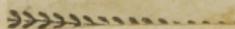
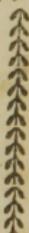


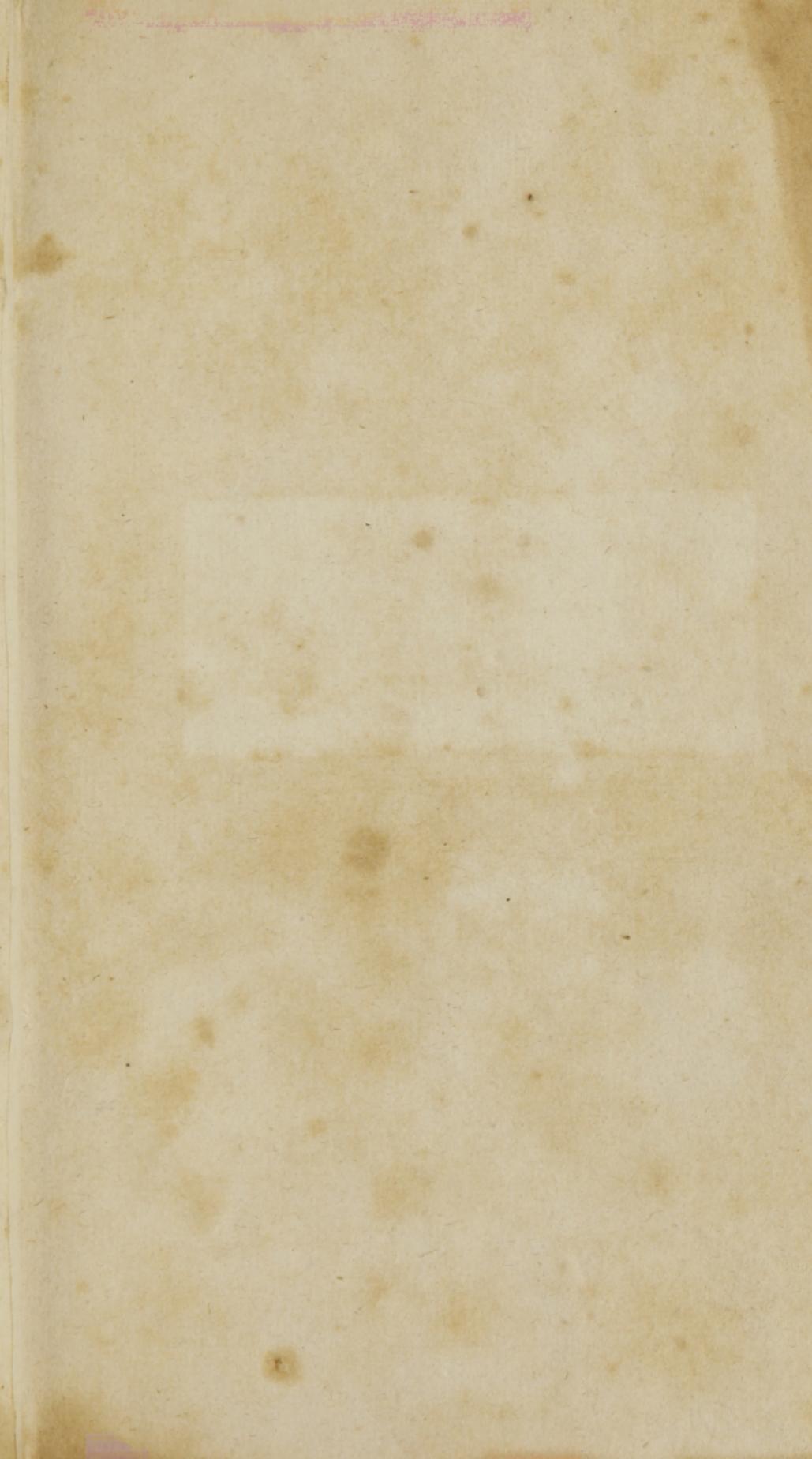
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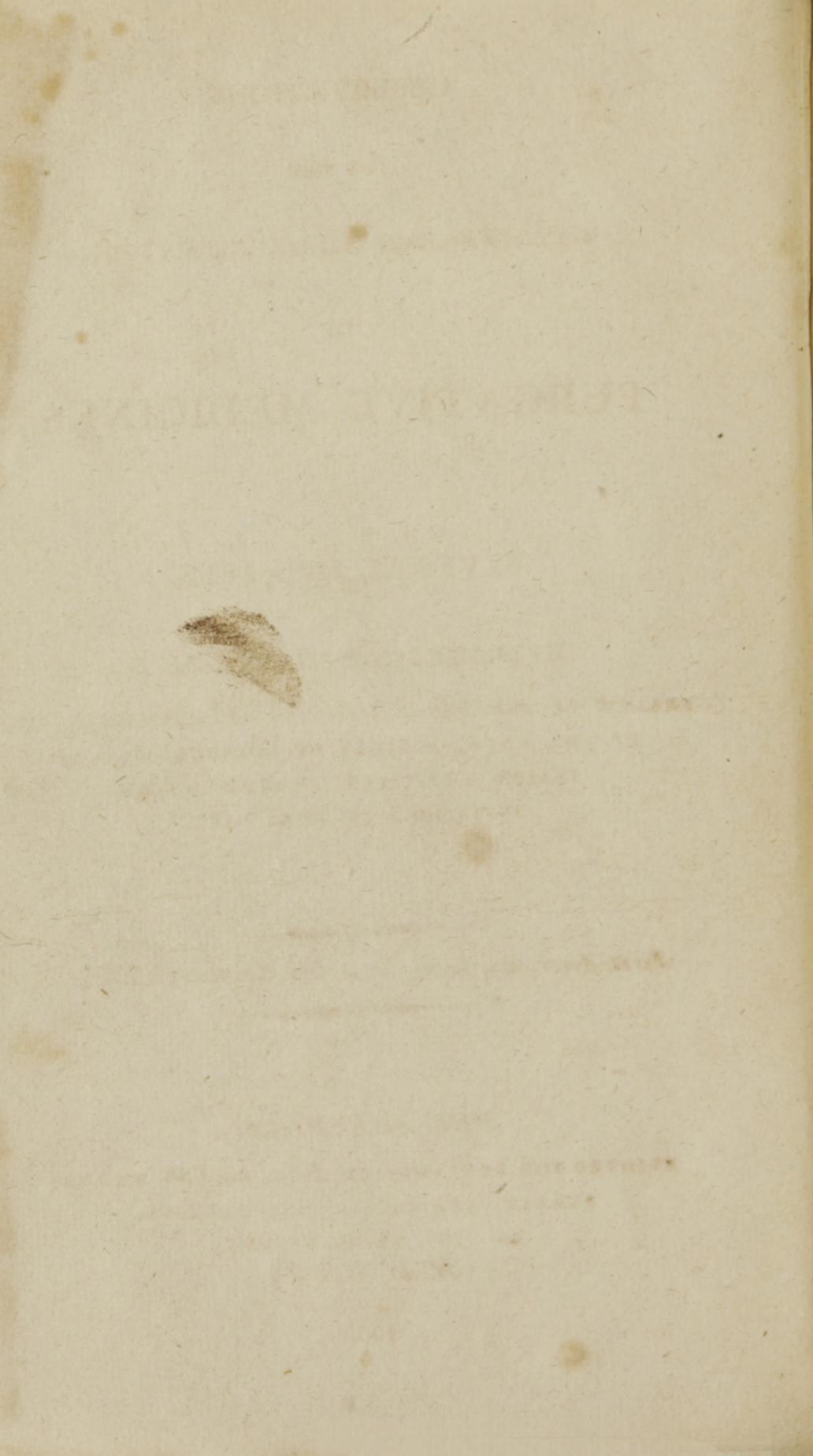
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OBSERVATIONS
ON THE
UTILITY AND ADMINISTRATION
OF
PURGATIVE MEDICINES
IN
SEVERAL DISEASES.

BY *JAMES HAMILTON, M. D.*

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, AND
OF THE ROYAL SOCIETY OF EDINBURGH; AND
SENIOR PHYSICIAN TO THE ROYAL
INFIRMARY OF THAT CITY.

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.....
1809.

REAGAN 13D 1956

TO JAMES RUSSELL, ESQ.

PROFESSOR OF CLINICAL SURGERY IN THE UNIVERSITY
OF EDINBURGH.

MY DEAR SIR,

IF the following Observations had been of that importance in respect of science, as to have made a particular Dedication of them necessary, or proper; and if I had been to select a Patron of distinguished literary endowments, and of extensive and correct professional acquirements, there is no one who would have sooner occurred to me than yourself.

Sentiments, however, prompting an address less formal, and therefore, I trust, to you not less agreeable, induce me, in a manner more familiar and more sincere, to acknowledge my obligations to you for many instances of your private friendship; and to thank you for the encouragement you gave me on the present occasion, without which, I probably neither would have undertaken, nor have accomplished this little work. I am,

Dear Sir,

With much regard,

Your faithful and obedient Servant,

JAMES HAMILTON.

EDINBURGH, }
1st Nov. 1805. }

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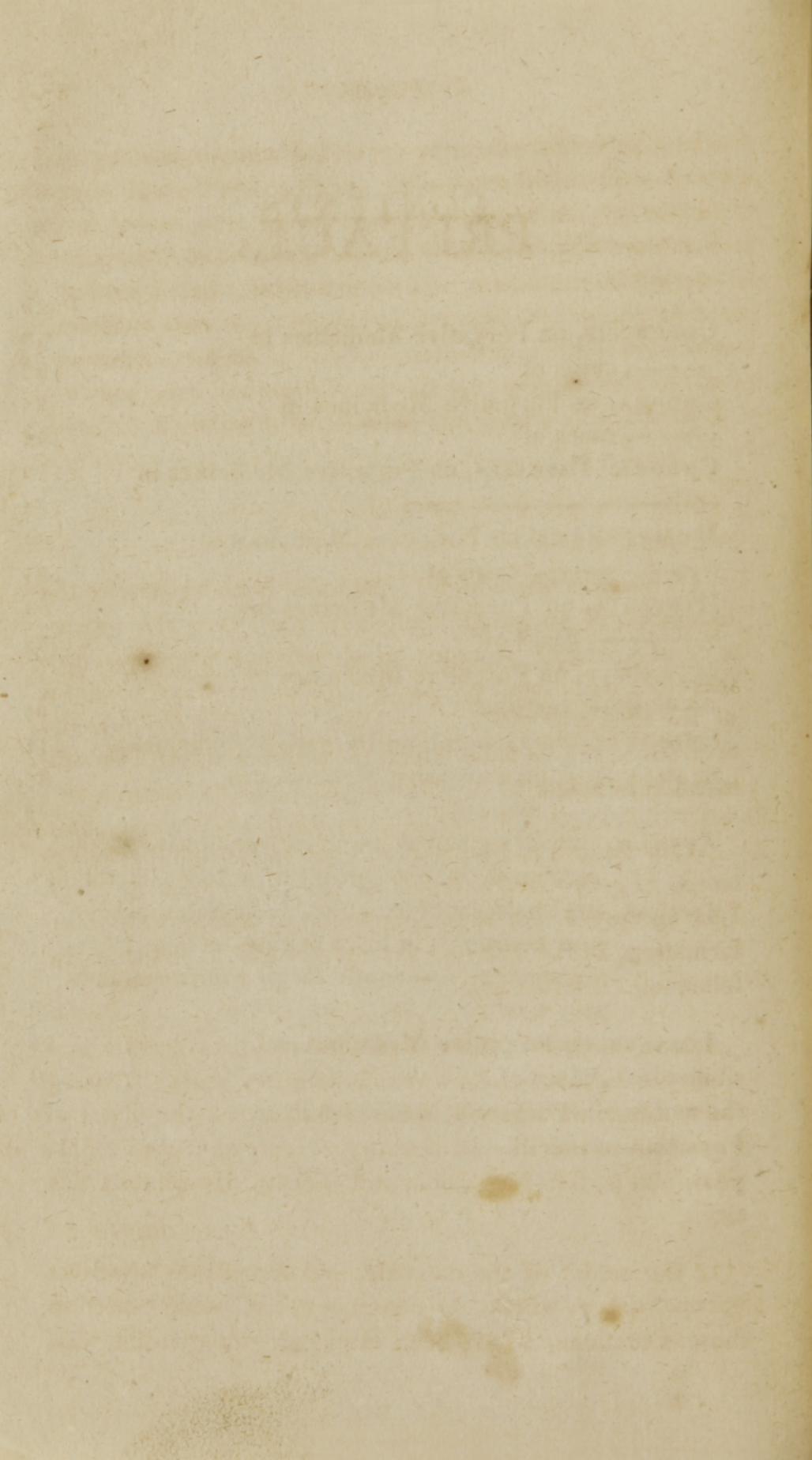
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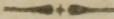
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PREFACE.



AS the doctrine which I maintain, with respect to the exhibition of purgative medicines, may have the appearance of novelty ; in order to obviate any prejudice, it is therefore incumbent on me to state the rise and progress of the opinions which I entertain upon this subject, and to produce the facts on which the practice which I recommend is founded.

With this view, I hope it will not be thought presumptuous, to give some account of the opportunities which I have enjoyed, for collecting accurate and extensive information, in the different diseases of which I treat in the following Observations.

I have occupied places of professional trust and responsibility in Edinburgh for upwards of thirty years. During the whole of this period, I have discharged the duties of Physician to the Royal Infirmary, to George Heriot's Hospital, and to the Merchants and Trades Hospital of this city.

In the midst of the constant, and sometimes laborious occupation, in which, in consequence of being placed in these situations, I have been engaged, my attention was,

many years ago, attracted to the purgative effect of medicines given in Typhus fever. The facts which then presented themselves to my notice, induced me to repeat these medicines again and again; till, by slow advances, I at last acquired confidence in the practice. Many opportunities have since occurred to me of confirming these observations, which, in my apprehension, clearly establish the safety and utility of giving purgative medicines in the course of Typhus fever, under the limitations which I point out.

I was afterwards disposed to judge favourably of the same practice in Scarlatina; and the utility of it in this disease has been confirmed by much experience.

Thus my views respecting the use of purgative medicines became more and more extended; and, in process of time, I employed these, with a freedom not usual, but with manifest advantage, in several other diseases.

My own experience of the utility of this practice, is the circumstance which encourages me to pursue it with steadiness. But to inspire others with the same degree of confidence, it will be requisite to adduce the proofs which have satisfied me of its superiority to that in common use.

The number, the authenticity, and the apposite application of the cases inserted in the Appendix, will, I trust, prove sufficient to establish the soundness of the principles upon which I proceed, and to satisfy the most sceptical. Many of these cases are those of patients, who have been under my own care in the Infirmary; and they are transcribed from the records of that institution, by the permission of the managers. To shew the consequence and authenticity of these cases, I shall mention some particulars relative to the arrangement of medical practice in the Hospital.

The University of Edinburgh had already attained a high and deserved reputation as a school of medicine, when the Royal Infirmary was opened in the year 1741. It was soon perceived, that the University and the Infirmary might be made to afford mutual and valuable aid to one another. The medical education, it was evident, would be rendered more complete, by giving the students of the University access to the Infirmary, where they might learn the practical part of their profession; while the funds of the Hospital would be augmented by the fees which the students would pay for the liberty thus granted to them to visit the patients, and observe the practice as conducted in it.

Accordingly, arrangements respecting the detail of practice in the Hospital, suited to these views, were made; which, while they secured to the patients benefits superior, I believe, to what are experienced in most similar institutions, at the same time afforded to the medical student opportunities of acquiring the practical knowledge of his profession, seldom to be found in other Hospitals.

By the regulations of the Managers, the Physicians of the Royal Infirmary give regular daily attendance, at a certain hour; take the full charge of their respective patients, and interpose directly in every circumstance relative to the conduct of their cure.

The two physicians named by the managers, have an equal share of duty, and divide the patients equally between them.

A clerk is attached to each physician. He is commonly a young gentleman, who is advanced in his studies. He resides in the Hospital, and has a general superintend-

ence of the patients, who are under the charge of the physician, with whom he is connected. Besides other duties, it is his business to prepare a written account of the symptoms of those patients, who fall under the care of the physician, whose clerk he is. He inserts this account in the journal book, and reads it to the physician at the bedside of the patient, on the following daily visit.

The physician either admits this account simply, or makes additions and alterations, as he may think proper.

Regular reports of the subsequent state of the symptoms; of the remedies prescribed, and of the effects of these, are given daily, or as often as the chronic nature of the case, may make them necessary. These reports are the result of the accounts, which the patients give of themselves, or of the accounts which are received from the nurses, or of both together; they are dictated by the physician to his clerk, who at the time, enters them into the journal book.

All these proceedings take place in public, in the presence, and in the hearing, of a number of young gentlemen, who attend the Hospital, many of whom are competent judges of what is going forward.

Thus, the physician must include, in his reports, all the circumstances, as they arise in particular cases; circumstances over which he has no controul, and which must inevitably direct his practice. Further, the physician of the Royal Infirmary, in consequence of his attendance every day, is enabled to follow out his practice, with peculiar precision and accuracy; to do which, he is also stimulated by the interest which he cannot but take in his patients, frequently friendless strangers; and, by the unavoidable publicity of his whole procedure respecting them, which places him often in delicate and trying situations.

Cases then of this description, which, in their progress, cannot be perverted to particular purposes, and which cannot afterwards be altered, by any retrospective emendation of the practitioner, possess an authenticity peculiar to themselves; and in the establishing of medical facts, may be produced as an authority, that cannot be controverted. Indeed, I esteem myself fortunate in having documents of this kind to adduce, in support of a practice, which may be thought to require all the confirmation which the most incontrovertible evidence can afford. These cases inserted in the different numbers of the Appendix, are dated from the Royal Infirmary.

Again, in further support of the exhibition of purgatives, in the diseases of which I treat, I insert in the proper numbers of the Appendix, histories of cases from my private practice;—and although these are not supported by the same public testimony, as those which are extracted from the records of the Hospital, yet I trust they will be received with all the credit due to cases, which rest upon the authority of any individual practitioner.

The favour of my friends, who have had the goodness to oblige me with communications from their private practice, likewise enables me to give farther evidence of the utility of the plan which I recommend. This is the more gratifying to me, as it thus appears, that gentlemen of high professional respectability, approve and adopt, in the instances to which their communications refer, the practice which I have endeavoured to introduce.

Before I conclude these preliminary remarks, I beg leave to observe, that I do not willingly obtrude myself on the public, in the character of an author; but different reasons concur to overcome my backwardness to do so, and even to render a full exposition of my practice, a measure of prudence and of self-defence. A number of

intelligent, well-informed young gentlemen, who attend the Hospital, have become converts to the free exhibition of purgative medicines, which they have seen me employ with so much advantage. By this means, the peculiarities of my practice here, have passed silently into the world, unexplained and unsupported by the proofs and illustrations which it was in my power to produce; they have been partially noticed in one periodical publication; and made the subject of hasty and mistaken criticism in another. Dreading, therefore, that under these disadvantageous circumstances, the practice might be prejudged, and of course, neglected, I have endeavoured to procure for it a fair and unprejudiced hearing, by placing it before the public, in my own words. To the public decision I will submit, with deference and respect; at the same time, I rely with confidence on its impartiality; and trust, that no person of character will condemn the practice, which I now recommend, till after repeated trials, agreeably to the plan, which I have myself observed.

ADVERTISEMENT

TO THE

SECOND EDITION.

THE rapid and extensive sale of the First Edition of these observations, is, I trust, an indication of the favourable opinion which the public in general entertain of the work. I have also the satisfaction to be honoured with letters from gentlemen of the first professional eminence in the capital and in other parts of the kingdom, expressing the most unqualified approbation of the doctrines and practice which I have endeavoured to establish respecting the use and administration of Purgative Medicines.

This reception, which so far exceeds what my most sanguine expectations would have allowed me to hope for, may, perhaps, be ascribed in a great measure to the indulgence which is due to every publication which professes merely to communicate the result of long and patient experience. At the same time, I must consider the respectable nature of the testimonials, and the great number of them, as affording a strong presumption in favour of the justness of the opinions which I have advanced. To myself, at least, they present a most powerful confirmation

of what experience had suggested ; and have encouraged me to proceed with confidence and alacrity to prepare a Second Edition, which the Booksellers informed me some time ago, was required.

I have exerted all the diligence and attention which the shortness of the time admitted of, to correct and enlarge this Edition ; as I am sensible that it is in this way only, that I can acquit myself of my obligations to the public, and testify my gratitude for their candour towards me.

I have made some alterations and additions, which I will briefly notice.

I have suppressed a few observations, which, while they were of little importance, have excited a diversity of opinion, which might require some discussion to support. This discussion, on subjects not necessary to my argument, must have appeared frivolous to some, and have proved tedious to all.

I have changed the arrangement of my subject ; and although the different chapters may be considered as so many distinct essays, yet they are now placed in a somewhat systematic form. In making this change, however, I have been guilty of one improper anticipation, which I did not discover in time to remedy completely. The chapter on chlorosis now precedes that on chorea, while in explaining the practice in the former, I make I reference to that in the latter. To obviate any difficulty that may arise from this transposition ; the observations on chorea may be perused previous to those on chlorosis.

The form of the typography in the appendix, will, I hope, be found to be improved. This improvement would not indeed deserve to have been noticed, were it not that the proofs of the utility of purgative medicines are chiefly deduced from the history of the cases contained in the appendix. The same cases also afford means of acquiring a perfect knowledge of the administration of purgatives. It is therefore of importance to facilitate the perusal of narratives confessedly dry and unentertaining, and to render them more *pleasant* and *accessible*.

I have withdrawn some cases from the appendix to the former edition, and have added others; and I have occasionally inserted remarks and observations which are not to be found in the former edition; though these are not of sufficient importance to merit particular notice here.

The material additions which I have made, consist of a chapter on hysteria, and of one on tetanus, with an appendix to each, containing cases of both diseases. But as these are now before the public for the first time, it behoves me to observe a respectful silence with regard to them.

EDINBURGH, }
MAY 1st. 1806. }

The first of the two papers in the present issue
is a paper by Mr. J. H. ...
and Mr. ...

The second paper is by Mr. ...
and Mr. ...

The third paper is by Mr. ...
and Mr. ...

The fourth paper is by Mr. ...
and Mr. ...

The fifth paper is by Mr. ...
and Mr. ...

The sixth paper is by Mr. ...
and Mr. ...

OBSERVATIONS

ON

PURGATIVE MEDICINES, &c.

GENERAL OBSERVATIONS ON PURGATIVE MEDICINES.

EVERY Physician, in the commencement of his professional pursuits, is necessarily guided by the opinions which he has formed in the schools; by the sentiments of the authors whom he has chiefly consulted, and by the example of those whose practice he has proposed to himself to follow. Subsequent information, however, and new discoveries, and the experience which he gains by personal intercourse with the sick; may dispose him, sooner or latter, to make some change in his more early opinions and practice. Hence the science of medicine has been reproached with being fluctuating and uncertain; but in my apprehension with no good reason. It would be more candid to consider it as in a state of improvement, in which it has advanced in proportion to the genius and learning which its cultivators have possessed; or according as the

spirit of prevailing philosophies, always interwoven with reasoning in medicine, has been favourable to its progress or otherwise.

The change in opinion and practice, to which I allude, is always for the better, provided the practitioner possesses good sense, industry and talents for observation. It is the natural consequence of the situation in which he is placed, and neither indicates the want of steadiness on his part, nor of certainty in his profession. So that to represent the practice of medicine as variable from the change of opinion, inseparable from the progress of medical improvement, is to take an unfair and a partial view of the case. All the principal employments of life are liable to a similar objection, on the same grounds, and with equal justice.

Several circumstances indeed connected with the science of medicine, have retarded its improvement, and given a plausibility to this charge of uncertainty; and none more than the different theories which have been advanced in explanation of the phenomena of the animal system in health and in disease.

As the frame and bent of the human mind render theory unavoidable; and as theory in medicine will be safe and useful in proportion as it is free from error; it is of consequence to ascertain the causes of those errors to which it is exposed.

Errors in theoretical medicine may be referred, in the first place, to the hasty conclusions which the earlier Physicians drew from the few facts which were known to them; and to the fascinating propensity to form systems, upon data too limited in number, and often contradictory.

In the second place, physicians have been unsuccessful in the establishment of true theory, from not having had sufficiently comprehensive views of the different organs and functions of the animal body. To this circumstance is owing the rise of the humoral, the chemical, the mechanical, and of the nervous pathologies, as distinct systems. Had the dogmatists cautiously embraced the views, which each of these systems presents, and combined them, we might have enjoyed a more perfect, because a more comprehensive system of medicine.

In the third place, a strong passion for distinction and fame in the professors of medicine themselves, has counteracted the utility which might have been derived from the fortunate combination of these systems. The glory of forming a new theory, and of constituting a new æra in medicine, has seduced the leaders of each succeeding sect to an attempt of setting aside the doctrines of their predecessors, in order that their own particular system might be more firmly established, and might shine with unrivalled lustre.

In the fourth place, the dogmatists in forming their systems, have often adopted certain data, which rest only on specious reasoning, *a priori*, and are supported neither by facts nor observation. This circumstance, has as much as any other, greatly retarded the improvement of medical knowledge. It has introduced much false reasoning and obscure language into medicine; whence, it is to be feared, and to be regretted, that erroneous, and therefore not harmless practical conclusions have been drawn.

I do not officiously or willingly point out what I conceive to have been the grounds of mistake in medicine. I venerate the learning and ingenuity of our predecessors, which contributed to procure for the medical art, a name

and a consequence in the estimation of mankind. If, however, they have failed in some things, we ought to take a lesson from this failure, and by shunning the specious fallacy of hasty generalization, and by having recourse to a diligent, accurate, and minute enquiry after facts, which enquiry, the state of medicine demands of us, endeavour to promote its best and truest interests.

I MAKE these observations as an apology, if one be necessary, for my having occasionally, in the following observations, disregarded prevalent and fashionable doctrines of the schools; and for my having departed from the usual routine of practice in respect of the administration of purgative medicines. A habit which I early acquired of attending to the means of supporting, and of restoring the healthy action of the stomach and intestinal canal, has led me to consider this subject with minute attention.

The importance of the functions of the stomach and intestines is commonly known and admitted. By means of these functions our food is received, digested, assimilated, and carried under the form of a nutritious fluid into the system.

Besides, sympathy as it is called, connects the stomach and bowels with other parts of the complicated animal structure, and strengthens the influence which these organs maintain over the comfort, the health, and the life of every individual. Hence it is obvious, that disorders of the stomach and bowels must greatly affect the system at large; and that in proportion to the duration and severity of these disorders, the affection of the general habit will be more or less serious and afflicting.

There is certainly nothing new in the observation, that the constipated and loaded state of the intestinal canal, is a common cause of general bad health. But when I go the length of saying, that this state generally accompanies, and aggravates the other symptoms of a fever; that it is also the immediate cause of certain disorders peculiar to children and young people, I am conscious that I advance opinions in which there is considerable novelty; but in which I trust the following sheets will satisfy the medical reader, that there is also, at least an equal degree of soundness.

I have also observed, that in mature age, and in the decline of life, symptoms, which are attributed to previous irregularities, to ideosyncrasy, to hereditary disposition, to disease, and to approaching old age, frequently arise from constipation of the bowels, or are intimately connected with it. The consideration however of these is but partly comprehended in my present undertaking.

Thus I have learned, that a knowledge how to regulate the alvine evacuation, constitutes much of the prophylactic part of medicine; and hence how necessary it is to advise those, who either wish to preserve good health, or who are in quest of the lost treasure, to attend to this circumstance.

It may be proper, on some occasions, to propose to them to forsake the haunts and habits of fashionable life, to leave the crowded city, alluring amusements, or serious occupations, conducted in airless or even in tainted rooms, to shun luxurious tables, indolence and late hours; to retrace the footsteps by which they have deviated from simple nature; and to court the country, pure air, moderate exercise and simple diet.

This advice, however, cannot be always followed, and it may not always remove costiveness and the ills which proceed from it. In this case, as well as in the costiveness which accompanies disease, the interposition of purgative medicines will be necessary.

In infancy the alvine evacuation is more abundant, more frequent, and more fluid than in after periods of life. In mature years, the belly is generally moved once in twenty-four hours. In the healthy state the feces, although soft, preserve a form too well known to require description; they are of a yellow colour, and they give out a certain odour. But when the feces are evacuated less frequently than the age of a person requires; when they are indurated; when their natural colour is changed, and when they acquire peculiar fetor, they indicate derangement of the stomach and bowels, whence the approach of disease, if disease be not already formed, may be apprehended.

I am not ignorant that costiveness, even to a considerable extent, will prevail in robust and otherwise healthy people, without immediate injury. In such instances, the circulating and absorbent systems are active and powerful; in consequence of which the fluid contents of the intestines, may be so quickly and so completely absorbed, as to leave a comparatively small mass, incapable from its bulk, of giving a stimulus sufficient to excite the propensity to evacuate the bowels; but which, by gradual and slow accumulation, acquires this bulk, and is at last voided under the appearance of an indurated stool.

This constitutional costiveness is of dangerous tendency, and however desirable it may be to rectify it, the consideration of it is not comprehended in my present plan, which embraces only a few diseases, of which, I consider costiveness to be the cause, or in which I apprehend it to be a leading or permanent symptom.

In prosecuting my subject, when I oppose the opinions of respectable authors, I trust I shall speak with the deference and respect which I feel to be due to them. And when I propose changes in practice which experience has taught me to be useful ; I will do so with a confidence proportionate to that experience which has been my guide.



In the dawn of physic, purgative medicines were employed ; but, although they have been recommended by the earliest, as well as by latter writers ; and although the indications they are meant to fulfil, have been an object of attention to practitioners in all ages ; yet it does not appear to me, that the extent of their utility has been always clearly perceived, or that the administration of them has been always properly directed.

Physicians, tinctured with the tenets of judicial astrology, prescribed purgatives at certain times and seasons ; conceiving that they would prove more beneficial or hurtful, according to the junction or opposition of the planets, or the age of the moon. But these reveries, which impeded rational practice, have long since vanished.

Those who were partial to the doctrines of humoral pathology, employed purgative medicines, with the intention of expelling peccant matter, but not before it had been separated from the mass of fluids, by an appropriate fermentation. The same pathologists taught, that different purgatives possessed distinct powers, and moved different fluids by a specific action. Hence they have talked of cholagogues, phlegmagogues, hydragogues, and of melanagogues ; and have displayed much apparent sagacity, in selecting the purgative adapted to the expulsion of the fluid prevalent at the time.

This fermentation, however, and what was supposed its natural consequence, the deposition of peccant humours, have ceased to hold a place in the doctrines of physic. While the specific operation of purgatives in expelling particular fluids, is neither confirmed by subsequent experience, nor allowed to have any influence in practice.

Modern physicians have two objects in view, in the administration of purgative medicines ;—the one is to empty the bowels simply ; the other, to promote an increased secretion of fluids into the cavity of the intestines, or in other words, to induce purging. They have accordingly considered medicines thus employed, to be of two kinds, laxative and purgative ; and they prescribe the one or the other of these, as the circumstances of the case may seem to require them.

This distinction is neither, perhaps, so correct nor philosophical as it might be. Purgative medicines act by their stimulating power, which will be in proportion to the quantity of the medicine that is given. Four grains of calomel, three or four of aloes, and ten or twelve drachms of rochelle salt, will generally prove purgative ;—and any of these in reduced doses, will have a laxative effect only. But as this distinction has acquired the sanction of ages, I might have passed it in silence, had it not been necessary for me to notice it ; as, from experience of their superior usefulness, I employ almost solely what are understood to be purgative medicines, in the diseases of which I am to treat, while at the same time I avoid their full effect of purging.

This consideration obviates an objection, not unfrequently made, to the employment of purgative medicines ; namely, that they reduce the strength of a patient, already too much weakened. Purgings will undoubtedly

debilitate the body, by causing a sudden, and a greater than usual flow of fluids, that are in general secreted slowly; and by hurrying off the chyle, and preventing it from passing into the circulation. Purgative medicines, thus acting, are useful on some occasions; and are advantageously employed in some diseases. But purging is not desirable in the diseases, which are the subjects of the following observations. Here, the sole intention, is to bring off the contents of the bowels, which are out of the course of the circulation; and, in so far, are already, in a manner, extraneous to the body; and I can hardly suppose, that debility will ensue from purgative medicines, given under this limitation.

Besides unloading the bowels, purgative medicines are said to act by emulging the excretory ducts of different secreting organs and glands, connected with the stomach and intestines.—I do not think it necessary to consider this question minutely. Without derogating from the good effects of purgatives acting in this manner, I will only observe, that for the sake of perspicuity, I refer the benefits which result from the use of purgatives to their sensible effect, rather than to one which is less obvious; and that for the sake of precision, I speak of this effect, as removing a cause of irritation, without, however, meaning to advance or support any theory on the subject.

CHAP. I.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION OF PURGATIVE MEDICINES, IN TYPHUS FEVER.

A CONSIDERABLE diversity of opinion has prevailed, respecting the cause of fever. Physicians seem now to be agreed; in referring it to a general or specific contagion; the former giving rise to typhus, in the various forms under which it appears; while the exanthemata, or eruptive fevers, proceed from the latter.

The manner in which contagion acts on the living body has been the subject of much discussion. But the consideration of this question is altogether foreign to my purpose. It will be sufficient for me, to note the usual symptoms of typhus.

The presence of typhus is first known, by derangement of the stomach, which is marked by sickness, loss of appetite, thirst, headach, white, or loaded tongue, and generally by costiveness. These symptoms are soon followed by affection of the surface, of the sanguiferous system, and of different secretions. To which, in the more advanced state of the fever, are super-added delirium, tremors, sultultus tendinum, floccitatio, singultus; these are supposed to denote considerable affection of the nervous system.

The symptoms above enumerated appear in succession, and generally in the order in which I have enumerated them; those which affect the stomach, as they are the first, so they are the most permanent throughout the fever. They accompany the others as they arise, and very possibly influence them, in respect of their mildness or severity. They are, therefore, of great import, in the treatment of fever, and demand particular attention.

At the time when I was appointed physician to the Royal Infirmary, the cure of typhus fever was thought to consist chiefly, in the removal of atony, and spasm of the vessels of the surface of the body. For this purpose, among other remedies, weak antimonial, and nauseating medicines, were given freely. The state of the stomach and bowels, after the exhibition of an emetic and purgative, on the first approach of the attack, was little regarded in the after periods of the fever. An occasional stool was procured by a mild glyster; while a purgative medicine was given with extreme caution. Apprehensions were entertained, that the operation of a purgative would rivet the spasm of the extreme vessels, and increase debility, one of the supposed direct causes of death, in fever. These apprehensions may still bias the practice of many, as they certainly did bias mine, for a long time.

A typhus fever with symptoms more than usually malignant, appeared in Edinburgh, in summer 1779. It originated in the hospital of the prisoners of war, who were confined in the Castle. Notwithstanding the employment of every precaution which prudence could suggest, the spreading of the disease was not altogether prevented. Several of the troops, then in the garrison, and some of the inhabitants of the city, were seized with the fever.

In summer 1781, a fleet of merchantmen from Jamaica, with their convoy, consisting of several ships of war, came to anchor in Leith roads. The passage had been tedious, the crews were sickly, and they had been for some time, on short allowance of provisions. Nevertheless, they were obliged, from the circumstances of the war, to avoid the channel, and come round by the north of Scotland.

From the beginning of July, to the ninth day of August, no less than one hundred and twenty-six men in fever, were sent ashore, from his Majesty's ship Suffolk, one of the convoy, of whom twenty-three died. And of forty men in fever, who were landed from his Majesty's ship Egmont, another of the convoy, on the tenth, eleventh, and thirteenth of July, eight died.

Such of these men, as could not be accommodated in a temporary hospital, were quartered in Leith, two, three, or four being billeted in one house; and many of the inhabitants were seized with a fever, of the same kind with that under which the sailors laboured, and it continued to prevail for many years in the town.

These circumstances, the proximity of Leith to Edinburgh, and the great and daily reciprocal intercourse which subsists between the inhabitants, will account for a typhus fever of greater than usual malignity, which appeared in Edinburgh about this time, and which continued to prevail for some years afterwards.

Being frequently disappointed in curing this fever by the mild antimonials which were then employed, I was induced by similar views to use the *calx antimonii nitrata*; *Pharmacop. Edinburgen. editae anno 1774*, of which I gave four or six grains for a dose, which was repeated three or four times, at an interval of two hours between

each dose, unless sweating, vomiting, or purging, were previously excited.

I resorted to this practice, towards the end of the fever, and in the treatment of those patients only, of whose recovery I was exceedingly doubtful. I entertained hopes, that a favourable crisis might be procured, by the efficacy of the antimonial; and, in the mean time, I supported the strength of the patient, by the moderate use of wine.

This antimonial remedy was not ineffectual; but I remarked that it was beneficial only, when it moved the belly. The stools were black and fetid, and in general copious. On the discharge of these, the low delirium, tremors, floccitatio, and subsultus tendinum, which had prevailed, abated in some cases; the tongue, which had been dry and furred, became moister and cleaner, and a feeble creeping pulse acquired a firmer beat.

Reflecting afterwards on these circumstances, it occurred to me, as the purgative effect appeared to have been the useful one, that any purgative medicine might be substituted, for the *calx antimonii nitrata*; and that by this substitution, the unnecessary debilitation of an exhausted patient, by vomiting and sweating might be avoided.

More extended experience confirmed these conjectures; and I was gradually encouraged to employ purgative medicines early, in typhus, and to repeat them in the course of the disease. And after having long and strictly directed my attention to this point of practice, I am now thoroughly persuaded, that the full and regular evacuation of the bowels, relieves the oppression of the stomach, and mitigates the other symptoms of fever.

Farther, I am disposed to refer the usefulness of pur-

gative medicines, to their acting through the whole extent of the intestines, and to their consequent moving and conveying off feculent matter rendered offensive and irritating, by constipation, and by the changed nature of the fluids secreted into the intestinal canal; a change which appears to take place in the febrile state. If these things be so, how inefficacious must be the operation of a glyster, the stimulus of which, nearly limited to the rectum, cannot be adequate, to procure the full evacuation in question!

Accordingly, it is now some years since I have left off almost entirely, the practice of ordering emetics and glysters in fever. I trust to a purgative, to ensure a regular alvine evacuation. For this purpose, however, a daily purgative is not always required. Thus, avoiding the harassing distress, which generally accompanies the operation of an emetic given to patients in a state of fever; as well as the trouble and fatigue, which the exhibition of glysters occasions; I think I conduct the treatment of typhus fever, to a favourable issue, with greater certainty, and with more ease and comfort to the patient.

This practice, which I have found useful, and which respects only the state of the intestinal canal, supersedes by no means, usual attention to the various other means of cure, employed in fever. I am even ready to allow, although I exclude emetics and glysters from my general practice in typhus, that peculiar circumstances may, occasionally, make both the one and the other necessary.

I cannot, however, omit remarking, that for some years past, I find wine less necessary in fever, than I formerly thought it was. This may be owing to the fever which has prevailed of late, being less malignant than it was some years ago; or to the effect of the purgative medi-

cines which I have employed, and which may obviate symptoms of debility, as well as remove them.

If this be a just view of the case, the plain inference is, that the employment of purgative medicines, to preserve a regular state of the belly, does not increase the debilitating effects of fever. This doctrine, I know, is contrary to the opinion generally received; but I am confident, that it is consonant to the fact.

The object to be attained, is the complete and regular evacuation of the offensive feculent matter collected in the bowels, in the course of fever. Within this limit, the practice is safe and salutary. Of this I am assured, that I have had much satisfaction in the prosecution of it; and have not in a single instance, had occasion to regret any injury or bad consequence proceeding from it. For I am not an advocate for its being carried to the length of exciting unusual secretion into the cavity of the intestines, and of procuring copious watery stools. Such indeed, while they are not requisite, might increase the debility so much and so justly dreaded.

In further recommendation of the practice, I observe that it is conducted with ease, and a tolerable degree of certainty, The precise effect of purgative medicines, may not, in every instance, be altogether under command; but in general it is so, if, to a little experience, we join a previous knowledge of peculiarities in particular constitutions. At any rate, the subsequent doses of purgative medicines, and the repetition of them, will be regulated by the effect of preceding ones.

It is of importance, to consult in all respects the quiet and comfort of patients, in fever. On this account, the exhibition of purgative medicines should be so timed, that their effects may be expected during the day, when proper assistance can be best procured to the patient.

The purgative medicines which I have chiefly employed in fever, are calomel, calomel and jalap, compound powder of jalap, aloes, solutions of any mild neutral salt, infusion of senna, and sometimes the two last mentioned medicines conjoined.

In the Appendix, No. II. I have inserted several detailed cases, in illustration of the utility of purgative medicines in fever, and of the manner in which I have used them.

CHAP. II.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION OF PURGATIVE MEDICINES, IN SCARLATINA.

No disease has attracted greater attention, than scarlatina. Its frequent appearance, and its fatal tendency, have claimed the exertion of practitioners, and have stimulated them to enquire into the nature of the disease, and the most successful mode of treating it.

The ancients do not seem to have had any very accurate views, with regard to scarlatina.

Various authors, from an early period of the sixteenth century downwards, mention an ulcerated sore throat, accompanied with a scarlet efflorescence on the surface of the body, as frequently desolating different parts of the continent of Europe.

Sydenham describes scarlatina, as we often see it, to be a mild disease, requiring only common attentions, quiet, and simple diet; and more likely to be aggravated than relieved, by the “*nimiâ medici diligentia.*”

Huxham and Fothergill afterwards wrote on scarlatina, and the ulcerated sore throat; and since their time, many British and foreign physicians have published their sentiments, with regard to this disease; and have spoken of it under the title of *scarlatina anginosa*.

These different accounts of scarlatina, have given rise to much nosological discussion, respecting the identity of the disease, as described under different names. Little doubt is now entertained on the subject, so far as scarlatina, and scarlatina anginosa are concerned. It appears to be admitted, that the affection of the throat in the latter may give a variety, while the diseases are the same in their origin, course, and termination.

Greater uncertainty prevails in regard to this question, respecting the ulcerated sore throat, or cynanche maligna, the name by which it is now generally known. This very name may have contributed to confirm the opinion, that it is a *distinct disease* from scarlatina; an opinion, which, sanctioned by authors of respectability, and by our intelligent and latest nosologist, has been, and is still prevalent.

It is altogether foreign to my purpose, to engage in this controversy; and the more so, as I apprehend that the distinction, the subject of it, begins to lose ground, as our knowledge of the disease becomes more comprehensive and accurate. The time may not be far distant, when scarlatina will be received as the generic disease, the full history of which, will include the adventitious symptoms as they appear in scarlatina anginosa, and in cynanche maligna; in the same manner as the history of variola comprehends the varieties of the distinct, and of the confluent small pox.

Scarlatina, as an epidemic, does not always assume precisely the same appearance. This diversity depends in part, upon the varying nature and constitution of scarlatina itself, independently of all extrinsic circumstances; in part, upon certain contingencies, which are common to all the inhabitants of a whole district of country, such as the season of the year, the temperature of the air, the

kindliness or inclemency of the weather, together with other unknown qualities of the atmosphere ; and in part, upon circumstances which apply to individuals, subjected to the disease ; their general habit of body and constitution, their particular state of health, at the time of attack, and their situation, with respect to lodging, ventilation, and cleanliness.

These circumstances concur in modifying the character of the epidemic ; and while they introduce a variety in the symptoms of scarlatina, they likewise point out the necessity of making a corresponding change in the method of cure, and of accommodating our practice to the particular nature of the case.

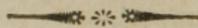
Hence various opinions have been entertained, of the nature of scarlatina ; and, apparently, discordant methods of cure have been proposed.

Undoubtedly, varying epidemics of scarlatina have led to the practice of blood-letting, in some instances, and to the rejection of it, in others ; to the adoption of emetics and of blisters, by some practitioners, while others neglect and positively forbid them. It is owing to the same cause, that cinchona is warmly recommended and almost exclusively trusted, for the cure of scarlatina ; while on the other hand, it is reprobated, as tending to induce sloughs, and putrid ulcers in the throat, which it was expected to have obviated and removed. In like manner, purgatives have been condemned as useless, if not dangerous, in scarlatina ; and lately, the affusion of cold water over the surface, or the ablution of the skin, by means of tepid water, have been recommended and practised in scarlatina, according to circumstances, by men, whose opinions have great weight and authority.

Thus the young and timid practitioner is distracted,

and at a loss what course to pursue, that he may embrace a safe and decided line of conduct. It will be a difficult task, to dispel the clouds that overshadow medical practice in scarlatina. The only way of accomplishing it will be, to give a full statement of the leading symptoms of the different epidemics of scarlatina noticed by authors; and to appropriate to each, the general and topical remedies which they require. Whoever embarks in this undertaking, and executes it with success, will render an useful service to the public.

These reflexions occurred to me, upon turning my thoughts towards the subject of scarlatina; and I conceive them of sufficient importance, to merit the attention which I have bestowed upon them.



I proceed now, to the proper object of this paper: in prosecuting which, I beg to be understood, as considering scarlatina, and scarlatina anginosa, to be the same disease, using always the term scarlatina, as including both. And thus, in compliance with common custom, and for a reason which will afterwards appear, I shall treat of this modification of the disease, separately from cynanche maligna, of which I shall take distinct notice, in the sequel.

An inflammatory diathesis frequently prevails on the first attack, and during the early period of scarlatina. For this reason, venesection has been ranked, by some practitioners, among the remedies which ought to be employed, in scarlatina; and it has even been practised with advantage. Possibly too, the existence of the inflammatory diathesis, may have disposed other practitioners to give purgative medicines, more freely in scarlatina, than in typhus. But this practice has not been universal; for

many physicians do not admit the good effect of purgatives, while others deny it altogether, and consider it to be highly prejudicial, by inducing a dangerous and fatal tendency in the disease.

This question, one of great importance in practice, is not as yet, satisfactorily decided; although I think the opinion gains ground, that purgatives are useful in scarlatina, either during the whole course, or towards the close of the disease; in which last case they are given, to obviate, or to remove dropsical swelling, a common, and sometimes, a fatal consequence, of scarlatina.

Many years ago, when the prejudices against the use of purgatives in scarlatina, were more decided, and more prevalent, than they are at this time, I ventured to employ them. My doing so, was indeed a necessary consequence of the benefit I had experienced from purgative medicines in typhus. I had learnt that the symptoms of debility which take place in typhus fever, so far from being increased, were obviously relieved, by the evacuation of the bowels. I was, therefore, under little apprehension from them, in scarlatina. I have never witnessed sinking and fainting, as mentioned by some authors, and so much dreaded by them; neither have I observed revulsion from the surface of the body, and consequent premature fading, or in common language, striking in of the efflorescence, from the exhibition of purgatives. Accordingly, in treating scarlatina, I have confided much, in the use of purgative medicines; and no variety of the disease, as appearing in different epidemics, or in the course of the same epidemic, has hitherto prevented me from following out this practice, to the extent which I have found necessary.

Here, I beg again to caution the reader against the common association of purging, with the use of purgative

medicines ; these are given only in the present case, to remedy the impaired action of the intestines, and secure the complete expulsion of their contents, and thus to prevent any accumulation from remaining to aggravate the severity of the symptoms, and produce further source of suffering to the patient.

Besides these motives for the exhibition of purgatives I have observed, that the febrile state in scarlatina is more apt to induce costiveness, and to change the nature of the contents of the bowels, than it is in typhus. For in most cases of scarlatina, the alvine evacuation has an unnatural appearance, and in general, a peculiarly fetid smell.

While I have thus found, that purgative medicines mitigate the symptoms of scarlatina, I have also in general, experienced them to afford the most certain means, either of preventing dropsical swellings, and other subsequent derangements of health, or of removing them, when formed. For this reason I give purgatives, not only during the fever, but for some time after convalescence.

On this subject, it is proper to remark, that the termination of scarlatina cannot be ascertained, from its previous state ; we can form no general conclusion as to the dropsical tendency, from the violence or mildness of the preceding symptoms. I have been involved in the greatest perplexity by the appearance of dropsical affection, after the termination of a mild scarlatina. During the progress of scarlatina, practitioners cannot be too much on the watch against unexpected changes, and unfavourable appearances. They must never, in the slightest case, lose sight of the ‘*diligentia medici*,’ although Sydenham seems to ridicule this attention, by applying to it the epithet ‘*nimia*.’

The same activity, however, in the exhibition of purgative medicines, is not required in every epidemic, and in every case of scarlatina. In some instances, the belly is moved with ease, and in others, not without difficulty. Scarlatina was frequent in Edinburgh, in autumn 1804-5. In this epidemic, the bowels were peculiarly constipated, the termination in dropsy was frequent, and the mortality great. I have not ascertained the circumstances to which this different state of the bowels in scarlatina, is to be ascribed. But on whatever cause the difference depends, it will be necessary for us to adapt our practice in the use of purgatives, to the nature of the prevailing epidemic.

It is not perhaps, of great moment, to be solicitous about the selection of purgative medicines in scarlatina. In general, I have chiefly employed those, which I have mentioned in my observations on typhus. Children cannot be always easily induced to take medicines of any kind. Submuriate of mercury, may, on this account, be proper for them. But we ought to be on our guard against too great an affection of the mouth, from the frequent necessary repetition of the mercury.

In scarlatina, as in typhus, we should keep in view the procuring the effect of purgatives, during the day, and the avoiding, in this manner, the disturbance of the sick, in the night time.

The use of purgative medicines in scarlatina, does not supercede the other sources of relief and comfort, which have been found proper in the treatment of the disease. On the contrary, the good effects of these, and their cooperation with purgatives, will contribute to abate suffering, and avert the danger which follows scarlatina.

I have purposely declined entering into any argument respecting the identity of scarlatina, and cynanche maligna, that I might be at liberty to notice them separately. I am, however, disposed to consider them, as constituting one disease: yet, so long as this is not the general opinion, I was unwilling that doubt should arise from this quarter, respecting the use of purgative medicines in scarlatina. For while in this, the more simple form of the disease, purgatives are considered by almost every one as dangerous, they are universally, and altogether condemned in cynanche maligna. Had I therefore spoken in a general way, and seemed to have recommended purgative medicines in all the varieties of scarlatina, my proposal would have been received with such distrust, that the practice which, from a conviction of its utility, I was anxious to promote, might have been neglected, and passed from, without a trial of its expediency.

But the line which I have taken, will avert this danger. I have stated my practice, of exhibiting purgatives in scarlatina; I proceed now to consider it in relation to cynanche maligna.

The extreme debility which is manifest in the malignant sore throat, has given rise to a strong objection to evacuations of any kind, and particularly to that by purging, in the treatment of it. It would indeed appear, that this objection has been urged with effect, against the use of purgatives even in scarlatina, in consequence of the connexion which had been observed to subsist between it and cynanche maligna. For it was imagined, that the danger from cynanche maligna which supervenes upon scarlatina, a supervention not unfrequent, would be increased, in proportion to the debility previously induced by the purgatives used in scarlatina.

But the restricted use of purgative medicines, to the

extent of unloading the bowels only, does not increase this debility, while it relieves the symptoms of the general fever, and either may thus prevent its termination in cynanche maligna, or alleviate the attack.

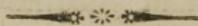
Writers also condemn purgatives in cynanche maligna, from an apprehension, that they serve to diffuse the acid matter, descending from the throat into the stomach, over the whole surface of the intestines, and thus to increase the source of contagion, and to aggravate the irritation which arises from the presence of this acrid matter. But in stating this objection, they do not consider that this matter accumulating, and becoming more offensive, in consequence of retention in the stomach and bowels, will produce greater mischief and greater irritation, than can possibly proceed from the gentle operation of a purgative medicine; while they lose the benefit ensuing from the movement and expulsion of an acrimonious feculent mass.

An exhausting diarrhœa, or even a dysentery, it is said, are troublesome and common consequences of cynanche maligna; on which account, purgatives are conceived to be injurious. But I cannot see the force of this objection. For were I to devise a means of preventing these consequences, or of removing them when they had taken place; none more likely would occur to me, than the use of those very purgatives, which are thus so dogmatically proscribed. While I employed them, however, I would carefully limit their effect to the express purpose of unloading the bowels, and shun the inconvenience of inducing weakness, by full purging.

Under these impressions, I have formed a favourable opinion of the utility of purgative medicines in cynanche maligna. But let me here caution the reader, that in

giving this opinion, I have departed from the rule which I had formed to myself. It is a theoretical opinion, and not so fully supported by experience, as to enable me to deliver it with confidence.

The peculiarly healthy, airy, and dry site of Edinburgh; the general cleanliness and comfort which the inhabitants enjoy, since the extension of the royalty, and the erection of the houses in the New Town, will account for the rare appearance of cynanche maligna among us, and for my good fortune, in having witnessed few instances of it.



I have said, that the opinion of purgative medicines being useful in scarlatina, gains ground. Accordingly, others, besides myself, have employed them with considerable freedom. But these practitioners do not seem to have set a proper value upon this mode of treatment; and have been inclined to impute benefits, evidently resulting from purgatives, to other medicines which they may have used at the same time.

Mr. Oaxly of Pontefract, and Dr. Binns, in conducting the cure of scarlatina, which appeared among the children in the school at Ackworth, gave calomel in repeated doses, to an extent beyond former example. And the utility of the practice was self evident, and acknowledged. Yet Dr. Binns, in the subsequent part of his account of this epidemic, derogates from the efficacy of purgatives, and attributes much of his success, and his success was great, to other remedies, particularly to gargles.

In the Gentleman's Magazine for June 1772, an anonymous correspondent mentions an epidemic scarlatina which prevailed at Ipswich. His letter is a medical curi-

osity. It is little known, and is not now readily accessible, as the depository of it has become scarce, and is generally to be found only in public libraries. I insert it therefore at length, for the gratification, I may hope, for the instruction of my readers. It runs thus ;

“ MR. URBAN,

“ If the following comports with the design of your useful collection, please to give it a place the first opportunity, and you will oblige a constant reader.”

To Dr.———, London.

“ SIR,

“ Notwithstanding you are an absolute stranger to me, your character as a physician, and as a candid, humane, and benevolent gentleman, has emboldened me to trouble you with the contents of this, without any further apology, than the goodness of the intention.

“ The ulcerated sore throat, and scarlet fever, has been very rife in this place and the neighbourhood, for some months past, and has been, in a considerable number of instances, fatal. It has in every respect, answered the description given of it by Dr. Fothergill ; and therefore a repetition of the symptoms and appearances would be needless. I shall only relate what appears to me to be the predisposing cause, the proximate cause, the pabulum morbi, the treatment I have given it, and the success.

“ The predisposing cause is, whatever generates a quantity of acrid bile in the primæ viæ.

“ The proximate cause, is the sudden transition from heat to cold, and the contrary. This had been so very evident, that whenever the wind has changed from the south or west to the north or east, a considerable number

of people have been almost instantly seized with the disease.

“ The pabulum morbi is, acrid bile. This is certainly known by the immediate cure of the sick, who apply very soon after the seizure, and take such medicines as act smartly on the stomach and bowels; by the great relief all others find by vomiting and purging; and is confirmed by the contents of the evacuations, which are little else but acrid or putrid bile.

“ The treatment I have given the sick is, immediately to evacuate them, in proportion to the strength of the patient, the violence of the symptoms, the time of the disease, and the particular state of the constitution.

“ The evacuating medicines I have given, are the following:

“ Recipe—Ras. c. c. antimon. crud. pulv. an; p. æ. calcinentur simul in crucibulo donec fumi sulphuris evanescent, et regulus antimonii manifestus sit; deinde ab igne remove, et in pulverem subtilissimum redige.

“ Recipe—Pulv. supradict. partes tres.—Mercurii dulcis sexies sublimati, et subtilissime tritirati, partem unam. misce.

“ Of this I have given from half a scruple to half a drachm, to adults, and have found it constantly to answer the intention. But to children, I have given the mercurius dulcis only, from five grains to a scruple; and if the symptoms are very violent, and the child very robust, I have given even a half a drachm with the greatest success. After the sick has had several stools, I give him the following julep:

“ Recipe—Mann, aq. pur. unciis septem ; solut. unci-
am, crem. tartar. drachmam, aq. nucis moschat. unciam
dimidiam. Mr. Capiat cochlearia tria, quartis horis, if
he is an adult ; if a child, according to his age and strength.
It is an agreeable medicine, and answers the intentions of
keeping the bowels lax, the bile insipid, and the mouth
and fauces quite clean.

“ If the patient is in the first stage of the disease, I di-
rect him to gargle frequently with Spiritus Mindereri in
cold water, which prevents an ulceration : if in the second
stage, with Spiritus Mindereri, tincturæ myrrhæ uncia
dimidia, decocti hordeati, unciis septem. M. If in the
third, and the sloughs begin to separate, with mel rosar.
tincturæ myrrhæ,—corticis Peruvian. a. uncia dimidia,
decoct. hordeati unciis septem, M. and made just tepid.

“ If the ears are affected, I have used the last mention-
ed mixture, as soon as they discharge, just tepid, as an in-
jection, several times a day.

“ After the sloughs are all off, and the fever gone, I
have found it necessary, in some few cases, to give of the
following tincture ; Recipe—Infus. corticis Peruviani
Huxhami, unciam unam et dimidiam, —Rhabarbari spirit.
unciam dimidiam ; drachmam unam vel drachmas duas,
bis in dies, horis medicinæ in aqua pura.

“ The liquors I have used, have been water-gruel, bar-
ley-water, chicken water, sage tea, rosemary tea, or
baum tea, occasionally. Of these I have recommended
the sick to drink freely, cold or just tepid ; keeping them
at the same time cool, and admitting fresh air freely into
the room, remembering always Piso’s maxim, “ putredo
fit a calore alieno et interno.”

“ The success has been beyond my most sanguine ex-

pectations; I have had considerably more than one hundred patients, and have not buried one."

" Ipswich, June 3."

" This letter was written some months ago, since which time the number of patients have increased to near three hundred, with the same success."

The facts here set forth, afford an uncontrovertible evidence of the safety and efficacy of the practice of exhibiting purgative medicines, not only in scarlatina, but even in cynanche maligna; for the epidemic described in the above letter, appears to have been of this nature.

Dr. Ford, physician in Chester, has informed me, that Mr. Rodbard, of Ipswich, an ingenious practitioner and respectable man, is the writer of this letter. In a late letter to Dr. Ford, Mr. Rodbard *inter alia* thus expresses himself, " I have not seen Dr. Hamilton's treatise, but I have seen no reason to deviate from my plan of treating scarlatina anginosa; and my success, since I adopted it, has been constant and uniform."

Mr. Rodbard verifies my observation, that different epidemics of scarlatina, require a variety of the same practice. In the scarlatina of 1772, at Ipswich, the bowels appear to have been easily moved. But I believe the gentle purgative employed in the course of that epidemic, for I do not take into account the highly active one given in the first instance, would have been of no avail in the scarlatina which prevailed in Edinburgh, in 1804. I give a narrative of this epidemic, as it appeared in George Herriot's hospital, as well as the cases of a few of the patients who laboured under it, in the Royal Infirmary. These will be found in the third number of the subjoined Appendix.—They illustrate my mode of practice, both in scarlatina, and in its consequences; for I apprehend other derangements of health, besides dropsy, arise from

it. Several years ago, I witnessed a case of scarlatina, in which violent epileptic paroxysms accompanied dropsy, the consequence of the disease. The dropsy was quickly removed by brisk purgatives, and the epileptic fits immediately ceased.

CHAP. III.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION
OF PURGATIVE MEDICINES IN THE MARASMUS WHICH
APPEARS IN CHILDHOOD AND EARLY YOUTH.

I COMPREHEND under the general title, marasmus, a variety of symptoms which affect the young of both sexes.

A sluggishness, lassitude on slight exertion, depravity and loss of appetite, wasting of the muscular flesh, fullness of the features and paleness of the countenance, swelling of the abdomen, an irregular and generally a costive state of the bowels, a change in the colour and odour of the feces, fetid breath, swelling of the upper lip, and itching of the nose, mark the beginning of the disease.

When these symptoms have continued for some time, they are followed by alternate paleness and flushing of the countenance, heat and dryness of the skin, feeble and quick pulse, thirst, fretfulness, increasing debility and disturbed sleep, during which the patients grind or gnash their teeth, and are subject to involuntary starting, and twitching of different muscles.

Every case of marasmus does not necessarily include all the symptoms which I have enumerated. Different

combinations of them give a variety of the disease, which is, however, in general, readily known and distinguished.

Marasmus appears most commonly among weak and infirm children, whether they are so from delicacy of constitution, or from incidental causes. It is particularly prevalent in large and populous cities, where children are deprived of ready access to exercise in pure air, and sicken and pine in the nursery; or when they are confined in crowded and airless school-rooms, whither they are sent, partly for the purposes of education, and partly, to use a common phrase, with the view of being kept out of harm's way. Children also, who are employed in manufactories, where their occupation and confinement are such as to weaken and enervate them, are liable to be attacked with this disease. Irregularity in diet and improper food, also give rise to marasmus. We accordingly observe it to prevail most commonly in autumn, the season which affords opportunity for eating unripe fruit and vegetable articles from the garden.

In proof of the operation of these causes, I remark, that I have held the office of Physician to George Herriot's Hospital for two and thirty years. During this long period, I scarcely recollect an instance of this marasmus among the children entertained in that institution. This may be attributed to the healthy site of the building; to the cleanliness and free ventilation of every part of it; to the wholesome nourishing food of the children, and to their exposure to pure air while enjoying their infant sports.

Marasmus has been generally attributed to the presence of worms in the alimentary canal. This supposition, however, is questionable. *Ascarides*, *Tenixæ*, and *Lumbrici*, are the worms most commonly found in the human intestines.

Ascarides, which are often passed in great numbers by children when at stool, are not accompanied by the symptoms of marasmus. Except an itching about the anus, they give little other uneasiness.

The tenia or tape worm, the presence of which is known by peculiar symptoms, which are the source of much suffering in after periods of life, is altogether unknown in infancy and childhood.

The lumbricus, or round worm, therefore, must be the generally supposed cause of the symptoms of marasmus. Medical gentlemen, who have practised in tropical climates, speak much of the lumbricus, and mention the number of them that is occasionally passed to be very great. There may be something in the climate, soil, or state of the air of these regions; in the mode of life or constitution of the inhabitants, with which we are unacquainted, which may account for this circumstance. But in our cooler latitudes, no such instances of numerous lumbrici have been noticed. On the contrary, after the best directed course of anthelmintic medicines, when the symptoms of the disease are going off, no lumbrici have been seen, unless we admit, that the worms, destroyed by the efficacy of the medicines, constitute the unnatural and fetid feces which, in such instances, are voided in great abundance.

This admission, however, is not to be readily granted; for similar feces are passed upon the exhibition of an early purgative, and before any specific vermifuge is employed.

Farther, the presence of lumbrici in the bowels is by no means an uniform cause of bad health. They have been known to exist in the intestinal canal without any disease ensuing. These instances are not rare, and are not con-

fined to childhood. They militate against the received opinion, that lumbrici, within the intestines, are the cause of marasmus; for if they are so in a single case, they should be so in every one.

This opinion, however, that worms exist, and exert a baneful influence in the intestines, has been so prevalent for ages, that a great many anthelmintic medicines, some peculiar to the nursery, others to the regular practitioner have been mentioned and extolled. Of these, some have been considered as specific poison to the insect, and others are conceived to destroy it by mechanical friction. Most of them have had their partisans for the day, and have passed in succession through the ordeal of experience, into oblivion. The utility of such anthelmintics as have been found to be most beneficial, has, in my opinion, been in proportion to the purgative powers which they possessed.

When I consider the languor and lassitude which precede this marasmus; when I recollect the constitutional or acquired debility of those who are more particularly exposed to be affected by it, instead of adopting the common opinion, of its being occasioned by worms, I am more disposed to think, that a torpid state, or weakened action of the alimentary canal, is the immediate cause of the disease; whence proceed costiveness, distension of the bowels, and a peculiar irritation, the consequence of remora of the feces. I have accordingly been long in the habit of employing purgative medicines for the cure of this marasmus; the object is, to remove indurated and fetid feces, the accumulation perhaps of months; and as this object is accomplishing, the gradual return of appetite and vigour mark the progress of recovery.

The history of the disease, from the first indisposition to the appearance of more urgent symptoms, disposes me

to consider it as consisting of two stages or periods ; the incipient, and the confirmed. The first period commences with the disease, and continues to the accession of the febrile symptoms. These usher in the confirmed stage, which continues to the end. This is not a frivolous remark ; it is of use in practice.

In the incipient stage, the bowels are not altogether torpid and inactive, neither are they overloaded with accumulated feces. Mild purgatives, therefore, repeated at proper intervals, effect a cure. They preserve the bowels in proper action, carry off feces which had begun to be offensive and hurtful, and prevent farther accumulation.

In selecting purgative medicines, we must flatter the taste of our young patients. Powder of jalap is not altogether unpleasant. The mild neutral salts, dissolved in a suitable quantity of beef tea, are also convenient purgatives ; but calomel will prove, on several accounts, the most certain and useful remedy of this kind.

Neglect, on some occasions, and too great confidence in inert medicines on others, allow the confirmed stage of marasmus to steal on imperceptibly. Manifest danger now threatens the young sufferer, whose remaining flesh, and strength are rapidly wasted by the supervening fever ; while prostration and depravity of appetite withhold necessary nourishment. And at the same time, the more inactive bowel, and greater bulk of feculent matter, throw additional difficulties in the way of a cure.

Under these circumstances, I adopt active practice, in the view of stimulating the intestines, and of putting the collected mass in motion without delay. I find these ends are best obtained by giving small doses of the purgative

medicine which I employ, and by repeating these frequently; so that the latter doses may support the effects of preceding ones,—When the bowels are once opened, stronger purgatives, given at longer intervals, will accomplish the cure.

I observe calomel to be equally useful in this, as in the incipient state of the disease; but great attention must be given during the exhibition of it. Without this, as the fetor of the breath prevents us from recognizing the mercurial fetor accurately, the mouth may be affected unnecessarily and unexpectedly.

While I thus give appropriate purgative medicines, I find it necessary in order to have full information of their effects, to inspect daily what is passed at stool. The smell and appearance of the feces are a criterion of the progress we make in the cure, and direct the farther administration of the purgatives. This inspection is the more necessary, as we cannot expect the information we want from our little patients; and we will often look for it in vain from the attendants, whose prejudices, and whose ignorance of our views, prevent their seeing the propriety of the enquiry.

During the prevalence of the disease, the feces are dark, fetid, and varying from a costive consistence, to that of clay, and are often fluid; and such they appear upon the first exhibition of the purgative medicines. I observe that the recovery of the sick keeps pace with the return of feces of natural colour, form, and smell; a change which the repetition of purgatives does not fail to produce.

While I give purgative medicines after this manner, in this stage of marasmus, in which the obstinacy of the disease is sometimes great, and the danger attending it im-

minent, nourishing food, of light and digestible quality, and suited to the taste of the patient, and the moderate use of wine, are much wanted.

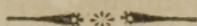
For some time after the symptoms have disappeared, it is expedient to continue a mild stimulus to the bowels. As they have recently suffered, and have been weakened by over distension, they are apt to favour subsequent accumulation of feces, the forerunner of a relapse, which is to be dreaded the more, as the patients have been weakened by the previous disease.

This gentle solicitation of the alvine evacuation, for it ought to be gentle, is not attended with danger; on the contrary, it is the greatest promoter of recovery in this case, with which I am acquainted. It relieves the stomach, and improves the appetite and digestion. Besides, nothing more is intended by this practice, than to establish a regular action of the bowels, after long constipation, by procuring daily one or two easy motions, which are indeed at all times necessary to the healthy condition of childhood.

With this precaution, I do not feel the necessity of employing tonic and bracing medicines to complete the cure; this object is readily obtained, in general, by the use of light nourishing food, and by the patient being much in the open air.

I do not, however, say that strengthening medicines may not be useful towards the close of the disease, and many practitioners set a value upon them. Lime-water, infusions of vegetable bitters, and chalybeates, are of this description; and, provided they do not, by any peculiar effect on the stomach, prevent nourishment being taken, will advance the return of the tone and vigorous action of the stomach and alimentary canal.

I have thus endeavoured to unfold the opinion I entertain of this marasmus, and of the causes which induce it; and to explain the method of cure which I have employed for a great length of time, with success, in my private practice.



As marasmus proceeds from symptoms of slight indisposition, through a series of others which become daily more and more obstinate and dangerous; as the first deviation from health is easily obviated by the stimulus of purgative medicines, which brings the sluggish bowels into regular action, and evacuates their contents; and as the disease attacks the young and thoughtless, who can hardly explain their feelings, it behoves mothers, and nurses, and superintendants of nurseries and of manufactories, to whom the care of the young is committed, to watch over their charge with assiduity. Prostration and depravity of appetite, a changing complexion, tumefaction of the abdomen, scanty and unnatural stools, and fetid breath, indicate approaching danger. When these therefore, are observed, assistance should be asked; by the prompt interposition of which much eventual distress, and even death itself may be prevented.

But other considerations weigh with me also, when I call for this assiduity. Marasmus has a close connexion with other formidable diseases, and either precedes or seems to accompany them; of these, I shall at present notice two, hydrocephalus and epilepsy.

Hydrocephalus internus, the bane of infancy and of childhood, a disease big with much suffering, and of a fatal tendency, has at all times occupied the attention of physicians. They have endeavoured to investigate its

nature, to assign the causes which induce it, and to propose curative indications. Different sentiments on these subjects have led them to employ numerous and discordant remedies. Nevertheless, even now they are not at one as to the causes of hydrocephalus, so involved are these in obscurity. Neither have they made the most distant approaches towards the discovery of a certain remedy for it.

This much is known, that hydrocephalus often steals slowly on, with symptoms resembling those of incipient marasmus. Till some better theory, therefore, is established, it is not unreasonable to suppose, that the marasmus, of which I have treated, may on some occasions give rise to hydrocephalus, by impairing the vigour of the constitution, and by favouring serous effusion into the ventricles of the brain.

This conjecture merits the greater attention on this account, that while the symptoms of hydrocephalus resemble those of incipient and even of confirmed marasmus, they have been removed by the diligent exhibition of purgative medicines. The truth of this observation has been repeatedly confirmed in my private practice, and it affords an additional reason for the exercise of watchful attention, to prevent the confirmed state of marasmus which may, in more instances than we are aware of, have, been the forerunner if not the cause of hydrocephalus.

Epilepsy, than which no disease is so distressing to the patient, and perplexing to the physician, often appears in childhood. It acquires a hold, and is confirmed by the repetition of the fits, till their frequency, and the force of habit fix it, and make it a constitutional disease for life.

It is not my present purpose to enquire in what manner,

the functions of the organs more immediately affected by epileptic paroxysm are influenced, so as to give permanency to the disease. The uncertainty of the theories proposed on this subject, and the little benefit that arises from them in practice, hold out little inducement to enter on the discussion.

It is however, I believe, generally understood, that the first attacks of epilepsy are not always idiopathic, but are frequently the effect of particular irritation of the mind or body. There are many instances of irritation of the body inducing epilepsy. When no other is evident, the loaded intestine and the change induced on its contents in the course of the marasmus, of which I have spoken, may be suspected of giving the irritation in question.

In fact, practitioners have had this circumstance in view; for they enumerate worms in the intestines, or marasmus, as I understand their language, among the causes of epilepsy. Surely, therefore, this consideration suggests another cogent reason for watching the rise and progress of marasmus. And it will induce us on the first attack of epilepsy in children, arising from an uncertain cause, to set on foot the most decided and active course of purgative medicines; and not peradventure to allow the disease to strike root, while we are idly employed in the exhibition of inert and useless vermifuge medicines; or are groping in the dark in quest of other causes of the disease, or of uncertain remedies for their removal.

In the fourth number of the appendix, I give the history of two cases of marasmus from the records of the Royal Infirmary. And in the same number, I insert also communications from Mr. James Russell and from Mr. Benjamin Bell, in confirmation of the connexion that subsists between the marasmus of infancy, and hydrocephalus. These communications will be read with interest.

CHAP. IV.

ON THE UTILITY AND ADMINISTRATION OF PURGATIVE
MEDICINES, IN CHLOROSIS.

THE young of either, but particularly of the female sex, are exposed, about the age of puberty, to a series of symptoms, which, although slight in the beginning, become by slow degrees, abundantly distressing and severe. They are ushered in by a disagreeable breath, or exhalation from the mouth, not unfrequently of a feculent odour; by acid and fetid eructations, by prostration, and depravity of appetite, marked by an aversion to usual food, and a desire for substances, which are not digestible, such as chalk, cinders, sand. These symptoms are generally preceded by costiveness, which prevails throughout the disease.

A rosy complexion now gives place to a pale, and sometimes to a greenish, and at other times to a yellowish colour of skin. The lips and gums exchange their vermilion tint for a death-like paleness; the eyes are dull, and the inferior part of their orbits is puffy, and of a dark hue; the motions become languid and feeble; the pulse, which is generally small and slow, is readily excited to a quick and irregular beat; palpitation of the heart, and hurried and labouring respiration are brought on by slight exertion; syncope often occurs; head-ach, vertigo, dullness, and impaired memory and judgment afterwards su-

pervene. To these succeeds a peevish and recluse turn of mind, which makes the unhappy sufferer shun society, and court darkness and solitude.

In the progress of the disease, the flesh becomes loose and flaccid, the urine is diminished, and the perspiration seems to be checked. Serious effusions into the cellular membrane, produce at first œdema of the lower extremities, and afterwards anasarca. Languor and debility continuing, death, in some instances, closes the scene. In the female, these symptoms are commonly accompanied with irregular or suspended menstruation.

Different authors arrange these symptoms indiscriminately, under different names, Chlorosis, Leucophlegmatia, and Cachexia; which are, in medicine, therefore, nearly synonymous.

Chlorosis has attracted the notice of the earliest medical writers, and various opinions respecting its nature and causes have been entertained.

It is not perhaps necessary at this era, to consider at length, the doctrines of the humoral pathology, which prevailed in physic, from a remote period and about which the Boerhavian school was so much occupied. The dogmata respecting spontaneous gluten, the lentor and fluidity of the blood, and the alkaline and acid acrimonies of the fluids do not now arrest much attention. Even in the present improved state of chemistry, we are little able to ascertain the nature of the animal fluids, either in a state of health or of disease; so as to say, in what the former consists; or by what deviations the latter is introduced.

Nevertheless, to this supposed cachectic state of the juices, the above mentioned symptoms of chlorosis have been referred, and, to promote a cure, recourse has been

had to diluting, incrassating, and strengthening medicines, and rectifiers of peculiar acrimonies,

Accordingly, a crude, multifarious, and often inert practice has been adopted; little calculated for the speedy removal of a disease, which gains strength by delay, and which, in some instances, becomes quickly too formidable to be cured by any means that can be devised.

When the humoral pathology sunk in estimation, other opinions arose, on which the explanation of the symptoms of chlorosis, and the indications for its cure were founded.

As chlorosis generally appears about the age of puberty, and in the female, either before, or soon after the first flow of the menstrual flux, many have supposed the retention or suppression of the menses to be the immediate cause of the disease.

This supposition, however, is liable to objections. We cannot ascertain the precise time, at which the retention of the menses may be considered as a circumstance connected with disease. The age of puberty is not the same in every female: chlorosis may therefore exist, long before the agency of the menstrual flux is felt in the constitution.

But, opposed to this theory, a still more conclusive argument is drawn, from the circumstance of chlorosis appearing occasionally among the more feeble, and delicate of the male sex; for although females are attacked more frequently and more severely with chlorosis, yet it is not peculiar to them.

For these reasons, this doctrine is now generally rejected. Another, founded on the state of the genital organs, occupies its place; it comes from most respectable authority, and it has obtained many proselytes.

Dr. Cullen thus expresses himself in paragraphs M, MI, MII, MIII, of his First Lines of the Practice of Physic; "These symptoms," namely, some of those which I have enumerated above, (and which the Dr. details,) "when occurring in a high degree, constitute the chlorosis of authors; hardly ever appearing separate from the retention of the menses; and attending to these symptoms, the cause of this retention, may, I think, be perceived.

"These symptoms, manifestly shew a considerable laxity and flaccidity of the whole system, and therefore give reason to conclude, that the retention of the menses accompanying them, is owing to a weaker action of the vessels of the uterus, which therefore do not impel the blood into their extremities, with a force sufficient to open these, and pour out blood by them.

"How it happens, that at a certain period of life, a flaccidity of the system arises in young women, not generally affected with such weakness or laxity, and of which, but a little before, they had given no indication, may be difficult to explain; but I would attempt it in this way.

"As a certain state of the ovaria in females prepares and disposes them to the exercise of venery, about the very period at which the menses first appear, it is to be presumed, that the state of the ovaria, and that of the uterine vessels, are, in some measure, connected together; and as, generally, symptoms of a change in the state of the former appear before those of the latter, it may be inferred, that the state of the ovaria has a great share in exciting the action of the uterine vessels, and in producing the menstrual flux. But analogous to what happens in the male sex, it may be presumed, that, in females, a certain state of the genitals is necessary to give tone, and

tension to the whole system ; and therefore, if the stimulus arising from the genitals be wanting, the whole system may fall into a torpid or flaccid state, and thence the chlorosis and retention of the menses may arise."

" It appears to me, therefore, that the retention of the menses is to be referred to a certain state or affection of the ovaria ; but what is precisely the nature of this affection, or what are the causes of it, I will not pretend to explain ; nor can I explain in what manner that primary cause of retention is to be removed.

Dr. Cullin afterwards entertained and promulgated the opinion, that the retention of the menses always accompanied the symptoms of chlorosis.

In the uncertainty in which Dr. Cullin admits the affection of the ovaria, to which he refers suspended menstruation, as well as the causes of this affection, to be involved, he recommends, in conducting the cure of retention of the menses, to obviate particular symptoms, by restoring the tone of the system in general, and by exciting the action of the uterine vessels in particular: the same means being subservient to the cure of chlorosis.

By this theory, Dr. Cullen attempts to establish, that the retention of the menses, and chlorosis, a.e co-existent diseases, appearing about the age of puberty, and originating in a defective communication of a due stimulus from the genital organs, on which the tone and tension of the whole system depend.

Whilst I acknowledge the great importance of the sexual organs ; while I perceive that they influence the character and disposition of the adult of every species of animals ; yet I cannot help thinking, that these organs, and

the doctrines of their functions, have had too great a share in our pathological reasonings, and too great weight, in directing our conduct in the cure of diseases. And having experienced the uncertainty of the usual means which are recommended for the cure of chlorosis, and the utility of another mode of treating the disease, I was led, greatly hesitating, to question the theory of the Cullenian school on this subject.

The assumption, that the state of the ovaria, and that of the uterine vessels have a connexion; and that the former has a great share in exciting the action of the latter, and in producing the menstrual flux; the presumption, that a certain state of the genitals is necessary to give tone and tension to the whole system, and that, if the stimulus arising from this state be wanting, the whole system may fall into a torpid, or flaccid state, whence chlorosis may arise; appear to be merely a begging of the question, and lead to no certain conclusion, as to the nature, or cause of this state of the genitals, the supposed prime mover in the retention of the menses, and in the introduction of chlorosis; or to a knowledge of the means of curing either.

The partial and temporary suspension of the influence of the genitals, is supposed, according to this theory, greatly to affect the general system. But there are instances, where this influence is altogether, and irretrievably lost; and where no disease ensues. Castrated and spayed animals suffer certain changes of constitution, but they retain the enjoyment of perfect health. And, in our own species, eunuchs, however much degraded in the estimation of society, in consequence of their emasculation, are neither a short lived, nor an unhealthy set of men. Reasoning from this analogy, I do not understand how the influence of the female genitals can be so great, as that its partial suspension should occasion retention of the menses, or should induce chlorosis.

Another theory has been broached on this subject, which it elucidates by a reference to sexual desire. Insinuations, injurious to the purity of mind, and offensive to the modesty of the fair sufferers, have been thrown out. The medical moralist talks of the chlorosis amatoria, and follows up his notion, with apposite counsel. Into what contradictions do the refinements of dogmatism lead us! Can passion exist, when the organs which rouse it have not as yet been evolved into action; or, if evolved, have been afterwards rendered effete by disease?

I could not avoid entering upon these discussions, which I have conducted with all brevity; I thought it was necessary to show, that the doctrines on the subject of chlorosis, are neither so clear nor so well founded, as to warrant the conclusions, which follow necessarily from them. In this manner, I prepare the reader for the candid consideration of what I have to propose; a candour perhaps not the less wanted on this account, that my opinion of the disease may appear at first sight too simple; and my practice too little adorned with the show of varied prescription.

It would have been fortunate, if medical enquirers had always followed the progress of diseases, step by step, and viewed them as a whole, from the first deviation from health, to their termination. A contrary procedure has often betrayed them into confusion and error.

Thus in chlorosis, the doctrine of the cacochymia of the juices, and that of the peculiar state of the genitals affecting the whole system with flaccidity and laxity, are evidently founded on the appearances, which the disease exhibits, when it is fully formed; and from which appearances also, it has its name; when, at the same time, the history of its incipient state has been little regarded.

The slightest attention to the general history of the disease evinces, that costiveness precedes, and accompanies the other symptoms. Costiveness induces the feculent odour of the breath, disordered stomach, depraved appetite, and impaired digestion. These preclude a sufficient supply of nourishment, at a period of growth, when it is most wanted: hence paleness, laxity, flaccidity, the nervous symptoms, wasting of the muscular flesh, langour, debility, the retention of the menses, and suspension of other excretions, serous effusions, dropsy, and death.

This view of chlorosis explains some circumstances connected with it. The feeble and delicate of either sex, in whom the languid action of the bowels readily gives place to costiveness, are more exposed to chlorosis, than the robust. Females are, in general, more delicate, and, in certain ranks of life, are more sedentary, than males; hence costiveness, and chlorosis are more common with the former, than with the latter. It is well known, that the alvine evacuation is periodical, and subjected to the power of habit; if the regular call is not obeyed, the necessity for the evacuation passes away; and the call being again and again neglected, habitual costiveness is the consequence. Hence, from the feelings of the sex, and frequently from the want of proper opportunities, costiveness, and its attendant chlorosis, are more prevalent among girls, than among boys. Again, the greater capacity of the female pelvis gives more room, for that part of the intestinal canal which is contained within it, to dilate, and, of course, to admit of greater accumulation of feculent matter, which, in proportion to its remora, becomes more and more abundant, and more impacted. Hence costiveness is more obstinate, and chlorosis, and other diseases originating in costiveness, are more severe, and are of more difficult cure, in the female, than in the male.

Impressed with these considerations, and with a previous favourable opinion of the utility of purgative medicines, in other complaints, I, many years ago, adopted the use of them in chlorosis. I expected, by obviating costiveness, to remove the stomachic symptoms, and of course, others that depended upon them. I pursued this practice with the greater readiness, because I had experienced, on many occasions, the uncertain, and protracted cure of chlorosis, by the remedies in common use.

Scarcely had I begun the exhibition of purgative medicines in chlorosis, when I had the satisfaction to find that the opinion, which I had formed of them, was well founded, and that they proved at once safe, and quickly salutary.

As chlorosis proceeds by slow degrees, from its commencement, to its confirmed state; so I found, according to the progress which it had made, that the bowels were more or less easily moved. I therefore varied the strength of the purgative medicines, which I employed, as well as the frequency of their repetition, as this circumstance seemed to require. The unloading the constipated bowels is the object to be obtained here, as it will be found to be in chorea Sancti Viti; and the means, by which it is obtained, are the same in both diseases.

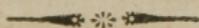
As it will be seen in chorea, so in chlorosis, the quantity of feculent matter accumulated is often very great; and the movement of it, a task of no small difficulty.

Of course, the same attention, and assiduity in the exhibition of purgative medicines, which I shall point out to be so necessary in chorea, are equally demanded in chlorosis. The practitioner, who is not aware of this, and who, yielding to the importunity of his patients, or to the

caprice of their relations, does not steadily pursue this plan of cure, will be disappointed, his abilities will be called in question, and his practice vilified and neglected.

After the due evacuation of the intestinal canal, recovery may be promoted by the interposition of tonic medicines. If such, however, abate appetite, and induce sickness, they will be of doubtful efficacy. In this case, the patient may be directed to trust to the use of nourishing food of easy digestion, and to frequent exposure to the open air, when the weather is good.

After all, I am not singular in this practice. The favourers of the humoral pathology have recommended a gentle purge, at intervals, to carry off whatever loads the intestines. Others advise the same practice, that the stimulus excited by the purgative may be communicated to the vessels of the uterus, which have connexion with those of the rectum. But as the objects, in these instances, were only secondary, the direct good effects of purgative medicines seem not to have been understood, or to have been lost in other views, directing other treatment.



In concluding this subject, I must observe, how much it behoves those, who have the charge of young people, particularly of the female sex, to impress them with the propriety, nay, with the absolute necessity of attention to the regular state of the bowels; and to put it in their power, by the use of proper means, to guard against constipation; and, at the same time, to watch over them, lest, through indolence, they neglect a circumstance, which promoting, in the gay season of youth, the enjoyment of health and happiness, opposes a sure barrier against the inroads of chlorosis, always a distressing, and sometimes a fatal complaint.

I cannot adduce instances of chlorosis treated by the use of purgative medicines. This disease is not frequent among that class of society, who seek a refuge in a public hospital; while my notes of private cases, although sufficient for my own purpose, are too imperfect to afford materials for authentic histories fitted for public inspection.

I am however enabled to supply my own deficiency in this particular, by inserting in the fifth number of the appendix, a case of chlorosis communicated to me by my friend Mr. Russell, which he had treated by purgative medicines. This case merits the attention of the reader.

CHAP. V.

ON THE UTILITY AND ADMINISTRATION OF PURGATIVE
MEDICINES, IN VOMITING OF BLOOD.

VOMITING of blood is an alarming and often a distressful disease ; but having been generally considered to be symptomatic of other affections, it has not found a place in any regular system of physic.

I do not propose to attempt a general history of vomiting of blood. But there is one variety of it, which attacks females, who are from eighteen to thirty years of age, and it rarely appears sooner or later than these periods, which I shall endeavour to illustrate.

As I confine my attention to this variety, the observations which I am about to make, will not apply to hæmatemesis, which originates in organic affection of the stomach, and viscera connected with it, either a constitutional disease, or the consequence of previous irregularities, and intemperance. I have seen several instances of this vomiting of blood, the cure of which is doubtful in the extreme, and difficult.

The attack of the hæmorrhagy, of which I am to speak,

is preceded by langour, and oppression, both about the chest, and the præcordia; and by a sense of fullness of the præcordia; by cough, dyspnœa, and sometimes by pain of the breast; by loss of appetite, headach, vertigo, and disturbed sleep; the eye is dull, the countenance is expressive of much distress, the pulse is feeble and the bowels are constipated.

In this state of impaired health, a particular fit of sickness and nausea is the immediate fore-runner of the attack of the vomiting of blood. The blood vomited is sometimes florid, and, at other times, black, and grumous. The quantity of blood brought up at one time, varies from a few ounces, to the quantity of a pound or more. The distressing symptoms are relieved by this discharge of blood; but are again aggravated, previously to the return of a similar attack.

This disease, under the usual management, is of uncertain duration, and of unequal severity.

The time of life, at which this hæmatemesis takes place, and the circumstance of being peculiar to the female sex, have induced practitioners to imagine, that it is intimately connected with the menstrual flux; the suppression of which has been generally considered as the sole cause of the disease. It has been said to be a hæmorrhagy, vicarious of the mensis.

The high importance of the uterine system in the animal œconomy cannot be doubted; but the functions of this system are veiled in deep obscurity, and will not, perhaps, be at any time clearly understood. They have occupied much of the attention of the speculative enquirer; and ingenuity has been taxed, to invent theories in explanation of them, and of their influence, in health, and in disease.

The menstrual flux, the most obvious of the uterine phenomena, has afforded a wide field for discussion. It is interwoven with the opinions we entertain of almost every disease, to which the female sex is exposed. Its overflow, or its suppression, are the ready expounders of many symptoms; the fruitful, though perhaps imaginary source of many diseases. This flux is a constant object of attention to females, who are in general well schooled, as to the importance, and necessity of it.

These theories of the schools, and these early impressions on the female mind, give a consequence to this subject, and force it upon the notice of the medical practitioner, who must subscribe to the general opinions respecting the menses, and seem to adopt them, although he may question, in some respects, the foundation on which they rest, and the conclusions to which they lead.

Too curious a research into the arcana of nature is nugatory. These, doubtless for wise reasons, seem to be placed beyond the ken of mankind. When, therefore, we adopt the views and language of the schools, on points merely theoretical, and deduce practical conclusions from them, it is probable we may err. I for one, am inclined to think, that too much has been imputed to the influence of the menses, in circumstances of disease. In explaining these circumstances, we seem to have reasoned too much on a subject, that is but too little understood.

The interruption of the evacuation of the menses frequently takes place for a length of time, without prejudice to the health. May not this interruption, therefore, be oftener the symptom, or consequence, than the cause of disease? It is not uncommon for females to complain, about the usual period of menstruation; and if the menses do not appear, the previous disease is hastily attributed to this

circumstance. But it may, with equal reason, and with equal probability, be said to have been the cause of the suppression.

If these things be so, we cannot but regret theoretical disquisitions, which have, in other instances, as well as in the present one, led us to an attempt of difficult accomplishment, and of uncertain issue,—the restoration of suppressed menstruation; while a different practice, more certain, and more useful, and founded on different views of the case, has been either never devised, or has been entirely neglected.

I feel myself at perfect liberty to make these reflections; because, in the case now before us, the cause assumed, to account for vomiting of blood, proceeds upon limited, or mistaken information. Suspended menstruation is not a necessary concomitant of hæmatemesis, which appears when the menses are regular. I do not know in what proportion of instances this is the case; but if it be so in one instance, this one instance overturns the theory, does away the vicarious of hæmatemesis, and gives it a place, where I conceive it ought to have one, among idiopathic diseases.

About ten years ago, Dr. Gasking, of Plymouth, passed a season in Edinburgh. I had the pleasure to be acquainted with him, and I cultivated his friendship. At this time I had ascertained the efficacy of purgative medicines in several diseases: I conversed with Dr. Gasking freely on these subjects, communicating the observations I had made.

Dr. Gasking frequently walked the hospital with me. He observed a patient labouring under vomiting of blood, whom I had been treating in the usual routine, with cool-

ing acidulous medicines, and with different emenagogues, to no good purpose. He requested me to open her bowels with calomel; he spoke with the decision which experience gives, and I followed his advice.

This patient was from the country; of a robust make, and hale constitution. She was about twenty years of age. The alvine evacuation, procured on the exhibition of the purgative, was copious, and of unnatural appearance. She obtained immediate relief; vomiting of blood did not return; and a few more purgatives established her recovery. She left the hospital, strongly enjoined to preserve a regular state of her belly,—means for this purpose being furnished to her.

In three or four months, this patient returned, labouring under constipation, and vomiting of blood. The constipation, was again removed, by means of calomel, and a great load of indurated, and fetid feces was brought off. In a short time she left the hospital, again cured, and again admonished to be more attentive to the state of her bowels.

This instructive lesson was not lost upon me; it taught me, that the vomiting of blood of which I speak, depends upon constipation of the belly, a circumstance which I had not before suspected.

I have followed the practice which this case suggested, in the instances of the disease which I have since met with; and my success has been so uniform, that I now lay it down as a certain position, that the proper exhibition of purgative medicines affords sure, and effectual means of removing hæmatemesis, the subject of this chapter.

The purgatives, which I have used in these cases, have never excited vomiting; and, what may be thought sin-

gular, I have never been able to ascertain the presence of blood in the feces.

As the strength of patients labouring under this vomiting of blood is generally pretty entire, we need not dread full purging; but this effect is not wanted; if we unload the bowels, we accomplish the cure.

The feces which are brought off are copious, unnatural in colour, consistence, and smell, as they generally are after long remora, the consequence of obstinate, and protracted costiveness.

The different circumstances, which not only expose women to costiveness more readily than men, but, when it does occur, to a more obstinate kind of it, as mentioned in the chapter on chlorosis, may explain, why they are exclusively the subjects of this disease:—A consideration, which affords me a strong additional argument, for inculcating the most sedulous attention to the careful support of a regularly acting state of the bowels; the only security against costiveness, that bane of health, and source of manifold distress.

In conducting the cure of vomiting of blood, I have not confined myself to the use of calomel alone; I have occasionally substituted other purgative medicines, as will be instructed by the cases inserted in the Appendix, No. VI. In which Number, I insert also a letter addressed to me, from Mr. James Law, one of the surgeons of the Infirmary, and surgeon to the Bridewell of Edinburgh. This communication from so respectable a quarter, will, in the general opinion, corroborate my practice in hæmatemesis.

CHAP. VI.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION
OF PURGATIVE MEDICINES IN CHOREA SANCTI VITI,
OR ST. VITUS'S DANCE.

SYSTEMATIC writers have paid little attention to chorea Sancti Viti; and practitioners have regarded it with indifference. These circumstances will surprise us the more, when we consider the formidable appearance of the disease, the obstinacy with which it holds its course, and the distressful state to which it always reduces, and the danger in which it sometimes involves, those whom it attacks.

Dr. Sydenham described chorea Sancti Viti, a hundred and twenty years ago, and his description, with little variation or addition, has been copied by the few succeeding authors who have written on the subject.

Sydenham, in his " *Schedula Monitoria de novæ febris ingressu*," gives the history of chorea Sancti Viti, in the following words :

" *Chorea Sancti Viti convulsionis est species, cuæ ut plurimum pueros puellasve à decimo ætatis anno, ad pubertatem usque invadit; primò se prodit claudicatione quadam vel potiùs instabilitate alterutrius cruris, quod æger post se trahit fatuorum more; postea in manu ejusdem lateris cernitur, quam, hoc morbo affectus, vel pectori, vel alii alicui parti adplicitam, nullo pacto potest continere in eodem situ vel horæ momento, sed in alium*

situm, aliumque locum convulsione quadam distorquebitur, quicquid æger contrà nitatur. Si vas aliquod potu repletum in manus porrigatur, antequam illud ad os possit adducere, mille gesticulationes, circulatorum instar, exhibebit; cum enim poculum rectâ lineâ ori admovere nequeat, deducta à spasmo manu, huc illuc aliquamdiu versat, donec tandem forte fortuna illud labris propius apponens, liquorem derepente in os injicit, atque avidè haurit, tanquam misellus id tantum ageret, ut dedita opera, spectantibus risum moveret.”

This history, so far as it goes, is correct. It exhibits a faithful picture of the disease, of the various contortions and gesticulations of the patient. But it is silent on other circumstances, the affections of the natural and animal functions, which are essential to the disease, and which ought not to have been omitted. Besides, Sydenham details the symptoms of the advanced and confirmed state only, while he either has not perceived, or has altogether overlooked, the rise and progress of chorea. For these reasons, I give the following more extended narrative of the symptoms of chorea.

Chorea Sancti Viti attacks boys and girls indiscriminately; and those chiefly, who are of a weak constitution, or whose natural good health and vigour have been impaired by confinement, or by the use of scanty or improper nourishment. It appears most commonly, from the eighth to the fourteenth year. I saw it in two young women, who were from sixteen to eighteen years of age.

The approaches of chorea are slow. A variable, and often a ravenous appetite, loss of usual vivacity and playfulness, a swelling and hardness of the lower belly in most cases, in some a lank and soft belly, and, in general, a constipated state of the bowels, aggravated as the disease

advances, and slight irregular involuntary motions of different muscles, particularly of those of the face, which are thought to be the effect of irritation, precede the more violent convulsive motions, which now attract the attention of the friends of the patient.

These convulsive motions vary. The muscles of the extremities, and of the face, those moving the lower jaw, the head, and the trunk of the body, are at different times, and in different instances affected by it. In this state, the patient does not walk steadily; his gait resembles a jumping or starting; he sometimes cannot walk, and seems palsied; he cannot perform the common and necessary motions, with the affected arms.

This convulsive motion is more or less violent, and is constant, except during sleep, when, in most instances, it ceases altogether. Although different muscles are sometimes successively convulsed, yet, in general, the muscles, affected in the early part of the disease, remain so during the course of it.

Articulation is now impeded, and is frequently completely suspended. Deglutition is also occasionally performed with difficulty. The eye loses its lustre and intelligence; the countenance is pale and expressive of vacancy and languor. These circumstances give the patient a fatuous appearance. Indeed there is every reason to believe, that, when the disease has subsisted for some time, fatuity, to a certain extent, interrupts the exercise of the mental faculties.

Fever, such as arises in marasmus, is not a necessary attendant on chorea, nevertheless, in the advanced periods of the disease, flaccidity and wasting of the muscular flesh take place, the consequence of constant irritation, of abating appetite, and impaired digestion, the common

attendants of protracted chorea; and which, I doubt not, may, in some instances, although contrary to the opinion that chorea is not fatal, have been the forerunners of death.

From this history, chorea may be considered as consisting of two states or stages; the incipient, and the confirmed. The incipient state takes place from the first derangement of health, till the full formation of the involuntary motions; with these the confirmed state commences, and continues to the end of the disease.

After detailing the history, Sydenham proceeds in the *Schedula Monitoria*, to deliver his theory and his conduct of the cure of chorea.

“Cùm affectus iste,” (chorea scilicet,) “ab humore aliquo in nervos irruente, quorum irritatione istiusmodi motus præternaturales producuntur, pendere mihi videretur; indicationes curativas primùm ad humores illos tam venæsectione, quàm purgatione minuendos, dein ad corroborandum genus nervosum omnino dirigendas censebam. Quem in finem hâc utor methodo. Sanguinem ex ægri brachio ad uncias septem, plus vel minus, pro ratione ætatis, educi jubeo. Die sequente vel dimidiam partem, vel quiddam ampliùs, (pro ratione vel ætatis, vel etiam majoris minorisve corporis, ad subeundam catharsin, aptitudine) potionis purgantis communis exhibeo.

“Recipe—Tamarind. unciam dimidiam; fol. senn. drachmas duas; rhabarb. drachmam unam et dimidiam; coq. suf. quant. aq. ad uncias tres, in colat. dissolv. mann. et syr. rosar. solutiv. utriusque unciam.

“Et vespere haustulum paregoricum propino.

“Potionem istam cathartica ad tres vices alternis

diebus repetendam prescribo, et haustum paregoricum iisdem noctibus. Postea sanguinem rursus extrahi curo, dein ut ad catharsin, uti priùs, æger revertatur. Atque ità, alternatim sanguinem mitto, et subduco alvum, donec ægro vena ter quaterve fuerit incisa, et post singulas venæsectiones toties fuerit purgatus, quoties viros ferre posse viderentur; eo tamen temporis spatio inter alternas evacuationes diligenter observato, ut nihil inde periculi ægro immineat. Diebus à purgatione vacuis, sequentia prescribo.” *Haec sunt medicamenta stimulantia, uti dicuntur, corroborantia, et alterantia quae hic recensere inulile est.*

“Quanto magis convalescit æger, tanto minus pedem ducit, tanto pariter et diutiùs, et constantiùs manum in eodem situ continet, et scyphum ori magis directâ viâ admovet: quæ certissima sunt indicia quantum profecerit in sanitate redintegrandâ. Ad quam quidem consummatiùs perficiendam, licèt author non sim ut plus ter quaterve ut plurimum sanguinem emittat æger, attamen æger, attamen remedia cathartica et alternantia eousque in usum sunt revocanda donec rectissime tandem valeat.”

Sydenham mentions his success under this management: “Quo morbo,” chorea scilicet, “haud pauciores quinque laborantes et vidi, et sanavi ipsemet.”

Sydenham passes over in silence the time requisite for the cure of chorea. The intervals, however, between the three or four bleedings, during which purgative and paregoric medicines were given, and the injunction to continue the use of cathartics and alteratives, after the last blood-letting, till the patient is at length completely recovered, make it probable, that many weeks, if not months, must have elapsed before the cure was effected.

The theory of the present day differs from that of Sy-

denham, which, although not very intelligible, may be as good as its substitute; and the only useful part of his practice, has fallen into disuse. Latter physicians, therefore, instead of elucidating the theory, and of improving the method of curing chorea, have been retrograde in both respects.

It is now sufficient to say, for what length of time the authority of Sydenham, and the credit which his opinions obtained, encouraged and protected the practice, which he recommended. It is certain, however, that a doctrine and practice discordant with his have long prevailed. And it is probable, that the anxiety expressed by Sydenham, that, in the administration of blood-letting and purging, his patients should catch no harm; together with the weakness both of body and mind, characteristic of the disease, may have introduced this change. Be this as it may, physicians are now inclined to refer chorea to a certain debility, or loss of tone, in which the convulsive involuntary motions originate. They of course neglect the "*humor aliquis in nervos irruens*;" they convert the caution of Sydenham into a total prohibition of blood-letting and purging; and in the cure of chorea they adopt the exclusive employment of stimulant and tonic medicines.

Under this practice, opium, camphor, sulphuric æther, valerian, cinchona, and different vegetable bitters, zinc, steel, ammoniaretum cupri, cold bathing, and electricity, are the medicines which have been chiefly used. Most of these are casually mentioned in periodical publications, and are supported by that authority only which attaches to solitary facts. De Haen is an advocate for electricity. In his *Ratio Medendi* he gives several cases, in which it appears to have been exhibited with success. Medical electricity has, however, lost much of its early celebrity.

Notwithstanding the employment of these remedies, chorea has been found a tedious disease; experienced practitioners having admitted that it has continued for many months, nay, for years; terminating only, on some occasions, about the age of puberty.

This confession is not much in favour of the modern practice, or of the doctrine on which it rests. It is melancholy to reflect, that months, and years, the most valuable in respect of after life, should glide on, while an effectual check is given to the improvement of the mind, the cultivation of useful learning, or the acquisition of the necessary arts; with the hazard of permanent fatuity, to a certain extent, or of a grotesque appearance, from the unconquerable remains of irregular motions being imposed on the young sufferers for life. To these certain consequences of protracted chorea, I will add, the danger which attends it; I have no doubt, but that it must have, on some occasions, proved fatal.

In the course of my practice, I have seen above twenty cases of chorea: a greater number than it may have fallen to the lot of many to observe. I cannot say, with Sydenham, that I have succeeded in curing all of these. For several of my patients presented themselves while I yet employed tonic and stimulating medicines; when my practice shared the common fate, and met with disappointment. I am afraid I may even sometimes have done harm, by the indiscriminate use of the cold-bath, a remedy not always suited to the exhausted and irritable state of the subjects of chorea.

I now began to desert a practice in which I had lost confidence, and to consider chorea in a different light, from that in which it had been commonly viewed. I conceived that the debility and spasmodic motions, hitherto so much considered, might not be the leading symptoms

of the disease, but might depend upon previous and increasing derangement of health, as indicated by irregular appetite, and constipation of the bowels.

Under this impression with regard to the erroneous opinions, which I had heretofore entertained concerning the nature of the disease, and the consequent improper practice, which I had employed for the cure of it, I resolved to alter my mode of treatment, in order that I might fulfill those indications which the new, and, as I flattered myself, the more correct view of the disease had suggested.

If my conjectures were well founded, the first and principal object of practice would be to remove the constipated state of the bowels. In pursuance of this object, I began to try the effects of purgative medicines, given regularly in moderate doses.

At first, I confess, I acted with all that caution and diffidence, which the adoption of a line of practice, at variance with that which had been long approved and established, naturally inspires. But experience had convinced me of the safety of exhibiting purgative medicines in typhus fever; I therefore did not think any great risk would ensue from a cautious use of them in the most debilitated state, which chorea might induce. The conjecture proved to be well founded; the success of the practice confirmed the justness of the opinion on which it was formed, and encouraged me to persevere with steadiness, and activity.

The purgatives which I employed in the first instance, were of the weaker kind, and inadequate to the object to be obtained. Stronger ones were found to be necessary to move, and discharge the indurated and fetid feces.

I observed the quantity of feculent matter collected, to

vary in different subjects, and at different periods of the complaint. I could not ascertain this by any previous circumstance. One would think, that, in proportion to the fulness and prominence of the abdomen, and in proportion to the age and vigour of the patient, the accumulation, *ceteris paribus*, would be ; but I do not find that this is so. Perhaps the lengthened duration of the complaint, and the reduced state of the patient, the consequence of this, are attended with the greatest feculent accumulation. I think my observation bears me out in this conjecture, as in the instance of David Anderson, the history of whose case will be found in the Appendix, No. VII. This boy was emaciated and exceedingly puny, and his abdomen was lank ; yet from the fifteenth day of December, when the commencement of his recovery was observable, to the twenty-fifth day of the same month, the quantity of feces discharged was most wonderful, such as I had never seen before. It appeared to me, during the above period, to have nearly equalled in weight, that of the whole body of the extenuated patient.

I have already noticed, that chorea consists of two stages. In the first, while the intestines yet retain their sensibility, and before the accumulation of fecis is great, gentle purgatives, repeated as occasion may require, will readily effect a cure, or rather prevent the full formation of the disease.

In the confirmed stage, more sedulous attention is necessary. Powerful purgatives must be given in successive doses, in such manner that the latter doses may support the effect of the former, till the movement and expulsion of the accumulated matter are effected, when symptoms of returning health appear. Whoever undertakes the cure of chorea by purgative medicines, must be decided, and firm to his purpose. The confidence which he as-

sumes is necessary to carry home, to the friends of the patient, conviction of ultimate success. Their prejudices will otherwise throw insurmountable obstacles in the way. Half measures, in instances of this kind, will prove unsuccessful; and were it not for perseverance in unloading the alimentary canal, the disease would be prolonged, and, recurring, would place the patient in danger, and thus bring into discredit a practice which promises certain safety.

Here, as in all other cases of extreme debility induced by disease, the recovery is at first slow and gradual. A regular appetite for food, a more intelligent eye, and lightened countenance, cheerfulness, and playfulness of temper, increasing aptitude for firmer motions, the restoration of articulation, and of the power of deglutition, a renovation of flesh and strength succeed each other, and being more and more confirmed, are, ere long, followed up by complete recovery.

For some time after these salutary changes take place, the state of the bowels must continue an object of attention. An occasional stimulus from purgatives will be requisite to support their regular action, and to restore their healthy tone, the only security against the recurring accumulation of feces, and of a consequent relapse.

About this time also, remedies possessed of tonic and stimulant powers, may be used with propriety and effect; they restore energy to the torpid bowels, aid the purgative medicines in obviating costiveness, and thus confirm a recovery already advanced. Vegetable bitters, or the preparations of steel, may perhaps be the most useful for accomplishing these ends, I have not felt the necessity of having recourse to medicines of this kind: under a proper regimen of light and nourishing food, and of exercise in the open air, my patients, in general, quickly re-

cover their strength. But many practitioners set a value upon tonic medicines; and the usual routine of practice demands them.

This exhibition of purgative medicines in chorea, is, I apprehend, countenanced by the practice of Sydenham and De Haen. It is probable, that the purgative medicine was the only useful one which Sydenham employed; and that his protracted cures may be attributed to the interruption of the use of it, during the interposition of blood-letting, and of alterant and paregoric medicines.

De Haen, in the eighth chapter of his first volume of the *Ratio Medendi*, narrates a case, in the following words: —“*Novem annorum puellam, cui post variolas morbillosque, primo tussis frequens, deinde sputum purulentum aderat, sputum demum plane cessabat, chorea Sancti Viti prehendit, sinistro potissimum brachio pedeque, ac diversimoda faciei convulsio. Bimestri spatio, adhibita vi electrica, pustulæ copiosæ, eæque turpiter crustosæ, brachium et crus cingunt, interpolatis purgantibus, perfecta salus redivit.*”

By this treatment, which I have endeavoured to recommend, chorea is speedily cured, generally in ten days or a fortnight, from the commencement of the course of purgative medicines. I had lately two patients, Ann Ross, and Elizabeth Webster, under my care, whose cases proved most obstinate; four or five weeks elapsed, before I could pronounce them in the way of recovery. The history of these cases is given in the Appendix, No. VII.

In the structure of the female pelvis, and in the previous duration of chorea, we may find the reason why it admits of a more or less difficult cure. When the disease is protracted, or when it occurs in girls, greater opportu-

nity for the accumulation of feculent matter is afforded, than in more recent cases, or than where it attacks boys. Of course, a longer time, and brisker purgatives will be required to move, and expel the offending mass, in the former, than in the latter instances. This observation is aptly illustrated by the case of Elizabeth Webster, inserted in the Appendix, No. VII. This girl, after a protracted chorea was dismissed cured from the Infirmary, on the eleventh of June 1805, but through neglect, the disease returned, and she again became a patient on the third of February 1806; but the relapse having recently occurred, the cure at this time was completed in ten days.

Since I have employed purgatives in chorea, I have been disappointed in effecting a cure, in one case only.

About three years ago I visited a young girl, who had been the victim of chorea for many weeks. The purgative medicines, which I administered, gave full evidence of a disordered, and loaded state of the intestines. My patient was not under proper management; my advice was followed in an irregular, and desultory manner, and the disease was protracted. After some time she was carried home to a considerable distance, and I understood a quack medicine was given to her with the best effects. To my regret, however, I saw her about a year ago in the same situation in which she had left me, and I then learned, that she had continued in this situation, during the whole of this interval.

During the exhibition of purgative medicines in chorea, practitioners will learn the propriety and necessity of inspecting the alvine evacuations. They are, in this important point, generally careless; the attendants, in sick rooms, are of course, ignorant on the subject, and cannot

give the information necessary for their ascertaining the effect of purgative medicines, or for directing them respecting their dose, and frequency of repetition.

I have said that chorea consists of two stages, a circumstance which should induce those who have the superintendance of children to attend most carefully, at all times, to the state of their bowels. For the timely interposition of purgative medicines will be the best means of averting the accession of chorea, which is so formidable, and which, on some occasions, has been found so obstinate a complaint.

The caprice of children will often thwart us, and oblige us to employ purgatives, not because they are such as we would prefer, but because they are such as will be taken. I have in general used the purgative medicines in chorea, which I had found useful in marasmus.

I have inserted in the Appendix No. VII, the histories of some cases of chorea, which, while they illustrate the practice I have endeavoured to recommend, will, at the same time, shew the manner in which I have conducted it.

CHAP. VII.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION
OF PURGATIVE MEDICINES, IN HYSTERIA.

THE symptoms of hysteria are numerous, and being differently modified in different instances, they give a variety to the disease which is embarrassing to young practitioners.

The most common symptoms of hysteria, and those which are esteemed to be pathognomonic, are acute pain in the forehead, or over either orbit, which is confined to a small spot; shifting pains of the abdomen, flatulence; constipation of the body; sometimes, though rarely, vomiting and purging; acrid and fetid eructations; an irritable and occasionally a despondent state of mind; unquiet sleep, which is frequently disturbed by incubus and frightful dreams.

Those symptoms produce the chronic state of hysteria, and predispose to the excitement of the more violent hysteric affections, of fits or convulsions. These fits sometimes attack suddenly, but are more frequently preceded by other symptoms which give warning of their approach; such as a sense of oppression over the chest, palpitation of the heart, a dry cough, a copious flow of pale coloured

urine; and above all, by the sensation, as if a ball formed, on the lower part of the belly, traversed the abdomen, ascended by the left side, and reached the stomach, and from it the œsophagus and larynx, producing difficult deglutition and sense of suffocation.

After this the patient falls down, and is violently agitated with convulsions of different muscles, particularly those of the abdomen, which is thereby greatly contracted and drawn inwards. This convulsive motion continues for some time, when sleep supervenes. From this sleep, the patient awakes sobbing and sighing, and with a murmuring noise through the abdomen, but most commonly without any recollection of what has passed during the fit. This fit is frequently renewed for a length of time, in the same person, who enjoys tolerable health during the intervals.

Hysteria is more frequent and more severe in women than in men. Hence it has been thought, although erroneously, to be peculiar to females.

The period when it prevails most, is from puberty to the age of thirty-five. Women of a plethoric habit, or of what is called the sanguine temperament, are most commonly exposed to it; and in them it often accompanies the regular flow of the catamenia.

Slight causes readily induce hysteric paroxysms, in persons predisposed to them, such as fatigue, great and sudden evacuations, peculiar odours, and certain objects, which, either from a constitutional or acquired aversion, occasion unpleasant or uneasy sensations. Mental agitations also, from surprize, grief, joy, and other passions, are common exciting causes of hysteria. Here too the medical moralist again appears; but I believe that his

insinuations, equally groundless and indelicate, exist only in his own prurient imagination.

I have felt the necessity of premising this short history of a disease, which is indeed difficult to describe, because I shall refer to it in the subsequent part of this chapter.

Frequent disappointments in curing hysteria have led me to take a full, and I hope an impartial review of the subject. This review has inclined me to doubt the solidity of the opinions which have been entertained respecting hysteria, and the soundness of that uniform practice, which have been so long followed in the treatment of it.

Hysteria, as this name implies, has been conceived to proceed from affections of the uterus. Accordingly suffocation of the womb, and effluvia from corrupted semen and depraved menstrual blood, are, by the suffrage of the ancient, and even of some of the more modern physicians, accounted to be its immediate cause.

Our countryman, Sydenham, who reasoned more than he seems to have been aware of, and often in a manner not very intelligible, *in dissertatione epistolari ad Gulielmum Cole*, speaks thus of hysteria. “Pendent ergo, affectiones istæ, quas in feminis hystericas, in maribus hypochondriacas insignire libet, quantum ego judico, a spirituum animalium ἀταξία unde facto impetu in hanc illamve partem plus quam pro rata densi nimique feruntur, spasmos uti et dolorum excitantes ubi in partes sensu exquisito præditas irruunt, atque organorum, tum ejus in quod se ingerunt, tum istius a quo abscedunt, functiones pervertentes; cum utrumque ab hac tam iniqua partitione, quæ naturæ œconomix penitus adversatur, haud parum detrimenti capiat.

“ Satis itaque jam constat opinor, omnem hunc mor-

bum ad spiritus animales non rite dispositos referri debere; nec a semine aut sanguine menstruo corruptis, quod asserunt nonnulli auctores, et halitus malignos in partes affectas elevantibus, produci; nec a succorum nescio qua perversa depravatione, sive etiam humorum acrium congestione, ut alii volunt; sed ab iis quas modo assignavimus causis."

To have quoted these passages, setting forth Sydenham's doctrine on this subject, is, *face tanti viri*, to refute it. For indeed it is not easy to comprehend what Sydenham understands by the animal spirits; or in what manner they are impelled by rapid motion from one place or organ into another, so as to produce precisely the hysterical convulsion.

When the doctrines of the nervous pathology attracted the notice and admiration of the public, another opinion was formed of this disease.

Dr. Cullen in his first lines of the practice of physic, paragraphs MDXX, MDXXI, MDXXII, MDXXIII, says—"Having thus endeavoured to distinguish hysteria from every other disease, I shall now attempt its peculiar pathology. With respect to this, I think it will, in the first place, be obvious that its paroxysms begin by a convulsive and spasmodic affection of the alimentary canal, which is afterwards communicated to the brain, and to a great part of the nervous system. Although the disease appears to begin in the alimentary canal, yet the connexion which the paroxysms so often have with the menstrual flux, and with the diseases that depend on the state of the genitals, shows, that the physicians have at all times judged rightly in considering this disease as an affection of the uterus and other parts of the genital system."

“ With regard to this, however, I can go no farther. In what manner the uterus, and in particular the ovaria are effected in this disease ; how the affection of these is communicated, with particular circumstances, to the alimentary canal ; or how the affection of this, rising upwards, affects the brain, so as to occasion the particular convulsions which occur in this disease, I cannot pretend to explain.”

“ But although I cannot trace this disease, to its first causes, or explain the whole of the phenomena, I hope that with respect to the general nature of the disease, I may form some general conclusions, which may serve to direct our conduct in the cure of it.”

“ Thus from a consideration of the predisponent and occasional causes, it will, I think, appear, that the chief part of the proximate cause, is a mobility of the system, depending generally upon its plethoric state.”

“ Whether this disease ever arises from a mobility of the system, independant of any pl. thoric state of it, I cannot positively determine ; but in many cases, that have subsisted for some time, it is evident that a sensibility and consequently a mobility, are acquired, which often appear, when neither a general plethora can be supposed to subsist, nor an occasional turgescence to have happened. However, as we have shown above, that a distention of the vessels of the brain seems to occasion epilepsy, and that a turgescence of the blood in the vessels of the lungs seems to produce asthma ; so analogy leads me to suppose, that a turgescence of blood in the uterus, or in other parts of the genital system, may occasion the spasmodic or convulsive motions which appear in hysteria. It will, at the same time, be evident, that this affection of the genitals must especially occur in plethoric habits ; and every

circumstance mentioned in the history of the disease, serves to confirm this opinion, with respect to its proximate cause."

It is not without hesitation, that I oppose any opinions which Dr. Cullen's ingenuity has invented, and which his learning and celebrity have supported. But my observations respecting the influence of the uterine or genitalsey stems in hæmatemesis and chlorosis, and my conclusion from thence, that this influence, if it does exist, is not of that magnitude which is commonly supposed; militate equally against the opinion that hysteria originates in this influence. I cannot, therefore, but consider Dr. Cullen's theory as resting more upon supposition and a consequent train of reasoning, than upon facts and experience; and that it, therefore, now meets less attention, than it has commanded for many years.

There is a coincidence and similarity between the doctrine of Sydenham and that of Dr. Cullen, on the subject of hysteria. At least the *αραξια* or irregular motions of the animal spirits, as proposed by the former, appear to convey the same idea, as the sensibility and mobility of the system, proposed by the latter.

Setting aside, therefore, the antiquated notions of the suffocation of the womb, we may be said to have only one theory of this disease. A theory which has engrossed the attention of the speculative physician, and which has directed the conduct of the practitioner for upwards of a century.

But, although this coincidence may not be perceived or admitted by others; yet whatever difference, whether apparant or real, may exist between the opinions of Sydenham and Dr. Cullen, the practice of both, with some slight variations, is nearly the same Fetid and antispasmodic

medicines, are employed to alleviate the violence and shorten the duration of particular fits ; bloodletting is no excluded from the practice of either in hysteria, but Sydenham is disposed to employ it more freely than Dr. Cullen. I do not perceive that Dr. Cullen any where mentions purgative medicines as proper in hysteria ; Sydenham gives them previous to the exhibition of other medicines for three or four consecutive mornings. Dr. Cullen proposes to remove plethora, by a spare diet and regular exercise. While at the same time, he cautions us, that increased mobility may, on some occasions, proceed from inanition, when a fuller supply of nourishment is indicated.

For the rest, both these learned and justly celebrated men, treat hysteria with astringent stimulant and tonic medicines, in the view of restraining and regulating the irregular motion of the animal spirits, or of obviating the too great sensibility and mobility of the system ; the cure of hysteria by this management, is often difficult, and generally tedious.

Physicians have had correct views with regard to the history and appearance of hysteria. But the peculiarity and violence of the fits, seem to have attracted all their thoughts, and prevented them from bestowing the necessary attention on other circumstances of the disease. For this reason, I premised a history of hysteria which does not differ from other histories, except in the arrangement of the symptoms, by which, those which precede the fit, those which accompany the fit, and those which immediately follow it, are clearly ascertained and distinguished.

From this history the reader will perceive that considerable derangement of the stomach and alimentary canal, is prevalent throughout the whole of the disease. Among

the symptoms which mark the hysteric constitution, shifting pains of the abdomen, flatulence, constipation at one time, at another, vomiting and purging, together with acid and fetid eructations are conspicuous.

The sensation of a ball wandering through the abdomen, and ascending to the stomach, and from thence through the œsophagus to the pharynx, is a prominent symptom among those which immediately precede, and give warning of the approach of the fit.

Convulsive motions of the muscles of the abdomen, which is thereby greatly contracted and drawn inwards, accompany the paroxysm; upon the cesation of which, a murmuring noise throughout the abdomen, is frequently heard.

These symptoms undoubtedly must denote a preternatural affection of the stomach and alimentary canal. In my opinion they afford conclusive evidence, that this affection is primary, and that the other multifarious symptoms of hysteria depend upon it. I have, therefore, thought it reasonable to attend particularly to the state of the stomach and intestines, and to employ in the first place purgative medicines, to remove the constipation of the body, which most commonly prevails in hysteria. I have seldom seen vomiting and purging in cases of pure hysteria; but the presence of these symptoms would not deter me from exhibiting purgatives, which I should conceive to be peculiarly adapted for their removal; as the efficacy of purgatives in removing these symptoms in other circumstances of disease is well known, I was the more disposed to adopt this practice in hysteria, from my experience of its general safety and peculiar utility in other diseases, that are commonly supposed to be of a nervous nature.

I have not been disappointed in my expectations in thus treating hysteria, my success has been equal to my wishes, and the source of much satisfaction to me. Yet my experience is not so complete as to enable me to say to what extent purgatives may be employed in hysteria, exclusively of other medicines. Within certain limits, I accordingly call in the aid of fetid and tonic medicines; but in my estimation, they are merely subsidiary, and, on some occasions, might be altogether overlooked, as they were in the treatment of Sarah McMillan and Isabell Black, whose cases are inserted in the Appendix, No. VIII.

In particular cases, where great anxiety prevails, recourse may be had to wine in moderate quantity, till such time as relief is obtained by purgatives.

I may add by way of caution, that in hysteria, as well as in chorea, chlorosis, and hæmatemesis, the full exhibition of active purgatives is necessary to procure even moderate evacuations from the bowels; and that this exhibition must be continued from day to day, till such time as the feces are natural, or till the disease ceases.

The first purgatives that we use, may seem on some occasions, to aggravate the symptoms; but the practice must not be deserted on this account. The additional irritation which purgatives may give in the first instance, soon passes away; and the perseverance in the use of them, removes that irritation which gave rise to the disease, which of course disappears in proportion, as the bowels are relieved of the oppressive mass of accumulated feces.

There are instances of counterfeited hysteria, when persons of a perverse turn of mind, or who wish to ex-

cite compassion, or solicit charity, often imitate the paroxysm of hysteria so exactly, as to deceive common observers. It is plain, that any remedy used in these cases must fail, so long as the imposter finds it convenient to carry on the deception. The practitioner, therefore, who proposes to adopt the use of purgative medicines in hysteria, ought previously to satisfy himself that the disease really exists; otherwise the failure of promoting a cure, as in feigned cases he must fail, will bring discredit on the practice, which having found useful, I have endeavoured to recommend.

I have subjoined in the Appendix, No. VIII, cases of hysteria which I have treated by purgatives;—to these I refer the reader, who will in them find a detail of my practice, and of my general mode of conducting it.

CHAP. VIII.

ON THE UTILITY OF PURGATIVE MEDICINES IN
TETANUS.

TETANUS literally means a tension or spasm ; and in a medical sense, implies a spasm of the muscular fibres. It affects most commonly the muscles which are subservient to voluntary motion. Tetanus has been described by many writers, from the time of Hippocrates downwards. But notwithstanding the attention which this singular disease has attracted, there have not been any certain means yet discovered, of relieving the misery which it occasions, or of obviating its fatal tendency.

Tetanus often approaches in a gradual manner ;— the first symptoms of the disease, appearing on many occasions, at a period more or less distant from the exposure to the cause which induces it.

On the attack, the patient usually complains of an uneasy sensation and small tenseness about the præcordia ; which is followed by stiffness of the hind neck and about the shoulders, and lassitude ; which make the attempt to move the head difficult and troublesome. The jaws become stiff, and cannot be opened without pain. The patient about this time feels a sudden and painful traction about the cartilago ensiformis, which tends towards the spine, with an aggravation of the above symptoms, and a drawing of the head backwards.

Thus circumstanced, the patient refuses nourishment, as deglutition is painful and excites a return of the spasms. The lower extremities are enfeebled and incapable of affording their usual support ; the pulse is slow and very hard, and the body is constipated.

The traction or spasm under the cartilago ensiformis, or the pain, as it appears to be, of the epigastrium, which is accounted the pathogonomic symptom of tetanus, becomes now more violent, and returns every ten or fifteen minutes, and is instantly succeeded by a stronger retraction of the head, and great rigidity and pain around the neck, which extending in the course of the spine to the lower extremities, these are instantly put to the stretch. The jaws are at this moment locked together, and cannot afterwards be opened so wide as to receive the end of the little finger. The attempt to force them open hurries on the general spasm.

The muscles concerned in deglutition and the pectoral and deltoid muscles are most violently contracted. The shoulders are pushed forward ; the arms are stretched out, or are drawn across the body ; but the muscles moving the wrists and fingers are not affected with spasm. The cheeks are often drawn towards the ears, and the teeth are exposed as in the spasmus cynicus.

This paroxysm ceases in a few minutes, and leaves the patient in a comparatively relaxed and easy state. He breathes quick for some minutes as if he had been excessively exercised. The face is sometimes pale during the intervals of the spasm, but is oftener flushed, and is expressive of the most melancholy distress. Fluid passes with difficulty into the stomach, the attempt to swallow frequently induces the spasm, when the fluid is returned with some force through the nose.

Blood drawn at this time, appears to be of a dissolved texture ; the pulse varies in respect of quickness, fulness, and hardness ; the tongue is not loaded, the urine is high coloured ; and the body continues so constipated, that the alvine evacuation is procured with difficulty.

The disease is now advanced, and reduces the patient to the most distressful and calamitous state. He is as it were in a continual rack of torture ; as the spasm, hardly suspended for the space of a minute, is more severe on each attack and of longer duration. The contraction of the muscles is more general ; and according as one set of muscles is more strongly contracted than their antagonists, the body is forced into different and highly painful postures. The belly feels to be hard, it is flat and drawn inwards. The abdominal muscles do not yield on pressure, and do not seem to favour the descent of the diaphragm, in inspiration. The body is often projected with violence in different directions, and the patient is only secured from injury by the care of the attendants. *Genituræ jactura inopinata, sæpe sequitur tentiginem invitam.* The tongue is frequently darted out of the mouth and miserably torn between the teeth.

The countenance is much contracted ; copious sweat flows ; the pulse becomes quick and irregular ; respiration is variable, sometimes it is hurried and laborious, and again it is less so and natural. Articulation is indistinct ; the sound of the voice is changed, it is grating and horrible to the ears. The heart throbs violently, and a palpitating motion is felt over the epigastric region. The eyes are watery and languid ; the jaws are so fast locked, that drink or nourishment, even if they could be swallowed, cannot be introduced.

During this distressful progress, the comfort of sleep, may well be imagined, is denied to the sufferer ; what he may enjoy is short, interrupted and unrefreshing.

In this state, delirium and a mortal anxiety ensue. A continued and severe spasm often finishes the tragedy; but oftener a general convulsion brings life to a period. The patients, for the most part, are completely relaxed and sensible just before death.

Tetanus is a rapid disease; its fatal termination generally takes place on the fourth or fifth day from the first attack. In some rare instances, when the disease is protracted for a few days more, a patient will accidentally survive; and with care and attention make a slow recovery; and in the course of some months, feel himself restored to a certain share of comfort and happiness.

Tetanus is a disease of every country, but it is much more frequent in warm than in temperate climates; and in the warmer than in the cooler seasons of the year. People of all ages, and of both sexes are obnoxious to tetanus; but it is said to be more prevalent in those of middle age, than in the old and the young; in males than in females; and in robust and vigorous people, than in the weak and the infirm.

Tetanus is known under different appellations, according as particular muscles are affected; or according as one set of muscles, under a stronger spasm than their antagonists, give a particular curvature or posture to the body. Thus trismus, emprostotonos, and opisthotonos, denominate varieties, which are now recognised as constituting the generic disease called tetanus.

I have taken this account of tetanus from the histories which have been given of it, by Dr. Hillary, in his observations on the epidemic diseases in the Island of Barbadoes; and by Dr. Lionel Chalmers, in a communication printed in the first volume of the London Medical Observations and Enquiries.

Authors mention a great many occasional causes of tetanus; passions of the mind; interrupted menstruation; too copious evacuations, particularly such as happen in cholera morbus; retrocedent gout and exanthemata; putrid fevers; and worms.

Hysteria, hypochondriasis and chorea have also, in the excess of their spasmodic affection, on some occasions, emulated the milder symptoms of tetanus, while at the same time they have retained their own generic character.

Tetanus, induced by the above mentioned causes, must be considered as a symptomatic disease; and the cure must be conducted according to the indications which apply to the particular case.

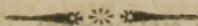
I give a case of what I consider to be tetannic affection in the hysteria, in Appendix, No. IX.

I observed tetannic spasms in two cases of chorea, which I give in the Appendix No. VII. The one is the case of David Anderson, the other of Ann Ross. But I did not on this account change my opinion of the nature of their complaint; I proceeded to treat both patients as labouring under chorea.

Idiopathic tetanus is said to be owing, in the first place, to exposure to the vicissitudes of the atmosphere, as varying from hot to cold, and from dry to moist, when the body has been at the same time overheated by exercise or by the warmth of the climate or season.

In the second place, wounds of the soft parts, whether severe or slight, are mentioned as occasional causes of tetanus;—which sometimes supervenes soon after the accident, but oftener at a distant period.

Thirdly, tetanus arises in children, from the retention of the meconium, or from the presence of other matters conveyed too early into the stomach under the form of nourishment; in this case it is known by the name of *trismus nascentium*.



I have remarked that in some of the diseases of which I have treated, physicians have disregarded the general history of diseases, and have confined their attention too much to the consideration of a single symptom; and have thereby committed mistakes both in theory and practice. In my apprehension tetanus affords another instance of the bad effects which arise from a limited or perhaps erroneous view of a disease.

From the days of Hippocrates to the present time, the agonizing spasms, the prominent symptom of tetanus, have arrested the notice of every one. To resolve the spasm and to cure the disease, seem to have been conceived to be one and the same thing. Accordingly, opium, musk, warm-bathing, cold-bathing, and mercury, the most powerful of the antispasmodic remedies, have been chiefly employed in tetanus. They have been recommended by the earlier writers; and their praises have been re-echoed by succeeding practitioners. But what claim have these medicines to be extolled; have they mitigated the severity of tetanus, or obviated its fatal tendency? The records of physic bear a sad testimony in the negative.

It is unnecessary to enter upon a minute detail of the specious practice by antispasmodics in tetanus; such a detail might, indeed, afford an opportunity of shewing that some of them may be productive of mischievous ef-

fects. Dr. Hillary has observed, that instantaneous death has followed warm bathing in tetanus.—And I greatly suspect, that the after consequence of the high and frequently repeated doses of opium which many authors recommend, and which neither alleviate pain nor induce sleep, must be injurious. But such discussions as these, might be thought to be invidious, while they would lead to no useful inference.

However just the foregoing observations may be, I should yet have been sorry to have advanced any thing to shake the tottering fabric of medical practice in tetanus, unless I thought it were in my power to substitute a practice more efficacious, originating in other views of the disease. These, I apprehend, will warrant the expectation of considerable benefit from the full and free exhibition of purgative medicines. This opinion is supported by the following considerations :

In the first place, it appears from the history of tetanus, that it often approaches in a gradual manner ; hence it is probable, that the attack is generally preceded by symptoms of bad health, although these may not be always observed. We also learn from the history, that an uneasy sensation or tenseness about the præcordia is among the first symptoms, and is at the same time a permanent one of tetanus ; and that as this is aggravated, all the other spasms are increased in the frequency and severity of their attack. The history farther shews that the body is obstinately constipated throughout the whole of the disease.

These circumstances which present themselves with great uniformity, make it exceedingly probable, that the functions of the stomach and intestines are materially deranged, previous to the attack, and during the prevalence of tetanus ; and point out the propriety of using purgative medicines in the treatment of it.

In the second place, the influence of exposure to long continued heat, on the biliary system is ascertained; and it is well known that the diseases thence arising, such as bilious or yellow fever, cholera, and dysentery are accompanied with great stomachic distress, as marked by sickness, vomiting and thirst. It is probable, therefore, that tetanus appearing under similar circumstances of exposure to heat, must also be accompanied with similar derangement of the biliary system, and of the stomach and intestines, which will excite a predisposition to the disease.

In the third place, I have proved that chorea and hysteria, both of them convulsive or spasmodic diseases, are accompanied with disorders of the stomach and bowels, and with costiveness; and that these diseases have, in a great number of instances, been relieved, if not cured, by a due perseverance in the use of purgatives. I infer, therefore, that tetanus, a spasmodic disease, and accompanied with costiveness, may also be relieved, if not cured, by a proper administration of the same remedies.

In the fourth place, I adduce, from the practice of others, presumptive evidence of the utility of giving purgative medicines in tetanus. These medicines have not been altogether excluded from medical practice in this disease; but they have been exhibited with a secondary view only; while little or no attention has been paid to their effect; for in some few instances, they appear to have been useful, without their good effects having been so much as suspected or acknowledged.

Dr. Wright revived the practice of cold bathing in tetanus, about forty years ago. In the sixth volume of the London Medical Observations and Enquiries, he gives an account of six cases successfully treated, in Jamaica, by the affusion of cold water.

In the two first patients, a natural stool was voided soon after the affusion of the water; a frequent consequence of similar applications to the surface of the body. The third patient had a cooling purge before the cold water was used; and attention had been paid to the state of the belly of the fourth patient, previous to the affusion of the water. No notice is taken of the state of the bowels of the fifth and sixth patients. Thus, it is probable, that the salutary termination of four of these cases, adduced in proof of the utility of cold bathing in tetanus, was in a great measure owing to the open state of the body.

Dr. Thomas Cochrane practised medicine in the Island of Nevis upwards of thirty years ago. A communication from him, "On the use of cold-bathing in the cure of tetanus," is printed in the third volume of the Edinburgh Medical and Philosophical Commentaries. The narrative bears, that the subject of the experiment opened his jaws pretty freely, and walked tolerably upright in a few days, from the first affusion of the cold water. It also bears, that on the first attack, a dose of castor oil procured several stools; and that glysters and gentle laxatives were frequently given. I am therefore led to a conclusion which did not occur to Dr. Cochrane, that the cure effected in this case, was owing, in a great measure, to the preservation of the open state of the body throughout the course of the disease.

Dr. Monro gives a communication, which is printed in the third volume of the Edinburgh Literary Essays and Observations, in illustration "of the usefulness of mercury in convulsive disorders." The case to which the Doctor's observations refer, is of tetanus, supposed to have proceeded from a wound.

The mercury was not used till three weeks after the attack of the spasm; when, from its protracted state,

the disease may have been supposed to have yielded, and the patient to have been in the way of recovery. The spasms appear to have remitted in about six and thirty hours from the first application of the mercurial ointment, and before it could have made any material impression on the habit. On the other hand, several purgatives were given in the beginning of the disease, occasional glysters were thrown up during its course, and laxative ptisans were exhibited in its decline. To the former, therefore, while the effects of the mercury were hardly to be perceived, I am inclined to assign the protraction of the disease in the first instance, and to the latter its happy termination.

In the fifth place, the utility of purgatives in the treatment of tetanus, appears to be established by the direct and useful employment of them in the disease. Dr. Hillary and Dr. Lionel Chalmers have clearly shown, that in *trismus nascentium*, purgative medicines, if exhibited early, dislodge a great quantity of unnatural matter that seems to have been collected in the stomach and intestines; arrest the formation and progress of the disease, which, to the adoption of this practice, had, like tetanus, in other instances, proved too generally fatal.

Lastly, I adduce proofs from my own practice, of the good effects of purgative medicines, in what appeared to me to have been instances of incipient tetanus; these proofs, transcribed from the records of the Royal Infirmary, are inserted in No. IX. of the Appendix.

It will not be easy to account, upon the principle of derangement of the stomach and intestines inducing tetanus, for its appearing as the consequence of wounds. But without entering upon any argument on this subject, I will just observe, that when the attack of tetanus is long posterior to the accident, it is probable that derangement

of the stomach, also subsequent to the accident, may be the cause of this disease; and that when tetanus follows the injury immediately, and when excision, scarification and cauterizing of the wounded part have failed of procuring relief, and they almost always fail; I would in both instances resort to the use of purgatives, rather than to that of antispasmodic medicines which have so often disappointed our hopes. If I am not mistaken, in the view which I have taken of the communication from Dr. Monro, it affords an instance of the utility of purgatives in tetanus from wounds.

Such are the facts, and such the reasoning, on which I rest the probable utility of purgative medicines in tetanus. Every one will judge of, and appreciate them for himself.

It would have been more agreeable to me, however, to have withheld my sentiments on this subject, till such time as I had brought them to the test of experience. But living in the 55th degree of northern latitude, and advancing in life, I have no prospect of meeting with proper opportunities of doing so. And although these speculations may not be confirmed by the experience of others; yet I trust they will at least display a sincere desire, on my part, to promote and extend the usefulness of practical medicine.

CHAP. IX.

OBSERVATIONS ON THE UTILITY AND ADMINISTRATION
OF PURGATIVE MEDICINES IN SOME CHRONIC DIS-
EASES.

I HAVE not ascertained in how many various diseases purgative medicines may be employed with advantage, but I believe the range of their utility is greater than is commonly imagined.

I formerly remarked, that in mature age, and in the decline of life, morbid symptoms which are attributed to previous irregularities, to idiosyncrasy, to hereditary disposition to disease, and to approaching old age, frequently arise from constipation of the bowels, or are intimately connected with it. These symptoms generally constitute chronic diseases, which are known under different names, and for the cure of which, the use of mineral waters is frequently recommended.

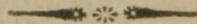
In the prosecution of this advice, the necessary change of scene and of air that takes place, the exercise of the body, the abstraction of the mind from the cares attendant on business, the interruption of an uniform train of thought and attention, and the escape, on some occasions, from ennui, are circumstances, which doubtless,

co-operate with the beneficial effects of the mineral waters.

These waters appear to be useful in several diseases, nearly in proportion to their purgative quality; by means of which, regularity of the obstructed bowels is restored, and a competent share of health is established.

I have been disposed to think, that people, in similar circumstances of disease, but whom business, or pecuniary considerations detain at home, reap benefit from purgative medicines, nearly equal to that which purgative mineral waters impart. In confirmation of this opinion, I give a few cases from the records of the Royal Infirmary; they will be found in the tenth number of the Appendix.

In conducting the cure of diseases of this description, in aid of purgative medicines, I have experienced the utility of the warm bath on some occasions, and of mercury on others. But I am not prepared to give my sentiments at large on this subject; my avocations do not permit me to arrange them so as they might meet the public eye.



I have thus endeavoured to accomplish what I proposed, by showing that purgative medicines may be used more freely than has been commonly imagined; and used, not only with safety, but with evident and decided advantage.

Here I must again solicit the reader's attention to two circumstances of great importance, in the treatment of diseases, by the use of purgative medicines. The first is, the regular and accurate examination of every alvine evacuation. The second is, the steady exhibition of the

purgative medicine, so as to procure daily its full effect, during the continuance of the disease for which it is given.

By the inspection, we ascertain the nature of the alvine discharge; a knowledge of which, together with a few other circumstances, enables us to form a probable conjecture, with regard to the duration of the disease, regulates the strength of each dose of the purgative, and determines the frequency of the repetition of it. Without this inspection, we will be constantly deceived, through the ignorance or inattention of our patients, or of their attendants.

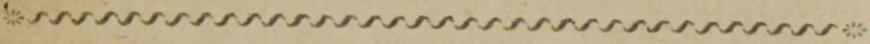
By the second circumstance, the steady exhibition of the purgative medicines, we ensure the success of the practice, in the diseases under consideration. The puny and debilitated state of the sufferer may, on some occasions, excite alarm even in the breast of the practitioner; and the caprice of his patient, and the whims of relatives, may throw obstacles in his way. But these he must disregard; for unless he can suppress his own improper feelings, and overcome the unreasonable objections of others, he had better not adopt measures, which, to prove successful, must be conducted with decision and firmness. A contrary conduct will not avail; but, on the other hand, it will assuredly terminate in the vexation of the practitioner, the disappointment of the patient and relatives, and in the discredit of that practice, which, from a conviction of its utility, it has been my wish and study to recommend.



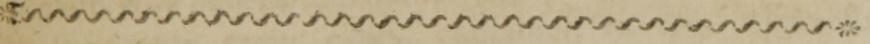
If some of the diseases of which I have treated be cured almost solely by the operation of purgatives; and if this

cure be effected more or less speedily, in proportion to the length of time, that constipation, and the changed nature of the feces have subsisted; I am persuaded, that, by preserving at all times the regular alvine evacuation, we will prevent the formation of those diseases altogether. If these expectations be not too sanguine, it is likely, that, by these means, the marasmus and hæmatemesis of which I have spoken, and chorea, and chlorosis, will rarely, if ever, appear. In my opinion, therefore, it would be a matter of public utility, to have these observations diffused widely among all ranks and descriptions of people, through the medium of their medical advisers; who will recollect, that their paramount duty is, to prevent diseases; and, if that object be unattainable, their next duty is, to remove unavoidable pain and sickness.

To conclude, the reader must have observed the useful effects of purgative medicines, in diseases apparently different, and incident to people at various periods of life. The facts are undeniable, and serve to prove the extent and importance of the subject; but of these I do not feel it to be incumbent on me to give any explanation at present, as such an attempt seems to be premature. I am satisfied to have established certain leading facts, and to have opened views, which, if properly prosecuted, must give an opportunity to collect many more, and to extend our knowledge respecting the operation of purgative medicines.



APPENDIX.



APPENDIX,

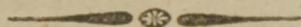
No. I.

THE fluctuating state of the nomenclature of the materia medica, and of pharmaceutical preparations, will explain why several old names and titles of both, are found in the more early cases, contained in this Appendix. And indeed, such occasionally appear in more recent cases; the force of habit, and the dread of committing mistakes, while my attention is occupied by the variety of hospital business, have occasioned this deviation from the punctilious formality of prescription.

On these accounts, and consulting the accommodation of the reader, I insert in this number of the Appendix, tables of reference, from the older to the newer, and from the newer to the older names, of such medicines, as are mentioned in the following cases.

TABULAE,

QUÆ DESIGNANT NOMENCLATURAM NOVAM MEDICAMINUM, QUÆ REPERIUNTUR IN HOCCE LIBELLO.



Tabula prima exponit medicaminum titulos priores et posteriores.

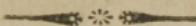


TITULI PRIORES.	TITULI POSTERIORES.
Alkali fixum vegetabile purificatum - - -	} Carbonas potassæ.
Ammonia preparata - -	
Antimonium tartarisatum - - -	Tartris antimonii.
Asafœtida - - -	Gummi resina ferulæ assæfætidæ.
Bolus jalapæ cum mercurio	Bolus jalapæ compositus.
Calomelas - - -	Submurias hydrargyri
Chrystalli tartari - - -	Supertartris potassæ.
Cornu cervi - - -	Carbonas ammoniæ.
Cremor tartari - - -	Supertartris potassæ.
Extractum catharticum	
Extractum colocynthidis compositum - - -	Pilulæ aloes cum colocynthide
Glycirrhiza - - -	Glycirrhiza glabra.
Hydrargyrus precipitatus cinereus - - -	Oxydum hydrargyri cinereum.
Jalapa - - -	Convolvulus Jalapa.
Laudanum - - -	Tinctura opii.
Limon - - -	Citrus medica.
Linum - - -	Linum usitatissimum
Lixiva purificata - - -	Carbonas potassæ

Lixivium causticum	-	Aqua potassæ.
Magnesia alba	-	Carbonas magnesiæ.
Magnesia usta	-	Magnesia.
Magnesia vitriolata	-	Sulphas magnesiæ.
Mercurius cinerus	-	Oxydum hydrargyri cinere- um
Mercurius dulcis	-	Submuriæ hydrargyri.
Pilulæ stomachicæ	-	Pillulæ rhei compositæ.
Pimenta	-	Myrtus pimenta.
Potio cretacea	-	Potio carbonatis calcis.
Sal catharticus amarus	-	Sulphas magnesiæ.
Sal Glauberi	-	Sulphas sodæ.
Sal rupellensis	-	Tartris sodæ et potassæ.
Senna	-	Cassia senna.
Soda phosphorata	-	Phosphas sodæ.
Soda tartarizata	-	Tartris sodæ et potassæ.
Soda vitriolata	-	Sulphas sodæ.
Spiritus Mindereri	-	Aqua acetitis ammoniæ.
Squamæ ferri purificatæ	-	} Oxidum ferri nigrum purifi- catum.
		} Tartris antimoni.
Tartarus emeticus	-	Tartris antimoni.
Tartarum vitriolatum	-	Sulphas potassæ.
Tinctura jalapæ	-	Tinctura convolvuli jalapæ.
Tinctura thebaica	-	Tinctura opii.

TABULA SECUNDA,

EXPONIT MEDICAMINUM TITULOS POSTERIORES, ET
PRIORES.



TITULI POSTERIORES.	TITULI PRIORES.
Aqua acetitis ammoniæ	Spiritus Mindereri.
Aqua potassæ -	Lixivium causticum.
Bolus jalapæ compositus	Bolus jalapæ, cum mercurio.
Carbonas ammoniæ -	Ammonia preparata.
Carbonas magnesiæ -	Magnesia alba.
Carbonas potassæ -	{ Lixiva purificata.
	{ Alkali fixum vegetabile pu-
	{ rificatum.
Cassia senna -	Senna.
Citrus medica -	Limon.
Convolvulus jalapa -	Jalapa.
Glycirrhiza glabra -	Glycirrhiza.
Gummi resina ferulæ as- } sæfætidæ -	{ Assafætida.
Laudanum - -	Tinctura opii
Linum usitatissimum	Linum.
Magnesia - -	Magnesia usta.
Myrtus pimenta -	Pimenta.
Oxydum ferri nigrum pu- } rificatum	{ Squamæ ferri purificatæ.
Oxydum hydrargyri cine- } rerum. - - -	{ Mercurius cinereus.
	{ Hydrargyrus præcipitatus ci- nereus.
Phosphas sodæ -	Soda phosphorata.
Pilulæ aloes cum colocyn- } thide - - -	{ Extractum catharticum.
	{ Extractum colocynthidis compositum.
Pilulæ rhei compositæ	Pilulæ stomachicæ.
Potio carbonatis calcis	Potio cretacea.
Submurias hydrargyri	Calomelas, mercurius dulcis.

Sulphas magnesiæ	-	Sal catharticus amarus.
Sulphas potassæ		Tartarum vitriolatum.
Sulphas sodæ	-	{ Sal Glauberi.
		{ Soda vitriolata.
Supertartris potassæ	-	{ Crystalli tartari.
		{ Cremor tartari.
Tartris antimonii	-	{ Antimonium tartarisatum.
		{ Tartarus emeticus.
Tartris sodæ et potassæ		{ Sal rupellensis.
		{ Soda tartarisata.
Tinctura convolvuli jalapæ		Tinctura jalapæ.
Tinctura opii	- -	{ Laudanum.
		{ in ctura thebaica.

TABLE

EXPLAINING THE FORMULÆ OF THE COMPOUND MEDICINES IN THIS WORK AND WHICH ARE PECULIAR TO THE PHARMACOPEIA OF THE ROYAL INFIRMARY OF EDINBURGH.

BOLUS Jalapæ Compositus.

Compound Bolus of Jalap.

Take of Jalap in powder fifteen grains,
Calomei five grains,
Conserve of Roses q. s.

DECOCTUM Furfuris.

Decoction of Bran.

Take of Bran two ounces.
Spring or River Water twelve pounds,
Boil to nine pounds.

ENEMA Domesticum.

Common Enema.

Take of common salt *Mariat Soda*, half an ounce,
Rape seed oil an ounce,
Warm water a pound. Mix.

ENEMA Fœtidum.

Fœtid Enema.

Take of assa fætida two drachms.
warm water, ten ounces. dissolve,

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ENEMA Purgans.

Purging Enema.

Take of the leaves of Senna, three drachms,
 Sulphate of soda, an ounce,
 Boiling water, a pound,
 Infuse and strain.

HAUSTUS Anodynus.

Anodyne Draught.

Take of Opium twenty five drops,
 Spring water an ounce,
 Simple syrup two drachms. Mix.

HAUSTUS ex oleo Ricini.

Draught of Castor Oil.

Take of Castor Oil half an ounce,
 Distilled water an ounce,
 Spirit of pimento a drachm,
 Water of pot ash twenty drops. Mix.

HAUSTUS salinus effervescens.

Saline effervescing draught.

Take of purified carbonate of potash four scruples,
 Spring water four ounces. Dissolve, and
 when the feces shall have subsided, strain.

Take of lemon juice two ounces,
 Simple syrup,
 Spring water of each an ounce. Mix.

An ounce of each of the mixtures to be given for a
 dose ; the solution of the carbonate of potass
 being first taken, the mixture of Lemon juice
 is to be immediately given.

INFUSUM cassia sennæ.

Infusion of Senna.

Take of the leaves of senna an ounce an half,
 Coriander seeds bruised, an ounce and half.
 Supertartrite of potass two drachms,
 Spring water a pound.

Dissolved the supertartrite of potass in boiling water ;
 then pour the boiling liquors on the senna and
 the seeds ; macerate for an hour in an open
 vessel, and when cool strain.

INFUSUM lini usitatissimi.

Infusion of Flaxseed.

Take of flaxseed two ounces,
 Liquorice root half an ounce,
 Boiling water four pounds.
 Infuse by the fire for some hours, and strain.

MISTURA corticis Peruvianæ aromatica.

Aromatic mixture of peruvian bark.

Take of peruvian bark in powder half an ounce,
 Mucilage of gum arabic, two ounces, rub to-
 gether and add gradually spring water five
 ounces,
 Tincture of cassia *lignea*, an ounce and half.
 Mix.

MISTURA diaphoretica antimonialis.

Diaphoretic antimonial mixture.

Take of spring water five ounces and half.
 Refined sugar a drachm and half.
 Wine of tartrite of antimony two drachms.
 Tincture of opium thirty drops. Mix.

MISTURA diaphoretica salina.

Diaphoretic Saline Mixture.

Take of spring water four ounces,
 Refined sugar three drachms,
 Prepared carbonate of ammonia ten grains,
 Dissolve and add
 Water of acetite of ammonia three ounces,
 Spirit of pimento two drachms. Mix.

MISTURA mucilaginoso.

Mucilaginous Mixture.

Take of decoction of marsh mallows four ounces.
 Simple syrup half an ounce. Mix.

MISTURA salina ammoniata.

Saline ammoniated mixture.

Take of prepared carbonat of ammonia half a drachm.
 Juice of limes or lemons two scruples.
 Cinnamon water three ounces.
 Refined loaf sugar half an ounce. Mix.

POTUS acidus vegetabilis.

Vegetable acid drink.

Take of decoction of bran two pounds.
 Supertartrite of potash four scruples,
 Simple syrup one ounce. Mix.

SOLUTIO gummi resinæ ferulæ assæ foetidæ.

Solution of assa foetida.

Take of assa foetida four drachms,
 Boiling water twenty four ounces, dissolve.

APPENDIX,

No. II.

CASES OF FEVER.

*Royal Infirmary, Aug. 21st 1796.**JOHN DENHAM, Ætatis 11.*

COMPLAINS much of headach—vertigo—general uneasiness and sickness.

Pulse 120—skin very hot—tongue loaded—much thirst—belly rather slow—no appetite—indifferent nights.

Complaints began on the 18th current.

He had an emetic on the 19th, with some temporary relief.

Let the common Enema be injected.

Aug. 22d. One stool—restless during night—skin dry, and of a pungent heat—tongue loaded—pulse about 120, and full—abdomen feels tense, and is painful.

Take of Calomel,

Powdered Jalap,

Loaf Sugar, of each three grains.

Mix well in a powder, to be taken immediately.

Toast and water for drink.

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August 23d. A bad night, with delirium—skin continues hot—tongue more loaded—pulse towards 120, less full—much thirst—two scanty stools.

Let ten ounces of the common Enema, be injected as soon as possible,

Take of the leaves of senna, one drachm,

Extract of liquorice, half a drachm,

Boiling water, eight ounces,

Make an infusion to be taken at two doses.

24th. A better night, with less delirium—skin less pungently hot—pulse about 120, and soft—tongue less loaded, and moist—complains of headach—considerable thirst—a copious stool from the injection—another since taking the physic—belly seems somewhat distended; he complains on its being pressed.

Let the common enema be repeated in the evening, and let him have a draught with fifteen drops of the thebaic tincture.

25th. Easy during the first part of the night—restless with delirium since morning—belly more distended, and pained on pressure—tongue more loaded and parched—a loose feculent stool after the injection—a similar one since morning, which, as well as the urine, has been voided without notice—pulse about 120, of middling strength—skin moderately cool.

Take of water, four ounces,

Calcined magnesia, one drachm,

Sugar, half a drachm,

Form a mixture, of which half an ounce is to be taken every hour.

Let the anodyne draught be repeated in the evening.

26th. Three stools since yesterday—the first of a natural appearance, the two last watery and greenish

—a lumbricus has been voided—fulness and pain of abdomen much abated—skin cool—tongue clean—pulse about 90, feeble—mixture used—a good night.

Let the mixture with magnesia be repeated, as also the draught in the evening.

August 27th. Two loose and green coloured stools voided in bed since yesterday—fulness of abdomen gone—no complaint on pressure—tongue clean—pulse about 80, tolerably firm—skin cool—sensible to the stimulus of urine—a good night—appetite returning.

Let the draught, and the mixture with magnesia be continued.

28th. Is at present asleep—he has had a good night. Two stools not passed in bed—some food taken this morning.

Let the draught and mixture be continued.

29th. No stool—a good night—now asleep—appetite improving.

Let the mixture of magnesia be continued.

Let the anodyne draught be omitted.

Let him have a pound of beef broth every day.

31st. Another lumbricus, of a large size, voided since yesterday—belly regular—pulse about 80 and soft—tongue clean—appetite good—an easy night.

Let the magnesia alba be continued.

Sept. 10th. Gradual convalescence.

Dismissed cured.

Royal Infirmary, Aug. 31st, 1796.

JAMES M'KECHNY, Ætatis 20,

Complains of headach, pain in his back, general uneasiness and sickness.

Has at times a slight cough, but no particular uneasiness about his breast.

Belly regular—considerable thirst—tongue white—pulse 110, pretty full—skin hot—tolerable nights.

Complaints began nine or ten days ago, and have been frequently attended with shivering.

Has used no medicines.

Sept. 1st. Let him take of the compound powder of Jalap half a drachm.

Let him have the bran decoction for drink.

——— 2d. Headach abated—cough and thirst continue—pulse about 100—an indifferent night—as yet no stool.

Let the compound powder of Jalap be repeated immediately,

Let him have the common enema, in the evening if necessary, and

The anodyne draught at bed time.

Sept. 5th. Free passage of belly previous to the injection—headach and cough gone—pulse calm—appetite returning.

——— 6th. Convalescent.

Full diet.

——— 10th. Dismissed cured.

Royal Infirmary, Sept. 29th. 1796.

ROBERT GRANT, *Ætatis* 21.

Complains of headach—vertigo—nausea—chilly fits, succeeded by heat and sweating, great uneasiness and oppression, much thirst, and loss of appetite.

Pulse 96—tongue very foul—skin at present moist—belly regular—sleeps indifferently—on the 19th after exposure to cold, while on guard in the night time, was seized with headach, coldness, shivering, and prostration of strength; he has continued daily worse since that time, although he took an emetic on the 20th.

Sept. 30th. Febrile symptoms continue—pulse about 90, somewhat full—tongue pretty clean and moist—a stool in the course of yesterday.

Take of Jalap, in powder ten grains

Calomel three grains. Mix into a powder to be taken immediately.

The vegetable acid drink to be taken *ad libitum*.

October 1st. Two copious stools, after an injection in the evening—febrile symptoms much abated—skin moist—pulse calm.

October 2d. Convalescent.

12th. Dismissed cured.

*Royal Infirmary, Sept. 5th. 1796.**JONATHAN GREEN, AEtatis 22.*

Complains of headach, pain of back, general uneasiness, and sickness.

Pulse 96—skin cool—tongue white—thirst natural—belly rather loose—appetite bad—urine high coloured—sleeps ill.

Complaints began yesterday, with shivering, followed by increased heat and sweating—attributes them to cold and wet, being exposed to the rain, for a considerable time on Saturday last 3d current.

Has used no medicines.

Sept. 6th. Let him have immediately

Of ipecacuanha wine one ounce for an emetic.

And to morrow morning

Compound powder of Jalap half a drachm.

——— 7th. Full vomiting—febrile symptoms abated—pulse calm—three stools.

Full diet.

——— 10th. Aggravation of headach, with feebleness and languor—pulse about 120—belly slow.

Let him have immediately, of the compound powder of jalap, two scruples.

——— 11th. As yet no stool—headach continues—pulse about 100, rather feeble.

Let him have in the evening,

The common enema, and should it not operate fully, of the compound powder of jalap one drachm tomorrow morning.

Sept. 12th. One stool by the injection—four by the physic this morning—headach relieved, and countenance lightened.

—— 13th. Frequent scanty stools, since yesterday, with gripes and tenesmus—much thirst—tongue white—pulse about 100.

Take of tartrite of soda six drachms,

Water twelve ounces.

Make a solution, to be taken as soon as possible at two doses.

Let him have the anodyne draught in the evening.

Toast and water for drink.

—— 14th. Gripes and purging gone—tongue white, rather loaded—pulse about 90.

Let the solution of tartrite of soda be repeated tomorrow morning.

—— 16th. Convalescent.

Fuli diet.

—— 19th. Slight headach at times—belly open—pulse about 90.

Let him have of the cretaceous mixture one ounce thrice a day.

—— 21st. Belly regular—slight headach continues.

Let him take of the powder of the peruvian bark half a drachm four times a day.

Omit the cretaceous mixture.

—— 26th. Headach gone—belly regular.

Dismissed cured.

Royal Infirmary, April 19th. 1798.

DONALD WATSON, Ætatis 23.

Complains of severe pain in his head, with general soreness—pulse about 90—tongue white—thirst considerable appetite impaired—no stool since the 16th instant, on which day his complaints began with shivering.

Take of Calomel five grains,
Jalap in powder twelve grains,
Mix into a powder to be taken immediately.

April 20th. Two stools—tongue loaded—pulse towards 108, and full—thirst moderate—a tolerable night, and still disposed to sleep.

Let the powder of Calomel and Jalap be repeated tomorrow morning.

———21st. Another stool in the evening—none since the exhibition of the powder—headach continues—pulse about 90, and soft—tongue still loaded.

Let him have the common Enema in the evening, if necessary.

———22d. Three scanty stools in the course of yesterday—headach relieved—tongue less loaded—skin cool and moist—pulse calm—a good night.

Let him have tomorrow morning of the Compound Powder of Jalap one drachm.

April 23d. A good night—several stools—tongue clean—pulse calm.

———27 Convalescent. Full diet.

Dismissed cured.

Royal Infirmary, April 20th. 1798.

JAMES DENNET, Ætatis 12.

Complains of pain in his head, and in his belly—of vertigo—great sickness, and occasional vomiting—pulse about 100—tongue white—considerable thirst—appetite impaired—belly bound. These symptoms commenced with shivering on the 16th, and he had been exposed to the contagion of fever.

April 21st. A natural stool—no recurrence of vomiting—headach and sickness continue—pulse about 120—skin hot.

Let him have, of the compound powder of
Jalap, a scruple. and,

A draught with fifteen drops of the thebaic tincture at bed time.

——— 22nd. Headach and sickness relieved—tongue clean and moist—pulse quick and feeble—two stools previous to giving the powder, and two since—a good night.

Let him have of the diaphoretic saline mixture one ounce every three hours.

let the draught at bed-time be repeated.

——— 23d. A good night—still disposed to sleep—free of complaint.

Let the draught be omitted.

April 24th Gripes in the course of yesterday—two stools since morning, fifteen grains of compound powder of jalap being given—pulse quick—skin warm—tongue white—still drowsy—gripes continue.

Let him have of ipecacuanha wine six drachms for an emetic.

——— 25th. Two dark coloured stools—no vomiting—gripes gone—a quiet night.

——— 30th. Convalescent. Full diet.

May 11th. Dismissed cured.

Royal Infirmary, May 17th. 1798.

JAMES GRANT, Ætatis 18.

Complains of great pain in the umbilical and epigastric regions; of severe headach and much sickness, with general uneasiness and lassitude. His internal fauces are painful, and there is an eruption of reddish spots over his face and most of his body. Pulse about 90—belly slow—appetite impaired—tongue rather white—has great thirst.

On the 12th current he was affected with shivering; the spots appeared about the 15th, and have been increasing since that time; the affection of his throat has likewise been increasing. He had been recovered eight days from a febrile attack, which had continued for a fortnight without any eruption.

He took an emetic on the 13th, which relieved in some degree the pain of his head. He took also some pills on the 15th, which acted as a laxative.

Let him have the purging Enema.

May 18th. Pain of abdomen, affection of internal fauces, and eruption continue—skin moderately warm—pulse about 80, and soft—a costive stool.

Let him have immediately
of jalap in powder
calomel of each six grains.

With the vegetable acid drink *ad libitum*.

May 19th. A costive stool in the evening, after an injection—pain of abdomen, affection of throat, and eruption, stationary—tongue loaded—much thirst—pungent heat of skin—pulse about 80.

Take of sulphate of soda six drachms
 Sugar, two drachms
 Chrystals of tartar
 Leaves of senna of each a drachm
 Boiling water sixteen ounces.

Let an infusion be made to be taken immediately, the throat to be wrapped in flannel.

———20th. Complaints stationary—a bad night—tongue still loaded—with thirst—skin cooler—pulse about 80—four dark coloured stools.

Let him have the anodyne draught in the evening, and
 An ounce and half of the infusion of senna to-morrow morning.

Two pounds of wine whey taken at different times every day.

———21st. Pain of abdomen is abated—that of internal fauces, which appear considerably inflamed, continues—eruption, copious on the face, is less frequent on the rest of the body—heat of skin again more pungent—pulse about 100—thirst urgent—no stool—indifferent night.

Let him have the common Enema if necessary.

May 22d. A copious dark coloured stool after the injection—affection of throat and eruption continue—pulse about 90, of moderate strength—skin of a less pungent heat—thirst not abated.

Let ten drops of the thebaic tincture
 be added to the draught.

———23d. Pain of epigastrium has recurred—pain of fauces continues—skin less hot—pulse about 80, soft and firm—no stool—an indifferent night.

Let him have of the infusion of
 Senna, two ounces immediately.

Repeat the draught.

Discontinue the wine whey.

———24th. Two dark coloured stools—pain of epigastrium and fauces relieved—eruption fading—tongue cleaner—pulse about 80, and soft—skin moist—thirst abated—a good night.

———26th. Convalescent—belly rather slow.

Let him have of powdered rhubarb ten grains every morning.

Discontinue the draught.

Full diet.

———30th. Belly has been regular.

Dismissed cured.

Royal Infirmary, Aug. 7th 1801.

JOHN BAIRD, Ætatis 11.

On the 2d instant, by account, was suddenly attacked with rigours, increased heat, and general sweat. Since admission, he has been very indistinct, and frequently, while awake, is observed to mutter and speak to himself: while asleep, he often starts, and awakes in a fright. Pulse 130, and weak—skin very warm—tongue clean—some thirst—the day before his illness was exposed to febrile contagion—a scanty stool since admission—no remedies employed.

Let him have the common Enema immediately.

August 8th. A scanty stool—pulse about 120, and rather feeble—tongue white—more distinct—injection not given.

The bolus of jalap, with three grains of calomel to be given immediately.

The bran decoction to be taken *ad libitum*.

———9th. Two or three stools—skin cool—pulse about 90—a good night, and disposed to sleep—making no complaint.

Continue the bran decoction.

August 10th. Has had delirium and irregular convulsive motions—belly slow—pulse feeble.

The bolus of jalap and calomel to be repeated.

His head to be shaved.

Let him have 8 ounces of port wine, of which he may take an ounce frequently.

———11th. Delirium and involuntary motions still continue—a better night—two loose stools—pulse towards 120, and feeble—wine not much relished.

———Let a blister be applied to the whole head.

Let him have a draught with 15 drops of Laudanum.

The port wine to be discontinued.

———12th. Delirium much aggravated towards evening—quietness succeeded the exhibition of the draught, which still continues—irregular convulsive motions abated, pulse about 120, and firmer.

Let him have of the diaphoretic, saline mixture, an ounce every three hours.

The draught to be repeated in the evening.

———13th. A tolerable night—disposed to be drowsy—on awaking, he appears agitated, screaming occasionally, but makes no complaint—appetite indifferent—pulse quick and feeble—belly slow—involuntary motions not perceived face more or less flushed—copious discharge by the blister.

Let him have immediately of the infusion of senna, two ounces and also of the same infusion an ounce once every day.

To take a pill of the ash coloured oxyd of mercury, morning and evening.

The anodyne draught to be discontinued.

August 14th. An indifferent night—although less drowsy, has on the whole slept much—tongue clean and moist—skin cool and soft—pulse about 100, and feeble—expression of countenance more natural—one stool—but little food taken.

The mercurial pills and the mixture to be continued.

———17th. Appetite mending—looks improving—
sleep natural—pulse calm—skin cool—belly open.

The mercurial pill to be discontinued.

An egg to dinner.

———27th. Dismissed cured

Royal Infirmary, March 27th. 1804.

DONALD STEWART, Ætatis 19.

Complains of violent headach, vertigo, nausea, and occasional vomiting, pain under the sternum, with frequent short cough, and slight dyspnœa—debility—general uneasiness—pulse 90—skin hot—tongue loaded—belly, by account, regular. Was attacked two days ago, with rigors—has used no remedies.

March 28th.—Let a blister be applied immediately to the sternum, and let him take the compound bolus of Jalap.

And of the saline ammoniated mixture an ounce occasionally.

——— 29th. Headach and sickness—cough, and pain of breast relieved—frequent stools—pulse calm—skin cool and moist—tongue white—thirst inconsiderable—an indifferent night—blister has answered well.

To take the anodyne draught in the evening.

The saline ammoniated mixture to be continued.

——— 31st. Purging gone—cough returns at times, with uneasy breathing—pulse 90, and feeble.

Take of the mucilaginous mixture four ounces,

Wine of tartrite of antimony two drachms,

Thebaic tincture thirty drops.

The mixture being shaken, let him take every now and then half an ounce of it.

Discontinue the saline ammoniated mixture.

April 3d. Belly having been slow, a laxative was given last evening, as yet without effect. Face at times is flushed, and he is somewhat delirious—cough is however abated—breathing easy—pulse calm.

Let him take immediately of the infusion of senna three ounces.

Let the mixture with the tartrate of antimony be continued.

——— 4th. No stool till he got an injection—two since—pulse 80—tongue foul, but moist—eyes suffused.

Let the mixture with the tartrate of antimony be continued.

——— 5th. Headach and delirium gone—a good night—complains of pain of throat, with difficult deglutition—pulse 80—skin hot—belly slow.

Let the ammoniated oil be applied with a piece of flannel to the external fauces—let him have two scruples of the compound powder of Jalap.

——— 7th. Pain of throat gone—a good night—passage of belly—pulse 80—skin cool.

April 13th. Convalescent.

Discontinue the medicines.

Full diet.

——— 17th. Four loose stools.

To take of the cretaceous mixture, one ounce every two hours and the thebaic pill twice a day.

——— 18th. Four stools.

Let him have of the tartrate of soda 6 drachms. The cretaceous mixture and thebaic pills to be continued.

——— 20th. Purging gone—tongue appears loaded—headach—pulse calm.

Let him have of the bitter infusion half an ounce four times a day.

The cretaceous mixture and thebaic pills to be discontinued.

— 21st. Stools have become frequent, and of a natural appearance, with gripes, and occasionally sickness, and spontaneous vomiting—tongue white—thirsty.

Let him have of ipecacuanha, a scruple for an emetic. The bitter infusion to be continued.

— 22d. Stomach appears to have been loaded—gripes relieved.

— 23d. General uneasiness and pain—tendency to delirium—eyes are suffused—pulse feeble—indifferent nights.

Take of port wine four ounces,

Water four ounces. Mix.

Let him take half an ounce every now and then ;
The anodyne draught in the evening.

— 24th. Restless, and more delirious, without particular complaint. Eyes less suffused, but heavy—tongue somewhat loaded—pulse at the wrist hardly felt—a natural stool in the evening—wine relished, and some food taken.

Let him have of port wine twelve ounces,

Water eight ounces—to be taken mixed, as yesterday.

— 25th. Has had a quieter night, but continues indistinct, with feeble pulse—parched tongue, and involuntary twitching—no stool.

Let him have immediately the bolus of jalap and calomel ; and in the evening if necessary, the common enema to move his bowels.

The wine to be continued.

— 26th. A quiet night—disposed to sleep since morning—countenance more florid, and of a more natural appearance—a copious, dark-coloured, and fetid stool, after the injection.

Repeat the bolus of Jalap and calomel, and the common enema if necessary.

The wine also to be repeated.

——— 27th. One stool by the injection, and another an hour after—continues to sleep much—pulse 120 still feeble.

The enema to be repeated in the evening.

The wine to be continued.

——— 28th. Continues drowsy and indistinct, with tremor of hand, and slight subsultus tendinum—tongue loaded—pulse feeble—wine relished.

A blister to be applied to the head after it is shaved.

The bolus of Jalap and calomel to be repeated as above, also the common enema in the evening if necessary—the wine to be continued.

——— 29th. A fetid and rather scanty stool after the injection. A good discharge by the blister—appears less drowsy—has been more distinct—tremor and subsultus at present gone—tongue dry and less loaded—pulse feeble—wine still relished, and little food taken.

The bolus of Jalap and calomel to be repeated, as also the enema—the wine to be continued.

——— 30th. A copious, but still fetid and dark-coloured stool, from the injection. Has passed an easy night—wine still relished, and a little more food taken—slight subsultus with appearance of floccitatio. In other respects as yesterday—pulse feeble.

The bolus of Jalap and calomel to be repeated, as also the enema if necessary—and the wine to be continued.

May 1st. Two stools after the injection, the last co-

pious, dark and fetid—a quiet night—tremors and floccitatio abated—pulse 80, and good strength.

Repeat the wine.

—— 2d. A good night, with less delirium—tremor and floccitatio gone—pulse 80.

Repeat the wine.

—— 3d. Febrile symptoms continue to abate—free of complaint—pulse calm—belly rather slow.

Let him take of the compound powder of jalap, two scruples.

In the evening the common enema unless the bowels should be previously moved—the wine to be continued.

—— 6th. Two stools in the course of yesterday—continues apparently convalescent, but is greatly emaciated—tongue clean—pulse calm—improving appetite.

Let him have of port wine eight ounces.

Water four ounces.

—— 30th. Discontinue the wine—full diet.

June 15th. Dismissed cured.

Royal Infirmary, 7th Oct. 1805.

MARGARET MANSON, Ætatis 20.

Complains of headach, vertigo, nausea, and occasional vomiting—pain of back, and general pains—pulse 108 and weak—skin hot—tongue very foul—belly costive—complaints of two days duration, for which she knows of no cause.

Let her have the compound bolus of jalap tomorrow.

October 8th. Two full stools of natural appearance—headach continues—two or three attacks of vomiting during the night, none since morning—sickness relieved—tongue still much loaded.

Repeat the compound bolus of Jalap in the evening.

——— 9th. Headach is relieved—no return of vomiting—sickness abated—tongue less loaded—surface of natural heat—pulse 100 and soft—three copious stools.

The bran decoction to be taken *ad libitum*.

——— 10th. Pulse calm—skin cool—tongue clean—makes no complaint—good night, with returning appetite

——— 15th. Convalescent.

Full Diet.

——— 18th. Dismissed cured

*Royal Infirmary, 6th Nov. 1805.**MARGARET KENNEDY, AEtatis 17.*

Complains of severe headach, vertigo, and nausea, with pain in the small of her back and general uneasiness—pulse 100, and feeble—skin cool—tongue furred—belly slow—says she has been subject to flying pains for some weeks, but they have been aggravated for two days with headach and other symptoms of general fever.

Let her have the compound bolus of jalap tomorrow morning.

Nov. 7th. Pain of loins and other symptoms of general fever as described—alternate attacks of chilly and warm fits followed by sweating—by her account headach has morning remissions—pulse about 100 and feeble—as yet no stool.

Let her have immediately,
Of the infusion of senna,
Of the infusion of flaxseed each three ounces.

— 8th. Pain of loins and headach continue, with nausea, and one attack of spontaneous vomiting—complains still of alternate rigors and hot fits—pulse about 100 and feeble—skin cool—tongue moist—little thirst—full alvine evacuation of a dark colour and fetid smell—a quiet night.

The bran decoction to be taken *ad libitum*.

Early to morrow morning of the compound powder
of Jalap a drachm.

———9th. Copious and natural stool in the course of
yesterday—appetite good—easy night.

———11th. Dismissed cured.

APPENDIX,

No. III.

CASES OF SCARLATINA.

NARRATIVE OF SCARLATINA, AS IT AFFECTED THE CHILDREN IN GEORGE HERIOT'S HOSPITAL, IN AUTUMN, 1804.

GEORGE HERIOT'S hospital is a large building of noble architecture, forming a quadrangular court. By this construction, and by means of cross windows in the different apartments, complete ventilation is procured. The house occupies a dry situation, on the highest part of a ridge immediately to the south of the city, and is placed in the middle of an inclosure, consisting of several acres. On the south and west, it commands extensive views of the country; these are more confined on the north and east, by the castle, and by the buildings in the old town, from both of which, however, it is at a considerable distance.

Great attention to the cleanliness and airyness of every part of the hospital, is added to these advantages of situation. The diet of the children is well regulated; and there

is an abundant supply of spring-well water, from the city's reservoir, which adjoins the house ; and the medical gentlemen attached to the hospital, and acting under the regulations of the governors, put a negative on the admission of any child, who appears to them to labour under scrofula.

These circumstances are so favourable to the health of the inmates of this foundation, that I have the satisfaction to say, that during two and thirty years, that I have had the medical superintendance of it, I have seldom known any serious illness prevailing among them.

The sons of burgesses, freemen of Edinburgh, are received into this hospital. They are admitted when between the seventh and eleventh year of their age ; and are maintained and educated till they reach their fourteenth year. Their present number is one hundred and twenty, and they, together with the matron, masters, and domestics, form a family, of about one hundred and forty persons.

Towards the end of September, 1804, I visited one of the youngest of the children, in fever. I found him labouring under symptoms of scarlatina, which had been epidemic in the town, for some months. He was moved immediately to the sick room, and thus secluded from his companions ; and I directed every precaution to be employed, in washing and ventilating the apartment or ward which he had left. The whole of the children were confined within the precincts of the hospital, lest, through communication with their relations in town, they might be affected with the fever, and thus add to the accumulation of contagion.

I was not, however, fortunate enough, indeed I did not expect to be so, to make this the solitary instance of the

disease, in the midst of so numerous a family. Day after day, my sick list increased; and during three months that the fever prevailed in the hospital, upwards of fifty of the children passed through it. And I remarked, that by far the greatest number of the sick came from the ward in which my first patient had lain.

About the end of the year, the last of my little patients left the sick room, which was then shut, and it has fortunately continued so, to this date, 15th of March 1805; and some weeks have now elapsed, since communication with the town has been opened.

In all the children, particularly in those who were first affected, the symptoms were so mild, that but for my knowledge of the prevalence of the epidemic in town, I might have mistaken the disease on its first appearance, and been lulled into a blameable security. The throat was not much affected. The uvala and amygdalæ were slightly swelled and inflamed in every instance; in a few cases, superficial suppuration and sloughing appeared. The efflorescence on the surface was partial, and in general transitory, leaving a peculiar paleness of countenance. The eye was dull and heavy. Sickness and prostration of appetite, continued throughout the disease. The thirst was moderate; great debility prevailed in every case; and in some, a peculiar dejection and despondency, hardly to be looked for in subjects so young. The pulse was variable; always quick, till towards the end of the disease, when it sometimes sunk below the natural standard; it was never full. The surface of the body was occasionally of a pungent heat. Obstinate constipation prevailed in general.

My patients were objects of serious attention for twelve or fourteen days; the convalescent state of almost all of them, was protracted for nearly the same length of time;

and x weeks elapsed before some who entered the sick room, left it.

Such was the appearance, and such is the history of this epidemic in Heriot's Hospital; in conducting the cure of which, I employed purgative medicines fully; while food suited to the weak appetite and feeble powers of digestion, was directed.

The effect of the purgatives was favourable. The feces were hard, generally of a black, or greenish colour, and fetid; and sometimes of the colour and consistence of clay, and less fetid. In proportion to the evacuation of these feces, relief was perceptible. Returning appetite and vivacity accompanied the decline and cessation of the various symptoms.

As the weather had become cold, and otherwise inclement, the children were detained in the sick room, for many days after they were perfectly well; purgatives were administered, as the state of the bowels demanded; and the general warm bath was repeatedly used, on the supposition, that, by its restoring a perspirable state of the skin, it would, in concert with the purgative medicines, tend to prevent dropsical swelling, which, from the symptoms, I greatly dreaded.

At last, healthy and robust, and impatient of farther restraint, the convalescents were permitted to return to their particular wards, and in no long time, to mix with their companions in school, and at play.

Happy I am, that I had been thus careful and provident in using these precautions; for I have to relate the fate of three boys, who in two or three weeks from their passing from under my care, were again reported as unwell, and again appeared in the sick room. Their symptoms, and their fate were the same. They had a leucophlegmatic

look, incipient anasarca, total prostration of appetite, scanty, if not suspended secretion of urine, swelling of abdomen, obstinate constipation, nausea, extreme debility, and feeble pulse.

Alarmed by these symptoms, I requested Messrs. Alexander and George Wood, surgeons to the hospital, to join me in consultation. Suitable cordials were ordered, and purgative medicines, of appropriate quality, and in repeated doses, were directed. The disease in all the three, proceeded with a rapidity, which afforded little farther opportunity, for deliberation or action. The stomach gave way; all food, cordials, and medicines, were rejected, by vomiting. The watery effusion rapidly filled the cellular membrane, and every cavity. Within less than thirty-six hours, from the recurrence of complaint, the boys died, labouring under symptoms, denoting ascites, hydrothorax, and hydrocephalus.

This termination was altogether new; I had never seen dropsy from scarlatina fatal.

In consequence of this event, I approached the Hospital for many days, under deep anxiety, because I was conscious, that other children were, at the time, in a situation which might lead to the same unfortunate issue.

I continued to pay unceasing attention to the alimentary canal, which every day's experience proved to be much disordered. Strong purgatives were given, in large and repeated doses, sometimes twice and thrice in the same day, before the necessary evacuation was procured. In some instances, the colon, hard, and distended, could be traced by the finger, in those places where it approaches the parietes of the abdomen.

In two cases, general fulness of the belly, œdema of the

lower extremities, nausea, retching, and scanty secretion of bloody coloured urine, shewed themselves. In these, stimulating glysters supported and promoted the efficacy of the purgatives, and ensured a determination downwards; without which, I am satisfied, I should have had to regret the loss of two other boys; one of whom had taken, within the space of twenty-four hours, a drachm of the mass of the aloetic pill, and thirty grains of the submuriate of mercury. The other, when danger was over, was much distressed, by affection of the mouth, and bloody ptyalism, the consequence of the quantity of calomel previously given.

For greater security, an additional apartment was opened for convalescents. Here, they were sedulously watched; purgative medicines were occasionally employed, to secure and establish a regular state of the belly; and returning appetite was satisfied with light and nourishing food.

I always inspected the alvine discharge of the sick; the quantity of which, varying in consistence, colour, and fetor, daily evacuated during the fever by each boy, was astonishing to me.

An emetic was given occasionally, but not generally, on the approach of the fever; and towards its decline, a moderate quantity of wine was allowed. This seemed to be necessary, in a few instances; but to avoid the appearance of partiality, the practice of giving it was general. Gargles, composed of port wine, diluted with water, or of vinegar and water, sweetened with honey or sugar, were also employed in a few cases; as were saline and diaphoretic mixtures. At length, under this management, care and anxiety on the present occasion came to a period.

Royal Infirmary, Nov. 17th, 1804.

JAMES RITCHIE, Soldier, Ætatis 19.

Feels great pain and difficulty of deglutition, the internal fauces being of a deep red colour, and the tonsils considerably swelled, with a large greyish coloured slough occupying the left one: complains of headach, general oppression and debility. Appetite is bad—pulse 100—skin very hot—tongue very dry—thirsty—belly slow.—He was attacked with these symptoms four days ago, and can assign no cause for his complaints.

Has used no remedies.

Let him have the bolus of Ja'ap and calomel.

Take of the oxygenated muriatic acid two drachms.

Spring water sixteen ounces. Make a mixture to be kept in a dark place, of which he is to take an ounce out of a glass tumbler every two hours.

Nov. 18th. Headach, sickness, and oppression are relieved—tongue less parched—surface less pungently hot—pulse about 100, rather feeble—state of internal fauces as described, with difficult deglutition—countenance pale—no stool.

Take of the tincture of jalap six drachms,

Water of canella alba two drachms,

Sugar one drachm.

Make a draught to be taken immediately.

The ammoniated oil to be applied to the external fauces by means of a piece of flannel.

Let the oxygenated muriatic acid be continued.

Nov 20th. One easy stool—skin cool—pulse calm—countenance less pale—deglutition more free.

The draught of the tincture of Jalap to be repeated.

The oxygenated muriatic acid to be continued,

——— 24th. Affection of internal fauces, and febrile symptoms gone—appetite improves.

——— 25th. Tongue clean—belly regular.

Discontinue the oxygenated muriatic acid.

——— 29th. Continues feeble—countenance pale, and expressive of langour.

Let him have of the aromatic mixture of peruvian bark, one ounce, every three hours.

Full diet.

Dec. 3d. Since yesterday, considerable œdema has occurred. By account, urine has been in natural quantity, and bowels regular—pulse about 70.

Let him have immediately the bolus of Jalap and calomel, to be repeated in the evening; also early tomorrow morning unless the bowels should be sooner moved.

Discontinue the bark mixture.

——— 4th. Three stools; the last of natural appearance—œdema abated.

Two bolusses taken.

Let the bolus of jalap and calomel be repeated tomorrow morning.

No stool.

——— 5th. Take of tartrite of soda one ounce,
Infusion of senna two ounces,
Bran decoction one pound.

A solution to be made and taken in divided doses.

Dec. 6th. Five watery stools—œdema continues, rather aggravated, with considerable dyspnœa, particularly during last night—pulse 60, and soft.

Take of the submuriate of mercury twelve grains,
Powdered Jalap half a drachm,

Let them be rubbed together and divided into four equal parts—one to be taken every three hours.

——— 7th. Has had plentiful alvine discharge, of natural appearance—urine is also natural and abundant—œdema seems abated, and dyspnœa relieved—the powders taken—mouth not affected.

Let the powders as prescribed yesterday, be repeated tomorrow morning.

——— 8th. Has had two stools, rather scanty—dyspnœa still rather relieved—one powder only taken.

Let the powders be continued—one to be taken every three hours.

Take of tartrite of soda six drachms,
Infusion of senna two ounces,
Spring water one pound.

A mixture to be made and taken in three doses tomorrow morning.

——— 9th. Three powders taken—four stools—but the alvine discharge on the whole scanty, of a green colour, and fetid—urine scanty, of a dark and almost bloody colour—œdema continues—breathing easy—mouth is affected.

Let the solution of tartrite of soda as yesterday prescribed be repeated immediately; to be again repeated tomorrow morning.]

——— 10th. Sickness and vomiting after the last dose

of solution this morning—alvine discharge more abundant and natural—urine also in greater quantity and more natural—œdema abated.

Beef broth one pound daily.

Bason of tea to breakfast.

Dec. 11th. OEdema still more abated—feculent discharge, of natural quantity and appearance.

Let him have two aloetic pills, every morning and evening.

Port wine eight ounces daily.

——— 13th. Belly regular—œdema gone, and countenance more lively than hitherto.

Let the wine and the aloetic pills be continued.

——— 16th. Has had two stools daily, in abundant quantity, and of natural appearance.

Let him take two aloetic pills only, every day.

——— 24th. Dismissed cured.

Royal Infirmary, Feb. 11th. 1805.

WILLIAM GORDON, Ætatis 22.

Complains of pain of throat, with some difficulty of deglutition—the internal fauces are of a deep red colour—general redness of surface—frequent scanty stools, with tenesmus—loss of appetite—pulse 98—tongue loaded—thirsty—skin warm.

Was attacked three days ago with general pains. The efflorescence appeared yesterday.

Has used no remedies.

Let him have of the tartrite of soda and potash six drachms,

Infusion of senna two ounces,

To be taken at two doses out of six ounces of the infusion of flaxseed.

——— 12th. Has had several stools—efflorescence faded—internal fauces relieved—pulse calm—tongue loaded—much thirst and languor.

Let him have the anodyne draught in the evening

Tomorrow morning the cathartic solution as prescribed yesterday.

The tepid decoction of bran *ad libitum*.

——— 13th. Tongue cleaner—febrile symptoms and eruption gone—a good night—is less languid—pulse calm four stools.

The anodyne draught to be repeated in the evening.

——— 14th. A quiet night—two stools of natural appearance—free of complaint.

Repeat the anodyne draught.

Let him have ten grains of powdered rhubarb every morning.

Feb. 15th. One stool. Convalescent.

The anodyne draught to be repeated.

———— 17th. Belly regular—stools natural.

Full diet.

———— 23d. Belly open—tongue loaded.

Let him have of ipecacuanha, one scruple in the evening.

The anodyne draught at bed time.

———— 24th. No vomiting—tongue clean—purging gone.

———— 28th. Dismissed cured.

Royal Infirmary, Jan. 6th. 1805.

ALEXANDER CORNER, Ætatis 7.

Complains of almost constant headach, and occasional vertigo—pain of abdomen, with some tension and swelling—the pupils appear dilated—disturbed sleep, from which he sometimes awakes with a loud scream—loss of appetite—feebleness—pulse 90—skin rather hot—tongue moist—thirsty—belly costive—he has a slight excoriation on each haunch, from lying on them long.

The above symptoms have been present three weeks, and succeeded a fever which was accompanied with general efflorescence of surface and sore throat, followed by desquamation of the cuticle: during the fever he took an emetic.

Two days ago he took a dose of senna and manna, but with little effect.

Let him have of powdered jalap six grains.

Of the submuriate of mercury three grains.

Of which a bolus is to be formed to be taken immediately.

——— 7th. As yet no stool.

Let eight ounces of the common enema be injected immediately.

Let him have four bolusses, as prescribed yesterday; of which he is to take one every three hours.

——— 8th. Three stools, dark and fetid—an inconsiderable quantity; the first, after the injection; the second, after the third bolus; the third, this morning, the fourth bolus being previously given—has passed a bad

night, awaking suddenly, screaming, from short sleeps, but complains less of headach, and more of pain of abdomen—pupils seem to possess more contractility—appetite indifferent—pulse 80, and soft.

Jan. 9th. An easier night, sleep being of longer continuance, he awakes less suddenly, and without screaming—by his account, is free of headach, but complains of pain of abdomen—countenance at present pale—pulse towards 100, and feeble—a fetid, fluid, and dark coloured stool—urine in small quantity, and high coloured—little food taken.

Let him have of the compound powder of Jalap one scruple immediately ; to be repeated tomorrow morning.

A small bason of tea, morning and evening.

——— 10. Countenance more florid, and expression more lively—pain of abdomen gone—tongue clean—pulse calm—surface cool—two stools, both abundant, and of more natural appearance and odour—some food taken, and seemingly relished—both powders given—a good night.

Let the powder be repeated as prescribed yesterday.

——— 11th. Free and full feculent discharge, and he continues free of complaint.

Let him have with him twelve of the compound powders of Jalap as prescribed above.

Signa, one to be taken daily.

Dismissed cured.

Royal Infirmary, Jan. 14th 1805.

CATHARINE STEWART, *Ætatis* 18.

Complains of pain of back and of loins—occasional headach—vertigo, with uneasiness and sense of weight at the epigastrium, increased on pressure, and after taking food—pain and weakness of knee joints—strength is impaired—pulse 84—skin cool—tongue rather white—belly slow—catamenia have not appeared for three months, at which time they were suddenly suppressed by exposure to cold.

Let her have the compound bolus of Jalap.

—— 15th. One stool, rather scanty, fluid, and of natural appearance—symptoms not relieved.

Let him have eight of the aloetic pills.

Take two immediately ; and afterwards two every three hours. Tomorrow morning two ounces of the infusion of senna, with eight ounces of the infusion of flaxseed.

—— 16th. Copious feculent discharge—headach, vertigo, and stomachic distress relieved—pain of loins continues—remarks a swelling and fulness of face—about four months since, laboured under fever, which, by her account, seems to have been scarlatina anginosa ; since when she has never fully recovered her usual health.

Take of the sulphate of magnesia three drachms,

Supertartrite of potass six drachms,

Infusion of senna one ounce,

Infusion of flaxseed eight ounces.

Make a solution to be taken every morning at two doses.

Full diet.

———18th. A copious alvine discharge, of greenish colour—headach continues relieved—pain of loins easier—stomachic distress relieved—fulness of features continues.

Let the solution of the sulphate of magnesia be continued.

———20th. A copious and to appearance a natural stool—pain of loins is relieved—complains still of headach—fulness of features gone—urine abundant—pulse calm.

Let the sulphate of magnesia be still continued.

———22d. Headach and pain of loins are gone—alvine discharge has been regular and full.

Take of the sulphate of magnesia three ounces,

Supertartrite of potass six drachms.

Mix, and divide into eight equal doses.

Signetur—Laxative powders, one to be taken dissolved in water once a day, or every two days.

Dismissed cured.

APPENDIX.

No. IV.

CASES OF MARASMUS.

Royal Infirmary, Dec. 29th. 1804.

MALCOLM MORRISON, Ætatis 5.

COMPLAINS of pain of the right side, near the false ribs, attended by a dry hard cough, pain of forehead, and loss of appetite—pupils appear dilated. By account, awakes frequently during the night with a scream—is frequently observed to pick his nose—feces of a gray colour, and clayey consistence—urine turbid and scanty—countenance sallow—skin hot—pulse 120, and weak—complaints are, by account, of three weeks standing—has used no remedies.

Take of submuriate of quicksilver ten grains,
 Sugar half a drachm,
 Mix intimately and divide into four doses.
 Let him take one every hour.
 Beef broth one pound every day.

Dec. 30th. Two stools, of the appearance of that described—general fulness of abdomen—no hardness observed in the right hypochondrium, pressure on which does not seem to give pain—some food taken.

Take of submuriate of quicksilver three grains,
 Sugar,
 Jalap, of each six grains.

Mix into a powder to be taken tomorrow morning.

——— 31st. As yet no stool.

If necessary let the common enema be injected in the evening, and tomorrow let the powder of the submuriate of quicksilver be repeated.

Jan. 1st. Copious alvine discharge, in all respects similar to former ones. Considerable fulness of abdomen, continues, but pain of right hypochondrium and salowness gone—injection not given.

Let the powder of the submuriate of quicksilver and jalap be repeated tomorrow morning.

——— 2d. A pretty copious clay coloured, and fetid stool—food taken.

Let the powder as prescribed yesterday be repeated tomorrow morning.

——— 3d. Spontaneous vomiting this morning of the contents of the stomach. Fetid and clay coloured, but more scanty alvine evacuation—indifferent nights.

Take of the tincture of jalap,
 Syrup of sugar, of each two drachms.

Form a draught to be taken morning and evening,
 To the evening draught add ten drops of the thebaic tincture.

Let him have of port wine three ounces daily.

Jan. 4th. Has passed an easier night, and is now asleep—no vomiting—no stool.

Let him have a draught of the tincture of Jalap morning, noon and evening, with the laudanum in the evening draught, as prescribed yesterday.

—— 5th. A copious dark coloured stool—no return of vomiting—a good night—appetite indifferent—but he appears to have gained, in point of strength.

Let the draught as prescribed yesterday be continued, as also the wine and beef broth.

—— 6th. No stool.

Take of the carbonate of magnesia one scruple,
Supertartrite of potass.
Sugar, of each ten grains.

Mix into a powder to be taken every morning.

Let the draught with the tincture of jalap be continued.

—— 7th. Has had a copious alvine discharge, of a clayish colour and consistence—abdomen contiues prominent and some what tense.

Let the medicines be continued.

—— 9th. Copious and dark coloured alvine discharge continues—that since yesterday more watery and fluid than hitherto—abdomen less prominent and less tense—pulse 100, and feeble—appetite for food has declined.

Let him have of port wine,

Water, of each three ounces daily.

Let the powder of the carbonate of magnesia, and the supertartrite of potass be continued—the draught of the tincture of Jalap to be discontinued.

—— 10th. Two stools, both scanty, but of more natural appearance than hitherto, and less fetid—consider-

able fulness of abdomen, without pain—wine relished—
appetite variable—pulse quick and feeble.

Take of the submuriate of quicksilver two grains,
Powdered Jalap,
Sugar, of each six grains.

Mix into a powder to be taken in the evening.

Let the powder of the carbonate of magnesia and also
the wine be continued.

Jan. 11th. Fulness of abdomen continues, with pain,
particularly during night, which prevents sleep—copious
alvine discharge, partly fluid, and partly consistent.

Lrt him have eight of the aloetic pills; two to be
taken every three hours.

Take of tincture of Jalap three drachms,
Syrup one drachm,
Water two ounces,

Make a draught to be taken early tomorrow morning.
Continue the wine.

Discontinue the powder of the carbonate of magnesia.

——— 12th. Four copious fluid stools of more natural
appearance, but still very fetid—fulness of abdomen di-
minished—pain still continues, preventing sleep during
the night—pills rejected by vomiting—pulse rather quick.

Let the draught of the tincture of Jalap be repeated
tomorrow morning.

Continue the wine.

——— 13th. Spontaneous vomiting of contents of
stomach this morning, after breakfast—one fetid stool,
natural, and in moderate quantity—distension and pain of
abdomen, preventing sleep, still continue—pulse feeble.

Take of calcined magnesia one drachm,
Mucilage of gum arabic half an ounce,
Spirit of lavender compound two drachms,
Thebaic tincture twenty drops,
Water three ounces. Mix.

Let him take of this mixture, after agitating it, half an ounce every two hours

Let the abdomen be bathed with a little of the anodyne liniment three or four times a day and wrapped in flannel.

Jan. 14th. Has had a pretty copious fluid and feculent alvine discharge, accompanied with much flatus—passed a bad night, but pain of abdomen, and accompanying tension, for the present, are subsided—has nearly declined all nourishment—the wine has been taken with reluctance—mixture sparingly given, on account of its exciting retching.

Pulse quick, but firmer.

Take of the solution of *assa fætida* one ounce,
Water five ounces.

Make a mixture to be injected as an enema.

Let the other prescriptions be continued as yesterday.

——— 15th. Injection, after being retained for some time, was returned, accompanied with much flatus and feculent evacuation. This last, since yesterday, has been copious, nearly of natural appearance, but containing somewhat, resembling *scybaia*; food has been taken; wine relished, and mixture used; complains less of pain of abdomen, swelling and tension of which are abated.

Repeat the enema of the solution of *assa fætida*.

Continue the prescriptions.

——— 16th. Injection retained till the morning; discharge of flatus and feculent evacuation has been less abundant, but tension and pain of abdomen, continue relieved; food, wine, and mixture, taken.

The wine and the mixture of *magnesia* to be continued. A little beef stake to dinner.

——— 17th. Three stools, copious, and of clay-co-

lour; belly rather tense; a good night; appetite continues to improve.

The wine and the mixture of magnesia to be continued.

——— 18th. Copious feculent discharge, resembling that which has been voided for some days past; belly less tense, and less pained; much flatus has been voided; appetite and strength are improved, and looks are more lively; injection has not been given.

Omitting the enema continued the other medicines.

——— 20th. Daily and copious alvine discharge, partly fluid, and partly costive as formerly, somewhat resembling scybala, but now of more natural appearance and odour; pain and tension of abdomen continue to abate; and strength to improve.

Let the medicines be continued.

——— 21st. Let the wine and the mixture of magnesia be continued, of which he is to take but half the quantity every day.

——— 24th. Belly continues regular; stools, except being somewhat of a whitish colour, natural; some fulness of abdomen remains, but pain is gone; quiet nights; appetite good; is become more active, and more lively.

Discontinue the wine.

——— 28th. Has continued convalescent.

Let him have of the compound powder of jalap one ounce, to be divided into sixteen doses.

Signa, one to be taken once or twice a day, so as to preserve a regular state of the bowels; warmth of surface and nourishing food, recommended.

Dismissed cured.

Royal Infirmary, Jan. 18th. 1806.

ALICIA CASSIDY, Ætatis 7.

Complains of a constant and frequently severe pain about the umbilicus, and of occasionally severe headach; she is observed to pick her nose much, and to start in her sleep, screaming violently; her abdomen is full and prominent; pulse quick and small; tongue loaded; belly very irregular; appetite voracious; her countenance is pale and languid, and she is said to have been falling off in respect of flesh and strength for the last eighteen months.

January 19th. Take of the submuriate of quicksilver
twelve grains,
Powdered jalap,
Sugar of each half a drachm.

Mix and divide into eight doses of which she may take one morning and evening.

——— 20th. Plentiful alvine evacuation, partly fluid, partly consistent, and of a whitish clay colour.

The powders prescribed yesterday to be continued.

——— 21st. Has had a copious, partly fluid, and partly consistent, dark coloured alvine evacuation.

Let her take the powders as above prescribed thrice a day.

——— 22d. Alvine evacuation is scanty, consisting chiefly of dark coloured scybala.

Let the submuriate of quicksilver be continued, and early tomorrow morning let her take at two doses Four ounces of the infusion of senna.

——— 24th. Alvine evacuation of yesterday copious, partly of a clayish consistence, and partly fluid with scybala; the feces are fetid.

Let her have late at night the compound bolus of jalap with submuriate of quicksilver six grains, and Early tomorrow morning of the infusion of senna three ounces at two doses.

Discontinue the powder of the submuriate of quicksilver.

——— 25th. Spontaneous vomiting some hours after taking the bolus; several stools since morning, consistent, of more natural appearance and smell; starting, screaming under night, picking of the nose. with pale look and wasted appearance continue, complains less of gripes, and of headach; and appetite is less voracious; abdomen less full and tense; pulse firm; tongue clean.

Let her have of port wine three ounces, and Beef broth a pound daily.

Every morning of the compound powder of jalap two scruples.

——— 26th. Alvine evacuation pretty copious, somewhat scybalous, but of more natural appearance and less fetid.

Continue the compound powder of jalap,
Wine and the beef broth.

——— 27th. Alvine evacuation sufficiently abundant; fluid, without scybala, or unusual fetor.

——— 28th. Has easy nights without screaming or starting; fulness of abdomen gone; is less disposed to pick the nose; countenance clear; eyes lively; appetite natural; belly regular; she is become playful and active.

Discontinue the compound powder of jalap and the wine.

——— 30th. Free of complaint, but belly is rather slow, and feces consistent and of a white colour.

Take of the submuriate of quicksilver,

Sugar, of each three grains,

Mix into a powder to be taken every night.

Take of the infusion of senna,

Infusion of flaxseed of each an ounce,

The inspissated juice of liquorice half a drachm,

Make a mixture to be taken every morning.

——— 31st. Alvine evacuation has been more than usually copious; it is lumpy and of a whitish colour without fetor; her looks continue to improve in respect of colour and liveliness of countenance; easy nights.

Continue the infusion of senna and the powder,

Feb. 1st. Alvine evacuation less abundant than that of yesterday; it is still lumpy, but of a natural colour.

Repeat the submuriate of quicksilver and the infusion of senna.

——— 2d. Feces in respect of quantity and appearance correspond with the description of yesterday.

Repeat the medicines.

——— 3d. Full alvine evacuation of the consistence and appearance last described; she continues free of complaint.

Let her have powdered jalap an ounce divided into twenty four doses.

Signa, laxative powders; one occasionally, so as a regular alvine evacuation is procured.

Dismissed cured.

TRADES MAIDEN HOSPITAL,

September 25th, 1805.

ABOUT the middle of August last, Euphemia Winter, one of the children entertained in this Hospital, twelve years of age, complained of severe headach, sickness, and constant vomiting of the contents of the stomach. Mr. Wood, surgeon of the Hospital, asked me to visit her, which I did a few days after the appearance of the above symptoms. She was confined to bed. She appeared to be languid; her eyes were heavy, but she was strongly susceptible of the impression of light, which gave her much uneasiness; her pulse was feeble. With these she laboured under prostration of appetite, want of sleep, and obstinate costiveness.

She had been taking pills of calomel and rhubarb, with little effect on her bowels; but her mouth became sore, and her breath acquired the mercurial fetor.

We were not without apprehensions for the event of these symptoms, which seemed to us to indicate approaching hydrocephalus. We put our patient on a course of aloetic pills, of which ten grains were frequently given for several days together, and the calomel was omitted. The alvine discharge became more copious; it was peculiarly fetid, and of a dark green colour. The propensity to vomit having subsided; powder of jalap in doses of fifteen grains, repeated at short intervals, was substituted for the aloetic pills.

Under this course, the belly became more and more regular; till at last natural motions were procured; and the different complaints gradually abated. In four weeks from the first attack, this girl, furnished with proper purgative medicines, went to the country, for the complete re-establishment of her health.

ST. ANDREW'S SQUARE,

September 18th, 1805.

MY DEAR SIR,

I shall be happy to give you an account of the case of my daughter, whom you, and Mr. Benjamin Bell did me the favour to attend, in summer 1803. The child was then about three years old, and had been falling off in her health, some time before you saw her. She was then pale and languid, with a quick pulse, loaded tongue, and impaired appetite. But as she was reported to have had regular and daily evacuation of her bowels, none of these symptoms were ascribed to costiveness. Soon after you began to visit, however, you suspected an accumulation of feces, to be the chief of her complaint, and wished to treat the case, according to this view. But, notwithstanding every proper remedy was employed without loss of time, she got gradually worse for some days; till at last she showed some tendency to stupor, accompanied with pain in her head, and throbbing of her temples. The presence of these symptoms suggested a suspicion of an incipient attack of hydrocephalus, which made so strong an impression upon the attendants, that leeches were applied to the head, and the blood discharged, produced some temporary relief. Notwithstanding all these variations in the symptoms, however, you still continued steady to your original opinion, and persevered in the practice of giving laxative medicines. Perseverance in this plan, gradually unloaded the bowels, from a quantity of feculent matter, which appeared to have been lodged for a considerable time, and procured very manifest relief. From the time of this salutary discharge, the symptoms became daily more moderate, till at last the recovery was complete.

Upon reviewing all the circumstances of this case, which naturally attracted much of my attention, I regard it as a satisfactory illustration of your opinion, respecting the effect of costiveness, in exciting much distress, and in producing symptoms which counterfeit diseases, that are generally supposed to have a very different origin.

I am

With much respect,

My dear Sir,

Ever, most sincerely,

Yours, &c.

JAMES RUSSEL.

Dr. James Hamilton.

NEWINGTON-HOUSE,

September 20th, 1805.

DEAR SIR,

As you favoured me with the perusal of the manuscript, which you are about to publish, on the utility of purgative medicines in certain diseases; and as the practice, which you inculcate meets with my approbation; I think it right to communicate to you a remarkable instance of the good effects of this practice, which has recently occurred to me, in one of the most fatal diseases with which we are acquainted.

On Wednesday, the 4th instant, I received an anxious call from a family newly arrived at one of our hotels, from the distance of forty miles, with their eldest daughter, a girl of about eight years of age; who had become unwell on Saturday the 24th of August last.

Her symptoms, when I visited her, were, severe headach, greatly aggravated by motion. Pulse 96, and irregular; the pupil of each eye, was more dilated than in health, scarcity of urine, an uncommon dryness of the skin; and no discharge from the nose.

All the remedies that are commonly used in ordinary cases of headach had been prescribed, without any advantage; such as the local discharge of blood by leeches; the discharge produced by a blister, and gentle doses of calomel and jalap.

The symptoms being aggravated by the journey ; I again advised leeches to be applied, and a laxative of calomel and jalap to be given ; which operated properly, and afforded relief. The head was likewise shaved ; but the case being highly important, I advised an early consultation, which being agreed to by the family, Dr. Monro, senior, and Mr. James Russel, surgeon, one of my partners, met with me, accordingly, next morning. The opinion adopted at this consultation, was, that the symptoms were those of hydrocephalus internus. We directed a grain of calomel, and the same quantity of the powder of foxglove, to be given three times a day ; a drachm of the stronger mercurial ointment to be rubbed on her limbs, evening and morning ; a blister to be applied to the crown of the head ; and the powder of betony to be used as snuff, in order to excite a discharge from the nose.

This plan was continued, and in the course of the third day, the gums were red and swelled, but still no benefit was derived from the mercury. The pain of the head had been relieved by the leeches, but it soon became as violent as before ; the iris was, in a considerable degree, insensible to the stimulus of light, and the pulse was quick and irregular.

With these symptoms, she now complained of severe pain in her bowels, which led to the suspicion, of their being oppressed with an accumulation of feces, notwithstanding the laxatives which had already been given. A full dose, therefore, of an infusion of senna was exhibited, on the morning of the 9th instant. Next day, we found that the senna had purged briskly, not less than nine times ; and at every motion, that a large quantity of black coloured feces, fully formed, and uncommonly fetid, had been discharged.

Perceiving that she was relieved, her head being less pained, and the pulse more regular, another dose of senna was given, early in the forenoon of the 11th; and the mercurial medicines were omitted. This dose also, operated briskly, and brought off, notwithstanding the large evacuations of the preceding day six or seven copious stools, all of them uncommonly fetid, and of a dark colour. She suffered much from sickness, oppression, and gripes, during the operation of both doses of senna; but immediately after the last dose, every symptom of disease vanished. The headach was felt only on quick motion; her eyes recovered their natural appearance; her pulse was regular; and she became equally alert, as in her best health.

On the 12th, she had a third dose of senna, not however, so strong as the preceding ones; but nevertheless it procured three or four stools, less fetid than the former, and of more natural appearance.

On the morning of the 13th, our patient informed us, that she was cured of all her complaints. And her mother, who watched her carefully in every state of her illness, said, that ever since the violent purging, produced by the senna, on the first exhibition of it, she, as well as the servants, had remarked, that a disagreeable noise which took place, during the sleep of our patient for several years, and which was occasioned by the grinding of the teeth, had ceased.

As our patient continued perfectly well; she was permitted to return to the country, on the 17th instant. Her mother was directed to give her repeated laxatives for some time, to prevent immediate accumulation of the feces; and to interpose them on any occasion in future,

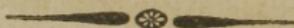
when the stools appeared to be unnatural, or not sufficiently copious.

I remain, dear Sir,

Your's, faithfully,

BENJ. BELL.

Dr. HAMILTON,
4, Nicholson's Street,
Edinburgh. }



The mother of this girl, wrote to Mr. Bell on the 29th October 1805, to the following effect :

“ Dear Sir,

“ As you were so good as to request me to let you hear again of my little girl, I trouble you with a few lines, to say, she is now almost quite well; indeed when she does not take too much liberty with herself, she is entirely well. I was impatient when I last wrote you; but your answer was very satisfactory, and has turned out exactly true. It must be admitted that purgative medicines have been her cure, which I find necessary to continue once a week, but hope as she gets stronger, these may be got rid of.

I remain, Dear Sir,

Your humble Servant,

_____”



THESE cases, from Mr. Russel and from Mr. Bell, gentlemen in full practice, and of high professional respecta-

bility, are singularly important. The practice therein set forth, coincides with, and corroborates the sentiments which I entertain respecting marasmus, as inducing, or as connected with hydrocephalus internus. Stronger and more decided proofs of the utility of purgatives, given in these instances, which had so much of the character and appearance of hydrocephalus, cannot be desired. They give a confidence in the prosecution of a simple practice, which, when fully established, as I doubt not it will be, will rob this scourge of infancy, of childhood, and early youth, of much of the terror which its dreaded approach has hitherto been wont to inspire, by removing in many instances a tendency to a disease, for which, when once fully formed, we are without a remedy.

APPENDIX,

No. V.

CASE OF CHLOROSIS.

EDINBURGH, 30th *October*, 1805.

A YOUNG LADY, about 14 years of age, *of a very delicate constitution*, and small growth, never menstruated, had for many months been pale and emaciated, and affected with a preternatural quickness of pulse ; she had been subjected to the ordinary treatment employed in chlorosis ; about the middle of *October* her pulse was so high as 140 in the minute ; her stomach soon became very irritable, and for some weeks she retained nothing ; whatever she took was rejected in the course of a few hours in a very undigested state ; she was reported to have been rather costive ; was ordered effervescing draughts, with a glyster at bed-time.

October 31st. Much the same.

Take of the mass of stomachic pills 12 grains,

Calomel two grains.

To be taken about mid-day.

Had one scanty bound stool in the evening, of a very dark colour and almost in the state of scybala.

November 1st. Not much relieved—pills were repeated—had four or five dark coloured stools—belly tense towards evening.

An injection in the evening.

Nov. 2d. Had some passage early in the morning—the last not so dark coloured.

Continue the saline draught.

Let the pills be repeated tomorrow morning.

—— 3d. No vomiting for 24 hours; three evacuations of a dark colour, not very copious.

—— 4th. No vomiting; pain and tension of lower belly.

Repeat the pills immediately

—— 5th. No return of vomiting; had a darkish passage late in the evening.

—— 6th. No return of vomiting.

Let her have of the mass of stomachic pills fifteen grains.

Calomel three grains.

—— 7th. Appetite improved; in the evening a copious stool, more natural than any of the former; pulse about 96.

—— 8th. Much the same; took six drachms of rochelle salts in the morning, which did not operate; had an injection in the evening which brought off but little; this however was more natural in colour and smell.

—— 9th. Continues better.

Let the stomachic pills be repeated in the dose of fifteen grains.

Calomel three grains.

To be taken immediately.

—— 10th. Had a copious stool, figured and dark coloured.

Let her take tomorrow morning, in a glass of water, four ounces of the following solution.

Take of soluble tartar three ounces.

Sulphate of potass with sulphur half an ounce.

Water one pound.

Nov. 11th. Vomited the solution.

Omit the solution.

Take of magnesia,

Peruvian bark in powder of each two drachms.

Water four ounces. Mix.

To take an ounce at noon.

——— 12th. No vomiting; gums still slightly affected.

The patient continued easy and rather improving in health; but stools never quite natural, and even at the last occasionally passing some indurated feces and scybala till she went to the country on the 2d of December. She was advised to continue the use of purgative medicines. Mr. Russell has lately informed me, that this patient quickly recovered perfect health, under the use of the purgatives which had been recommended.

APPENDIX.

No. VI.

CASES OF HÆMATEMESIS.

*Royal Infirmary, Feb. 18th 1805.**MARY MUNRO, Ætatis 28.*

HAS pain and sense of weight at the scrobiculus cordis, increased on pressure. Headach and virtigō, vomiting of ingesta, and sometimes, by account, grumous blood, to a considerable extent, is brought up by coughing—much debility, and lowness of spirits—appetite impaired—pulse 80—skin cool—belly habitually costive—catamenia regular, and rather profuse—says she has had stomachic complaints, more than a year and a half—the discharge of blood occurred first about the beginning of this winter, preceded by occasional epistaxis for a month before—has used no remedies before admission, but has taken a bolus since, which procured a dark greenish stool.

To take three of the aloetic pills every three hours.

——— 19th. By account, two dark greenish coloured stools have been passed this morning.

Let the aloetic pills be continued as prescribed yesterday.

——— 20th. Twelve pills taken—five copious dark greenish coloured stools—stomachic symptoms, headach, and vertigo are relieved—pulse calm—no vomiting.

——— 21st. No stool—no vomiting—weight at epigastrium—pulse calm.

Let the aloetic pills, as prescribed above, be repeated.

——— 22d. Several stools of more natural appearance—no return of vomiting—stomachic symptoms still more relieved, and expression of countenance more lively.

——— 23d. No stool—apparently convalescent—appetite good.

Take of the sulphate of magnesia three drachms,
Supertartrite of potass one drachm. Mix.

To be taken every morning in six or eight ounces of water.

——— 26th. Belly has been regular—appetite has continued good, and to all appearance she has been free of complaints.

Let her have of the compound powder of Jalap two ounces, divided into thirty doses.

Direct one each morning.

Dismissed cured.

Royal Infirmary, April 28th 1805.

JEAN CLARKINSON, Ætatis 29.

Complains of general soreness in her breast, with great oppression about the præcordia, headach, and some degree of langour. Says she has been affected for three weeks, with frequent vomiting of fluid and dark coloured blood, sometimes to the amount of a pound or more—that she has always vomited more or less, every day during that time. At present she has little or no cough; but when she first became affected, she had a severe cough, with great hoarseness.

Pulse at present 66, and very weak—tongue white—belly habitually costive—appetite impaired—catamenia natural.

Attributes her complaints, to carrying heavy loads of coals—has been using the pulvis cinchonæ, with porter, without relief.

—— 29th. A small discharge of blood, brought up apparently without retching—no stool since admission.

Let her have immediately the compound bolus with eight grains of calomel—and late at night, unless the bowels should have been previously moved, the common enema.

A pound or two of beef broth every day.

April 30th. General soreness of breast—oppression about præcordia—headach and faintness are relieved—pulse firmer, and expression of countenance more lively—a copious, fetid, dark and greenish coloured alvine evacuation—no vomiting.

Let her have twelve of the aloetic pills ; to take three every two hours ; and after taking the pills, let the enema be repeated as yesterday.

May 1st. Injection not given—has had two pretty copious stools—feces formed, but still of a dark and greenish colour—uneasiness of præcordia—oppression of the breast, and headach are still more relieved—no vomiting.

The compound bolus of Jalap as above prescribed to be repeated in the evening, and tomorrow morning early, let her take of the tartrate of soda and potass an ounce in water.

——— 2d. No vomiting—in other respects, free of complaint—a very copious alvine evacuation since morning, and of more natural appearance than hitherto.

The cathartic medicines to be repeated as prescribed yesterday.

——— 3d. Has had pretty full alvine evacuation ; somewhat costive, but in colour, more approaching the natural. Is free of complaint.

Let her have of Jalap in powder four drachms, divided into eighteen doses.

Direct one occasionally.

Dismissed cured.

Royal Infirmary, April 11th 1805.

MARTHA IRVINE, Ætatis 23.

Says, that on Sunday, the 27th ultimo, she became affected with great difficulty of breathing, severe pains through her chest, and a sense of great weight about the region of the stomach; which complaints were immediately succeeded by violent retching, when she discharged a quantity of clotted blood, and immediately felt herself relieved. On the ninth, the above symptoms recurred, and she vomited about a pound of liquid, which, in every respect, resembled pure blood; and yesterday she discharged nearly the same quantity; since which time, she has been pretty easy—Complains at present, of a general soreness in her breast—of a sense of great weight in her stomach—frequent cough, and occasional headach—pulse 72, and weak—tongue white—belly, by account, has been regular, and catamenia natural—attributes her complaints to fatigue, and carrying heavy loads—has used no medicines.

—— 12th. Cough, by account, is of a fortnight's duration, and has been accompanied with pain about the middle of the sternum—no stool since admission—tongue clean—pulse calm and feeble

Let her have of the common emulsion one pound daily.

—— 13th. No stool—no vomiting—cough has become less frequent, and by subsequent account, the pain mentioned yesterday, seems to be seated about the scrobiculus cordis. Headach is increased, and she complains of oppressive sickness—pulse towards 90, and firmer.

Continue the emulsion.

April 14th. Has had neither vomiting, nor evacuation by stool—cough nearly gone—headach, and much sickness continue.

Continue the common emulsion.

——— 15th. Has had neither passage of belly, nor vomiting—complains of severe headach and sickness—oppression and pain of epigastrium—cough gone—pulse calm.

Let her have the purging enema. Omit the emulsion.

——— 16th. Headach and oppression of præcordia continue—sickness relieved—no vomiting—copious alvine discharge after the injection.

Let her have immediately the compound bolus of jalap with ten grains of calomel, and late at night the common enema unless her bowels should have been freely moved.

——— 17th. Headach and oppression about præcordia are much relieved—expression of countenance lightened—very copious, consistent, dark coloured alvine evacuation.

Let the bolus and also the enema be repeated immediately, as yesterday.

——— 18th. Alvine evacuation similar to that of yesterday—injection not given—vomiting of blood has not recurred, and she is free of complaint.

Repeat the bolus as above prescribed.

——— 19th. Alvine evacuation resembling the last but in smaller quantity—no recurrence of complaint.

Let her have twelve of the pills of aloes and colocynth. Direct two every night.
Dismissed cured.

I did not doubt the veracity of this patient, Martha Irvine.—Her symptoms and her appearance convinced me that she laboured under hæmatemesis; but I was willing that the existence of the disease, should be placed beyond a doubt, by the actual discharge of blood, in order, that my practice, which was to follow, might be more decidedly conclusive in favour of purgative medicines, in this disease. I therefore temporised for the first four days. But her sufferings increasing, commiseration for my patient made me desert my scheme. I could not longer with-hold the certain means of relief which I had at command. In five days from my first employing these, she left the Hospital, in perfect health.

Royal Infirmary, Nov. 6th. 1805.

BETTY ROBERTSON, Ætatis 20.

Complains of a sense of weight, and great uneasiness about the chest and præcordia, headach, and great languor. Her eyes are dull—her countenance pale, and expressive of much distress—has some difficulty in breathing, but little or no cough—says that in the course of last night and this morning, she has discharged, by vomiting, a considerable quantity of pure liquid but dark coloured blood—pulse quick and soft—tongue white—belly habitually slow, and for the last four days she has had no stool—catamenia natural—knows of no cause for her complaints.

Let her have immediately twelve of the aloetic pills.
To take three every three hours.

——— 7th. Uneasiness about the præcordia, and sense of weight somewhat relieved—headach gone—pills taken—one costive dark coloured and fetid stool—no recurrence of bloody discharge.

Take of the sulphate of magnesia five drachms,
Infusion of senna two ounces,
Infusion of flaxseed four ounces. Mix.
To take two ounces every hour.

——— 8th. By mistake the mixture was omitted—no stool since yesterday—slight return of hæmatememesis—complains more of uneasiness and tightness across the chest.

Let her have immediately the cathartic solution as prescribed yesterday.

Nov. 9th. Solution taken—as yet no stool—severe attack of hæmatemesis last night, followed by relief of previous uneasiness and stiffness in the chest: but she complains of a general soreness about the inferior part of the sternum.

Let her have eighteen of the aloetic pills,
To take three every two hours.

——— 10th. One costive stool this morning—no return of hæmatemesis—nine pills taken.

The aloetic pills to be continued.

——— 11th. The eighteen pills taken with the effect of only one costive stool—but complains less of uneasiness—no hæmatemesis.

——— 12th. Complains of severe pain about the scrobiculus cordis, of slight cough, and general uneasiness—pulse quick and sharp—tongue white—no stool—no vomiting.

Let her have four of the laxative pills every two hours to the fifth time.

——— 13th. Twenty pills taken—one scanty stool has been voided—and at three different attacks, about ten ounces of pure blood have been discharged.

The purging enema in the evening.

Take of the sulphate of magnesia an ounce,
Supertartrite of potass two drachms,
To be dissolved in a pound of water, of which four ounces are to be taken every half hour after the enema has operated.

——— 14th. A fluid and rather scanty stool after the injection—another since morning also fluid and dark coloured, with numerous small scybala floating in it.

Take of the tartrite of soda and potass two ounces,
 Infusion of senna four ounces,
 Infusion of flaxseed one pound and half.

Make a solution, of which she is to take four ounces every hour.

Nov. 15th. The whole of the solution being taken, pretty copious alvine evacuation has ensued—the first part of which is fluid, dark coloured, and fetid, containing several scybala. The latter part is also fluid and fetid with similar scybala, but it has a more natural appearance—expression of countenance lightened—no hæmatemesis.

Repeat the cathartic solution as yesterday.

——— 16th. Alvine evacuation since yesterday rather scanty, fluid, without scybala, and more natural in respect of colour and odour—no hæmatemesis—solution taken.

——— 17th. Has had pretty copious alvine discharge since yesterday—natural in respect of colour and smell—no hæmatemesis—free of complaint.

Take of rhubarb in powder twelve grains,
 Ipecacuanha two grains.

To be taken every morning.

——— 19th. Free passage of belly—appears lively and cheerful—no hæmatemesis.

——— 20th. Dismissed cured.

Mr. James Law, one of the surgeons of the Royal Infirmary, and surgeon to Edinburgh Bridewell, has obligingly favoured me with the following observations, in a letter addressed to me. They are as follow :

Edinburgh, Aug. 1st, 1805.

MY DEAR SIR,

I have accidentally found some slight notices of cases of hæmatemesis, in looking over my Bridewell records. As I had formerly been very unsuccessful in removing this complaint by sulphuric acid, and other astringents; and as I received the first hint of the practice I now follow, from you, I think it a duty I owe to you and the profession, to lay before you all the information I can, on the subject, that you may make such use of it as you think proper, in your intended publication. I am,

My dear Sir,

Your's ever,

JAMES LAW.

JEAN HAY.

A patient admitted the 21st March, 1804, for rheumatic, and other complaints, was on the 10th of April, seized with vomiting of blood.

Let her take three of the aloetic pills.

March 16th. Vomiting of blood has ceased.

It appears by the records, that this woman, being afflicted with amenorrhœa, and its concomitant dyspeptic symptoms, was put under a course of steel, with occasional laxatives. April 29th, and frequently after this had epileptic fits, which ceased about the 12th of May.

Sept. 23d. A return of hæmatemesis, with costive belly.

Let her take of the compound powder of Jalap one drachm.

After this, had several returns, treated with laxatives, and on October 25th, was dismissed from the house, cured.

MARGARET PEAT, Feb. 12th 1805.

Has been in the house, since November the 20th, 1804, with venereal and other complaints.

Attack of hæmatemesis.

Let her take of the sulphate of soda one ounce.

—— 13th. Salts operated gently, and the vomiting of blood almost gone.

—— 15th. Hæmatemesis more severe.

Let her take two of the aloetic pills night and morning.

—— 17th. Continued the pills, till they operated fully, and produced eight stools—hæmatemesis gone.

—— 21st. No return of hæmatemesis.

N. B. In this case also, there was amenorrhœa.

APPENDIX.

No. VII.

CASES OF CHOREA.

*Royal Infirmary, Aug. 2d. 1802.**WILLIAM SINCLAIR, Ætatis 10.*

AFFECTED with irregular involuntary motions of the superior extremities, and occasionally with a diseased action of the muscles of the face, producing great distortion in the expression of the features, attended with flushing in the face, pain in the occiput, and difficult articulation. Although he cannot stand erect without being supported, yet he possesses in some degree the command over the inferior extremities, and was observed, before this took place, to drag one leg after the other. He seems much debilitated—belly is somewhat tense and tumid—pulse about 90, rather feeble—appetite impaired—belly regular, but the stools in small quantity. He was taken ill a fortnight before admission, and within these few days the symptoms have become worse. Has used no remedies.

Aug. 3d. Take of calomel three grains,
Jalap powdered ten grains,
Make a powder to be taken early tomorrow
morning.

Aug. 5th. The stools of yesterday and this morning
are copious, and of natural appearance—belly is less
tense—pulse calm—irregular motions and pain of occiput
continue, but he walks with more steadiness.

Let the powder of jalap and calomel be repeated to-
morrow.

——— 6th. One feculent stool since morning—head-
ach and irregular motions nearly the same—his step is
still more steady and firm.

——— 8th. Has continued convalescent.

Let him have of calomel ten grains,

Sugar two scruples,

To be intimately mixed and divided into eight doses.

Signa, one every night.

Dismissed cured.

Royal Infirmary, Sept. 12th. 1803.

ELIZABETH LAURIE, Ætatis 14.

Is affected with almost constant involuntary motions of the left arm. The muscles of the face are also involuntarily contracted, and in walking she is observed to drag the left leg after her—articulation is at times impeded—skin of natural heat—pulse 75—belly, by account, regular—has laboured under this complaint two weeks; it was preceded by headach and spontaneous vomiting. She has used some medicines, with the nature of which she is unacquainted.

Sept. 13th. Let her have immediately the bolus of jalap and calomel—and late in the evening, unless the bowels should be moved, the common enema.

——— 14th. Several copious feculent but fetid stools. Let her have three aloetic pills every evening.

——— 15th. One stool in the course of the evening. Involuntary motions abated.

The aloetic pills to be repeated in the evening, and let her take three ounces of the infusion of senna tomorrow morning.

——— 16th. Has had free passage of belly—stools more frequent, but still fetid—motions more staid.

The aloetic pills and the infusion of senna to be repeated.

——— 17th. Walks with increasing firmness and vigour—irregular motions of left arm continue—no stool.

Let her have immediately the draught of castor oil.
The aloetic pills and the infusion of senna to be repeated.

Sept. 18th. Let the pills and the infusion, as prescribed yesterday be continued.

—— 19th. No stool—involuntary motion of left arm aggravated.

Let her have immediately the bolus of jalap and calomel.

Discontinue the aloetic pills and the infusion of senna.

—— 20th. Consistent fetid bilious stool—rejected the bolus by vomiting.

To have twelve aloetic pills; of which she is to take two every four hours.

—— 21st. No stool.

The pills to be continued as yesterday.

—— 22d. Passage of belly in the course of yesterday—motions of the arm more steady.

Continue the pills as yesterday.

—— 24th. Belly open—stools of firm consistence, dark colour, and still fetid—irregular motions still more relieved.

The aloetic pills to be continued.

—— 26th. No stool since the 24th. Pills have been regularly taken.

Let her have the purging enema in the evening; and to morrow morning four ounces of the infusion of senna, at two doses.

Discontinue the aloetic pills.

○ —— 27th. Three natural stools.

Let her have of the compound powder of Jalap
two ounces; to be divided into sixteen doses.

Signa, one every morning.

Dismissed cured.

Royal Infirmary, Dec. 28th. 1803.

THOMAS WYLIE, Ætatis 9.

Has constant irregular and involuntary motions of both superior and inferior extremities; the right side seems to be more affected than the left; these motions continue during sleep; when he walks, he has the appearance of dragging the one leg after the other; his head is also occasionally moved involuntarily, with twitchings in the muscles of his face, and some difficulty of articulation. Pulse natural—belly open. These symptoms have been present eight days; the right side was first affected. He has used some calomel powders.

Dec. 29th. Several small dark coloured stools since admission.

Let him have the bolus of jalap and calomel.

——— *30th.* But a scanty feculent discharge, preceded by vomiting—much thirst—tongue white—involuntary motions continue; not interrupted during sleep—appetite indifferent—pulse feeble.

Repeat the bolus of jalap and calomel.

To have one pound of beef broth, daily.

——— *31st.* Two stools, both scanty, of a pale yellow colour and somewhat tough consistence; involuntary motions are less violent and disappear during sleep. He walks more steadily

The bolus of jalap and calomel to be repeated.

Jan. 1st, 1804. Two stools, the first pretty copious, and much resembling those of yesterday—involuntary motions more abated—appetite continues indifferent.

Repeat the bolus of jalap and calomel.

Dec. 2d. Involuntary motions more abated, and movements more steady and firm—two or three small stools, of a pale colour.

To take two aloetic pills, every three hours.

——— 3d. Copious feculent discharge, of natural appearance—eyes more lively, and countenance of more healthy appearance—involuntary motions nearly gone—appetite improves—ten pills taken.

The aloetic pills to be still continued until the bowels shall be again thoroughly moved.

——— 4th. Has had farther copious, and, to appearance, natural alvine discharge—appetite still mending, and involuntary motions subsiding.

The aloetic pills to be discontinued.

A little beef-steak to dinner.

——— 7th. Has continued convalescent.

To take twenty four aloetic pills.

Signa, one or two every night.

Dismissed cured.

Royal Infirmary, Dec. 5th. 1804.

DAVID ANDERSON, Ætatis 8.

Is subject to violent irregular and involuntary motions of the muscles of the head, eyes, lower jaw, abdomen, both superior and inferior extremities, which attack him by fits, at intervals of two or three hours, and are from ten minutes to an hour in duration; these motions sometimes appear to be general, at other times they are confined to the head and lower jaw, producing gnashing of the teeth; at other times, to one or both of the superior and inferior extremities; and sometimes only to the muscles of the abdomen. By account, they occasionally terminate in sopor. During sleep, the motions cease, and he commonly awakes with a scream. He is much debilitated and emaciated—complains of pain of abdomen—appetite not impaired—skin cool—pulse 120—belly by account regular.

About a month ago, he began to complain of general pains and uneasiness, with slight pain of throat and of the lower jaw; and about eight days ago was suddenly seized with a fit similar to those described above, beginning with a loud scream, and lasting about four hours—such have continued to prevail since that time.

His head has been shaved, and vinegar applied to it. Took a dose of physic, which produced several stools of a greenish appearance and fetid smell.

Let him have the bolus of jalap and calomel.

——— 6th. Refused the bolus—jaw is at present fixed, and general spasm affects the body.

Take of the submuriate of quicksilver a scruple,
Loaf sugar a drachm.

Rub them thoroughly together, and divide into twelve doses of which he is to take one every two hours.

Dec. 7th. Trismus and spasm were of short duration—involuntary motion of the muscles of the abdomen and of the lower jaw continue—one rather costive, but pretty copious fetid and green stool—uses little food—eight powders taken.

Repeat the powders of the submuriate of quicksilver, to be taken as yesterday, untill the bowels are again moved.

Let him have a pound of beef broth,
A pound and half of wine whey daily.

—— 8th. Irregular motions as yesterday, but trismus and spasm have not recurred—two scanty stools resembling those of yesterday—pulse 90, of moderate strength—fourteen powders taken.

Take of tincture of Jalap an ounce and half,
Syrup six drachms,
Water two ounces.

Make a mixture of which half an ounce is to be given every hour.

Let him have a pound of porter, in place of the wine whey.

—— 9th. Alvine discharge has been scanty, and of a dark brown colour—complains still of occasional pain of abdomen—irregular motions in appearance nearly the same, but by account less frequent, less violent, and of shorter duration—has taken only about half of the mixture, and nourishment is almost entirely declined—mouth does not appear affected.

Let him use the tepid bath twice or thrice a day, and repeat the submuriate of quicksilver as above prescribed.

——— 10th. Has had the bath twice, which he bore well—one pretty copious consistent green coloured and fetid stool—seven powders taken—mouth sore with mercurial fetor—has taken more nourishment—irregular convulsive motions as described yesterday.

The tepid bath to be continued, morning and evening.

Repeat the mixture with the tincture of jalap, as above prescribed.

——— 11th. One dark coloured consistent fetid and rather scanty stool since yesterday—irregular motions disappeared during the whole of yesterday, and at present affect only the muscles moving the head—pulse good—more nourishment taken, but he has refused altogether the laxative mixture.

Continue the bath. Discontinue the tincture of jalap.

——— 12th. Has had two stools of more natural appearance, and less fetid than hitherto—irregular motions continue, but are still less frequent and less severe—spasm resembling tetanus, by account, occurred while in the bath—continues to take food, but declines the beef-tea and porter.

Take of calcined magnesia,

Sugar, of each two drachms,

Water six ounces.

Make a mixture to be given daily in divided doses.

Discontinue the beef broth, the porter and the tepid bath.

A little beef-steak to dinner.

——— 13th. Has taken the mixture sparingly, and has had no stool—irregular motions confined to the muscles moving the head and lower jaw, and appear to be somewhat under command.

Repeat the mixture of magnesia as prescribed yesterday.

Dec. 14th. Mixture, as prescribed, has been nearly taken—no stool—irregular motions as last described—mouth continues affected.

In the evening ten ounces of the common enema are to be injected.

Apply a blister to the neck.

Take of the tincture of jalap,

Water, of each an ounce,

Syrup half an ounce,

To take half an ounce of this mixture now and then.

Discontinue the magnesia.

——— 15th. A copious feculent alvine discharge, of more natural appearance and smell than hitherto—motions continue more moderate, and less frequent in their attack—appetite is improving—blister not yet moved.

Repeat the tincture of jalap as yesterday.

——— 16th. A pretty copious, costive, and light coloured stool—blister answered well—mouth still affected, and irregular motions as last described.

Repeat the mixture with the tincture of jalap as above prescribed.

——— 17th. A copious stool, similar to that of yesterday—irregular involuntary motions by account much declined, with improving appetite—mouth mends.

Repeat the mixture with the tincture of jalap.

——— 18th. Mixture taken—a more copious and clay coloured stool than the two former.

Repeat the tincture of jalap.

——— 19th. Alvine discharge copious, consistent, and clay coloured—motions continue to abate, and appetite still to improve.

Continue the mixture of the tincture of jalap, daily.

Dec. 21st. A stool yesterday, similar to the preceding one—none since.

Add two drachms of the tincture of jalap to the mixture.

Let him have four ounces of port wine.

——— 22d. A stool similar to those lately described—irregular motions are still less frequent and violent, not without suspicion of their being occasionally induced at will—wine is relished.

Continue the wine and also the mixture with the tincture of jalap.

——— 24th. Alvine discharge in abundant quantity, and now of natural appearance—irregular motions have nearly, if not altogether ceased—appetite continues good, and general health is improved.

Continue the wine, also the mixture with only six drachms of the tincture of jalap.

——— 25th. Continues convalescent—alvine discharge is abundant and natural.

——— 27th. Let him have two ounces of the tincture of jalap.

Signa, laxative tincture, from two to three spoonfuls daily.

Dismissed cured.



This case, obstinate and protracted, yielded at length to the efficacy of the purgatives; although, from the

extreme puny and debile state of the child, they might have been supposed to have been improper. The danger was great, from the weakness of my patient, as well as from the violence of the symptoms; but I was not deterred from employing the only remedies that I knew could save him.

Edinburgh, March 2d, 1805.

ANNE ROSS, Ætatis 10.

On the above date I visited this girl.

She had a pale complexion, a dull eye, a vacant expression of countenance. After previous bad health, she had laboured, for six weeks, under involuntary motions of the muscles moving the trunk of the body, and the superior and inferior extremities, which, although slight in the beginning, had now become violent and irregular, and did not cease altogether, during sleep. She could not articulate—muscular flesh was loose, but not wasted—abdomen was hard and prominent—appetite was keener than when in health; and her belly was said to be regular.

Let her take fifteen grains of the mass of aloetic pills, every three hours.

March 3d. Forty five grains of the above mass taken.

One copious, consistent, dark coloured stool.

Continue the aloetic pills.

Light nourishing diet to be used.

——— 4th. Fifty grains of the aloetic mass have been taken.

One stool, consisting of many scybala floating in a dark coloured fetid fluid, has been passed.

Continue the aloetic pills.

——— 5th. I found the involuntary motions as described, but was informed that they had been less violent in the course of the preceding afternoon.

Swelling and hardness of abdomen somewhat subsided—

a scanty alvine discharge has taken place. The stool was fluid, and approaching the natural appearance—forty-five grains of the aloetic mass have been taken.

Continue the aloetic pills.

—— 6th. Forty grains of the aloetic mass have been taken—one stool rather fluid, but, in respect of appearance, more natural than hitherto—appetite still keen—involuntary motions ceased last night, during sleep.

Take of gum aloes one drachm,

Calomel,

Soap of each one scruple,

Mucilage of gum arabic, sufficient to form a mass, to be divided into twenty pills of equal size, of which she is to take two every two hours to the fifth time.

—— 7th. Fourteen pills taken—one copious, consistent, dark, and fetid stool—an easy night—motions suspended during sleep are weaker and more regular this morning.

Let her take what remains of the pills prescribed yesterday.

dark

—— 8th. The six pills taken—two stools of colour, and in part of a clayey consistence, adhering to the sides of the containing vessel—eye is more languid, and cheeks paler than usual. She cannot as yet articulate—an easy night without motion—mouth somewhat pained with mercurial fetor of the breath.

Take of the leaves of senna three drachms,

Cream of tartar,

Extract of liquorice of each one drachm.

Infuse for an hour in twelve ounces of boiling water.

To take a fourth part of the strained infusion every two hours.

Let her have a glass or two of port wine every day.

——— 9th. Alvine discharge similar to the last, but more copious—a quiet night.

Take of calomel six grains,
 Powdered jalap,
 Soap, of each ten grains,
 Mucilage of gum arabic sufficient to make six pills to be taken in the evening.

Take of tartrite of soda four drachms,
 Leaves of senna two drachms,
 Extract of liquorice one drachm,
 Boiling water twelve ounces.

Make an infusion to be taken tomorrow morning at four doses—Continue the wine.

——— 10th. Pills taken—vomiting succeeded the third dose of the infusion, on account of which it was intermitted.

One fluid fetid dark green coloured stool, accompanied with much flatus—fulness of abdomen more subsided—eyes more lively, and some colour in the cheek—a good night—mouth easier,

Continue the wine ; and in the evening let her take the remainder of the infusion.

——— 11th. Infusion not taken—no stool—an indifferent night. She seems, by description, to have laboured for a short time, under general rigidity—and has been given to involuntary laughter—involuntary motions more violent at times—food taken.

Take of gamboge one scruple,
 Soap ten grains,
 Mucilage of gum arabic sufficient to make eight pills.

Let her take two every two hours, and in the evening what remains of the infusion of senna.

———. 12th. Continue the wine.

Being sickened by the pills, four of them only were given, and the infusion was not given—she is much as yesterday; but the rigidity and involuntary laughter have not recurred—no stool.

Take of the tincture of jalap two ounces, of which she is to take a small spoonful, in water every hour.

Continue the wine.

———. 13th. Two thirds of the tincture taken—a fluid stool more natural than hitherto—no sickness—a quiet night—motions less frequent and less violent.

Take of calomel six grains,

Powdered jalap twelve grains,

Make a powder to be taken in the evening.

Take of the leaves of senna three drachms,

Extract of liquorice a drachm,

Infuse in twelve ounces of boiling water, of which she is to take a fourth part every hour tomorrow morning.

Continue the wine.

———. 14th. A quiet night; under greater involuntary agitation than yesterday—gripes and vomiting succeeded the third dose of the infusion—a copious stool of a light green colour, fluid and fetid.

Repeat the powder as yesterday; and tomorrow morning let her take what may remain of the infusion.

Continue the wine.

———. 15th. A copious, partly fluid, green coloured and highly fetid stool—slight nausea after the infusion—an indifferent night—motions continue violent—food taken.

Take of soap,

Aloes, of each a drachm, to be made into thirty pills of which she is to take two every hour.

Let her have the common enema in the evening.
Continue the wine.

March 16th. A better night—scanty evacuation after the injection—a copious feculent one this morning—motions less violent.

Continue the pills as yesterday, and the wine.

Repeat the enema, and let her take of the phosphate of soda two drachms in beef broth, every three hours.

—— 17th. The remaining ten pills, and an ounce and a half of the phosphate of soda have been taken— injection not well received—one scanty, feculent stool—an easy night—fulness of abdomen continues, and motions are less violent.

Let her take of the mass of pills of aloes and colocynth twelve grains every three hours.

Repeat the enema.

Continue the phosphate of soda and the wine.

—— 18th. Half a drachm of the above mass, and half an ounce of phosphas sodæ taken— injection better received—a large feculent stool, in consistence approaching to costive, has been passed—a restless night—motions less violent, and articulation at times distinct—abdomen still full.

Continue the pills, the phosphate of soda, the enema, and the wine as yesterday.

To take twelve drops of the tincture of opium, in the evening.

—— 19th. One scruple of the mass of pills, and an ounce and a half of phosphas sodæ have been taken— injection retained for some time—a stool, copious as that of yesterday—slept during the first part of the night—restless with much agitation, in the morning, but at eleven A. M. more calm, and motions less violent.

Continue the pills, the phosphate of soda, the enema, and the wine.

Omit the tincture of opium.

——— 20th. A restless night—involuntary motions more violent; but countenance clear, and eyes lively—fulness of abdomen continues—feculent discharge of more natural appearance, but more scanty.

To take of the tartrite of potass and soda one ounce in beef broth in divided doses.

Omit the enema, the pills of aloes and colocynth, and the phosphate of soda.

——— 21st. A better night—motions more staid—a copious alvine evacuation, somewhat costive—fulness of abdomen not diminished—food and wine taken.

Let her take three pills of aloes and calomel as prescribed on the sixth day of the month.

Continue the wine.

Repeat the tartrite of potass and soda as yesterday.

——— 22d. Nearly in the same state as yesterday.

Continue the pills, the tartrite of potass and soda, and the wine as yesterday.

——— 23d. A restless night—motions more irregular and violent—a scanty and unnatural stool—fulness of abdomen continues—looks improve—but she appears to be thinner, and muscular flesh to be more flaccid.

Let her take two of the pills of aloes and calomel every two hours—also an ounce of the tartrite of potass and soda, in beef broth in divided doses.

——— 24th. An indifferent night, but motions more staid. Fulness of abdomen continues—a copious alvine discharge, partly of a natural, and partly of a clayey tough consistence—six pills and the Rochelle salts taken.

To take of the pills of aloe and calomel, three every two hours to the third time—also an ounce of the tartrate of potass and soda in beef broth in divided doses.

Continue the wine.

March 25th. A better night—motions more staid, cease now altogether during sleep—articulation improves, and looks continue lively—fulness of lower abdomen unchanged—a copious alvine discharge, feces are more natural, hard, and in detached pieces, something resembling scybala.

Let her take eight grains of the mass of pills of aloe and colocynth every two hours.

Repeat one ounce of the tartrate of potass and soda.

Continue the wine—omit the pills of aloe and calomel.

——— 26th. A good night—involuntary motions and fulness of abdomen, as last described—seventy grains of the pills, and the Rochelle salts taken.

Copious fluid alvine discharge.

Let her take of the compound powder of jalap, one scruple every three hours.

Repeat the tartrate of potass and soda and also the wine.

Omit the pills of aloe and colocynth.

——— 27th. Three doses of the powder, and the ounce of Rochelle salts taken—copious evacuation of feces, of natural appearance, and for the first time, of natural form—a good night, with much refreshing sleep—involuntary motions less violent than hitherto.

Repeat the compound powder of jalap, as also the tartrate of potass and soda as yesterday—continue the wine.

——— 28th. A good night—motions still less violent, looks are cheerful—a copious, natural, and well-formed alvine discharge.

Let her take of the compound powder of jalap two scruples thrice a day—also of the tartrate of potass and soda an ounce and a half, in beef broth, in divided doses. Continue the wine.

March 29th. Jalap and Rochelle salts taken—a quiet night—motions as yesterday—a natural, but a less formed, and less copious alvine discharge.

Take of the compound powder of jalap two drachms, to be divided into three doses,

Let her take one immediately, and another in the evening; also six drachms of the tartrate of potass and soda in beef broth in the interval.

Continue the wine.

——— 30th. In respect of sleep, motions, and alvine evacuations, as yesterday—appears to lose flesh, and looks are more wan—articulation does not improve.

Take of the powder of jalap one drachm,

Divide into six doses of which she is to take one every two hours.

Let her also take of the tartrate of potass and soda six drachms in beef broth.

Continue the wine.

Omit the compound powder of jalap.

——— 31st. Medicines, wine, and full nourishment taken—wan looks and enfeebled state, continue—a good night, much quiet sleep—motions weaker, and more under command, than hitherto—a very copious alvine evacuation, in part costive, and not so natural in appearance as late ones.

Take of the jalap in powder one drachm and half, divided into six doses, to take one every two hours.

Repeat the tartrate of potass and soda as above, and continue the wine.

April 1st. The salts, and five doses of the powder taken—alvine discharge and symptoms, as yesterday.

Repeat the powder of jalap, also the tartrite of potass and soda. Continue the wine.

——— 2d. Salts and five powders taken—countenance fresh—looks lively—motions still more under command.

Take of jalap in powder two drachms ;

Divide into six doses, to take one four times a day

Repeat the tartrite of potass and soda.

Continue the wine.

——— 3d. The salts and five powders taken—copious, feculent, consistent, and natural alvine discharge.

Continue the wine and the powder of jalap as yesterday.

Omit the tartrite of potass and soda.

——— 4th. Five powders taken—alvine evacuation as yesterday—a quiet night, refreshing sleep—she walks with a steady, but rather feeble gait—involuntary motions, but to no extent, of the superior extremities continue, those of the trunk of the body are gone—fulness of abdomen almost subsided.

To take of the powder of jalap one scruple thrice a day. Discontinue the wine.

Let her be much in the open air, as the weather is fine.

——— 5th. Four scruples of the powder of jalap taken ; sickness and slight vomiting—natural alvine evacuation—fulness of abdomen gone—motions regular and voluntary—power of articulation much recovered—looks lively ; she enjoyed the open air much, and she walked a little.

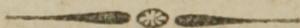
Let her take a scruple of jalap in powder every morning.

——— 9th. Eyes clear—countenance expressive of vivacity—power of articulation recovered—motions regu-

lar and voluntary—daily alvine evacuation in full quantity—stools are formed, consistent, and in all respects natural.

Let her take ten grains of powdered jalap every morning.

April 17th. Finding my patient fully convalesced, the belly regular, the feces formed, and of natural appearance, I recommended exercise in the open air, and fresh vegetables in diet; and I intimated, that I ceased to take farther charge.



On the eighth day of the following month, (May) I passed near to the house where my late patient, Ann Ross lived. Curiosity led me to enquire for her. She was employed in work; she was abundantly muscular and active, and she approached me in a cheerful, playful manner.

This has proved the most protracted case of chorea, under the treatment by purgatives, that has occurred to me; which may be owing, in part, to the duration of the complaint, before I saw the patient, and in part, to her sex. The strong and repeated purgatives that were given, are a proof that the constipation was great; and the almost daily alvine evacuation, and the nature of the stools, shew the accumulation of feculent matter, to have been abundant and offensive. My directions in the conduct of this case, were faithfully complied with, by an anxious and sensible mother, whom I encouraged to persevere in the exhibition of purgatives, by positive assurances, that a perfect recovery was to be obtained; while my little patient was enticed to compliance, by occasional presents, suited to her time of life.

Royal Infirmary, April 25th 1805.

ELIZABETH WEBSTER, Ætatis 9.

Is subject to constant irregular and involuntary motions of both the superior and inferior extremities; but the left arm and leg appear less affected than the right. The trunk of the body is also frequently affected by these irregular motions, and there is constant grinding of the teeth during sleep, when these motions are suspended, and she appears calm and easy.

This complaint has existed for about five weeks, and since the 2d of April she has been under a regular course of purgative medicines, which have had various effects, but have given no relief of symptoms; had two spoiled teeth extracted, and on the 22d instant she passed a worm of the lumbricus kind, about ten inches in length; her appetite is good, and food is relished; her abdomen is soft, without fulness; power of articulation nearly suspended.

Take of submuriate of quicksilver half a drachm,

Loaf sugar one drachm.

Let them be thoroughly rubbed together and divided into ten equal powders. To take one every two hours to the fifth time.

Take of the tartrate of soda and potass six drachms,

Beef broth one pound.

Make a solution to be taken in divided doses.

——— 27th. A rather scanty alvine evacuation, fluid, partly of natural appearance, and partly of a greenish colour, not fetid—has passed a bad night, with but little

sleep—five of the powders, and about half of the beef-tea taken.

Continue the submuriate of quicksilver as yesterday.

Take of the tincture of jalap,

Syrup, of each three drachms,

Water one ounce.

A draught to be made and taken tomorrow morning.

Discontinue the tartrite of soda and potass.

April 28th. Has had three stools, of a deep green colour and fetid—the discharge upon the whole is scanty—has passed a better night, and this morning the involuntary motions are less general and less violent—vomiting succeeded the first dose of the mixture—five powders taken.

Take of powdered jalap,

Brown sugar of each a drachm,

Rub intimately together and divide into twelve doses.

To take one every two or three hours; the medicines above prescribed being omitted.

——— 29th. Has passed a quiet night, enjoying soft sleep—has had ten stools—the feces upon the whole are abundant, of a light greenish colour, partly fluid, and partly somewhat in separate knots, approaching in appearance to scybala; these evacuations are highly fetid—the convulsive motions are still more stayed and less violent—nine powders, taken without reluctance, have been given.

Continue the powder of jalap as prescribed yesterday.

——— 30th. Alvine discharge, in respect of quantity, cannot be ascertained, feces having been voided without notice in bed; but on the whole they have not been so abundant as yesterday; they are of a lighter colour and fetid—involuntary motions still less violent—appetite for food abates—thirsty—articulation still suspended, and deglutition is difficult.

May 3d. A stool previous to the injection, pretty copious, of a dark green colour, and fetid; a smaller one after the house injection; those of beef-tea have been retained—has had a better night, and appears somewhat revived—motions as described—wine relished, and a little beef-tea has been swallowed.

Take of calcined magnesia two drachms,
 Powdered jalap one drachm,
 Mucilage of gum arabic,
 Syrup,
 Cinnamon water, of each half an ounce.

After they are well mixed, add

Water four ounces and half. To give an ounce of the mixture well shaken thrice a day.

Continue the wine and the beef broth as yesterday.

—— 4th. Three doses of the mixture taken—injections of beef-tea have been continued and retained—some beef-tea and a little food have also been taken—wine is relished—one pretty copious green coloured and fetid stool passed in bed—excoriations mend.

Continue the mixture of magnesia, the wine, and the enema of beef broth.

—— 5th. Four stools, of a dark green colour and fetid smell; the evacuation upon the whole has been copious, and passed in bed—spasmodic motions cease altogether at times, and again return with some violence—has passed an indifferent night—appetite mends.

Continue the wine, the beef broth and the mixture of magnesia.

A night nurse.

—— 6th. Has passed a good night—involuntary motions as last described, with longer intervals between different attacks—appetite more improved, and excoriations more disposed to heal—four alvine evacuations, consistent, dark, and fetid; on the whole in small quantity.

Take of the submuriate of quicksilver,
Sugar each six grains.

Make a powder to be taken in the evening.

Continue the mixture of magnesia as above prescribed,
adding a drachm of powdered jalap.

Continue the wine and the beef broth.

May 7th. Has passed an easy night—irregular spasmodic motions are now but little perceived—appetite continues to improve—expression of countenance is more lively—pulse calm, and firmer than hitherto—excoriations healing—alvine evacuation of a lighter colour, less fetid, and also less copious than for some days past—calomel given, and mixture as prescribed taken.

Take of the phosphate of soda four drachms to be taken
in six ounces of beef broth.

Continue the mixture of magnesia and jalap.

Let her have the wine and the beef broth as above prescribed.

——— 8th. Involuntary motions nearly gone—appetite good—a quiet night—sensible to the stimulus of urine and of feces; the latter has been passed in abundance, is partly fluid and feculent, partly scybalous and of a greenish colour, and still fetid—wine is relished—salts and mixture taken, as prescribed.

Repeat the phosphate of soda.

Continue the mixture of magnesia and jalap, and also the wine.

Discontinue the enema of beef broth.

——— 9th. Alvine evacuation more in quantity, feculent, of natural colour, with less fetor—irregular motions nearly, if not altogether gone—good night—mixture, and salts, and full allowance of nourishment taken.

Let her have but four ounces of the port wine, with which four ounces of water are to be mixed.

The cathartics to be still continued.

May 10th. Involuntary motions have not recurred—deglutition is free, and she begins to articulate—stools feculent, and natural in appearance and smell.

Continue the wine as also the mixture of magnesia, omitting the powdered jalap.

Omit the phosphate of soda.

——— 11th. The alvine discharge since yesterday is abundant, fluid, of a greenish colour, and more fetid than the last—excoriations are healed—pulse firm and regular—disposition to coldness of the surface has gradually yielded—skin now of natural heat.

Take of the submuriate of quicksilver,

Sugar of each five grains.

Make a powder to be taken early tomorrow morning.

Continue the mixture of magnesia.

——— 12th. A more copious and more natural stool—continues convalescent.

Let her have every morning fifteen grains of powdered jalap with as much brown sugar.

Discontinue the mixture of magnesia and the wine.

——— 14th. The alvine evacuation of yesterday and of this day abundant, fluid, and without peculiar fetor—pulse regular and firm—articulation not farther recovered.

To take six grains only of the powdered jalap daily.

——— 17th. For two mornings laxative powder not given—alvine evacuation continues sufficiently copious, of natural appearance, and fluid—appetite good, but flesh and strength are slowly recovered—articulation still suspended—pulse calm—good nights.

Discontinue the powder of jalap.

——— 18th. Pretty copious alvine discharge from six motions, more fetid than for two days past—considerable fulness of abdomen is still perceived.

Take of the submuriate of quicksilver,
 Powdered jalap,
 Sugar of each eight grains.

Make a powder to be taken early tomorrow morning.
 Let her have four ounces of port wine.

May 19th. A more copious alvine evacuation, still fetid, with slight fulness of abdomen—spontaneous vomiting of contents of stomach this morning, preceded by sickness—wine relished.

Let the powder prescribed yesterday be repeated tomorrow morning. The wine to be repeated.

——— 20th. Since taking the powder, a rather scanty alvine evacuation has taken place: it is feculent, fluid, and fetid—fulness of abdomen continues—wine relished.

Take of the infusion of senna two ounces,
 Extract of liquorice a drachm.

Dissolve, to be taken immediately as a cathartic.

In the evening give twelve ounces of the common enema.

——— 21st. The infusion was taken, and the injection was soon returned without feces—the alvine evacuation on the whole since yesterday has been copious, and fetid, and of a dark colour, with scybala intermixed; for some days she has appeared more wan, and seems to have lost in respect of flesh—the wine is relished, and food taken—no return of involuntary motions.

Take of the infusion of senna two ounces and half.

Tincture of jalap three drachms,
 Extract of liquorice a drachm.

Make a mixture of which she is to take an ounce every hour.

In the evening throw up six ounces of the fetid enema.

——— 22d. The alvine evacuation, in respect of quan-

tity and appearance, as yesterday, unless perhaps it is more of the natural colour; it contains a few scybala, and is still fetid—the injection was retained nearly five hours, when it was voided, accompanied with much flatus—pulse towards 90, and firmer—abdomen seems less distended—food and wine relished.

Repeat the infusion of senna with the tincture of jalap; also the fœtid enema in the evening.

Continue the wine.

Omit the other medicines.

May 23d. The alvine evacuation is more copious, of a darker colour, and fetid—the injection, retained four hours, was voided along with feculent matter and much flatus—fulness and tension of belly continue to abate—appetite for food flags, but wine is relished—pulse about 90, and feeble—she seems to lose in respect of flesh and strength.

Let her have immediately two pounds of beef broth; of which six ounces are to be injected as an enema every two hours.

Let her take the compound bolus of jalap late at night; and tomorrow morning let the infusion of senna with the tincture of jalap be repeated.

Continue the wine.

——— 24th. Alvine evacuation, since yesterday, is less copious, fluid and fetid—injections of beef-tea retained—pulse firmer, and more food taken.

Repeat the fœtid enema as above prescribed in the evening; let her have the draught of castor oil tomorrow morning.

Continue the wine and the enemata of beef broth.

——— 25th. A feculent stool, with much flatus, in about half an hour from receiving the injection; another since morning; on the whole, the alvine discharge is

more copious, fluid, and of nearly natural colour, but fetid—appetite continues good—pulse regular and firm—fulness of abdomen more subsided—had a visit from a brother and sister, both children, in whose company she appeared delighted, and, by account, conversed with them freely and easily; in their absence, she resumes her usual dulness and taciturnity.

Take of the purified black oxide of iron six grains,
Powdered jalap,
Brown sugar of each four grains.

Make a powder to be taken thrice a day in any vehicle.
Repeat the wine.

Discontinue the enemata of beef broth.

May 28th. The alvine discharge, from the 25th till yesterday, has been nearly as described, but rather scanty—no stool these last 24 hours—abdomen seems fuller—feebleness continues—food and wine relished.

Let her have eight of the aloetic pills; to take two every two hours.

Take of the tincture of assa foetida two drachms,
Warm water eight ounces, for an enema to be injected to morrow morning, unless the bowels should be previously moved.

Discontinue in the mean time the powder of the black oxide of iron.

Continue the wine.

——— 29th. Pills being taken in the course of the night, a copious, and, for the first time, formed stool was voided—the injection given, and as yet without farther effect—fulness of abdomen, and particularly of the epigastrium, continues—pulse quick, soft and tolerably firm.

Repeat the aloetic pills; and after they are taken repeat also the foetid enema.

May 30th. A scanty stool in the afternoon of yesterday; six have since occurred, giving on the whole a copious feculent, fluid, and fetid discharge—the injection was returned accompanied with much flatus—fulness of abdomen continues—appetite good.

Let her have four of the aloetic pills in the evening; the fœtid enema to be repeated tomorrow morning.

——— 31st. Has had several stools—the evacuation on the whole copious, fluid and feculent, and without peculiar fetor—belly is less full—articulations distinct, and she has become cheerful and playful.

Let her have only three aloetic pills in the evening.

June 1st. Several natural stools—fulness of abdomen continues—in other respects apparently well.

Two of the aloetic pills only to be given.

Continue the wine.

——— 2d. Repeat the aloetic pills and the wine.

——— 3d. To have only one aloetic pill in the evening.

——— 4th. Repeat the aloetic pill.

——— 5th. Fulness of abdomen much subsided—stools natural—in all respects convalescent.

Let her have an aloetic pill every second night.

Discontinue the wine.

——— 8th. Regular and natural stools—flesh and strength regained in some degree.

——— 11th. Has continued well.

Let her have twenty four of the aloetic pills.

Signa, one to be taken occasionally, so as a regular state of the bowels may be insured.

Dismissed cured.

This case has proved equally obstinate with that of Ann Ross; at the same time, it is one in which I had the greatest reason to despair of success. I lost all hope more than once; and I expressed myself to this purpose to several gentlemen who were witnesses of my conduct, in order to prepare them for my failure. But the steady perseverance in the only means of safety, snatched my patient from danger, and must convince every unprejudiced person of the utility of purgative medicines in chorea.

Royal Infirmary, Feb. 3d, 1806.

ELIZABETH WEBSTER, Ætatis 10.

For some days past she has complained of general uneasiness, and some degree of lassitude, and yesterday the muscles of her arms were observed to be agitated with irregular and involuntary motions—her looks are rather wan—her lower abdomen feels hard and prominent, and, by account, her belly has been irregular for some time past, owing to the indisposition of her grandfather, with whom she has lived since her dismissal in June last—her appetite is somewhat voracious.

Let her have twelve of the pills of aloes and colocynth.
To take two every two hours and tomorrow morning,
after having taken the pills,
Infusion of senna two ounces.

Feb. 4th. Pills and infusion have been taken and as yet without effect.

Take of the tartrate of soda and potass four drachms,
Compound tincture of senna half an ounce,
Infusion of flaxseed three ounces.
Make a solution to be taken immediately.

——— 5th. The solution taken, was followed by a pretty copious costive lumpy stool, but of natural colour and not fetid—fulness of abdomen perceptibly less.

Let her take late at night six grains of the submuriate
of quicksilver,
Powdered jalap fifteen grains.

Tomorrow morning early three ounces of the infusion
of senna, in six ounces of the infusion of flaxseed.

Feb. 6th. Only one stool, rather scanty, soft and of natural appearance.

——— 7th. Has had a more copious stool, consisting partly of fluid feces, and partly detached, consistent and rather to appearance hard lumps—in other respects feces are natural.

Take of powdered jalap a drachm

Brown sugar half a drachm.

Rub thoroughly together and divide into six doses, of which she is to take one every three hours.

——— 8th. Sickness and lassitude are abated—countenance florid and of healthy appearance—by account is more active, with less tendency to irregular motions of the right arm and leg—appetite is more natural—alvine evacuation since yesterday resembles that last described—all the powders have been taken—temporary sickness followed the exhibition of the last.

Take of water five ounces,

Loaf sugar two drachms,

Tincture of jalap an ounce.

Make a mixture of which she is to take one ounce every two hours.

Discontinue the powders of jalap.

Animal food to dinner.

——— 9th. Sickness and spontaneous vomiting, attributed to the mixture—alvine evacuation has been less abundant, and is fluid.

Discontinue the mixture with the tincture of jalap.

——— 10th. No stool—involuntary motions apparently gone.

Let her have three of the aloetic pills in the evening;

Two ounces of the infusion of senna early tomorrow morning.

Feb. 11th. A scanty, but in other respects natural stool.

Let her have four ounces of port wine daily.

Repeat the cathartic medicines as yesterday.

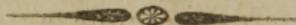
——— 12th. Continue the cathartic medicines.

———. 13th. Alvine evacuation has been fluid, otherwise natural, and she has continued free of complaint.

Take of powdered jalap four drachms, to be divided into eighteen equal doses.

Laxative powders; one to be given at any time, when appearance of costiveness takes place.

Dismissed cured.



In this case we have an example of the facility with which chorea is cured, when it is of short duration. Contrasted with the former, and immediately preceding case of the same patient, it clearly proves the truth of this observation.

Dr. James Home, Professor of Materia Medica and of Pharmacy, in the University of Edinburgh, has favoured me with the following valuable and interesting communication. His candid and polite manner of making it, adds to my obligations to him on this occasion.

Edinburgh, Oct. 11th, 1805.

DEAR SIR,

I HAVE heard with great pleasure, that you are now publishing an account of the good effects of purgatives, in the cure of some diseases. I take the liberty of sending you therefore, an abstract of two cases of chorea, which occurred in the clinical ward, and which shew in a very striking manner, the good effects of purgatives in the cure of this disease. To these cases you are certainly well entitled, because, as this mode of curing chorea was entirely new to me, and contrary to my opinion of the nature of the disease, the treatment of these cases, was, if you recollect, entirely conducted upon your suggestion. I intended also to have sent you a very remarkable history of the good effects of purgatives, in a very bad case of ty-

phus, in which they were employed at your suggestion, but unluckily I cannot at present find it.

I am,

Dear Sir,

Your most obedient Servant,

JAMES HOME.

To Dr. James Hamilton, }
Physician, Edinburgh, }

MARGARET JAMESON,

Was admitted into the clinical ward, upon the 10th of May, 1804. She was sixteen years of age, and of a sanguine temperament. About three months ago, previous to which she had been in good health, some involuntary motions were first observed, in her left arm and leg. These, about a fortnight ago, changed to the right side. At present, these involuntary motions are so considerable, that she can hardly walk, and cannot feed herself. They cease during sleep, which however, is much disturbed. Pulse 84—tongue clean—appetite impaired—thirst considerable—belly costive. The menses have appeared once only, and in small quantity, about a month ago. She had used a great variety of remedies, of the nature of which she was ignorant, without receiving any benefit.

A compound, consisting of the submuriate of mercury and of jalap, at first in the proportion of three grains of the former, and ten grains of the latter, was given. This, however, producing no effects, the quantity of the submuriate of mercury was increased to five grains, and that of the jalap, to fifteen grains. It was repeated four times in eight days. It never operated above four times. The feces were at first natural: they afterwards became black and fetid; and then again assumed a natural appearance. The involuntary motions gradually became better: they ceased altogether, in eight days; and on the tenth day, she was dismissed, cured. As the cure, however, might have been temporary only, she was de-

sired to return frequently to the Infirmary. But, although she presented herself often, she remained entirely free of the disease; and her countenance exhibited the appearance of health and vigour.

MARY MURRAY.

Aged 15, and of a delicate, irritable habit, was admitted on the 8th of June, 1804. In her, the disease had commenced about three months before, with pains in her legs and arms. These pains she ascribed to cold, and they were removed by laxatives, and external applications. After this, involuntary motions gradually came on, at first in the right leg, and then in other parts. At the time she was admitted, the muscles of the head, of the lower jaw, of both superior extremities, and of the right leg, were affected, so that she could hardly walk, she could not feed herself; and could not speak intelligibly. She was affected also with frequent headaches; with great imbecillity of the mental faculties; with frequent fits of crying, without any evident cause; and with swelling of the abdomen, towards evening. Pulse about 80—tongue clean—appetite good—belly very bound. The menses had never appeared.

To this patient, five grains of the submuriate of mercury, and fifteen grains of jalap, were given in the form of bolus, every day, for fourteen days. After this, they were given every second day only, for six days. During these three weeks, this medicine had the effect of producing three or four stools every day. At first, the stools were of a natural appearance; afterwards they became black, and very fetid; gradually, however, they assumed a natural appearance. During this time, she became stronger. Her countenance assumed a healthy appearance, and the involuntary motions gradually diminished, so that she was able to walk more steadily, to carry liquids to her mouth, and to speak more distinctly.

As the progress of the cure appeared to be slow, a compound, consisting of equal parts of the *cinchona officinalis*, and of the *valeriana silvestris*, was given in the quantity of half a drachm twice a day. At the same time, the above purgative was occasionally prescribed, whenever there was any tendency to costiveness, or when the stools were not of a natural appearance. Under this plan, which continued three weeks, this patient gradually got better, so that when she was dismissed, after having continued in the Infirmary about six weeks, the involuntary motions had entirely ceased, and she was in perfect health.

I have had favourable accounts of the efficacy of purgatives in chorea from Dr. Freer, Professor of the Practice of Physic in the University of Glasgow, from Dr. Rhind, Physician in Stirling, and from Dr. Wightman, Physician in Dunbar: This last gentleman, in a letter of date 9th of January, 1806, addressed to me, *inter alia* thus expresses himself: "I have derived considerable instruction from your late valuable treatise on the use of purgative medicines in different diseases; I have been successful in curing a very obstinate case of chorea by this mode: it required a prosecution of the course for about six weeks, and had it not been for the encouragement, which you held out in the cases you detail, I frankly acknowledge I should have abandoned it, before the cure was completed.

APPENDIX.

No. VIII.

CASES OF HYSTERIA.

*Royal Infirmary, Sept 12th. 1803.**JEAN DOUGALD, Ætatis 45.*

Seven days ago, was attacked with pain of abdomen, borborygmi, and the sense of a ball moving up towards her throat, occasioning the feeling of suffocation, after which she became insensible, and continued in that state for some time ; on recovering she had frequent eructations of flatus. Since that time, she has had several fits of the same kind. Pulse about 70—belly costive—catamenia have ceased.

Let her have the bolus of jalap and calomel.

——— 12th. One costive stool.

Repeat the bolus of jalap and calomel.

——— 13th. One stool more fluid and natural—pain

of abdomen, eructations, and hysteric symptoms have not returned.

Repeat the bolus of jalap and calomel.

Sept. 14th. Let her take half an ounce of the solution of assa fætida thrice every day.

——— 23d. Belly has been regular, stomachic symptoms have not returned.

Tincture of assa fætida two ounces.

Signa, fifteen drops twice a day in a glass of water.

Dismissed cured.

Royal Infirmary, March, 16th 1805.

JEAN LAWRIE, Ætatis 17.

Is subject to violent involuntary and irregular motions of the trunk and extremities, which generally last from five to ten minutes, and sometimes return several times successively, without any apparent cause. Complains of severe headach during the intervals, and flying pains in her loins, breast, and extremities. Pulse at present 104 and weak—face flushed—skin hot, alternating with a sense of cold—belly rather bound—catamenia, which were suppressed for upwards of four months, returned about eight days ago.

Was seized yesterday, while walking, with pains in the breast and back, faintness and difficulty of respiration. These continued for about half an hour, and were succeeded by a fit, as above described. Has been subject to headach, vertigo, and stomach complaints, for about three years.

Let her have immediately the compound bolus of jalap, and in four hours afterwards, the common enema, unless the bowels should be previously moved.

——— 17th. One costive, but in other respects natural stool—tongue clean—pulse calm—headach continues, with flushings of face—three attacks of spasmodic affection, as described, but in a slight degree, since admission—has passed an easy night.

Let her take two of the pills of aloes and colocynth every four hours untill the bowels are moved.

March 18th. Twelve pills taken—no stools procured—headach is relieved—one fit of short duration, resembling hysteria.

Let her have the purging enema immediately; and early tomorrow morning the compound bolus of jalap with eight grains of calomel.

——— 19th. Several copious dark and fetid stools after the injection—none since the bolus of this morning—headach is relieved—no return of paroxysm.

Repeat the purging enema immediately.

——— 20th. Two slight fits—several stools.

Let the compound bolus of jalap be repeated tomorrow morning.

——— 21st. No recurrence of fits—pain under the sternum, increased by the recumbent posture, continues—headach gone—free passage of belly—pulse calm.

Apply a blister to the painful part of the sternum.

——— 23d. Blister has risen well, and pain is relieved—no stool—no recurrence of fit.

Let the compound bolus of jalap be repeated tomorrow morning.

——— 25th. Has had full passage of belly—free of complaint.

Let her have eighteen pills of aloes and gamboge.

Signa. One or two occasionally at bed-time.

Dismissed cured.

Royal Infirmary, January 2d. 1806.

ISABELLA BLACK, Ætatis 18.

Complains of severe pain at the scrobiculus cordis, slight headach and nausea, with passing sickness—she describes the pain as if the sides of the chest were drawn together, which continuing for some time relaxes, and she has considerable ease for a few minutes, when the pain returns with the same uneasy feeling—pulse about 80 and full—tongue white—belly slow. This affection came on suddenly about five hours ago when carrying water up a stair, but says she has been subject to similar attacks for some time,

To take the compound bolus of jalap.

Jan. 3d. As yet no stool.

Let her have immediately a draught of one ounce of castor oil.

And in the evening the common enema, if necessary.

——— 4th. Headache and sickness—gastrodynia, with sense of drawing or tightness, are abated—one return only of spontaneous vomiting—pulse calm—tongue clean—three copious stools of natural appearance, but fetid smell—an easy night.

Let her have eighteen of the aloetic pills, to take three every three hours untill the bowels are again unloaded.

——— 6th. During the night betwixt the 4th and 5th, she complained more of gastrodynia, and she had several attacks of syncope with feeling of occasional globus. All these symptoms continued to distress her in the course of yesterday. The pills last prescribed having been taken without effect, the following solution was given.

Take of the infusion of senna four ounces,
Tartrite of potass and soda an ounce and half,
Infusion of flaxseed eight ounces.
Mix.

She passed an uneasy night, but has been free of complaint since morning. Copious dark coloured, and fetid alvine discharge has been procured.

Let her take six aloetic pills.

Tomorrow morning early three ounces of the infusion of senna in six ounces of infusion of flaxseed.

Jan. 7th. No stool. Infusion not given—no complaint. Let her take immediately the infusion of senna as prescribed yesterday.

—— 8th. Has had free passage of belly.

Let her have twelve of the pills of aloes and colocynth.

Signa, purgative pills—one or two at bed time.

Dismissed cured.

Royal Infirmary, January 25th, 1806.

SARAH MACMILLAN, Ætatis 14.

On the afternoon of the 23d instant, she was suddenly seized with sickness and fainting, and remained for some time in a state of insensibility—when she began to laugh, cry, and scream alternately, and the whole body became agitated with violent convulsive motions—in the course of three hours she became calm, and seemed to fall into a sleep, but was observed to sob and sigh much—when she awoke, she complained of headach, and an uneasy feeling about the præcordia. Yesterday she was again attacked in a similar manner, but the paroxysm was preceded by borborygmi and globus, and during the whole of last night the fits were almost constant—pulse at present 66—tongue white—belly said to be rather slow, she complains of severe headach and pain of loins—catamenia appeared for the first time about ten months ago, and have been regular and are now present. During the first paroxysm she took a draught containing camphor, but without relief.

Let her have immediately the compound bolus of jalap.
Tomorrow morning three ounces of the infusion of senna.

——— 26th. Previous to the exhibition of the infusion of senna, a large, costive, dark coloured stool took place—passed an easy night without farther attack of hysteric paroxysm—the last occurred yesterday about one o'clock afternoon.

Let the compound bolus of jalap with ten grains of calomel be repeated late at night.

The infusion of senna to be repeated tomorrow morning.

Jan. 27th. Repeated and severe hysteric paroxysms in the course of last evening—complains of headach—eyes appear dull—pulse about 80 and soft—no alvine evacuation since the exhibition of the bolus and infusion of senna—after the cessation of the paroxysms she passed an easy night—fluunt catamenia.

Let her have the purging enema immediately.

Let her have eighteen of the aloetic pills—to take three every three hours. And four hours after having taken the pills, the purging enema to be repeated, unless the bowels should be previously fully evacuated. Four leeches to be applied to each temple.

——— 28th. Complains still of headach—but eyes are less heavy—pulse calm—no return of hysteric paroxysm—she has passed an easy night—some food taken—injection of last evening was followed by copious alvine evacuation at different motions—at first the feces appeared costive, the latter ones were less so, but formed—the whole of a dark colour and fetid—the pills have been taken without farther effect—leeches did not succeed well.

All the prescriptions to be repeated as yesterday,

——— 29th. Alvine evacuation since yesterday sufficiently abundant—of a whitish colour, and seemingly of a clayish consistence—headach gone—eyes are lively—two slight hysteric paroxysms last evening.

Let her have the compound bolus of jalap with eight grains of calomel late at night.

The draught with twelve drachms of castor oil tomorrow morning.

——— 30th. No return of hysteric paroxysm—alvine evacuation plentiful, somewhat scybalous, otherwise natural.

Let her have a drachm of the compound powder of jalap every morning.

Feb. 1st. As yet no stool—catamenia pridie defluerunt.

Let her have immediately four ounces of the infusion of senna ;

In the evening four of the aloetic pills.

Let the compound powder of jalap be repeated tomorrow morning.

——— 2d. Pretty full alvine evacuation—feces consistent, formed, and nearly of natural appearance—free of complaint.

Let her have half an ounce of jalap in powder divided into eight doses.

Signa, laxative powders—one every morning.

——— 3d. Dismissed cured.

APPENDIX.

No. IX.

CASES OF TETANUS.

*Royal Infirmary, Aug. 27th 1805.**DAVID M'KENZIE, Ætatis 66.*

COMPLAINS of most excruciating pains in his legs, thighs, and arms, and about the scrobiculus cordis; the muscles of his legs and thighs feel hard and contracted, and are frequently agitated by violent, irregular, and involuntary motions. The muscles of the thorax and abdomen are occasionally affected with the same involuntary motions, giving a sense of suffocation, and severe pain. Has sometimes a difficulty in swallowing—pulse 90, weak and hard—features much shrunk—tongue foul—complains of constant purging, with gripes—is unable to articulate, but in a low whisper.

Says, that last night, about twelve o'clock, when asleep, he was roused with severe pain in his legs; they were contracted, and he was unable to stretch them out. In about an hour, the pain became easier, and he could move

them a little, but the pains and spasm have continued to recur every half hour since.

Let the anodyne enema with the addition of eighty drops of the tincture of opium be injected immediately.

Aug. 28th. Last night, about the time he was first seized, the spasmodic action became very violent. The muscles of his legs were much agitated, and contracted, and the knees drawn up towards the abdomen; he was unable to speak or move; the injection, which was given about two hours before, was retained only a few minutes

Take of camphor ten grains,

Sugar two drachms,

Rub intimately together, then add

Mucilage of gum arabic one drachm and a half.

Water an ounce.

Make a draught to be taken immediately.

—— 28th, Noon. Since the exhibition of the draught, he has been quiet, and slept some; the spasmodic action of the muscles of the lower extremities has recurred, but not so severely—complains still of pain about the scrobiculus cordis—thirst urgent—diarrhœa continues—has passed only about four ounces of urine, since admission.

Continue the draught with camphor.

Take of tartrate of soda and potass six drachms,

Infusion of senna two ounces,

Water six ounces;

Make a solution to be taken immediately.

Let him have eight ounces of port wine.

—— 29th. Paucity of urine, and prevalence of diarrhœa continued; the stools were scanty, white coloured, and fetid—since the exhibition of the cathartic, a very copious alvine evacuation has taken place; it is fluid, of

a mixed greenish and clayish colour, of a somewhat acid smell, and otherwise of a peculiar fetor.

Two camphor draughts have been given, and wine has been used—pulse is less hard—cramps of the lower extremities occasionally recur since morning, but the involuntary action of other muscles has ceased—countenance lightened—he has enjoyed some sleep.

Let the cathartic solution be immediately repeated, four hours after having taken the above, let him have the purging enema; after the operation of which let him have a draught with forty drops of the tincture of opium.

Let him have two pounds of beef broth.

Repeat the wine.

Discontinue the draught with camphor.

Aug. 30th. Injection given—was soon returned—he has had very copious alvine evacuation—fluid, of a dark-green colour, and of a high, and peculiar fetor—pain of epigastrium gone—two slight attacks of spasm of the lower extremities, last night—no other irregular muscular action has occurred—tongue clean and moist—pulse feeble—a peculiar fulness, and general tension of abdomen is perceived—wine has been relished, and he has passed a good night.

Let him have twelve aloetic pills; to take three every two hours; after these have been taken, let him have the common enema, unless the bowels should be previously evacuated.

Repeat the wine and the anodyne draught.

——— 31st. Pills and injection given—feculent discharge less copious than yesterday, and less fetid; is of a clay-colour, partly fluid, and partly scybalous. Fulness and tension of abdomen gone—a slight return of spasm of the lower extremities was of short duration—surface

inclines to be cold—pulse feeble—drowsy, with pain across the forehead—pills taken.

Let the legs be fomented, every three hours, for the space of half an hour.

Continue the beef broth and the wine.

Omit the anodyne draught.

Sept. 1st. Has had farther alvine evacuation—fluid, of a more natural appearance, without fetor or scybala—spasmodic affection has once appeared, and has been slight—surface warm—pulse firmer—painful affection of both eyes—headach and drowsiness gone.

The eyes to be washed now and then with a solution of the sulphate of zinc.

Let him have two scruples of the compound powder of jalap tomorrow morning.

Continue the wine.

——— 2d. Pain and inflammation of eyes are relieved—one short and slight return of cramp of the lower extremities—countenance has a more natural, and more lively appearance—appetite improving—no stool.

Repeat the compound powder of jalap immediately, and in the evening if necessary, let him have the common enema.

Repeat the wine.

——— 3d. Has passed an indifferent night—has had longer and more severe attack of cramp in the lower extremities—a costive, green, and fetid stool followed the injection, when previous uneasiness subsided. He appears more languid, but pulse continues firmer, and surface warm—tongue clean—appetite declines.

Let him have six ounces of the infusion of senna.

One ounce to be taken immediately and repeated every hour. After the infusion has been taken let him again have the common enema.

Repeat the wine.

Sept. 4th. No return of spasmodic affection—has used more food—affection of eyes gone, and looks are improved—has had copious, and more natural than hitherto, alvine evacuation, upon the injection being given, the infusion having been previously taken—complains of gripes.

Take of the mucilage of gum arabic half an ounce,
Magnesia two drachms,
Powdered jalap a drachm,

After they are well mixed pour on six ounces of water.

Let him take an ounce of the mixture well shaken every two or three hours.

Let him have a pound of port wine daily.

——— 5th. Fluid and natural alvine evacuation in full quantity—gripes continue.

Let him take a dose of the mixture of magnesia every four hours—the thebaic pill in the evening.

Repeat the wine.

——— 7th. Gripes are gone—spasms have not recurred—alvine evacuation, natural and plentiful—appetite good.

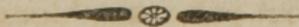
Discontinue the medicines and the wine.

——— 9th. Belly rather open.

Let him have three ounces of lime water four times a day.

——— 13th. Belly has been regular.

Dismissed cured.



In this case the early exhibition of camphor was accidental; and the use of it was speedily relinquished. I ordered laudanum in compliance with common custom;

but we may gather from the report of the 1st September, that it was given with no good effect. The small quantity of wine which I prescribed, respected the general debility and exhausted state of the poor patient, suffering under a painful disease ; I did not view it in the light of a medicine operating towards a cure, which I conceive to have been effected in this case, by the purgative medicines alone.

Royal Infirmary, 2d Nov. 1805.

ALEXANDER BULLER Ætatis 35.

Twice in the course of last night, and once since morning he has been affected with a violent spasmodic action of the muscles of the thorax and lower extremities, during the continuance of which he was unable to speak or move, and breathed with much difficulty. The muscles of the extremities felt like stretched cords with several small knots in different parts. There were also two lumps near the scrobiculus cordis evidently formed by the contraction of the muscles—these lumps on the chest were only of momentary duration, but returned frequently for the space of five or six minutes. The affection of the extremities was stationary for that period—he complains of constant pain in his arms and shoulders impeding the free motion of the joints, and after each attack of the cramp he had frequent flatulent eructations—pulse quick and sharp—tongue foul—belly very costive.

Has been in the house for about a month for a slight venereal affection, for which he used mercury in the form of ointment—the chancres have healed, and his mouth which was affected is now quite well—as he complained of costiveness, he was ordered yesterday, previous to the present complaints,

A drachm of the compound powder of jalap,
and in the course of the night he had three fetid, dark coloured and costive stools.

Take of the infusion of senna five ounces,
Compound tincture of senna one ounce,
Infusion of flaxseed six ounces.

Make a mixture of which he is to take three ounces every hour untill the bowels are moved, and in the evening, unless the intestines should be completely evacuated let him have the purging enema.

Nov. 3d. One slight attack of pain of breast, with affected respiration as described, and also of the left lower extremity—no farther recurrence of spasmodic affection—pain of superior extremity continues, with swelling of left wrist since yesterday—pulse quick and full—infusion being given, a copious costive light coloured stool ensued—injection being also given, was followed by a fluid dark coloured alvine evacuation.

Take of the draught of castor oil, (containing one ounce of the castor oil,)

Compound tincture of senna an ounce.

Make a mixture to be given immediately, and in the evening, if necessary, let the purging enema be repeated

Let four leeches be applied to the painful wrist.

——— 4th. No return of spasm—wrist less pained—tongue clean—pulse calm—has had full alvine evacuation—little or no food taken.

Let him have a pound of beef broth,
Two or three pounds of pale ale daily.

——— 5th. Spasmodic affection with oppressed breathing and general uneasiness of the muscles of the abdomen yesterday evening. This attack continued only for a few minutes, but left him for a considerable time sick and faint—pain of left wrist is gone—pain of right arm and of right wrist has supervened—pulse calm—a dark coloured stool in the course of the evening.

Let him have immediately twelve pills of aloes and colocyath—to take three every two hours.

Take of the infusion of senna four ounces,
Infusion of flaxseed six ounces.

Make a mixture which after the pills have been taken, is to be given in two doses.

Nov. 6th. Pain and swelling of right wrist continue—spasmodic affection has not recurred—pulse about 70 and soft—copious fluid and fetid alvine discharge—a bad night.

Let four leeches be applied to the painful wrist.

To take the anodyne draught in the evening.

Tomorrow morning the draught of castor oil, with an ounce of the oil and four drachms of the compound tincture of senna.

——— 7th. Pain of wrist relieved—no return of cramp—an easier night—thirst, of which he had complained, is abated—pulse soft—alvine evacuation scanty, of a clay colour and fetid.

Let him have twelve aloetic pills, to take three every three hours.

——— 8th. Thirst more abated with improving appetite—an easy night—no return of cramp—alvine discharge more copious than hitherto, partly fluid, and partly of unusual consistence, fetid, and of a clay colour—twelve pills taken.

Let him have two scruples of the compound powder of jalap every morning.

Continue the draught.

——— 9th. He continues convalescent—pretty copious alvine discharge, discoloured and fetid.

Repeat the compound powder of jalap.

——— 10th. Three copious alvine evacuations of more natural appearance and consistence, and less fetid than hitherto—free of complaint—appetite good.

Let him have half a drachm of the compound powder of jalap every morning.

Full diet.

Nov. 13th. Belly open—feces natural.

A bit of beef steak dai

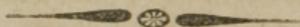
———— 14th. Belly rather open—stools natural—free
of complaint—strength and appetite much recovered.

Let him have twelve ounces of lime water, in divided
doses daily.

———— 17th. Belly regular.

Omit the lime water.

———— 19th. Dismissed cured.



If the symptoms, in this case, are not precisely those of tetanus; they certainly denote a disease greatly resembling it. And if mercury, as some maintain, removes the severest tetanic spasm, it may appear singular that it had no effect in averting that, which, in the present instance, supervened so immediately upon a full mercurial course.

Royal Infirmary, Dec. 29th 1805.

BETTY NESBIT, Ætatis 24.

Complains of severe pain at the scrobiculus cordis, and along the margin of the false ribs of the left side—also of shooting pains in the back of the neck descending along the spine—occasional severe headach accompanied with pain in the orbits and much dimness of sight—general debility and loss of appetite—pulse 96 and soft—tongue clean—belly slow—catamenia have been suppressed for three months, during which time she has had these complaints; which, however, have been much aggravated for the last fortnight, and attended with obstinate costiveness—was blooded and got some medicines, of which she can give no account.

Let her have the compound bolus of jalap tomorrow morning.

Dec. 30th. One scanty fluid green coloured stool.

Let her have twelve of the aloetic pills to take two every two hours.

After the pills have been taken let a purging enema be given if necessary.

——— 31st. Headach and pain of the orbit of both eyes are relieved—pain of scrobiculus cordis and along the margin of the false ribs, stiffness and pain of hind neck, shooting down the spine, continue. This last seems to excite or is accompanied with occasional spasmodic affections of both arms—has had copious and dark

coloured alvine evacuation—pills have been taken and injection given.

Repeat the aloetic pills as yesterday.

Let her have early tomorrow morning four ounces of the infusion of senna and six ounces of the infusion of flaxseed, at two doses.

Jan. 1st, 1806. Sickness farther relieved, and headach and pain of the orbits less uneasy than yesterday—affection of hind neck, of spine, and the spasms continue—has had plentiful alvine evacuation—the first motion was costive—latter ones less so, but consistent; the whole of natural appearance.

Repeat the aloetic pills and the infusion of senna as yesterday.

——— 2d. The affections of hind neck, of spine, and of both arms have been more severe during last night and this morning; all of these, but particularly the latter, she now admits have been present twelve months, and came on after much mental agitation. Has had spontaneous vomiting—alvine discharge has been copious, and consists, chiefly of large scybala floating in a dark green fetid fluid.

Continue the aloetic pills, and the infusion of senna.

——— 3d. Pretty copious alvine discharge, containing scybala, but in other respects more natural than yesterday—retching has occurred.

Take of the carbonate of magnesia,

Powdered rhubarb of each fifteen grains, Mix.

Prepare twelve such powders. To take one every two hours in an ounce and a half of mint water, untill the bowels are again well moved.

——— 4th. Twelve powders taken—alvine evacuation scanty, more natural and less scybalous—pain of the

orbits still more relieved—that of hind-neck and spasmodic affection considerably abated—no return of vomiting—headach continues—gastrodynia aggravated.

Let her have three thebaic pills immediately.

The purging enema in the evening.

Discontinue the powder of rhubarb.

——— 5th. Gastrodynia continued severe during the first part of the night—it remitted towards morning, and is now nearly gone—headach is abated—pain of hind neck, of orbits, and spasm have disappeared—has had scanty alvine evacuation.

——— 6th. Take of sulphate of magnesia five drachms,
Supertartrate of potass a drachm,
Infusion of senna three ounces,
Infusion of flaxseed six ounces.

Prepare a solution immediately, to be taken at two doses.

——— 8th. Alvine evacuation upon the exhibition of the last physic rather scanty—headach and pain of orbits are returned.

Repeat the solution of the sulphate of magnesia as above.

——— 9th. Has had full alvine evacuation—headach is gone—pain of orbit continues.

Let three or four ounces of blood be taken from each temple by cupping.

——— 10th. Pain of orbits gone, and otherwise free of complaint—full quantity of blood taken.

Let her have three aloetic pills every night.

Sulphate of magnesia four drachms every morning.

Full diet.

Jan. 13th. Belly has been fully regular.

Let her have thirty six aloetic pills.

Laxative pills—two, three, or four for a dose, when necessary.

Dismissed cured.

APPENDIX.

No. X.

CASES OF CHRONIC DISEASES.

*Royal Infirmary, March 19th. 1804.**MARGARET CLAPPERTON, AEtatis 20.*

COMPLAINS of fixed pain situated in the left side, with occasional difficulty of respiration, pain at stomach, with flatulence, and loss of appetite—pain of loins—catamenia have been irregular—pulse about 90, and full. These complaints began about twelve months ago, with pain of stomach, and have gradually increased since.

March 20th. To take the compound bolus of jalap in the evening.

Infusion of senna two ounces tomorrow morning.

——— 21st. Copious alvine evacuation—pain of side, of loins, and flatulence still continue—pulse 80—stomach is relieved.

Let the compound bolus of jalap be repeated tomorrow morning.

Half an ounce of the bitter infusion to be taken four times a day.

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March 22d. Pain of stomach still farther abated, and flatulence relieved—pain of side and loins continue—copious alvine dark coloured discharge.

Take of carbonate of magnesia a scruple,

Powdered jalap ten grains; prepare a powder to be taken every morning.

Continue the bitter infusion.

——— 26th. Belly has been regular—stools of a natural appearance—pain of side gone—that of loins continues—pulse calm.

Continue the powder of the carbonate of magnesia, &c.

——— 27th. Pain of loins gone.

Let her have twenty of the powders of jalap and magnesia as above prescribed.

Dismissed cured.

Royal Infirmary, Jan. 13th 1803.

EUPHAN MAYGLES, Ætatis 29.

Complains of pain and sense of weight at the scrobiculus cordis increased on pressure, with occasional sickness, and vomiting of ingesta—loss of appetite—is much emaciated—pulse 72—tongue clean—catamenia regular—no passage of belly for eight days, during which the above symptoms have been much aggravated, though by account, she has been more or less subject to them for about two months, during which she has been habitually costive.

The common enema to be given immediately.

Tomorrow morning early an ounce of the tartrate of soda and potass, in water, at two doses.

Jan. 14th. Three stools—the first by the injection was costive, the two latter, since the exhibition of the laxative, scanty. Pain of epigastrium, and sickness continue.

Let her have twelve of the aloetic pills, of which she is to take two every three hours.

—— 15th. Stomachic symptoms and uneasiness of abdomen continue—one very scanty and costive stool—the twelve pills taken.

The purging enema to be given immediately.

Repeat the aloetic pills, to be taken as yesterday.

—— 16th. A scanty stool after the injection, another more abundant, and of more natural appearance, since morning—pain of epigastrium and sickness are relieved—vomiting has not recurred—tongue clean—pulse calm—an indifferent night.

Take of the compound tincture of senna seven drachms,
Ammoniated tincture of opium a drachm.
Make a draught to be taken in the evening.

Jan. 17th. Two stools, both scanty, by account, of natural appearance—pain of epigastrium and sickness continue easier—no vomiting—a good night.

Repeat the draught as yesterday.

——— 18th. Two stools, copious, and of natural appearance—continues convalescent—an easy night.

Continue the draught of the tincture of senna.

——— 19th. One scanty stool—a good night.

To take four of the aloetic pills in the evening.

Three ounces of the infusion of senna, in six ounces of the infusion of flaxseed, tomorrow morning early.

Discontinue the compound tincture of senna.

——— 20th. Two scanty stools since morning—pain of epigastrium continues easy—a good night.

To have twelve aloetic pills, of which she is to take two every three hours, until the bowels are effectually moved.

——— 21st. By account, has had two copious natural stools.

Free of complaint.

Let her have every morning twelve grains of powdered rhubarb.

——— 22d. Appetite improves—belly regular.

Continue the powder of rhubarb.

——— 25th. Belly has become slow—complains of headach, and spontaneous vomiting occurred in the course of yesterday—tongue clean—pulse calm.

Sulphate of magnesia four drachms,
 Supertartrite of potass a drachm.
 To be taken immediately in water.
 Let her have half a drachm of the compound powder
 of jalap every morning.
 Discontinue the rhubarb.

Jan. 26th. No return of vomiting—headach abated.
 Pretty copious dark coloured alvine discharge.

——— 27th. Belly is regular; in other respects con-
 valescent.

Continue the compound powder of jalap.
 Full diet.

——— 30th. No stool for two days.

Take of the sulphate of magnesia four drachms,
 Supertartrite of potass,
 Leaves of senna, of each a drachm.

To be infused half an hour in eight ounces of boiling
 water, to be taken as soon as possible.

Feb. 4th. Take of the cathartic extract two drachms,
 to be divided into thirty equal pills.

Signentur, laxative pills, one or two when necessary.
 Dismissed cured.

Edinburgh, October 1805.

A young woman of a delicate constitution, but not liable to general bad health, was seized with frequent violent and bound cough, unattended with pain of breast, dyspnoea, quickness of pulse, or heat of surface. In order to mitigate the cough, the severity of which excited much alarm, lest rupture of vessels, and hæmoptysis should ensue; bloodletting was practised once and again, and a blister was applied to the breast; while a low regimen was enjoined, and laudanum was given to procure sleep, which the cough had altogether banished. These means so likely to have procured relief, were of no avail.

The experience of the effect of some purgative medicines, which had been given in the course of the disease, proved that the patient was either of a peculiarly constipated habit of body, or laboured under temporary constipation. It seemed, therefore, reasonable to me, as well as to another medical gentleman in attendance, to force the alvine evacuation by more powerful medicines, than we had as yet employed. We succeeded, but not without difficulty, in attaining the object in view. The appearance and odour of the feces evinced their morbid state; while the quantity that was dislodged proved that the feculent accumulation had been great. And there was no doubt of these circumstances having been the cause of the ailment, for the cessation of the cough, and the progress of convalescence kept pace with the gradual unloading of the bowels. Our patient was so satisfied of this, that she readily agreed to follow out a regular course of purgative medicines, in order to preserve her bowels in a regular state of daily and full evacuation.

This patient four months afterwards, had another attack

of pectoral symptoms, different however from the former one. She now complained of acute fixed pain across the lower part of the sternum, aggravated by the gentlest bodily exertion, and attended with great languor and feebleness. Her appetite was altogether gone—she passed sleepless nights—her countenance betokened much distress—her cheeks were alternately flushed and pale. With these symptoms she had no cough, and when completely at rest, even in the recumbent posture, no dyspnœa.

On the first attack, the pain was so violent, as to threaten instant suffocation, which appeared to have been averted only by a prompt and copious bleeding. Bloodletting was afterwards repeated, which, as well as blistering, was of no use; the application of leeches seemed to mitigate the pain; and on account of it, low diet was enjoined.

The other medical gentleman in attendance, and I, trusting to the account of our patient, and to the appearance of one alvine evacuation, were satisfied that the belly was regular; and we were the more readily so, as our patient, ever since her former indisposition, had been accustomed to attend to this circumstance.

Disappointed in our expectations of relief, we now became seriously alarmed, dreading the existence of vomica, with which we connected apprehensions of impending phthisis. These fears were not altogether concealed from the friends of our patient, who immediately asked the assistance of another medical gentleman.

Our joint opinion now turned upon the probability, that the disease might depend upon nervous irritation. Exercise in the open air, a fuller diet, and a tonic powder and mixture, were proposed. The patient's inability to bear the slightest motion, and her total want of appetite, precluded compliance with the two first proposals; and

the tonic medicines, taken with great reluctance, were scarcely in use, when a copious, fluid, dark coloured, and peculiarly fetid stool arrested our attention. The previous history of this patient's health, and the present occurrence, indicated clearly our line of practice. Much fetid feculent matter was brought off by appropriate purgative medicines; immediate abatement of the pain took place, and complete relief in all respects soon ensued. In eight or ten days no vestige of complaint remained. The patient is now perfectly well.

Royal Infirmary, Feb. 7th 1805.

JEAN M·DONALD, Ætatis 28.

Complains of pain, and sense of weight at the epigastric region, increased on pressure, vomiting of ingesta, in an acid state, with frequent eructations, headach, and vertigo, vague pains in her limbs—strength is impaired—loss of flesh—appetite bad—pulse 80—skin cool—tongue white and moist—thirsty—belly is habitually costive—catamenia have been suppressed a twelvemonth, during which period she has been more or less distressed with the above symptoms—has used no remedies.

Feb. 8th. No stool since admission.

Take of the compound extract of colocynth a drachm and half,

Form into twenty four pills. To take two every two hours untill the bowels are moved.

——— 9th. Three copious stools, of a dark greenish colour, and fetid—sense of weight at scrobiculus cordis—headach and vertigo are considerably relieved. Sixteen pills taken.

——— 10th. Three copious, and in appearance, more natural stools, since yesterday. Spontaneous vomiting, and acid eructations do not recur—indifferent appetite.

——— 11th. Vomiting occurred in the evening—gastrodynia since morning.

Take of the carbonate of magnesia two scruples,

Powdered rhubarb a scruple,

To be taken in two ounces of peppermint water.

Feb. 12th. Gastrodynia gone—vomiting has not recurred, and in other respects is free of complaint—tongue clean—pulse calm—no stool.

To take immediately three ounces of the infusion of senna in six ounces of the infusion of flaxseed.

——— 13th. A copious, consistent, blackish, and fetid stool, upon the exhibition of the injection—general pain of abdomen—pulse calm.

Let her have sixteen aloetic pills.

To take three every three hours.

——— 14th. Has had several stools, of dark, or greenish appearance—the alvine discharge on the whole, copious—pain of abdomen gone—nine pills taken.

Take of the sulphate of potass with sulphur half a drachm,

Powdered rhubarb fifteen grains.

Make a powder to be taken every morning.

Full diet.

——— 18th. Has had regular stools, and continues convalescent.

Take of the sulphate of magnesia an ounce,

Supertartrate of potass,

Sulphate of potass with sulphur of each two drachms.

Signentur, to be dissolved in a pint and a half of water and a tea-cupful taken each morning.

Dismissed cured.

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