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*Presented to Doctor Allen and Nichols  
by Aaron McKee (July 1819)*

PATHOLOGICAL

# REFLECTIONS

ON

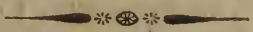
GENERAL DISEASED

# ACTION.

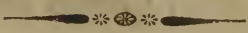
READ BEFORE THE

VERMONT MEDICAL SOCIETY,

OCTOBER 15, 1819.



BY JOSEPH A. GALLUP, M. D.



MONTPELIER, Vt.

PRINTED BY E. P. WALTON,

1819.

*1819*  
*1819*

Montpelier, October 15, 1819:

SIR,

THE undersigned, by request, and in behalf of the Society, improve this opportunity to express to you their high estimation of your essay, or reflections on diseased action, just read, and request a copy for the press.

Your's with due respect,

EDWARD LAMB, }  
TRUMAN POWELL, } *Committee.*

To JOSEPH A. GALLUP, M. D. }  
Pres. Vermont Medical Society. }



October 16, 1819.

GENTLEMEN,

IT affords pleasure that the essay alluded to in your polite request, in any degree, gives satisfaction. The topic being copious, and what is attempted having been designed rather for a private circle, it is cause of some regret, that want of opportunity should prevent a further elucidation of a subject of so great importance. Being, however, devoted to the wishes of the Society, of which you are a committee, I will only signify that the copy is at your service.

Whilst I present to you, and also the members of the Society, my most sincere regards; I remain, your obliged, and very humble servant.

JOS. A. GALLUP.

To DR. EDWARD LAMB, }  
DR. TRUMAN POWELL. }



PATHOLOGICAL

## REFLECTIONS, &c.

BRETHREN OF THE SOCIETY,

THE common temperament of mankind is, probably not greatly different from what it was in ancient times; the same primary constituent principles compose their texture; they are governed by the same physical laws, and still liable to disease and decay. We have much reason to believe, that the maladies then incident to them, were not greatly dissimilar from the present, in their general character, but chiefly different only, in their particular habits of appearance.

From the writings of inspiration, we can trace, we can portray the moral character of man in the primitive ages, and by comparison of the present, draw a safe conclusion, that, as he was once prone to error, with its consequence, sorrow, so he is now a mutable being, and subject to imperfections. The finger of heaven early pointed the way to an attainment of moral perfection; but, with respect to the physical infirmity of his body, as he was doomed in the sweat of his brow to gain a subsistence, so also, to avert the ravage of disease, and prolong a dubious existence, his task was to investigate his own physiology, and the properties of matter; and also by observation and experience, to search out the salutary properties of every plant, and every created substance.

As in man are combined all the properties and essences of universal nature, so his business is, in a physical view, to develop the character of surrounding objects, learn their useful tendencies, and, combining their congenial energies, apply them to relieve the distresses, and to save the lives of his fellow men.

How far the human character has attained to moral perfection, the history of nations and individuals will tell. If in the review of these, our minds are depressed, yet some bright beams of mercy from the inexhaustible fountain, give to our understandings the assurance that there is yet faith on the earth, and that benevolence and charity have not altogether forsaken the habitation of man.

As for the progress that has been made in physical research and medical improvement, our successful practice, and the records of our science will develop. We take encouragement that much has been accomplished, but as firmly believe that much still remains to be done.

Many obstacles to improvement have existed. Man being impatient of labour, wishes to arrive at the place of destination, rather by flight than slow and steady steps. For this reason in philosophy, he is not always willing to arrive to conclusions by careful observation and experiment, but is apt to frame hypotheses, and have it somehow in his mind, that nature will bend her course to meet them. This is a fruitful source of error; and when such a projection is made by an influential character, or the combined influence of an assemblage of men, some centuries of labour of the better informed, are often wasted in correcting the hurtful tendency.

A supposition prevalent at the present day, that certain and numerous diseases, are propagated from one subject to another by a personal and specific contagion, and that their duration is unalterably definite, has had the effect of diverting the minds of many from the right



channel of improvement, and of rendering the practice inefficient.

The present systems of nosology, by fixing arbitrary and immutable characters, to mutable diseases, has led to much stubborn treatment, and afforded the opportunity to patients to die rather according to rule, than according to nature.

The relief of present necessities, the gratification of avarice, sensuality, and revenge, in every age, have engrossed the regard of mankind, and their attention has been given to these, in preference to doubtful contingencies viewed at a distance. These, together with the delusive hope, that the malediction of heaven is designed more for others than ourselves, have all served to abstract the attention of mankind from the study of diseases, and thereby retarded improvement in the science of medicine.

Opinion, likewise, is mutable; and this can well be accounted for as originating from imperfect beings.—Almost every age is distinguished by some new doctrine, as a germ emanating from the ruins of some former theory, or rather hypothesis. But, to use the language of an elegant writer, “truth is ever one and the same; and time, which overthrows the creations of error, gives stability to her structure.”\*

It is not proposed at this time, to entertain you with remarks on any particular disease, as discussed exclusively, or in an insulated manner;—but rather to invite your attention to a pathological consideration of diseased action in general, as incident to the human system; and in a particular manner, to a view of the importance of the *general* diseased state over that of the *local*.

By diseased action will be understood, that variation, that aberration, that depravity of action, which is mani-

\*Transactions of the Physico-Medical Society, of New-York.

tested in all the functions of the system more or less, and which constitutes the diagnostic signs of disease;—whereby a manifest difference is recognised from a state of quiet and easy health. This condition of the system is more particularly recognised, by a change in the complexion and features; by a variation of sensibility; by a difference in the quantity of heat; by an alteration in the pulse; by a variation of the vigour of the corporeal and intellectual systems; by an alteration in the excretions; and afterwards by a change in the bulk of the body.

It may here be understood that, these variations proceed to opposite extremes, often in the same case of individual disease, during its course. These appearances constitute that state of the system which, both in ancient and modern times, has been denominated *fever*.

The mutability of diseased action may be further illustrated in what follows:—We discover sometimes a pale, and then a florid countenance;—sometimes a diminution, and again an increase of sensibility; at the onset a sense of general or local coldness, and then an excess of heat; usually a tremulous debility in the heart, followed with great vigor in the arterial system; commonly great muscular debility, and again in the same patient preternatural strength; sometimes insensible coma, and soon again an increased and vivid imagination; sometimes a constriction of the emunctories; and again profluent discharges; and lastly, sometimes a great wasting of the bulk of the body, and again an oppressive surcharge of humours.

This epithet, this word *fever*, has from time immemorial, been applied very strictly to that state of diseased action, which is more violent, and more quickly destructive of animal life, and which terminates in a few days or weeks. The liberty, however in this discussion, will be taken, to attempt to reconcile the principle with truth, that the multitude of diseases called

chronic, and which affect the system for a great length of time, and with various terminations belong to the same great source of a general diseased state of action.

One further and very essential characteristic of this general diseased action, is, that it has a strong and universal tendency to affect some one point, or part in the system, more particularly and more vehemently than other parts; that is, it always has a tendency to converge, and as it were, form a focus in some particular point or organ. This determination is manifested by pain, more or less severe; by heat; by tumor; by distress, anxiety, &c. or by coma; or by hemorrhage, &c.

However physiologists may differ in their explanations of this phenomenon, yet the facts are irresistible, and this is sufficient for our present purpose, that general affections of the system, either acute or chronic, are accompanied with local tendencies. And, if at any time the local tendencies are not so manifest or apparent on dissection, it is only because the general disease is more mild, and procrastinated; or that the part from the delicacy of its texture, or suddenness of termination of the disease, shows only small derangements to the naked eye. It is very probable this tendency to local affection is a part of that property in the living system, which is so manifest in different conditions both in health and disease, to relieve or extricate itself from hurtful impressions. The economy of the system seems such, that, some rallying point is necessary to give alarm, and from which the energies of the system are directed in the process of reaction, which is to follow the hurtful, and exhausting impressions. But, it may be remarked, that, as the energies of the system are not always well directed in those exertions, without the aid of skill, so these local tendencies become the objects of great solicitude to the physician, and distress to the patient.

These local affections merit our attention in the treatment of disease; but it may be noticed, that, they are

only of secondary importance; and it will be maintained, that the general diseased state first occurs in the order of cause and effect; and that, this general diseased state, whether acute or chronic, merits our first and most serious attention; and also, that, on the issue of this chiefly depends the event of the case.

It should here be understood, that these propositions are meant to apply, most essentially, to the local affection in the first stages of disease; that is, in the forming stage, and the stage of high excitement. When suppuration, or the destruction of a part supervenes, the reflex action of these has a tendency to alter the appearance of the disease, and a commixture of symptoms are discoverable, and local remedies may become particularly necessary. It will be considered, however, that the event of the restoration of the part chiefly depends on the general state of the system.

I am well aware of the general opinions of pathologists being against the foregoing propositions, stating that the primary changes are general and not local. However, until more forcible arguments are brought against their validity than I have been able to discover, I shall believe them correct; and at the same time consider the principle as of the highest importance in a practical point of view. Some suggestions will be offered in support of the above propositions, which it is expected, will go far in supporting the opinion, that the general disease precedes the local.

So far as atmospherical or elementary causes act on the human system, producing morbid action, we are well warranted in supposing their influence is exerted on the external surface; considering the cavities of the lungs as a part of this surface. From the improvements in modern physiology, we are well warranted in supposing, that the first changes from health to disease, are to be sought for in the muscular fibres, the nervous expansions, and most delicate vessels. It should be un-



derstood, that, as excitability is universal, all the fibres of the system are affected, either directly, or sympathetically; and not only the muscles, but the muscular fibres of the skin, of the blood vessels, of the exhalants, &c. An impaired, or impoverished action in these, is attended with lassitude, or a sense of weakness and soreness, with a desire for rest. These seem to be the first symptoms of disease. These sensations always take place before pain is noticed, in those that are attentive. If the pain in any case is first noticed by the patient, it is because his sensations were absorbed in sleep, from which he was, perhaps, awakened by the spasm; or if awake, his engagements in other concerns attracted his attention, so that the general sensation was not noticed, until the pain arrested his attention, and compelled him to it.

In every case where we have an opportunity to observe, the universal affection is further proved first to occur, by paleness, by faintness, by a shrinking of the surface, by shivering, by constriction, as well as by sleepiness and lassitude, before any local tendency is noticeable. If then this is true, that, in all cases well observed, the general affection first appears, we may fairly conclude that this is the condition of those cases not so well observed, and even where the local affection takes place pretty suddenly upon the attack.

We find also, very nearly the like effects follow casualties, or external local injuries. Perhaps these impair the vital energy of the muscular fibres in the first place, and then responding action ensues. Thus we see that a concussion of the brain produces this state of depression in all the functions of the system, and that this state is frequently followed by high action. Not only by concussion; but, as vitality is universal and communicable from or to every part of the system, and may be impaired by local injuries, so a bruise on the little finger, or toe, will produce torpor and faintness, followed,



probably, by the signs of high action. It therefore, appears, that a diminution of vital energy, or an approximation towards the death of the fibre, by cold, or by whatever cause, from a determinate law of the animal economy, gives occasion to this responding action; unless immediate death ensues.

In a great proportion of acute diseases, local tendencies do not attract notice until a day or two after the general disease has commenced; also, in chronic diseases, some weeks are passed oftentimes, before any local tendency becomes an object of attention. One further circumstance showing the inefficiency of local affections in producing general disease, is, their liability to change their locality from one organ to another, both in chronic and acute diseases; also, from the external to the internal parts, and the reverse. All this may take place, and repeatedly, whilst the general affection continues, and perhaps is but little changed.

Brown is considered an acute pathologist, however erroneous his views of practice may be, as suited to this climate. He observes; "*every* affection of a part, however formidable, occurring in general disease, is to be considered as only a part of the affection inherent in the whole body, and the remedies are not to be directed to a part, as if the whole disease lurked there." Taking it for granted then, as we shall, unless some new proof is brought, that the general affection first takes place in the system, and is the cause of the local, we discover the importance of the consideration, and the influence it must have in the treatment of disease.

Dr. Abernethy, in his treatise on the origin and treatment of local diseases, has made many judicious remarks respecting the general or constitutional condition of the subject, in modifying the local disease. He seems to consider the digestive organs as being always in fault, and that these exert extraordinary influence upon other distant organs, and influence their functions in producing disease; and, that the most appropriate

remedies are such as restore the natural functions of those organs. Although he lays much to the fault of the digestive organs, yet he says, "many very peculiar and very dissimilar local diseases, originate from a common cause, namely, from weakness and irritability of the system in general." If he had come directly to the subject, and said these local diseases originated from a febrile diathesis, he might have been better understood. Although he appears to have no accurate conception of a febrile diathesis continuing an indefinite length of time, yet in the description he gives of the general state of the system as the effect of impaired action in the digestive organs, he describes the very symptoms which all physicians agree in calling febrile; viz. "the tongue is dry, whitish or farred; turbid urine; perverted appetite, and bad digestion; the bowels irregular; the pulse frequent and feeble; slight exercise produces considerable perspiration, and fatigue; restlessness in sleep; irritability of mind," &c. Other symptoms might be added, but when the above are present, we can hardly hesitate to say there is a febrile diathesis, however, we may differ as to the origin of it. If the above author had considered the febrile diathesis as the cause of not only the local and distant diseases, but of the perversion that was manifested in the digestive organs also, I should have better understood his reasoning, and they would better have comported with physiological principles. It is worthy of remark also, that the remedies proposed by this writer, for the cure of diseases supposed to exist in the digestive organs, are of an evacuating and aperient kind, and are only a mild use of antifebrile remedies. It will here be suggested, if he had, in some of his cases, used more efficient antifebrile remedies, he would probably have had the pleasure of seeing some of his patients recover much sooner than he did.

Whilst on the subject of local tendencies, it may be noticed, that they are determined to the several organs,

partly by the remote causes of the general disease, giving, as it were, a predilection to some particular part; and partly by circumstances of a personal nature, as irritability in excess in any particular organ, either constitutional or acquired.

The chief seat of danger, in every condition of general disease, and local tendency, is in the internal organs and membranes of some of the great cavities. — Important changes take place there, which are not always recognised, by those considerably experienced, and even in such cases as admit of recovery. The external signs of disease are not always commensurate with the internal condition, and danger. The human system possesses an extraordinary facility, by the process of absorption, in restoring these local derangements, when the cause of them, or the general disease, is removed.

The previous considerations are designed, more particularly, to apply to those conditions of disease, which are sudden in their attack, and vehement in their character. This class of diseases has always been considered, in their diagnosis, as very different from those of a more mild, and protracted character; different causes have been assigned for their origin, and frequently a different course of remedies employed. If I should infringe on any received theory, or trespass on your opinion in advancing a different view of the subject, and attempt to show a similarity of features, and character, between those diseases called chronic, and those more acute, your candor will not permit you to accuse me of stubbornness or obstinacy. I can but wish, however, for the privilege of urging, as a justification, that the necessity of the case impels to this consideration, and nothing but a full and entire conviction of the truth of the remark, could induce the suggestion at this time, and in this place.

Let us review for a moment the preternatural appearances of general disease, and see if any further distinc-

tion can be made between acute and chronic disease, than that the latter is accompanied with more mild symptoms, and a more protracted termination; keeping in mind, however, the natural, and unavoidable concurrent circumstances connected with these different conditions, as respects their duration.

Can we discover a variable countenance in acute disease? do we not observe the same in chronic? Do we experience sometimes a deficiency of sensibility, and again an increase? the same takes place in protracted disease. In acute diseases, sometimes a sensation of coldness, and then an excess of heat? the same occurs in chronic. Sometimes in acute diseases, signs of muscular debility, and then preternatural strength? this is common to chronic disease also. Do we see in the former, occasionally, a slow and vacillating pulse, and again, the same accelerated and firm? this also is common to chronic disease. In one, a torpor of intellect, followed with a lively imagination? so in the other. Sometimes, in acute diseases, do we discover all the emunctories, as it were, closed, then again discharging their contents to excess? the same is observable in chronic. Sometimes in the former, a great emaciation at their termination, and in another case a bloatedness? this is also exemplified in chronic disease. In acute disease, are the sick afflicted with general distress, with local pain, inflammations and suppurations? sure these are discoverable in long continued disease. Do we witness hemorrhage in one? so also in the other.

Need there be any further analogies mentioned? In this your patience might be wearied. Finally, as the one exhausts the vital energy, and extinguishes life, so our profession witnesses that the other commits like ravages amongst the human species.

Suppose we take a nearer and more critical review of the subject, and see how the analogy will apply to some particular diseases, as they are known in the old vocabularies, by their unscientific names. At the head of the



catalogue of acute disease, in point of importance, pneumonia may be placed. At the head of the chronic catalogue, phthisis pulmonalis may have its seat.—Look at the leading symptoms in the patients, or read them in the histories of the disease. The one has chills and heats; so has the other. As one has an accelerated pulse; so likewise the other. One has pain in the side, or chest; so has the other. This has sometimes spitting of blood; so has that. As one has shortness of breath, so has the other. In pneumonia, a spitting of mucous, or pus, attends; see the same in phthisis.—One is followed with emaciation; so likewise the other. As the mind is disordered in one; so also in the other. Here they differ—one destroys life, perhaps, in twelve days; the other, probably, in twelve months. The examinations, after death, show very similar appearances; such as inflammation, suppuration, adhesion, &c.

Possibly some may raise the objection, that if common inflammation, in the lungs, is produced by general morbid diathesis, yet consumption may be caused by local affection, or by debility. The assertion will be risked, that there is not a symptom in the long catalogue of this disease, which shows the local affection to be primary, any more than in the other. Even the debility described by Doctor Rush, show nothing but the presence of fever! and what debility exists in such cases is only what is common to febrile complaints. The very symptoms of debility, as described by that worthy character, are “a quick pulse, especially towards evening; or heat and burning in the palms of the hands; faintness, headache, sickness at stomach, and occasional diarrhœa.” And he further states, “I have frequently observed each of these symptoms for several months before I have heard of a single complaint in the lungs.”

We see here, an example of popular opinion influencing and overpowering one of the most inflexible and towering minds. This state of predisposition, is called debility, with the most pathognomonic signs of fever at-



tending it—and even whilst the subject is able to perform a good portion of labour. If we inquire into the cause of this debility, there will be no difficulty in discovering, that it is produced by that general derangement, before mentioned, called fever, and that whatever debility existed is only a common symptom of this.

In forming our analogy, it appears that certain diseases of an acknowledged inflammatory character, and rapid tendency, produce effusions of serum called dropsies. These effusions take place suddenly in the ventricles of the brain, in the thorax, in the abdomen, &c. and, it may be added, in the cellular texture; as in scarlatina, and other acute fevers. But it seems to be a subject incomprehensible to some, that fever should be present, and be the cause of those effusions in like manner, in protracted cases. The old hobby is again bestrided, and attempts made to reconcile the principle with truth, that debility can prostrate all before it, and produce effects greater than the cause. The debility here spoken of, is said not to be that kind of fugitive weakness which precedes, and ushers in fever, but is called, by its advocates, “original debility,” and is supposed the cause of disease. It will here be asserted, that every symptom of predisposition to chronic dropsies, indicate fever, and after effusion commences, fever continues until the disease terminates. And further, the remedies of dropsies are such as have a general effect on the system, and are of the anti-febrile character.

The gout is a disease which illustrates the principles of general diseased action, very perfectly. The symptoms of fever are clearly exhibited, and its protracted termination, shows that a febrile diathesis, may continue an indefinite length of time. It also proves the mutability of local affections in an eminent manner.

As it respects rheumatism, custom has already given to the more violent kind the appellation of acute, and to the more protracted, that of chronic. The affinity is

very manifest in this habit of disease, having a local tendency to the articulation, and sheaths of the muscles. Even some of the more approved writers consider the latter a sequel of the former. The analogy is striking; but it merits some surprise, that the remedies of general febrile action, have not oftener been used in the cure of this latter form of disease.

The different varieties or grades of insanity furnish another instance of a general diseased action, and analogy between the severe and mild forms. A general state of high fever, with its index pointed to the brain as its locality, constitutes phrenitis; a less degree constitutes common insanity; a still less of a similar diathesis, constitutes moping melancholy, and fickle hypochondriasis. I should trespass on your time to trace the signs of alienation of mind, and hallucinations discoverable in all these grades of disease. The symptoms most manifestly indicating general disease are to be found in the countenance, in the pulse, and in the affections. The first and last will perhaps, be assented to as being common symptoms of all the above grades; for causes which produce a very little alienation of mind, distort the countenance also. With respect to the pulse, this is the index to show the internal condition. It will here be noticed, that in many affections of the head, especially the medulla oblongata, the pulse shows a more feeble action in the heart than attends it in most other parts of the system. This is liable to lead to great errors in practice; as for example, in that grade of fever called typhus, the head is essentially affected. It is probably, on account of the congestions and inflammations in the medulla oblongata and spinal marrow, that a torpor almost universally appears in the system, and the heart experiences its share of poverty of action. A very strong similarity can be discovered between the pulses of the melancholic, the hypochondriac, and some slow and torpid febrile cases; and to a nice touch it will occasionally appear manifest, that a febrile diathe-

sis prevails in these two singular diseases ; and it is also provable, that some of the anti-febrile remedies, suitably selected, give the most effectual relief.

Again, a carious tooth remains easy, if the general state of health is perfect, unless local irritants are applied ; also wounds of every description readily heal, if the general habit is free from disease ; and even old sores spontaneously vanish upon a restoration of general health.

It will in the next place be intimated, that cancerous tumors and sores depend on a general diseased action ; and as long as this continues it is useless to extirpate ; for if this is done, and the constitutional diathesis remains, more tumors succeed. An external injury never produces cancer, when the subject is free from a general fault ; but when this is present, a local injury may concentrate the disease more especially to the injured part. In this way a local injury may seem to be the cause of cancer, but it will occur only in such as possess the cancerous irritability ; as we see in the great number of local injuries only a few partake of the cancerous character.

Scrofulous tumors have for a long time been considered by pathologists as originating from a general diseased habit ; and there is but little difficulty in showing, that this habit depends on a state of febrile irritability.

It has been supposed by some, that influenza, that croup, that dysentery, cholera, &c. are local diseases primarily, and that the local affection emanates, or diverges from a point, and produces the general diseased state. It is presumed an impartial consideration, and close examination of this important subject, will remove the doubts of any, who still hesitate to believe, that the general affection produces the local. In addition to the remarks previously made, it may be intimated, that the severity of pain, and local inflammation, have been powerful inducements to turn the attention, both of the physician

and patient, to the seat of local affection. The general distress, and anguish of disease, is less felt, as well as less observed, whilst a strong and more painted impression exists in a particular part.

In these cases the patient may experience relief from the use of remedies intended to have an entire local operation, but which, in fact have a general operation; and if he gains relief, it is through the agency of such remedies, principally, as influence the whole system, although he is not always aware of it. In this manner diseases are often remedied, whilst the *modus operandi* of the remedy is very different from that which was supposed.

A great number of diseases not yet mentioned admit of the same parity of reasoning. Those inflammations in the periosteum of the bones, vulgarly called fever sores, arise from a general diseased condition, with a locality in these membranes, and can alone be removed by a thorough application of general anti-febrile remedies. That perplexing habit of disease called phlegmasia dolens, which affects not only puerperal women, but also sometimes athletic young men, is a general disease, having its locality in the sheaths of the muscles of the leg. Hæmorrhages, with the exception of the cases attended with a solution of continuity, admit of the same reasoning, and must be relieved principally by general remedies. The degree and severity of local affection serve often, very correctly, to show the quantity of remedies, that are necessary to remove the morbid diathesis; but this is not certain, for the remedies must frequently be continued after the local tendency is subdued to effect a radical cure.

A further analogy between acute and chronic disease may be traced in their types, or severity of aspect.—Some acute diseases appear with greater severity of action than others; the same is observed in chronic disease. These dissimilar tones of morbid action may be



compared to the flats and sharps in music. Both these keys consist of sounds, only some are more acute than others.

A parallel also may be found in the stages of disease. Acute diseases may be divided into three stages; the first a stage of depression; the second, of excitement; the third, of collapse. It may fairly be inferred, that these stages are not peculiar to acute diseases; for in all chronic complaints this state of depression is very manifest at their commencement, and is sometimes of considerable duration, and is that appearance which has given rise to the belief that debility is the cause of all that follows. After this period the stage of high excitement commences, in which the disease shows itself in its strongest features. At length the stage of collapse commences, in which the system shows signs of exhaustion of vitality, and the symptoms of disease are blended with the signs of dissolution. In all these stages the analogy between acute, and slow diseases, is very striking; and what will make most for the argument is, that the salutary remedies are not greatly dissimilar, in kind, only in degree.

Lastly, the numerous chronic diseases, which follow acknowledged febrile diseases, can only be removed from the system by general antifebrile remedies. It manifestly appears, that these diseases are altogether dependent on the universal derangement in the system, which was contracted at the onset of the fever. The primary derangements, whatever they were, have been only partially removed. The locality sometimes changes, and another organ from that first affected suffers in the conflict; but still, a very small degree of attention is sufficient to convince any one, that the symptoms of general disease, or fever, still continue.

If the above views of the subject are correct, they are of extensive utility in practice; they will facilitate the applications of the physician, and ensure a greater



degree of security to the patient. Both analogy and experience, prove that both the above divisions of diseases in their different shapes must be cured by general remedies, and such as restore the permeability of the vascular systems, and eliminate equal excitement in every fibre.

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I FEEL happy, Gentlemen, in noticing your attention ; and also in observing the lively interest you appear to take in the welfare of this infant Society. It truly needs the fostering care of kind and protecting parents. It not only needs the aid of its immediate members, but likewise some encouragement from the constituted authorities, whenever a method can be pointed out as a channel, through which their munificence can flow in an unruffled course. That their aid and influence may be obtained, in due time, may reasonably be expected in this age, which for acts of benevolence, and public utility, is unrivaled; and when it is considered that, a more equal estimation, and just discrimination is made than heretofore between merit, and demerit, in the department of medicine.

Several of the members of this society have made honorable sacrifices of time and money, in a very disinterested manner; for which it is difficult to assign any other motive than the ultimate good of society at large. Every insinuation of sinister motives ought, therefore, to be treated with contempt, nor will they be made but by the ignorant and illiberal, the sediments of society.

You are intreated, not to relax in your zeal for the promotion of this infant institution; but to realize that all societies of a similar nature, have had their season of nonage, and that this is the prelude to maturity; to consider also, that some good has already appeared; that a spirit of greater attainment already inspires the minds of the faculty, and of candidates for the profession; that public confidence is increasing; and also, by the united improvements of many, that, those assailed by hitherto incurable disease, are looking with greater hope of relief, than formerly, from their kind and intelligent physicians. Therefore, "cast thy bread upon the waters, for thou shalt find it after many days."







