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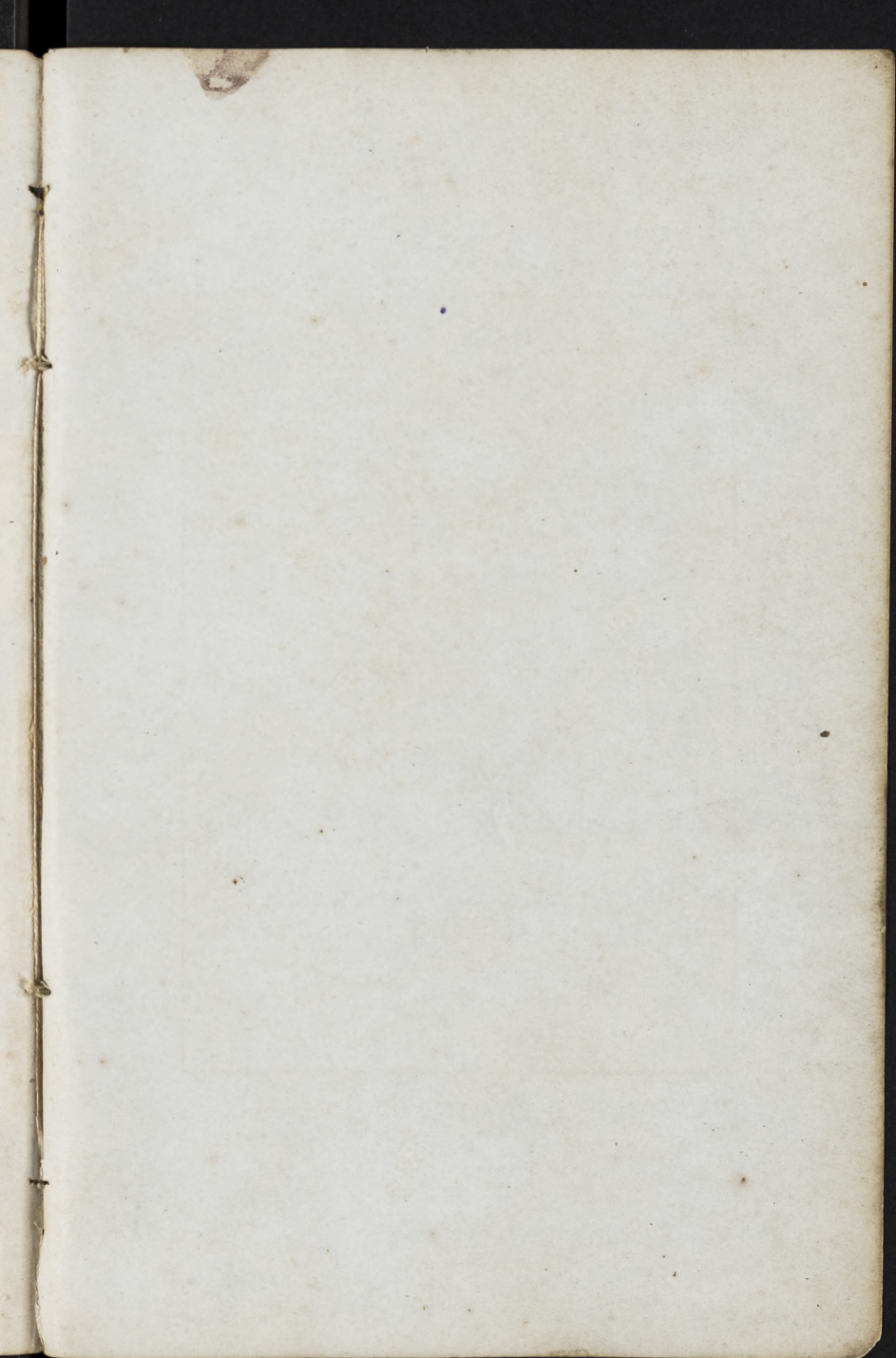
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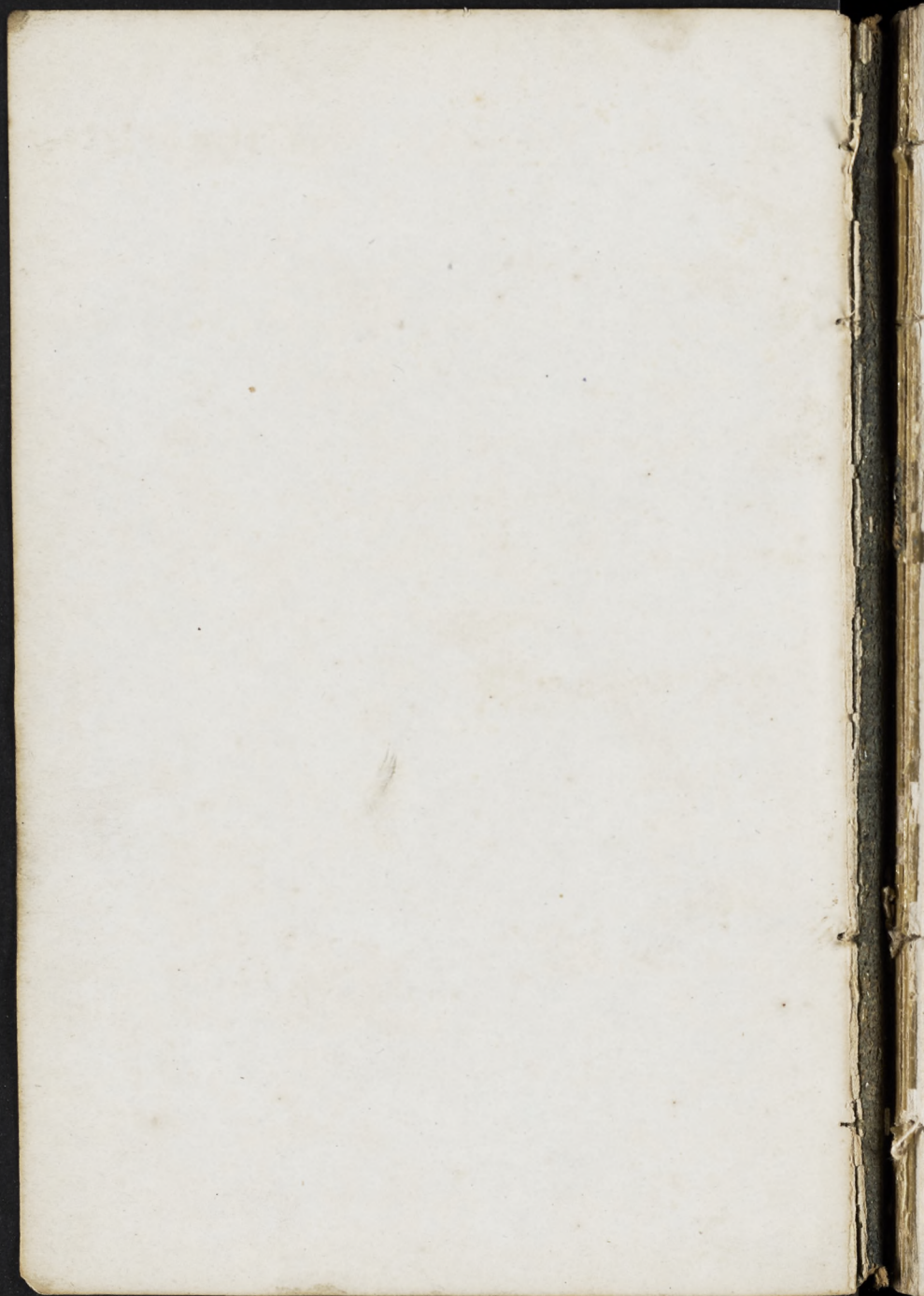
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Class 10a. No 85





Prof. J. K. Mitchell's Lectures: 1852-53

Yellow Fever

Synonymes = Black vomit: Ship fever:
Typhus icterodes: Yellow fever because
it tinges the skin of that color.

Defined, a disease of One Paroxysm
usually fatal within 7 days.

3. Stages. 1st = Febrile; or stage of active
heat. 2nd An appearance of Remission
3rd The collapse; in which the pulse
is feeble: yellow skin: black vomit: in-
tense congestion and death.

1st or Febrile Stage. Introduced sometimes
with chill, or none at all: violent pain
at the nuchae: at the head: lumbar re-
gions: legs, and calves: restlessness: rari-
ly Delirium: Tearful, and delicate inflam.
of the eye: patient is gloomy and sad:
As the febrile Stage advances; stomach
will not retain even cold water:

Bile is very rarely vomited: Respiration is always altered: pulse full, and firm, natural: tongue, seldom much furred, is swollen flabby, takes a cast of the teeth: Thirst is not excessive, but the patient requires much water to relieve a burning sensation: Bowels usually costive: Febrile Stage usually lasts from 36-48 hs.

2nd or Stage of Remission of all febrile symptoms: Yellowness tinges the skin, beginning from neck, and progressing downwards: Unfavorable symptom when the yellow tinge progresses: favorable when stationary: Remission lasts within 24 h.

3rd Stage, or that of Collapse: Patient may be walking; is seized suddenly: pulse is irregular, and compresses on the touch: Eyes sink; features pinched; patient lies on back; slides in bed: Color changes to anahogany on face and hands:

Stomach retains no longer: vomits, and discharges from bowels dark, grumous matter:

Delirium: Blood issues from the gums, ears, eyes, nose, bowels: Death on about 5th day.

Black vomit on microscopic examination, exhibits animalcules; hence it is attributed by some to animalcular agency: Mitchell explains it on the fungous theory.

Pathology. = Stomach and Duodenum softened and inflamed: Liver usually of a lemon color:

Mortality = about 1 in 2½: rarely occurs more than once to the same person:

Mitchell considers this fever is dependent on the state of the atmosphere: explains it on his fungous theory, and deems it noncontagious: It is endemic in the Tropics.

Treatment. Rush, and northern practitioners bleed boldly at the outset of the disease: Southern are cautious on this point:

Cups to nuchae: leeches to Epigastrium:

Cool the patient in Febrile Stage; open the bowels by ice within and without: dash water until they grow pale and faint:

Cathartics should not be used; nor Emetics either: of the former, Calomel in sedative doses of grs. XV-XXX can alone be given; of the latter, warm water, Spueae: and astringent. et mild emetics:

Pain in the head is to be relieved by Cold applied to it, and warmth to the hamo & extremities: cups, and blisters to forehead and nuchae:

If the fever lasts until the 3rd day, blisters to the wrists, and ankles et Soles are good.

For Stomachal disorders give Lime water with milk: Plumb. acetas from grs. 1-3 every 1/2 hour: Arg. nitras:

For nervous irritability give 1/2 - 1 gr. of Opium in very fine powder.

2nd Stage. = Keep patient in bed: enemata if bowels not open: rich chicken broth: do not slack his thirst: If the Lapse is threatened give stimuli; wine whey: irritate the skin: Quinia Sulphas in heroic doses.

As a styptic for hemorrhage, give Arg. Nitras gr. j in Aquae ℥ij.

When the skin grows yellow, and black vomit ensues, the case is almost hopeless, except in children, who sometimes recover:

Yet give of Ammonia the muriate, acetate, the carbonate: Potassae nitras aut Chlorid: Sodae Chlorid: raw brandy: external stimuli.

Milk Sickness.

Synonymes. = Puking fever: Trembles.

The original cause of this disease is not known: Cattle get the distemper more easily in the night and when their flesh is eaten, men, beasts and birds are similarly affected. Cooking the flesh, the action of vegetable alkalies, and acids; continued boiling did not neutralize the poison; Showing that the disease is not due to the water, since the poison is not soluble in water at the boiling point.

The Symptoms of milk sickness in cattle = May be concealed until some fatigue or excitement brings it on: The animal trembles; staggers; turns round; strays irregularly; eyes become turbid; convulsions; death.

The animals fed on infected cattle, have symptoms more protracted; premonitory symptoms usually commence on the second d.

Symptoms in man = Peculiar foetor of breath;

Unremitting vomiting; Pulsation all over the umbilicus, especially on the right side; Obstinate constipation; Impacted faeces; Tongue large, and flabby; takes impression of teeth: Prior to the vomiting, which ushers in the attack, the patient is mal aise; horror; lips quiver when he speaks; eyes confused; Pain in limbs; calves; nuchae: Complains of intolerable heat about the praecordium; Pulse natural; or quick; or low: The vomit, consists of tough, glairy matter; offensive suppurative, or even stercoraceous matter; bile. patient may have a tendency to sleep, or coma after puking: Singultus; rapid pulse; Coma announce the approach of Death.

Convalescence is usually rapid, and decided:

Treatment. = Blisters, cups, leeches, to nuchae; to Epigastrium if inflammation is there violent: Sinapisms to ankles, and arms; Alkalies; Soda; Bicarbonate of Soda, with $\frac{1}{2}$ usual quantity of Ac. Tart.

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given every half hour: Opium: Plumb. acet.:

Bleeding is a moot point: Emetics do harm:

Stimulate the patient by wines, and Volatile Alkalies, when there is prostration: Keep a patient in a moderately dark room.

Sincture of Galls are given by some, because they neutralize the poison.

Pathology. = Spleen always affected: Stomach is inflamed, and covered with black pitichial spots: meningeal inflammation of the brain: May be considered as Cerebro-spinal meningitis.

Relapsing Fever.

A fever which appeared in Glasgow, and Edinburgh:

Pulse enormous, even up to 156: Heat very great, as high as 109° : Pain in head: Nausea: loss of appetite; attended with obstinate vomiting: On 3rd or 4th day a yellow color is uniformly diffused: Intense pains in back, and head: Rheumatic soreness of muscles: Belly becomes tumid: Tongue at first white; becomes red at edges, and tip; and brown in centre: Great vomiting of bile: In a short time, the pulse descends from 150 to 70; all bad symptoms disappear; but vertigo usually remains: This remission begins about the 7th day, and lasts until the 14th: Then a recurrence of all the previous symptoms occur:

Pathology. = Liver and Spleen much enlarged: the liver usually lemon or orange colored:

Symptoms: Patient experiences a slight chill; then alternate flushes of heat, this lasts about 5 days: During the paroxysm the heat is greater than in any other known disease: Pulse extremely high:

Tenderness and pain in Spleen and Epigastrium:

Pain in frontal portion of the head, in opposition to Billious disorders which have pain in occipital reg.

Muscles so sore, that if the patient is placed in the most awkward position, he will retain it:

About 3^d day - bronzing commences, and a yellow lemon color is suffused all over the body, and not confined, as in Yellow fever, to the thorax:

Bowels usually costive: Delirium not constant:

In complicated cases the gastric disturbance was very great: Roseolar eruptions sometimes occurred on 4th:

Comatose symptoms, and retention of urine were peculiar to old men: The vomit which at first is green, becomes more dark, until it looks like coffee grounds; but is not an unfavorable symptom:

A violent exacerbation occurs after the lapse of a few days, followed by extreme sudorification; sweating profusely for 12-36 hrs: Urine and

feces pass freely: This brings his pulse down to 70 and leaves him very weak: After he has been raised by tonics; in a few days he is liable to a

Recurrence of previous paroxysms: But now has

Dysentery, and Diarrhoea in lieu of Constipation:

The Recurrences, are rare after the second, and are usu-

ally weaker: Pregnant women when attacked by this disease; aborted, and usually died:

The blood when drawn is buffy from the first, and displays remarkable inflammatory symptoms:

Mortality = The least of any known fever: being 12 percent at the worst, and on the average 2-3 p. cent.

Treatment. Bloodletting said to be injurious but Mitchell recommends one large bleeding, theoretically: Cups over Spleen: leeching the stomach: blisters over the spleen: Mercurial treatment:

Mitchell prefers the name of Recurrent Fever:

Variola, or Small Pox.

Def. = Acute inflammatory, contagious disease. ushered after 3rd day. by an Eruption.

There are Two kinds of Variola. 1st The "Distinct," or "Discreet" = where the pustules are isolated. 2nd "Confluent" = where the pustules run into one another.

Eruption = Commences on 3rd day, at that time small "papillae", "pimples" like "flea-bites" appear on the alae of the nose; on the chiro, and upper lip; afterwards on the face and wrists. These Papillae, in a short time increase in size; have a vesicular head; are umbilicoid, with a depressed disk, from adhesion of the Cutis to the Cuticle. These flattened Vesicles are of a pearly hue, from clear lymph, and are characteristic of no other disease except Varisella, or Chicken Pox. About the 5th day of Eruption, the vesicles become dark from the formation of pus

this is the period of "maturation"; the skin around these pustules becomes red, and inflamed. The pus, is after a few days, either absorbed, or suppurates leaving scabs or scales which finally drop off, about the 3rd week, leaving pits, or cicatrices.

Variola has 5 Stages. = 1st Period of Incubation
 2nd Febrile: 3rd Papillar and Pustular Stage
 4th Progressive Eruption, or Secondary Fever:
 5th The Decline.

1st Stage, or that of Incubation. After exposure to this disease, an interval of from 7-14 days; or 9 days more usually, elapses before the invasion.

2nd Stage, or Febrile. = Present some peculiar symptoms, as Pain in head; loins; epigastrium. Great Nausea, and vomiting: Extremely white and furred tongue: moist skin, these are the peculiar signs before the Eruption. The other symptoms of this stage, may be

Languor; Chilliness; Flushes of heat; Pleuritic pain, which is of no consequence: Peculiar odour: Roseolar rash, which indicates a mild or "discreet" case: Erythematous, or Erysipelatous inflammation, indicating a violent, or confluent case: Pulse is frequent: All these Febrile symptoms usually disappear, (except costiveness in adults; Diarrhoea in children) when the 3rd day is completed, and at the commencement of the Eruptions.

3rd Stage, or Papillar: Febrile symptoms disappear, and small pimples appear, which soon become vesicles. Pleurisy; Pneumonia; intestinal disorders delay the coming of the pimples; The only treatment here is to attend to the looks of the patient, and save him from cicatrices.

4th Period, or that of Maturation: The pustules are globular; secrete pus, and discharge yellow greenish matter. Itching and brown-

ing of the skin: Ecchymosis of hands and face: a cough, sore throat: slight Ptyalism: A secondary fever ensues, which is caused by cutaneous irritation: absorption of morbid pus; and the new action of normal condition of the skin:

5th Period, or that of Decline: About the 8th day of Eruptions, the redness about the pustules disappears: they become of a mahogany color, and form scabs, and scales, that drop off about the 4th day. Ferunculi now usually begin to appear.

Complications: Constipation in adults; Diarrhoea in children; Violent inflammation of the lungs: Tonsils; salivary glands causing expectoration of very thick saliva: Frequently, and especially in children, Inflamm. attacks the cornea, causing Ophthalmia, and destroying the eyesight in 24. hrs. as the Cornea does not become red, hence the patients may lose their eyesight, without the knowledge of the Physician: The Secondary fever may prove pernicious to vital

organs: If the Swelling leaves the face, and goes to hands and feet, great danger is threatened:

Causes of Death: In the 1st week, the malignancy of the disorder: 2nd Week, Suffocation from Oedema of fauces, and larynx: 3^d From the pernicious attack of Sec. fever on vital organs.

Autopsy: Mucus membranes always inflamed: Lesions of important organs:

Treatment: In first Symptoms; attend to the pains, and vomiting: Apply mustard plasters to the back for pains; also Enema, or Friction of Anodyne. The fever may be low, Adynamic, or Dynamic: but as it is only to continue for 3 days, it will rarely be necessary to bleed: Owing to the determination of blood to the Capillaries, it will be difficult to stop the hemorrhage of leech bites, hence do not use them: Cups have not this objection: The frequency of the pulse indicates the approach of the Eruption, and may require Saline Cathartics:

To relieve the costiveness in Adults give Calomel injections: To overcome the long continued Diarrhoea in children, inject Laud. in Boiled Starch.

Effervescing draughts— Lig. Calcis and Milk: cold applications, and even leeches for violent inflammation of the Epigastrium:

In Convulsions of children, apply cold to the head and warm bath to the body.

When the eruption breaks out, you have only to protect the features: Sydenham, and Mitchell say, place patient in an easy chair, in a draught, his feet in a band box, covered up: Currents of air not generally to be feared: External application of Chlorine for itching: To prevent disfiguration cover the face, with a thick cloth, & plastered over with Blue ointment, and Litharge in Equal parts: Light favors the development of pustules: hence if you replace the plaster on the face, do so in the dark.

Chlorine, Ammonia, Calomel in small doses

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diminish the red globules and relieve, low, muttering delirium: Stimulant Diaphoretic for Sec.

Fever = [Ammon. Murias. gtt v-x + S. Acacia + Aqua.]

Watch the Eyes for Ophthalmia: Look out for Terunculi, and a host of superficial ills.

After Convalescence, the skin remains congested for even 2 or 3 weeks: Now look out for draught and exposure, as Catarrhal, and Bronchial affections will occur. Do not allow animal food as Gastric Fever may be brought on.

Small Pox, may be confounded with the two following diseases.

Varioloid.

Def. = A modified Small Pox, arising from either antecedent Small Pox, or Vaccine Matter:

It is contagious, and capable of giving Small Pox.

Diagnosis: A fever of 3 days duration; followed by an eruption, which are smaller, and have less inflammation around them, than in Small Pox: they scarcely are pustules, rarely suppurate, and

dry about the 5th day.

There is also an absence of Secondary Fever, and the peculiar odour of Small Pox.

Prognosis: Very favorable; little, or no treatment is required; Potass. bitart. + Sulphur.

Varicella: Chicken Pox:

Def. = A disease characterised by vesicles:

Fever rarely continues over 24 hrs. followed by vesicular eruption, beginning on the back and breast: continuing from 5-10 days. One peculiarity marks this disease, the vesicles appear in successive crops; so that they may be found, in every stage of development, some flat; globose, or maturing, and desiccating: Upon bursting, they concrete in small pucker'd scabs, leaving no tubular prominence, or pit, as in Varioloid. The Eruption in Small Pox mature at the same time:

A moot point, whether contagious, or not: Mortality is extremely small: Treatment consists of light emetics: Sulphur + Potass. bitartas during convalescence.

Scarlatina.

Def. A contagious exanthematous disease, characterized by a red flush; and sore throat; a fever of 24 hrs.; Pulse exceedingly rapid.

4 Varieties: 1st Scarlatina Simplex: 2nd Anginosa
3rd Maligna: 4th Scarlatina sine eruptione, or
Scarlatinoid, a fever of adults, attended with sore-throat, and subsequent desquamation, but presenting no signs of eruption:

Inoculation, gives a milder disease, but should not be resorted to except in malignant Epid.

History: Imported from Africa into Spain 1610:

Autopsy. No particular lesion: any vital organ

The Incubitive period = 9 days. Few persons have a second attack: Women, and children more liable, than male adults.

a. Scarlatina Simplex:

An Uncomplicated disease: Patient restless: nausea: heat increases as the eruption commences, usually first found at roots of hair, and face:

sighing - face begins to swell - tongue and roof covered with red points - Body covered with a red flush, which does not rise above the cuticle, hence scarcely sensible to the touch - Efflorescence at its height on the 4th day - Excessive heat - skin dry and sensitive - intense itching producing delirium in children - Redness is more marked at the breast, articulations, and loins - Cuticle almost always lost in this disease from desquamation - The patient is troubled with sore throat, and Epistaxis - Pulse is enormous - Eyes Red:

b. Scarlatina Anginosa.

A complicated disease: Inflammation of the Pharynx very red swollen tongue, and fauces: Papillae always on the wrist, are enlarged, and look like strawberries - Patient sneezes as if with a catarrh - Voice is very sepulchral - Constipation in adults; laxation in children - Death may be caused 1st by the severity of the Fever: 2nd by the arrestation of the circulation [by heart clot, as Meigs will have it].

3rd By the eruption: 4th By suffocation, from abscesses forming in the tonsils.

c. Scarlatina Maligna.

Fixed local pain: All above symptoms heightened: Severe chills, followed by great heat: Eruption almost livid: delirium: pulse irregular: foetid discharges from nose, ears: foetid breath from ulceration, and gangrene of fauces: Sordes at the mouth: If they survive the disease itself, death usually ensues from sloughing, and gangrene of intestines, and other organs - from Pneumonia - from meningitis:

Sequelae: = About 14th-15th day; occurring only in children, and especially in winter; a Hydropic effusion occurs in serous cavities; Oedema of ankles, wrists eyelids: puffy cheeks:

Albuminuria usually commences about this time, ushered in by languor: somnolency; dark urine; chilliness; anorexia; Nitric is the test.

Desquamation of the cuticle, sometimes peeling off the

hands and feet like a glove, is one of the Scullae.

Prognosis. depends on symptoms; Cerebral are the worst. Slight attacks of lockjaw - dark color of the eruption - noisome runnings from nose, and ears - delirium - hiccups are very unfavorable.

Compounded with Measles. But the Efflorescence, or red flush is uniform in its color all over the body; ^{in Scarlatina} In the Measles, there are crescentic patches, with white interstitial spaces: 2nd Eruption in Scarlatina commences about 2nd day; In Measles on the 4th day. 3rd The Efflorescence in Scarlatina, does not raise the cuticle, hence is not sensible to the touch; In Measles the Eruption arises above the skin, in prominences.

Treatment: Keep patient in bed - light clothing - ventilation without draughts - change room, the bed - never allow two patients to be in the same room, as the morbid exhalations are very noxious: diet: Rush gives Calomel, after an Emetic, at the outset of the disease, but this is deprecated:

Others use, Ammoniac Carb. ℥ij
 aqua ℥v in Spoonfull
 doses throughout the disease to alter the condition of
 the red globules of blood.

Some use this formula

R. Pulv. Capsicum ʒij
 Chloride Sodium ʒij
 Acid Acetic. - (O) ss
 aqua - - - (O) ss

a Spoonfull every 4 hs.

Mitchell's Treatment = Throughout the disease
 he gives 1 table spoonful 3 times a day of
 Liq. Sodae Chlorinatae [Labarraque's disinfecting liquid ℥ij
 with from iij - ∇ ʒ of water: Also he gives invari-
 ably R.

Extract. Belladonnae Alcoholic. gr. iij
 aqua Camphorata - - - ℥ij

One drop for every year of child's life, 3 times a day.
 Lave the skin with a stronger lotion of Chlorinated
 Soda, good for itching: For gastric embarrass-
 ment give an Emetic, and food and mucus
 will be thrown up at the incipency of disease.
 Depletion not usually resorted to, unless there is

a local determination. — Give Calomel only, when yellowness indicates a hepatic determination: —

Opium enemata for Diarrhoea: — Leeches to the temples; semilunar blisters behind the ears, for delirium: — For Pain in Stomach, ice swallowed; Scapisms on Epigastrium followed by Cups.

For Restlessness. Put a piece of ice in mouth — give an enema of cold water; change the apartment; hold the hands of the patient; cold or warm bath; Ammoniac Carb. a stimulant diaphoretic; Opium:

For acidity, and bile in Stomach, give Potass. carb: Soda: or some Alkaline:

In high Febrile condition, use mild diaphoretics, of which the best are, Ice water taken every $\frac{1}{2}$ hour in Spoonfull doses; Potass. citras; Sodae citras; Potass. nitras; Ammoniac Carb; minute doses of Antim. Tart; Warm, and cold baths, according to heat of patient.

Ice, brandy, and water an antiemetic.

For purple eruption, you may give of unbruized Mustard seed; a table Spoonful to an adult; a

tea-spoonfull to a child:

Corynache, or affections of the Throat: Emetics are invaluable: Poultices to the Throat, do good by their emollient power, and heat: Cauterize the fauces with Argent. nitras & if a piece is swallowed give salt immediately: — A gargle made of Sage tea, honey, and Alum: Zinci sulph. of any strength: Scrub out the fauces, with a sponge attached to a stick: Insufflation, or blowing into the fauces, through a tube, (the patient holding his breath) Puls. Aluminis exciccattum; Tannic Acid in pulv.; Catechu; Sodae Boras; Calcis chloras; Powdered Calomel allowed to remain in mouth $\frac{1}{2}$ h. and then spit out; Wet a piece of cloth, sprinkle Sodae boras on it and wipe the mouth and fauces; [This by the way is excellent for chronic itching of Vagina, and Rectum]:

Odor. To correct this, apply lotions of Chlorinated Soda; Pyroligneous Acid; Creasotum:

When the fauces are of a dark, mahogany color, give substances that part with their Oxygen readily:

as Protoxide of Nitrogen [laughing Gas] strongly diluted in water; ice externally and internally to the gorge; Potassae nitras; Potassae murias; These articles restore the red color to the fauces.

For Tropical Symptoms, and Albumenuria: Mitchell gives warm bath, and Dover's powders at night; Eucatorium perfoliatum: Others give Lugol's Solution gtt. x. 3 times a day; Cathartics, warm baths; Potass. iod.

This tropical Effusion is not an unfavorable Symptom.

Belladonna as a Prophylactic: It was first introduced by Hahnemann, because its use caused an eruption similar to Scarlatina. It is now believed to exert a prophylactic power, but for further information ^{vide} Watson's Practice.

Itching: Is very troublesome, but relieved by the warm or cold bath: Lotions of Chlorinated Soda ʒij - Aq. ʒiv .
Some cover the whole body with Cold Cream, or grease, before the efflorescence sets in:—

Rubeola or Measles.

Def. An exanthematus, contagious disease, rarely occurring more than once to the same person.

Inoculation, is said to produce a mild form:

Incubitive period is about 9 days; Febrile symp-

toms then set in, which last 4 days, before

Eruption: On the 4th day, a rash, like small fleabites, appears at the roots of the hair, and on the wrists: these coalesce, and are sensible to the touch; these form semilunar, or crescentic patches, with intervals of very pale & white skin. This rash soon spreads all over the body. Dark red spots, can be seen on the fauces and palate.

24 hrs. before the external appearance of Eruption.

On the 4th or 5th day they begin to fade in the order of their coming; on 8th they are mostly gone, and desquamation of the cuticle occurs in small flakes, or scales.

Confounded. With Scarlatina; but in that disease the fever is shorter, and there are no crescentic

lines; no white intervals: Confounded also with Roseola, but this has neither crescentic lines, nor any Catarrhal affections:

Complications: Eruption without Catarrh: Catarrh without Eruption: Lesion of important organs:

Striking in of the Eruption: Rubella Nigra in which the spots become brown, with a yellow tint; hurried pulse: may last 3 or 4 weeks but is unattended with danger. Tonics. Mineral Acids.

Pathology. There is no special lesion, but they die usually by the lungs; from Pneumonia, the lungs being either splenified, or hepatized, and sinking in water.

Symptoms: After the incubative period, the febrile stage is ushered in by a chill; fever very hot, with moist or dry skin: The nose is at first stopped with a Catarrh; then follows a Coryza, or running from nose, of mucus so irritating as to chafe the upper lip:— Eyes red, and watery as in Catarrh:— Patient sneezes constantly, especi-

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ally when light is suddenly let into a dark room: Throat is sore; cough constant; intense thirst: These symptoms last for 4 days, when the Eruption is ushered in; when the face swells slightly, and Salivation may occur; The bowels are costive in the beginning; loose towards the close.

Treatment. consist 1st To regulate the fever. 2nd To bring back the recedant eruption 3rd To prevent local determination. In uncomplicated diseases Keep patient in bed; in a dark room, exempt from draughts: regulate the bowels; if disordered give teaspoonful doses of Coxi's Plive Syrup, every 15 m. until emesis ensues:— Feed patient on barley water, and mucilaginous drinks: For the eyes employ warm rose water; Infusion of Sassafras; Sulphate Cupri; Potass. iodidum gr iij with Card:— Let them inhale vapor of water, of hot vinegar, of tea: Nausea, and anorexia are relieved by emetics: For acidity give Sodae Bicarb. gr. v to a child; or of Magnes. calcinat. gr. x. in milk, or water.

Pneumonia of Measles: is diagnosed by flushes on the skin of face and chest; by percussion: As there is in pneumonia, a Hypostatic tendency on the part of the blood, change the child from side to side; place him on his face, but do not let him make use of the same position. Bleed: Antim. et Potass. tart: calomel; cups: blisters which cover with an oiled tissue paper to prevent strangery: keep from excitement.

Recedant Eruptions: Restore the action of the skin by warm baths, with aromatic stimulants, as horse-mint; Sage; Mustard: Give Serpentaria in hot infusions: Mild stimulants, as Ammon. Carb: Camphor: Sinapisms: Ammoniac Acetas: weak wine whey: Put in a warm bath, and then instantly afterwards into a cold one: Pepper tea: Some give Potass. iodid; as many grains as child is years old, this must always be given with equal grains of sugar, in wine-glass of water.

In local determinations, use the remedies indicated: as Cerebral Congestion Etc.

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During Convalescence, the patient must be exceedingly careful, as the system becomes intensely susceptible of all complaints. Pneumonia in Winter; Diarrhoea in summer, are common results.

Give during Convalescence Sulphur + Potass. bitart.
this is always given towards the close of exanthem-
atous diseases.

Roseola or Rose-rash.

Def. = An efflorescence in blushing patches, which are not crescentic as in Rubella, but straight and broad; moreover it has no catarrh; and also commences on the trunk, and extremities. The rose-color deepens and acquires a brownish tint.

Roseola aestiva: Begins with a slight fever: The eruption is of a darker tint, and itches more: After the second day the eruption fades, disappearing on the 5th: as its name indicates it occurs in Summer.

Roseola miasmatica: Occurs in August, mostly in children: Eruption is in round patches of the size of a "levy."

Roseola annulata: Characterised by patches of rose-colored rays, which radiate from a central area of the color of the skin. A chronic disease:

Roseola infantilis: Very irregular in its character, the eruption coming and going, it occurs in children during dentition:

Causes: This is not an idiopathic disease; but is

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simply an index of internal derangement.

The causes are; Dentition: Heat: Cold: Change of life: Indigestion: Oysters: Uterine derangements:
Balsam Copaiva:

Treatment: In the "aestiva"; Slight Cathartic; diaphoretic; Spices to bring out Eruption: Bleeding, Emetics, purges.
In the "annulata" give warm baths, and spices for retrocession: Potass. iodidum: sea-bathing; Nitro-muriatic acid, externally by bath, and internally:
In the "Roseola infantilis", cut gums by crucial incisions.

Urticaria, or Nettle-rash:

So called because the eruption looks like the stings of a nettle. Little swollen lumps, with red areolae and white prominences: or colorless globules on a pink stroma: Non-contagious; appears and disappears constantly: has a smooth velvet-like feeling to the touch. Frequently there is cramp in the legs: pain, nausea, all of which are relieved by the appearance of the Eruption.

Causes. = Balsam Copaiba: Dentition: Intestinal disorders:

Excess in unaccustomed food: Dolichos pruriens: Mouscles:

Treatment. An Emetic, followed by an Eneema, or

Cathartic: Alcohol and water as a lotion: Vegetable

diet: Fowler's Solution [Liq. Potass. arsenitis:] Aperient

Pills: Argent. nitras: exercise: Venesection: Chloro-
form as a lotion, which is also excellent in Childblains.

Rx.

Hydrarg. sulphur. rubrum ʒss.

Serpentaria — — — ʒj.

Syrupus. q. s.

℞.

to be made into a bolus. Cold baths:

Pregnant women have Chronic Urticaria:

Erythema:

Def. Mitchell = Any morbid redness of the skin that
has no other name: noncontagious.

Erythema intertrigo: Sometimes papillar, sometimes ves-
icular: occurs in children, behind the ears from Cap-
strings: about the thigh from irritation of the feces: Etc.

Chronic Erythema: Peculiar to Laundresses; Dyers;

Flatters. Comes and goes, and finally settles on the

hands permanently: Animal Oil: Gum elastic gloves

Treatment: Burnt rags: Zinc Carbonas: Flour: Plumbi
Lapis calaminaris:
acetas: Cleanliness: Animal oils, and grease: Fuller's
earth: Liq. Potass. arsenitis et Venesection as Alteratives:

Erysipelas, or St. Anthony's Fire.

Def. = An acute, uncircumscribed inflammation
of the skin, attended with pain - redness - heat.

Instantly after pressure, the blood returns to the spot
as if the capillaries were irritable: This disease
terminates either in Resolution, or in the infiltration
of Serum: Frequently the Epidermis comes
off in branny scales:

There are two kinds of Erysipelas 1st Arterial:

2nd Venous, or Phlebitis: to be treated differently.

1st Arterial Erysipelas. = This is an inflammation
of the arterial capillaries; characterised by a ten-
dency to progression, and a bright redness: It
never sloughs; rarely suppurates; is noncon-
tagious; rarely, if ever, epidemic; but is her-
editary: If the father has it on the face, or leg
the son will usually have it in the same

places: Sometimes chalky secretions, are deposited, as in Gouty affections:

2nd Venous Erysipelas: This is an inflammation of the venous capillaries. It is contagious; epidemic; not circumscribed; of a darker color; has a tendency to slough, and infiltrate serum in the cellular tissue; It is a Phlebitis; Typhoid in its livery and comes to a maximum in about 9 days.

It is very apt to commence in the lips of wounds on the scalp, and is very dangerous then, because it may penetrate to the Meninges, and even the brain itself. Desault makes the observation that when patients die of Erysipelas of the scalp, there is an invariably, contemporaneous abscess of the liver, with infiltration of pus.

Treatment: In Arterial Erysipelas, give Tart. Em. Saline cathartics, and bleed boldly: local applications:

In Venous Erysipelas: At its first appearance, wash off the grease of the skin by soap water, then apply Argenti nitras on it, and an inch around it.

38.

If this fail use Tinct. Iodine; Green sulphate of Iron:
Physic's Blister all round, and extending on each side of
the affected part: Emetics; Cathartics: When the in-
flammation approaches the head, shave the hair off
or you will lose it all. Use same remedies as in Puerperal:

Lotions, or local applications: = Plumbi acetat + Tinct. Opii:

[Alcohol ℥j + Liquor Ammoniac acet. ℥ij + Aquae ℥vi]:

In Chronic Erysipelas: ^{aqua picis liquidae} Use Tar-water: Unguentum Picis:

Blue ointment: Quiniae sulph: Alteratives:

Resumé of Eruptive Diseases.

Diseases of the Prima Via

There are two ways of showing diseases of the Stomach.
1. From Symptoms during life 2. After Death.

Post mortems are not always satisfactory, as Epilepsy; Infl. of Brain; Sanguination; hearty meal; death by suspension, all exhibit symptoms of an Infl. of Stomach. In Typhoid the blood is defluent and exudes on the mucous membrane. In true infl. the arterial capillaries are engorged; in pseudomemb. infl. the venous cap. The color of infl. may be striated, ramified, punctuated laminae, or patches: The Punctuated is the only sure indication of Infl. prior to death. In Chronic Infl. the Stomach is brown, slate colored, dark green.

General Symptoms = 1. Increase of Serous fluid: 2. Becomes dry. 3. Viscid mucus adhering; the villous coat becomes corrugated: 4. Ulceration of the Mucus Memb. 5. Thickening of the same; and more friable; the submucous tissue becoming

less adhesive, the mucus tears up in strips.

6. The muciparous glands are enlarged, and irritated.

The Mucus Memb. has a Serous element which binds together the Gastric, mucus, Serous follicles. Muco-Gastritis—: Endogastritis: Acute Gastritis

Acute infl. of Stomach idiopathic is very rare:

Sympt. = Anorexia: Cephalalgia: badly marked chills and flushings: Redness at Scorbicular Cordis.

Pain at the Epigastrium varying from a mere sense of weight, to the most lancinating pain:

Vomiting first ingesta, then the secretions as Gastric juice; bile; blood: Craving food: Thirst.

Sympathetic Symp. 1. The Circulation is increased heart hurried; pulse hard; large or small. 2. Nervous: then are pains in head; joints: dimness of vision: Convulsions: Subult. Tendinum.

There is every variety of Tongue: red; yellow etc.

Terminations = 1. Resolution. 2. Chronic Metastasis to brain, Kidney, to intestines.

Diag: May be difficult from Sympathetic

pain in the Stomach: In Symp. pain, it is relieved by pressure; Gastritis, pressure increases pain.

Treat: Indications = 1. Remove the cause 2. Allay the parts locally inflamed. 3 Overcome the Sympathetic 4. Correct the functional disorder.

1. Use the Stomach pump: Warm water as an emesis, cooled by time, not by admixture with cold water: mix it with salt or mustard: tickle the fauces. If mild emetics fail, give Opac. Zinci sulphas: Alum: If the vomiting from Tact. Emetic is too violent, allay it by cold green tea: cold coffee: stomach pump.

2. To allay Local infl.: Deplete: especially leeches over the Epigastrium: To allay Nervous irritability, and contract the capillaries, Give cold water at temp. of melted ice; Sassafras: Slippery Elm: Ice-cream Vanilla: Lime water: Vegetable and animal oils: Plum. acet. in solution Fresh butter: Chicken water ice cold, fat scooped off. If the nausea is incessant, give Lime water; Brandy: Calomel laid

dry on the tongue: Powdered Chalk: Magnes. carb:

Arg. nit. gr $\frac{1}{4}$ at dose in solution: Pepper tea:

3. To allay Nervousness: give Camphor; moschas;
asafoet. per rectum: Enema of grt LX-4XXX of
Tinct. Opii.

Revellents are of use: Rubefacients; Spts. Ammoniac:
Mustard poultices half flour: Chloroform: Small
blisters 2-3 Squars when fever is reduced, too
large ones increase the irritation.

4. To allay irritability of Stomach: apply Spts. Camph.
Chloroform: Ether externally, and by Inhalation.
Opium is rather dangerous, but you may give
an old Opium pill to allay emesis. The
best remedy for emesis is an injection of
Laudanum: Denarcotised Laud. of Hare:

McMunnis Elixir of Opium: Sedative liquor
of Bradley. all good though empirical.

Chronic Inflammation: Chronic Gastritis:

May arise per se; or be the result of Gastritis:
seasoned food: Indulgence. Etc. it occurs
generally between 35 ys - 50, and produces

adhesions; ulcers; a chronic disease differs from acute by lessened sensibility.

Symptoms: = 1st Those of Stomach itself 2nd Sympathetic.

1st Appetite becomes depraved; eructations of gasses;

vomiting: If emesis occurs soon after eating, the Cardiac end is affected, et vice versa. Cupri. Sulph.

is good in this case. [Schirrus of Pylorus is known

by creamy matter in feces, with cordate globules

and microscopic flocculi] The emesis may oc-

cur at stated times; extreme sensibility or insensibility of Stomach: in fact there is every sympt-

om under the heaven.

2. Sympathetic Symptoms: are numerous:

tongue is of every hue and state, patched; mapped;

red, furred etc. Aphthae appear on the tongue

which are fungous upon examination: Gums

are red and spongy: or white and hard: teeth

decay: bowels are usually costive: Stricture like

a cord around the head. The action of V Senses

are impaired; muscae volitantes: Rigors;

flushings of face; sleep after dinner.

Anasarca; Hydrothorax; ascites arising from Dyspepsia, always indicate approach of death.
Chronic Gastritis, may terminate in Resolution
 Induration; Tubercles; Ulcers; perforations;
 Softening, and Schirrus.

Prognosis = unfavorable if there is periodic diarrhoea; Anasarca etc.

Treatment: 1. Arrest the progress of infl. by rigid diet and tonics: 2nd Remedy organic alterations: as indurations, marked by ^{no} pain, but by eructations, and constipation. Use Alteratives as [Blue mass. grj + Ext. Hyoscyam. gr. ij] every night on going to bed, Mitchell thinks more of this remedy than anything else. The diarrhoea is not to be cured by Opium, but by B. Mass. Give Hydrarg. chloride et. bichloride, if the B. Mass. is unpalatable: Hydrarg. protoid. is too irritating. Give liq. Potass. arsenit gtt. j: Iodine: Emetics: Punching in epigastrium: riding.
Mucus ulcerations, are difficult to be cured from

mobility of the parts; diagnosed by sense of soreness;
 smartness when salt is taken; emesis of pus;
 These are to be treated by Arg. nitrat. in crumb of bread;
 rigid diet; mucilages; counterirritations by Anti-
 monial Unguents; cupping, leeching, blistering
 the Spine Opposite.

3. Functional disorders are to be arrested. (a) of Stomach.
 The secretions when normal are healthy; when abnor-
 mal, they disturb the action; create acid, which
 when the result of secretion is not flatulent; when
 the result of fermentation causes flatulency; cardi-
 algia, or heartburn:

Remedies for Acidity = The "earths"; carbonates of Alkal-
 is: diluted alkalis; porous substances as charcoal;
 cracker: The choice of antacid depends: (a) if
 Costive, us Magnes. carb. or Calcined Zi - Zij in
 milk, or sugared water: If this causes concretions
 use acids, as Acetic; Muriatric; Sulphuric.

(b) If bowels are loose, or natural, and yet acid:
 Give Potass. aut Sodae bicarb. Zi - Zij: fZj doses
 of Limon water; or Slixirium, called dye-tea = to

46.

2 quarts of Hickory Ashes + teacup of Hickory Soot + Aqua
cong. j] after standing 24 hrs. well shaken; decant it
off upon subsiding. This is the best antacid, when
you do not require to move the bowels.

If you require stimulation; use [Ammoniac carb. gr.
v-x + Sodae carb. gr. v-x + Spts. Camphor] or [Ammo-
niac carb. gr. v-x + Liq. Ammoniac carb. gtt. v]

When there is constitutional objection to above articles
as in diarrhoea; give Carb. Liq: Chalk: Alumina;
those preparations of lime that do not form purga-
tive Salino compounds: Liq. Calcis.

When Chronic infl. affects the muscular coat of
the stomach; there is pain from the peristaltic mo-
tion called Gastralgia: The stomach is con-
tracted and hard; and causes emesis sometimes
without nausea. This pain is relieved by pres-
sure. Some consider it a neuralgia of the
mucous lining, but Mitchell disagrees,
1st Because this pain occurs when there may
be no mucous inflammation.
2^d. The pain is an aching one

3. The remedies are such as are used for 147
muscular Rheumatism.

4th The Pain is relieved by pressure.

Treatment: = 1st The Cause: 2^d The Pain itself.

The mildest remedies, as warm water; a feather
to unload the stomach: If due to acidity, use
alkalis: If due to Flatulence, use Carminatives
Brandy; Comp. Spts. lavender: Aromatic Spts.

Ammonia: Volatile Tinct. Gallicum; in dose of

$\mathfrak{zj} - \mathfrak{zj}$: Volatile oils: Sulph. Aeth: Spts. Camph:

Camphor tea: See water: happens frequently
to Hysterical females and Gravid.

If Prolonged: Apply Sinapisms; or \mathfrak{zj} spt in

Chloroform: Chloroform in dose of $\text{gtt } v - xx$

dissolved in Sugar water, and well shaken up:

Tumbler-fulls of hot water: The best remedy is

Hydrocyanic Acid $\text{gtt. } j - \mathfrak{ij}$ in Camph. water:

[Tinct. Opii $\text{gtt. } xxx$: Acid. Hydrocyanic $\text{gtt. } \mathfrak{ij}$ +
Aquae Camph.].

You may be obliged to give Opium, but it is
apt to produce vomiting: hence give the mildest
form: Oleum Succini, Nuciperi, Terebinthinae

In the use of Mercurials, give Calomel $\text{gr. } \frac{1}{8} - \frac{1}{6}$.

48 | once a day: Hydrarg. mass. grj always in small doses and for a long time: Iodides and Arsenic in alterative doses.

In painful digestion, use gtt. j-ij of Hydrochloric Acid immediately after each meal.

Cold affusions of bark: Flowers of Zinc: Nit. Arg:

Bismuthi Trinitras: Iron in hard cases as tonics.

Mitchell's Tonic Pill ^{℞ Ext. Quassia} ℥ gr. ij
Precip. carb. Ferri gr. 1/4
Chinon. Pulv. — gr 1/4
Liq. Potass. arsenic. — gtt. 1/2.

Pyrosis: [Water brash] = A painless regurgitation of thick,ropy fluid: always a morbid secretion of the salivary glands coincident with it:

Supposed to be due to Fungi, dependent on Sarcina, or baril-like appearance of Stomach.

Treat: Neutralize the taste of acids: by Iodide of Potass. of Alkaliin by Muriatic & Phosphoric acids.

Tinct. Nucis Vomica gtt. x-xx: Ol. Sabinad:

Juniperi: Succini rectif. gtt. xv upon loaf sugar: Use medicines that destroy fungous life, as Arsenic, essential and Vegetable oils: Clipping Spind.

Wine of fresh root Colchici for Gouty diathesis
Potass. nitrat. for Rheumatic condition.

Calomel etc.

4. Management of Sympathetic disturbance. - (a) Of Circulation 9.

This is not much disturbed, but may require leeches cut the tail off of one, and apply to stomach for hours: Antiphlogistics: Purge large intestine by injections: mild Cathartics, as Calomel. & Rhubarb:

Scrogliani's Cathartic Drink

℞ magnes Sulph. ℥i
Oxal. tart. ℥i
Ferri Sulph. gr. XII
aqua fluvel. ʒij M.

In almost paralytic torpor of bowels unite Sulph. Strychnias with a cathartic.

(b). Of large Intestines: - Costiveness: give Cold Express'd Linseed oil: Calomel combined with tonics and Rhubarb: Strychnias + Cathartic:

(c) Cutaneous Disorders: a universal poultice as a warm bath: Stimulate the Capillaries by friction: vapor. & Sulphur baths: Diet should be most rigid: Boil barley for about 5 minutes then strain and wash, and put it in cold water until it swells, this takes away musty taste: forbid tea & coffee or else they must be taken without sugar: Exercise after dinner is not injurious as supposed: dilute milk: chicken broth: the meat of adult animals, the lean of fat meat being the best:

Affections of the Intestines:Duodenitis

Def. = An Inflamm. of the duodenum confined to the Mucus or to all the coats:

Diagnosis: The pain is situated at the Pylorus, and extends to the Liver, and shoulders; hence confounded with Hepatitis. The pain 2, 3 or 4 hours after eating diagnoses the disease; also the vomiting is streaked with bile; there is more hepatic disorder than in Gastritis: The first vomiting comes from the stomach, is not tinged with bile & is attended with no pain: but the second is painful from regurgitation of inflamed Duodenum.

Treat. Use Antiphlogistics: Nauseants; Emetics; warm baths: Mercurials within & without when there is hepatic derangement. (Ipecac + Opium + Calomel): Calomel excellent to increase intestinal secretions. When there is dryness of the skin, with pain give Dover's powder: relieve bowels by repeated clysters. When glandular alterations are required give minute mercurial doses: Opium for Serous effusions: If worms are the cause, give Arsenic: Hydr. bichlorid:

Mucous
Enteritis
Inflam. of Jejunum & Ileum: Diarrhoea 157
May be confined to mucous coat, or all of them.

If the Inflam. is confined to Mucous coat alone there is Diarrhoea: If to Peritoneal, there is Costiveness:

Sympt. little nausea: copious feculent discharges:

Anorexia, or excessive hunger: cold clammy skin:

Pulse in Mucous inflam. is high: in Peritoneal

is depressed: Griping; distentions; Borborygmi:

The discharges become thinner and mixed with

ingesta: The discharge may be serous, and

mixed with blood, then called Dysentery:

If the discharge is untinged it is called Diarrhoea:

Terminates, in Resolution; Chronic Ulceration:

Prognosis: delirium; Coma; Subsultus tendinum:

irregular pulse: stercoraceous vomiting: or like coffee

grounds are unfavorable. If the pain has suddenly

left him: patient feels well; but you find the

pulse fluttering; face deadly pale; blue under the

sockets: cold clammy skin: disposition to vomit

without pain. Gangrene has intervened:—

If the pain is suddenly violent, you may conclude

the perforations have reached the Peritoneal coat.

52] Restlessness; Shifting of position: pitching round with elbows are very fatal signs in all intestinal disorders: When the skin becomes yellow no recovery has been known.

Treatment: = 1. $\frac{st}{n}$ To subdue Inflammation 2. $\frac{rd}{n}$ To Restore the secretions of the part.

1. Bleed: Leech, which is best for mucus Inflamm. over the painful spot: Sinapisms; Rubefacients: when bleeding is inadmissible: Stitch a poultice bag, when cold dip it in warm water: If there is much pain, place a rag dipped in Laudanum over the spot, and cover with a poultice; Mitchell says that Laudanum is the best application for incipient Paronychia to prevent suppuration.

2. To Restore the Secretions: In the 1^{st} or Dry Stage of the disease: use Enema of warm water, until the rectum is full, let the patient assist by drawing up, then let him immediately go to stool. Calomel: Costrate of Magnesia.

2^{nd} Stage or that of Excessive secretion (or Diarrhoea)
Two Indications (a) Keep down Inflammation:
(b) Diminish the secretions:

(a) 1st Relieve the Inflammation, by Calomel which is almost a Specific for the upper bowels.

[Calomel gr 1/2 + Tart. Emul gr 1/16 + Potass. nit gr 1/2 + Opii gr 1/5]. Opium does good (a) Lessens irritability. (b) Lessens secretion. (c) Diminishes peristaltic action. 2nd Divert the Inflammation

by the Kidney, with watermelon seeds: Uva Ursi: Quince seeds: Flax: Sassafras: divert to the skin, by warm baths.

Diet: Mucilages, and Farinaceous substances: Milk, boiled for an hour, and diluted, is an astringent, you may add G. Tragacanth and Creta preparata:

Blue mass. gr 1 + Opii gr 1/5, every 4th hour. the Opium must not be in so large a quantity as to neutralize the Blue mass.

Examine the character of the secretions, by Humeric and Litmus papers: If Acid. Give Creta. prep. gr V - XX + Opii: Powders of Castillon, which

contain the Testa prep., and ʒj is to be united with Arrow-root ʒj.

Cret. prep. — ʒss
G. Acacia + Sacch. ʒss
Tart. Opii ʒss. xl
aq. menth comp. ʒv m.

If Alkaline Use Hydrochloric Acid, ʒtt V - X.

54 | diluted in Water: Hope's Mixture is good
only at this time consisting of [Nitric Acid ℥j +
Aq. Camph. ℥viij + Tinct. Opii gr. xl.] ℥ss. ʒ. 4 ss.

For Irritation & Tenesmus of Rectum; inject
melted fresh lard; barley water; Opii grj +
Melted butter.

Give Tonics, when indicated by weakness as
Plumbi acet. gr 1/4 - ʒ; Zinci Sulph.

Haematoxylon ℥j to Aquas Oj + Chincan & An-
natis, for children is excellent.

Chronic Mucus Enteritis (Chronic Diarrhoea)

The lesion may be equally great, but does not
act upon the Sympathetics as the acute.

Pathology. The slate color: The affection of the
aggregate and agminated follicles mark
this disease from the acute.

Treat. The remedies are the same as in the
acute, but Mass. Hydrarg grj at bed time
and rigid diet and drink is almost a Spe-
cific: Balsam Copaiba; Arg. nit: Ol. Turbinth.
Tinct. Rhei + Tinct Cardamom was Dr. Physics.
When Neuralgia exists, use Tur Cornica gr ʒij.

Veratrina gr $\frac{1}{12}$ - $\frac{1}{6}$: Strychnine sulph: 155

Cupping Spine: Diet: exercise: friction: Sea bath.

Mucus Colicis (Dysentery)

Def. = Inflammation of Colon, sometimes of Rectum accompanied with Mucus and sanguineous discharges, with tormina.

May be a Mucus; Serous; or Erysipelatous Dysent.

Occurs usually in Summer and Autumn.

The Evacuation are first feculent; then mucus: mucus tinged with blood: Serous fatty discharges, very foetid.

Patient complains of thirst: Complexion becomes dirty: Pulse small, rapid, irregular: Abdomen is distended and tympanitic: becomes emaciated.

Pathology

The Gut may become contracted by thickening; by a septum of organised plasma: Ulceration may penetrate to the Peritoneal coat.

Prognosis: depends on the Symptoms: death is ushered by involuntary evacuations: white aphthous incrustations of the tongue and mouth: subultus tendinum: delirium.

56/ Pathology: The Mucus coat is softened; hardened: redened: marbled: ulcerated: a lardaceous deposit in complaints of long standing.

In warm Countries, Dysentery is not idiopathic, but depends upon hepatic lesions.

It is a disease of the Mucus coat, either a simple inflam. of Mucus: or solitary glands: Ulceration of the glands of Peyer etc.

Treatment: The Nervous system may be so predominant as to require opiates: Many esteem cathartics throughout the disease: others, only at the commencement to evacuate the *Wirma* via Others Opium: others astringents:

Spordic Dysentery is easy to cure: Epidemic is more difficult.

The majority of authors are in favor of depletion when indicated (not in malarious & adynamic). Inject cool water in the Colon, this absorbs gases washes out offensive matter, and allays capillary engorgement.

Cathartics; to be used when they relieve: Opium at night, after a cathartic during the day, acts

frequently like a charm: Oil and Calomel are 157
usually prepared as cathartics: Calomel followed
by Castor oil: Potass. bitart is recommended
in great Serous discharges. Purge and give Seven P.
Emetics, have had their advocates, but they are
used now in bilious, malanic Dysentery:

Specac is alone made use of in small doses. +
Opium. [Specac. + Ext. Gentian + Pill. Hydrag]
Jame's Powder + Opium = Treat. of English Mil. Surg.
Opium is the great remedy in decided doses:

Sudorific treat. the patient must retain the
horizontal position to prevent checking the sweat.

[Calomel, for a vitiated condition of secretion: Specac.
to determine to the skin: Opium for the pain, is
the universal formula of American Doctors:

[Cal. gr ʒss + Specac. gr ʒj - ʒiv + Opio gr j - ʒiv] or Cal. + Ip. + Opia gr j

Senesmus, = abortive desire to defecate; depending
upon an inflammation of the rectum. Use a sup-
pository of Opium gr ʒiv - ʒj with lard: Animal oils
as butter, lard are excellent injections: also
Nit. Argenti gr x - xxx to the ζ Aqua thrown
up the Rectum: P. Plumbi acet.: Sassafras:

57] Give [Zinci Sulph \mathcal{R} Zi + Alum. et Potass. Sulph Zi +
Aguae \mathcal{O}] a table Spoonful every hour:

Cretaceous Julips: Lime water for Acid secretions:

Flannel band around the stomach:

Farinaceous & fluid diet, as 1 part Boiled milk
+ 2 parts of a Solution of \mathcal{G} . Acaciae, \mathcal{G} . Tragacanth.

Chronic Dysentery: Recumbency is of the last importance

Arsenical prep: Potass. iodidum: Mass. Hydrarg. \mathcal{gr} .
 \mathcal{gr} \mathcal{ij} every other night:

Acute Dysentery: requires cups and leeches:

Miasmatic Dysentery: After a purge, give 1- \mathcal{ij}

Large doses of Quina Sulph: Chalybeates of an

Astringent character for Anaemic conditions:

Constipation:

Def = An Unnatural rareness of Alvine evacuations
with indurated feces. dependent upon

1^o Obstructions in the secretions

2^o Mechanical Obstructions as defective mus-
cular action: contraction of gut: worms: intus-

susception: Gonoid uteris: tumors: truss: hernia:

Consequences = Gastric distress: dyspepsia Etc:

Symptoms = Pain in the Leg: along the spine: Prolapsus

ani: Accumulation of faeces in Colon and Rectum: 58
Percussion is tympanitic, when the bowels are flatulent:

dull when filled with faeces.

Treatment = 1st of defect of aqueous secretions, give
ripe fruits at night, and early in the morning:

bran bread: mush: reply to calls of nature:

Injections of warm; cold water: Soap + water:

teaspoonful of salt in Aquae Ovi: Magnesia:

Mitchell's Aperient Pill =
Pulv. Aloes gr̄ij
" Rhei gr̄ij
Hyd. chl. mit. gr̄i/16
ant et P. tact. gr̄i/16

2^d For Mucus affections, give Aloes, Rheum: Colocynth

[Rheum + Magnes + Zingib] [Rhei gr̄iij + Aloes gr̄j + S. Fem gr̄ij

Morrison's Pill = Gambogiae gr̄iij + Potass. bitart. gr̄x:

3^d For want of tone, give [Sulphur + Carbo Ani-
malis + Potass. bitart] Ext. Paraxaci

4th To create Peristaltic action: the want of which
is shown by natural feces at long intervals:

Electricity running up the spine, the positive
pole below, the negative above: Stimulate the
spine by dry frictions: cathartics with Strychnia:

5th For low inflammatory reflex constipation.

give Rheim Tigli: Elyterium:

6th For Spasmodic Constip: use enemas of Opium

"Colica"

Def. = Pain with obstinate Constipation.

(a) Wind or Flatulent Colic, is the most common: the abdomen is tumid, tympanitic: great pain: constipation without acute inflammation.

Cause = In infancy from overdoes of food: Dyspepsia: Hypertical and epileptic from swallowing wind in fits.

(b) Bilious Colic: Constipation: yellowness of eyes: hepatic derangement: pain in renal regions.

(c) Metallic Colic (Lead): Workers in lead, brass, copper are affected: In lead colic there is constipation; in Copper Colic Diarrhoea of copper-colored feces, though no copper is detected in them by tests. In Lead Colic, there is pain: Gums blue.

General Treatment. Relieve the constipation by ℞. Ricini: Hepatic by Calomel: Pain, by enema of Starch + Laudanum. For Bilious, which is malarial give Juniae Sulph: For Lead give.

Hepatitis.

60

Acute

This is a rare disease in this country, but common in India:

Diagnosis: Pains in Shoulder, and Hypochondriac regions:

If the convex side of the liver is affected he will lie on his left side: If the concavity, he lies on his right side: If entirely affected, upon his back:

The stomach sympathizes but little with the convex inflammation, but much more in concave lesion.

Constipation: Urine scanty and high colored:

Skin dry: Skin and eyes become yellow. If

after a duration of the disease, he complains of rigors, and night sweats, an abscess is forming:

Adhesions may take place and the matter evacuates externally, by lungs, intestines etc.

Treat: Bleed, or cup: blister, and dress with Mercurial ointments: Mercurials: Emetics: Extract

Feraximum to assist the Calomel: Antimonial (see)

Frequently the ductus communis becomes clogged by a viscid mucus, which is to be dislodged

61) by Emetics :

Peritonitis is a frequent complication from contiguity.

Chronic Hepatitis.

A sense of weight in renal regions: Pains on
pressure: itching of the skin: Herpetic eruptions:
Yellow tint to the eye, and skin:

Pathology: The Liver is more hard, friable, discolored:

Treat. Iodide of Mercury with Ext. Hyoscyamus in
very small doses: Mercurial ointment to dress
the blisters: Nitro Muriatic Acid applied exter-
nally ℞j-üj in Aquae Cong. j: Seton: Mosses:
Tartar Emetic Tinct. ℞j to the ℞j: Ext. Taraxaci:
When the Liver is enlarged, give Potass. iodid.

Diseases of the Respiratory organs.

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Mucous membrane = is analogous to the skin; is covered with Epithelium, analogous to the cuticle:

The basis of the mucous membrane is the serous element of cellular tissue, whose glands do not secrete serum: Covered with mucous follicles.

(a) Swollen tongue: has fissures: red little lumps; which burst into ulcers, then apply Nit. argenti: Slippery elm tea; Quined seed; Glycerin: Borax + Mel aq: used afterwards to obviate acridity of matter.

(b) Tonsillitis: Gargles [Sage tea + Mel + Alum and Borax] In bad cases, throw in Pulv. Carb. dig: Chlorinated Soda: If Glandular give Mercurials; alteratives. If the infl. is of the serous element give Astringents. Scarify the tonsils; Stop the hemorrh. by pressure. Ulcers are apt to remain

(c) Cancerum Oris: 1st Malignant. 2^d Phagedenic 3^d Sphaeloid: Sulph. Cupri gr LX to Zi Aquae: Dark and airtight for a time: Is frequently the result of Mercury: Sloughing of the cheeks found usually in hospitals: Mineral acids: If Syphilitic give Black wash: Blue pint: Yellow wash:

63 Larynx = Epithelium: Mucus: and Submucous membranes; the latter is very loose and liable to effusions. The Epiglottidean Arterio- fold is frequently swollen.

* Inflammation of the lining Memb. 1. may be only in the serous element, with only serous discharge. 2nd It attacks the glands, producing a tough, viscid mucus. 3rd May be a simple erythematous inflam. 4th Most commonly both serous element and glands are attacked simultaneously, making a factitious membrane, of an albuminous structure, looking organised. Erysipelatous inflam. dips into submucous tissue. Dysphentic inflam. in which casts of mucus are thrown out, or croupal exudation.

4. Oedema Glottis = Erythematous inflam. dipping down to submucous tissue, swelling the Glottis and Arytenoid fold.

* Mucus lining of the Respiratory Organs, liable to Infl. Cong
1. 5th Simple Erythematous inflam. slightly red, terminating in Resolution, as in Catarrh. 2nd Simple Erythemat. inflam. continuing to the submucous tissue, or areolar, with effusion of blood, serum, pus. 3rd Plastic or Dysphentic causing formation of Myogelium or false membrane. 4th Oedema of submucous tissue, filling up the glottis by effusion in the folds of the Aryteno Epiglottidean memb.

Percussion and Auscultation

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Examined by pressure; taxis; measurement; motions in breathing. When the intercostal spaces are pressed in, during inhalation, it indicates an interference in the passage of the air through the thorax, trachea. When these spaces bulge out, it indicates water or air within. Percussion either with the palm or tips of the fingers. Solid organs deaden the sound: In water of the chest the percussion during the upright posture is dull; clear in the recumbent posture.

Auscultatory sounds - those arising from the passage of air gas, fluids in the thorax. Bronchial sounds are heard at the base of the lung, and at the posterior part.

Vesicular murmur - small, low sound on the anterior and lateral portion of lungs; heard best in the axilla, subscapular, and subclavicular regions.

Is loudest in children, therefore called Puerile Resp.

Expiratory murmur is shorter and lower than Inspiratory.

Vesicular murmur is frequently extinguished by the Bronchial, as in water of the chest.

Amphonic, is like a bottle sound, arising from a cavity in the chest: Cavernous is hollow.

65] All sounds caused by induration of cells, mucus or water in the substance, or pressing upon, and called Rale, Rattle, Ronchus.

When owing to a fluid, called Mucus, or Humid R.
When dry, owing to pressure of Mucus, called Sonorous
Sibilant Ronchus = Hissing

Mucus or Humid Ronchus, sounds like the Scath Rattle,
called Crepitant when mucus is in the small tubes,
Subcrepitant, in the larger tubes.

Metallic Tinkling, like the sound arising from striking one hand placed over the ear, by the other met with in Pneumothorax.

Crepitant, like the rustling of hairs, caused by the fluids in the smallest tubes, and is the smallest kind of Humid Ronchus, found in Pneumonia.

Subcrepitant is the next smallest kind of Humid R.

{ Humid or Mucus	{ Dry Ronchus
{ Sub-Crepitant	{ Sonorous
{ Crepitant Ronchus	{ Sibilant

Laryngitis:

1 acute: 2 chronic: 3 submucous varieties

Acute: due to abuse of voice; inhalation of hot or noxious vapors.

Pathology: epiglottis is red, thick, erect. The

membrane of the Larynx is red, covered with a mu. 66
riform mucus in children: vocal cords involved.

Symptoms: Chilliness with fever: skin moist or dry:
dryness in fauces and larynx: Respiration is broken;
hurried, hoarse: dry cough: aphonia: pain may be
intense: tongue furred: Stomach disordered: nausea:
Larynx red, thickened, dry: painful hawking.

Complications: with Coryza: Tonsillitis (sore throat): Infl.
of trachea, Bronchi: Expectoration may be serous and
facile: Tendency in old people to excessive mucosity
hence the danger of effusion: dangerous in children from
their inability to expectorate.

Terminations: 1. Simple erythematous terminates in Resolution.

2^d Effusion of false membrane ⁱⁿ $\frac{1}{4}$ Croup: Easy Expiration
difficult inspiration: natural exudation increased.

3^d Oedema with effusion in the Aryteno Epiglottidean fold.

Treatment: of Adults: Leeches: depletion, but dangerous
in persons of 60-80 years, as it promotes a tendency to
secretion: Diet: warm or cold applications: Sinapisms
Plasters: Antimonial: nauseant and emetics.

[Part. Ant. gr. ij + Potass. carb. gr. xij + aromatic in divided
doses of solution] Zinc Sulph. [Cal + Op. + Pul. James]

Alkaline Carbonates, as Liquor Potassae increase the

67 | Serous, and diminish mucous excretions:

When there is danger from suffocation from spasm of the *rima Glottis*, give anodyne Opriates, combined with Tart. Ant. or Ipecac; Dover's Powder. Inhalation strong hock tea.

For Aphonia acute or chronic, inhale chlorine gas very weak, by Acid and water on Chlorid. Lime. Sedative doses of Hyd. chlorid. mite.

Iodide of Potass. to render mucus less viscid.

Treat. of simple Erythm. infl. of old people, dipping in the submucous tissue, and enlarging the Aryt. Epiglott. fold causing difficulty in respiration and croupal crowing.

This fold hangs like a wet rag over the *rima glottis*, pushed up like a valve in expiration, but closing the orifice in respiration: comes on frequently without fever: patient is cold, circulation languid: lies at angle 45° :

depress the tongue and you will find the uvula & palata swollen, epiglottis red. Give Emetics; expect.

Toraks: may have to introduce an instrument: incise the folds: If there is difficulty in bleeding from the languor of the circulation, stimulate first, then bleed.

Mercurials to salivate: grease even the larynx with blue ointment: Bath of Nitrate of Potassa to red- den the blood, by its oxygen.

In Oedema, resort to an operation.

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Chronic Laryngitis: voice hoarse - dry-cough: pain in expectoration - hectic fever - paleness - wasting away.

Syphilitic: usually with ulceration of the tonsils.

Phthisical or Serp. by Fowler's Solution qtt. iij t. d. on an empty stomach. Change of air: seton at the insertion of the Aethoid: Calomel gr $\frac{1}{6}$ several times a day. Pot. Id.

Croup

Effusion of Plasma from inflam. of the mucous membrane causing pyogenic membrane in the larynx and Trachea.

1st. Nervous: 2nd. Simple Erythematous: 3rd. Erythematous extending to Submucous tissue: 4th. Diphtheritic Inflam.

Sympt. dryness: malaise: change of voice; sounding as if drawn inwards - cough hoarse: starts up: face flushed: child becomes still, somnolent: coughs up mucus tinged with blood, or mucus shreds. The symptoms of Suffocation =

Face swollen: eyes open: spasmodic struggles of the epiglottis, no recovery at this stage, even by an operation, as the whole system is drunched with black blood.

The tumefaction of the membrane, without effusion of false membrane may kill - dash cold water in face:

give fresh air: sinapisms: inhale vapor of hot water.

Treatment, In the Nervous or Laryngismus Stridulus

69] or "Asthma Infantum", throw water in the face:
blow in it: Emetics: asafoetida: mild tonics with
mild antispasmodics. As soon as Croupal Sympt.
are set in, Give mild aperients - diet: Emetics:
warm mustard bath until the skin is red: Hives Symp.
Sulphate Alumina et Potass. ℥j in cup of water:
Potass. bitart + Ant. tart.

ward off threatened attacks by Calomel: Apply
snuff with Lard to the neck: Inject the milk of
Asafoet.: camphor. If the Croup still progresses
bleed in the Jugular: Sprinkle Calomel about fauces:
Mustard to the neck and throat: Throw in Solutions
of vit. Arg. to loosen the membranes.

Bronchitis

Def. = Inflamm. of air passages below the trachea: com-
prising the bronchial tubes: the finest tubes are
rarely affected, much less the air cells.

& Varieties. 1. Acute. 2. Chronic

1. Acute. Causes = Fumes of vapors: changes in air:
blow on the chest: hot liquids going into the trachea:
Sympt.: hurried respiration, with sense of Suffocation:
pain in chest: heat: dry or moist skin: dry,
sonorous, Sibilant Roushus: muscular soreness

Constipation: Sputa is round, glairy towards the end. 190

Auscultation: Dry Roushus: Sonorous, Sibilant, coryng:

Crepitation when the vesicular structure is affected.

many rous prevail in Bronchitis of Typhoid F.

Told from Pneumonia, because that sound at the commencement of the disease is fine Crepitation:

Sputa, at first is a thin, serous discharge, becoming round, and glairy: When the secretion increases there is the humid Rale. The morning expectoration is the first indication of convalescence.

Bronchitis in children is masked by cerebral affections, hence auscultate for the humid Rale.

Terminates: In Pneumonia: Hectic Fever: Tuberculosis.

Treatment: Antiphlogistic, by Venesection, Emetics Bicarb. Potass. to render the mucus more thin.

Purges usually do harm: Calomel in large doses for children: Siniapisms: mustard baths:

Flax seed tea, Sassafras: Quined to allay the tickling of the fauces: Opium is next best to Emetics as there is nervous irritation of the bronchial muscles:

[Amphicarb. murias + Ipecac. + Potass. bicarb.]

[Yolk of Egg + Opium + Tart. Em + liquorice]. The Carbonate

71 | of the alkalis are excellent for Catarrh. Sodae bicarb. may be added to the above mixtures: Tart. Ant. + Ant. Vinum + Brandy, when there are Symptoms of asphyxia from mucus.

do not apply mustard plasters until the emetics act as they retard their influence.

When the symptoms are increasing in spite of the above remedies, give Ether, which blackens the blood, and thus becomes antiphlogistic.

Pertussis (Whooping Cough):

Def. A Pulmonary Contagious Catarrh, distinguished by Spasmodic Coughs.

1st Stage is Febrile. 2^d Nervous. 3^d Habitual Cough

Sympt. 1. Great irritability: slight cough, saltish expectoration: red face, watery eyes, like Measles.

This lasts for several days; then there is a fever:

The 1st Stage lasts about 3 weeks, then commences

The Second Stage: Pulse high: cerebral symptoms: Spasmodic coughs, clutches hold of something during an attack. Epistaxis: involuntary evacuations: convulsions: The Sputa is glairy mucus tinged with blood, and accompanied sometimes with vomiting: This stage lasts from 4-5 weeks.

The great danger of the 2nd Stage, lies in the Secre- [72]
tion of Mucus.

Mitchell, considers the disease a Nervo- Bronchitis
Treat. Calomel in gr. viij in febrile Stage, to dimin-
ish the fibrin of the blood: Keep bowels open with
Salvia Cathartica: Allay Nervous symptoms by Tart.
Emetic, also for mucus: Alkaliis Carbonatis for
acidity: Child's head should always be sup-
ported during the coughing paroxysm:

In Nervous stages: give Cicuta maculata: Rosafol-
spread on butter: Belladonna gr. $\frac{1}{10}$ - $\frac{1}{8}$: Acid. Hydro-
cyanic gtt. $\frac{1}{4}$ the best: Linct. Lobeliai inflat. gtt. x-
xx: Carb. Ammoniac + Camphor as a tonic when
the child is too weak to cough: Iron + Opium: Zinci Sulph
gr. $\frac{1}{2}$ - i: Mitchell always gives Sodae bicarb. and
emetics: Strangury a good sign: Vaccination
modifies the disease: Rubefacients on the Spine
particularly Ol. Siccini + Ol. Olivae is good:
Galbanum or Hemlock Plasters at the decline of the
disease: Give tonics during convalescence as
Arenie: Cold Bath: Quin. Sulph: Gestation:
Avoid all exposure to cold, as the previous sympt.
may all return.

"Asthma"

Def. "A paroxysmal dyspnoea, occurring usually at night, intermittent in Character & without Fever."

Causes = 1st Organs of Respiration, as Emphysema:

2^d Organs of Circulation, as valvular disturbance

3^d Organs of Innervation, as congestion of the Pneumo-gastric neurolema. The dyspnoea is supposed to arise from spasmodic contraction of bronchial fibres.

Sympt. Inspiration difficult: Expiration easy: hence the inspiratory murmur is feeble: Expiratory murmur is loud:

Treatment of Idiopathic: Two divisions: 1st that which affects the paroxysm: 2^d that of the intermal:

1st To relieve Bronchial irritation: Bleed: Nauseants:

Revellents: Opium: Cups between the interscapular spaces: Bleed in the foot to give a local determination:

Chloroform internally and externally: foot baths:

Blisters: All abstraction of blood after the first attack is injurious; then use dry cupping:

The Emetics used = lobelia inflata: Acetum Scillae

Coxe's Hiv Syrup: Paragoric: Strong Infusions

of Burned Coffee fresh: ℥j-℥i of Dracontium:

Hydrocyanic Acid gtt. i-ii is the most speedy

and effectual especially for cardiac lesions 174
Stramonium: Inhalation of Vapors, as of Stramonium

root; Iodine; Coffee Seeds; Tabacum; Gum Benzoic
Brown paper dept. in a strong solution of Saltpetre:

[Sod. Bicarb \mathcal{Zj} + Symp. Scillae \mathcal{Zij} + G. Acac. \mathcal{Zj} + Aquas \mathcal{Zij}]

Mitchell prefers to smoke a sieve chamber with burnt
Coffee rather than sugar: Coffee + Benzoic acid

smoked in a pipe: ditto Stramonium seeds: Inhalation
of Iodine grv - Aquas of \mathcal{ss} : Rub the Spine with
O. Succini + O. Terebinth + Arsenigo]

Great during Interval: Study the Causes: Preparations
of Arsenic: Patient to be propped in bed high up:

[Ext. Cicuta \mathcal{grij} + Sodae bicarb. \mathcal{grij} + O. Anise $\mathcal{gtt. i}$ to be
taken at bed time.

Hay Asthma.

depends on the Roses in Spring; Hay in Autumn:
Commences with pain in the frontal region, and nose:

dry sneezes: fever: If the patient blows his nose
into white Handkerchief, ^{then} washed, globules of blood will
be collected. The period of attack is generally known
before hand.

Treatment: Let the disease generally alone: but some-

75] times bleed, then the Red globules will fall down in a curious mass. Mitchell considers the cold bath a specific.

The Urine and Perspiration are loaded with a red sediment of red globules: Opium + Diunia must be given before the expected narrowsm.

Sometimes depends upon irritation of the Schneiderian membrane, hence grease is, and apply the Ung. Hydrarg. Oxidi rubri.

Pneumonia.

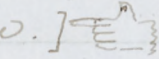
Def. An Inflamm. that affects not only the Bronchial passages, but the paracnemystous tissue and the minutest air vesicles.

Pathology. shows 3 Stages. 1st Congestive with Inflamm. 2nd Lymphous deposit, called Red hepatization. 3rd Suppurative or Purulent.

1st or Congestive: the lungs are inflamed, red, livid; more friable from softening; filled with blood, which oozes out of the cut bronchi

2nd or Lymphous deposit: Blood is changed to pus: lung becomes harder, more solidified: is then called hepatized: air driven out, does not crepitate when pressed, sinks in water: Granular

appearance of the cut surfaces: takes the impus 196
of the ribs. [The pus in cavities is very rare, and is
the result of morbid suppuration after death, as the
patient usually dies before cavities are formed.

Moreover the pus is free, diffusing itself all over the
cellular tissue.]  Belongs to the 3rd Stage *

2nd Stage Continued. Deposits of Plasma in the Cellular
tissue, and capillary bronchi: Air and blood do not
ooze out upon being cut: Has a granular appear-
ance on being cut, from deposits in the vesicles:

Spleniciform appearance is not so marked as
the Red Hepatization, and is found in the Sec-
ondary Pneumonia of Typhoid Fever.

3rd Stage or Suppurative: Blood and lymph
are replaced by yellow, gray pus: The lung
is hard, friable: no crepitus. Vide, above *:

Splenicification = The softening of the lung like the Spleen
is nothing more than Red Hepatization of less intensity:

Gangrene: Fœtid breath: portions of lung thrown up:
cavities formed

"Primitive or Frank Pneumonia" = Idiopathic.

"Secondary or Consecutive" = dependant upon some
other disease, as Typhoid Fever. in low re-

77] Cumbent fevers, from Hypostatic congestion, hence the patient should be auscultated; moved from side to side, especially children.

Pleuro-Pneumonia: so called when the Pleura involved.

The right lung is affected twice as often as the left, and its base more often attacked than the apex.

Symptoms are 1st. Constitutional: 2^d. Physical

1st Stage (a) Constitutional Symp^t. = Pain in mammary regions; deeply seated, and is equal during Inspiration, and expiration: Hard pressure, and cough increase the pain: Expectoration of viscid sputum; first ^{dry cough, then} mucus, then tinged faintly with blood, like rust of Iron, and hence called "Rusty Expectoration": Pulse is soft, full, almost natural, but rapid: The respiration is hurried, and increases with the pulse: Circumscribed flush of the face, darker than hectic. Anorexia: White tongue: scanty Urine: Headache. The Blood is oily with a buff coat, the fibrinous element being higher than any other disease, even Rheumatism, the amount of Fibrin being increased from .93 as high as .99 percent. In Secondary Pneumonia you must rely upon auscultation

as there may be no symptoms, not even pain. 78

(b) Physical Signs: The first is Crepitant Ronchus small crackling sound like an effervescence; a characteristic belonging only to Pneumonia and Capillary Bronchitis. The next thing you hear, is the Bronchial Respiration from roughness of the air tubes: Bronchophony: Puerile respiration; slight dullness upon Percussion.

The Signs of Resolution of 1st Stage = Ease of pain and Quick Respiration: Sputa less rusty: Subcrep- itant Ronchus: most commonly the disease lasts from 3 days to 2 weeks, terminating into the 2nd Stage: Dullness upon Percussion: Crepitant Ronchus disappears: Bronchial Respiration from the large bronchi: Bronchophony when the lung is solidified, at first on expiration.

Crat de Tafetta, or like tearing of silk, indicates the Pneumonia is superficial.

3rd or Suppurative Stage: Pulse and Respiration are more hurried: face sallow and pinched: Pus-globules in the Sputa, which is foetid: eyes staring skin cold and moist: intermittent respiration:

79 | Patient now cannot expectorate, hence there is the Mucus Rattle, and he dies.

Prognosis: depends upon the extent of the disease; the part involved; the complications. $\frac{3}{4}$ of those, who have one whole lung attacked, die. The upper lobar inflaw. is more fatal, because the lung there is thickest and freest: The middle, and base of the lung are more favorable. Recovery from the third stage is very rare. If there are spontaneous incipitations in the , or by heat, or Nitric acid, the prognosis is favorable.

Secondary Pneumonia, is very dangerous, as Typhoid, Cerebral, Intermittent, Remittent, Billious Pneumon. Fatal in Measles, Scarlatina, Small Pox.

Treatment (a) of Primitive Pneumonia in 1st Stage:

3 Indications, 1st diminish Inflamm. 2nd diminish the force of the heart: 3rd diminish the fibrinous element.

Venesection, to be repeated until relief appears; but it may create Syncope; rapid pulse; nervousness.

Cups and leeches: Change of Position: leeches are best when a mucus membrane is attacked, not for Peritonitis:

Part. Emetic: Italians give it with Potass. bitart to prevent gastric irritation:

Blisters: if the above remedies fail; although contrary 180
to the opinion of many: they sometimes do good in this
congestive stage:

Calomel gr vi + Tart. Emet. grj + Nitrate Potass. ℥i, divided
in 12 powders: this was Rush's receipt: one every 2 ho.

Digitalis has been given to control the heart's action.

Diaphoretics when the skin is dry: if too moist, Alumina
+ Opium: For scanty Urine, Acidities: If Costive,
laxatives. Most Cases go on to the.

(b) Second Stage: 1. You must diminish fibrinous Element
2^d. Promote absorption: For first indication, Give

Calomel with Tart. Emetic as Nitrous powders:

Carbonates of Potass. Soda, Ammonia:

Promote Absorption, by Diaphoretics; blisters; An-
cups: Rubefacients: Plumb. Acet.: Digitalis:

Blisters to nuchae & extremities in Cerebral disturbance

(c) Treat. of 3^d Stage: Face is now pale; skin sallow:

free from distress: respiration hurried; glassy eye:

cold feet: clammy sweat on brow: he dies without

distress: You must give wine whey: hot brandy:

tonics: stimulents: Quiniae Sulph.: Ammonia:

blisters: Expectorants for expelling the mucus, or

pus: Opium + Quiniae Sulph.

81] Sometimes Gangrene intervenes: foetid breath:
mices of lung thrown up: cavities left: Louis
says it does not always depend upon inflamm.
Give Tonics: stimulants: Counterirritants: Chlorine:
Secondary Pneumonia: In Typhoid fever it is much
masked: but hurried respiration is the sign:
You must bleed, and stimulate at the same time:
In Hepatic Pneumonia you must first relieve the
Liver to make it "Frank": give Iodide of Potass:
internally and externally: Calomel: Blisters:
cups over the spot: expectorants: In Mala-
rian cases resort to Sulph. Quinia.

Pleuritis

Def. = Inflammation of the Pleura:

Diagnosis = is difficult from complication with Pneu-
monia: a very frequent disease, as there are few
chests without adhesions: If Costal Pleura are at-
tacked, a spot exactly opposite on the Pulmonary
Pleura, will be diseased, from either mechanical
or exudation irritation: The Name depends on the
situation as Costal; Pulmonary; Mediastinal; Diaph-
ragmatic: Pleuritis occurs commonly on the left side.
Causes depend on blow, sprain, air Etc.

Pathology: The serous, or Subserous tissue is inflamed. Effusion of Serum; pus; blood; false membrane: coagulated lymph: adhesions of the two Pleura, which are lengthened by effusion on the lung.

Sympt: Introduced by chilliness: lancinating pain in side, increased by movement, Pressure, and Respiration: hence Respiration is hurried, by voluntarily so; in Pneumonia necessarily hurried:

Dry cough: Pulse is harder and smaller in proportion to the pain: tongue white, but red in the centre: Skin usually moist. Lies on the side that is not affected: Called "Dry Pleurisy" when there is no effusion.

Physical signs: The motion of the chest is voluntarily different on the affected side: When the diaphragm is affected, he breathes by his ribs.

At the commencement, and close of the disease and only in this disease, Agophony or Vocal-fremitus is heard: The Respiratory Murmur will be weakest on that side, because he breathes less with that lung: Before Effusion takes place, "Friction Sounds" are heard, from rubbing of the roughened Pleura; this is also heard in Peri-

83] Carditis, but diagnosed by requesting the patient to hold his breath.

As the serum begins to increase; Bronchial Respiration is heard because 1st Water is a good conductor. 2^d The Vesicular Murmur ceases from lateral pressure of the fluid, occluding the small air-tubes. Dullness on percussion also marks an effusion, this dullness shifts its position, whenever the patient moves, causing the fluid to gravitate elsewhere. The dullness may become fixed from broad adhesions. The intercostal spaces bulge out. Place the hand on the chest, and when the patient speaks, a thrill, vocal fremitus or purring will be felt. All the murmurs on the sound side will be exaggerated.

Complications: Pain is a sympathetic expression, as it is almost always removed by cups. Pleurisy of the right diaphragm involves Hepatic Complication: On the left, Cardiac: Empyema is complicated with hectic fever. Bilious Pneumonia is frequent in Pleurisy, with constipation or looseness of the bowels.

Treatments: The presence of pus in the chest is

indicated by rigors: Delirium: Pyogenic fever: 184
cachectic appearance of the skin: Phthisical Symph.
When the water begins to be absorbed, there is an
abatement of symptoms; the skin becomes moist; and
the urine better looking. After this disease is cured
the lung is collapsed, and cannot be expanded
to its former size; hence intercostal spaces sink in.

Treatment: Sporadic disease: Pain removed by a
sinapium; cupping which almost always removes
it: Antimonials: Saline Cathartics: Mercurials for
the effusion, but not proper in Emphysema: Vene-
section, which is very excellent: Chloroform externally
which drives the blood to capillaries, and thus dim-
inishes the sensibility: Blisters, only after depletion:
To correct the hardness of the pulse, and absorb
any effusion give Digitalis, which is a diuretic
only when there are effusions in cavities.

Tinct. digitalis gtt. v every two hours until 12
doses have been taken, then wait one day.

[Ext. digital. + Calomel āā gr 1/4 + Scillae gr. ij-iiij] [Zedie:
or [Ext. dig. + Potass. bitart] [Ext. dig. + Sover's Powder] to
carry it off by the skin: Combine the extract with
a Hydragogue Cathartic; Saline if he is yet strong:

85] Elaterium; Gamboge; Jalap: Potass. bitart if he is weak. Ferri tartros. a very good diuretic.

For Hydrothorax: If pulse is hard, topical bleeding: in general disorder give Hydrarg. as [Cal + Digit + Scilla]

The water is to be removed 1st/₂ By Emesis 2nd/₄ Kidneys 3rd/₂ Liquid evacuations 4th/₂. Profuse Diaphoresis.

Applications of Ol. Tiglii or Tart. Ant. Unguent.

Seaton or issue over seat of disease in Emphysema:

For effusions of Serum, give Emetics: Green Sulphat. of Iron: Digitalis particularly good for children.

if after all these remedies, there is pain and hurried breathing give Piist. Digitalis.

Paracentesis, favorable especially in serous effusion, to be performed before the lung has lost its power of contracting, and expanding.

On Recovery: for debility give diaphoretic or cathartic Stimulants: tonics: Whiskey + wine + Calomel.

Perpetual blisters for serosity: after convalescence, guard against a relapse, because from adhesions, the second attack will be dangerous. Turpentine is good for adhesions, stimulating their absorption.

For Hectic Fever, give Stimulants: chalybeats: Bark:

Quinine Sulph: Potassae Iodidum.

Phthisis.

186.

Def. derived from Greek, signifying Consumption or eating away of the lungs.

As it attacks both the mucus and cellular tissue of the lungs, it is an intermediate link to Pneumonia.

3 Stages: 1st of Deposite, 2nd of Softening of lungs, or Tubercular 3rd of Absorption, or Cavernous Period.

1st The Commencement of Tubercles = "Grey Granulations," called "Millian Tubercles" in the centre of which appear little opaque yellowish points, which enlarge, and absorb the Grey mucus, forming the

2nd "Crude Tubercles" These are from the size of a pea to that of an egg: the bloodvessels around increase in size and number. They are of the consistency of soft cheese, and upon analysis contain .98 percent of Animal matter .02 of Carbonate of lime, and a trace of salt. They sometimes are absorbed, but usually form the

3rd Stage, or "Cavernous": by softening, and protruding on the larger bronchi, and are expectorated, with mucus. The softening commences in the centre of the tubercle, extending to the periph-

87/ery. There is no theory about the tubercles, which does not conflict with the softening at the center. The cavities thus formed, for a few weeks are spheroidal, but become irregular from the lateral pressure of new tubercles, which bursting into the cavity increase the area.

Sputa is saltish in taste, greenish in appearance, and inflames the bronchi leading from the cavities by its irritating nature.

Seat of Disease or Tubercles: The air passages according to some: Intralobular, and Interventricular tissue according to others. Some that it is Phlebitis of Venous radicles. They are deposited by the blood, in the liver, brain, lungs, and Anus. The tubercles obliterate the two orders of blood-vessels around the tubercles, and form a network of vessels in their place, which carry black blood to the arterial circulation, because the bronchi being destroyed, the blood cannot be aerated; this is the cause of Emaciation. The left lung is more commonly attacked and at the posterior part of the base. It is not a disease of a part, but constitutional,

with a tendency to deposit tubercles in loose texture, and is caused by impoverishment of the blood. | 88

Consumption: is hereditary, and contagious only to the bed fellow: It is a Specific Virus; a distinct entity.

Symptoms: First, frequent colds, slight catarrh, with a tendency to febrile symptoms. The cold prevails off and on, throughout a season; face flushed: the physician sent for at this time, and usually finds solidification already commenced.

When the patient takes a steady inspiration, there are heard several inspirations, or sighings in the lung; this is the very first indication of Tuberculosis: Afterwards rough inspiration; dullness on percussion. The disappearance of vesicular murmur, and the good conduction of sound through the solidified lung, cause bronchial respiration to be very great.

Bronchophony, and Pectoriloquy is also marked. Amphoric Respiration is greatest, when a communication occurs between the Bronchi & Pleura.

Constitutional Sympt. Hard dry cough: Little pellets are thrown up of an offensive smell. (This may not be from incipient Tubercles, but from the

89 | tonsils, which frequently cause foetid breath).
Flush in face: Cold hands and feet: Distress
after dinner; more than usual animation.
Then expectoration, followed by the pyrogenic con-
dition in which pus is thrown up; accompanied by
 hectic fever, with two chills per diem: Colligative
sweats of a sour odor: Vessels becoming unsupported
burst, and hemorrhage ensues: This hemorrhage
may not be Tuberculous but vicarious as in
suppression of menses, piles, ulcers etc. Hence
more alarming in males than females.

Treatment. Iron: as Rubigo, or Carbamate is the
first medicine; more as a preventative. There
is a tickling sensation in fauces, from the tuber-
cles pressing on the bronchi: Opium must now be
given, which exerts a happy influence upon in-
cipient dry coughs. McMurris Elixir is the
best preparation of Opium: or the Senarcolising
Opium of Dr. Haro. Hyoscyamus: Ext. Lactucar.
Spider's web: Mitchel says Iodine at first pre-
sents a happy influence, but favors haemoptysis
hence he has given it up. Ammoniac phos.
eases the tickling. Iron is to be discontinued when

tuberculosis appears, as it is then injurious. 190

Plum. Morhuau: Mitchell believes in only 2 remedies
1st. Horseback exercise. 2nd. Arsenical preparations
during their use, diuretics are to be avoided, as they car-
ry it off without allowing their effect. Lig. Pot. arsenit.
gtt. iij t. d. until cutaneous itching; partial paral-
ysis, swelling of face, ankle, and eyelids, then continue
the Arsenic in minute doses.

Pl. Morhuau has a virtue on account only of its grease,
Mitchell says all his recoveries were in persons fond
of fat. A Frenchman advocates fractional doses of
Ung. Hydrarg. internally, but Mitchell considers
Mercury injurious. Hemorrhoids, and diseases about
the rectum are on no wise to be touched in a Tubercu-
lous diathesis.

Suppuration: there is an expectoration of purulent
matter: hectic fever marked by chilliness and
slight
fever in the forenoon: in afternoon more marked
chills, with fever of an increased pulse. Bright
red hectic flush: fever continues into the night
terminating in colligative sweats. Hectic
fever, is a fever of Irritation from sympathy with
the destruction of lungs, and from pus globules

91) found in the blood. Glandular swellings may also occur. For night sweats, and hectic fever give Opium but not with Arsenic as it destroys its efficacy: Acidum Nitric dil. gr. $\times \frac{1}{4}$ in. Aquae $\mathcal{O}j$: Quiniae Sulph. but this has a tendency to increase the coughing.

Ferrum, but Mitchell says, nothing kills a patient quicker in hectic fever than Iron. Exercise during the intervals of chills and fever. Mineral Tonics.

The symptoms most to be dreaded in Hectic Fever are 1st dysentery or diarrhoea: 2nd Colliquative sweats.

For sweats give Opii gr. $\frac{1}{2}$ - $\frac{1}{4}$ at bed time by itself.

Saturated solution of Alumina in Spirits to cover the body.

[Alumina gr. $\frac{1}{2}$ - $\frac{1}{4}$ + Opii gr. $\frac{1}{2}$] Mineral Acids: Argenti nitras: Dry friction.

Diarrhoea is to be treated like any other: Mineral astringents: Arg. nit: Hydrag. c. creta: Hopus Mixture:

Cold mucilaginous drinks: Tannin + Opium.

Do not give an opiate for cough until he has evacuated the foul matter. To avoid sweat, let him sleep in a vertical position with feet in a baird box: Milk boiled over a slow fire, stirred for 1-2 hours; or Arrow-root cooked for a long time, and excellent astringent remedies.

Typhoid:

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Def. = A disease of a particular lesion.

Pathology: discolored patches of Mium: enlargement of the mesenteric glands; of spleen: of Glands of Peyer: Ulceration of Pharynx, of Oesophagus: The Lesion is a hardening or softening of Mesenteric Glands, resulting in ulceration which sometimes penetrate all the intestinal coats: The Solitary glands of Stodenum the seat of the disease.

Diagnosis: Fever remarkable for its length; redness of tongue: tendency to slough in blisters: Pain in the head: lassitude: chill: fever: Pulse small, frequent, feeble: Headache usually leaving after the 1st week. Delirium about 3rd week: Epistaxis: Sordes of mouth, teeth, lips: Tinnitus Aurium: The chest attacked as if by congestive Catarrh. Tenderness in epigastrium: Diarrhoea: Skin dark: Stupid stare: Eruption about the 7th day: roseolar, Centiular, raised: but pressed away by the finger: Blood contains less fibrin: Water-blisters called sudamina.

Signs of dissolution = Blood from bowels, mouth & ears.

93] Picking bed-clothes: Hitching on the elbows.
Mortality: is great, being one to 3-6.

Treatment: (a) Correct the disordered state of the blood:
by Chloride Potass: solution of Chloride ^{noted} of Soda $\frac{aw}{ij}$
 $\mathcal{Z}j$ to Aquae $\mathcal{Z}r$ externally and internally:
Salts of Ammonia which increase the fibrin &
diminish the red globules: Nit. Arg. gr. $\frac{1}{4}$ in
a crumb of bread every 2 hr. until evidence of it is
found in the stools blackening them. Purge lightly
with $\frac{1}{2}$ Seidlitz powder:

For Pain in head, which usually ceases on the 7th
day, relieved by cold applications; a blister 4²
to nuchae: by emetics when they are not indica-
ted by gastric disturbance.

For Diarrhoea: Ipecac + Calomel + Opium: Opium +
Plumbi acetat: Potass. iodid: Alum gr $\frac{1}{2}$ - $\frac{ij}{ij}$ every
few hours: starch and Laud. injections: Chloroform
applied by a rag to the stomach.

Tympanitis: Inject Vinegar + cold water.

When the head is cold apply warmth: when the
face is pale, apply blister to temples or nuchae:
when very pale, and feeble put a trochar on

the scalp.

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When the skin is hot, cool it by Chlorine lotions:

Internal use of Potass. citras: Spts. Mindereri.

When Patient is nervous; faints on being raised in bed; pulse frequent, intermittent; strong at the wrist, but feeble at the heart; then give stimulants that increase the fibrin of blood, as Chlorine, Ammonia, small doses of Calomel: Before using these, give wine & whey 1 pt. wine to 2 of milk, boil the milk first, then add wine and boil again.

Bronchitis, relieved by blisters, cups, the blisters should always be placed as near the centre of circulation as possible, as they slough elsewhere.

Muscular weakness, by friction

.. Soreness, by Eupatorium perfoliatum, and Spts. Terbinthinae.

To prevent bed sores, place wool underneath depending parts: when sloughs occur cover them with linseed poultice.

When other tonics fail give Quin, Sulph.

For Bilious symptoms, give Calomel or Bolus mild. Gestation in a carriage.

Typhus.

Def. A malignant contagious disease of a low type.

Symptoms: are those of Typhoid but more marked: blood is darker than in Typhoid: course about 7-14 d.

Chill and stupor more marked: From 1st - 5th day

there is stupor; eyes red; difficulty in rising:

epistaxis: dullness in posterior of lungs: Constipation a marked characteristic: Crowded jails

in England and France produce Typhus.

Symptoms of putrescence in the blood: Not contagious, but personally infectious. Great heat of

skin: Pulse over 100: Secretions early perverted:

About 4th day Petichiae, or spots of a dark red color appear which do not disappear on pressure.

examine the back, and a mulberry dark colored rash is found, which disappears on

pressure. Odor of the skin is Ammoniacal.

Treatment. The pulse is hard at the commencement, therefore bleed 16-20 ℥s: cups or leeches to abdomen, when it is in trouble. Germans bleed in foot. The stomach is more disturbed than in Typhoid, give Emetics: purge daily with

Mure + Rheu + Aloes: Gamboge + Poteass. bitart.

Op. Ricini and other decided cathartics.

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The Rectum is filled with false feces, which are rid by enemata: Sereae. + Strychniae.

Skin is to be cooled by cold applications: internal

use of 1-4 ℥ of Neutral Mixture at a dose: Sweating is the crisis; Give diaphoretics: Dover's

Powder gr r - xx: Sage, Mint, Bone, set tea: if these fail lay him upon his back on the floor, and dash cold water all over him, wipe dry and put him to bed: Acetate of Ammonia a stimulant diaphoretic:

Apply Sinapians with impunity as there is no danger from sloughs: Chloroform to abdomen: discontinue stimulants, when the skin is dry and there is delirium: Boil dry pieces of wood: hot bricks under bed clothes to make a vapor bath. Inhalation of Ether for great prostration.

Carb. Ammoniac gr iij to x in Suleps:

Sometimes blisters to the nucha, will cut the disease short. For Subcultus tendinum give Assafoet: O. Valerian. For hicough give

(Acid. Sulph. dil gr r + Aquae ℥i) or (Moschus gr xxx in Aquae ℥i): Purgation to be kept up throughout the disease Magnes. Sulph ℥j + Tart. Ac. gr j in a glass of water.

97] Differences between Typhus et Typhoid.

- | <u>Typhoid:</u> | : | <u>Typhus.</u> |
|--|---|-------------------------------|
| 1. Noncontagious. | : | Personally Infectious. |
| 2. Endemic | : | Epidemic. (?) |
| 3. Long Continuance | : | Quick in Career. |
| 4. Fatality 1 in 3-6 | : | Fatality 1 in 6-12. |
| 5. More moderate. | : | More Intense. |
| 6. Diarrhoea | : | Constipation |
| 7. Sudamina | : | No Sudamina(?) |
| 8. Disease of Lesions | : | Has no Lesions. |
| 9. Attacks but once | : | Attacks frequently. |
| 10. Eruption 7 th day | : | Eruption 4 th day. |
| 11. Causes unknown | : | Bad ventilation. |
| 12. Lasts 3-6 weeks | : | Lasts 2-3 weeks. |
| 13. Affects Bronchi | : | Affects the Lungs. |
| 14. Blood loses fibrin | : | Fibrin Increased. |
| 15. Less fatal in youth | : | No difference. |
| 16. Barely Petichiae | : | Commonly has. |
| 17. They are not convertible, as Variol. into Small P. | | |
| 18. The Odor in Typhoid, when perspiring is acid: Musty when dry. In Typhus the odor is always Ammoniacal. | | |

P.

