

3512
CLINICAL OBSERVATIONS

ON THE USE OF

Quinquinia

IN MALARIOUS DISEASES.

Reports and Statistics

FROM WELL-KNOWN

HOSPITALS AND DISPENSARIES,

1880.





A CLINICAL STUDY
OF
QUINQUINIA

In the Treatment of Malarious Disorders.

There is perhaps no better guarantee known to the busy practitioner for accepting a new member of the *materia medica* into his every-day practice, than that offered by reliable, carefully made records, taken in well-known hospitals by competent, conscientious physicians and surgeons. Such tables we herewith submit. We believe that these reports will prove thoroughly reliable, and correspondingly advantageous to the profession at large.

Besides these tables, we might display innumerable testimonials from leading physicians, but our aim here is to give official records—not to publish letters.

From the records, we learn that the *Quinquinia* is being substituted for all the other members of the Cinchona group, even for Quinia itself. Clinical investigation seems to demonstrate that *Quinquinia* possesses decided antipyretic as well as antiperiodic properties. In addition to this, it is far superior as a tonic to any of the Cinchona salts.

In *Quinquinia* we have a medicine that offers all the advantages of the Cinchona salts with regard to solubility and easy absorption, and the superior advantages of not producing such intense and disagreeable Cinchonism, and of containing other medicinal virtues not possessed by the salts alone.

Observation is, however, preferable to all verbal argument or philosophy; we therefore submit the following tables :

ALBANY DISPENSARY (N. Y.)

(See Tables on pp. 3 and 4.)

From this large and well-known institution we have received the following brief but excellent record of malarious diseases treated with *Quinquinia*. Each case is worthy of careful perusal.

Cases 1 and 8 were complicated with suppurative processes of extensive character, which always tend to bring on malarial troubles and make them obstinate to all treatment. In these cases *Quinquinia* checked the paroxysms *at once*, and otherwise improved both the local and general conditions. In cases 3, 5, 6, 7, 11 and 12, Cinchonidia Sulphate was employed at first; in cases 3 and 12, after it had been tried and failed to be of benefit, *Quinquinia* effected permanent cures. In the other cases Cinchonidia was beneficial; but it will be seen that *Quinquinia* produced the required cure.

ALBANY DISPENSARY (N. Y.)

Reported by Dr. SHELDON VOORHEES (*Physician in Charge.*)

No.	Age.	Sex.	Character of Fever. Simple or Complicated.	Return of Paroxysm.	Administration. Before, during or after.	Remarks.
1	20	Male	Complicated with Gluteal abscess.	About every 6 days.	1 grain every hour after first paroxysm. Contin- ued for 2 or 3 weeks.	{ Gave Liq. Ammon. Acet., Spts. Etheris Nitr., and some opiates. The Quinquinia checked the paroxysm, im- proved his appetite and gen- eral condition at once.
2	27	Male	Intermitt. Complicated with Intestinal catarrh.	Every 4 or 5 days.	1 grain every 2 hours. Con- tinued for 2 or 3 weeks.	{ Gave Bismuth Subnitr. and Pil. Hydrarg. Improved im- mediately on taking the quin- quinia.
3	38	Male	Malarial cachexia of about 7 mo's standing.	Slight chills every 5 or 3 days.	3 grains every 3 hours con- tinually.	{ Gave Cinchonidia at first, but discontinued afterwards. Pa- tient improved at once on quinquinia.
4	17	Male	Tertian intermittent.	Every other day.	3 grs. every 3 hours conti- nually, 12 grs. at a dose on chill day.	{ The first chill was not com- pletely warded off, the next was entirely aborted, and he has had none since.

ALBANY DISPENSARY (N. Y.)
Reported by Dr. C. B. HERRICK, (*Physician in Charge.*)

No.	Age.	Sex.	Character of Fever, Simple or Complicated.	Return of Paroxysm.	Administra- tion.	Other Remedies employed.	Remarks.
5	29	Male.	Tertian Intermittent	Every other day.	2 grs. every 3 hours.	Iodine and Cinchonidia.	<p>{ Ague of long standing. The iodine did no good; the cinchonidia helped him a little, but quinia improved him a great deal.</p> <p>{ Quinia improved him greatly.</p> <p>{ The chills were entirely aborted.</p> <p>{ No chills after taking quinia.</p> <p>{ The chills were entirely aborted.</p> <p>{ Patient reports herself in better condition than she has been in for some time. Complete cure.</p> <p>{ After commencing quinia the chills were cured, but some cephalalgia still remained.</p> <p>{ Cinchonidia did no good, quinia cured her at once.</p>
6	40	"	"	Every other day.	2 grs. every 3 hours.	Cinchonidia.	
7	44	"	Quotidian	Every day.	3 grs. every 4 hours.	Cinchonidia.	
8	19	"	Complicated with <i>fistula in ano.</i>	"	2 grs. every 3 hours.	Local applications.	
9	36	Female.	Quot. Inter.	"	2 grs. every 3 hours.	
10	50	"	Neuralgia.	2 or 3 times a day.	1 gr. every 4 hours.	
11	30	Male.	Tertian Inter.	Every other day.	2 grs. every 3 hours.	At first, Iodine and Cinchonidia.	
12	10	Female.	"	Every other day.	3 grs. every 3 hours.	At first, Cinchonidia.	

ALEXIAN BROTHERS' HOSPITAL,
CHICAGO, ILL.

Reported by Dr. F. W. WESSELER, (*Physician in Charge.*)

No.	Age.	Name.	Character of Fever. Simple or Complicated.	Administration.	Other Remedies employed.
1	20	Frank E.	Quotidian Inter-	15 grs. daily.	} Laxatives.
2			Tertian Intermit.		
3	35	John B.	Complicated	Elixir Quinquina. Tablespoonful, 4	} Chalk Mix- ture and Astrin- gents.
4			with Dyspepsia and Diarrhœa.		
5	50	Nich. P.	Quotid. Intermit.	" " "	—
6	26	Alex. W.	Tert. Intermit.	" " "	} Astringents
7			with Diarrhœa.		
8	49	John L.	Quotid. Intermit.	" " "	—
9	28	Mich. J.	" " "	" " "	—
10	45	Math. H.	Tert. " "	" " "	—
	41	Math. M.	" " "	" " "	Laxatives.
	40	John H.	" " "	" " "	—
	45	Pat. C.	Quotid. " "	" " "	—

Fourteen additional cases are in this table, which, however, present nothing different from the above. *Every case was cured.* In reply to a letter asking further information on *Quinquinia*, Dr. Wesseler writes us that no paroxysms have returned after once being checked by this medicine.

Dr. D. Mannheimer, Attending Physician to the above Hospital, also speaks in highest terms of praise of *Quinquinia*.

ERRATA.

"Alexian Brothers' Hospital, Chicago (Ill.);" at the head of this page, should read: *Alexian Brothers' Hospital, St. Louis (Mo.)*

"Dr. D. Mannheimer, Attending Physician to the above Hospital," at foot of this page, should read: *Attending Physician to the Alexian Brothers' Hospital, Chicago (Ill.)*

SOUTH-SIDE DISPENSARY,
CHICAGO, ILL.

Dr. R. E. Starkweather has kindly furnished us with the following table of interesting cases in which *Quinquinia* was successfully exhibited. The Doctor also writes us that "scattered through the records for three months are notes of twelve cases in which *Quinquinia* was advantageously used—cases of rheumatism, dyspepsia, debility and kindred diseases."

Reported by

Dr. R. E. STARKWEATHER, (*Attending Physician.*)

No.	Age.	Name.	Character of Disease. Simple or Complicated.	Administration.	Other Remedies employed.
1 }	40	John R.	Simple Intermit-	15 grs. 3 times a day.	} Laxative Pill.
2 }	34	Jones C.	Hemicrania.	5 " " "	
3 }	46	Kate F.	Gastric Catarrh.	5 " " "	} Astrin- gents & Tonics.
4 }	38	Mike O'D.	Tertian Intermit. of long stand- ing.	5 " " "	
5 }	22	Kate S.	Neuralgia.	5 " " "	} Tincture Aconite.
6 }	32	Mike C.	Afternoon Brow Ague.	5 " " "	
7 }	52	Mrs. C.	Malarial Fever.	8 " " "	

In addition to these cases, Dr. Starkweather reported two valuable cases in April last, one of *facial erysipelas*, in which *Quinquinia* "was pleasant and speedy in its action and effects;" the other of a *pregnant* woman who was suffering

with *quotidian intermittent fever*. The Doctor hesitated to give Quinine; *Quinquinia* was prescribed in large doses with the desired result of breaking up the fever without affecting the uterus. [This letter was published last year in our Pamphlet on *Quinquinia*.]

UNITED STATES MARINE HOSPITAL,
CHICAGO, ILL.

The following useful report is sent us by Dr. P. M. Woodworth, who also writes that with children he uses *Quinquinia* almost exclusively of the Cinchona salts, "finding that it agrees with them fully as well, if not better, than Quinia Sulph.," a fact to which most of our correspondents have testified thus far.

Reported by Dr. P. M. WOODWORTH, (*Assistant Physician*.)

No.	Age.	Sex.	Character of Fever.	Return of Paroxysm.	Administration of Medicine.	
1	7	Male.	Quotid. Intermit.	None after taking the <i>Quinquinia</i> .	$1\frac{1}{2}$ grs. every 4 hours. 4 grs. every 4 hours. First dose given one hour before expected paroxysm, after that she had only two.	
2				71		Female.
3	4	Male.	Quotid.	"	None.	$1\frac{1}{2}$ grs. every 4 hours.
4	36	Female.	"	"	"	5 " " "
5	6	Male.	Tert.	"	One.	2 " " "
6	45	Female.	Quotid.	"	None.	5 " " "

In case No. 2 there were three paroxysms after beginning to take the medicine. This failure to cure at once can be accounted for in this way: 1st. The patient had arrived at a period in life which always favors the tenacity of disease. 2d. The medicine was begun only one hour before the chill hour, much too short a time to derive a benefit from such a small quantity as four grains. 3d. The medicine was given at long intervals (four hours). The other cases speak for themselves.

COOK COUNTY HOSPITAL,
CHICAGO, ILL.

We have already published, in a former pamphlet, the letter from Dr. S. D. Jacobson, Surgeon to this Hospital, in which he reports twenty cases treated with *Quinquinia* with eminently satisfactory results. We now furnish the records of the Medical Department, Dr. Otto Freer, Chief Interne. Dr. McWilliams writes us that he has "used *Quinquinia* in alternating cases with *Quinia* with equally good effects." A fairer test than this could not be made.

Cases 2 and 3 (*See Table on page 9*) showed an obstinacy to treatment that is always to be found in cases where actively destructive processes are going on in any part of the body. In case 4 (*See Table on page 9*) the chill was deferred six hours, a not uncommon circumstance in intermittent fevers. This batch of cases, although small, is exceedingly instructive and well worthy of study.

COOK COUNTY HOSPITAL, CHICAGO (ILL.)

Reported by Dr. S. A. McWILLIAMS, (*Physician in Charge.*)

No.	Age.	Sex.	Character of Fever. Simple or Complicated.	Return of Paroxysm.	Dose and Administration.	Other Remedies employed.
1	27	Male.	Quotid. Intermittent. Complicated.	No return.	5 grs. 3 times a day.	Potas. Iod., 15 grs.
2	27	Male.	Quotid. Intermittent. Phthisis Pulmon.	Two chills after beginning medicine.	8 grs. every 2 hours, beginning 6 hours before chill time.	Syr. Fer. Iod., Ol. Morrh.
3	44	Male.	Quotid. Intermitt. and Phthisis.	At 3 P. M. every day, slight chill for a week. then became lighter and stopped in about two weeks.	8 grs. 3 times a day.	Morph. Sulph. gr. 1/8, Syr. Ipecac. scruple, every 4 hours.
4	51	Male.	Quotid. Intermitt. and Chorea.	First chill deferred 6 hrs.; no return after.	5 grs. every 2 hours, for 6 hours, before chill time.	Sol. Fowleri, Spts. Camphor, Tr. Cimicifug.
5	44	Male.	Double Quotid. Inter- mittent.	None.	24 grs. in 3 doses, an hour apart, between chills.	
6	46	Male.	Quotid. Intermitt., with Rheumatism.	None.	5 grs. 4 times a day.	
7	25	Male.	Quotid. Intermitt.	None.	8 " " "	

CENTRAL FREE DISPENSARY,
CHICAGO, ILL.

The records herewith published have been kindly sent us by Dr. W. F. Lewis, Physician in charge of this popular dispensary. Most of the cases will be found deserving of careful perusal. Dr. Lewis writes us as follows: "You will notice that the cases reported are the most simple of malarious diseases, and yet, at times, the most obstinate to treat. *Am confident that QUINQUINIA is as reliable a medicine as the Sulphate of Quinine—its actions are not unlike it, save that it is more apt to disturb the stomach than Quinia.* You will also observe that I gave the drug in the majority of cases *before* paroxysms. I did it because I believe that the maximum of malarious fevers can best be treated in that way."

We hope that especial attention will be given to this table—it is full of lessons; it teaches that, although *Quinquinia* is not an absolute panacea for all fevers, its effects are at least as satisfactory as any of the other antipyretics, anti-periodics, etc.

In case No. 4 (*See Table on page 11*) we see demonstrated the truth of the statement made in Mr. Lewis' letter, that the *maximum* of, and we presume, *all* malarious fevers can best be treated by giving the drug *before*, and not after, the outbreak.

The action of *Quinquinia* in remittent fevers is also favorably shown in the above table—no remedy could have done better.

CENTRAL FREE DISPENSARY, CHICAGO (ILL.)
Reported by Dr. W. F. LEWIS, (*Attending Physician.*)

No.	Age.	Sex.	Character of Fever, or Com- plicated.	Return of Paroxysm.	Dose and Administration.	Other Remedies employed.	Remarks.
1	26	Female.	Chills & Fever, with Bronchi- tis.	None.	5 grs., 3 times daily, before chills.	Expectorants.	} The medicine was subse- quently used as a tonic, with good results.
2	37	Female.	Intermittent.	None after 2d day.	5 grs. every 3 hours.		
3	49	Female.	Rheumatic.	None after 2d day.	5 grs. morning and noon.	Alkalics and Mor- phia.	
4	32	Female.	Quotid. Ague.	Three times.	4 grs. every 2 hours after paroxysm.		
5	7	Male.	Quotid. Ague.	Once.	3 doses of 3 grains each, every hour, until chill time.	Laxative & Acid Drinks.	
6	61	Male.	Intermittent.	None.	4 grs. before parox- ysms.		
7	18	Female.	Intermittent.	None.	3 grs. every 3 hours.	
8	18	Female.	Remittent.	Twice.	3 grs. every 3 hours.	Morphia.	
9	32	Male.	Intermittent.	None.	5 grs. before.	Calomel.	
10	37	Female.	Rheumatic.	2 grs. every 3 hours.	Antirheumatics.	
11	28	Male.	Intermittent.	None.	5 grs.	Cathartics.	
12	31	Male.	Complicated.	Several times.	2 to 4 grs.	Used other reme- dies.	

CENTRAL FREE DISPENSARY, CHICAGO (ILL.)

Reported by Dr. W. F. LEWIS, (*Attending Physician.*)—Continued.

No.	Age.	Sex.	Character of Fever. Simple or Com- plicated.	Return of Paroxysm.	Dose and Administration.	Other Remedies employed.	Remarks.
13	19	Male.	Remittent.	Once.	4 grs. every 3 hours.	Laxatives.	{ Irish family living in a damp basement. The remedy acted prompt- ly and effectually. }
14	8	Male.	Intermittent.	None.	4 grs. before	Tonics.	
15	12	Male.	Intermittent.	None.	6 grs. before.	Tonics.	
16	6	Male.	Intermittent.	None.	3 grs. before.	Tonics.	
17	58	Female.	Remittent.	Three times.	4 to 6 grs. before.	Tonics.	
18	28	Male.	Intermittent.	None.	3 doses of 10 grains each, 2 hrs. apart, before paroxysm.		
19	31	Male.	Rheumatic.	None after 4th day.	3 grs. every 2 or 3 hours.	Other remedies.	{ Patient was not situated so as to enjoy in any measure medical treat- ment. }
20	43	Female.	Quotid. Interm.	Once.	4 to 6 grains before paroxysm.		
21	18	Male.	Quotid. Interm.	None.	5 grs. before.		
22	29	Male.	Remittent.	None.	8 grs. before.		
23	33	Female.	Intermittent.	None.	6 grs. before.	Tonics.	

LOUISVILLE CITY HOSPITAL,
LOUISVILLE, KY.

The following report from this large and well-known institution comes from Professor F. C. Wilson, Visiting Physician, and Dr. P. T. Tupper, Resident Assistant. It contains a number of good points, most of which we have italicized.

LOUISVILLE, Ky., November 19th, 1880.

We have prescribed *Quinquinia* in a number of cases of malarious fevers, with uniformly good results.

Of *nine cases* treated in the Male Medical Ward under our care, two were Remittent; two Tertian Intermittent; three Quotidian, and two not any distinct paroxysms, but merely a fever recurring daily at the same hour.

Quinquinia was given in quantities varying from *fifteen to thirty grains in twenty-four hours* and rarely had to be continued more than one week.

We have administered it both in solution (using a larger proportion of acid) and in capsules—the mass being made with aromatic acid.

In every case the antiperiodic effect was fully manifested, and there was generally *no return of the paroxysms after the first dose*.

We have also prescribed it in private practice in several cases where Quinine could not be borne because of its unpleasant effects, and have found that it can be given in full doses with comparative comfort.

The economy and merit of the preparation should bring it into general use when the facts become known.

UNIVERSITY DISPENSARY,
LOUISVILLE, KY.

We have already published letters from Profs. E. R. Palmer, L. P. Yandall, Drs. W. O. Roberts, R. B. Gilbert and others of the *University of Louisville*, all of whom speak of *Quinquinia* in highest terms of praise as a substitute for Quinine.

Prof. Palmer states that the Faculty have settled down upon *Quinquinia* in their Dispensary practices, after having tried all the other substitutes for Quinia.

HOME FOR THE FRIENDLESS,
CHICAGO, ILL.

In a former pamphlet we published the report of Dr. J. N. Hyde, Surgeon to the Home, in which he pronounces *Quinquinia* to be uniform in its effects, and especially useful in all cases where Sulphate of Quinine has been commonly employed.

Dr. D. A. K. Steele, Physician to the Home, sends us the following note and table.

CHICAGO HOME FOR THE FRIENDLESS.

“I have used the *Quinquinia* you so generously donated to the Home for the Friendless in only three cases so far. The results have been satisfactory, but the cases too few in number to be of special information. I will continue its use and hope to give you more extended results.”

Reported by Dr. D. A. K. STEELE, (*Physician to the Home.*)

No. 1.—Mrs. H., aged 33, Simple Intermittent. Took 12 grs. three times a day. No return. Produced nausea.

No. 2.—Lottie S., aged 24, Simple Intermittent. Took 10 grs. three times a day. No return.

No. 3.—Mrs. B., aged 35, complicated with Phthisis Pulmonalis. Took 8 grs. every four hours. Fever returned. No other remedies employed.

In case No. 1, the nausea was evidently produced by the large quantity of the medicine given, an incident common to all the calisaya alkaloids, especially when given in the crude powder. *Quinquinia* is best administered in solution (it is soluble in acids—about double the quantity required for the Cinchona salts) or in the pill-form.

Cases similar to case 3 have been discussed before (*See pages 8 and 9, cases 2 and 3, Cook County Hospital.*)

UNIVERSITY HOSPITAL,

BALTIMORE, MD.

From this Hospital we have received most favorable reports. A letter from Dr. T. B. Brune, Resident Physician, was published in our former pamphlet. Dr. Brune therein stated that “given in the same doses as Quinia, it has proved itself a most reliable substitute for that drug, and in some cases it seems to have been even superior to Quinia.”

The following letter from Dr. J. N. Love, Business Editor of the *St. Louis Courier of Medicine*, is so replete with practical points, that we cannot do better than reproduce it here.

St. Louis Courier of Medicine, }
ST. LOUIS, November 23d, 1880. }

CHAS. T. WHITE & CO.,
New York.

Gentlemen :—Further experience confirms my good opinion of *Quinquinia*. When in charge of the City Dispensary some years ago, I made extended trials of the Sulphate of Cinchonidia, and in my official statement to the Honorable Board of Health, I reported two thousand two hundred and odd cases of malaria treated with Cinchonidia.

With that and report of later experience before me, I feel justified in pronouncing the combined alkaloids (*Quinquinia*) superior to Cinchonidia or any of the Quinia substitutes, and in many instances superior to the Quinia itself.

I believe the Elixir (prepared from your formula) *the preferable mode of administration*. It is more palatable, *more likely to be retained in weak and delicate stomachs, and more readily assimilated*. On general principles I think medicines in solution are better than pills or powders.

The dose of QUINQUINIA should not be larger than that of Quinia Sulph. Larger doses of the latter are given than is really necessary. Enormous, heroic, and overwhelming doses should be the exception, and not the rule. Small doses frequently and systematically given are my preference in this as in other medicines.

I bespeak for *Quinquinia* a lasting name.

