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Howe (J. M.)

CONSUMPTION CURABLE.

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INFORMATION RESPECTING

THE PRACTICE

OF

F. H. RAMADGE, M. D.,

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, SENIOR PHYSICIAN TO THE INFIRMARY FOR ASTHMA, CONSUMPTION, AND OTHER DISEASES OF THE CHEST, ETC., LONDON.

CONTAINING

An Account of several Cases in relation to this Practice,  
in which it has been beneficial in  
this Country,

WITH OTHER CORROBORATIVE TESTIMONY.

BY J. M. HOWE, M. D.



NEW YORK:

PUBLISHED BY THE AUTHOR,

227 GRAND STREET, FOUR DOORS WEST OF BOWERY.

1856.

## NOTICE!

THE attention of Professors of learning, Clergymen, Invalids, and all persons especially interested in the education and training of Youth, are respectfully solicited to peruse the contents of this pamphlet, and then to circulate it, that the information may become general.

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Persons who wish to avail themselves of this remedy will do well to make themselves acquainted with the subject; or, if convenient, to consult the author. Without this necessary information, the patient may find himself in difficulty, from which a little instruction might have saved him. In some instances persons have returned, after two or three months, stating that they had used the tube, but were not benefited; and upon inquiry it was ascertained that they had not used it once as it should have been used.

The author has had more than fifteen years' experience in relation to this method of treating Consumption, and also the treatment of Dyspepsia, during which he has seen many persons whose lives might have been preserved if the tube had been early employed. He has also known some instances in which it has been resorted to in so advanced a stage of the disease as to prove rather an injury than a benefit. Persons who may wish to use this instrument would do well to have Dr. H.'s opinion; and in no case will he recommend it unless he sincerely believes its use will be beneficial.

P. S.—All letters must be post-paid. (See 3d page of Cover.)

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Entered according to the Act of Congress, in the year 1853, by  
J. M. HOWE,  
in the Clerk's Office of the District Court of the Southern District of New York.

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## Introduction.

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IF an apology be necessary for this publication, it may be found in the fact, that the remedy recommended will arrest the progress of pulmonary consumption, bronchitis, asthma, and other diseases of the throat and chest. It will certainly save life, if judiciously and timely employed. The author owes the continuance of his earthly existence to this means, and he has seen its beneficial effects demonstrated hundreds of times in the cases of others for a period of fifteen years past. Prior to the year 1838, this remedy was unknown in the United States, and was introduced by the author in that year. Since which, the knowledge of it has been extending throughout our country, to a limited extent, and it affords him pleasure to know that some liberal-minded physicians are employing it successfully in their practice; but it is not known as it ought to be. It should be wide-spread over the land wherever the name of consumption is known,—there it should be published that there is a remedy adequate to arrest the destroyer: not a combination of drugs and medicines, known only to its compounder, but a simple mechanical process, available to all. This valuable discovery, like all the great discoveries connected with civilization and the natural world, has been arrived at by a slow process—the work of centuries. How slowly has man (and not yet), as an entire family, arisen from a state of barbarism to a state of civilization—and how slowly has he arrived at a correct knowledge of the laws which govern the heavenly bodies—and by what a long process has he arrived at the knowledge of the power of electricity and of steam: these elements ever existed, but through lack of knowledge their power was not known, and especially as adapted to modify the condition of the world;

so, in the medical profession, how slowly have men arrived at the knowledge of any great truths. How long did they plod before they arrived at a correct knowledge of the circulatory system in man, and especially that of the blood?—and, when Harvey dared to present this great truth to the world, he did it at the expense of reputation and practice. So with pulmonary consumption, from the days of Hippocrates to the present, the faculty have been relying for the most part upon drugs and medicines to arrest this disease,—proving, a thousand times, or more, every year, the inefficacy of all such means, and yet how tenaciously do they adhere to their course, and when a man of genius dares to depart from the old track, and to proclaim to the world that exercise and air is the true remedy, how severely is he anathematized. Professional men say of him as they said of Columbus, when he advocated his belief in the existence of another hemisphere—or of Copernicus, the great astronomer, when he presented the true laws which govern the heavenly bodies—or of Harvey, when he discovered and proclaimed the circulation of the blood in the human system—“*He is mad!*” “*He is a fool!*” Happily for the world, the discoverer of the great benefit of inhaling the common air through a tube for the cure of lung and throat diseases is no novice, a man of no mean standing, but one of the most distinguished physicians of Europe.

Dr. Ramadge is the senior physician to the London Lung Infirmary, an office which he has held for nearly forty years. This is a public institution, and under the patronage of the nobility and gentry of England. Its president, for many years past, was the venerable Duke of Sussex, uncle to her Majesty, the Queen; and in this institution Dr. R. has had greater opportunity to make observations on consumption, and to try the various experiments in such diseases, than perhaps any man living. From the numerous consumptive patients that I saw while there, both at his private dwelling and at the infirmary, who applied to him for advice, I should think he has more consumptive cases in one month than any physician in the United States in one year.—See the Royal Calendar, and Court and City Register for England, Scotland, Ireland, and the Colonies, published annually.

Dr. Ramadge's practice would doubtless have been more extended, but for a most unfair review of his work, “*Consumption Curable,*” which appeared in the July number of

the *Medico-Chirurgical Review*, in 1834, edited by James Johnson, M.D., London. This publication has ever been regarded as the leading periodical among the profession, and in consequence of this article, Ramadge's work has been thought of little or no account. The innovation in practice—exercise and air instead of drugs and medicines—was too unprofessional to be considered orthodox; but, just as sure as that truth must prevail over error, just so surely will the time come (slowly it may be) when it will be made apparent to all enlightened minds that Dr. Ramadge's system of treating pulmonary consumption is the remedy of nature, and the only one in our artificial manner of life which will successfully arrest this dreadful disease.

The inefficacy of medicinal treatment in consumption is well known. The venerable Noah Wetmore, Esq., for forty years the superintendent of the New York City Hospital, remarked to the author, "They never ought to allow a consumptive to come within these walls, they invariably die." This subject is worthy the attention of the most intelligent and scientific minds; the profession will do themselves no indignity so to lay aside their prejudices as to learn what Dr. R.'s practice is, and to observe the effects of a systematic course of inhalation in incipient consumption. The reader will not allow himself to be prevented from examining this subject by the remarks of illiberal physicians, who practically know nothing of the merits of this subject. Such men answer all questions of their patients upon this subject by the exclamation, "Humbug;" "The system is based upon a false pathology;" "It is of no value, especially in your case;" "Breathe deeply without the tube." Thus, many who might live, had they this means, are prevented from making further investigation, and die. While some physicians oppose this method, it is not a little mortifying and amusing to see some men in the medical profession, who, finding that the tube is really valuable, have connected with it, for money-making purposes, a great deal of quackery, selling with the tube large quantities of medicine; and not only so, but some have had the effrontery to publish themselves as the author of all Ramadge's particular views on lung and throat diseases. Such men may make money, but they are to be pitied. I trust that the time is at hand when honorable and high-minded men will take this

subject in hand, and place it in the position before the public that it ought to occupy.

The author feels his inability to do justice to this important subject, and would have been glad had this duty devolved upon one of the ablest men in the country; but as Providence has placed him in this position, he dares not shrink from putting forth his efforts, feeble though they be, to relieve suffering humanity.

*New York, January 23d, 1853.*

## Letters

FROM GENTLEMEN WELL KNOWN IN THE CITY OF NEW YORK AND  
OTHER PARTS.

THROAT DISEASES—as Bronchitis, Enlargement of the Tonsils, &c.—indicate a scrofulous tendency in the lungs; these appearances give reasonable ground to suspect tubercular deposits in the lungs. If the disease in the throat continues, it will prevent the progress of disease in the lungs; but a persevering use of the tube will recover the throat and the lungs to good health. It is certainly as valuable in Bronchitis as in consumption. The following letters will convince every unprejudiced mind of this fact.

THE FOLLOWING RECOMMENDATION IS FROM M. L. NORTH, M.D., OF SARATOGA, AUTHOR OF "THE INVALID AT SARATOGA," A PHYSICIAN OF MUCH CELEBRITY AND REPUTATION:—

A CARD.—The subscriber having somewhat cursorily perused the work of Dr. Ramadge, and received particular statements from Dr. Howe, begs leave to recommend to his medical brethren a careful perusal and thorough examination of the doctrines contained in the work. He believes Dr. Ramadge's sentiments respecting the effect of warm and cold climates are correct, and can easily be substantiated by many cases in our country of radical benefit received by patients bursting away from all the assiduities of nursing, hot rooms, and other enervating treatment, and exposing themselves to the air and storms, which, to the common observer, would promise anything but recovery. There seems something very desirable, too, in accustoming the lungs to deep inspirations, while the process is cautiously guarded by Dr. Ramadge's judicious directions to avoid any inflammation that may occur.

Is it not wise for the fraternity to search everywhere for truth,

and for remedies against this destroyer of the human family? And from Dr. Ramadge's respectable talents, and his peculiarly favorable position for observation, may we not hope that his treatment, faithfully applied, may be instrumental in rescuing consumptives from the hands of death?

M. L. NORTH, M.D.

*Saratoga Springs, Oct. 26, 1839.*

INTERESTING ACCOUNT OF PETER HOFFMAN, ESQ., MERCHANT, LATE OF THE FIRM OF HOFFMAN, VREELAND, AND CO., OF PEARL STREET.

*Claverack, Nov. 26th, 1852.*

J. M. HOWE, M.D., 277 Grand street.

Dear Sir,—I am informed you are about to publish a work on the *Causes, Symptoms, and Care of Pulmonary Consumption*. The subject is one of great importance to the afflicted and the public. The great experience you have had for the last twelve or fifteen years in the many cases of consumption you have examined, and the many cures you have already made (through the use of the Inhaler,) are sufficient evidence of the importance of giving it publicity. From the experience I have had in my own case, (having been entirely *cured*,) I consider the subject well worthy the attention of medical men and the community, and remain, very respectfully, yours,

PETER HOFFMAN.

The following remarks will furnish a brief account of the case of Mr. Hoffman.

In the fall of 1842, Mr. Hoffman called on Dr. Howe to consult him in relation to his health. He had been laboring under pulmonary symptoms for some time, and had had the advice of able physicians, who, after they had exhausted their medical skill without affording him any benefit, informed him that the only hope of recovery left him was to remove to a warm climate, and as the winter was approaching, he must soon get away. For this purpose he had purchased for himself a horse and carriage, and was on the eve of setting out, when some of his friends suggested to him the propriety of obtaining the opinion of Dr. Howe, and being governed by it. Mr. Hoffman said to Dr. H., "I have made all my arrangements to leave, but I now come to obtain your advice, and I will be governed by it. If you say go, I go; if stay, I stay." With my knowledge of climate, its advantages and disadvantages, and the great value of the tube, I could not do otherwise than to advise him to abandon the idea of going abroad, and to stay at home; to reside in his own dwelling on Brooklyn Heights, to attend to his business, and to use the tube

faithfully and perseveringly, promising him entire recovery. Mr. Hoffman abandoned his journey, and recovered his health, and is now in the enjoyment of excellent health, and every few weeks recommends some consumptive friend to call on Dr. H. and procure a tube and his directions.

FROM W. E. BALDWIN, ESQ., STORE CORNER BROADWAY AND COURT-  
LAND STREET.

*Newark, 30th Nov., 1852.*

DR. J. M. HOWE,—Dear Sir,—It is with much pleasure I learn you are preparing a new publication on Consumption and its cure. Having for three years past thoroughly tested the efficacy of your "Inhaling Tube," in my own case, and having seen its beneficial effects on several friends who have used it, I feel quite confident in recommending it, and am warranted in assuring you that I believe its judicious use to be invaluable to every person in any way predisposed to that most insidious of all diseases—consumption.

May you have that richest of all rewards for your philanthropic efforts, the knowledge that many who through your efforts have been rescued from disease, now live, and in comfortable health, bear witness to the success of your efforts in their behalf. With great regard for you personally, I am happy in testifying to your Christian courtesy and urbanity.

I am, my dear Sir, very truly your friend,  
W. E. BALDWIN.

FROM THE REV. C. P. BRAGDON.

*Auburn, Jan. 1st, 1853.*

JOHN M. HOWE, M.D.—Dear Sir,—I rejoice that you are about to issue a new Pamphlet of Facts for Consumptives. I am the last man to flatter any one; but truth and justice compel me to testify that I believe you are one of the greatest benefactors of this remarkable age. You first introduced to the afflicted of this nation inhalation for the cure of Consumption. That to you I am more indebted for the continuance of my life than to any other man on earth, I cannot doubt, and to my certain knowledge, hundreds more can and would, were they called upon, witness to the same thing.

Many of our most useful ministers have been, and are being saved from premature death by the use of the Inhaling Tube, first introduced in the United States by you, in 1838. Let the people have the facts, dear sir, and hundreds and thousands by this simple philosophical instrumentality will yet be rescued from the grasp of the fell destroyer, Consumption.

Very truly yours,  
C. P. BRAGDON.

Some years since Rev. Mr. Bragdon wrote as follows:—

*Auburn, March 20, 1846.*

JOHN M. HOWE, M.D.—My very dear Brother,—Please accept these few facts in relation to the use of your Inhaling Tube. In the month of June, 1843, I had an alarming hemorrhage from my lungs, which prostrated me for months. Late in the fall of that year, as I was going South, (where none ought to go from the North, except for *asthmatic* lung affections,) I called on you, and obtained a tube. I used it during the winter, and was so far restored as to preach thirteen times before March. I have continued to use it much of the time to this day—have had two *very slight* hemorrhages since. One in April 1844, and the other in August 1845. Have preached occasionally up to this last winter. My chest is enlarged, and I now breathe more fully, and as freely as I ever did. Such, however, is the complication of diseases upon me, that I am not, and never shall be, a well man.

But were my lungs alone affected, with my tube in my mouth, I would bid defiance to pulmonary consumption, such is my perfect confidence in its powerful instrumentality.

I can most heartily recommend its use to all in any degree inclined to, or at all afflicted with, lung affections, as either a preventive or cure the most certain and safe of any one thing ever yet known. A friend writing to me from the South says, "How have you kept out of the grave so long?" It is mostly, with the blessing of God, by the use of my tube.

Yours affectionately,

C. P. BRAGDON.

FROM THE REV. D. P. KIDDER, D.D., EDITOR OF THE SUNDAY SCHOOL  
ADVOCATE, OF THE M. E. CHURCH.

DR. J. M. HOWE—Dear Sir,—I am happy to have occasion to say to you that I have the strongest reasons for believing that simple instrument, the Inhaling Tube, to be of great, if not of indispensable, importance to persons subject to pulmonary affections.

D. P. KIDDER, 200 Mulberry street.

*New York, March 20, 1846.*

FROM THE REV. BISHOP JANES, D.D., M.D.

*New York, March 28, 1846.*

From a limited acquaintance with the use of the Inhaling Tube, I am persuaded that a judicious and persevering employment of it is a healthful exercise for persons afflicted with a weak chest, or the dyspepsia, or for persons of sedentary habits.

EDMUND S. JANES.

FROM THE REV. JOHN DEMPSTER, PRESIDENT OF THE THEOLOGICAL  
INSTITUTE AT CONCORD, N. H.

DR. HOWE—Dear Sir,—Constrained by a sense of duty, I cannot longer refrain from acknowledging to you the special benefit I have realized from your *breathing tube*. Under the divine blessing, it relieved my shortness of breath, increased the volume of my voice, and much aided my digestive organs. My conviction that this improvement is the result of *that agency* is strengthened by several instances similar to my own that have fallen under my notice.

Yours as ever,

JOHN DEMPSTER.

Nov. 25, 1845.

FROM THE REV. B. F. TEFFT, D.D., LATE EDITOR OF THE LADIES'  
REPOSITORY, CINCINNATI, OHIO, ADDRESSED TO HIS FRIEND, THE  
REV. C. P. BRAGDON.

Lima, July 25, 1852.

REV. C. P. BRAGDON,—In reply to your request, I am free to say, after the hemorrhage I suffered last summer, I began immediately to use the tube you handed me; and I have used it every day, more or less, ever since. Then I was very thin in flesh, besides being dangerously ill, as you remember. How much benefit I have received from the tube, I cannot say; but you are at liberty to do what you please with the following *facts*. 1. I now weigh twenty-five pounds more than I did a year ago. 2. I have a better appetite than I ever had in my life. 3. My throat, which has been sore for ten years, is better than it has been at any time during that time, though I do not consider it prudent to use my voice much in public speaking. Having overworked myself so long, my only cure now is rest, so as to give my whole system time to recover. 4. Whenever I get very tired, or a little unwell, or in need of exercise for my chest, I use the tube freely, and thus always obtain relief. 5. I may add, that under the arms, I now measure two inches more than I did a year ago.

B. F. TEFFT.

FROM JACOB CAMPBELL, JR., CASHIER OF THE PACIFIC BANK, NEW  
YORK.

New York, January, 1853.

J. M. HOWE, M.D.,—Dear Sir,—I am glad to learn that you are about to furnish a more full account of your long experience in inhalation of the air for pulmonary affections. Your efforts are worthy of all praise. In my own person I have received the greatest possible benefit. You may recollect that my friend, Mr.

Buck, now first teller in our bank, introduced me to you about seven years ago, at which period I was having hemorrhage from the lungs daily, and also was raising dark purulent matter. My symptoms began to excite the deepest anxiety of my friends, but as soon as I received your advice and commenced using the tube, I began to improve, and soon lost all my consumptive symptoms. My chest enlarged some two or three inches, and I increased several pounds in flesh. I am now in most excellent health, and take pleasure in calling attention of the public to your laudable efforts to make known so valuable a remedy.

Very respectfully,

JACOB CAMPBELL, JR.

FROM REV. WM. ROBERTS, NOW SUPERINTENDENT OF METHODIST  
EPISCOPAL CHURCH MISSIONS IN OREGON.

To JOHN M. HOWE, M.D.,—Dear Sir,—After having used the tube occasionally for nearly seven years, and witnessed its beneficial effects on many others during that time, my confidence in its excellence remains unchanged. I think it a most valuable remedy for persons suffering with pulmonary affections.

Yours respectfully,

WILLIAM ROBERTS.

*Jersey City, March 26, 1846.*

FROM D. G. JOHNSON, ENGRAVER.—COPIOUS HEMORRHAGES.—IN-  
EFFICACY OF SPENDING SIX WINTERS SUCCESSIVELY IN A WARM  
CLIMATE.—BENEFIT OF PERSEVERING IN THE USE OF THE TUBE.

*New York, April, 1846.*

When I first heard of the tube I had been very unwell for about six years with my chest and lungs. I had not known what it was to have a comfortable night during the whole of this period. If by chance I placed myself in a horizontal position, I was seized with violent coughing for twenty or thirty minutes, which would recur again at intervals through the night. If the following symptoms are evidence of ulcerated lungs, then mine were ulcerated. I had a continual cough day and night, with excessive expectoration of heavy, thick, yellowish, purulent matter, frequently streaked or mixed with blood; weakness, loss of flesh, spirits, and energies, contraction of the chest, and finally hemorrhages from the lungs, with fever and sweats. I put myself at an early period under the care of a physician of reputation, but without any permanent relief. As the fall of the year approached, succeeding my first attack, I was informed that it would be death for me to stay in this climate, and it was decided that I should go to Cuba; and to Cuba I went, leaving every friend on earth behind, all fearing I should never return. I have

since been South six successive winters, but each time returned with little or no permanent benefit. In the meantime I have taken, to please my friends, all kinds of syrups, balsams, teas, &c., which I now consider useless, in fact, worse than nothing. While in New Orleans, in the year 1840, I had six hemorrhages in two days, amounting in all, to perhaps over a quart of clear blood, which reduced me to the very lowest extreme, from which I only recovered by the most judicious management, and the being kept sitting erect in bed for three successive nights and days. This was the last winter I spent at the South. I recovered more in six months, by using the tube, than in the whole previous six years. In fact, it is the only thing from which I have derived the least permanent benefit.

The expectoration of bloody and purulent matter and mucus entirely subsided within the first six months' use of the tube. My improvement was gradual up till within a year past, since which my cough and all my pulmonary symptoms have entirely left me; and I consider my lungs perfectly sound, and my general health recovered. For nearly five years I have exposed myself to all kinds of weather, and been enabled to attend to my business. Had I been directed to Dr. Howe and the tube, I doubt not that a few months' use of it at an early period would have restored me to perfect health, and saved me the six years of constant suffering day and night, with the anxiety, vexation, &c., attendant on this vagabond life, of going away from all friends, and nearly all one's comforts, in this useless business of going South every winter, to say nothing of the breaking up of my business, and the expense of some thousands of dollars, which I could badly spare. The improvements in my health I know have been produced solely from the use of the tube. I have encouraged many consumptives to use the tube, but the great difficulty in the way of receiving permanent benefit, is the lack of continued perseverance in inhaling until all the difficulties arising are fully overcome; this I have done, although I have toiled during day after day, amid discouragements, for several years; but the result is, I now have a healthy and an expanded chest.

But perhaps some will say that my lungs could not have been diseased, or they would have been incurable, as it has always been supposed that diseased lungs could not be healed. I endeavored to doubt that my lungs were diseased as long as possible, but it was useless; it was too true and apparent to be resisted, and I gave up all hopes of recovery, until I saw Dr. Howe, who convinced me that I might yet recover. I am, in fact, another man in spirits, energies, health, comfort, and of course happiness.

I am sure that Dr. H. should be highly esteemed by our fellow-citizens for his efforts in introducing Dr. Ramadge's practice in this country, and for the republication of the doctor's

work on consumption. Had I not been providentially directed to this means, I must in all probability have been a wanderer from my family every winter, if I had not ere this been in my grave.

With the sincere desire that it may be useful to many, I remain, dear Sir, with gratitude, truly your friend,

D. G. JOHNSON, Engraver, 61 East Broadway.

*New York, January, 1853.*

I hereby endorse all that I wrote in 1846: my health is most excellent, and my views of the use of the tube unchanged. I wish it was more extensively known.

D. G. JOHNSON.

FROM REV. N. N. BEERS.—REMARKABLE RECOVERY.

*Mecklenburg, Tompkins Co., N. Y., Dec. 9, 1852.*

DR. J. M. HOWE,—Dear Sir—It is now nearly five years since I first wrote to you for advice in relation to the use of the Inhaling Tube. At that time I was thought to be near my end with consumption. With my right lung badly ulcerated, my whole system very much emaciated, and all the other prominent symptoms of that dreaded disease, such as a bad cough, profuse expectoration, drenching night sweats, occasional bleeding at the lungs, and daily hectic fever, there was apparently no reasonable hope of my living but a few months. This was the opinion of my most intimate acquaintances, including several physicians. But by the blessing of God upon the use of the Tube, the disease was arrested, my lungs healed, and my general health restored. The disease, however, had made such an inroad on my constitution, and wasted so much of my right lung, that I am not as rugged as I once was, though I am sufficiently so to be able to attend to any ordinary business, and feel that my constitution every year is becoming more and more firm. I commenced preaching again after being laid aside for a year and a half, and have been constantly employed in the work of the ministry for the past three years. At the present time I have a large charge, where I have to preach twice every Sabbath, besides riding ten or twelve miles, winter and summer. I do not know how to be sufficiently thankful to my Heavenly Father for his good providence in directing me to the use of the Inhaling Tube. I have taken considerable pains to recommend it to others. I have procured tubes probably for nearly or quite a hundred different individuals. To give as full a statement as I would like to, of my experience and observation in relation to its use, would make this communication quite too lengthy.

From a personal knowledge of its use in my own case, and in that of others, I have reason to believe,

*First,* That it will absolutely cure seated consumption in its earlier stages.

*Secondly*, That it will prolong life for years, in certain cases where perfect recovery to sound health is impossible; and

*Thirdly*, That it is a perfect warrant against consumption in those who are inclined to it from hereditary taint, or from a weak and deranged state of the system.

If this latter class would universally adopt its use, I can but think that the dreadful ravages of consumption would soon be stayed. I have known persons commence its use too late to save life: but scores, by taking it in time, have been restored to sound health. Jeremiah Johnson, of Ovid, Seneca county, N. Y., after using the Tube nearly a year, said to me, "*Why, if I could not get another, I would not take fifty dollars for it.*" Similar expressions have been made to me by many others. I have had the pleasure of directing the attention of several physicians to this subject, who have afterwards introduced it into their practice with great success.

And now, while facts abundantly prove that the use of the Tube will cure cases of genuine tubercular consumption, if taken in its earlier stages, it would be vastly better for individuals to resort to its use while laboring under the premonitory symptoms, before consumption is fully developed. A perfect cure could then be very easily and readily effected.

All catarrhal or bronchial affections of the throat and lungs are regarded by Dr. Ramadge as evidence of latent consumption. Persons so affected should resort to the use of the Tube *without delay*.

Weakness of the chest and lungs should always be regarded as a precursor of that dreadful disease; but the use of the Tube will, in every case, absolutely strengthen the lungs, and make the voice strong, deep, and musical. The effect on the voice alone is worth a great many times the cost of the instrument, especially to public speakers and to singers.

I most sincerely desire that the real merits of inhalation of the common air through a tube *properly constructed*, for all throat and lung difficulties, may become generally known and practised.

I remain, dear sir, sincerely your friend and brother in Christ,  
N. N. BEERS.

INTERESTING CASE OF THE RECOVERY OF A YOUNG LADY INTRODUCED TO DR. HOWE BY ASHEL JONES, ESQ., OF THE FIRM OF JONES & WHITE, NO. 263 BROADWAY.

The attention of Dr. Howe, about ten years ago, was called to Miss M'W., a young lady of about twenty-two years of age, and of delicate constitution, with a narrow and contracted chest, by Mr. Ashel Jones, of 233 Broadway. At the time when Dr.

H. first visited Miss M'W., he found her cheeks highly tinged with the hectic flush, and her pulse very rapid; she was also laboring under a severe cough, with night sweats, and her strength was greatly prostrated. She had within a few weeks buried a sister, who had died of consumption; and her symptoms were such that her physician had informed the family that she would inevitably fall a victim too. Her mind was about made up that no earthly means could reach her case. As her expectoration had not been copious, Dr. H. gave her much encouragement that she would entirely recover if she would follow his directions. He directed a more free ventilation of her apartments, and a wood instead of an anthracite coal fire. He then, by medicinal treatment, reduced the action about the chest, and directed a steady and persevering use of the tube, by which means she soon began to improve in health, and to venture to walk out. Occasionally her symptoms returned, and her fears were excited as to the result; but she persevered in inhaling, and kept on steadily improving, and although more than ten years have elapsed, continues in good health.

*New York, January, 1853.*

FROM MR. P. S. CARPENTER, LATE OF NO. 29 WALL STREET.—INCREASE IN THE SIZE OF THE CHEST OF FOUR INCHES, AND A GAIN OF TWENTY POUNDS OF FLESH IN THREE MONTHS.

My attention was called to Dr. Howe and the use of the tube, by Mr. T. D. Camp, now engaged in the Blind Asylum, New York, in the month of May, 1845, who had known of beneficial results from the use of the tube, and to whom I shall continue ever to feel grateful. At the time Mr. Camp called my attention to this remedy, I was much reduced in strength, and confined to my room. I had had hemorrhage of the lungs, and was laboring under fever, the pulse being on an average one hundred per minute. I was induced to discharge my former physician, and by the advice of my friends to trust my life upon the tube, and the treatment of Dr. Howe, they fearing that if I did not, I might not recover. I ventured to do so, and began immediately to improve in health. I was soon enabled to walk out. My chest expanded, or enlarged, within three months, about four inches, and I gained about twenty pounds of flesh in the same period of time. It is now nearly a year since I obtained the tube; and during the past winter I have encountered all kinds of weather without experiencing any inconvenience. My appetite is good, and my system regular.

I cheerfully recommend the use of the tube to those who are in like circumstances, sincerely believing it to be an excellent and invaluable remedy, *founded on philosophical principles*, for certain

stages of diseased lungs. Greatly desiring that the salutary effects of this remedy may be more generally known,

I am yours truly,  
P. S. CARPENTER,  
Late of 29 Wall street, and 134 Christopher street.

FROM PROFESSOR VAIL, OF CONCORD, NEW HAMPSHIRE.

*Concord, N. H., Jan. 10, 1853.*

To DR. J. M. HOWE,—Dear Sir—It affords me great pleasure to say that the "Tube" which you sent to my mother last winter, who, as I told you, seemed to be near the borders of the grave from lung affections, has entirely recovered, and seems to be about as well now in this respect as at any former period of her life. She considers that the Tube, under the blessing of Providence, has been of the greatest benefit.

Yours truly,  
STEPHEN M. VAIL.

FACTS STATED BY MR. JOHN GORE, MACHINIST, OF BRATTLEBOROUGH, VERMONT.—BENEFICIAL EFFECTS OF THE USE OF THE TUBE IN ASTHMA.

He informed me that he had been afflicted for a long time with an asthmatic affection of the chest, and that he had tried the various remedies prescribed by the regular practitioners, without benefit. He then applied to the Thomsonian doctors, but still his disease was not mitigated. His affliction was so great, that after obtaining advice of three physicians in the place of his residence, neither of whom gave him any hope of recovery, he relinquished his business and went abroad, hoping that change of climate would benefit him; but in this he was disappointed. He then heard of the inhaling tube, and obtained it; and by a few months' use of it has recovered his health, and has resumed his former business. He also obtained a tube last summer for a young woman about eighteen years of age. Her physicians considered her a decided case of consumption. She had been restored to health, and attributed her restoration to the use of the tube. He likewise gave me an account of another woman, also a consumptive, who was perfectly restored to health by it. In reference to one of the above cases, he stated that in his opinion the woman could not have lived three months longer had she not obtained the tube. On the 20th of July, 1843, he called on me, and purchased three tubes and six books to take home with him.

LETTER FROM J. M. TITUS.

*New-York, October 29, 1841.*

DEAR SIR,—I have just arrived in this city from the island of

Jamaica, W. I. Having in that island met with facts strikingly illustrative of the benefits which may be confidently expected in the early stages of tuberculous diseases from pursuing the practice of F. H. Ramadge, M. D., I hasten to lay them before you.

Allow me to place two cases of different result side by side, by which I hope the truth will be more clearly seen.

In the fall of 1840 an elder brother became ill, and in a short time afforded conclusive evidence of a diseased state of his lungs. He was prevailed upon to commence a course of inhalation, but not until his strength was so far wasted as scarcely to permit him to leave the house. He then commenced, but with no hope, frequently saying it could do him no good.

From the lateness of the period when he commenced inhaling, and the despondency with which he pursued it, the result was as we anticipated—he died in May last.

Almost immediately after the death of this brother, another brother was attacked with the same disease. His physician, Dr. M'Fayden, of Kingston, examined his lungs repeatedly, and did not conceal from him his belief that they were ulcerated. My own physician, Geo. P. M. Downer, M. D., who often made my brother a friendly call, repeatedly said most decidedly, "*He is far gone with consumption.*" The usual symptoms were attendant: soreness of his lungs, and frequently much pain in his side—exhausting night sweats, hectic fever, a severe cough, and expectoration of colored mucus, or pus, so dense as to sink instantly when thrown into water, were among the alarming evidences of ulcerated lungs. My brother had thoroughly read Dr. Ramadge's work, and being convinced by his reasoning and experiments— notwithstanding the ill success in our dear brother's case, he commenced a course of inhalation, fully believing he should be benefited thereby. Anxious friends had already mourned over him as lost to them, and no physician whom he consulted believed he could recover. He had not, however, used the tube six weeks before there were evidences of improvement. On the 29th of Sept. I left him in the enjoyment of such health as permitted him to attend to business with activity, and affording almost indubitable evidence of speedy restoration to complete health.\* My brother is perfectly sure his lungs were ulcerated, and that he owes his life and present health (under God) solely to an observance of the practice of Dr. Ramadge.

Dr. Downer, one of the gentlemen mentioned, after examining Dr. Ramadge's work, said he had not derived so much information from all other sources on consumption as from the doctor's work, and when he saw the effects of the use of the tube in my brother's case, he urged me to forward him several copies of the work and the tubes. He added, that he intended that his children should use the tube, and expressed himself as confident that its use would

result in the more healthy development of the lungs, as well as be of incalculable benefit to those afflicted with tubercular consumption. With much esteem, I remain, very dear sir, very truly yours,  
J. M. TITUS.

A CASE ILLUSTRATING THE USE OF THE TUBE IN A THROAT AND LUNG AFFECTION, FROM A LADY.

DEAR SIR,—I have been using your tube for the last seven or eight weeks, and am happy to say, with the blessing of a kind Providence, the means has been blessed thus far. The ulcers in my throat, which discharged considerable blood and very offensive matter, have ceased to discharge, and there are no ulcers to be seen in the top of my throat; but the lower part at times feels quite sore, and at other times feels as though my palate was down. Before I used the tube, at times I could not speak a loud word, and it was very difficult for me to breathe; but after using it about three weeks I was not again attacked with such extreme weakness of voice and difficulty of breathing. I am acquainted with two ladies who are using your tubes, who have received great benefit from them: one resides at Newburg, the other in this place. Yours respectfully,

CAROLINE GREGORY.

*Shawangunk, August 23.*

FROM A. D. MATTHEWS, MERCHANT, 93 MAIN-STREET, BROOKLYN,  
L. I.—RECOVERY FROM BRONCHIAL AFFECTION.

*Brooklyn, June 18, 1841.*

DEAR SIR,—A sense of duty induces me to acquaint you that the tube, which I purchased of you about a year ago, has had the desired effect to cure my wife of the Bronchitis.

For four years previous to the use of the tube she had been much of the time under the care of our family physician; during the winter seasons especially her sufferings have been severe in the extreme; confining her almost entirely to the house, and much of her time to her room. The disease had become so severe at the time when she began to use the tube that we had much cause for alarm; assured, as we were, that the disease was a very near approach to consumption, if it had not become so already.

From the day that she began to use the tube no other remedies have been tried; and for months past she has considered herself cured. During the past winter she has been able to go out in all kinds of weather, and her health has been uniformly good; and as all other treatment of the complaint, such as blistering, leeching, &c., only gave temporary relief, we are forced to conclude that the use of the tube alone has produced this result. I take

the greatest pleasure in being able to make public the above statement, (though unsolicited by you,) knowing that many ministers of the Gospel and others are afflicted with this distressing disease.

Yours, &c.,

A. D. MATTHEWS,

93 Main-street, Brooklyn, L. I.

ADDITIONAL STATEMENT FROM MR. A. D. MATTHEWS.

*Brooklyn, April 10th, 1846.*

DR. J. M. HOWE:—Sir,—I most cheerfully state that in the case of my wife, although her health is not generally good, she has not since the first six months of the use of the tube had a return of that complaint. I desire also to add that I have recommended the use of your tube in many cases, and have never known one of what was supposed to be incipient consumption that was not benefited by its use; while two or three cases which I and others supposed were confirmed consumption, and apparently in the last stages, have been cured, or very much relieved, by it. A case of the latter kind I will mention. The wife of Mr. Elijah Wentworth, of Hinsdale, Mass., had been long afflicted with a very severe cough, and she, with two of her sisters, living in different places, appeared to be rapidly sinking with consumption. It was at times thought Mrs. W. would be the first victim. She being a relative of mine, I was there some three years since on a visit, and spent a day, and proposed on my return to send her a tube as a last resort. I accordingly did so. I visited her last summer, and found her enjoying (with naturally a very slender constitution) comfortable health; her cough had nearly subsided, her countenance was bright, and she was able to do the domestic work of her family. She attributed her recovery to the use of the tube. Her sisters died not far from the time when she commenced using it.

I also would mention the case of Mrs. Throckmorton, formerly of this city, to whom I recommended the use of the tube about five years ago. For many years she had been a great sufferer with lung complaints, but, after using the tube a few months, she told me that the benefit she had derived from it was truly astonishing; and her husband, speaking to me of her case, more than a year after this, said that it seemed to him more like a miracle than any cure that he ever witnessed. I recently heard that she enjoyed comfortable health.

I could mention several other cases similar to the above, all of which have confirmed me in the belief that by the timely use of the tube consumption is curable. I am, dear sir, your obliged and sincere friend,

A. D. MATTHEWS, 93 Main-street.

FROM ORRIN SWIFT, ESQ., BROOKLYN, L. I.

DR. J. M. HOWE:—Dear Sir,—After much persuasion, I was induced to make a trial of your breathing tube for exercising the lungs; and after using it about six months, I became fully convinced that all you had said to me in favor of it was true. I had been troubled with a cough, which had been of some years' standing, and which had become quite alarming, being attended with considerable expectoration. I also suffered much from great weakness, soreness, and pain in the chest, attended frequently with tightness across the upper part of the chest, causing at times, particularly nights, a difficulty in breathing, sometimes amounting almost to suffocation. After continuing the use of the tube for a few weeks, I began to experience relief; and before the expiration of the year, all the above complaints had nearly disappeared, nor have any of them seriously troubled me since, though nearly five years have elapsed.

I still continue to use the tube occasionally, and find it quite useful. As a preventive to taking cold it is invaluable; and did it effect no other good, this of itself would be enough to recommend it. Very respectfully yours,

ORRIN SWIFT.

*Brooklyn, July 28, 1845.*

FROM MR. REUBEN C. BARNES, No. 255 BLEECKER-STREET.

In July and August last I was in a miserable state of health. I had a cough that distressed me much if I went out in the damp air. I sometimes coughed so violently as to have to stop and hold on to a post to keep me from falling. I had hectic fever every afternoon, and sweat a great deal at nights. I commenced raising in April, and from that time my expectoration became very copious. I lost flesh; and my whole appearance indicated that, unless relieved, I would soon be beyond the reach of all means. Mr. Tate, of No. 134 Eighth Avenue, who had known of the tube benefiting two or three persons, called my attention to its use, and went with me to see Dr. Howe, who did not give me much encouragement, but ventured finally to recommend the tube to me; and by its use I have so recovered as to astonish my friends. I have increased in flesh, and my appearance has altogether improved. The tube I believe has saved my life; and I cheerfully recommend it to others in a like condition, believing it worth more than all the balsams and blisters in the land.

REUBEN C. BARNES.

*New York, March 17th, 1846.*

EXTRACT OF A LETTER FROM REV. ROBERT M'NUTT, A MEMBER  
OF THE KENTUCKY ANNUAL CONFERENCE OF THE METHODIST  
EPISCOPAL CHURCH.

TO DR. J. M. HOWE:—Dear Sir,—In the year 1841 I obtained an inhaling tube from you; and I take pleasure in informing you, that, by the divine blessing on its use, it had the desired effect. I have more than realized my anticipations before using it. In September, 1844, I was licensed to preach, and in the same month joined the Kentucky Annual Conference, in which I still remain, and am endeavoring to do something in my Master's vineyard. Last year, through my feeble efforts, I was instrumental in adding fifty-three souls to the church, and this year my prospects thus far are flattering. And but for the use of the tube, with the divine blessing, my career of usefulness (small as it has been, or may be,) I verily believe would long since have closed. The object of writing to you is to obtain a tube for a gentleman here. Please accept my respects, and the gratitude of my heart. Inclosed I send you five dollars for the tube, which you will please forward by mail. Yours respectfully,

R. M'NUTT.

*Smithland, Kentucky, Nov. 5, 1845.*

FROM GILBERT T. SEWELL, ESQ., NEW YORK CITY.

*New York, August 10, 1841.*

DEAR SIR:—I write this to add my testimony to the great benefit derived from the use of the breathing tube. In the summer of 1839 I was attacked with the usual symptoms of consumption—spitting of blood, accompanied with general debility.

I heard of the method of curing consumption invented by Dr. Ramadge, of London, and practised by yourself—applied to you, and purchased a tube. Without using any other remedy I found immediate relief, and now enjoy as good health as any one could wish. With pleasure I remain yours, &c.,

GILBERT T. SEWELL, 58 Nassau-street.

TO DR. JOHN M. HOWE.

FROM MR. JAMES DAVIS, MERCHANT, 37 LIBERTY STREET,  
NEW YORK.

*New York, January 20th, 1843.*

DR. JOHN M. HOWE: Dear Sir,—I feel it to be a duty to apprise you of the benefit I have received from the use of the inhaling tube I obtained from you in June, 1841. I have deferred doing so until now from a desire to be well assured that the ben-

efit is permanent; and being well satisfied on that point, I feel great pleasure in certifying that I have derived great advantage from its use.

In the latter part of the previous winter I contracted a severe cold, which in the month of March settled on my lungs, with strong indications that they were permanently affected. The symptoms, as well as I can recollect, were a violent pain in the chest, a quick palpitation of the heart, greatly accelerated by the least exercise, or even by walking up stairs, a prostration of strength, and other symptoms, which were evidently premonitory of consumption. My pulse generally ranged from ninety to one hundred and twenty. The usual remedies were resorted to, but my health continued to fail. In June I procured the tube; and commenced using it three times a day. I soon felt better. My breathing, which before appeared to come from the upper part of the chest, is now corrected. I was able to take long breaths with ease, which before was difficult; and my respiration was much more free. In the course of a few weeks my chest had expanded about two inches. The pain in my lungs, however, continued; and notwithstanding that I gained strength, the other symptoms would occasionally discourage me, and make me at times disposed to relinquish the use of the tube. I however continued to use it regularly, being well satisfied that unless it could effect a cure no earthly means could; and I have now reason to thank God that through his blessing I have been so far restored to health that I am as able to attend to business as I ever was. Indeed, I think I can safely say that I am well; but as I do not wish to speak too positively, I will only say that notwithstanding my exposure to all kinds of weather, my health has not been affected, either by colds or otherwise, more than before the attack which brought on the disease. I, however, continue the use of the tube occasionally, as I find the exercise beneficial, especially when I feel a tightness in the chest.

In conclusion I would say that I attribute my recovery from the premonitory symptoms of consumption to the use of your tube; and desire to return my thanks to God for directing my attention to the remedy, and to you for your kindness in the encouragement and advice received from you.

Very respectfully yours,

JAMES DAVIS.

## A Brief History of the Author's Case.

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My attention was first directed to the subject of consumption by my own declining health in 1837. A slight cough at first, then fever and chills daily, accompanied with night-sweats, and great prostration of strength, and loss of voice, and wasting of flesh, with cadaverousness of countenance, all bespoke that I was seriously ill. At this period, being connected with the New York City Hospital as the chaplain of the house, my daily walks led me to make observations on patients somewhat similarly afflicted, over whose beds were written Phthisis Pulmonalis, or pulmonary consumption. Consumption was a horrible name to me; and now that I began to fear that it was grasping me, no language can describe the acuteness and agony of my mind. I strove to be cheerful, and to throw off these feelings. I rose early, I walked, I rode; I washed and rubbed, and took the best medical advice the city could afford, then went the rounds of all the popular medicines; but still I was declining. As months rolled on I began to expectorate, and my chest, which had formerly measured 33 inches in circumference, had contracted to 30 inches, and how to account for it I knew not. Stripping myself, and observing my figure in the glass, I was horrified by my appearance. My chest was so drawn together, the clavicles or collar bones were so prominent, with a deep sinking beneath them, and the whole system so distorted, as made me fearful for my own eyes to behold. I took the counsel of many physicians, but without relief. "Surely," said I, "I am in a bad way; there is no use in resisting the conviction longer; I am in consumption." My feelings at this period none may know but those similarly afflicted. My physicians, although they encouraged me,

assured my friends that I must decline. The tubercular deposits, however, they stated were confined to the upper lobes of the lungs. As I became sensible of my condition, and knowing full well the inefficiency of all medicinal remedies in use among physicians in consumption, my only hope was in looking to God for help, and my prayer went up continually that He would interpose his strong arm and save me from dying of this disease. I felt that the simplest means with His blessing would avail. My medical friends having exhausted all their skill, as a last resort recommended a sea-voyage to Europe, and travel. Accordingly, on the 7th of June, 1838, having previously adjusted all my affairs, I sailed for Liverpool, in such a state of health as I would not wish a friend of mine to embark in, and arrived there greatly prostrated from sea-sickness. After resting a few days, I journeyed to the North, directing my course towards Edinburgh in Scotland, consulting the most prominent physicians in many places. A guinea paid—a box of pills and a blister, or a box of ointment, received—was the usual prescription. Gaining no relief, I directed my course to the South. In London I was very unwell; but my hopes were buoyant as it regards the climate of France, could I get there; but these hopes, like others, were not to be realized. I arrived in Paris in the month of August, but found the winds cold and piercing, and the weather so variable for some days that I rather grew worse, and as the fall of the year was approaching I came to the conclusion, after tarrying a while, that I had better return home while I had strength to do so. In Paris I would have called in medical counsel, but felt that by so doing I might be prostrated by medical treatment, and thus be prevented from ever reaching my native land again. When I arrived in London, on my return, necessity again compelled me to send for a doctor. A blister and leeches were again applied to my chest. While in this dilemma, lying in a bed in a dark chamber in a large hotel pleading the promises of God, a gentleman entered my room and remarked, "I knew a clergyman in Manchester, who was in consumption, who obtained a book the title of which is 'Consumption Curable,'\* and, by following the directions, he soon got well, and is now preaching." His words were like electric sparks; hope, which had almost deserted me, as to human

\* Dr. Howe has this work for sale.

instrumentalities, again revived. By this circumstance I was led to obtain the book, "Consumption Curable," and by it, and the advice of a lady, was induced to consult F. H. Ramadge, M. D., the author, who at his first interview, said to the lady, "He is very ill, but he has come just in time to save his life." Upon examination of my chest, he remarked, "You have tubercles in both lungs." I then, in a whisper, (for I could not speak above a whisper), put the following interrogatories:—"Doctor, can I live, or must I die? Be honest with me." He replied, "You will perfectly recover." "Shall I ever be able to speak loud?" "O yes." "Shall I ever be able to sing?" "Yes." "Shall I, sir, ever be able to preach again?" "Yes, I see nothing to hinder." "How long, sir, will it be before all this takes place?" "In about four or six months you will be quite well, but you will attain a strength about the chest that you have not had for years." "Ah! doctor," said I, "I am afraid to believe you." He answered warmly, "I would insure it by my right arm, were it possible." To this man, under God, I owe my life. He gave me instructions concerning what I should do and what I should avoid, by the observance of which I have been restored to good health as far as the chest is concerned, although I am occasionally dyspeptic.

The principal means he directed me to use was a tube, through which I was to breathe, for the purpose of expanding, airing, and exercising the lungs, by which exercise they would become enlarged, the sores be absorbed, and the surfaces brought in apposition, and healed. This tube, with his instructions, gave me relief at once; and from the day I got it I began gradually to improve in health, and now consider my chest quite well. After having tarried with Dr. R. as long as he wished, and it being the time that I purposed to return home, I was led to ask Dr. R. for advice as to climate, supposing, that as I would arrive in New York (my native city) in the month of October, it would be death for me to think of passing the winter at home, and that I should have to go to the South. "But," said Dr. R., "go home, and stay at home." "Then," replied I, "I shall have to shut myself in the house all winter." "By no means," he replied, "go out every day." "But," said I, "ours is a dreadful climate; it snows, and hails, and blows." "Well," said he,

“choose the best time in the day, and go out every day.” Thought I, it is death to follow the old beaten path, and it can be but to die if I do as directed; and, considering the high character of Dr. Ramadge, I resolved implicitly to follow his directions. The returning sea-voyage reduced me much, but I reached home in better health than one could have expected. Upon my arrival I began to speak of the remedy I had found; and feeling desirous to benefit others, I published a few letters in the New-York Observer, Christian Intelligencer, and Christian Advocate, which were extensively copied into other papers. These letters brought many to see me, among whom were some of the most respectable physicians, who requested the privilege of seeing the tube, and examining my chest: “For,” said they, “there is much that passes for consumption that is not.” I acquiesced; and the result of such examination was, in the language of Dr. Washington, “I have no more doubt of the tuberculated state of your lungs than if I could see them;” and Dr. Cox said, “The right lung is hepatized;” that is, changed by disease, resembling liver in appearance; and said another, “Half of the right lung is gone.” I received many letters from various parts of the United States, to answer which consumed much of my time, and subjected me to some expense; but, being desirous to spread the information, I abridged Dr. Ramadge’s work on consumption, and published one thousand copies, which I principally distributed gratuitously, and nine months after put his large work to press. Of this I have sold a number of copies. I have also kept the tubes on hand for sale, and instructed persons in the use of them; and am now happy to state that many have been greatly benefited, and others restored to health.

It has, however, been objected by some physicians, who have no personal knowledge of me, that I could not have been fairly in consumption, or I could not possibly, by any means, have recovered. To this objection I will only reply, that distinguished physicians pronounced my case to be tubercular phthisis, and further stated that it was impossible that I could live; that no means could save me; and the symptoms were such as fully to corroborate their testimony. These were—slight soreness in the chest, which was increased, particularly by the sea-sickness, and which spread itself throughout the lungs; a hacking cough at times; loss of

voice, so as to be unable to converse much above a whisper, and then with the greatest exertion, accompanied by much hoarseness; night sweats, followed by great chilliness along the spine in the morning, hectic fever in the afternoon, and with wasting of flesh and sallowness of complexion; and, upon some occasions, the expectoration of mucus, and some purulent matter, with a growing contraction of the chest for several years. The fact was, I had long been declining; but for years the consumption of the lungs had been checked by chronic catarrh, and subsequently by bronchitis. By following Dr. Ramadge's directions all these symptoms have left me: my chest is astonishingly altered in shape and enlarged in size; the sinking under the clavicles, or collar bones, which was full an inch in depth, is now so filled up as to leave no indentation at all; and my strength of lungs has returned to me to such a degree (though I am, and always will be, a slender man) that I have been able to perform, since my recovery, one year's service as chaplain in the New York Hospital, in visiting the sick, and preaching on the Sabbath;\* and for several years past I have usually, Sabbath after Sabbath, preached once, and sometimes twice, in different churches. I consider my recovery as one among thousands, and attribute it entirely to my being providentially directed to Dr. Ramadge.

It is now nearly fifteen years since I was first made acquainted with this method of treating consumption, during which time I have had ample opportunity to test its efficacy in my own case, and in the case of a great number of persons; and, as the result of this experience, I do not hesitate to say that I as much believe the practice herein recommended to be a remedy for pulmonary consumption, if it be employed when any human means can reach the case, as I believe the Gospel to be a remedy for sin and its consequences. So convinced was I of its utility, from the first of my becoming acquainted with it, that one of the principal desires which led me to hope that my life might be prolonged was, to see it introduced extensively; and one of the chief sources of my pleasure now growing out of past reminiscences is, that I have been the honored instrument in introducing this remedy into my own country, and of seeing it adopted successfully by many reputable physicians in differ-

\* I resigned my office in the New-York City Hospital 1st of March, 1840.

ent parts of the United States. Many persons, too, through my instrumentality, have been recovered to good health, who now cherish towards me similar feelings of gratitude to those I entertain for Dr. Ramadge, several of whom, had they not followed my advice, would long since, in all probability, have been numbered with the dead. Intelligent gentlemen throughout the United States are giving attention to this practice, among whom are several members of Congress, to whom I have forwarded the tube and the doctor's work on consumption; and I live in hopes that the time is not far distant, when the prejudices of those who are opposed to giving this practice a fair and candid investigation may be removed, and that facts may be permitted to speak for themselves. But in this practice, as in other innovations, the community must lead the van; and as facts multiply, and persons are raised up to speak in such terms of commendation as this subject demands, (and it is of no small importance,) inhalation for pulmonary consumption will be generally introduced. Who that reflects upon the great number of persons that are daily falling victims to this dire disease throughout our country, and among these some of the brightest ornaments of society, but must feel interested to learn some particulars about a remedy that is comparatively little known, which has been the means of rescuing many persons from death? By a parity of reasoning, if it be beneficial in some cases, why not in others? But great regard should be had to its applicability to proper cases. I have seen many persons who, I felt perfectly confident, might be saved by this means, but who were unwilling to try it, because some of their friends could not understand how the lungs could be benefited by breathing through a tube. I have seen others also who have been recommended to use it, when their general symptoms were such as to render it impossible for them to recover—the lungs having been previously wasted away—yet, as they had known a case in which it had been beneficial, they were not willing to be advised not to use it, not considering that they were more diseased. Some, too, are ready to conclude, because they have seen the tube used, and the patient has died, that therefore it is useless, and consequently exert their influence against this practice, not considering that the patient was one of those in whose case the tube should not have been employed at all, and that he was so diseased previously to

using it as to render his case not only doubtful as to recovery, but certain that it would terminate fatally whether the tube were used or not. A case occurred some time since:— A gentleman, who had been sick for some length of time with consumption, and had been treated by several eminent physicians without relief being afforded him, was desirous to have my opinion; but his wife feared to invite me to see him, lest I should predict his death. A lady, however, called on me, and stated his case. I at once informed her that the tube would not be proper in his case, and that in all probability he would not live, feeling assured at the same time that he would certainly die. Subsequently a physician advised the use of the tube, and promised him that it would restore his health. It was procured; I insisting at the time that it was improper. He used it, and for a few weeks grew better. He was encouraged, and the family were gratified; but I knew full well that their hopes were elated but to be disappointed—a change followed, and he died. Now this was a case in which the use of the tube was highly improper.

It must not, however, be supposed, that when inhalation is employed in pulmonary affections, medical treatment is to be rejected. It is to be used to reduce the inflammatory symptoms, as an auxiliary, while the tube is mainly relied upon to effect a permanent enlargement of the pulmonary muscles, and to perform the cure.

In asthma, the use of the tube will be found invaluable; but it should only be used when the patient is free from any paroxysm or difficulty of breathing, to exercise and air the lungs for the purpose of contracting their looseness and flabbiness, to prevent the recurrence of the paroxysms. If its use be steadily persevered in for a long period, when the patient is free and unoppressed for breath, the return of the difficulty of breathing will not only be less frequent, but in many instances the patient will be entirely relieved.

The consumptive must not suppose that he is to commence and pursue a course of inhalation without experiencing a variety of difficulties. He will meet with opposition from some persons, who will laugh at his credulity, and from others who would reason him out of it; and also from some physicians, who are unwilling to countenance an innovation of which they themselves are not the author, and which disperses all the fog in which the treatment of consumption has so long

been enveloped. For want of information, some, through discouragement, have laid the tube aside; others, who have partially examined the subject, or pretended to have examined the utility of the use of the tube, have concluded that if heavy breathing, or exercise and air, be all the benefits derivable from its use, these can be had as well without the tube as with it. This is not true. The tube is so constructed that the air is admitted into the lungs gradually, and they are slowly expanded and aired, while it is not permitted to rush out at once, but is retained, and slowly emitted again, by which process the lungs and blood are fully aired.

Since I commenced inhaling, I have been assailed with various arguments to prove its fallacy; but being fully convinced, from personal experience, and from years of observation, that to follow the usual course prescribed for consumption, was but to hasten one's dissolution, when Dr. Ramadge's work on consumption came to my hands, upon an examination of its theory and practice, I was prepared to embrace them; and so rational did they appear to me, that I at once concluded to give them a fair trial. This resolution was based upon the consideration that my death was inevitable if this means failed me.

But there are other difficulties more formidable than the aforementioned: these are the bad feelings in the chest and lungs. Where the lungs are diseased, the exercise, expansion, and the action of the air may cause them to be sorer for a time than they have been before; and there may be a great deal of local irritation for some months, which may excite alarm; and also, upon the softening down of the tuberculous deposits, a larger and more free expectoration; this will arise from the liquefying of the old tubercles, and not from an actual increase of the disease. After a person has inhaled for full three months steadily, as directed, all tendency to the formation of any fresh tuberculous deposits will be removed, and whatever irritation or uneasiness of any kind may exist—and it may be considerable—will be in the old diseased part. A leech or two under each clavicle, or collar bone, or the use of homœopathic remedies, will greatly assist to relieve it; and by steadily pursuing the inhalation, time and the powers of absorption will remove the difficulty. The patient must also expect the return of the consumptive symptoms for months, at intervals. At these he must not

be discouraged ; they must be met as directed, and he must steadily pursue the inhalation.

To those who are not prepared to encounter these difficulties, I would remark, they are too faint-hearted to get the better of consumption. If one would live, he must resolutely move on, bad feelings notwithstanding, for month after month, with untiring perseverance. If one were to ask, For what particular length of time ? I would answer, Until all soreness is removed. So long as any uneasiness exists, so long the tube should be used : when the lungs are healed up, the soreness will gradually be diminished, until perfect soundness be restored ; and time and the powers of absorption will do it. Notwithstanding these difficulties, the patient will be growing stronger and stronger in the chest, save temporary relapses, and the changes of the weather will have but little effect. The voice will be improving, the lungs will grow stronger, the chest will be materially altered in shape, and permanently enlarged in size, while the appetite will be increased. It will gradually effect a happy change. Let the courageous try it, and they shall prove to their great benefit that these remarks are true.

In a letter to Dr. Ramadge, in answer to certain inquiries relative to my own case, he wrote :—

“After using the tube for two months, you lost all tendency to have fresh tubercles. Whatever changes you have had under seeming attacks of cold, arose, I am satisfied, from a change in some previously formed tuberculous matter. Sometimes, where the summits are the seats of several tuberculous nodules, they occasionally, from some cause or other, perhaps by cold, soften in succession, and create for no inconsiderable period a good deal of alarm, a good deal of local as well as general irritation. The steady process of expanding the lungs, by inhalation, speedily obliterates the cysts thus produced ; and every time you have a change for the worse, and think some old tubercle has liquefied, you ought soon afterwards to be doubly attentive in pursuing the inhaling system. The observance of this, with the other directions, cannot fail to make you a sound man.” But for these directions and encouragements I should have despaired.

In conclusion, I would add, that persons in every situation who lead a sedentary life—merchants, clerks, mechanics, &c., and particularly public speakers, lawyers, and ministers

of the Gospel; those who have weak voices, or who are afflicted with bronchitis, or inflammation of the throat, accompanied with hoarseness and loss of voice at times, or those who are liable to take cold in the throat or upper part of the chest upon every change in the weather, &c.—will find the tube a sure remedy, if they will persevere in its use.

The exercise produced by it, and the action of the air upon the throat, will so toughen the parts, that the changes of the weather, and exposure to the air, under any circumstances, will not affect the throat or the bronchial tubes in the least. Delicate females, who do not get the necessary exercise in the chest for health, will find it very pleasant and healthful to use it, on the same principle that they would calisthenics, or any muscular exercise. Those whose chests or lungs are at all weak, or contracted, will find that the tube will accomplish great things for them; it will improve the voice, and increase its powers and compass. To all who are in danger of becoming consumptive from any cause, a few months of its use will entirely check the predisposition; and consumptives will be restored to health by it, if any human means can effect a cure. It will do more than a sea-voyage, traveling, and change of climate; and that, too, without the necessity of leaving home, or neglecting one's regular business. The benefit derived from this means is not a temporary one, but of permanent duration; but with many it is so novel, and so unlike the old remedies, and it is so much easier to swallow medicines than to take exercise and air, that they prefer the drugs. Consumptives, who use the tube, however, risk nothing. In my case, I felt assured that death was inevitable without it, and more than death could not result from its use. To be benefited by inhalation, persons should not wait until they are actually in consumption; but so soon as they are convinced there is any liability to it they should begin at once, and cheerfully pursue it. Some, who have commenced the use of the tube, and been benefited by it, but who have felt considerable irritation in the chest, for want of proper instruction concerning its use, have been induced to discontinue it. Many such persons have been permanently benefited; their disease has been brought to a stand, and its progress arrested, and had they persevered they would have been perfectly restored to health.

A time will come, however, when this practice will be under-

stood, and when the intelligent physician will cheerfully direct the attention of his consumptive patient to the tube, keeping him at the same time under his own care, and following out the directions laid down by Dr. Ramadge, not to inhale vapors, &c., but the common air; to exercise, strengthen, and enlarge the lungs. One of the oldest and most respectable physicians of this city, who called on me to obtain a tube for one of his patients, (he had had two previously for other patients,) remarked, "I am not particular by what means my patients are benefited, if I can only cure them. I have lived long enough to know that it is best to ascertain the real merits of a case before I pass judgment upon it."

I trust the time is not far distant when this practice will be understood, and then it will certainly be appreciated. When that day does come, be it sooner or later, it will be a happy season to multitudes—for then the ravages of consumption will be arrested, and not till then.

## Chapter First.

### OBSERVATIONS ON CONSUMPTION AND THROAT DISEASES.

Is there a remedy for Pulmonary Consumption, Bronchitis, Asthma, and other chest diseases? is a question of vital importance to the whole community. The young, the interesting, the talented, the eloquent, the beloved ones of our land are falling by this ruthless and fell destroyer on every hand. Consumption is confined to no class of persons: it enters every circle, cutting down the Statesman, the Clergyman, the Lawyer, and even the Physician, and their families. The writer has in his mind the family of one of our most distinguished physicians, whose sons and daughters have died notwithstanding all the aid that regular medical skill and the usual travel abroad in foreign countries could afford. The bills of mortality, too, show that these diseases are alarmingly on the increase; that about one in every six who die are its victims; Dr. Ramadge supposes one in every four in England. Reader, you are interested in this subject; for if you have not the disease already, for lack of information, you may contract it; and if you escape yourself, perhaps your children or your dearest relatives may fall by it. Are there not in the circle of your friends and acquaintances numbers whose whole appearance warrant you to believe that, unless they find a remedy quickly, they will speedily decline? While in numerous instances the hearts of many are sorrowful by the sad havoc already made in the family circle. Nor is there exemption from consumption in our Southern States: as is generally supposed, all through Maryland, Virginia, North and South Carolina, Georgia, Alabama, Mississippi, and our Western States, they are scourged with this fell destroyer. In England, Scotland, Ireland and France, the inhabitants die in full as large proportions with consumption as in our own country; nor is the

south of France or the sunny shores of Italy free from this scourge, whole families being swept away by it.

“It is found that phthisis, as in the middle regions of the United States, is much more frequent in the temperate regions of Europe, comprised between the fifty-fifth and forty-fifth degree of latitude, than it is further to the north. While in London it is calculated that two hundred and thirty-six of every thousand deaths are caused by pulmonary phthisis, in Sweden the ratio is only sixty-three. At St. Petersburg and Stockholm it is much less destructive than throughout Germany, and more especially at Berlin, Munich, Vienna, and Paris; and, by Sir William Crichton, it is stated, that consumption is infinitely more frequent in Great Britain and Ireland, in comparison with their population, than in the northern parts of Russia. In the southern parts of Europe, from the forty-fifth to the thirty-fifth parallel, it is still found to be a very common disease.”

“It is altogether a mistake,” says a correspondent of mine, residing in Sumpter Co., Alabama, “to suppose that a southern climate is good for a consumptive. I do not believe it; but, on the contrary, think a cold climate preferable. In my opinion, the reason why some are benefited by coming south, is on account of the change, and the exercise of travelling: a change to a cold climate would have the same effect.”

The number of deaths in the city of New York during the year 1845 was 10,983; of which 1659 died of pulmonary consumption, and about 642 of inflammation of the lungs, amounting to 2301 deaths by diseased lungs in the city, being nearly one-fifth of the whole number. In the city of Boston, the number of deaths in 1844 was 2241; of which number 305 died of consumption and inflammation of the lungs:—from Jan. 1st, 1845, to Jan. 1st, 1846, the whole number of deaths was 2585; of which number 426 died of consumption. In the city of Baltimore, in 1844, 2879 died; of which 510 died of consumption, and 21 of inflammation of the lungs:—in 1845, whole number 3107, 523 of consumption and of inflammation of the lungs.

Consumption throughout what may be termed the middle latitudes is committing its ravages: nor are the extreme north and south exempt; and I doubt not that if the fact could be ascertained, the disease would be found greatly on the increase. The growing effeminacy of the habits of mul-

titudes of our population may be a sufficient reason why it is so.

The truth is, consumption is not confined to locality—although a damp, wet climate is more deleterious than a dry, cold atmosphere; but there are general causes which sap the vitality of human life, and are destructive to the functions, and especially to the throat and respiratory organs. What these causes are must first be ascertained, and then counteracted or avoided; and this being done, the means of prevention and the remedy will be made apparent.

The following remarks set forth the views of Dr. Ramadge, as published by him in London, about thirty years ago:

1. That consumption is scarcely known at all among wild men, (except the licentious and the intemperate,) or men who are actively employed and much exposed in the open air. The race-horse and the hunter, as long as they are kept employed, never have tubercles in the lungs. The exercise of running tends to give that deep and full inspiration which is so necessary to expand the volume of the lungs, and give full scope to the pulmonary muscles.

2. That there are a number of diseases which counteract pulmonary consumption.

3. That however unsuccessful medical treatment is of itself in this disease, it is a powerful auxiliary as a palliative, or in reducing the inflammation which at times exists.

When we consider the peculiarly delicate conformation of the lungs, and their immediate susceptibility of every alteration in the atmosphere, we at once see how essential it is, in order to maintain a healthy action and proper configuration of the chest, that our inspiration should be uniformly deep and full; but from the great inequality of atmospheric pressure, resulting from the constant fluctuations of the weather, as well as from the dress and postures of the body, the depth and fulness of the inspiration are exposed to frequent diminution, and that play of the chest which is as requisite to a healthy state of the lungs, as exercise is to muscular development, is consequently subject to repeated checks.

4. Hence, it is almost an invariable law, that pulmonary consumption commences in the superior lobes of the lungs—owing, doubtless, to the small extension of the upper ribs, as compared with the more complete movements of the lower ones.

5. From what is stated above, will be seen the pernicious

effects of tight lacing, and the danger to which those expose themselves who compress the chest in any way, either by their dress, posture of sitting, working, &c.

That the free use of balsams and blisters frequently tends to weaken the patient.

6. That inhalation of air (not fumes of iodine, turpentine, &c.) through a tube, properly constructed, for the purpose of airing the lungs, and exercising and permanently enlarging the pulmonary muscles, is the main thing to be depended on to effect a cure in cases of tubercular phthisis, or pulmonary consumption.

The benefit usually derived from a sea voyage, or change of air, is not so much due to the removal from an impure to a purer atmosphere, *per se*, as to the stimulating effects produced on the breathing organs, and the increased muscular powers of the chest, on which pulmonary dilatation is, of course, dependent.

Compare the expanded chest and muscular frame of the mariner, with the emaciated figure, contracted chest, and general want of vigor observable in the artisan of manufacturing cities for proof on this subject.

7. That a warm climate is more injurious to the consumptive than a cold one, and that heated or warm rooms should be avoided, and that the patient should daily exercise in the open air.

8. That a more generous diet than has formerly been allowed tends greatly to keep up the strength of the patient, regard being had of course to febrile symptoms.

9. Tubercles are less frequently met with in the muscles of voluntary motion than elsewhere; from this fact we infer the necessity of artificial means to increase the action of the lungs, and thus arrest any new development of tubercular eruptions.

10. Tubercular disposition is a specific vitiated secretion, arising from an aberration of nutrition. And the author gives a clear and full view of the manner in which tubercles undergo absorption in their early state, and their insulation, even in a state of crudity, as also the mode of union and cicatrization of ulcerous excavations in the lungs.

11. The mere *expansion* of the lungs tends indirectly to remove congestion of the liver, and also of the stomach, spleen, pancreas, and intestinal canal, all dependent on the

more free circulation of the blood in the former. The biliary, as well as the great salivary secretion, is hereby promoted to a healthy activity.

12. Grief, as well as protracted indisposition, is productive of diminution of the chest; the general debility causing local muscular weakness, more particularly in the muscles of inspiration.

There is no possible method for healing phthisis, than by bringing their surfaces in opposition, since, unlike other ulcers, they never granulate.

13. Restoration by means of inhaling through the tube is not to be expected, only when the cavities are confined to the summit of one or both lungs. When they extend into the lower lobes, relief may, indeed, be given, but it would be unreasonable to expect a perfect cure

## Chapter Second.

### CAUSES OF CONSUMPTION.

IN laying down the causes of consumption, it becomes requisite to distinguish betwixt those which are direct, and the far greater class commonly confounded with them, but which, in point of fact, are indirect. Among the first we notice the transmission of this disease from parent to child, as a melancholy fact. The marks of this sad inheritance may be traced in the sanguine, yet delicate hue of the countenance, the unusual brightness of the eyes, the confined and narrowed waist, the sharp projection of the scapulæ or shoulder blades, and the fragility of the bony structure of the body, not unfrequently united with a disposition to an unhealthy stoutness. Amongst the latter, may be enumerated inflammation of the lungs, pleurisy, contagious eruptive fever, repelled eruptions, badness and deficiency of food, amenorrhœa, unhealthy localities, affections of the abdominal viscera (sometimes caused by excessive drinking,) spitting of blood, constitutional syphilis, and a long list of disorders, whose sole influence in producing consumption consists in the debilitated state of the body they induce. I have said that it is requisite to distinguish betwixt the direct and indirect causes of consumption, not that there are any that can with propriety be termed direct, but in order to impress thoroughly upon the mind the grand truth, that phthisis is for the most part the sequence of debilitated bodily health alone. When the general health becomes impaired, a total change takes place in the fluids and secretions of the body, and there is consequently an aberration of nutriment: on this, the formation of tubercles soon follows.

“The frequency of this disease has long been attributed to the variableness of our climate, but the mode by which this

operates has not been clearly explained. It seems to me, however, that the action of the climate on the system may be reduced to three distinct heads, each equally common, and equally fatal: checked perspiration, retaining the superfluous humors, and thus vitiating the fluids of the body; constant fluctuations of health, resulting from constant atmospheric changes; and dejection of spirits, caused by mental troubles." It is essential, in order to enjoy a healthy action, and a proper configuration of the chest, that our inspirations should be uniformly deep and full; but from the great inequality of atmospheric pressure, resulting from the constant fluctuations of the weather, the depth and fulness of the inspirations are greatly diminished, and for want of proper exercise, the healthy functions of the chest become deranged, its expansion restricted, its action languid, and by degrees its shape alters. A cold, resulting either from imprudent exposure to the air when the body has become heated, or from the wearing of too light and insufficient clothing, is deemed one of the most general and powerful causes of consumption. Yet, in many instances, I am persuaded that the real and efficient cause is to be found in the pre-existence of latent tubercles in the lungs; and when these become softened by general indisposition, produced by the action of the cold, phthisis ensues. Frequently, indeed, the irritation occasioned by latent tuberculous disease, will determine a catarrh, and the patient will be treated for this complaint without any suspicion on the part of the medical attendant of the real state of the case. Should the catarrh continue, the consumptive disease masked by it will be effectually cured; and if a cavity has been formed, this will be obliterated by the increase that takes place in the volume of the lungs. At other times, tuberculous deposits will be found insulated, and rendered innocuous, as I shall hereafter explain, by the secretion of black pulmonary matter. I have verified these facts by numerous autopsies, and it is very recently, that, opening the body of an asthmatic individual, who died at the advanced age of seventy, I found distinct traces of a former consumptive state, which, having been arrested by the supervention of asthma, had existed unknown to himself, his family, or his physician. Still, where an hereditary tendency to consumption exists, or the constitution has been previously debilitated, taking cold is most certainly a frequent exciting cause of pulmonary phthisis.

Intimately connected with the contraction of the chest among females, is the style of their dress, rendering a full and free dilatation of the chest almost impossible. Taking into consideration the more delicate structure of the female frame, and her retired and domestic habits, with the sensitiveness of her mind, as compared with that of the male, and her adherence to this baneful part of her costume, she deprives herself of almost the sole chance of recovery, a due expansion of the chest. "At the Hotel Dieu, the great hospital at Paris, a young girl of eighteen lately presented herself to Breschet for his advice. On the right side of her throat she had a tumor of variable size, but never larger than one's fist. It reached from the collar bone as high as the thyroid cartilage, (called in common language, Adam's apple:) when pressed downward, it wholly disappeared; but returned as soon as the pressure was removed: it was indolent, soft, and elastic. It was observed to be largest when the chest was tightly laced in corsets. In short, by placing the ear on it, the murmur of respiration could be heard in the tumor, which proves that a protrusion of the lungs had taken place, or, in other words, that the poor girl had been laced so tightly that her lungs, having no longer sufficient space in their natural position, were squeezed out of it, and were forcing their way up along the neck." This is by no means an isolated case.

The following remarks, copied from a foreign paper, will present the subject forcibly:—"When we breathe, we take into the chest, or inhale, and give out a certain quantity of air, which can be measured by breathing through a curved tube into a bell glass of water, inverted over a pneumatic tub. Dr. Herbst, of Gottengen, has lately been performing some curious experiments in relation to the quantity of air that is breathed. Now, a person of any understanding will appreciate from them the comfort of full and unrestrained breathing. Dr. Herbst says, that a middle-sized man, twenty years old, after a natural expiration or emission of air, inspired or took in eighty cubic inches when dressed, and one hundred and sixty when his tight dress was loosened. After a full dilatation of the chest, he inhaled one hundred and twenty-six cubic inches when dressed, and one hundred and eighty-six when undressed. Another young man, aged twenty-one, after a natural expiration, took in fifty while

dressed, and ninety-six when undressed. Had Dr. Herbst made his observations on some of the ladies who carry the use of corsets to extremes, we apprehend he would have obtained results of a nature really alarming. Particular employments, in which dusty particles and noxious fumes are inhaled, have long been regarded as producing this disease; but experience has taught me that some catarrhal affection, and not consumption, is what most frequently supervenes, and that the former complaint is a preservative against the latter."

Our habits of life have much to do with debilitating our physical constitution: in addition to individuals being confined within doors, and preventing the exercising and airing of the pulmonary muscles, and expansion of the chest, by improper dress and imperfect breathing,—unhealthy apartments, especially in the inclement season of the year, are most promotive of consumption. Throughout our widely-extended land, how few sleeping apartments are anything more than boxes into which persons shut themselves, there to remain from seven to ten hours, breathing almost the same air over and over again; to awake in the morning with the tongue coated, and the whole system feverish and exhausted. When we reflect, that with most persons one third of their whole life is spent in a bed encased in feathers, it is a matter of no little importance that the room in which they lie should have ventilation. Rooms, where anthracite coal is burned, are unfit for sleeping apartments—and lying in the beds on the floor is most injurious, as all the bad air sinks to the floor. And during the inclement season, among the more wealthy class of our citizens, (to say nothing of the badly ventilated apartments of the poor,) many of the dwellings are kept so intolerably heated by furnaces, or stoves in the hall, and a large fire in the grate, of anthracite coal, in the same room in which several of the family sleep, as to consume a large portion of the vitality of the air: while all the physical exercise taken by the ladies is that of a fashionable walk of a few blocks, at a snail's pace, with ribs compressed by fashionable attire; and the gentlemen ride or walk to their places of business, there to remain, frequently in over-heated offices, to spend the day in mental pursuits, with occasional sudden exposures. Excesses in eating and drinking, and rapid swallowing, without taking time to chew the food, and

thus preparing it for the stomach, lays the foundation of much functional derangement. Take time to eat, to chew, to grind the food well; to use the teeth is the best method to preserve them. The common class of Europeans, who eat hard bread, have a clean mouth, good teeth, and a strong digestion. A cheerful mind has much to do in preserving health; depression of spirits disturbs digestion. Cultivate cheerfulness, which is an "implied praise and thanksgiving to Providence for all His dispensations; it is a kind of acquiescence in the state wherein we are placed, and a secret approbation of the divine will in His conduct towards men." Our errors, for the most part, as it regards both body and mind, are so many, that were it not for the great tenacity of life, within the human constitution, life would be even shorter and more burdensome by diseases than it is. There is much to learn of the physiological laws of life, and until these laws are studied, and better understood, the loss of health and life must be the consequence. Intense application of mind to studies, to the neglect of physical exercises, often prepares the way to an early grave. The ambitious youth are in such haste to accomplish so much in a given time, that they push on with all their energy, until, just as they are coming to maturity, their physical constitution is broken, and they are ruined for life. How much better would it be to keep up the general health, and do no more than could be done without destroying the whole structure; for if the body be ruined, of what avail is the education? The more delicate and slender the body is, the greater the caution requisite to counteract the continual draughts made upon it by mental application; and, let not the strong and the healthy suppose that they can violate the laws of life with impunity. Numerous are the examples which might be given of the most promising, who, just as they were about to enter upon the great theatre of life, have fallen by consumption; and that, too, the result of a course of habits, which might at an early period have been prevented.

#### THE CAUSE OF DYSPEPSIA.

*Depression of mind* has much to do with the destruction of health and life. As the author has never seen the *modus operandi* of the effects of depression of mind upon the bodily

health explained by any writer, and as multitudes of lives are destroyed daily and annually through this medium, the mind being the incipient cause of disease, he will avail himself of this opportunity to remark, that the first effect of mental depression is to produce imperfect breathing, which is one of the most direct, if not THE DIRECT CAUSE OF DYSPEPSIA, AND ALL THE DERANGEMENTS OF THE VARIOUS ORGANS INCIDENT UPON INDIGESTION, HEADACHE, ETC. Instead of taking into the lungs a full quantity of air, unconsciously sighing is indulged in, and as this seems to give some relief, it becomes frequently repeated, until the habit becomes confirmed, and a numerous train of evils follow: the diaphragm, which in a state of health moves upwards and downwards—a kind of churning motion, and acts upon the stomach, the bowels, and, indeed, upon the whole abdominal viscera, causing the whole abdomen to swell out when a full inspiration is taken—now lies dormant—the diaphragm is drawn up, and has by imperfect breathing lost its downward motion; the whole abdominal viscera lies quiescent, scarce any action at all is had below the pit of the stomach, and for lack of taking in a full quantity of air in the lungs, the muscles of the whole body become tightened and flattened. Nor is this strange, if we consider that “every square inch of the surface of the globe is pressed by a column of air of fifteen pounds weight; every square foot by one of two thousand one hundred and sixty pounds; and a middle-sized man, whose surface is about fourteen square feet, carries a load of atmospheric air equal to thirty thousand two hundred and forty pounds weight. This may appear incredible; but the resistance of the air that is within our bodies prevents us from feeling the pressure of the external air; for the air which is pent up in our bodies maintains an equilibrium with that which acts upon us in all directions.”

The circulation of the blood being imperfect, the feet and hands become cold, the position of the body bent, and inclining forward; the bowels for a long period, for months, or even years, are constipated, and then alternately are affected by diarrhœa. The whole physical frame suffers; the nervous system becomes exceedingly sensitive, and the brain very active, while the mind at times is greatly depressed; and what characterizes this long train of evils is frequently an entire prostration of strength fainting turns, or con-

vulsions; all produced by upward breathing, or exhausting the atmosphere from the lungs; by a habit of what may be termed continuous sighing, which acts upon the lungs much as the air-pump would; exhausting the air from the lungs, and causing the system measurably to collapse; and what adds seriously to this derangement is, that the patient (and the physician frequently, too) is insensible; but that he is breathing just as he was made to breathe. From this cause commences the history of decline, in the case of thousands. The young, the beautiful and the gay, through disappointment, hope deferred, yield themselves unconsciously to this pernicious habit. The ambitious, the jealous, the envious, the sorrowful, indeed, persons in all the departments of life, though once strong and full of vigor, fall alike into this vortex; and when once this habit of breathing is formed, the foundation for permanent ill health is laid; and the probability is, that the habit will become confirmed. The physician's skill is sought; physics, blisters, tonics, bleeding, salivation are all successively employed; but every dose only increases the weakness of the organs, and renders recovery more improbable; and then comes the recommendation of sea-voyage and travel. The only remedy, however, that will bring back health, if it be commenced before it is too late, is a restoration to correct habits, full inspiration, the resuming a healthy posture in standing, sitting, walking or reclining. Let nature work, give the organs room to act; and here, I am sure, that intelligent physicians would serve the cause of humanity a thousand-fold more, were they to direct their attention to imparting instructions in this department, in numberless instances, than in relying upon any system of medicinal treatment whatever. As the effects of upward or incorrect breathing seem to have been entirely overlooked by the profession in practice, although fully and fairly expatiated upon in theory, I subjoin a few facts, which I might swell indefinitely.

The first, that of a young man of about twenty years of age, of nervous temperament and melancholy cast of mind, but ambitious and determined character, being left to his own resources, and having to commence life under many disadvantages, his pathway was strewn with numerous difficulties. In the pursuit of business the physiological laws of his constitution were often violated, irregular meals, food hur-

riedly eaten, and not well chewed, up late at night, and confined within doors with the smell of cloths; and breathing an atmosphere exhausted and heated by gas-lights, &c., without vigorous manly exercise in the open air and cheerful society, then unconsciously came the habit of sighing or exhausting the air from the lungs, which at times would entirely prostrate him; there were seasons when he would become almost lifeless; they were called fainting turns; but there was no lack of consciousness, the mind was as acute and vigorous as ever, and nothing transpired around him without his knowledge; but he was without power to move a muscle, even to raise a finger; the countenance would become livid, the feet and hands cold; and in this condition he would lie for half an hour, then revive and then relapse again; these turns would last at times several hours; while every exertion was made by friends to keep him alive. After a few months his strength permanently forsook him; and he was obliged to retire from the pursuit of business, the most eminent physicians of the old school were employed, physic and tonics were alternately employed, then cold and warm bathing; then local and general bleeding; twice he was salivated with mercury, which all tended to reduce his general strength; then country residence was tried; then sea voyage and travel, and the consultation of eminent physicians abroad. The result of one consultation of distinguished physicians at home, was the advising a course of dissipation. He was thought to be in a deep decline; but when all hope seemed to be expiring, he providentially was directed to a physician who understood the philosophy of correct breathing; a few lessons upon the use of the lungs and the effects of full inspiration upon the diaphragm; and some artificial motions applied to the abdomen, put him all right; but the organs being greatly debilitated for lack of use, months transpired before he regained his strength. More than twenty years have now elapsed during which he has been freed from those distressing turns of weakness, and has been actively employed in business; but the lessons of experience were bought at a great price—the loss of five years of the best of his life, and sacrifice of a most flattering business.

Another case—a young lady in the vicinity of New York, once a beautiful rosy-cheeked girl, full of vivacity and good nature; but just as she was verging into womanhood,

circumstances occurred which greatly depressed her mind; and she began gradually to decline; her countenance became so altered as to be scarcely recognized by those with whom she had formerly been intimate; the once sparkling eye had lost its fire; the body became emaciated; spirits dejected, her form bent forward; and being long confined to the house, the impression became general, that she must die. The physicians had exhausted all their skill, and her recovery had been given up as hopeless; but a few lessons upon correct breathing, and a restoration to the observance of the physiological laws of her constitution, and she recovered. She subsequently married, and became the mother of several children, and for many years has enjoyed excellent health.

The case of Samuel P——l. He was the only child of a widowed mother, and her dependence; a promising, active young man, of correct habits; he was greatly beloved; but his health failed him; strength and spirits were gone; bowels disarranged; breathing bad; and finally he had to take to his room. The best physicians were employed, but without help; he was finally pronounced incurable. For two years he had been confined to the house, when the author saw him; he sat bolstered up in his chair, spitting more than a pint of frothy mucus daily; upon intimating to him and to the family that he would recover, the family would give no credence to the thought, so long had they regarded his case as hopeless. A few simple instructions on correct breathing, and artificial exercise to aid the action of the diaphragm and the abdominal viscera, and he began immediately to improve; and in less than three months, he was in excellent health, and had gained many pounds of flesh. He subsequently married, and for many years has been a successful merchant in Green County, New York. The following remarks, showing the effect of depression of mind as preparing the way for consumption, will be found interesting.

“Mental anxiety, or any depressing passion long continued, as well as chronic diseases of various kinds, engender a consumptive predisposition.”

Laennec, the French author, gives an interesting account of the effect of depressing passions in producing phthisis, in the case of a religious association of females, all of whom became consumptive from the ascetic spirit which regulated their minds, rather than the austerity of their diet. Confine-

ment, most likely, contributed to this result. Since this society was bound by no vow, Laennec persuaded the members, as soon as consumption was clearly indicated in each, to change to another place of abode, and he expressly declares that nearly all who took his advice recovered. Dr. Ramadge remarks: The possibility of consumption being cured is even yet denied by many practitioners, although the light of truth is beginning to dawn upon them; and yet the above relation is a proof, that, some years previously to the appearance of his work, "Consumption Curable," the greatest medical authority on the disease had stated opinions similar to his. A parallel circumstance has occurred, in the course of my practice, within the last two years. Two young ladies were removed from a school in the neighborhood of London, in order to be put under my care for consumption. I ascertained that ten or twelve of their school-fellows had sunk under decline, within the preceding twelve-month: and, on inquiry, I found that the only exercise they were allowed, and this but seldom, was the prim, formal walk, two by two; which pernicious and false decorum, it is to be hoped, will soon be banished from these establishments.

To such an excess were the fantastical restrictions of the school carried, that the poor girls were not allowed to hold their heads erect, or maintain a proper carriage, being told that so to do was a sign of pride. By this enforced humility, conjoined with the radical error—want of exercise—both my young patients not only stooped, but, I am sorry to add, had contracted chests, and lateral curvature of the spine.

I should mention the sequel of Laennec's account, in order to establish more fully the coincidence between the circumstances, and to direct attention to the ill effects of such absurd confinement. He proceeds to narrate, that he witnessed, in the course of ten years, two or three renewals of the religious society, by the admission of new members to replace the loss of the old ones; and that the only individuals attached to it, who withstood its depressing influence, were the superior, the grate-keeper, and the sisters who had charge of the kitchen, the garden, and the infirmary. In addition to the exercise given by these offices, the same individuals were called upon, occasionally, to visit the city on the concerns of the establishment. This narrative requires no comment.

Many writers are of opinion, that various thoracic diseases are fruitful causes of consumption; but I am satisfied that this supposition is groundless. It is merely owing to the loss of health entailed by them, that the development of those accidental productions, called tubercles, takes place. To enumerate the indirect causes of consumption, would be endless; for, in fact, whatever is capable of impairing the constitution, is liable to produce a phthisical state.

#### THROAT DISEASES.

As inconvenient and distressing at times as is the enlargement of the tonsils—bronchitis and inflammation of the throat—yet these diseases, like catarrh, instead of leading to consumption, are nature's remedies to arrest the disease, and, but for them, the ravages of consumption would be more general than they are. See this subject explained in the chapter on "The Cure of Consumption."

The causes of bronchitis are the same as those which lead to consumption; whatever tends to debilitate the general health, may result in bronchitis or throat diseases. Persons who go about the street crying out the articles they wish to sell, are seldom the subjects of throat diseases, their general health being kept vigorous by their exposure to the air, and exercise; but school teachers and clergymen allow their general health to decline, while their voice is in constant use in a most pernicious atmosphere.

But, what tends more directly to produce bronchial and lung affections among clergymen, is a bad style of delivery; speaking is frequently too rapid, time is not taken to breathe, or to take in a proper inspiration; the lungs are exhausted, the throat is strained to perform what could easily be accomplished, if moderation were used in delivery, and care taken to breathe well, and the intonations and modulation of the voice well cultivated. By neglecting to observe a proper style of delivery, many a valuable minister is laid aside; and by due regard to it, many a slender, delicate man, has been enabled to wear well, and to perform effective service in the church for many years, and to improve his voice and lungs in preaching. "It's all preach with you," said a learned professor one day to a young preacher. "If you quote Scripture, or illustrate it, or relate an incident, you preach it

all. Now, would you not do better to talk more, and preach less?"

Let clergymen then take care of their general health, and let them cultivate a proper style of preaching, and throat and lung affections will become less prevalent. But to those who are thus affected, I unhesitatingly state, that the use of the tube is the best remedy that can be employed.

## Chapter Third.

### SYMPTOMS OF CONSUMPTION.

#### LOCAL AND SYMPATHETIC—PHYSICAL SIGNS OF THE DISEASE.

It has long been acknowledged, that the symptoms on which practitioners generally rely in the incipient stage, as indicative of consumption, are extremely variable and uncertain. Its attack, indeed, is, in many instances, so deceitful, that before the patient is in the least aware of his danger, the case has become desperate. Again, it seldom happens that pain, or any other uneasy sensation, is felt in the part which is well known to be the primary seat of the disorder, although it results from tubercles disseminated at first in the substance of the upper part of one or both lungs. At other times, we see cases in which its progress is latent and altogether unheeded; still, a slight cough is generally the first symptom, and this is attributed to some uneasiness in the throat, produced by a common cold. After a time the cough increases, and from being either hard or dry, is followed by the expectoration of a little mucus often devoid of color, as in common catarrh. This is succeeded by some degree of weight and slight pain felt in the chest, along with difficulty of breathing, general weakness, and an accelerated pulse, which seldom ranges below 90; during the hot state of the hectic fever, it is generally 120. A sense of chilliness along the course of the spine, commonly experienced towards noon, is the next symptom; this is followed by an augmented temperature of the body on the approach of evening, and finally by perspirations, which usually come on profusely after midnight, and greatly attenuate the body; and sometimes spitting of blood occurs, and the expectoration begins to assume

the appearance of pus. With these symptoms, and, indeed, without all of them, we have strong grounds to suspect the presence of pulmonary consumption. The occurrence of cough in any case, in which the general health has been impaired, ought to be regarded with no small suspicion. Cases are not wanting in which the disease manifests itself most irregularly. For instance, the usual characteristic symptoms are not uncommonly preceded, for a short time, either by mesenteric enlargement, aphthæ, (sore tongue, &c.,) severe diarrhœa, amenorrhœa, (suppression of the menses in woman,) or by an affection of the larynx, attended with a slight alteration of the voice. Though in the early stages there may be some doubt as to the existence of phthisis, without the aid of physical signs, there can be, however, little chance of mistake in the advanced stages. As soon as hectic fever is fully established, the wasting of the flesh becomes remarkable, and rapidly increases, if perspiration, diarrhœa, and expectoration have been abundant. To me, who have been for so many years accustomed to see this disease daily, the very look of the patient is in most instances sufficient.

The nose and cheeks assume a striking prominency, and the bluish paleness and emaciated appearance of the face are remarkable, when contrasted with the suffused, and at other times, circumscribed flush, which quickly goes and comes, together with the shining white or pearl-blue appearance of the conjunctiva of the eyes; the shoulder-blades project, so as to be likened to wings, while at the same time, the chest is narrowed in its lateral as well as transverse diameter, in consequence of the increased convexity of the ribs, which has a greater inclination downwards, and which thus likewise admits of the nearer approach of the sternum towards the back. On the upper and anterior part of the chest, the intercostal spaces appear widened and depressed, and the belly is at the same time flat and retracted;—the fingers seem lengthened, and the joints of these, as of other parts, are apparently enlarged; incurvation of the nails takes place, and where large tuberculous excavations have long existed, an actual enlargement of the ends of the fingers is observable; the neck seems elongated and impeded in its movements, and the angles of the lips are drawn back, and produce a bitter smile.

Phthisis is not difficult to be recognized in that stage in

which the tuberculous mass, becoming softened, finds an opening into some of the neighboring bronchia, and finally leaves a cavity, whose existence is clearly indicated by its characteristic symptom—pectoriloquy. This peculiar phenomenon is generally first heard in the upper portion of the right lung, when the tubercles which first appear there are softened down; and it may be detected by applying the ear over the uppermost ribs, or over the infra-spinal fossa of the shoulder-blade. When the voice of the patient, on applying the ear either alone, or armed with the stethoscope, to that part of the chest corresponding with the supposed seat of an excavation, is heard much louder than natural, and seems to issue uninterruptedly from within with a thrilling sound, it constitutes what is termed a satisfactory pectoriloquy, and is an indubitable sign of a tuberculous cavity; the contents of which we even hear not unfrequently by the same method of diagnosis, agitated by the action of coughing. Whenever the walls of an old, and nearly emptied excavation, are dense and firm, a severe fit of coughing gives to the ear a metallic resonance, or a sound as of some empty glasses slightly shaken against each other. If the excavations are numerous, and communicate one with another, the liquid matter within is heard changing its situation every time the patient breathes.

The plan I always pursue, and indeed a most ready one, to distinguish consumption from pulmonary catarrh, with which it is liable to be confounded, is to apply the ear to the posterior part of the chest, about two or three inches below the inferior angle of the scapula. Should the respiration be almost natural, or slightly puerile here, we may at once, and early, proclaim the case to be phthisical, if the patient have a troublesome cough, though he may present few of the other common symptoms belonging to a consumption. Except near the fatal termination of the disease, when the great emaciation, confirmed hectic fever, diarrhoea, and other bad symptoms manifest themselves, we have no physical sign of any bronchial inflammation; save in cases in which some progress towards recovery has taken place. When the sonorous rattle occurs before the lower lobes of the lungs are affected with turbercles, it is to be considered as a highly favorable symptom. In other cases, however violent and long the cough may be, auscultation gives us no signs of the catarrhal state which precedes and follows complete recovery.

Having daily opportunities of seeing new consumptive cases, I readily come to a conclusion, by the absence of catarrh, that they are undoubtedly consumptive, without taking the trouble to ascertain the state of the upper part of the chest; for if an individual coughs up blood, or muco-purulent matter, is subject to chills, accessions of fever, and night sweats, wastes away and complains of debility, and no catarrh is heard in the inspirations, we may be perfectly satisfied that tuberculous cavities exist. When there is a cough which is not influenced by remedies, and the sympathetic signs of consumption and the auscultatic results beneath the clavicles are somewhat unsatisfactory, while the lower part of the chest has the murmur of respiration almost natural, I should then, satisfied with the experience derived from exploring the chests of several thousand consumptive patients, unhesitatingly pronounce the case to be genuine consumption. In numerous instances I have pronounced a patient to have tuberculous disease in the superior lobes, while he exhibited no look indicative of such serious illness, but had merely an annoying cough. This prompt decision, after I have ascertained by the ear the sanity of the respiratory murmur, and absence of bronchial irritation in the inferior part of the chest, has generally proved correct. In some instances, obscure respiration in the upper part of the chest, arising from tubercles and pulmonary induration; in others, a tuberculous cavity, affording the most perfect pectoriloquism, has been ascertained; and, on closely questioning the patient, the symptoms he has detailed have usually been corroborative of what might be termed, if we were guided by the apparently unimpaired state of health, latent phthisis.

## Chapter Fourth.

MEANS BY WHICH TUBERCLES IN THE LUNGS MAY BE PREVENTED.

THE remedies which will be found most advantageous in preventing consumption from becoming confirmed, are those which will tend to keep the body in the greatest degree of health and strength. Wherever there is a tendency to a scrofulous habit, either in the general system, or in the lungs, —and consumption is but scrofula of the lungs,—the diet should be generous, and of a nutritious character; as, for instance, roast beef, or mutton, or something equivalent to them, should be eaten at least once a day. Time to eat should be taken, and the food well masticated to prepare it for the stomach. A cheerful mind should be cultivated, that the process of digestion may not be impeded, while daily exercise in the open air, sufficient to call into action the whole system, should answer all the purposes of keeping the bowels in a healthy condition, without any medicines whatever. The inspirations should be uniformly full and deep, causing the diaphragm to have its full action upon the abdominal viscera. The employment should be a healthy one, and in a good atmosphere, while crowded evening meetings and night air should be avoided. Moderation should be used in mental pursuits, which should be carefully counteracted by physical exercise daily. Standing, sitting, or walking, if performed well, will contribute to the general improvement of health; but they may all be performed so badly as to lose much of their benefit. An airy bed-room should not be overlooked; while rooms heated, and especially by anthracite coal, should be avoided. Bathing, if it be properly performed, and followed by friction, will also be most beneficial. As it regards reliance on medicinal treatment in preventing the liability to consumption, when the habits are correct, and exercise sufficient is taken daily in the open air, it can be entirely dispensed

with. It should be kept in mind that whenever a person is tending to consumption, there is a growing contraction of the chest, and that the lungs, for the most part, being but partially inflated by the small quantity of air inspired, and the throat being somewhat altered by disease, that the air passes so freely from them that the lungs and the blood lose a great portion of the benefit which nature intended should be derived from full and perfect inspiration. Now to counteract the growing contraction of the chest, and the consequent compression of the lungs, and to bring the lungs into full and perfect use, nothing can effect what a daily systematic use of the inhaling tube will. The construction of the tube is admirably adapted for this purpose. The air is drawn in gradually through a larger aperture, and then when in the lungs a small valve closes, and leaves a smaller opening through which the air passes out; thus leaving the air in the lungs for a longer period of time than it would remain without the tube, causing ultimately a permanent enlargement of the lungs and the chest, while the system in general is by this means greatly invigorated. The use of the tube will more effectually exercise the lungs than all other gymnastic exercises, especially when persons are debilitated from any cause. An individual may stand, or sit, or even lie down, and by drawing in the air through the tube, have all the benefit of full inspiration to the lungs. It is on this principle that sea-voyages and short excursions are recommended. The exercise and the exposure to the air increasing the depth of inspiration, and stimulating the system in general, while the tonic power and bracing atmosphere from the sea-breezes, which are impregnated with saline particles, act as stimulants to the lungs, and cause deeper and more frequent inspirations, and thus forward the enlargement of the chest—a point of the greatest importance to the invalid. Another advantage sometimes resulting from taking a sea-voyage is, that not unfrequently one contracts a severe cold, which terminates in some variety of catarrh, which catarrh will entirely arrest the progress of consumption. It is on this principle that sea-voyages are found beneficial, but in numerous instances they result most disastrously.

Of the different kinds of exercise I would particularize running and riding, as the most calculated to forward the purposes of prevention; indeed, as the best general prophy-

lactics. After a quick and brisk run, the respiration becomes frequent and deep, and the panting that ensues by exercising the muscles of the chest, favors a healthy development of that part, and enlarges the volume of the lungs. It has been my universal practice to recommend a constant attention to this healthy exercise, in those schools I have been in the habit of attending, and to advise the preceptors to promote it by every inducement within their power; and I have never been disappointed in the results experienced. Nor are its happy effects confined to the mere expansion of the chest; by the greater portion of air thus brought into contact with the venous system, the blood becomes more effectually decarbonized, the animal heat increased, the action of the heart more vigorous, and the multifarious secretions are carried on with greater energy.

Riding is an exercise of no mean value, for the self-same reasons, with this advantage, that it yields all the good effects of the former, unattended with its fatigue. To those, however, in whom consumption has decidedly appeared, the benefit derivable from this mode of exercise may, perhaps, be enhanced by the tendency to an upward motion imparted to the lungs, thus disposing to apposition the diseased surfaces in the upper region of the chest.

A strong proof of the advantages of exercise may not unwarrantably be sought for in the probable exemption of man, in a savage state, from the ravages of this disease. Although various disorders are mentioned by travellers as having fallen under their observation, I do not remember, in the course of my reading, to have met with any notice of consumption, recorded by those who have mingled with the savage tribes of either the old or the new world; at least, amongst the more active races of uncivilized man. Indeed, it would be wonderful were the case otherwise. Dependent for their subsistence on incessant vigilance and vigorous exertion; constantly engaged in the toils of the chase, or animated to activity by the animosities ever subsisting between neighboring tribes, however they may lapse occasionally into habits of sloth and indolence, their life from the cradle to the grave must, generally speaking, be calculated to call forth and perfect every bodily energy. Free from the restraints which are the unavoidable consequence of a state of superior intelligence,—neither confined to the manufactory, nor chained down to the

desk of the counting-house, untrammelled by dress, and uncramped by the various devices to which either fashion, or the force of habit, renders us subservient despite the dictates of reason,—the savage possesses, at least, the uncontrolled use of his limbs; and the symmetry, usually observed in him, is perhaps the best index of the health he enjoys. If, too, we extend our course of reasoning to the inferior race of animals, and observe the differences existing between them and their wild and domestic condition, we shall find a singular analogy betwixt them and man. To go no further than the harmless creature, the rabbit, I have found, in the course of my researches in comparative anatomy, that this animal frequently dies of consumption in its tame state; but I never met with an instance of the kind in the wild rabbit. Perhaps the benefit of exercise cannot be better exemplified than by way of contrast. Swine, proverbially the most indolent of animals, are also the most subject to tuberculous disease; hence the derivation of the word *scrofula* from the Latin *scrofa*, a swine; and consumption and scrofula are identically the same, both resulting from the presence of tubercles. To pursue the analogy, another strong instance of the force and good effects of exercise is observable in the race-horse, the hunter, and indeed in all this class that are subject to frequent and active exertion. These seldom or ever, I believe, are found to have tubercles in the lungs, so long as they are kept constantly employed. Many illustrations of this nature might be adduced, but sufficient has been said to enable the reader to extend this comparative inquiry, and to confirm the high value which I set on the effects of judicious and well-regulated exercise.

## Chapter Fifth.

### TREATMENT OF CONSUMPTION.

THERE are but two modes by which we can hope to cure this disease: the one is by rendering it chronic, and the other by artificially enlarging those portions of the lungs which are pervious to air. In the first, we endeavor to effect an absence of constitutional disorder; but, after this change is effected, there may still remain for an indefinite period one or more cavities uncatrized, with lining membrane, partly semi-cartilaginous, or of such condensed and insensible structure as to be productive of little inconvenience, if we except occasional cough and some hæmorrhage, which last occurs at long intervals, and rarely to a great extent. In the second, there is produced what is invariably seen when nature or art has effected a cure—an enlargement of the vesicular structure of the lungs, and subsequently a gradual healing of the tuberculous excavations. It has always been my great aim to put an end, as early as possible, to the symptoms of hectic fever, and this is to be accomplished by medicinal treatment, in allopathic practice, by moderate antiphlogistic means, among which I may mention general and local blood-letting. But a better treatment, in the opinion of Dr. Howe, is that of Homœopathy, and to some extent Hydropathy may be employed most successfully. In the hot stage of hectic fever, relief may be had from having the hands and upper part of the body sponged with tepid water and vinegar. In the cold stage the patient should be wrapped up warm, the feet placed to the fire or immersed in warm water, and some warm beverage taken. When the perspiration is profuse an infusion of columba, chamomile, or other treatment will lessen it. As it regards blood-letting, it must be premised, that any active treatment of this kind employed without discrimination, particularly when much tuberculous disease is dis-

seminated through the lungs, and has formed numerous cavities which have seriously and manifestly impaired the general health, would in most cases be productive of the greatest evil, and possibly soon give rise to œdema of the lungs, or some other watery effusion elsewhere. Few consumptive cases terminate fatally, without being preceded by some dropsical state of the lungs. This generally occurs when the feet and legs begin to swell, and is a period too when leeches even are rarely admissible.

The object of medicinal treatment is “to effect an absence of constitutional disorder”—or to reduce the fever or sweats, or cough, or oppression which may exist upon the chest; but medicinal treatment alone is proved daily inefficacious in healing a cavity in the lungs. Dr. Young, of St. George’s Hospital, London, writes thus: “It is probable that without assistance not one case in a thousand of the disease would recover; and with the utmost power of art, perhaps not more than one in a hundred will be found curable.”

“As well might the mason attempt to repair a stone wall without mortar or stone, as to cure consumption by putting medicine into the stomach. Mortar, stone, and labor—air, food, and exercise.”—*Ed. Scalpel.*

Few men have had so extensive an opportunity to test all the systems of medical treatment in consumption as has Dr. Ramadge—and it was with deep mortification that he saw, notwithstanding all his efforts while he relied upon medicines alone, that his patients invariably declined. Dr. R. remarks: “I felt mortified and degraded at the utter inefficacy of medicine; and I was soon convinced, that the only means of rescuing my profession from this ‘darkness visible,’ was to make the physician subordinate to the anatomist. From the post mortem examination of more than three thousand bodies, he discovered, that by some means nature frequently interposed to arrest the progress of, and cure consumption. In numberless instances he discovered cavities which formerly had existed in the lungs, which had subsequently healed, and the patients had ultimately died of other diseases. In tracing back the history of such individuals, when information could be had, Dr. R. ascertained that there was a period when they had had all the symptoms of consumption, and were rapidly declining, but for some reason unknown to the patients or their friends, their diseases took a turn, and they

gradually began to recover, and soon lost all their consumptive symptoms, and subsequently enjoyed excellent health. It was a matter of the highest importance to ascertain what those means were which caused their recovery; and by long and patient investigation, he arrived at the knowledge of this fact, that from some cause or other the lungs had become enlarged, and the disease had assumed an asthmatic form, in other instances that catarrh had intervened and arrested the disease, and health had returned.

Further investigation assured him that bronchitis, (instead of being a cause of consumption, as is generally supposed) the enlargement of the tonsils, and any chronic inflammation of the larynx, all operated to prevent the progress of consumption, and to recover the lungs. A violent racking cough, which to a common observer was indicative of decline, has not unfrequently been the means of curing consumption, the cough being of a convulsive character like that of whooping cough, producing a rupture of the air-cells, and causing infiltration of air within their partitions, thus rendering the lungs voluminous, and producing a species of asthma, which naturally would bring the surfaces of any excavation into contact, and heal them. In view of the inefficacy of medicines, and having already satisfied himself of the folly of consumptives going to a warm climate, it very naturally occurred to him that if persons in consumption could become asthmatic, or contract some disease of the throat to counteract the disease of the lungs, that they would recover.

In his efforts after nature's remedy—nature seemed to lead him on—one winter becoming discouraged with his unsuccessful efforts in treating his patients—he advised them to leave the warm apartments in which they were during the inclement months of the year, being assured that if they continued with him they would sink on his hands; and they went their ways, some of them to poor, and often exposed habitations. Subsequently, he found some of those persons, much to his surprise, in the enjoyment of good health; and by careful investigation he ascertained that their exposure had been the means of their restoration, they having taken a severe cold, which had resulted in chronic catarrh. He records an account of one person, who becoming impatient of the confinement of the house, and of medical treatment, broke away from the sick room, and went in the month

of March and seated himself on the banks of the river Thames to fish, and in so doing contracted a severe cold, which resulted in catarrh, and he recovered."

Before I was aware, the Doctor remarks, how materially the lungs can be enlarged by simply inspiring through a tube of proper diameter, I was induced some years ago to try various means for producing pulmonary catarrh, or some corresponding affection, in the great air-passage vulgarly called the wind-pipe; knowing well what an excellent agent such an affection is for expanding the chest, removing speedily well-marked symptoms of consumption, and, in a word, destroying altogether the tuberculous tendency. For this purpose, as in the heat of summer and the early part of autumn, we rarely meet with cases attended with a catarrhal complaint, one of my expedients was to oblige the patient to breathe twice or thrice a day atmospheric air, made cold by artificial means. In more than one case I succeeded in producing a catarrh, which led to the recovery of the consumptive patient. I have, on several occasions, dismissed those in-patients of the Infirmary for Diseases of the Chest—the wards of which are heated in winter so as to imitate a moderate summer temperature—whose consumptive state seemed to be but little relieved; but, owing to their going at once from the warm atmosphere to their own abodes, where perhaps some of them were badly secured against cold, or indeed owing perhaps to their imprudent and thoughtless exposure to the open air, they have caught a severe cold of a catarrhal nature; and this, I can assure the reader, has alone effected a cure in some who have had tuberculous excavations of ancient, as well as recent date. I subjoin a case, in which will be seen the value of a catarrhal affection in removing, or affording perfect security against consumption.

Before Dr. R. had arrived at the knowledge of the benefits to be derived from inhalation—knowing the value of some obstruction or inflammation in the throat to arrest consumption, he made an experiment, which resulted most favorably, upon a young man (a cutler by trade) who had lost three brothers by consumption, who came to Dr. R., seeking to be relieved from symptoms similar to those which he had observed in the deceased brother's during their illness. Without detailing the case, I will remark, that in order to arrest the consumption, he advised a steel spring to be worn on the

neck, so constructed as to make pressure upon the trachea, immediately above the sternum, and between the sternocleido mastoid muscles.

This instrument was worn at intervals for the space of two months. In front, a small piece of dry sponge was placed between the converging points of this imperfect collar and the wind-pipe; most happily for the patient, the pressure on the wind-pipe caused a slight mucous inflammation within it, and this was succeeded throughout the lungs by bronchial irritation, with a slight wheezing denoting an enlargement of the air-vesicles. None of these symptoms were interfered with; and they continued for some months, after every apprehension of consumption was removed. It was really wonderful how much he increased in flesh, and to what bodily vigor he arrived, especially when the catarrhal complaint had established itself in the neighborhood of the tuberculous disease in the superior lobes. At the expiration of a fortnight from this time, a loud mucous rattle began to appear near to the seat of the pectoriloquy in the top of the right lung; all trace of a cavity was nearly lost, and the respiration there daily became more audible. The same improvement took place in the respiration of the upper portion of the other lung, which, I have already mentioned, seemed to be diseased. With the exception of periodic shortness of breathing, sometimes preceding and at other times following fits of coughing, the patient might be said, were he judged only from his looks and his feelings, to be perfectly well. After tracheal rattle had been distinctly heard in the larynx for a month, and appeared to be extending itself along the trachea to the larger bronchial tubes, he was directed to discontinue altogether the further use of that simple apparatus, the steel collar. On one occasion only was it necessary to moderate, by the application of leeches, the mucous excitement of the lungs, when it ran so high as to cause suffocative breathing, incessant cough, superabundant expectoration, and general febrile disorder. With the exception of five grains of compound ipecacuanha powder, and double that quantity of extract of hops, made into pills to be taken at bed-time, and the occasional use of a mild aperient, there was little else done for the supervening catarrh; for I felt exceedingly reluctant to interfere much, well knowing the value of the new disorder, and that it would long prove a successful antagonist

to any future, as well as present, liability of sinking under consumption. In the month of August, three years from the time he became my patient, I had an opportunity of seeing him in the enjoyment of excellent health; if I except a little asthmatic respiration, which I detected by the naked ear, whenever he made a forcible expiration. The expirations were of an emphysematous character, in the upper part of the chest, both before and behind: the air, in fact, was heard escaping from the enlarged air-cells with a prolonged murmur, in which dry cracklings were audible, perhaps arising from some air-cells being united into one. Having ascertained what I have just described, and how much the shape of the chest had been altered, which, from being narrow in its antero-posterior diameter and flat, was become cylindrical and enlarged, I assured him that he never would relapse into his former consumptive state; and that with some care, on his part, in attending to the directions which I gave him, his present asthmatic symptoms would have little effect in abbreviating the duration of his life.

This case is highly instructive. It is one by which mechanical aid produced, in the midst of summer, such a degree of general catarrhal affection of the air passages of the lungs, that complete recovery took place. Nor was this all; for, through the emphysematous state of the lungs, perfect security existed against any liability hereafter to tuberculous productions. In a word, he escaped all danger of pulmonary consumption.

It may not be uninteresting to mention the particular circumstance which led me to imagine and adopt the above invention. A gentleman of the name of Willis, who a few years ago resided in the neighborhood of Kennington, and was under my care, happened to have a small oblong tumor in front of the neck, with its inferior portion lying between the sternum and the trachea, from which resulted a slight obstruction to his respiration. This tumor, which had existed for some years, had induced a perfectly asthmatic state. By preventing free expiration, and likewise by exciting a slight continuous inflammation of the mucous membrane from the point of pressure into the numerous ramifications of the bronchi, the air had become imprisoned within the air-cells, and in this manner was produced a general emphysematous state of the lungs. Besides the difficulty of breathing, usually

attendant on this condition of the pulmonary organs, the obstruction from the tumor naturally caused him to breathe with a loud, wheezing, and somewhat croupy sound. Observing this, I concluded that if a slight mechanical resistance to the free egress of air from the lungs could be produced, so as to impart the prophylactic benefits of the asthmatic state, without the distressing and aggravated accompaniments noticed in the case just described, it would be a remedial agent of no small efficacy. "On this hint I spake;" and seconded by the ingenious contrivance of the artisan, whose case I have particularized, I was fortunate enough to bring the contrivance to bear, and to find that I had not miscalculated its advantages. I have entered into this detail as it serves, by analogy, to throw additional light on the position I have advanced respecting the non-liability of the asthmatic, or catarrhal, patient to phthisis; although, from the superior benefits to be obtained by a duly extended course of inhalation, and having satisfied my curiosity by the experiment, I have never since employed the preceding mechanical contrivance.

Dr. Ramadge's experiments ultimately resulted in his adopting the inhalation of the air through a tube, as his great reliance to enlarge the luugs.

*Inhalation.*—I am well aware that many objections may be started to this practice from prejudice, or inefficient observation. Strange to say, the principle on which this mode of treatment operates beneficially, appears to me quite unknown to medical men. It is supposed, that the inspiration of medicated vapors has in many instances proved useful by allaying cough, and by producing some healthy and unexplained change in diseased parts of the lungs, as well as on such adventitious surfaces as are formed after the softening, or discharge of tuberculous matter: but the permanent advantages which inhaling is capable of affording, are for several reasons unsuspected by the generality of practitioners. First, because the period, during which persons are directed to inhale, is generally too short to produce either a catarrhal or an enlarged state of the lungs, one of which conditions is absolutely necessary in order to suspend, or cure consumption; and, secondly, the apparatuses employed for this purpose are not constructed scientifically, so as to facilitate those physical changes which it is desirable the chest should undergo.

Proper inhalers ought to be so arranged, as to offer some slight impediment to free expiration.

An extraordinary, but most undeserved reputation is bestowed on various substances, mechanically received into the lungs in a state of vapor. Among these I may mention tar, iodine, chlorine, hemlock, turpentine, and many other articles of a stimulating, or sedative nature. I attach little or no importance to any of them. If benefit is derived, it is, in almost every instance, in consequence of some such effects as the following:—Pulmonary expansion, to a degree sufficient to exert an influence in bringing into contact the surfaces of those early cavities which are almost invariably formed in the summit of the lungs;—pulmonary catarrh, or its common consequence, a vesicular emphysema, in both of which the lungs acquire an unusual magnitude; in the latter more especially.

Neither perfect recovery, nor indeed exemption from the danger of relapse into a consumptive state, is found to occur, except in very rare instances, unless the pulmonary organs become naturally, or artificially, voluminous; which not unfrequently happens by the supervention of some catarrhal state of the larynx, trachea, or bronchial tubes. It is a most fortunate circumstance for some affection of this kind to occur early, as it never fails permanently to arrest this most fatal disorder. When the lower lobes of the lungs are entirely free from tuberculous matter, (which is often indisputably the case for a considerable period, unless there be strong hereditary predisposition) and though there exist, at the same time, cavities in the superior part of one or both lungs, clearly indicated by perfect pectoriloquism, there is almost a never-failing hope of recovery to be entertained, provided an emphysematous sound can be heard. In fact, I never knew a consumptive person who did not lose all his formidable symptoms and regain health, when an emphysematous or a semi-asthmatic change had early taken place; and, likewise, I never knew an individual to become consumptive who was subject to chronic catarrh, or to any species of asthma. It is from long consideration of these facts, that I interfere but little with any catarrhal inflammation which may show itself in the midst of consumptive symptoms, for I well know that it will gradually supersede all these.

I may here remark, that cavities in the upper part of the

chest are never healed, unless the pulmonary tissue be expanded in their neighborhood, or in the other lobes of the lungs. In such case, I have repeatedly listened to some bronchial inflammation which has fortunately taken place near to those cysts, which are left when tuberculous matter has been removed by absorption or expectoration. I have been truly gratified to hear the well-marked pectoriloquy gradually become less distinct, till, together with the constitutional symptoms of phthisis, it has been at last entirely lost, and nothing has remained but the dry *râle* of enlarged air cells, slight catarrh, and a little absence of respiratory murmur in the place before occupied by tubercles.

Should there be catarrh in the superior bronchial tubes, of a duration sufficiently long only to heal ulcerations and cure the patient, he may be again attacked by consumption, months or years afterwards, if there be any cause assisting to impair the general health; but never can this relapse happen, if the bronchial tubes be subacutely inflamed for a period sufficient to produce habitual asthma, more or less severe. Half of those which are commonly regarded as cases of catarrhal asthma, originate in consumptive disease whose progress has been arrested by the supervention of that affection; but in which neither fresh crops of tubercles, nor hectic fever, are to be apprehended. Any individual indeed having asthma, from whatever cause, is as perfectly exempt from consumption as he who had been consumptive, but has afterwards had his disease merged into asthma. In a word, it may be confidently affirmed, that no asthmatic person need ever fear becoming consumptive.

In order to promote expansion of the aerial tissue of the lungs, it is my usual practice, in the absence of catarrh, and when congestion in the chest and the symptoms of hectic fever have been diminished by small general bleedings, repeated at proper intervals, or by the application of leeches over the second and third ribs anteriorly, to advise inhalation as soon as possible.\* There are few cases of incipient consumption but will be rapidly improved by this treatment, steadily pursued. The disease being thus checked, the same changes will follow which are attendant on catarrh. The nodules of unripe tubercles will become innocuous in conse-

\* Suitable tubes, for this purpose, may be had of Dr. J. M. Howe, 227 Grand Street, New York.

quence of being surrounded by black secretion, or what has been called black pulmonary matter; and small cavities, already formed, will have their surfaces soon brought in contact, so as to heal by what surgeons term the first intention. It is, we must own, preferable to effect pulmonary expansion by sure artificial means, rather than to depend upon the uncertain production of catarrh. And there is another point gained, inasmuch as recovery takes place unaccompanied by the cough, or difficulty of breathing, generally attendant on those cures which Nature herself now and then accomplishes, by introducing this less fatal, yet distressing complaint. Inhaling, performed two or three times daily, for half-an-hour each time, will in the space of a few weeks or months work a wonderful change on the chest; externally the muscles concerned in respiration will be manifestly enlarged, and the bony compages of the chest, both before and laterally, visibly increased; whilst, at the same time, the natural respiratory murmur will be heard internally, far more distinct than ever. Such has been the increase of size which the chest, in young persons especially, has undergone through the exercise of inhalation, that I have known individuals, after inhaling two or three times little more than a month, require their waistcoats to be let out. It is in fact incredible to one who has never been at the pains to measure the chest, or examine its shape, what an enlargement it acquires by the simple action of breathing for the time above stated, backwards and forwards, through a narrow tube properly constructed. I have several times found, on measurement of the chest, that its circumference has increased, within the first month after inhaling, to the extent of an inch. Every impediment to the free action of the ribs is to be guarded against by loosening whatever, in the way of dress, is at all likely to confine them; and it would be advisable too for the patient, if strength allows, to inhale at times in a standing position, as the diaphragm will then descend more easily and deeply, and of course allow the lungs more room to expand.

There are cases in which inhalation is contra-indicated; for instance, in dilatation, or hypertrophy of the heart, severe mucous catarrh, general emphysema of the lungs, pleuritic or pneumonic inflammation, hæmoptysis, or latent consumption of long standing.

It is to be discontinued a day or two, should there arise

distressing head-ache, or much internal thoracic soreness. When it agrees well, it can be safely and most beneficially used for six months, or even longer.\* By this time, besides a removal of every consumptive symptom, a permanent enlargement of the chest will have taken place, proving a perfect safeguard against the recurrence of any future attack.

*No permanent benefit is to be expected from this remedy, when the inferior lobes of the lungs contain cavities, or are studded with tubercles:* yet, even in this unfavorable state, I have known relief arise, and surprising prolongation of life ensue, from its employment. I have individuals under my care, at this moment, in whom one lung is almost useless from extensive tuberculous disease, and with even well-marked pectoriloquy on the top of the opposite lung; still, from having the rest of the lung on this side in a satisfactory state, and thus being partially susceptible of the influence of inhalation, the progress of consumption has been arrested; and, in more than one instance, the relief afforded by inhaling has enabled the individual to attend to the duties of his calling—of course, no very onerous ones. Indeed, I shall feel happy to introduce any of my readers, who may entertain a desire to see such remarkable instances of the virtues of inhalation, to these patients of mine.

How long will it be before this truth will lead the scientific to adopt its fellow truth—that, so surely as medicine alone will ever fail, the mechanical means I have pointed out will succeed? However interested motives may bias some, there is an active and honorable spirit abroad in the profession at large, which induces a frank and manly openness to conviction. The owls, who shut their eyes to the light of truth, because it would bear others through the “palpable obscure,” are likely soon to be left alone in their blindness. An amended medical education will rectify all these.

“The effects of prolonged expiration are the same, whether produced by natural or mechanical impediments. I shall briefly recapitulate them, viz., imprisonment of the air in the lungs; distension of all the permeable air-cells; increase of the pulmonary volume; enlargement of the cavity of the thorax, from the pushing out of its walls in every direction

\* Inhalation may be continued in some cases daily, for one or two years, or even longer; and should be resumed, should a patient once recovered, be threatened again with consumption.

by the expanded lungs; approximation of the surfaces of cavities, from pressure on all sides by the pulmonary tissue externa. to them; union of these surfaces, if early, by a soft membrane, if late, by a semi-cartilaginous intervention, &c.; arrest of the tendency to fresh tuberculous deposition from exercise and full expansion of the pulmonary tissue, and a state of dormancy or quiescence more or less complete of the tubercles already formed and uneliminated, they being surrounded by black secretion, isolating and often rendering them innocuous. Such are the effects of prolonged expiration in favorable cases. The great comparative advantage of the tube over nature lies in the following circumstances:— It is capable of being so made that we have neither more nor less prolongation of expiration than is exactly necessary; it can be taken up and laid aside at pleasure, so that the lungs when fatigued with this anormal exercise may have repose; it can be persevered in for any desired length of time, and abandoned when no longer necessary, or when contra-indicated by the supervention of some accidental malady or symptoms; and finally, from its proper use no evil consequences will be found to result. It is, in short, an instrument completely at our command, simple in its mode of operation, certain and safe in its effects. It may be properly called a surgical or mechanical means of treating phthisis. No medicated vapors are required. The simple atmospheric air is the great medicinal agency, and elasticity its essential ingredient. We have no occasion for the fumes of tar or iodine, of chlorine, hemlock, or turpentine. With the value of these medicated vapors I have nothing to do. The principle of the treatment I advocate is essentially different, as has already been seen.

“Simple as this instrument is, its power is greater than can be appreciated by those who have not used it. Let it not be despised on account of its apparent simplicity being so incommensurate with its pretensions.

“When Naaman, the favorite minister of the Syrian monarch, applied to the wonder-working prophet of Israel for the cure of his leprosy, he was ordered to bathe in the waters of Jordan, but he indignantly exclaimed, ‘Are not Arbana and Pharpar, rivers of Damascus, better than all the waters of Israel? may I not wash in them and be clean? So he turned and went away in a rage.’ His servants judiciously

reminded him that it was but a little thing the prophet commanded. He bathed in the prescribed waters, and his leprosy was removed.

“Thus would I counsel those who at first may treat this simple instrumentality with the haughty disdain that sits so lordly on the brow of more complicated science, and imposing agencies. Is it not a little thing? The difficulty in making the experiment is little; try it; and though I have no pretensions to the gift of prophecy, or the working of miracles, I promise you success, exceeding, if such may be, the sanguine expectations I have endeavored to create.

“There are, however, certain rules which should regulate its use and stages, symptoms and complications of consumption in which it is either inefficient, inadmissible, or for intervals longer or shorter to be suspended.”—(*London Medical Times*, Feb. 4, 1843.

The beneficial effects of this regulated respiration are not confined to the pulmonary organs. I cannot point out the collateral advantages better than by quoting Dr. Ramadge's own remarks on the subject. He says, in the chapter on treatment:—

“It may be advisable to explain in what manner the simple process of inhalation, while it expands the pulmonary apparatus, at the same time regulates the most important of the visceral functions. The mere expansion of the lungs, in the first instance, tends indirectly to remove congestion of the liver, and also of the stomach, spleen, pancreas, and intestinal canal, all depending on the more free circulation of the blood in the former. The biliary, as well as the great salivary secretion, is hereby promoted to a healthy activity, such morbid irritability of the mucous membrane of the stomach as may be present, productive of indigestion, is removed; the chyloferous absorption belonging to the small intestines, so indispensable to life, is actively carried on, and the injurious retention of excrementitious matter in the larger intestines is obviated by increased mucous moisture and accelerated peristaltic motion. It were easy, did I deem it essential, to point out at length the beneficial effects produced on other secretions, and to explain the mode by which inhalation acts on the kidneys; but sufficient has been stated to enable the medical man to draw his own deductions in these particulars.”

In asthma, the use of the tube will be found invaluable ; but it should only be used when the patient is free from any paroxysm or difficulty of breathing, to exercise and air the lungs for the purpose of contracting their looseness and flabbiness, to prevent the recurrence of the paroxysms. If its use be steadily persevered in for a long period, when the patient is free and unoppressed for breath, the return of the difficulty of breathing will not only be less frequent, but in many instances the patient will be entirely relieved.

“The subject,” says an English practitioner, who had adopted Dr. Ramadge’s practice for consumption, “is not only inexhaustible, but so important, and of such magnitude, that it requires to be examined in all its bearings, for only by the test of scrutiny can it become established as it deserves. The finger of nature has been pointing to it for ages, yet no eye has followed the sign. In vain had science asserted that there is no bane without an antidote : the fact, as it regarded consumption, was denied ; and, until Dr. Ramadge made the discovery, the hearts of all who were afflicted with that terrible disease were left to sink in despair.

“In all cases of consumption, the grand law which effects its cure is the prevention of contraction of the chest. The localities in which this prevention appears are, as I shall have occasion to point out, various. Yet, in every variation, the antagonism to consumption is established by one ruling principle, viz., the re-adjustment of the deranged relation or balance between the organs of inspiration and expiration, through the agency of something obstructing more or less the exit of the air *in the act of expiration*. Here let it be observed, by the way, that nature, in her operations under this law, rarely does her work perfectly ; and, in many instances, runs from one extreme to another. The forces which represent the powers of inspiration are stronger than those forces which represent the powers of expiration ; consequently, when the impediment mentioned exists, owing to the weaker expiration, and the imprisonment of air, in some degree, an enlargement of the lungs takes place, and the cure of the disease is brought about.

“No sooner does consumption occur, than it is earlier or later marked by contraction of the chest. The wind-pipe, by retaining its original size, becomes comparatively too large

for this reduced compass; the exit of the air is too free to offer antagonism to the advance of the disease, which would be attended by the occurrence of new crops of tubercles, and their presence and subsequent liquefaction in the lower lobes of the lungs. It is pleasing to observe that when nature or art interrupts the daily contraction of the lungs, before the invasion of the tubercles in the lower lobes, we find little or no disposition in the larynx or intestines to fall into diseased action. The following exhibits a hasty and imperfect catalogue of the admirable, yet simple and accidental processes by which the beneficial interruptions alluded to are brought about, and which I shall comprise under the head of

“*Different means by which consumption is arrested by nature.*—Enlargement of the tonsils. Diseases of the heart. Tumors of any sort on the windpipe, or its division. Hysteria. Asthma. Catarrh, symptomatic, or idiopathic. Polypus in the nose, or, indeed, any mucous intumescence in the same part, or nasal fossæ. Disease in the vertebræ of the neck has, in more than one instance, been noticed by my preceptor to point beneath the pharynx, and constitute a tumor standing in the way of the expired air.

“I now proceed to recapitulate the *modus operandi* of these agents.

“*Enlargement of the tonsils.*—The great rarity of manifest consumption in children is owing to the enlargement of the tonsils, so commonly observable in them. The same strumous habit that gives rise to the foregoing state, antecedently or concomitantly, deposits tubercles in the lungs: in the majority of cases we have no opportunity of seeing these, when, after a lapse of years, death follows, from disease wholly unconnected with any chest affection, owing to their absorption; but we not unfrequently witness the black stains or indurations in the summits of the lungs, where they have been. It may be here mentioned that even the greater number of *adults* who are seen with any degree of enlarged tonsils, can recollect, when only superficially questioned, that they had suffered under some antecedent affection, displaying all the constitutional symptoms of consumption.

“As the greater power of the inspiratory muscles will, even under this state of enlarged tonsils, draw in the air with more freedom than it can escape, the preponderating action will, of course, expand the lungs, and, assisted by the weak-

ness of the expiratory powers, imprison air sufficient to increase that expansion, and thus enlarge the thorax; and, what is remarkable, by making the patient short-breathed or asthmatic, so completely alter the scrofulous habit as to remove the very impediment (i. e., the enlarged tonsils) which has the capability of defeating any contraction of the lungs that would lead to unmasked tuberculous phthisis. Still more extraordinary, the enlargement of the tonsils alone is sufficient to render the lungs voluminous, and to close up a cavity resulting from liquefied tubercles. Dr. Ramadge considers enlarged tonsils as indications of a scrofulous habit, and that the lungs are, or have been, tuberculated; but this enlargement is, at the same time, a sign of the non-liability of the patient to sink under phthisical disease, of which it is an indication."

The following cases, proving the power which pulmonary expansion exercises over consumption, are taken from *The Medical Times*, London, Feb. 25, 1843:—

"M. Lebeau, physician to the king of the Belgians, and principal physician to the military hospital at Brussels, in the preface to his translation of Dr. Ramadge's work on consumption, mentions, that having long devoted his attention to this disease, he has been himself struck with the conviction that asthma has the power of arresting, as well as preventing it, and that he could cite a considerable number of facts to illustrate this statement, but confines himself to one of recent date, and complete in its details. M. ———, aged forty-eight, a captain of an infantry regiment, presented himself, April 26, 1836, at the military hospital at Brussels, with a view to obtain a certificate to exempt him from active service, in consequence of habitual dyspnoea. He complained of no other ailment, and was of full habit; his chest of remarkable amplitude, respiration wheezing, the sibilant râle was heard throughout, the heart's action regular and moderate, the pulse calm and natural, and the face exhibiting no signs of venous congestion. He gave the following account of his case, in the presence of Dr. Coombe, of Edinburgh, who happened to be there at the time, Drs. Limaugue and Biefve, of Brussels, and several pupils:—'In 1816, after severe fatigue, I was attacked with cough and copious expectoration, wasted away rapidly, and was subject to shiverings in the daytime, and perspirations at night, with wander-

ing pains below the collar bones. My medical attendants repeatedly assured me I was consumptive, and could not long survive. While matters were in this state, I was seized with a difficulty of breathing, to such a degree that I was obliged to get out of bed at night, and repair to the window to breathe fresh air. From this period my strength began to return, the perspirations ceased, and I soon became of as full habit as you now see me. My chest, which was flat and contracted, enlarged in an extraordinary manner, and I was completely cured, save the difficulty of breathing, for which I could obtain no remedy.'

"M. Lebeau adds, that Dr. Canstatt, a young physician of great merit, had related to him a similar and strikingly illustrative case which had occurred in his own family. Among other remarks worthy of attention in his preface, he makes the following very interesting and curious one:—'Taking into consideration all the circumstances preceding and accompanying this disease, and the appearances after death, I have had the most satisfactory evidence that the compression on the upper part of the chest of young soldiers, caused by the weight of the arms and accoutrements, has contributed very much to the occurrence of phthisis.'

"The subjoined cases are submitted as examples of the benefits derivable from pulmonary expansion by measured mechanical respiration:

"Miss ——, aged twenty-three, the daughter of a member of parliament, was attacked by consumption, displaying itself in the usual manner by cough, expectoration, night-sweats, and gradual emaciation. A few months after its commencement, one of her tonsils acquired considerable size, and coincidentally her symptoms showed signs of amendment. This tonsil, after a short interval, suppurated, and the signs of amendment disappeared. Her relatives now began to entertain serious apprehensions, more especially as she had lost a brother and two sisters by consumption within a few months. Dr. Ramadge was called in, and felt satisfied, upon examination and inquiry, that disease had commenced in the right lung, and been interrupted by the enlargement of the tonsil. He also ascertained that it now existed in the summit of the left lung. The chest was flat and contracted, both the collar bones very prominent, and the infra-clavicular depression on the left side remarkable. The constitutional disturbance and

preternatural heat of the chest were reduced by the application of a few leeches occasionally between the second and third ribs of the affected side, and the administration of nitre and tartarized antimony, &c. Tonics and sedatives were also prescribed, to support the system and allay irritation. The patient, however, was taught to place her chief reliance on the artificial respiration, and not expect results sooner than a month, that is, in a very sensible degree. By perseverance in the use of the inhaling apparatus, her strength gradually returned, the appetite improved, the nocturnal perspirations ceased, the quality of the matter expectorated was amended, a satisfactory respiratory murmur became audible, the frequency of the pulse abated, the countenance resumed its former animation, the chest expanded, and she increased in flesh, and the entire constitution was renovated. Before these desirable results were gained, she had twice or thrice, within six months, fresh liquefactions of pre-existing tubercles, attended, of course, with more or less renewal of the constitutional symptoms, during which the expectoration showed the softened opaque tuberculous matter minutely subdivided and suspended in the muco-purulent sputa. With the exception of these changes, the cure went steadily on, till recovery took place. The great augmentation of flesh, and enlargement of the chest that followed, were particularly noticed by the respectable circles in which she moved, to whom she is in the habit of explaining the improvement that has taken place, by throwing her shoulders upward and forward, thus bringing the clavicles greatly in advance of the upper ribs, in imitation of the appearance of the chest in its previous state, that they may judge by contrast. This patient had used the tube for the space of about twelve months, three times a day, as directed, and her symptoms had disappeared some months before she left it off.

“Hohnbaum, the distinguished German pathologist, who has translated Dr. Ramadge's work into his native language, strongly recommends this extension of the term of its use for the sake of security. About two years afterward, at the close of the gay season in London, Dr. Ramadge was again called in to see her. She complained of cough and pain in the lower scapular region, which he attributed to fresh softening of old tuberculous nodules. Appropriate medicinal treatment, with the use of the tube, soon removed

these symptoms of relapse, and she has not since required any medical advice. The mechanical respiration in this case has prevented the deposit of fresh tubercles, and altered that peculiar habit which generates it.

“ Her eldest sister, with whom she had been in the habit of sleeping, a few months previous to her attack, exhibited unequivocal signs of consumption; and, though having the advantage of the most distinguished advice, experienced no relief till she removed to Hastings. The bracing sea-air, and horse-exercise, which she here enjoyed, brought about an amelioration, so far as to check the most distressing symptoms, and do away with the cough, but still she remained in a very delicate state. The satisfactory result of her sister's treatment induced her mother to draw Dr. Ramadge's attention to her case also. He found her chest very much contracted, the middle of the collar bones standing out nearly three-fourths of an inch in advance of the upper ribs, which were, of course, greatly depressed, particularly those on the right side. Auscultation discovered in the summit of the right lung clear indications that consumption existed in a latent form, attended with an insensible excavation. For the improvement of her general health, tonics, chiefly quinine, with preparations of iron, were occasionally prescribed, and for the local affection the artificial respiration was steadily employed. The result was, that under this treatment, she rapidly improved, the chest expanded, her complexion, from very pale, became somewhat florid, and the functions of the system, which had been deranged by the constitutional debility, were restored to their normal action. She was subsequently married to an individual of noble rank, by whom she had two children, and her general health has not since been interrupted by any phthisical manifestations.

“ In examining the chests of the remaining members of the family, Dr. Ramadge's attention was directed to that of a younger sister, which was preternaturally full and large, forming a remarkable contrast to the two preceding. Her general appearance was that of robust health, her complexion florid, and her size and growth beyond her years. From the conformation of the chest, he at once suspected that there was some physical impediment to the respiration, which, on inspecting the throat, proved to be the case, the tonsils being so large as almost to meet. This enlargement at times inter-

ferred with the voice. There was nothing remarkable in the respiration, except that it was puerile. He explained to her family and her father, who was present, the connection between the tonsils and the highly developed chest; and added, that although he could not by the ear detect the signs of tuberculous disease, yet he had no doubt the peculiar habit which had given rise to this unusual tonsillary enlargement, had also led to the deposition of tubercles, and that they existed in a scattered form in the lungs. With a view to lessen the susceptibility of mucous irritation in the throat, he suggested the propriety of diminishing the tonsils, by a leech applied occasionally below each ear, to be succeeded at times by movable blisters. Sarsaparilla to improve the general habit, and iodide of potassium to promote absorption, were also recommended. This treatment was adopted, and the tonsils were reduced in size. The young lady was sent to a school at Brighton, where the tonsils became still more diminished, from the sea air; and her chest, after some time, began to flatten, and other signs of phthisical disease betrayed themselves. She had been forewarned to use the tube, to make up by art the loss of protection derived from the lessening of the tonsils, but neglected it. She returned to London for advice. Dr. Ramadge, who was called in, pointed out that the reduction of the tonsils, coupled with the operation of some exciting cause, had brought on the softening of the tubercles previously suspected, and that the flattening of the chest, with the other symptoms, would have been prevented, had his directions relative to the tube been observed. Finding her constitutional symptoms urgent, he advised the abstraction of blood from the upper part of the chest by leeches, attention to medicinal remedies, alleviating and preparatory, and the regular employment of the artificial respiration. These were followed up some months at Brighton, to which place she after a short time returned, and finally got quite well, in the identical locality where the disease had first declared itself in a manifest form.

“The eldest son of this family had recently returned from a continental tour, undertaken to improve his general health, which was delicate. On examination, no evidence of disease was detected by the ear, but his chest was very much contracted, and his general appearance by no means healthy. He had spent some time among the mountains of Switzer-

land, where the climbing of ascents was well calculated to excite his lungs to deep inspirations. But the flatness of the thorax, the tuberculous diathesis prevalent in the family, the absence of tonsillary enlargement, disease of the heart, or any other protective, led to the conclusion that his lungs were extremely liable to tuberculous invasion, if not already tuberculated. He had just obtained a commission in a light regiment, and was about to join it, a course which could not fail to be approved of, as the exercise, which includes a great deal of running, would prove highly favorable to the proper expansion of his lungs. The service agreed with him remarkably well, he liked it much, and was exceedingly active; his chest expanded, and his general health considerably improved. After some months he married, and about a year subsequently, the regiment to which he belonged was ordered to hold itself in readiness for foreign service, on the breaking out of the war in Syria. Being the presumptive heir to a peerage, and by the particular desire of the nobleman whose daughter he had married, he retired from the army, very much against his own wish. This change from an active to a comparatively inactive life was followed by an impaired state of his general health, and a cough. Four months from its commencement, he came up to town and had the advice of one of her Majesty's physicians in ordinary, who considered his case decidedly phthisical, and exceedingly serious, and directed him to proceed immediately to Tunbridge, giving him the name of a medical man under whom he was to place himself. This was in the middle of summer, and in the early part of autumn he was to leave for Nice. He had applied to this physician for advice in the first instance, by the particular request of two noble relatives; but before acting on it, consulted Dr. Ramadge, whose treatment of the other members of the family had proved so successful, and who found, on examination, that the right lung was diseased, and that the difference between the semi-diameter of this side of the chest and the other amounted to nearly an inch and a half. The usual symptoms, cough, nocturnal perspirations, &c., were present. Considering that it would be highly improper to send him away in such critical circumstances, from the very place where it might be expected he could procure the best attention, that it would be, in fact, a virtual abandonment of the case, he dissuaded him

from his proposed journey, and apartments were in consequence taken for him near the residence of his parents, a short distance from Hyde Park. Due attention having been now premised for the relief of the constitutional symptoms, he was placed under a course of mechanical respiration, and shortly began to show evident signs of amendment, which ended in recovery, and thus superseded all necessity for leaving town, or going abroad. Two winters have elapsed, and he still enjoys immunity from any return of the symptoms.

“The above cases are not the less interesting from the circumstance of having occurred in one family, shortly after three of its members had been cut off by consumption; and it is not going beyond my own conviction to say, that but for the use of the mechanical respiration, these in all probability would have shared the same fate. In none of the cases did the mechanical treatment operate injuriously; and the cures have so far proved themselves permanent, that after a lapse of a considerable time they all enjoy excellent ordinary health. As a proof of the satisfaction this highly respectable family derived from the success of the treatment, Dr. Ramadge has been indebted to their expressions of approval for the confidence reposed in him by some of their friends, who have since applied to him for advice under similar affections. It is not a little remarkable that all its members attacked with consumption who had not adopted this peculiar treatment died; and the remainder (seven in number) who availed themselves of it, are now living, and in excellent health. The conjoint features in their history afford at once negative and positive evidence of the soundness of the principles assumed in the preceding arguments. Some of these details are worthy of remark. In the first case, the pulmonary affection showed itself originally in the right lung; and here we see it retarded, and driven back as it were, by the accidental enlargement of the left tonsil: on the return of this gland to its former size, we find the consumptive indications reappearing, the site of the disease having changed from the right to the left lung.

“I may here incidentally remark, that the greatest amount of disease is almost invariably recognizable before and after death in the left lung. I have heard this accounted for by Dr. Ramadge, as well as I can recollect, in the following manner. When tuberculous deposition first commences, it is

generally in the summit of both lungs, but greater in the right than the left, and therefore solution is first discovered in the former. After this, it will often happen that some accidental circumstance interrupts its progress by expanding the pulmonary tissue in the neighborhood of the disease, and this expansion will be greater where the tuberculous deposit is more extensive, i. e., on the right side. The more this tissue is expanded, the less susceptibility does it retain of new tubercularization, and hence the disease, if not subdued, as it advances, spreads more on the left side,—makes its first re-appearance there, and its most extensive ravages in that lung.

“The effect of tonsillary enlargement is also seen in a very marked and unequivocal manner in the third case, where the chest was prematurely full, and well-developed during its presence, but sunk into an opposite state of contraction upon its removal. The whole family, indeed, evinced a predisposition to the malady. Tubercles had formed in all their lungs, but in the cases adduced, their liquefaction had been kept back, and controlled partially and temporarily by natural antagonistic causes, and ultimately in a permanent way by art, which stepped in with aid more certain and decisive than nature. Some credit was, no doubt, due to the medicinal treatment, both preparatory and accompanying; but the complete failure of mere medicinal treatment in similar cases, or its very modified and unsatisfactory results, argue strongly that the mechanical respirator had to bear the brunt of the action, and may with justice lay claim to the credit of success.

“The fourth case exemplifies the absence of the necessity for removal from town, either to the country or abroad, under manifest phthisis. The practice of sending patients away from their friends and their country in this disease, appears to me incapable of being defended. The chief argument in its favor would seem to be precedent. The fashion has so long prevailed, that the propriety of it has ceased to be questioned. No good could have resulted from the patient's removal in this case. He would have been separated from his friends and relatives at a time, and under circumstances, that most call for their attention and sympathy, also from the opportunities of procuring the best medical advice, which it may be presumed are much more numerous in this metropo-

lis than abroad. He recovered without removal, and was thus spared the inconvenience and peril to which a long journey would have exposed him. Liquefactions are of constant occurrence. While they are going forward, patients require all the medical skill and care they can have, to watch and control the symptoms as they arise. Travelling, by land or sea, places these, in most instances, beyond their reach; and when located in the place of their destination, they run the serious risk of falling into the hands of unskillful practitioners, who too frequently by the administration of improper medicines—as, for instance, mercury—cut short the work of decay. These considerations are serious drawbacks to the hypothetical benefits of warm climates. Some of our high medical authorities, however, still sanction this practice, by recommending migration to many of their patients. When benefit appears to be derived, and the patient has returned alive, I have always been able to trace the cause to some natural protection, such as a contraction of the trachea, disease of the heart, &c., existing before he left home, or to pulmonary expansion, brought about by accidental catarrh caught in the prosecution of his journey, or, when the disease has been incipient, to the deeper and more energetic inspirations which change of air and increased exercise occasion.”

Did the limits of this pamphlet admit, it would afford me pleasure to extend remarks upon each opposing influence to the progress of the disease, and particularly in relation to any medicinal treatment which may be employed; but I must forbear—and will conclude with a few remarks on diet and climate. When there is febrile action, the diet should be light—but not a milk diet. On the abatement of the hectic fever, the food may be of a nutritive and invigorating description; in the absence of inflammation, and of hæmoptysis, a moderate use of meat once a day, with an egg at breakfast; or, by way of a lunch, nutritive broths may be taken lukewarm.

*Climate.*—It has been seen from the preceding pages, how much I am at variance with the common opinions entertained of phthisis, and to none am I more diametrically opposed than to those which respect climate. So far from sending a consumptive patient to the south of France or Italy, I should, if change be requisite, deem the climate of St.

Petersburgh a thousand times more beneficial. In the latter case the patient has a chance of contracting catarrh, and of thus staying consumption: in the former, any catarrhal state which might exist would assuredly be fatally removed. When I hear of consumptive individuals being recommended to try the genial climes, as they are absurdly termed in these instances, of Lisbon, Madeira, or other sunny lands—and when I reflect on the evidence given by medical statistics of their deadly influence on phthisis, I long to suggest the fitting answer to such advisers: “*Me vestigia terrent omnia adversum spectantia, nulla retrorsum.*” My experience on this point is full and explicit; and I could substantiate it, were it requisite at the close of a treatise the scope of which has been to prove the true nature of this little understood malady, by numerous cases.

So decided am I on this head, that I never admit into the infirmary a phthisical patient with recent catarrh, because its wards are heated in winter-time so as to resemble a moderate summer temperature. The cases of consumption, that come under my notice in summer, are nearly double the number of those I see in winter. The reason is evident;—the augmented temperature of the weather increases the intensity of two of the most important stages of the hectic paroxysm—the hot, and the sweating. To subdue these, then, becomes peculiarly difficult: how likely they are to be aggravated by going abroad, any well-constructed thermometrical table will tell. Again, if the disease be latent, removal to a warm climate is the most probable means of making the case one of manifest phthisis. In uniformity with these opinions, I feel no anxiety respecting consumptive patients being kept scrupulously within doors. Whenever the weather permits, they should be allowed to take an airing daily; but be by no means suffered to remain so long as to be sensible of chilliness or cold.

From every inquiry I have made with respect to the influence of climate, I conceive that, all things duly considered, the patient cannot have a more suitable residence in winter, than in some of the spacious, well-ventilated streets of our own metropolis. Another consideration—a great one to the invalid—is that of comfort, a word indigenious among ourselves. Many of those who had been led by blind guides to roam abroad in a vain search after that health which, under

judicious treatment, they might have preserved here, have assured me, to use the language of Sterne, that they had done better to "have remained dry shod at home;" and I am convinced that the greater number thus sent on a useless errand, make—when hundreds of miles from their own comfortable fireside—the reflection that occurred to honest Touchstone, "Ay, now am I in Arden—the more fool I; when I was at home I was in a better place."

## Chapter Sixth.

### CONSUMPTION CURED BY NEGLECT.

A SILVERSMITH, when in good health and circumstances, and nearly fifty years of age, was exposed to one of the most terrible of all paternal inflictions—the misconduct and subsequent legal punishment of his son. The young man, having formed dissolute connection, had been persuaded to pass a forged note; and, on the fact being proved against him, was sentenced to transportation. The disgrace, thus brought on their hitherto unimpeachable family, operated so powerfully on the feelings both of the father, and of a daughter just entering into life, that their distress and agony of mind at last entirely undermined their health. The debility, thus induced, terminated in each of them in consumption. After a few months' illness, the daughter died; and the father, after extreme suffering both of body and mind, having apparently reached the verge of the grave, and being indeed so utterly reckless of life, which he regarded only as a burden, as to neglect not only recourse to medical advice, but even common care of himself, yet recovered, and survived for many years. It was fully seventeen years subsequent to this seemingly miraculous recovery, that I attended him on the occasion of his being seized with an apoplectic fit, resulting, as I afterwards had reason to believe, from valvular disease of the heart. During his convalescence from this attack, he was unfeelingly taunted by some brute in human shape with his son's disgrace; and so wounded and humiliated did he feel by this unworthy allusion, and so deeply did it sink into his mind, that I entertain no doubt it accelerated his death. It was during my attendance on him, that learning from his wife his previous consumptive state and recovery, and perceiving that he labored under a bronchial affection, of long

standing, I at once attributed the return to health, which she regarded as so strange, to the ingression of catarrh on phthisis. The *post-mortem* examination verified my conclusions; it presented well-defined cicatrizations, especially on the summit of the right lung; nodules of tubercles, yellow and opaque in the centre, and rendered inert by the secretion of black pulmonary matter in the surrounding tissue, and the lungs were exceedingly voluminous. I will venture one observation on the case, and although it may appear harsh, regard for truth and the advancement of medical science compel me to make it, namely, that had this person, when reduced to a phthisical state, recurred to medical advice, the probability is, that the bronchial affection, which was his safeguard, would have been interfered with, its value being unknown to the profession, and his life, consequently, shortened for years.

#### CONSUMPTION SPONTANEOUSLY CURED.

Miss M——, about twenty-three years of age, a lady of great personal attractions, and highly cultivated mind, consulted me in the summer of 1826, for symptoms of confirmed consumption; for which she had already enjoyed the benefit of Mr. Howship's advice. It was arranged that I should visit her in conjunction with this talented surgeon; and we continued to attend her for several weeks. In all the cases I have witnessed, I never met with such distressing, racking, and perpetual cough. We tried every method of relief we could possibly devise, and administered sedatives of every description, but without effect. Her disorder, instead of receiving mitigation, evidently increased; and not only were the fears of her friends awakened, but we ourselves began to despond. At this crisis, through the importunity of some near connections, her mother was persuaded to try the advice of an individual, who, although I am not aware that he had received a regular medical education, enjoyed some notoriety. On receiving a delicate intimation to this effect, and being of course inclined to humor the natural anxiety of a parent, we agreed that it might not be totally *infra dignitatem* of us, the more legalized authorities, to hear what this person might suggest, although a formal consultation was out of the question. To do him justice, we found his opinions sensible, and

much to the purpose ; but he considered the condition of the patient as so hopeless, that he declined interfering with the case. Yet, notwithstanding these grave prognostics, the young lady, to our great satisfaction, soon after this began to exhibit signs of amendment. Her health was gradually restored, and continues, I believe, unimpaired up to the present time. From my further experience, and from cases which have subsequently come under my notice, I entertain no doubt that the cough I have already alluded to, and which was of a convulsive character like that of the whooping-cough, must have produced a rupture of the air-cells, which caused infiltration of air within their partitions. This variety of emphysema, similarly to the vesicular, renders, while it lasts, the lungs voluminous ; and when happening in the neighborhood of the diseased summit of the lung, would naturally bring the surfaces of any excavation into contact. Indeed, although from my reluctance to put the patient to inconvenience by examining the chest in the latter part of her illness, I could not possibly affirm the existence of emphysema, still all my reflections on the case lead me to the belief, that she is in no small degree indebted for her cure to a cough, which in general would be considered highly injurious, and in fact appeared so to me at the time.

REMARKABLE INFLUENCE OF THE PROTECTIVE POWER OF A  
BRONCHIAL AFFECTION.

I offer this case as one instance out of many, equally as decisive, which I could adduce, of the value of catarrh in preventing pulmonary consumption. An eminent publisher of Paternoster Row, all of whose brothers and sisters have been the prey of consumption, is himself subject to asthma, induced by a catarrhal affection of the chest contracted in childhood. The gentleman to whom I allude, is at present about fifty years of age, of a ruddy, healthy complexion, expanded chest, and excepting occasional inconvenience experienced from the above constitutional complaint, he enjoys life in every respect. It is but fair then to infer that since, out of a numerous family, he is the sole member who has escaped phthisis, this singular exemption has been owing to what might to a superficial observer appear an infliction, but which is really in this instance a providential dispensation ; namely, catarrhal asthma.

Being thus naturally led to the subject, I take the opportunity of explaining a very remarkable phenomenon, exhibited in the offspring of consumptive and asthmatic individuals. That consumption is hereditary, I have already noticed; but an additional confirmation not only of this fact, but of the truth of the opinions I have given on the preventive nature of catarrh, may be found in a circumstance often noted by me—that when a consumptive individual becomes asthmatic, the children born prior to the supervention of asthma, exhibit a phthisical diathesis, whilst those who are born subsequently are entirely free from any consumptive tendency. Exceptions may undoubtedly be met with, the result of some strong exciting cause; but, generally speaking, the rule will be found to hold good: the exception, indeed, will substantiate the rule from the resistance, in such cases, offered by nature to the inroads of consumption.

CONSUMPTION CURED, NOTWITHSTANDING EXPOSURE TO COLD  
AND NEGLECT OF MEDICINE.

Mr. D——, aged 24, had so materially impaired his constitution through irregular habits, as to fall in consequence into a decline. He of course availed himself of the benefit of medical advice, which produced no very visible amelioration of his state of health. Being naturally of active habits, he grew impatient of the confinement to which he was subjected, and, tempted by the return of spring, he suddenly deserted his heated apartment, and determined, since he concluded he must die, to die in the manner most agreeable to himself. Accordingly he betook himself to his favorite sport of fishing. This was in the month of March, a period at which easterly winds are most prevalent. The worst consequence of this apparently rash exposure was, that after a time he caught a cold, which, as it would appear, was confined to the trachea. His respiration was sensibly affected, and he labored under a distressing fulness of the chest. He continued subject to this affection, with an apparent increase of the violence of his disorder; but he still rejected all care and medicine, and persevered in going out. After some period, he began to exhibit signs of amendment; he gradually lost his emaciated appearance, and acquired flesh and bodily vigor; but was much annoyed by wheezing of the

chest, and loud rattle in the throat. He had remained in this state for some months, when he applied to me. On examination of the chest, and hearing a detail of his complaints, not only from himself, but from the gentleman under whose care he had previously been, I at once perceived that he was indebted for his recovery from consumption to this catarrhal state of the trachea. I may here observe, that recoveries of this kind are more frequent among the lower, than the other classes of community; owing, doubtless, to what may at first appear a misfortune, but is to the consumptive patient, in numerous instances, a blessing—exposure to cold!

CASE OF CONSUMPTION EXEMPLIFYING THE GREAT VALUE OF  
INHALATION.

A gentleman, aged 50, whose house of business is in Hatton Garden, began to exhibit decided symptoms of consumption about three years ago. Originally of delicate constitution, and inclined by his make to phthisical disorder, his health was undermined by family afflictions. Within a very brief space, he lost his wife and two grown-up daughters; the two latter through the same destructive complaint, which, supervening on the decay of health occasioned by grief for their loss, has since endangered his own life. At the time I was called in, he exhibited the physical signs, as well as the constitutional symptoms of the disease. He had inflammation of the inferior and middle lobe of the right lung, and expectorated no inconsiderable quantity of blood. This circumstance, indeed, is no unfrequent concomitant of the above inflammatory state, when it co-exists with tuberculous excavations of the lungs. He had been under the care of two able practitioners, his brother-in-law, Mr. Wallace, and Mr. Christie, a surgeon in the neighborhood of his country residence. Both these gentlemen considered their patient in a most alarming state; and on seeing him, I fully shared their apprehension. The first consideration was to subdue the inflammatory state; and for this purpose blood was taken from the arm, and medicines were likewise exhibited to further the end proposed. The pneumonia continuing, it became necessary to repeat the general abstraction of blood, and to follow this up by the application of leeches near the seat of the inflammatory action. By these depletory mea-

tures, the pneumonic disease lost its more violent symptoms; but, after displaying a temporary amendment, the active determination of blood to the chest recurred with its former severity. At this juncture, his brother-in-law, Mr. Wallace, who watched the case with great anxiety, considered himself fully justified in bleeding him in my absence, and that to some extent. Leeches were also repeated, and medicines given, whose chief action was determined to the kidneys. Under this plan of treatment, he gradually got rid of the formidable pneumonic complication, and it remained to counteract the phthisical disease alone; which, after a time, began to exhibit graver and more pressing symptoms. In fact, the patient was at this period in so lamentable a condition, and so utterly hopeless of recovery—being rendered additionally uneasy by the discharges of blood again appearing—that he arranged his affairs, and made every preparation which a conscientious man deems it imperative to do, when looking forward to the awful summons. Having first reduced the spitting of blood, and removed some of the more formidable external symptoms connected with phthisis, I pressed the necessity of recurring to inhalation. The practice was novel to the other medical gentlemen, but I pointed out its *rationale*, and illustrated my opinions by the convincing support of cases. They yielded to my arguments, inasmuch as their reason was convinced; yet so unwillingly, that they could not enlist their hopes on my side. The utmost they at first expected was palliation; but they could not bring themselves, as they have since owned to me, to believe that inhalation could effect the healing of internal ulcers, and prevent the fresh formation of tubercles. The trial was, however, made; and its result up to the present date, has been attended with marked success. In less than two months from the period of the patient's commencing to inhale, his chest was so much enlarged as to render it necessary for him to have his waistcoats let out; and his general health was proportionably amended. It is now two years and a half since he began this process, and for the last two, he has been enabled to attend constantly to his business in town. He inhaled for many months twice a day, except at such times as slight spitting of blood, arising from the cavities not being yet entirely closed, has called for an interruption. This is a circumstance, which, although it is apt to occasion alarm in the

patient, is to be expected in many instances, so long as the excavation remains. I have already adverted in Case XI. to a similar instance of sanguineous expectoration, which likewise proved perfectly innocuous. The cure was in the case of this lady complete; and in that now under consideration, I am happy to be able to say "*finis coronat opus.*"

CASE OF A MEDICAL GENTLEMAN WHO HAS RECOVERED BY  
INHALATION.

Mr. Clements, aged 25, member of the Royal College of Surgeons, did me the honor to solicit my advice more than two years ago. I found that he labored under well-marked symptoms of consumption. Since, however, they presented no peculiar features, it is unnecessary to recapitulate the long list of constitutional and physical phenomena, which have been so often described in the preceding pages as concomitants of the disease; suffice it is to say, that I have enjoyed the satisfaction of seeing him recover; and that he chiefly owes his restored health to inhalation.

PROTECTING INFLUENCE OF PARTIAL EMPHYSEMA, EXEMPLIFIED IN THE LONG LIFE OF A CONSUMPTIVE PATIENT.

Martha Henderson, of Cherry Garden-street, Bermondsey, first came under my care about thirteen years ago. She was at that time fifteen years of age. It appeared that phthisical symptoms first supervened after an attack of the small pox, which had seized her naturally the year preceding. The ill health engendered by this, it is probable, gave rise to the formation of tubercles in the lungs. She exhibited no signs of consumption in her person. Her countenance was florid, not flushed; and the emaciation usually witnessed in consumptive patients, was not observable. The hectic symptoms were very irregular and undefined, recurring at uncertain intervals, and those far distant. She was subject to cough, and shortness of breath, influenced by changes of weather; but the most remarkable symptom was the quantity and the fetor of her expectoration. It resembled the matter discharged by a phlegmonous abscess, and she could bring it up at will. She imagined, from the peculiar sensation she felt there, that it proceeded from the right side of the chest; and, in point of fact, a great sympathy was discernible be-

twixt the external and internal parts on this side. A swelling, and induration of the mamma, invariably took place whenever the matter collected to any great extent within. I have alluded to the fetid odor of the expectorated matter; it was of so rank and sickening a nature, that her parents, although she was their favorite child, needed every excitement that a sense of parental duty could give, to enable them to live with her. It is no exaggeration to say that it contaminated the whole house, and was perceptible as soon as the street door was opened. I have seen my own pupils ready to vomit at the disgust it occasioned, and have, used as I am to such scenes, been affected by it myself. When I first examined her, she exhibited the following symptoms:—The sound of respiration was barely audible over the right side of the chest, with the exception of a space, about two inches square, between the clavicle and the third rib, where a loud gurgling rattling was heard, caused by the intromission of air into a cavity containing a quantity of puriform sputa. A mucous, and sometimes sibilous sound was occasionally heard in some of the bronchial tubes, in the inferior region of the same lung. The opposite side of the chest gave out an asthmatic wheezing, from the clavicle downwards, as far as the fourth rib. The inferior part of the same side, both before and behind, yielded a dull sound on percussion: and the respiration was nearly inaudible over the same region. When she spoke, I could discover on the same side distinct pectoriloquism in the midst of this imperfect respiration. After examination, I recorded the following diagnosis:—*Large excavation in the superior lobe of the right lung, containing a quantity of liquid matter; the rest of the lung, on the same side, tuberculated; cavity in the middle of the inferior lobe of the left lung, the remainder of the lobe in a state similar to the opposite; the upper lobe of the same lung emphysematous throughout.*

I augured no long period after this, that she was likely to live many years; feeling assured that the asthmatic condition of the one lobe of the lung would counterbalance the defects, alarming as they were, of the rest of the pulmonary apparatus. I caused her to attend on several occasions, when lecturing on diseases of the chest, to point out the phenomenon of a person existing so long under such ravages from consumptive disease. She was seen several times at

the Central Infirmary, as well as the Infirmary for Diseases of the Chest; was well known to the two apothecaries of those establishments; and must have come under the notice of above one hundred professional individuals. I was not aware, for some time after her first attendance on me, of the value of that emphysematous state, which I now recognize as the preserver of her life for so long a period. Hers was at first considered by me as a remarkable case, from the circumstance of her displaying most of the external signs of health in spite of her really distressing condition. Of late years, however, I have learnt to estimate properly this strong corroboration of the truth of those views, which I have at last systematized, and reduced to proof.

A singular peculiarity, connected with the history of the patient, is, that from the age of fifteen to twenty-two, her personal appearance exhibited no change. She displayed the same girlish look throughout these years; and it was not, indeed, until she had turned her twenty-second year, that she underwent the catamenial crisis. After this, it was astonishing how quickly she acquired the aspect and proportions of womanhood. She was an occasional patient of mine, as I have already stated, for the space of ten years; applying to me from time to time, whenever she was in London. In the course of these years she experienced several severe inflammatory attacks. The immediate cause of her death was, in fact, a violent pleurisy, which seized her when on a visit to some friends about forty miles from town. She endured this as long as she could hold up, without taking any medical advice; and at last hastened home, and sent for me. But she had delayed till too late. Her tongue was thickly covered with aphthæ, her lips livid, her respiration so impeded as to prevent her from lying down, and accompanied with extreme pain in the side: her extremities were cold, and she had occasional hiccough. I saw that she was beyond the reach of medical aid; and the poor girl expired within thirty hours after reaching home.

*Dissection, thirty-six hours after death.*—The right lung was adherent throughout, by ancient attachments, to those parts with which (though without adhesion) it is naturally in contact. The summit was indented, indurated, and covered, or capped as it were, by a fibro-cartilaginous mass. Highly condensed cellular substance, of irregular thickness,

and about an inch and a half in length, extended itself into the lung, and gave off several bands, of the same structure, which ran in nearly a horizontal direction, and gradually lost themselves in the cellular membrane of the viscus. The structure just described, was probably formed from the cicatrization of ancient vomicæ. In the same summit there were a number of tubercles, in different stages, several of them surrounded by black pulmonary matter. There was a large cavity, nearly opposite the third and fourth intercostal spaces, containing a calcareous secretion of the size of a peach stone; and instead of being lined by semi-cartilaginous membrane, its lining was composed of laminæ, of the color and consistence of old yellow wax. The rest of the lung contained a multitude of grayish tubercles, of unusually firm consistence, and of various sizes; on cutting it, a quantity of frothy serum flowed out. The upper lobe of the left lung completely filled the cavity of the chest, on that side; and, when handled, imparted a sensation different from the natural crepitation, and somewhat similar to that caused by the displacement of some elastic fluid. Its surface exhibited several transparent vesicles, some of the size of an almond, evidently dilated air-cells. The dilatation of the cells over the rest of this lung, was likewise remarkable. On making a longitudinal section of this lobe, a slight trace of cellular cicatrix was perceptible; and two of the bronchial tubes were considerably dilated from their cartilaginous termination. The mucous membrane of all the tubes, without appearing highly vascular, was considerably thickened, and contained much yellow opaque matter. The inferior lobe, on the same side, on its anterior and lateral surface, was adherent through the medium of a false membrane a quarter of an inch in thickness, containing beneath it a gelatinous substance, transparent, and almost colorless. There was a large cavity, with tubercles, similar to those presented in the superior lobe of the opposite lung, but not so numerous; and marks of inflammation were exhibited in various places. The above cavity, which occupied the centre of the lobe, and communicated by a large opening with another of less size, had a membranous lining exactly resembling in structure that which I have described as appearing in the excavation of the right side.

I entertain no doubt that there existed originally a cavity

in the summit of the left lung, along with tubercles in a state of semi-transparency; the latter of which had been absorbed, and the former healed by the first intention.

CONSUMPTION WARDED OFF BY THE PRE-EXISTENCE OF ASTHMA.

Mr. Morgan, a general practitioner of Great Newport Street, has, on various occasions, invited me to accompany him to *post mortem* examinations. I have had the pleasure of pointing out to him, in some of these associated labors, the cicatrices of cured consumption arising from enlargement of the volume of the lungs. In the case now under consideration, extensive cancerous disease had destroyed a great portion of the uterus and the bladder; had produced considerable induration of the rectum, as well as obturation of the external iliac, with a portion of the adjoining hypogastric vein on the right side; and had affected the whole of the right leg and thigh in a manner similar to what is witnessed in *phlegmasia dolens*. Notwithstanding the ill health induced by the continuance of cancer of the womb, with the deplorable accompaniments just detailed, as well as exhausting discharges for upwards of two years, no symptom of consumption appeared; but the patient, at last, succumbed under general effusion, the result of protracted debility. On opening the body, I pointed out to Mr. Morgan the asthmatic state of the lungs, (with cicatrices on their summits), which had acted as a preservative against the ingress of that phthisical condition which, without this state, would in such a case have indisputably supervened. I have had opportunities of showing similar cases to several respectable practitioners, and, amongst others, to my worthy friend, Dr. Helsham. My chief inducement for mentioning this case, is to impress upon the medical world the high advantage of recurring, in all instances of debility occasioned by long-continued chronic ailment, to mechanical means for preventing the sure inroads of consumption, the consequence of such state. Mr. Carmichael, of Dublin, has indeed affirmed, in the second edition of his excellent work on cancer, that he never examined the body of a patient who died with any variety of that disease, without finding the lungs tuberculated.

The author would have gladly extended his remarks, but the limits of this work forbid.

*The following letters will be read with interest. Special attention is called to one from a Physician, exhibiting the value of the Tube in asthma.*

Charlottesville, Va., Sept. 5th, 1853.

DR. HOWE—Dear Sir,—You probably recollect my applying to you about six years ago for your Inhaling Tube. You will also recollect that, on examination, you found my lungs so much diseased, that you considered my recovery very doubtful, recommending, however, the *trial* of the tube. I began immediately to experience some relief, and subsequently my health has been *entirely* restored, and my lungs pronounced by several physicians who have examined them *perfectly sound*.

Having experienced this personal relief from one of the most destructive diseases incident to our climate, I have felt it incumbent on me, in gratitude to God, to endeavor to promote the use of this great and only remedy among my fellow-sufferers. Several of my acquaintances have, by my advice, applied for the tube, and have been relieved by it. The object of my present communication is to obtain two tubes for the use of two afflicted friends. In the families of both consumption is hereditary, but not personally fully developed in either. One is the case of a married lady of about forty, who is just beginning to feel occasional uneasiness in the region of the lungs, with slight hacking cough and general debility. The other is a young unmarried lady of about eighteen, of slender make, fair complexion, and blue eyes. Her maternal grand-parents both died of consumption; her mother and only brother fell victims to the same disease about two years ago. She is beginning to show the same symptoms, but seems wholly unaware of her danger. She has considerable cough, profuse night sweats, and general debility, loss of appetite, &c.

Will you please send me by mail two of the short tubes? My address is as follows:

ANN FANNIE E. R. DAVENPORT,

Charlottesville, Albemarle Co., Va.

CASE OF CURE OF ASTHMA.

*Speedwell Post-office, June 14th, 1853, Barnwell District, South Carolina.*

SIR,—In the year 1846 you sent me a tube. I treated with it a confirmed case of Asthma of eighteen years' standing in a young lady; so severe was her attacks at times that life became a burthen. She or her father applied to me for medical treatment. I, immediately after examining her case, sent on to you for a tube. After using it three months, her chest had increased one and a-quarter inches. In eighteen months it had expanded three inches. She has never had an attack since 1847, and is now in the

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enjoyment of excellent health. I have now a case of the same kind, and wish you to send me on the price of your last improvement on the tube, so that I can remit the money to you and get the tube. An early compliance to this will oblige

Yours, most respectfully,

WILLIAM FURZE, M. D.

CASE OF RECOVERY AFTER THE LUNGS WERE GREATLY DISEASED.

*New York, Sept 28th, 1853.*

SIR,—During last winter I was laboring under a severe cough, confined breathing, pain in my lungs, and spitting of blood. I consulted two physicians, who agreed that I was in consumption, leaving little hope of my recovery; and one of them assured me, the only chance I had was to return to my native country. Just at that time I was advised by Mrs. M'Clellan of No. 44 Morton street, to call upon you, which I did, and got one of your tubes. I then quit all medicines, and used it according to directions, and, thank God, in less than a month, the cough and pain in my lungs was removed, the spitting of blood stopped, and my breathing became almost as free as usual. I record this as another proof of the astonishing effects of your tube.

I am, sir, yours, sincerely,

P. DOHERTY,

No. 149 Hammond street.

P.S.—I would add, the day I first visited you I was so much exhausted, and my breathing so bad from walking up stairs, that I had to drop down on a chair, not being able to stand.—P. DOHERTY.

Was the benefit of *correct breathing* alone known and practised with proper habits of mind and body, it would save multitudes from Dyspepsia and Consumption. For Consumption and Bronchitis and Asthma the Tube will do more to effect a cure than all other means put together, medical treatment in some instances being necessary as an auxiliary. If there was a necessity to do without the Tube, or to dispense with a physician, I would sooner give up the latter. My conviction is, that the tube is of more value than all medicinal treatment; but medicinal treatment is not to be rejected. If medical men knew the value of the doctrines advocated in this little work, they would thank God, and take courage, feeling confident that they had a remedy adequate to the extensive ravages of Consumption, if seasonably employed. I trust the time is not far distant when prejudices, superciliousness, and ignorance may be succeeded by a desire to arrive at truth, let it come through whatever channel it may please Providence to send it.

NEW YORK, *March*, 1854.



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