach is too weak to prepare a sufficient amount of juices to dissolve the food which is swallowed. These juices do not penetrate the food and turn it into a fluid mass, because that food is too hard in quality, or too much in quantity. If a number of pieces of ice and sugar, in small lumps, are put into a glass, and a small quantity of water is poured on them, a portion will be dissolved, part may be in a fluid shape, but there will be lumps unmelted; or the sugar may be melted easily, but the ice not so much so, it still remains hard, and some lumps of sugar are unpenetrated. Thus it is with food, especially on a weak stomach. There is not enough stomach liquor to dissolve it all; the whole mass is unliquified, is undigested, undissolved, and that is the meaning of indigestion, dyspepsia; either the stomach is not able to turn out juices enough to dissolve what is in it, or the juice is not able to penetrate it by reason of its hardness of penetration by that particular fluid.

The cure of dyspepsia then consists in

1. Adapting the quantity of food to the quantity of the stomach (gastric) juices already prepared.

2. Adapting the penetrability of the food to the capabilities of the juice.

3. In giving tone to the stomach by *constitutional remedies*, by which the gastric juice shall be larger in quantity, and more powerful in quality.

The things complained of by dyspeptics are numerous. Mr. Stephen H—, of Kentucky, writes March 2d, 1852:

"I have a bad taste in my mouth. It first comes

in my throat, and then in my mouth. It makes me spit very much. I quit eating supper. That answered for a while, but not long. I then quit eating molasses, then meat, then milk, but all will not do. I am very hearty, never was more so. I never get up from the table satisfied; always hungry. I weigh a hundred and forty-two pounds, which is more than I have for many years. I would like to know the cause, and what would prevent it. At first it would come on three or four times a day, but now six or seven times; sometimes a pinch of salt will cure it for a while, sometimes a sip of spirits, but it always returns again."

The above is a case of beginning dyspepsia, truthfully described, and if attended to properly, admits of an easy cure in a very few weeks; if neglected, the patient will become more and more diseased, miserable, debilitated, and a bad cold, too long continued, settling on the lungs, will end in a permanent decline.

The rule is general, that dyspepsia, fever and ague, or any other ailment which causes protracted debility, lays the foundation for consumptive disease, not invariably, it is true, but in a vast number of cases.

CONSUMPTION COMMUNICABLE.

A truly contagious disease has one distinguishing characteristic. *It occurs but once* in the same individual, such as measles and small-pox; this latter terrible malady, does not return even when artificially produced, which is done in two ways:

By vaccination, that is, giving it to a person from the matter taken from a cow, the Latin name for which animal is vaccina.

By inoculation, that is, by means of matter taken

from a person who has himself had the small-pox. But it is not necessary to have the matter taken from a cow; if it is taken from a person who was vaccinated, cow-pox is produced.

There is a disease in the heels of horses called "*grease*," this will produce cow-pox in the cow, and in man also.

The human system then has small-pox communicated to it in four ways.

From a person having small-pox.

From a cow having cow-pox.

From a person having cow-pox.

From a horse having the *grease:*

And it occurs but once in the same individual.

There are exceptions to this rule, as in measles. Now and then there does occur a case among many thousands where measles and even cow-pox may attack the system the second time. From the most patient and scrutinizing observations extended through many years, the following conclusions have been arrived at, which I the more readily insert from the good, I hope it may do, if the suggestions are attended to by parents.

1. One single perfect vaccination does *not* always protect the system against small-pox for life.

2. Two vaccinations *will.*

3. The system is not fully protected until it ceases to be affected by vacine influence.

4. It is not safe to be exposed to small-pox in less than ten days after successful vaccination.

5. Therefore it is safest and best to have a re-vaccination in seven years after the first, especially in children.

6. By all means use the matter taken from a young child, who is otherwise healthy itself, and whose parents are known to have good health, inasmuch as cases have occurred where life-long and incurable diseases have been communicated by using vacine matter obtained from an unhealthy person.

7. Obtain the matter from a physician in whom you have the most implicit confidence.

Consumption is not communicated by any process of inoculation, and a person may have it several times in the course of his life. But when a man of apparent good health has the disease latent in his system in consequence of his kindred being consumptive or otherwise, intimate association with consumptive persons will bring the disease into fatal activity, hence the precaution of page 98. But a perfectly healthy man cannot by any ordinary association with a consumptive person, have the disease generated in his system. For if a disease were both hereditary and contagious in the full sense of the word, it would soon depopulate the world.

HEALTH OF CHILDREN.

Many children are born scrofulous, many born tuberculated, consumptive. Scrofula is a general, consumption a special term, being scrofula of the lungs. But although children may be born scrofulous in general, and consumptive in particular, they need not necessarily die short of the usual age of man. A suitable parental training at home, a wisely conducted education, and a calling adapted to their constitution would in the vast majority of cases, add to the present average length of life. This subject would of itself make a book, yet parents would not read it; and of one in a hundred who

did, not one in a thousand perhaps would use any systematic effort to carry out practical suggestions, although one would suppose that the health of a child would be inexpressibly dear to a parent's heart. But unfortunately it is not the fashion of the times to study the physical well being of the child. The first great object of the masses, is to leave their children rich, or at least that they may be "*well to do*" in the world; with a few, it is the first concern to imbue the minds of their offspring from earliest years, with the principles and practices of our holy religion, others again spend large sums of money to perfect a favorite accomplishment; but it would be a rare thing indeed to find a parent devoting even any considerable portion of his attention to the subject of securing to his child a healthful body, and a sound, robust constitution. And yet all ought to know, and every one who has been seriously ill from acute disease, or who has been an invalid from a chronic ailment, does know that without health, position, accomplishments, wealth become unenjoyable, if not burdensome, and even around religion itself, it but too often throws a doubt and gloom and morbid feeling, which only add to the depression of the unhappy individual.

An observant clergyman remarked, "I should be puzzled to find one healthy woman in my whole parish. I cannot think of one who has not something the matter with her. The best of them are at least subject to nervous or sick headaches, which unfit them often for duty or enjoyment." Within a week of this writing, one of the most eminent practitioners among the wealthy families of a neighboring city, under whose hands had died in her first confinement, a lady, brought up in luxurious ease and pleasure, who never had a desire ungratified,

who possessed all the advantages which wealth and family, and position could bestow, of so sweet a disposition, so passive, so gentle, so quiet, that every body loved her who knew her; who had just taken possession of an elegantly appointed mansion, with her kindred around her, all in high prosperity; few ever entered life with so clear a sunshine, with so bright a sky, and yet within a week of apparent perfect health, she died, from a want of stamina of constitution sufficient to meet the requisitions of maternity; and in connection with similar cases recently occurring, this gentleman replied to the inquiry of an acute and observant lady, "Doctor, what ails all the girls?"

"Madam, there is not a girl in this city fit to be married."

PRECOCIOUS CHILDREN,

those who are spoken of as being "*too smart for anything*," seldom live long. They are scrofulous, and if they do not die in childhood of "*water on the brain*," seldom reach adult life, and either perish long before their prime, or disappoint the high expectations formed of them, and live along below the average intellect of their age, as is well illustrated in an anonymous paragraph. "Having watched the growth of the young mind a good deal, we are less and less in love with precocity, which, indeed, is often mere manifestation of disease, the disease of a very fine, but weak nervous organization. Your young Rosciuses, and all your wonders of that kind, generally end in the feeblest of commonplace. There is no law, however, precise and absolute in the matter. The difference of age at which men attain maturity of intellect, and even of imagination, is very striking. The tumultuous heat of youth has cer-

tainly given birth to many of the noblest things in music, painting, and poetry; but no less fine productions have sprung from the ripeness of years. Chatterton wrote all his beautiful things, exhausted all hopes of life, and saw nothing better than death, at the age of eighteen. Burns and Byron died in their thirty-seventh year, and, doubtless, the strength of their genius was over. Raffaelle, after filling the world with divine beauty, perished also at thirty-seven; Mozart earlier. These might have produced still greater works. On the other hand, Handel was forty-eight before he gave the world 'Assurance of a Man.' Dryden came up to London from the provinces dressed in Norwich drugget, somewhat above the age of thirty, and did not even then know that he could write a single line of poetry; yet what towering vigor and swinging ease appeared all at once in 'Glorious John.' Milton had indeed written 'Comas' at twenty-eight; but he was upwards of fifty when he began his great work. Cowper knew not his own might till he was far beyond thirty, and his 'Task' was not written till about his fiftieth year. Sir Walter Scott was also upwards of thirty before he published his 'Minstrelsy,' and all his greatness was yet to come."

The use to be made of these facts is, that the "brighter" children are, the less they should be allowed to study, for unusual "brightness" is presumptive evidence of a scrofulous constitution. The child should be allowed to be out of doors every hour possible—should be driven out of doors, rather than otherwise; should not be sent to school before seven years of age, and even then should not be allowed to be confined to books or study of any kind longer than two hours at a time, twice a day, which may be gradually increased in the course of six or eight

years to three full hours at a time, twice a day; and no man under forty years of age, let alone a child, can study much longer, day after day, without certain injury to health. Above forty, when the constitutional and bodily vigor is matured, is established, men may study under suitable restrictions fifteen hours out of the twenty-four, without impairment of mental vigor. It is not the number of hours allotted to study which is to form our estimate of improvement, but the amount of mental activity. A man fresh to his morning work will perform more labor in two hours than another will in six who has been working hard all day. And any child studying four or five hours in the twenty-four, and compelled to spend the remainder of daylight in active work, or play out of doors, will learn more by far in the course of five years, than one who is confined to his books seven or eight hours out of the twenty-four. In accordance with these sentiments are the following remarks of a scientific writer, and every parent should read them with the utmost attention; because it is an unmistakable truth that, unless more attention is paid in the United States to the physical education of children, we will become an effeminate and ruined nation, for without robust physical health there can be no *reliable* greatness in politics, government, or morals. Whatever comes from a sickly constitution must itself be sick. To this I know of no exception. Many a proud empire of ancient story has found its fall laid in the bodily effeminacy of its people:

OVERTASKING THE BRAIN.

"It is especially after the twelfth or fourteenth year that the progress of education is driven forward with a rapidity dangerous both to the mental and physical

health. It is the period when the deficiencies of childhood are to be repaired, when competition excites the efforts of the youth and the envy of his friends, and the prospect is filled with pleasing hopes and ambitious schemes. If to these inducements we add another, more vulgar but not less common, that of obtaining the maximum result from the given expenditure, we shall have the most usual reasons for this pernicious overstraining of the tender mind. Surpass, outshine—these are the potent words ever ringing in the ears of many an ingenuous youth; and if he break down in the race, the calamity is regarded as a mysterious visitation of Providence, rather than a daring violation of a natural law.

"Of late years, I have had but little opportunity of knowing how the higher class of schools is managed in this respect, but I have some reason to believe that there has been no essential change since the days of my own early experience. At one of the highest academies in New England, the age of the scholars ranging from ten to twenty, the school-time was eight hours, and two or three more hours of study out of school were requisite in order to accomplish the tasks with tolerable credit.

"But it is in boarding-schools for girls obtaining the finishing touches of their education that this forcing process is carried to its extreme limits. A few years since, Dr. Forbes of London published the order of exercises in an English school, from which it appeared, that the girls spent in school, at studies or tasks, nine hours; in school or in the house, the older at optional studies or work, the younger at play, three and a half hours; in sleep, nine hours; at meals, one hour and a half; in exercise in the open air, one hour.

The daily routine of similar schools among ourselves,

at the present time, is probably, with an occasional exception, of a very similar character. From such information as I have been able to collect, I find that, generally, the time spent in study and recitations varies from eight to ten hours, seldom more than one hour being given to bodily exercise. In a very fashionable school in New York, the girls rise at a quarter past six, and study till breakfast, at eight; from nine till three, with the intermission of half an hour, they are studying or reciting. At three they dine, and then, in pleasant weather, walk out for an hour, in a slow, quiet manner. In bad weather, they go into a narrow room in the basement, and keep themselves warm by jumping about, or hovering around a stove. The hour finished, they study till tea, at six; and from that time till eight, they work, chat, or do what they please, all in one room. Then they study till prayers at nine, and then to bed, in large associated dormitories, one room seventy feet long containing, sometimes, thirty-five beds. Many of the girls are said to become 'nervous.'

"In another, of a very different character in other respects, the amount of studying seems to be still greater. The girls rise at half past five; put rooms in order; breakfast; study from seven till nine; school from nine till twelve; then dinner; after which, relaxation till half past two, when school begins, and continues till five; walk in the open air, or calisthenics in-doors, till tea-time; study from seven till nine; prayers, and to bed at ten.

"It will be observed, that the mischievous effects of such excessive mental exertion are not counteracted as far as they might be by bodily exercise. This seldom occupies more than an hour in the day, generally con-

sisting of a formal walk, without any end or object beyond that of mere locomotion, and consequently but little calculated to refresh and invigorate the nervous system. Such exercise should be connected with some intellectual object, such as botany, mineralogy, or sketching, otherwise it only adds bodily lassitude to mental weariness.

"At what age precisely the mind enjoys its highest vigor, is capable of the greatest efforts and the greatest endurance, is a question that cannot be very definitely answered; and yet it would seem as if some standard should be fixed upon whereby to graduate the degree of mental application at the different periods of life. Examples are not rare of elderly scholars, especially in Germany, who are in the habit of devoting fourteen or fifteen hours in the day to hard study. A distinguished jurist, not long since deceased, in a neighboring State, was accustomed, for several years immediately preceding his death, which occurred after the age of seventy, to spend fourteen hours a day in severe study. No class of men, probably, perform so great an amount of intellectual labor as English or American judges, sitting in court, as they do, a great part of their time, ten or eleven hours in the day, with their minds constantly on the stretch, amid the disadvantages of badly warmed, badly ventilated apartments, and thence retiring to their rooms, perhaps, to investigate a question of law, or prepare a judgment. The most of these men are past the meridian of life. It is not quite certain, however, that such labors do not make serious drafts on the constitution. Instances that seem to show a different result are probably exceptions to the general rule. There is much reason to believe that the development of mental power proceeds,

by equal steps, with that of the body; that it is precisely during that period when the physical powers are most mature, that the mind is capable of the most close and successful application. No one would think of looking for this period after the age of fifty; and if any one, misled by the achievements of some youthful Hercules, supposes it to be on the younger side of twenty, a little examination will convince him of his error. Power of physical endurance, of meeting that wear and tear of the vital forces that results from continuous and protracted activity, proceeds from a certain maturity of the bodily organization, and that strength which only habitual trial can generate. Before the age of twenty, this kind of maturity and strength is seldom witnessed, and experiments made upon a large scale, as in war and colonization, furnish abundant proof of this fact. During the last years of the French empire, when the conscriptions were frequently anticipated, in order to supply the frightful waste of life produced by its sanguinary wars, Napoleon often complained that the young conscripts they sent him were fit only to encumber the hospitals and road-sides. During the period, then, varying not far from thirty on the one side and fifty on the other, the body enjoys its maximum of vigor and power of endurance, and it is during this period that the history o. studious men leads us to believe that the mind displays corresponding attributes. The exact amount of labor which the mind may safely perform, of course, we never can determine, both because the consequences of excessive application are not very clearly exhibited, and the circumstances accompanying it differ so widely in different persons. The fact that many who have accomplished the most, and suffered the least, have rarely exceeded

seven or eight hours a day, would warrant the conclusion that this is very near the limit compatible with health and longevity. Such being the case, it follows of course that a much smaller amount of labor than this is suited to the earlier years of life.—*Ray.*

"We do our nature wrong,
Neglecting over long
The bodily joys which help to make us wise:
The ramble up the slope
Of the high mountain cope—
The long day's romp—the vigorous exercise:
The fresh luxurious bath,
Far from the trodden path—
Or 'mid the ocean waves, clashing with harmless roar,
Lifting us off our feet upon the sandy shore."

I here give a few of the principal rules to be observed in the rearing of children who are scrofulous, consumptive, or "*weakly.*" They

1. Should not go to school until six years old.

2. Should not learn at home during that time more than the alphabet, religious teachings excepted.

3. Should be fed with plain substantial food, at regu lar intervals of not less than four hours.

4. Should not be allowed to eat anything within two hours of bed-time.

5. Should have nothing for supper but a single cup of warm drink, such as very weak tea of some kind, or cambrick tea, or warm milk and water, with one slice of cold bread and butter—nothing else.

6. Should sleep in separate hair beds, without caps, feet first well warmed by the fire or rubbed with the hands until perfectly dry; extra covering on the lower limbs, but little on the body.

7. Should be compelled to be out of doors for the greater part of daylight, ☞ from after breakfast until half an hour before sun-down, unless in damp raw weather, when they should not be allowed to go outside the door.

8. Never limit a child as to sleeping or eating, except at supper; but compel regularity as to both; it is of great importance.

9. Never compel a child to sit still, nor interfere with its enjoyment as long as it is not actually injurious to person or property, or good morals.

10. Never threaten a child: it is cruel, unjust, and dangerous. What you have to do, do it.

11. Never speak harshly or angrily, but mildly, kindly, and when really needed, firmly—no more.

I am speaking here in reference to sickly children. Their lot is hard enough as it is, and if they die soon, the parent will not only be saved many an unavailing and sad reproach, but will secure an unfailing source of gratulation in after life by observing these last rules, for they are not a whit less important than the preceding, because I know of nothing which so much contributes to healthfulness as a glad and joyous and buoyant spirit. Can a little child's heart be glad, when, with a body weighed down by impending disease, the spirit is oppressed with endless restraints and rebukes, and threats and frowns, when there is an almost constant scowl on the only face in the wide world where it should find the uninterrupted sunshine of kindly cheerfulness? I think not.

I have been speaking of effeminacy, of the defective physical education of the young, advancing with advancing wealth and so-called refinement; and as these are

found in cities more than in the country, the following tables, by their contrast, may make a lasting and useful impression.

The average number of yearly deaths in proportion to the population in some of the large CITIES of civilized countries—thus in Vienna, for every twenty-two persons, one dies each year of—(*all diseases*:)

EUROPEAN CITIES.		AMERICAN CITIES.	
Vienna	1 in 22	New Orleans	1 in 26
Rome	1 " 25	New York	1 " 30
Naples	1 " 28	Providence	1 " 41
Amsterdam	1 " 28	Baltimore	1 " 42
Brussels	1 " 29	Brooklyn	1 " 42
Berlin	1 " 30	Boston	1 " 44
Madrid	1 " 35	Charleston	1 " 44
Paris, Manchester	1 " 36	Philadelphia	1 " 45
St. Petersburgh	1 " 37	Washington	1 " 50
Glasgow	1 " 38	Salem	1 " 52
London	1 " 39	Lowel	1 " 57
Geneva	1 " 43	Portland	1 " 62

In the several *States* of the Union, according to the census of eighteen hundred and fifty, the proportion of deaths from all diseases to the population is reported in the following tables, showing that cities are less healthy than the country, and that Northern localities are healthier than more Southern ones, *other things being equal.* New York city, for example, would present a more favorable statement as to healthfulness, were it not that so many immigrants from foreign countries die within a few days after landing. So with Boston and New Orleans: the latter has the additional drawback of the many there in transitu for health—dying, who are

from other parts of the Union. Massachusetts also presents a large mortality, because many perish at sea as sailors, besides its unusual exposure to cold damp winds.

Massachusetts	1 in 51	New Jersey	1 in 75
Maryland	1 " 60	Maine	1 " 77
Kentucky	1 " 64	S. Carolina	1 " 83
Connecticut	1 " 64	Alabama	1 " 85
New York	1 " 66	N. Carolina	1 " 85
Rhode Island	1 " 66	Tennessee	1 " 86
Texas	1 " 69	Michigan	1 " 87
Arkansas	1 " 70	Georgia	1 " 91
Illinois	1 " 73	Iowa	1 " 94
Delaware	1 " 73	Vermont	1 "100
Virginia	1 " 74	New Hampshire	1 "
Pennsylvania	1 "	Mississippi	1 "
Louisiana	1 "	Ohio	1 "
Indiana	1 "	Missouri	1 "

Table, showing the ratio of the number of deaths in New York city from all diseases and casualties, from the year 1800, the annual average for each five years is given.

Years ending.	Population.	Ratio of Deaths to Population.	Years ending.	Population.	Ratio of Deaths to Population.
1805,	75·770	1 to 33	1835,	270·089	1 to 41
1810,	95·373	1 " 46½	1840,	312·710	1 " 40
1815,	100·619	1 " 42	1845,	371·223	1 " 37½
1820,	123·123	1 " 37	1850,	515·394	1 " 33½
1825,	166·086	1 " 35	1851,	550·000	1 " 28½
1830,	202·589	1 " 39	1852,	5 ·000	1 "

Over three hundred thousand emigrants arrived in New York in 1851, numbers of whom were in a dying condition on their arrival; taking this into consideration, New York is nearly as healthy perhaps as other northern cities.

CULTIVATION, CIVILIZATION, REFINEMENT.

GENERAL REMARKS.

It is greatly to be regretted that the *preservation of the health* is not made an essential part of the education of every boy and girl.

Effeminacy, degeneration, and final extirpation, are the legitimate results of so called "*civilization*." Witness "all Greek and Roman story." *What has been*, will be again, under similar circumstances. The history of ancient nations presents, in one point at least, a remarkable coincidence,—on the heels of "*cultivation*" and "*refinement*" came quickly moral, physical and national degradation, and more modern history will not afford a different tale, except so far as prevail the preservative influences of that "*salt of the earth*" which is embodied in the principles of the Christian system, requiring its members to "*Work with your own hands*," "That if any would not work, neither should he eat;" precepts, which are to be regarded as truthful to the uttermost, whether in a moral or physical signification; the negative "*should*," applying equally well to the want of appetite or the material to satisfy it. In the "*new dispensation*," where *substance* takes the place of the *sign* of the old, HEALTH IS A DUTY, a truth, which half of all those forms and ceremonies which cumbered the commands to the chosen people were intended to instil, being calculated to promote, *directly*, personal, bodily health.

If, then, *health be a duty*, and one which enables a man to be a better citizen, a better Christian; a happier and a holier being,—what great dereliction of duty it must be, to fail affording our children that early and systematic instruction, which would enable them so well and so easily to accomplish that duty, by simply taking care of the constitution which has been given them, rather than vainly waste lifetimes and fortunes in repairing what was once rudely shattered by simple neglect or unpardonable ignorance!

There is no necessary reason why men should not generally live to the full age of three score years and ten, in health and comfort: that they do not do so, is because

THEY CONSUME TOO MUCH FOOD, AND TOO LITTLE PURE AIR;
THEY TAKE TOO MUCH MEDICINE, AND TOO LITTLE EXERCISE;

and when, by inattention to these things, they become diseased, they die chiefly, not because such disease is necessarily fatal, but because the symptoms which nature designs to admonish of its presence, are disregarded, until too late for remedy. And in no class of ailments are delays so uniformly attended with fatal results, as in affections of the Throat and Lungs.

However terrible may have been the ravages of the Asiatic Cholera in this country, there is perhaps no locality where, in the course of a single year, it destroyed ten per cent. of the population. Yet, taking England and the United States together, twenty per cent, of the annual fatality is from diseases of the lungs alone. Amid such a fearful fatality, no one dares say that he will certainly escape, while every one will most assuredly suffer by this same universal scourge, either in his own person or in that of some relative or friend. No man, then, can take up these pages, who is not interested to the extent of life and death in the important inquiry, *What can be done to mitigate this great evil?* It is not the object of this publication merely to answer that question, but to act it out; and the first great essential step is to impress upon the common mind, in language adapted to common readers, a proper understanding of the *first symptoms* of these ruthless diseases.

During the ravages of cholera, many thousands perished, from not knowing what were the predisposing causes, and what the premonitory symptoms of that terrible malady. Other thousands now living, owe it to the fact, that they were well informed as to what these first symptoms were, and promptly acted up to such knowledge.

The physician of a dozen years experience does not live, who cannot point to a little army of the prematurely dead, from ailments of the throat and lungs, simply, because *they came too late!* They "did not think it was any thing more than a common cold." And millions of others are destined to perish from the same want of definite information as to the difference between the symptoms of bronchitis, that is, a common cold, and the symptoms of beginning consumption.

This publication is intended to describe these symptoms, and to illustrate them in a manner so plain, so clear, that the most common reader may easily comprehend and remember, all that is important to be understood. These pages are not designed to propose any thing new to medical men; they are not even offered for their perusal, unless they have the diseases treated of, or are threatened with them; they are for the practical instruction of the great mass of the community; not as to where they can go to purchase a contrivance, or a balsam, or syrup, or tonic, or by whatever name any other such things are called, by which they may be able to cure themselves: nor is it wished to make the impression that the writer will cure those who apply to him by some extraordinary secret, which he locks up in his own bosom. Having such a secret, he would think himself the meanest of his kind, were he not to publish

it speedily, on the wings of the wind, that the suffering children of humanity, of every country and every clime, might derive from it all its advantages, at the earliest moment practicable. It is impossible for any book to be written which would be a safe and efficient guide to a common reader in the treatment of his own case: first, because no one plan can by any possibility be applicable, and second, the combination of symptoms is not the same in scarcely any two individuals in a thousand, therefore, it is not designed to recommend a medicinal preventive, or a patented cure for the diseases named on the title page; nor will this book afford aid or comfort to those who hope by its perusal to save a medical fee by blindly tampering with their constitution and their lives; nor is it desired to make the reader believe that if he applies to the Author, he will certainly be cured, but to make him first understand the nature of any symptoms which he may have, and then apply for advice to some regularly educated practitioner, who has done nothing to justly forfeit his honorable standing among his brethren by the recommendation of secret medicines, or patented contrivances, or travelling lecturers for the cure of certain diseases.

The Author has spoken in these pages of persons who had specified symptoms, and coming to him, were permanently cured, yet he may not be able to do the reader, having similar symptoms, any good. He has sometimes failed to cure persons who had no symptoms at all. In other cases where but a single symptom was present, and that apparently a trivial one, the malady has progressed to a fatal termination, in spite of every effort to the contrary. The object of these statements, is to have it expressly understood that there is no en-

gagement to cure anything or anybody. The wish is to enable the reader to understand properly any symptoms he may have which point towards diseases of the lungs; and, when he has done so, to persuade him not to waste his time, and money, and health, in blind efforts to remove them, by taking stuff of which he knows little, into a body of which he knows less! but to go to a man of respectability, of standing and experience—one in whom he has confidence—one who depends on the practice of his profession for a living—place health and life in his hands, and be assured that thus he and millions of others will stand the highest chance of attaining a prosperous, cheerful, and green old age.

The rule should be universal, and among all classes, not only never to take an atom of medicine for anything, but not *to take anything as a* MEDICINE—not even a teaspoon of common syrup or French brandy, or a cup of red pepper tea, unless by the previous advice of a physician; because a spoonful of the purest, simplest syrup, taken several times a day, will eventually destroy the tone of the healthiest stomach: and yet any person almost would suppose that a little syrup "*could do no harm, if it did no good.*" A tablespoon of good brandy, now and then, is simple enough, and yet it has made a wreck and ruin of the health, and happiness, and hope, of multitudes. If these *simple*, that is, *well-known things, in their purity*, are used to such results, it requires but little intelligence to understand, that more speedy injuries must follow their daily employment, morning, noon, and night, when swallowed in the shape of "syrups," and "bitters," and "tonics," with *other ingredients*, however "*simple*" they, too, are represented to be.

Within a few days, a gentleman of this city was ad-

vised, for a slight pimple on the shoulder of an interesting child of three years of age, to apply a little croton oil, he did so, it was absorbed, and in forty-eight hours the little sufferer died in convulsions.

In a late medical periodical, an account is given of a person who was advised to rub a little tallow from a candle on a scratch on the breast, he did so, and died in consequence in a few days. Similar cases have been before reported. Whether the tallow had derived some poisonous property from the metallic candlestick, or whether the arsenic which is put in candles to harden and whiten them was the cause, is not known, but these incidents serve to show that life may be lost, from what to a common observer might appear a remedy so simple that "it *could'nt* do any harm, if it did no good." Children are poisoned every year by eating colored candies. Banana, pear, jargonette, and perhaps all other drops (candies) are flavored with the hydrated oxide of Arnyle, known as Fusel oil, so poisonous that the odor of it causes headache, coughing, and other symptoms. Only the white candies can be safely eaten. Some of the colors in the other kinds are made by the most concentrated poisons. There can be no doubt that several years would be added to the average of human life, if the rule were universal to *swallow nothing which is not wholly an aliment, unless by the advice of a physician.* The taking of medicine on our own responsibility is the weakness of the age; with many it has become almost a mania, for the slightest ailment, they think they "must take something." Those who are always taking medicine are always sick. I have carefully avoided saying anything in these pages calculated to encourage so destructive a

habit. Medical books for the million have occasioned irreparable mischief by encouraging self-treatment. As far as they tend to give instruction as to the best mode of preserving health, and as to the symptoms of dangerous diseases they do well, but beyond that no countenance should be given either to the books or their authors. To the diffusion of general knowledge as to the best methods of preserving health, by teachings as to the general laws of our being in relation to air, exercise, food, personal habits, clothing, the locality, and construction of houses, and the management of infants, educated and honorable physicians have devoted their energies with increasing success, and to them the world owes a debt of gratitude not easily computed. From the best means in our power for ascertaining the facts of the case, Professor Joseph R. Buchanan states, that "in the latter part of the sixteenth century, one-half of all that were born died under five years of age, and the average longevity of the whole population was but eighteen years. In the 17th century, one-half of the population lived over twenty-seven years. In the latter forty years, one-half exceeded thirty-two years of age. At the beginning of the present century, one-half exceeded forty years, and from 1838 to 1845 one-half exceeded forty-three.

The common-sense reader will perhaps, from the statements which have been made, think it a very laudable desire to diffuse information among the people as to the symptoms of dangerous, insidious, and wide-spreading diseases. Countless multitudes have paid the forfeit of their lives by ignorance or neglect of the early symptoms of Consumptive disease. Perhaps the reader's own

heart is this instant smitten at the sad recollection of similar cases in his own sphere of observation.

Whoever lends a helping hand to the diffusion of useful knowledge, is, in proportion, the benefactor of his kind. Whether it be useful for men to know the nature and first symptoms of a disease which is destined to destroy a sixth of the population, is a question which each one must decide for himself; the Author believes that such an effort is useful.

It is not practicable for all to study medicine, nor is it to be expected that for every cough one has, he shall go to the expense of taking medical advice; it therefore seems the dictate of humanity to make the necessary information more accessible, and there is perhaps no better way of accomplishing this object than the general distribution of a book like this: and when the Author pretends to no new principle of cure, no specific, and no ability of success, beyond what an entire devotion to one disease may give any ordinary capacity, no apology is necessary for confining the book to causes and symptoms.

The author lays no greater claim to success, than what any man of common capacity might expect, who, under similar circumstances, and possessed of equal advantages, should, for the same length of time, confine himself rigidly to the treatment of a single disease.

Without saying anything to make the reader believe that his practice is widely extended, or crowned with unvaried success, the Author thinks that it has been sufficiently so, to merit the investigation and study of every intelligent mind. These wide-spread and fearfully fatal diseases are so, not necessarily, but by inattention and neglect. They are estimated to destroy prematurely one in every six, in civilized society; not however from

their essentially incurable nature; not because they are necessarily fatal in every case; not one in ten of all who have these diseases need die; there is scarcely a doubt that nine out of ten would promptly and permanently recover, if the Author's views were adopted, by which these diseases could be distinguished in their very earliest stages, and a rational treatment were forthwith begun and carried out with determined perseverance.

RECAPITULATION.

1. Throat-Ail, Chronic Laryngitis, Clergyman's Sore Throat, is a disease of the ROOT of the windpipe, answering to "Adam's Apple."

2. Croup is a disease of the BODY of the windpipe.

3. Bronchitis is a disease of the BRANCHES of the windpipe.

4. Consumption is a disease of the air-cells, the lungs themselves, which are at the extremities of the branches of the windpipe, as buds or LEAVES are at the extreme ends of the branches of a tree.

5. Throat-Ail when it is decided, and of some months continuance, is presumptive evidence of a consumptive constitution or tendency; *except* where it has been brought on by undue exercise, or use of the voice, as by singers and public speakers. See page 237.

6. Throat-Ail is only ameliorated by the application of the nitrate of silver; it is sometimes aggravated by it, and unless it is a slight affection and confined to the

voice-organs, it is never permanently cured by any ar gentine washes; while in many instances they are alto gether useless; and when wholly relied upon, they are pernicious, in consequence of the loss of time which they occasion.

7. Bronchitis is not a disease of the throat or the lungs, but of the *branches* of the windpipe which are situated between the two.

8. Consumption is as certainly, as often, and as per manently cured, when properly attended to in its first beginnings, as any other serious disease.

9. If the lungs have not begun to decay away, and if tubercles are not EXTENSIVELY deposited, a permanent cure is probable.

10. If the lungs have decayed but to a small extent, a restoration to comfortable health is not unlikely.

11. When decided decay has taken place in the lungs, a permanent arrest of the disease is a POSSIBLE event.

12. When Consumption is *fixed* in the system, there is but little prospect of any other than a fatal termination.

13. In any case of apparent Consumption, it is not possible to decide certainly that it is NOT Consumption, without the use of lung measurement.

14. Inasmuch as all educated physicians admit that the lungs may be in a state of actual decay, without its being detected by the stethescope, the plessimeter, or by auscultation, these means are not *reliable* in *any* case.

15. Inasmuch as it is an impossibility for any material portion of the lungs to have been lost without its being detected by lung measurement, then no case of actual or threatened, or supposed consumptive disease should be decided on without this lung measurement being taken.

16. If any part of the lungs have decayed away, spirometry *most certainly* detects it.

17. If the lungs are whole and entire, and in full healthful action, spirometry will INFALLIBLY indicate it.

18. If spirometry indicates full lung action in any given case, it is wholly impossible that the lungs in that case should be unsound as to consumptive disease, ANY AND ALL other symptoms to the contrary notwithstanding.

19. In deciding in any particular case whether or not Consumption exists in any stage, no physician should rely on any one, or two, or three symptoms, or means of diagnosing.

20. A warm air or climate aggravates Consumption in *all* its stages, and cures it in *none*.

21. A steady, cool, still, dry atmosphere promotes the cure of Consumption in all its stages.

22. A windy climate, a damp climate, a sultry climate, will render Consumption most fatal in all cases.

23. Sea voyages aggravate Consumption, unless they are over thirty miles from land, and are continuous for several months.

24. Cod Liver Oil is perhaps the best remedy now known for general scrofulous disease. It is an aid of some value in the treatment of consumptive persons who are under twenty-five years of age, and of those of any age, who when in health were decidedly inclined to be fat, or fleshy. But in other cases it is generally inert, or so impairs the appetite, or deranges the stomach, or affects the bowels, as to be a positive injury. In all cases where it imparts flesh and strength, it does good.

25. The true principle of treating Consumption is to regard it as a constitutional, and not a local disease.

26. Persons benefited, or cured by a sea voyage or by "going to the South," are those who have an affection of the stomach or liver, rather than of the lungs.

27. It is not insisted on that Consumption is curable in its advanced stages, or that it is easily cured in any stage, but that if the symptoms are all properly attended to on their very first appearance, a perfect and permanent cure is a common occurrence.

28. The *eradication* of Throat-Ail and Consumption cannot, unless in the very earliest stages, be rationally calculated upon, except by a steady, systematic, determined perseverance: see page 236.

29. A cough equally steady or violent, or as likely to be so during the day as well as the night, is presumptive evidence that the ailment is elsewhere than in the lungs.

30. Spinal irritation is sometimes masked by prominent consumptive symptoms (page 240), when the lungs themselves are free from special disease. Several such cases are under present treatment with encouraging promise of favorable results, which if treated as Consumption, would prove speedily fatal; B. S., 1121, exhibited the average pulse of health, with full, perfect lung measurement: the reverse another of surpassing interest, by reason of youth and accomplishment and mental culture, monopolizing merited sympathies, bearing for weary weeks and months, with steady endurance the ceaseless suffering which characterises spinal affections, *and yet no consumptive decay.*

31. However marked and efficient may be the effects of the treatment of Throat-Ail and Consumption, persons will remain cured, entirely free from the symptoms of these ailments, ☞ *only so long as they take care of themselves,*

By regular habits of eating, sleeping, and exercise:

By lives of temperance:

By avoiding all needless exposure and over effort:

By habitually and conscientiously guarding against the things which first caused the disease, since no malady, except such as small-pox, can be so perfectly cured, as not to return, as often as there is exposure to its cause:

32. By the almost total neglect of the physical education of our children hitherto, our sons and daughters perish by multitudes before maturity, and many of our old family names have already died out.

It is a truth of weighty import, that the most ignorant "Doctor" in the world will, in a series of continuous cases, either in a general or special practice, perform one or more remarkable cures; or, more correctly speaking, will have one or more remarkable recoveries, and any medicine, whether rain water or aqua-fortis, calomel or bread-crumb, infinitesimal or bolus, morphine or molasses, will, if given indiscriminately in every case that presents itself, in any long series, be followed inevitably by stray astonishing cures or very wonderful recoveries. But these are not the kind of evidence on which any rational man ought to experiment his health and life upon.

All that can be said of the infinitude of "Affirmations," "Affidavits," "Certificates," "Sworn to's," which pollute the page of the book and the column of the newspaper, is that certain things were done, or swallowed, or suffered, and the patient got well; but that he got well in consequence of using those means, is a wholly different thing; and upon this, holy human lives are daily hung by thousands.

"The same may be said of the scientific physician," replies the superficial thinker; but it is not so. The difference between the educated practitioner and the quack is this: The latter gives the same remedy for every disease that presents itself; if it fails, he is at his wit's end—he knows no substitute, as he administers a remedy for any given disease in perfect ignorance of how that remedy is to accomplish the desired change. But suppose he does not happen to have the remedy by him, or suppose there be some insuperable obstacle, from idiosyncrasy or otherwise, which makes it impracticable for the patient to take it; in either case, his hands are tied, and he knows no more what else to do, as the next best thing, than an idiot. The merchant who understands his business, and who does not chance to have the identical article you want, will almost by instinct name the next best thing in his store. He does this because he understands his business; but the quack, in a warehouse containing every medicine known to

men, has not the slightest conception as to which of them gives effects nearest his own.

On the other hand, the educated physician knows, as well as man can know such things, the principles on which each remedy acts; he knows the effect which each remedy generally produces, and he knows the effect which ought to be produced in order to promote recovery; and if the best remedy is not in his possession, he selects from all the store around him what is next best. If, for example, he desires to produce instant and effective vomiting, he will give Tartar Emetic; if none is to be had, he will administer Powdered Alum; if the patient "*can't take a powder*," he takes a table-spoonful of Salt and a table-spoonful of Mustard; this is mixed in a glass of water, and down it goes, and almost instantaneously up it comes, and the man is saved. But suppose he has lock-jaw, and must vomit or die within half an hour; what then—he rubs the skin over the stomach with a damp cloth, places on it a small leaf of tobacco, and in a minute, almost, the cataract comes through open jaws, which a moment before no iron could pry apart. This is the grand test of the accomplished and scientific practitioner: he is full of expedients, knows in an instant what is wanted, the means of accomplishing it, and how it is going to do it; and thus it is that the intelligent patient feels safe in the hands of "His Doctor"—as safe as can be, next to Him who ruleth over all.

CASE OF THROAT-AIL.

The following letter is highly instructive, especially to clergymen, and presents several features of considerable interest to others.

July 13, 1852.

My Dear Sir:—

I have just been reading your work on "Bronchitis and Kindred Diseases" with much interest, and I trust, some profit, as I am one of the many clergymen who have suffered from the prevailing disease of the throat

which you describe; and with the hope of aid, of which, for some time past, I have almost despaired, I am induced to submit to you the following statement:

I am forty years of age, have a light complexion and an ardent temperament, and although I never was seriously ill, till about twelve years since, I never enjoyed the firm and robust health which most of my associates had.

I was, from a child, subject to severe and frequent attacks of *sick head-ache*, which I inherited, in common with a large family of brothers and sisters, from my mother.

Soon after I entered on the duties of my profession, I went as a Missionary to Syria, and the Holy Land, where I spent several years under the direction of the American Board of Commissioners for Foreign Missions, till poor health compelled me to return to my native land.

While I was a resident in the *City of Jerusalem*, I was brought very low by a protracted fever. For several weeks my life hung in doubt, and my prospect of recovery was, perhaps, the faintest possible. I did however at length begin to amend, and for some time slowly gained. But before my recovery was complete, I was seized with great violence with the *Fever and Ague*, a disease which, in that country, prevails very extensively, and is particularly severe and unmanageable in the case of foreigners. This gradually prostrated the little remaining strength and energy I had, although I struggled on with the hope of relief for nearly two years before leaving the country.

After my return to this country, in 1843, although the *Ague* still lingered in my system, and often prostrated me for a day or two, my general improvement was very decided and very great. Several months of recruit so encouraged me, that I was induced to settle as a pastor over a country church, in this my native State. Although often afflicted with the "*Sick Head-Ache*," and the "*Fever and Ague*," generally both at the same time, I remained there nearly seven years, and per

formed a great deal of anxious labor, in the midst of much that was exciting and perplexing, and with an insufficient salary. In addition to this, I had almost constant domestic affliction, connected with the death of several children, and the protracted sickness of others, who finally recovered.

In this state of things, my *Digestive and Nervous System* became very seriously disordered, and some *four years since*, or about two years before I was compelled to ask for a dismission, and stop preaching, my *throat became very sore and troublesome.*

There was *much canker, great elongation of the Uvula, and inflammation of the Tonsils.*

I however most unwisely kept at my work, *doing little or nothing for myself, and hoping for a better day.*

But you need not be informed that, in this way, the better day I hoped for, did not arrive.

My *throat* steadily grew worse, until the inflammation gradually extended itself to the top of the lungs, at least this was my opinion, as also the opinion of several physicians. At any rate, I found myself very low, and continually sinking lower, with *poor appetite, much emaciation, great nervous excitement, sleeplessness, weakness, coughing, and occasional spitting of blood.* This was the state of the case about two years since, when I was dismissed and gave myself seriously to the business of getting better.

I first applied to ———, who *clipped the Uvula*, and *removed the Tonsils*, which were badly inflamed and much *ulcerated.* Soon after this, attracted by the great fame of———, I visited him and put myself under his care. He seemed very confident he could cure me at once, with the nitrate of silver and other means, and actually did relieve me to some extent.

But soon after leaving him, I found the difficulty returning, and fearing I had not made a fair trial of the *nitrate of silver*, I at length put myself under the care of ———, who seemed equally confident with ———, that he could cure me. I remained under his care some *four or five months*, but with no permanent benefit. * * *

For some months past, I have taken no medicine, and done nothing except to use some simple gargle for the throat, &c. * * *

I have expended my little all in the efforts of the past two years of my suspension from labor, to regain my health. Previous to meeting with your late work, some short time since, I had almost made up my mind that it was in vain for me to hope further for complete restoration, while care for a dependent family was fast crushing my little remaining courage out of me. But the very careful perusal of your work has inspired me with some fresh hope, and determined me to make known my case to you, and ask your friendly offices in my behalf. And that you may the more definitely understand my case, *as it now is*, permit me to describe it as it seems to me.

I have much less *head-ache* than formerly, and almost no *ague*. But a fundamental difficulty, as it seems to me, is a *bad digestion*, and great *irregularity in the bowels*.

I am sometimes quite *costive*, but am oftener troubled with an unnatural *looseness*, from three to six evacuations a day, and sometimes attended with great flatulence.

I am also greatly troubled with a bad *catarrhal* affection of the *nose*, the posterior nares seem often to be very much inflamed. My *eyes* and my *whole face* suffer from the attack, being *red*, *inflamed* and *sore*.

Neuralgic pains shoot through my cheeks and temples. My head is either exceedingly heavy and dull, or *violently aches;* and during the attack, which usually lasts from twelve to twenty-four hours, I feel nearly sick enough to be in bed.

While the attack continues, the amount of thin, colorless, inodorous water which flows from the external nostrils is amazing; but generally, if I can fall asleep, which at such times is difficult, the discharge ceases, and after a night's sleep, I awake better, and very much refreshed.

The intervals between these attacks vary from one to four weeks, the greater part of the time being about

one week; and during these intervals, I scarcely feel any inconvenience of the kind, the nostrils being very rarely stopped up. This is a trouble of long standing, and for the removal of which I have tried more nostrums and "certain remedies" than I can easily enumerate. I suffered from it long before I felt the difficulty in the throat, * * * * and this leads me to speak more particularly of the *throat as it is.*

If I take the slightest cold, which I easily do, my *throat* is decidedly *sore*, the *tonsils seem inflamed*, and there is *soreness*, apparently, at the *top of the windpipe*, and the follicles on the back part of the throat behind the palate are swollen and shining.

When I have no cold, there is no great soreness, but generally some slight irritation and heat. The follicles before mentioned do not entirely disappear, but remain, though less prominent, and far more pale in color.

There is a slight *soreness about the swallow*, or opening into the windpipe, and I very often find myself trying to swallow something, which seems to be lodged in that region. (The uvula had been removed two years before.—Author.)

I easily become hoarse, *especially at night*, when I much oftener feel such a relaxation of the muscles of the throat, and neck, and upper breast, as nearly destroys the power and tone of my vocal organs. I have naturally a clear, distinct tenor voice, and have always been accustomed to singing. But at these times, my voice is *dry*, *husky and unnatural*, and my utterance exceedingly *difficult* and *prostrating*, so much so, that I instinctively avoid occasions for speaking. The effort obliges me to summon all the energy I possess. This, indeed, is now my greatest trouble.

It is not so much *soreness*, or even *hoarseness*, as it is *weakness*,—a feeling all about the throat and neck and upper part of the breast as though I had not the power to speak.

My mouth and throat, which used to be very hot and dry, particularly on waking in the morning, are now quite comfortable in that respect, and at times, especially

the day after I have preached, my voice has nearly its former power and elasticity, always being worse in the former than in the latter part of the day."

Nearly the entire letter of this correspondent is given, the italics not being his. It will be read with interest by other clergymen, who will see in it much that coincides with their own feelings and symptoms. This case was treated by correspondence, and I had for some months ceased to hear from him; but having steadily improved from the first week of his application, I supposed he was well. In sixteen months after his first letter, he called at my office for the first time. Pulse natural, breathing regular, the lungs perfectly sound, working *fully*, measuring two hundred and thirty-two cubic inches, which was some twenty inches more than his healthful standard.

I understood him to say that he had preached regularly for some nine months, missing but one Sabbath, and having been invited to the pastorate of several churches, he had called on me to advise him as to the locality which would be best suited to his case. I saw nothing which required medical advice, and trust he will live to labor usefully and long.

It would be interesting to invalids to read other letters, in which descriptions are given in the language of patients themselves, but perhaps enough has been said to enable persons to understand the general symptoms of the diseases treated of. But in reference to clergymen, I desire to say, that as a general rule, it is time and money thrown away, in cases of legitimate and uncomplicated *throat-ail*, to quit preaching, and go to the South, or across the Atlantic, or to some large city: for they can be treated safely and successfully at home, *in the continuation of their labors.*

I have found, thus far, that in three cases out of four, a return to preaching is a necessary prescription, under suitable restrictions as to time, manner, amount, &c.

In all cases, without an exception, where preaching gives a stinging sensation, or a sharp, knife-like pain, or

requires a great effort, ☞ not one word should be uttered in public, until by previous careful training the parts are prepared for the exercise.

I have not found it necessary to take off the uvula once in any five hundred adult cases.

I have not seen in the last ten years exclusive practice in diseases of the air passages, one single adult case, where I thought the excision of the tonsils desirable. I believe their removal is unnecessary, and that *in many cases it is a fatal error;* not that the operation destroys life at once, but that it lays the foundation for the loss of life, by consumption of the lungs, I think is demonstrable.

I believe that in cases of actual consumptive disease, the removal of the tonsils hastens death.

I believe that in cases of incipient consumption, the removal of the tonsils fixes consumption on the lungs.

I believe that those who are of a consumptive family, or who from various causes are threatened with consumption, will precipitate consumption on the lungs by removing the tonsils; whereas, had they been permitted to remain, such a result would have been indefinitely postponed.

These sentiments are entertained on the ground of counter irritation. I have observed that those persons having consumptive symptoms, with scarce any tonsils at all, in consequence of their having shrivelled away, do more certainly die, than those who have enlarged tonsils, for they "bear the brunt" of colds, and through them colds pass from the system with comparative impunity. I trust the Profession will direct their observations to this point, for it has become so popular a practice that the first step, and one taken as a matter of course, is to remove them for any throat affection which presents itself. I know very well that such an operation is not critical, gives but little pain, and no noticeable present inconvenience; but that their indiscriminate removal does generally lay the foundation for disastrous results, is a fact of which I at least am fully convinced. My plan is to reduce them when enlarged, and as nature

placed them there, it is rational to conclude that it was for some important, at least necessary purpose, and that there they ought to be permitted to remain in their integrity, unless some malignant or acute disease renders their immediate removal imperative. My views are, that it is better for a cold to settle anywhere else than on the lungs, that the tonsils are as a van-guard, and often withstand and bear back the enemy, and thus secure the lungs from attack, so that instead of removing them, every effort ought to be made to restore them to a healthful condition, in their place, especially as their removal sometime occasions suffering, and is not always unattended with danger. See page 309.

A CASE TO BE STUDIED.

On a cold November night, a gentleman was called to visit a neighbor in distress, and became thoroughly chilled, resulting in a cough, which gradually increased in violence, until it gave him no rest during the day, and he visibly declined in flesh; and when I first saw him, on the tenth of January following, he looked badly; but had no pain, appetite good, sleep sound, and felt as strong as he ever did. The moment he laid down in bed his cough ceased, and returned only on rising in the morning. Reading, conversation, any sudden or fast motion, going up stairs, entering a room, or going out of doors,—all these things excited an irritating, dry cough; almost the only relief he could get would be in continued gentle motion out of doors.

I warned him of the serious nature of his ailment, and urged the use of appropriate means without delay; but, like persons generally, he could not be persuaded that it was any thing more than a cold—he felt perfectly well in every respect except the cough. He was only thirty, in the prime of life, had weighed more the previous summer than he ever did, had had a similar attack in Paris, eight years before, and felt sure it would, as that did, gradually wear off as spring advanced. But it did not wear off; in about six weeks he commenced

spitting blood, which continued almost daily for some weeks. The most competent physician in Philadelphia could not arrest it, and he wrote to me—"I went to bed as usual on Monday evening, April 30th, and slept until about six o'clock next morning, when I began to cough, and it required considerable effort to bring any thing up; and while straining to do so, up came a spoonful of *red blood;* since then, and even now, I have been spitting blood at every expectoration: it is not all blood, but mixed with the sputa. It has not weakened me any, I feel as strong as ever; and this morning, three days after, I have walked three miles, without any difficulty, but still I cough about every half hour, and it is dry, and the expectoration scanty, with quite dark blood. Pulse eighty, breathing easy, appetite good, sleep sound. I have no pains or aches any where."

His physician, the most accomplished auscultator in Philadelphia, advised him that "there is now a mucous rattle under the right clavicle, (collar bone,) and that the little patches of tubercles are beginning to soften, and about two inches of surface dissolved." This was April 19th; the first bleeding was March 1st.

This gentleman became steadily and gradually worse; the cough troubled him in the night as well as in the day; he steadily grew weaker, more wan in appearance, his gait became slow, measured and careful, as a misstep would bring cough or blood, or at least the fear of it; he was chilly; he had constant exhausting and drenching night-sweats, and the general remark was, he will not live long. Soon after he was stricken with an intense pain in the left thigh, which became endurable in a day or two, but left him limping at every step.

Under these circumstances, I advised him that it was not a case of consumptive disease, that all medicine was wholly useless, that the only hope of life was in the adoption of certain modes of life, and forms of exercise, in a locality favorable to certain contingencies. I assured him that I believed it was almost impossible for him not to get well, if he would rigidly and energetically carry out my views, and at once. I was impor-

tuned by his parents, day after day, singly and together, to "*do something*," at least to give something for his cough, and then an endless list of syrups, and teas, and cough-drops, and the like, was in daily presentation; my opinion was asked as to each one—*could it do him any harm? It was very simple, might it not do him some good?* Its *simplicity* consisted in its constituents being known, and that they were "*entirely vegetable*," seeming to think that as the constituents were familiar articles, they could not possibly be injurious, especially too as it was a *purely vegetable remedy.* So is morphine, which destroys life in an hour—or prussic acid, in a moment. In reply to all these, I could only say, that they could do him no good, and that they were worse than useless; because they were medicines, they had no nutritive qualities, and therefore could not possibly give him any strength, while they *might* impair his digestion or injuriously affect his stomach or bowels.

In one month after this patient entered wholly and heartily on the plan I had marked out for him, he wrote to me saying:—

"I am getting along surprisingly well as regards my health. Indeed, I feel almost well. I would not have believed that so great a change could have been effected in so short a time. I attribute the wonderful improvement in my condition to the principles of practice inculcated by you"—which he enumerates.

I deem it due here to utter this caution, that notwithstanding the encouragements which a physician meets in his practice, and the strong corroborations of the truthfulness of his principles, which occur from time to time, he is yet doomed to witness the total failure of all his efforts in particular cases, from a variety of causes; and yet, for the sake of the palpable results which in the main attend his practice, he is induced, in spite of his occasional failures, to strive resolutely on; as it is better to save some, than none at all; for it is but too true, that the scientific practitioner is often pained to

observe, that application is made to him, after every thing, and every body else has been tried in vain, and when the stamina of nature is almost worn out, and her recuperative energies nearly exhausted, by the blind and indiscriminate use of the numberless "*patent medicines*" of the day, he is then called upon, and in a certain sense, it is demanded of him, that to this *remnant of a man*, he shall impart a new vigor, and health, and life!

I do not mean to say that this gentleman is well, but I do mean to say, that if he will as energetically *continue* my prescriptions, he will, with great certainty, in due time, arrive at as good health as he *has ever had.* But, if he, from any cause, ceases to observe the course marked out for him by me, I think he will fall into permanent ill-health.

I do not give this as a single case of the kind coming under my eye; I have had others, but this is recent, and shows the present value of the means employed. Nor is it a remarkable case, for it is simply in accordance with acknowledged principles of practice, and I give it to impress the reader with one or two important facts, which may be eminently *practical to him.*

First. Because a man is sick, coughs, spits blood, has drenching night-sweats, falls away in flesh, it does not certainly follow that he has consumption.

Second. Nor does it follow that a man having the above symptoms, must, as a matter of course, take physic, or wear all sorts of girtings, up-holders, &c.

Third. That in any case of disease, it is first of all, of the very highest importance, to know that a case is *not* one of consumption, and then to know what it is, and what is best to do.

The reader will want to know the reason of my confidence in my own opinion, and of my steady refusal to give any medicine at all.

First. I knew this gentleman to have been in perfect health less than a year before, and that all his habits of life were regular and right.

Second. When I first saw the case as a physician, I

had detected the spot of the mucous rattle, which led the physician to believe the lungs were in a state of decay there, and it was against all my experience that the lungs could begin to decay from softened Tubercle from January to March, in a man who had previously enjoyed uninterrupted good health.

Third. His pulse was not the pulse of consumptive decay; it was too slow, too soft, too full.

Fourth. His lungs, on trial, measured as much as I had known them to do in health five years before.

Fifth. My reason for so steadily refusing to give any medicine whatever was, his appetite was good, his bowels were regular, his pulse indicated no fever and no irritation, and the giving of any medicine might derange these healthful operations, while the consideration superior to all others was to maintain the appetite in its integrity, so that he might derive nourishment and strength to enable him to resist the debilitating effects of a constant, harassing cough and wasting night-sweats, my whole object was, not to give a tonic to enable him to eat more, for there is seldom danger in any disease that persons shall eat too little, but to enable him to digest more completely what he did eat; this would give pure blood, rich blood; blood which would impart vigor, and health, and life, to the whole man—*and so it did.*

The fourth reason given above is of sufficient importance to merit the serious consideration of every invalid —*the mathematical measurement of the lungs as a sign in consumption.*

The lungs contain air; and their object is to receive, hold, and expel air; a certain amount of this air is necessary to the health of any individual, but that amount must vary in proportion to the size and age of a person, as much as the healthful amount of blood is proportionate to the size and age.

It is known how much air a man's lungs, in perfect and full healthful operation, should hold, by measuring it as we would measure water, by transferring it from a vessel whose capacity was not known into one whose

capacity was known. If, then, I find that every man of thousands, who is in perfect health, emits a certain amount of air from his lungs, I conclude that any other man, *under similar circumstances*, who gives from his lungs an equal amount of air, must be in good health, as far as his lungs are concerned, and every year accumulates its additional proofs of the same great fact, and when it is known that the lungs work *fully* and well, an immense burden is at once removed from the mind of the physician, as well as patient, for he has less to do—the patient has less to dread.

All that the *Spirometer* does, (or *Breath-Measurer*, which is its literal signification,) is to measure the amount of air contained in any man's lungs with mathematical certainty and precision, down to the fraction of a single cubic inch. Thus far the patient can see, as well as the physician, what is his actual measure, and by comparing it with what it ought to be in health, he can have some idea of what he has to do, and of his present condition.

We all must know that if a man's lungs in health should hold three hundred cubic inches, they would, if half gone, certainly not measure over one hundred and fifty, *and so of any other proportion*, down to an inch.

The two important uses to be made of this most invaluable principle are—

First. If a man can only expire his full healthful quota of air, he most assuredly cannot have actual consumption, whatever else may be the matter with him, and the knowledge of this one fact alone, arrived at by such unmistakable evidence, is of incomputable worth to any invalid, not only relieving him of the weight of a million mill-stones, but in affording him an important means of restoration—*hopefulness*, for we almost all instinctively feel, if it is not consumption there is at least a chance of life; but if it is consumption there is no hope.

Second. The next important practical deduction is of a two-fold character.

If the lungs do not give out their full healthful amount of air, it is because they are actually affected,

or are threatened. The instrument does not tell this, it must be determined by the mature judgment of the experienced physician.

If the lungs be in a consumptive decay, the pulse and auscultation, with the data already afforded by measurement, will detect this state of things, with a degree of certainty which is most admirable; and this certainty is made doubly sure, if being under treatment a short time, his lungs measure *less* week after week, for then he is certainly dying by inches.

But it does not follow because a man does not measure to his full standard, that he is consumptive; it only shows the one thing, that he is defective as to the action and capacity of his lungs, that deficiency may be the result of decay, or debility, or from the lungs being crowded with phlegm or other fluids; if the deficiency is not from decay, proper treatment will diminish that deficiency from week to week, because the treatment invites back the action of the lungs. Thus it is that the gradual *increase* in the capacity of the lungs to hold air, when that capacity, by any cause, has been diminished, is demonstrative of a return towards health.

A WEIGHTY CONSIDERATION.

Common consumption comes on by slow degrees, and I have never known a case that was not preceded, for months, by an inability of the lungs to measure their full standard. I consider it wholly impossible for a man to have actual consumption, until he has not been able for months to measure the full amount of air. This deficit in the measurement of the lungs *never fails* to exist in any case of clearly defined consumption, and inasmuch as it *always* precedes consumption, its existence for some months in succession ought to be considered a sympton of consumption in its early stages, and a course of treatment should be adopted which would annihilate that deficit at the earliest possible moment.

To show how certainly this deficit of lung capacity, or lung-action is removed, when it exists not as an effect

of a decay of the lungs, but as an effect of imperfect action, I give here a few cases.

C. W. F., aged 17, an only son of a wealthy family, was placed under my care May 26, 1852. Thin in flesh, pain in side, sore throat, tightness across the breast, short breath, difficult to fetch a long breath, troublesome running and sniffling of the nose, a weak back, with other indications of a weakly constitution. The measurement of his lungs should have been Two Hundred and Twenty-five cubic inches, their actual capacity was Two Hundred.

DATE.	PULSE.	WEIGHT.	BREATHING.	LUNG MEASURE.
May, 1852, 26	72	103	16	200
June 2	72	103	16	206
9	72	103½	16	216
24	72	107	16	238
July 19	88	104	20	216
23	82	103	18	216
Aug 7	78	105	15	230
24	76	107½	16	238
Sept. 29	72	111½	16	250
Nov., 1853, 8	72	121½	16	252

The parents of this case, especially the mother, visited me at different times, expressing the deepest solicitude, and exhibiting an abiding impression that their child, upon whom so many hopes were hung, was certainly going into a decline, especially as he had grown up rapidly, and was a slim narrow-breasted child.

The reader will perceive with what admirable promptness the lungs answered to the means used for their development, in the very first fortnight, and with that increase of action a corresponding increase in flesh, so that in four months, and they embracing the hottest of the year, when most persons lose both flesh and strength, he had gained eight and a half pounds, while the capacity of his lungs for receiving air had increased one-fifth, that is, fifty cubic inches, and at the end of a year, when he called as a friend, was still gaining in flesh, and

strength, and vigor, with no indication, apparent or covert, of any disease whatever.

What untold treasure would these parents have given, when their child was first brought to me for examination, to have known that the very next year their son would have been one of the most hearty, healthy, manly-looking young men of his age in New York; and yet there can be no doubt that he would have dwindled away, like a flower prematurely withered, had his case been neglected, in the vain hope of his "*growing out of it!*"

The reader will notice, that on the thirteenth of July, every symptom became unfavorable; his pulse increased, his weight diminished, his breathing was more rapid, and his lung-measurement declined largely—the reason is, that he left the city in June, and spent some weeks at Newport and Saratoga, with his parents, intermitting all remedial means; but, as soon as he returned to New York, and gave diligent attention to what was required of him, his symptoms began at once to abate, and he steadily improved to his recovery. "*The Springs*" *have proved the grave of many young people with consunptive symptoms*, and older consumptives generally get worse there. The high feeding, or *get what you can* system of diet, at watering places, fashionable hotels, and boarding-houses, their Lilliputian, one windowed rooms, from one to "five pair back," the midnight clatter along interminable passages, the tardy, or no answer, to bell-call, the look out from your chamber window over some stable, side-alley, or neighbor's back yard; these, with the coldness, and utter want of sympathy at such places, would soon make a well man sick, and will kill instead of cure the consumptive. They want, instead of these, the free, fresh mountain air, the plain substantial food of the country farm-house, the gallop along the highways, the climbing over the hills by day, and the nightly reunions with family and kindred and friends. And yet the *million stereotype this mistake*, against all reason and common sense. Only now and then is one found to choose the better way,

against troops of remonstrants and opposers, who never had experience, who never think for themselves,—and that is the brave man who gets well, especially when he is determined to do so.

The following letter from a Presbyterian clergyman, received while the last sheets were going to press, possesses great interest, as describing one of a large class of cases of young girls, *just falling into consumption* OR *spinal disease*, whom judicious attention, with but little medicine, would decide to be healthful for life. Let every parent make a timely use of it, and not wait until disease is permanently fixed.

" DECEMBER 20, 1853.

DEAR SIR,—

The great benefit which my oldest daughter and myself have received from your prescriptions, induces me to write on behalf of my second daughter, aged eighteen. She is five feet three inches ; monthlies regular in every respect; bowels act daily, but a little inclined to costiveness; pulse about eighty. Her cough, which alarms me, is rather a singular one ; she seldom coughs but *once at a time*, and that is a hollow one, somewhat frequent, attended with a little pain just above the center of the chest, and from that spot, the cough seems to arise, but seldom any pain except when she coughs. She raises but little. But in the morning she feels as though she wants to clear her throat, and raises some phlegm, and so after eating. She is somewhat troubled with cold feet : almost devoid of appetite, especially in the morning. She seems to want but little, except one meal a day, and that is dinner.

She feels weak and drooping, her limbs feel like giving away under her. She sleeps very well at night, but has a bad taste in her mouth in the morning, *especially if her window is not down a little* from the top during the night to let in the air.

At times, especially in a wet or cloudy day, she cannot sing with her usual ease. When she was a little girl, she was troubled with swollen tonsils, but *now this*

seldom occurs. When she gets tired, she has some pain in her back."

It is the want of timely and decisive attention, in just such cases as this, which makes many a daughter an invalid for life, mingling a bitter drop with every gladness, throwing a cloud over every day of sunshine, a blight on every hope, a thorn in every pleasure, a tear in every smile. To her mother, she is a permanent source of anxiety and apprehension. Should she become a wife, she creates such an incessant demand upon her husband's attentions, his time, his means, that his business energies are crippled, when he is just *setting out in life*, when, more than at any other period, every faculty of mind and every power of body should be concentrated in the one great effort, of making a good beginning, of laying a sure foundation. If by any means she should exist on, to become a mother and die, she leaves to her child the inheritance of a feeble constitution, blasted at the root! No wonder that it is said, "The grandchild of the city (especially) seldom lives to perpetuate its name, or race, or kindred."

TO BUSINESS MEN.

To be able to retire from business, on a competence, to the quiet and repose of country life, is the great aim of multitudes, yet, those who accomplish it, die soon after, not from age, not from the nature of a country life in itself, but from the effect of so sudden and great change in a man's habits and occupations, and this occurs irrespective of previous good health.

If, then, a sudden transition from high bodily and mental activity, to a condition of life which compels nothing of this, but on the other hand compels inactivity, because the man has nothing to do, will uniformly make a well man sick, the same change cannot otherwise than aggravate the maladies of an invalid; and yet it is the routine advice given to persons who have symptoms of Bronchitis, Consumption, Dyspepsia, or

Throat-Ail, to go to the country, to go South, to go to the West Indies, to go to the Springs——*to do nothing!* except to wait and watch their symptoms, and the symptoms of others on the same melancholy errand, and whom they see evidently nearing the grave every day!

Especially is this advice inefficacious and positively mischievous to clergymen, lawyers, and others of high mental activity. The mind cannot be compelled to repose, it cannot be chained, it will work, and if not employed on objects of pleasurable interest out of itself, it will fret about the bodily ailments, and work itself and the body too into a state of irritation, which *nothing can effectually soothe*, as long as it is permitted only to nurse its own ailments.

Therefore, as a general rule, I find it of the highest importance to keep patients at the kind of business, *in moderation*, which allows them to feel most at home, preferring those which do not involve harassing care and over responsibility, but which allow *pleasurable, remunerative, exertive exercise in the open air, for a large portion of the twenty-four hours of each day.*

A CASE.

S. C., aged thirty-six, applied to me March 20, 1853, with the following symptoms:

1. Pains in side, under arms, and right shoulder point.
2. Pain between shoulders, following right shoulder-blade.
3. Debility, easily prostrated, no endurance.
4. Hacking dry cough, and constant clearing of the throat.
5. Daily tiredness and dryness in the organs of voice, especially as night comes on.
6. A loose yellowish expectoration every few minutes during the day.
7. Spitting of blood two years before, and several times since, at less and less intervals, and continuing some days at a time; and *now*, any active exercise,

such as running, would give a mouthful of clear red blood.

8. He had lost one-tenth of his whole weight, giving him a cold, lean, skinny, debilitated look.

This gentleman was the active partner of a very large and successful business house, and had made up his mind to abandon business and turn his whole attention to the recovery of his health. I told him that if he did so he would die, that his lungs were not diseased, and that continued attention to business, under certain restrictions, with other appropriate means, would, with reasonable certainty, restore him to complete health. This opinion was given, although he had been an invalid for three years, and a father, brother and sister had died of consumption. The reasons of my opinion were—

First. He had a healthful pulse.

Second. The measurement of his lungs indicated that they were working *fully and well.*

Third. The bleedings were the result of congestion from constitutional cause, and not from tubercles or decay.

The bleedings, being of such a nature, would recur, as often as those causes were allowed to arise, yet, by proper attention to certain symptoms, indicating fulness of habit, these causes and bleedings could be indefinitely postponed.

The result of the treatment in his case was, that he continued his business uninterruptedly, began to increase in strength and flesh in summer, and not having heard from him for a month or two, he writes December 20:

"It is sometime since I wrote you, and I am pleased to say that I had no occasion so to do. Since my last, I have felt quite well. For three days past I have had some nausea, a belching up of considerable wind, and a dull head-ache, not severe; otherwise I am first rate, have not felt better for a long while, and begin to feel like a new man, and hope I am good for some years to come."

The only draw-back mentioned was a recurrence of the spitting of blood, slight; but I do not consider it of special importance, because it is of the nature of that which women have under certain circumstances, attended with similar symptoms, to wit, those of an over-fulness of body, and can be indefinitely warded off without medicine, and with proper care, and may be made a means of adding years to his life, if a proper use be made of it.

Of five hundred young girls, DAUGHTERS of what is called the "better class," from fifteen to twenty, in New York, not fifty have lungs acting *freely*, and *fully*, and *well;* and it is precisely for this reason that not ten in a hundred of these live to see forty years, and at a far earlier age begin to wear the wan, and wasted, and sickly look of a constitution prematurely blasted.

A very large majority of those cases who look so very "*delicate*" that a strong puff of wind will well nigh tumble them over in the street, could be restored to comparative health without any medicine whatever, if means were taken to develope the lungs, until they measure the full healthful standard, to keep the feet always warm, to *regulate* the bowels to one regular daily action by means of suitable food, instead of risking the ruin of the stomach by the forcing process of Bitters, Tonics, and the long list of poisons usually purchased from ignorant or unprincipled salesmen.

But when this ruin is well nigh effected, and the cherished flower still wilts away, the regular physician is called in only to announce that he can but smooth the passage to the grave; and this is spoken of in the stereotyped obituary of some weak-headed admirer as a mysterious dispensation of an inscrutable Providence; when, in fact, there is no mystery about it, it is a legitimate cause and effect, and so palpable that any observant physician could see it at a glance.

A YOUNG LADY—

an only daughter of a mother, and she was a widow, was brought to my office May 2d, 1853. Pulse a hun-

dred and twenty, and only one half of her lungs in operation. Her mother had taken her to Philadelphia and placed her in charge of a physician, but becoming alarmed, she brought her on to New York, and took medical advice. In a short time, however, the mother was informed that nothing could be done for her, as she certainly could not survive the summer, and it was now the middle of April; that she had hasty consumption; that the lungs were tuberculated, and that a general breaking down of these, and consequent cough, would soon follow and destroy her.

On examination, I told the mother her lungs were not diseased, that hers was a case of innutrition from inaction of the biliary system, and that there was considerable hope of her restoration. The mammæ were shrivelled up, the fingers met the bone of the arm as soon as you clasped it, the flesh was flabby, the slightest thing would cause her to shed tears, appetite exceedingly capricious, can scarcely walk across the street and back without causing considerable fatigue and shortness of breath, sweating at night, exceedingly listless, the smallest crease in the bedding would keep her awake all night.

By the middle of summer, this young lady had been steadily increasing in flesh for some weeks; pulse reduced more than one-fourth, night sweats had long disappeared, and the cough was almost entirely gone; she could walk two hours without special fatigue, and rode on horseback three or four hours a day, and was steadily gaining in flesh, strength and spirits; her neighbors remarking how much she was improved in the healthfulness of her appearance, and later accounts state her continued improvement.

This is another case illustrating the importance of knowing certainly when consumption is not present.

MANY AILMENTS.

Sometimes persons complain of too much pain, too much cough, too many ailments, to allow it to be a case

of consumption. A great variety of aches and pains, or an incessant cough, day and night, are prima faciæ evidence that there is no consumptive disease, but that they are of "*constitutional origin*—that is, are the result of imperfect functional action; the *chylopoietic viscera*, those great glands or workshops of the system, which withdraw the nutriment from the food and convert it into blood, are not in legitimate operation; all the machinery is there, bnt it does not work well: to put these in working order belongs to the physician, and nature does the balance; it is *tinkering on*, after the machinery moves, that is, giving medicine too long, which kills many *after they are actually cured.*

The following letter from a lady, received while writing this chapter, is confirmatory of the statement, that persons may be too complaining to have consumption, and that the greatest congregation of ills in one little body is of this functional origin:

"Pain in my shoulder-blade and then in my left breast, when I am feverish. An error in diet increases my cough, tough phlegm has been annoying me in my throat for better than a year. When my stomach is very much disordered, my throat becomes very sore and ulcerated, it is ulcerated now. My voice is constantly husky, am constantly hemming and hawking to clear my throat, but it returns immediately again. Every thing I eat turns sour on my stomach, am exceedingly costive, suffer with a dull head-ache; weak, watery eyes; there is a good deal of tough phlegm in my head, which I hawk down, and at times suffer with a severe soreness of the palate; my nasal organs are perfectly closed at times, just as if I had a severe cold, which is not the case.

I suffer with *palpitation* very much indeed, am exceedingly nervous; whenever I inhale a long breath, it causes my spine to creak in different places, but causes no pain, save weakness throughout its whole length.

When I breathe, it always produces a peculiar sen-

sation as if though my stomach heaved up and down. I have a sinking feeling at the pit of my stomach, with heaviness, as if a great weight were pressing on. My breathing is not so short, but is heavy and laborious. During the night I am feverish, and if I do not make use of a full diet I am almost sleepless. My breath is offensive, with a miserable taste and constant water-gathering in my mouth. Monthly suppression, high colored urine, with sediment.

My cough is worse than it ever was, that is, I throw up more heavy green water than ever before—*it is a husky cough.* I very seldom take cold, and if I do, it does not increase my cough, but an error in diet always does the mischief."

I cannot say what will be the result in this case, but I think that a single pill, once in a week or ten days, continued for some weeks, with a proper attention to exertive exercise daily in the open air, will restore her to good health, in a reasonable time. Her food must be so adapted to the wants of the system as to be medicine for her; then, when she begins to get well, the energies of the system will not have been exhausted by much medicine, and there will be something to build upon, as it is a clear case of *Functional Disorder.*

The consciousness of having been instrumental in restoring clergymen to their labors, in perhaps every state almost in the Union, is a permanent source of satisfaction to me, for as far as I have done it, I am influencing society for good through them; but it gives me a high degree of pleasure also to think, that I have accomplished this, without to them, the almost ruinous expense of a trip to New York, or to the South, or across the Atlantic; and without, too, the loss of time involved in their being silenced during the process of cure. I do not mean to say that this is generally done, nor when accomplished, is it the work of a few days; but I do mean to say, that more clergymen have been *restored by me to full labor in the continuance of their duties in moderation*, than otherwise. Now and then,

almost absolute silence is important for a while; but certainly not over one case in ten; while, in those nine cases, absolute silence would have retarded, if not prevented, recovery. I have had men to come to me with slate and pencil, and in a short time could read aloud by the half hour, without discomfort——by——throwing the slate and pencil aside, and *inviting out* the strength of the organs of speech, as a man invites back the strength to all the other muscles of the body on recovering from a fever by *safe and moderate exercise;* all the muscles of the body are under the same general laws. But behind this local disorder, is the root or the cause of the disease; and unless this is reached, persons who go away cured by local application, do not remain cured. And those who go away *from me* cured, will not remain so, any longer than they avoid these causes; but will remain cured as long as they do. The educated practitioner will understand me when I say, that almost in every case that applies to me, I direct my attention to the chylopoietic viscera, and mainly by hepatic remedies. I do this as a matter of course. The *principal* agent of cure, medicinally, in the cases given in the last few pages, was a pill a week, amounting in the aggregate to less than Homœopathic infinitessimals; and yet in my own case, I would take even less than a single pill in a week, and it is the better way. But the masses will not choose that better way. Scarcely a man in a million, but *he* is nearly always cured. Men know but little: they prefer the mysterious and the expensive, to what is simple and costs nothing—but attention and perseverance. I find it a thousand times more difficult to get people to take air and exercise than to take physic. A *delicate young lady* will sooner horrify her stomach thrice a day with cod-liver oil, than walk a mile over the hills of a clear frosty morning.

Let not the reader understand me to disparage medicine, for properly used it is among the greatest of blessings, but it is to be used as an aid, and only now and then, and in small quantities, in all cases of throat and lung disease that ever came under my care; if there

are complications with other diseases, then it must be used more freely.

As confirmation of what I have advanced, a gentleman brought his son to me, with a throat affection. He had preached but a few months. Both were distressed beyond expression, at the prospect of that son, just married, being *thrown on the shelf* for life. He had not preached for a year. His throat was hoarse, dry, raw. And yet, within six months, he was settled, and in the full performance of all the Pastoral duties, and so he is to this day.

A young gentleman wrote to me, that he had not preached for some time, from *swollen tonsils, pain in the throat after preaching, hawking and clearing constantly, burning pain in the throat*—and yet, within a month after receiving my first prescription, he writes me an overjoyed letter, stating that after three months' silence, he preached without any discomfort whatever

ANOTHER CASE.

A clergyman came to the city to consult me. I found him at his hotel, confined to his bed. His friends generally believed that he was in a hopeless decline, such being the case, apparently. Age forty-five, pulse a hundred and ten, emaciation, debility, cough; he had for some time ceased to preach, and I understood him to say, that he had no hope of ever being able to preach again. Being a man of great eminence, of wide influence, and high family associations, abundant offers had been made of an European tour, of the warm springs of Arkansas, of a season's residence with Preisnitz, to be under his personal and daily care at his water-cure establishment at Graefenberg. I gave it as my opinion that his "was not a case of consumption as yet, no part of the lungs have to this time decayed away. Your disease is general mental and physical irritability, and consequent debility, and it is my opinion that you may have reasonable health for years to come. Your lungs are weak, nothing more."

Among other things, I advised him to begin to preach

at once, under suitable restrictions, and in a few days he returned home.

Just *three* years afterwards, he volunteered a letter to me. I had not heard directly from him for two years.

"JANUARY 11, 1853.

If you have a grateful beneficiary on earth I am that man, and in Heaven, if not before, I will show my heart. But why so late in writing? You know how to excuse me. I returned to my duties a year ago last October, and of course my hands have been full. What arrears to be brought up, health to be looked to, old habits to be re-established, &c.; from that time, I have labored nearly as much and as hard as ever, * * * following your general directions, * * * slowly improving all the while—cough none, expectorate as little as in my healthiest days, sleep well. Put me down as a poor broken down parson, whom you have patched up and set agoing; and believe me when I say, that I can't tell you how wisely and kindly you managed my case, and how much is my indebtedness to your friendly care and professional wisdom."

In addition to the ordinary duties of a pastorate, he had assumed those of a professor in a literary institution.

These cases are given to show that clergymen have been successfully treated *at home*, *in the continuation of their labors*, and it is not unreasonable to hope, that others similarly affected, may also be benefited, by the application of the same principles of treatment. At the same time, it should not be forgotten, that failures will occur, as often as there is left no stamina of constitution, to follow up with its restorative influences, the good impressions which judiciously administered remedial means have made upon the system; since, in all diseases, there is a point from which there is no recovery, for human power is limited, and man is born to die.

ADDITION TO THE EIGHTH EDITION.

That the tenth edition of this book is called for, is evidence of its public appreciation. It has treated of three distinct diseases, Bronchitis, Throat-Ail, and Consumption. Since the eighth edition went to press, two systems of treatment have been urged, with all the appliances of mind and money, as safe in their nature, reasonable in their philosophy, and successful in their results, to wit:

First. The application of a solution of the nitrate of silver, by means of a probang, swab, or sponge, for Throat-Ail, or Chronic Laryngitis, or Clergyman's Sore Throat—the three expressions meaning precisely the same thing.

Second. Medicated Inhalation, for the removal and cure of Bronchitis and Consumption.

The history, in short, of the application of the nitrate of silver, is as follows: On the fifteenth of May, 1837, two eminent Frenchmen, M.M. Trousseau and Belloc, published in Paris, "A Prize Essay of the Royal Academy," being a 'practical treatise on laryngeal phthisis, chronic laryngitis, and diseases of the voice.' These gentlemen urged the claim, "of being the first

to prescribe and employ topical medications in chronic diseases of the larynx. This we believe to be an important step gained in the therapeutics of laryngeal phthisis, chronic laryngitis, and diseases of the voice—heretofore treated by indirect means, excepting some attempts at the use of gaseous applications to the air-passages. Our success proves, that if it be not the *best*, this plan is, at least, better than those heretofore employed. These "topical medications" were mainly "equal parts of water and nitrate of silver."

Two years later, on the second of September, 1839, Dr. J. A. Warder, of Cincinnati, Ohio, translated and published the above book; but it seems to have made no impression on the medical mind of this country.

One year later, to wit, October, 1840, Dr. Horace Green "brought before the New-York Medical and Surgical Society, the subject of the treatment of disease of the larynx, by means of the direct application of therapeutical agents to the living membrane of that cavity," and reported "fifteen cases of laryngeal and bronchial disease, which had come under my (Dr. Green's) care during the two years preceding the above period"—that is, in 1838, Dr. Green was experimenting with nitrate of silver applications to the throat, being one year after Trousseau and Belloc published their book. Whether Dr. Green had seen this book, or read the "Prize Essay" before mentioned, is not known to the author. In October, 1846, Dr. Green published "A treatise on diseases of the air-passages, comprising an inquiry into the history, pathology, cause, and treatment of those affections of the throat called bronchitis, chronic laryngitis, clergymen's sore throat, etc., etc." The dates above are:

Trousseau's publication,	Paris, May, 1837.
Green's experiments, began	New-York, Sept., 1838
Warder's translation,	Cincinnati, Sept., 1839.
Green's report to Medical and Surgical Society,	New-York, Sept., 1840.
Green's book,	New-York, Oct., 1846.

When Dr. Green's theory reached Paris, Trousseau had not only abandoned his own practice of it, but opposed Green's; that opposition not having ceased in the early part of 1858; but, at the close of that year, a Frenchman having revived, or made claim of originality as to topical application of the nitrate of silver, ☞ not only to the throat, voice-cords, and windpipe, but to the lungs themselves, Trousseau publicly denied the originality of his countryman, and assigned it to Dr. Green. In the fall of 1846, Dr. Green published his views; in the spring of 1847, the author visited New-York, from his then residence, New-Orleans, for the express purpose of investigating the "Nitrate" practice; and with a willingness, a courtesy, a frankness, and a patience, which only a scholar, a gentleman, and a big heart could show, Dr. Green gave him every possible facility in his own office, as free as the air, for satisfying himself as to the value of the new treatment. Willing to try any thing which promised such high curative agencies, the author adopted it in his practice, but gradually became convinced of its inefficacy, at least in his own hands; and after a year or two, ceased to apply it altogether, because it seemed to have no permanent, radical good effect. Such being the case, the practice was abandoned; and we do not recollect to have used the probang three times since 1850. The

author has been confirmed in his opinion of the essen tial inefficiency of nitrate of silver applications for what is ordinarily known as Chronic Laryngitis, or Clergyman's Sore Throat, by the experience of many practising physicians being declared to be similar to his own; and from the equally significant fact of having persons apply to him who had had the application made by Dr. Green himself, for weeks and months together; some stating that it did no good at all; others, that it injured them; others said that it did good for a while, but that the malady returned.

Whatever the nitrate of silver may do in croup, in sore throat from a degrading disease, the author believes that as to the ailment known as throat-ail, clergyman's sore throat, chronic laryngitis, the nitrate of silver is no more than a transient, superficial remedy, has no radical, permanent, good effect, and for the simple reason that pure throat-ail, known as clergyman's sore throat, is, in three cases out of four, a dyspeptic disease, having its cause in the stomach, or in the use of smoking or chewing tobacco; and the very first truth in medicine, as well as universal, is, that the cause of a disease must be removed, or the cure is impossible. Then again, we all know, that if the cause of a disease is removed, the system rises to health without any remedial application whatever, in a very great number of cases. If then, tobacco or dyspepsia cause throat-ail in the vast majority of cases, it must be apparent that the application of the nitrate of silver to the throat can not effect a cure, unless the dyspepsia is removed, or the tobacco discontinued prudently.

The reason that a dyspeptic stomach causes a throat affection is simply, that the lining of the throat is a

continuation of the lining of the stomach, and the diseased condition spreads by continuity, as does a fire, besides, the acid and acrid fumes belched up from a dyspeptic stomach have an irritating, an inflammatory effect on the tender membranes of the throat. Many can testify that substances come up from the stomach sometimes which are so acrid as to "burn" or "blister" the tougher tongue.

As to the efficacy of the nitrate of silver to the throat or lungs themselves, in actual consumption, we believe that it is only palliative, and only deceives the patient into hopes which are never to be realized, while they, in effect, prevent him from using more active and efficient remedies, thus losing time, and eventually life itself. This subject is more fully treated in the last edition of the author's book on "Consumption."

As to Medicated Inhalation for the cure of bronchitis and consumption, which, subsequent to the publication of the eighth edition of this book, attracted such general attention from the people of the whole country, as being so "reasonable," it is only necessary to say, that it died out as rapidly as it corruscated, having been taken up as a means of subsistence by ignorant or designing men, the medical profession not having thought it worthy of notice, because they knew it to be an exploded theory of a past century, revived with alleged improvements, What improvements those were, as to substance, quality, or quantity, to use commercial language, "did not transpire;" which circumstance was sufficient to foreshadow, what time verified, that the whole thing of Medicated Inhalation for diseases of the throat and lungs, was a deliberate imposition on public credulity.

Meanwhile, the author thinks he has proofs, increasing every year, of the truth of the principles laid down in the preceding pages, and of the encouraging efficiency of the practice founded on those principles. As confirmatory of this, it may be added, that as to the case mentioned on page 370, the patient was, six years later, in excellent health.

At the end of seven years, C. W. F., page 364, remained in robust health.

S. C., page 368, No. 1330, was travelling in Minnesota six years later. In April following, the case, page 366, H. F., reported, "Cough entirely gone, pain almost so, and no more cold feet; regular, whole sleep; appetite and bowels were all sound, good, and healthful."

The person referred to on page 375, was laboring, with more or less activity, six years later.

The clergyman named on page 23, was in excellent health, eight years later.

The lady, page 26, 948, three years later reported herself in "perfect health."

These cases have been taken at random, and may be considered as fair specimens of the permanency of the benefits derived from the principles of practice laid down in the preceding pages, giving good reason to suppose that they will be as safe, and efficient, and durable in their results, in time to come, as they have evidently been heretofore.

43d St., New-York, First House West of Fifth Avenue.

CATARRH

Is a name given by the Greeks to ailments which throw off fluids in unnatural quantities; it means a "flowing from:" it is simply a "flux." These catarrhs are originated by a cold taken in some way; and upon whatever part of the system the cold "falls," it is called a "catarrh" of that part. Hence, "catarrh of the head" when the eyes water a great deal; "nasal" catarrh when the "nose runs;" "catarrh of the chest" when a cold settles on the lungs and a large expectoration follows. Some persons who have "weak bowels" always have diarrhea, thin, watery, light-colored passages, or catarrh of the bowels, when a cold is taken.

The action of a catarrh is curative, and should be let alone, for it is nature's effort to carry off the disease; to wash it away, as it were. If nature were only left to herself in these cases, an incredible amount of suffering would be prevented, especially if nothing were eaten until relieved, but bread and water; and if two or three hours in the forenoon and afternoon were spent in the open air, in bodily activities sufficient to promote and keep up a very gentle perspiration. But when there is a cough, or a troublesome running at the nose, or a watering of the eyes, with a fullness about the head and all over the body, indicating that a general cold has been taken, there is almost a mania for "taking something;" or, if the person has some medical knowledge, and even a small amount of common-sense, leading him to wait on nature, while he endeavors to aid her as just indicated, every second person he meets, exclaims, "Why don't you do something for it?" and he is brave indeed who resists steadfastly to the end.

A lady had a troublesome itching and running at the nose, and being advised to snuff up cold water freely, she did so and was "cured" in a day; but in forty-eight hours she nearly died of asthma; for, although the "flowing"

from the nose was checked, the disease fell upon the lungs; nature would have vent some where.

In the diarrheas of children, summer complaints, etc., which so often arise from colds settling on the bowels, paregoric is given, and "soothing syrups," (in ALL cases made of molasses and laudanum, *never* made without sugar and opium.) The great effort of ignorance is to "stop the diarrhea." This is done; the parents are charmed, write out a certificate in great gratitude; this is published in the morning papers of the same week, as also in another column the death of the "cured" child, of "convulsions" or "water on the brain."

The cough of consumption, and the large amount of glairy or multi-colored "matter" discharged from the lungs in bronchitis, are the curative "flowings," catarrhs of nature, and to check them by cough-drops, lozenges, troches, syrups, snuffs, etc., always makes death more certain, more speedy, and more dreadful. In all catarrhs, in all flowings, keep the bowels free; keep up a very general perspiration, and eat but very little for forty-eight hours, and if not better, send for a respectable physician. Annual sneezings and nose-runnings are of this nature, preventable by previous judicious depletions.

It is of incalculable practical importance to correct an impression which has become almost universal by means of advertisements published in every class of newspapers, with only here and there a creditable exception, that Catarrh, which is only a professional name for a common cold "settling in the head," or more properly speaking, the passage leading from the nose to the throat, is the beginning of that form of disease which causes a disagreeable odor to emanate from the nose. Such is not the case; at least the author has never met with such an one in the practice of a generation; nor has he ever seen one reported in the standard medical works of any country; they are two maladies, as

widely different as any two diseases of the same structure can well be. What passes from the nose in common catarrh, has no perceptible odor, and does not disorganize the parts; does not eat them away; does not cause any deformity of the structures. When there is an odor connected with the discharge from the nose, it certainly is disagreeable enough, and becomes at length intolerable; a whole room is tainted as soon as the unfortunate victim enters it; and the consciousness of the fact on the part of the patient, sometimes leads to a determination to give up society altogether, if not to take refuge in the terrible crime of suicide; but this disease is not "Catarrh," it is "Ozoena," deriving its name from a Greek word meaning "I smell," and is inseparable from a syphilitic or scrofulous constitution. But by disingenuously confounding the two; calling them both by the same name, "Ozoena," and presenting "cures" of Catarrh, which will as readily get well of itself as cures of Ozoena, which never does get well of itself, multitudes are deluded into expensive courses of medicine or other treatment for the cure of common and harmless nasal Catarrh, under the apprehension that it may degenerate into a horrible case of Ozoena.

Common "Catarrh in the head" as it is usually called, but more correctly speaking, nasal Catarrh, which is nothing more than a slight inflammation of the mucous membrane, or inner lining of the nose, generally runs its course in a few days or a fortnight and disappears; the patient becoming as well as he ever was in his life; as many readers can testify from their own personal experience; sometimes the cold is renewed, and the cure may be protracted into weeks; but time and nature usually effect it better than by any human interference. Ozoena, on the other hand, gets better and worse; sometimes the odor is less perceptible than at others; then again it becomes so impressive, that the patient, who a day or two before was elated with the prospect of

recovery, is now in the depths of despair; thus time passes in alternations between hope and disappointment, until the whole system becomes so impregnated with the scrofulous virus, that the constitution yields by the transfer of the disease to the lungs, manifesting itself in the fatal form of unmistakable consumption; for which, in this connection, there is no remedy.

As there is every reason to believe that scrofula has never been eradicated from the system, when once it has affected a lodgment, but may be held in check by any means which have the effect to keep up the general health to a high standard; so Ozoena, which is a scrofula of the nasal passages, may be kept in check in the same way, while the odor may be rendered almost if not entirely imperceptible, by extraordinary cleanliness of the parts, in conjunction with the local application of various chemical compounds, named in standard medical publications. The charlatan possesses himself of these, and while the amelioration of the prominent symptoms is filling the mind of the grateful and credulous patient with visions of ultimate and entire recovery, he is solicited for his certificate; which is forthwith heralded at the cost of a dollar a line, to multitudes of families to work its own mischievous delusions; for a little later these vouchers for false facts find that, in a very short time, the malady returns, unless they can by their own efforts, maintain high general health and the most perfect local cleanliness; all of which they might have learned from the educated physician in their own community.

But nasal Catarrh may become chronic, as "Catarrh on the chest" may become chronic under the name of "Bronchitis; but both these diseases tend to protect the lungs from consumption, because they are different diseases, and two diseases seldom habitate in the same system at the same time; in other words, if the "cold" remains in the head, as in Catarrh; or if it remains in the branches of the windpipe

as in "Bronchitis," it does not fall on the lungs and is not likely to fall on the lungs at all, if the constitution is not already scrofulous or does not become so; nor will Bronchitis or common Catarrh of the nasal passages degenerate into consumption of the lungs, even in scrofulous constitutions, if timely and persistent efforts are made to maintain a high standard of general health. But if persons laboring under Catarrh or Bronchitis expose themselves to causes of consumption which are of themselves able to generate the disease, which are in short whatever causes protracted ill health, they ought not to be surprised if they should fall into consumption, although it is a fact that in certain cases, the same causes will not be as effective in engendering consumption as if Catarrh or Bronchitis had not existed; in other words, these causes of consumption must be first powerful enough to override the Catarrh or the Bronchitis before they can pass to the lungs, just as a mustard plaster must be powerful enough to compel a diseased action in a new and external part, before it can give relief to an internal pain; in this case, the disease is carried over, is transferred to the blistered spot, to the relief of the original ailment, giving it rest and time to recover,as in the cases in hand, the disease is carried over to the lungs from the nasal passages or the bronchial tubes and they get well while the lungs become more and more hopelessly consumptive,and this is the reason why persons who have pure chronic Bronchitis, will cough with great violence every day, causing the uninformed to believe that they are in the last stages of consumption and yet a quarter of a century later they are living and coughing still, being in other respects in reasonable health.

It is of vital importance to remember that nasal Catarrh is suppressed by opiates; and if Ozoena is suppressed by styptics or astringent washes, it may very readily be changed to consumption, or some other compensative ail-

ment, so that while the misguided patient certifies that he was cured of Catarrh or Ozoena, he fails to notice that he has fallen into a more distressing, if not more fatal malady. As an illustration, a young lady about to be married to an enterprising merchant, applied to the author to be relieved of a disagreeable odor emanating from the discharges from the nose; she was advised of the nature of the case, that the only safe method of dealing with it was to improve the general health and keep it up to a high standard for a long time, keeping the parts meanwhile in a perfectly cleanly condition. She greatly improved, the odor became almost imperceptible, and she was married. After having several children, she fell into constipated habits, the body was in a measure covered with various breakings out, but the trouble of the nasal discharges was no longer complained of. The author was written to from her distant home and counselled her to pay no attention to the skin disease but to allow it to continue for a while and then seek to eradicate it from the system. Other counsels prevailed, other appliances were made to the skin to heal up the sores, which in time disappeared, but a morning cough began to be noticed, this steadily increased in frequency and violence while the general health and strength were steadily declining; becoming alarmed she visited New York, when it appearing that she had in conjunction with the other symptoms a slight chill every forenoon, with fever in the latter part of the day, the writer informed her husband that she was in the last stages of consumptive disease and that nothing remained to be done but to ease her into the friendly grave. This opinion was not concurred in. Two months later, she died. In this case, nature transferred the nasal disease, the Ozoena, to the skin, and if the latter malady had been eradicated by internal remedies, instead of being suppressed by external applications, this lady would have been in good health this day, the admired

and the loved in a large circle of affectionate and devoted friends.

HEART DISEASE.

Some time ago, a country merchant aged about thirty, complained of great debility and shortness of breath on the slightest exercise; any exertion of body or mind fatigued him. He could not even attend to the duties of a country store. He had but little appetite for food, and what he did eat disturbed him greatly. There was no indication whatever of consumptive disease. The heart throbbed violently on any slight muscular exertion. The more immediate object of the consultation, was to determine his liability to military service. He was full in flesh and seemed to be in good condition. The prospect of doing this gentleman any material good was not sufficiently encouraging to induce the author to undertake the case, and it was dismissed with some very general directions, not involving the taking of any medicine. A year later this gentleman called again having so much improved as to induce him to believe that if special advice were given he could regain his health. In four months he was apparently so near being well, that it was considered he need not be under the care of a physician any longer, as he was able to attend to his business and could walk half a day with less fatigue than formerly he could walk five minutes. By the first general directions given he lost 55 pounds of flesh. The latter course of treatment looked mainly to the building up of the general health. The key to the plan marked out for him, and which was so successful, was obtained by ferretting out his history from early youth to the day of his first consultation. From the age of five years to twenty-one he was subject to sore mouth several times a year, worse in winter when a cough prevailed until May generally; this cough kept him frequently awake for hours, night after night. At the age of fourteen he began to feel badly about the throat, raising large quan-

tities of yellow matter of mornings ; this was after having been three years at sea. He never was sea sick, but had several attacks of vomiting every year, after which he was pretty well. Boils broke out on various parts of the body. At eighteen years of age, it was an unusual occurrence to find a man on the vessel stronger than he was. From that age he began to fail in strength. He had catarrh in the head, a chronic sore throat ; could not perform a sailor's duties when aloft, the exertion causing shortness of breath. He then began teaching a district school, which he aptly termed " a leap from the frying pan into the fire," for the old trouble of sore mouth, sore throat and a severe cough returned. After teaching five months, he became a sailor again, and coughed and raised more or less every day, became alarmed, thought he had consumption and "took quarts of patent medicines, the more I took, the worse I was." A physician pronounced him to have Bronchitis. In this condition he remained two years, when another physician said his left lung was diseased and advised exercise " which I could not take " Then another physician stated that his lungs were affected and treated him for three months. "I could not chop wood,nor ascend a hill without extreme exertion." When he exercised, his face burned like scarlet. In this condition he called on the author with the addition of soreness in the chest. His lungs were pronounced not to be diseased. He had no trouble with his food and weighed one hundred and seventy-five pounds ; this was in June 1863. When he was most comfortable and in the best health for him, he weighed one hundred and forty-five pounds. Three months preceeding this date he had a running sore to appear " on the leg near the body," it healed up in a few days and broke out in the other leg, then changed from one place to another ; "not knowing its nature, I healed it up, it left small hard, painful pimples, similar to those which formerly troubled the mouth." The result of

the treatment in this case has been detailed on page 387; the philosophy of it was simply this; he was scrofulous from childhood; this scrofulous "humor" as it is commonly called would vent itself; sometimes from one part of the body, then another; sometimes from an external part, as in the running sores in the limbs; at others from an internal organ as the glands of the mouth; the mucous membrane of the nose. Sometimes the diseased matters escaped through the liver; then again they were worked off by muscular exercise. When he was in the best health, he "had spells of vomiting several times a year." But in the midst of this he became subject to oppression; shortness of breath; inability to exercise; simply because in discharging the duties of a sailor he had on some occasion been exposed to a cold sea wind while in a perspiring condition by which the pores of the skin were closed, and the "humors" which had been accustomed to escape through them were shut in, and "fell upon" the lungs, and then the heart began to labor. The philosophy of the general treatment first proposed was to feel if the heart itself was primarily diseased, or whether by its sympathy with other parts of the system, and if the latter, whatever tended to keep the skin soft and moist, and to put the internal glands, liver &c., in a condition to work off the wastes and ill humors of the system, tended to the relief of the heart, and if relief was thus obtained, it was clear there was no fixed, no organic heart disease and that he might be cured by making the liver carry off the "ill humors" and the wastes of the system; which was done. His greater weight, than when in better health only showed that it was not a solid flesh; he was merely puffed up, and this aided to clog the healthful working of the heart and lungs. As he returned towards health he gradually increased in weight, but the flesh was solid and he became proportionably stronger. And it is useful to remark here that this is precisely the difference

between the apparent improvement of the health and increase of flesh under the use of Beer, Ale and other liquors and the substantial approximation to health which attends a real appetite and vigorous digestion; in the latter case the flesh is hard and gives a feeling of strength, in the former, the flesh is puffy, watery, with a feeling of weakness and an inability to exercise.

BILIOUS THROAT AIL.

Some who complain of unnatural feelings about the throat, who have symptons which lead casual observers to suppose they are in the last stages of consumption, need only to be relieved of an excess of bile and immediately begin to recover. P. J. A. came Oct. 6th, 1864, complaining that his throat prevented him from singing, in which he greatly delighted; he had a continual hacking and spitting, there was a feeling as if something were sticking in the throat. He complained of hoarseness, and had a most ravenous appetite. His father, whom he resembled, died of a throat affection. He looked thin and weak and declining; his friends had given him up to die of consumption, as hopeless. He was very susceptible to colds. He was assured that he had "no approach towards consumptive disease." On the 15th of November following he wrote, "That emetic killed me—and cured me. I have been a new man ever since." On the 6th of January he called for the first time since his examination, just three months before, to express his gratitude for the benefit done, declaring that he went to his manufactory every morning singing. He was of the Bilious temperament; the usual remedies for clearing the liver of its excess of bile failing, it was determined to accomplish the object as named above It will be remembered that in the previous case, the health began to improve and reached its highest point under the influence of periodical vomiting of bile, instigated by nature. The disadvantage of the emeti-

remedy is its straining, debilitating and otherwise deranging effect on the system.

CHECKING PERSPIRATION.

A lady writes January 16th, 1865: Eleven years ago next June, I went with others for a sail, we walked rapidly and when we entered the boat I was in a profuse perspiration, I soon commenced coughing, but remained in the boat two hours. I have never seen a well day since. I am still a poor invalid. It is nearly three years since I put my foot on the ground, and more than eight years since I have been able to walk half a mile. I have bronchitis in its worst form and in the book on "Bronchitis and Kindred diseases" I find my case explained much better than I could do it myself.

EDWARD EVERETT,

The finished scholar, the accomplished diplomatist, the orator, the statesman, the patriot, whose sudden and untimely death a nation mourns to-day, wrote thus to his only surviving daughter: "Boston, Friday, January 13th, 1865, I am just recovering from a pretty severe attack of illness which has kept me in bed most of the time since Monday. On Monday morning I was in the court room testifying. I then went to Fanueil Hall, which was cold, and till my turn came, I sat in a draft of air. When I had got through, though I spoke but half an hour, my hands and feet were ice, and my lungs on fire. In this condition I had to go and pass three hours in the court room. This finished me. I hardly left my bed next day (Tuesday). I have barely weathered an attack of Pneumonia, which is an old fashioned "lung fever." I have turned the corner, and as soon as I can get a little appetite and shake off my racking cough, I hope to do nicely." Within forty-eight hours of writing this, his last letter, he was dead: he died from a cold, in less than a week after he had contracted it. If this cold had "settled" in the head, it would have been "nasal catarrh," and by causing a free flux or discharge of watery mucous,

he would have been well in a few days, with abstinence, rest and warmth; had it settled on the bowels, causing large free discharges, it would by the same means have passed off happily; but coming from a two hours' confinement in a warm court room, the brain too, being in a state of excitement, and then with brain and body at rest in a cold room, and a current of air blowing on his uncovered head, it is no wonder that his extremities were "ice," his lungs "on fire." If this cold had settled on the branches of the wind-pipe, it would have been Bronchitis, but the causes were too aggravated and it went directly to the lungs, and subsequently changed to the brain, resulting in apoplexy. And it is of practical importance to remember that when persons have a severe cold and seem to be getting well, especially if they are old, or have feeble constitutions, it is often, not more than a seeming, for it is only that lull in the ravages of the malady caused by the passing of the ailment to a more vital part. Whenever a cold is taken, and a catarrh follows, a flowing from, a flux, from any part of the body, that catarah is curative, and life is endangered if it is interfered with so as to suppress it, to dry it up; on the contrary, these catarrhs should be promoted by encouraging a catarrh, a flowing from, a discharge from the whole surface of the body, in planer phrase, an old-fashioned "sweat," a perspiration from the whole surface, such as our mothers of old used to induce, than which the world has not to this time devised a better remedy, by wrapping up in blankets, in a warm room, with warm bricks to the feet and a plentiful supply of herb tea, the quality of the "herb" not being important; its being hot, the important characteristic. No catarrhs, whether of thin fluids or of thicker yellow matter, should ever be interfered with, except to promote them, unless under the immediate supervision of an educated physician of acknowledged skill, and even then, there should be some apprehension of an unfavorable result.

DYSPEPTIA AND BILIOUS THROAT AIL.

The following letter, just received, is given without comment in full, as being both instructive and suggestive in all its bearings; in this class of diseases: "January 20, 1865. Dear Doctor, Your favor of the 12th inst. came duly to hand, and I now beg leave to report result of your prescription. At nine o'clock P. M. on Saturday last, I took half of the emetic, as ordered, and in twenty minutes after, the balance, which sickened or nauseated me considerably, but did not have the desired effect until Sunday 2 A. M. being about five hours, ere the emetic operated. It has always been a matter of extreme difficulty for me to vomit, and I have taken emetics before, with no effect whatever, save great discomfort and nausea. The quantity of fluid ejected, was about one and one half pints, which surprised me having partaken of no fluid of any kind, that day. The color was yellowish brown, thick and slimy, of a bitter taste and a sour odor,—quite a quantity of bile seemed to have been ejected, together with much mucus. Feeling very weak, I remained at home all day, eating but two slices of toast, and abstaining from fluid—symptoms quite favorable—throat better, and no headache or water-brash. Next day, severe headache and sour eructations,—took the last pill that night,—had several passages that day, (Tuesday,) not much at a time, of course,—color bright yellow, odor peculiarly unpleasant,—had no passage on Monday. On Wednesday morning, found myself free from pain,—felt quite lively and cheerful,—better than I have been for many days with one exception, the weakness of my stomach, which rejects a larger portion of my meals, than it has ever done. I am greatly troubled with acidity in the stomach; and find that the stomach is unable to attend properly to digestive functions. If that can be corrected, and my digestive apparatus put in complete working order, I do not doubt that I will get well, for, thanks to you, my throat

does not trouble me one half as much as formerly, and I have now hopes of getting well. I doubt not that my case is a hard one to manage, and I regret to have given you so much trouble. I have a constitutionally weak stomach, even, when a child, I was compelled to exercise great caution in the selection of my food, as a fit of indigestion was easily brought on. As I grew up, confinement in the Counting Room, developed a handsome Dyspepsia; but I thought that my persistent efforts to rid myself of that curse had proved effectual, and until I consulted you on my case, I flattered myself to that effect. In endeavoring to free my throat from its diseased state, I have made the mistake of using all kinds of medicaments, rendering me less and less susceptible to medicines. In truth, I could always take double dozes,--in fact was compelled to do so. Your pills were more powerful than any other medicine, (to produce the same effect) that I have taken. I have taken formerly 15 grs. Blue Mass without the slightest effect,—using Castor oil to carry it out of the system afterwards. I had discontinued taking medicines for over a month ere I consulted you, and have endeavored to follow your instructions implicitly The result, so far, is this: my chief trouble, Laryngitis, is checked, and, I hope, in course of being successfully combated. That is one important step gained,—I am still hoarse, mucous accumulates, but is easily removed without the painful hawking, but I am sorry to say, that my stomach seems terribly deranged, and, as you say, by excess of bile. Were that unpleasant feeling removed, I could say that for the last three days, I have been in excellent health. I hope you can aid me in the matter, as it is indeed most unpleasant to have your food hardly down, when up comes a portion, both bitter and sour, irritating the throat, and accompanied by acrid gases. My wife had a liver complaint some years ago, but was successfully treated at the time. She imagines, however,

that she will be troubled again, and wishes you to send her some pills like those you sent me. If you do so, please state the price, and I will forward amount at once." This letter was preceded by one saying, "I find in your work on Bronchitis and Kindred Diseases, page 255, a description of Throat Ail, which suits my case exactly. I do not believe I could have described it so well; it is exact from first to last." This indicates that not only clergymen, but merchants and all sedentary persons, that is, all who live pretty much in the house, are liable to bilious and dyspeptic throat ail; that is, to a form of throat complaint, which depends on a wrong condition of the liver or stomach, or both, as was the case in this instance. The writer believes that four-fifths of all cases of Throat Ail, that form of it described above, where there is considerable hacking and hemming and clearing away of phlegm, or swallowing, or a barely perceptible cough, arise from the stomach or liver; and that therefore, all local appliances of gargles, inhalations, nitrate of silver, and the butchery of cutting out the tonsils and clipping off the uvulæ, the little pendant seen on looking down the throat, although they may form a plausible ground for heavy, and too often burdensome charges, are unscientific, useless and utterly powerless of cure. For a few days, or for a week or two, there is an apparent benefit; but it is not lasting; it cannot be, because the origin of the ailment is not in the throat, but in distant parts of the body; and it is to be hoped, that educated physicians everywhere, will, in the light of these statements, be able to cure their fellow citizens at home, and thus prevent them from coming to the large cities, to be the victims of the charlatan and the impostor; for whatever of success has followed the author, it has resulted from the use of those remedies addressed to the liver and the stomach, which are regarded as appropriate, by orthodox medicine, at home and abroad.

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