

AN
INAUGURAL DISSERTATION

Typhoid ^{ON} *Fever*

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BY

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OF

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Typhoid Fever —

Gentlemen.

I propose Considering as be-
-ifly as I Can to do the Subject as I may
think justice, a disease known by diff-
-erent names, according to the time & place
of its prevalence. to wit, Typhoid Fever; Sory-
Fever; Continued Fever, Nervous Fever, &c.
Why Medical Men, differ in Calling one &
the same disease, by such variety of names, I
cannot Conceive, unless it is, Merely to differ
with their Medical brethren, or to perplex
the Mind of the Medical Student. I
propose for the time being, to Call it
Typhoid Fever as it is known an Called
by that name in this Country. I do not se-
-lect this disease, with any expectation
of presenting before your minds any new
features or points, Concerning it, but be-
-cause I regard it as being a disease of

- vast deal of interest. a disease with which every Practitioner should be familiar. a disease of frequent occurrence in this Section of Country, and one, which there is great diversity of Opinions. Among writers, in regard to its Cause, Contagiousness; Treatment &c. Typhoid Fever, then, as it is laid down in the books & according to different Authors upon the Subject, for it is to them principally, that must refer, is a Common febrile affection, whose Anatomical Characters are ^{an} enlargement & special attention of the Intestinal follicles, accompanied by increase of volume - Softening, and occasionally Suppuration of the Mesentery glands. The usual Symptoms of this disease is Continuous fever of variable intensity. Stupor, prostration, pain & gurgling on pressure in the Right Hypo Region, and

- an eruption appearing generally upon the
Abdomen & lower part of the throat, presenting
a Rose Colored slightly elevated Papulae, disappear-
ing upon pressure, diarrhoea, and a brownish
Coating of the nostrils, this disease may be
accompanied with all, or only a part of these
Symptoms, it sometimes sets in abruptly,
with a chill, followed by the usual Symptoms
of Fever, but it more frequently comes on ins-
-iduously & gradually, increasing, so that it is
a difficult point, and indeed almost impossible
to ~~fix~~ the precise time of its commencement.
The Patient will be going about apparently
well for several days before he feels himself
sufficiently ill to take his bed, Complaining
merely of a slight soreness of the limbs, and more
or less head ache, some loss of Appetite, the Ton-
-gue is more or less coated, the skin slightly
heated, & perhaps there will be felt some -

Chilly sensations - though this may be entirely absent. when the disease is completely formed. the Chillings if it be present, ceases. and does not again occur. unless by the occurrence of some incidental Inflammation. - Diarrhoea, is a prominent, and early Symptom of this disease occurring in the access of the disease, though it may be postponed a few days later. Yet Obstinate Constipation, says Dr Woods, occasionally exist, but from the observation of many writers upon the subject. & from my own, though, limited observation. I am of the impression, that Cases of Typhoid Fever accompanied with Obstinate Constipation is very rare if ever, when Diarrhoea is not present, there is some looseness of bowels. there being an extraordinary susceptibility of Cathartic Medicines producing Evacuation - much easier than under Ordinary Circumstances.

- and in much smaller doses - other Symptoms
are now Super added. Such as frequency of
the pulse. though ^{the} pulse may be but moderate
-ly accelerated. and again ~~the~~ may be 125 or
even 150 strokes per minute. This great increase
is observed in Persons possessing an irritable
Constitution. There will be more or less thirst &
almost a total loss of appetite. The heat of the sur-
-face. is increased. the face flushed. have a
more purple tint. than ⁱⁿ most fevers. and when
this is absent, as it may be, there will be a dusk-
-y hue. of the Complexion. Head ache in some
degree is thought never to be absent. and in some
Cases it is said to be the Chief subject of the
Complaint. whether this be true or not. I am
not prepared to say. Those that I have seen
with ^{the} disease. Complained but very little of
the head. More than a dull & disagreeable feeling,
as they would describe it, about the head,

- Pain in the back & limbs. & a want of sleep.
There is apt to be more or less Epistaxis, though
never profuse. There is sometimes daily Remissions.
These Symptoms Continue about the same with
a slight increase. for a few hours or days. the
pulse become more frequent. The dust ring of
the Counting ~~is~~ upon the Tongue is yet con-
-tained with a thicker fur. after appearing red
at the tips & edges there will be more or less mea-
-sure. & vomiting. pains are felt in the abdomen.
A slight tympanitic distention is observed
by percussion. a Cough is said to be a
frequent attendant ^{from the outset} upon this disease. being
accompanied by a slight Mucus expectora-
-tion. & the Physical Signs of Bronchitis.
I do not believe that Cough is a frequent atten-
-dant. for Cough. & the Mucus discharge is
not present. unless there be some pulmo-
-nary affection. and the Sings, it is said,

are never affected untill late in the disease
even to the very last moments almost of the
Patients. ^{by} a number of Cases are recorded
where the bodies ~~of~~ those, that have died of Ty-
phoid Fever, have been examined, and up-
on examination the lungs have been found
to be but very little inflamed & engorged.
If this be the Case, there would be no Cause
for this Cough in the outset or Commence-
ment of this disease. I have seen Patients
who was Labouring under this disorder, that
did not Complain of any Cough whatever,
the Symptoms, that I have mentioned, such as
Frequency of the pulse, Thirst, Coated Tongue
&c. continuing about the same, untill the 7th day.
other Symptoms are now added, the tongue, that
was previously moist, becomes dry, and assumes
a brownish coating, the Abdomen becomes
distended, Red spots resembling flea bites app-

- arising first upon the Abdomen, then upon the
Chest & Neck & occasionally upon other parts
of the body, it is at this stage of the disease
the Rose Colored Eruption, that I have had an
occasion to refer. marks its appearance. Dis-
- appearing on pressure. slightly elevated & raised
above the surface of the skin, appearing first
the Chest and then upon other portions of the
body. its duration is variable. Sometimes
lasting but a few days, and some times persis-
- ting several days, when it last for several
days, it is said to consist of several succes-
- sive Crops, becoming darker before fading
away. This Eruption is one of the most
prominent Symptom of Typhoid Fever,
- it is said by some, to be such an impor-
- tant & Characteristic Symptom, that where
ever this Eruption exist, there is almost sure
to be Typhoid Fever, particularly, if the Patient

has fever. but this is a mistake. for this
Eruption - or an Eruption very similar in
Character, frequently presents its self in
different Diseases of the bowels. the pain
in the head if it be present, now ceases
and is followed by delirium. Stupor & hard
-ness of hearing - deglutition is difficult.
The tongue is protruded with difficulty. &
if the disease runs on. a Complete Typhus
Condition is set up. the tongue is gashed
and sore. Sordes accumulate around the
Gums & teeth. the skin is hot & dry. the de-
-cubitis is in the dorsal position. the Patient
slides him-self down in the bed. mutters -
words not understood. & rises at the bed
clothes or imaginary objects. The Urine
and faeces are passed involuntary - the
Patient not being Conscious of the fact.
Tho' Retention of Urine may exist -

Diarrhoea is still present to some extent.
the stools are variable - some times amounting to 2 or 3 per day or more - possessing a yellowish or brownish appearance - and in the latter stages they are dark & mixed with blood. In speaking of eruptions. I should have mentioned another kind of eruption - appearing about the 14th day. Small in size - called Sudamina, appearing on the body - and other portions, in the advanced stages. There is apt to be sloughing of the parts that are exposed to hard surfaces - and it is stated by some Author, that this sloughing of the parts is frequent & very early ⁱⁿ this disease. Upon Anatomical examinations it is stated by Astruc, In Woods & others. that there is scarcely an organ found in the body, that is not in some way affected - either by ulceration.

- Inflammation or Engorgement, the lungs
as I have already remarked, are engorged
with blood, so is the heart. The Spleen is
Considerably enlarged. & the Air passages, are
in some ^{cases} said to be ulcerated. The Mucous
Membrane of the Rectum & Colon is softened.
Peyer's Glands, are either softened, or ulcerated.
Most frequently the latter. The Alteration of
Peyer's Glands, says Plymer & others, is so con-
-stant in Typhoid Fever that it may be
regarded as its Anatomical, or Organic Ch-
-aracteristic, but I think this is a mistake
for they are found to undergo a change
of Structure, in Persons, who have died
of Cholera, Phthisis & Scorbatica. Typh-
-oid Fever may terminate in 4 different
ways. 1st by Heeremia. 2nd by Coma.
Third by Apnoea & 4th by Syncope. &
Death by the first mode is said to be

most frequent. Blood taken from Patients labouring under Typhoid Fever, is said to contain less Albumen & Fibrin, than when in health.

The duration of this disease is variable. The mean duration is said to be from 16 to 28 or 30 days. Though Convalescence have been established as early as the 14 and even the tenth day, according to some Authors.

Recurrences.

Typhoid Fever as a general rule never attacks a Person the second time. Yet I believe that it may & in fact does, occasionally attack a Person the second time.

I will now relate a case of its recurrence. A Patient was brought to the hospital Downville, last winter in charge of Dr Austin Flint, labouring

- under Typhoid Fever - presenting all
the Characteristics Symptom of this disease.
- he recovered, pronounced well, & was dis-
- charged from the hospital, but in
some 5 or 6 weeks afterwards, he returned
having the second time Typhoid Fever.
- Accompanied with the Rose Colored Eruption
- Pain & gurgling or pressure in the Right Iliac
Region, Diarrhoea &c. ~~The~~

The Complications
of this disease is Perforation of the Intes-
-tine. Hemorrhage ^{from the bowels}, & sometimes Inflam-
-mation of the Respiratory Organs. The
first mentioned is the most fatal
Complication. Pneumonia is said to be
a Complication of this disease - but, I do
not believe that it is ever a Complica-
-tion of True Typhoid Fever. not withstan-
-ding you may have ^{them} existing together.

- Constituting what is called Typhoid Pne-
-monia -

Typhoid Fever has been sup-
-posed by some. to be merely Gastro-
-Enteritis. but Inflammation ^{of the Stomach} that is a
prominent Symptom of the latter disease
is absent in the former. Peyer's Glands. is
not affected in Gastro Enteritis.

Diagnosis.

Although there is no one or even two Sy-
-mptoms. that could be regarded as being
truly pathognomonic of Typhoid Fever
yet there are certain Symptoms occurring
with such Constancy. and with such
frequency. than in any other disease
that in most Cases. a timely and cer-
-tain diagnosis. may be fully established
when a febrile disorder of several days
duration. is attended with early & marked

— prostration Diarrhoea. Stupidity —
Epistaxis. Rose Colored Eruption — pain
in ^{the} Right Iliac Region. There would be no
difficulty in making out our diagnosis
But as it has been said. Typhoid Fever may
exist with only a part of these Symptoms —
how may we distinguish it from any other
disease. in the Commencement of this disease
you cannot tell it from any other Fever. neither
do I believe. that you can distinguish any
— other from this. in the Commencement. but
if I was called to see Patient. that was
attacked with a febrile disorder. lasting for
5. 6. or 7 days. with Diarrhoea. Coated Tongue.
(though this not a characteristic Symptom). presenting
the Rose Colored Eruption. I should pro-
— nounce it as a Case of Typhoid Fever.

} Typhoid Fever has been. and is yet —
often Confounded with Bilious or

- Remittent Fever. but no one should fail to distinguish the two diseases. Mark the difference. Typhoid Fever. occurs abruptly. Nausea & vomiting, that is always present, and a very prominent Symptom of Bilious Fever - is not a prominent Symptom of Typhoid Fever. but to the contrary is frequently absent. You have not the marked tenderness over the abdomen, that you have in Typhoid Fever. neither is the eruption that is present ⁱⁿ Typhoid Fever, present in Bilious Fever. There is no Epistaxis in Bilious Fever - but there is in Typhoid. It is sometimes - Confounded with other diseases, such as Encephalitis & Enteritis. but I deem it unnecessary to mark ^{out} the distinction.

Identity of Typhoid & Typhus - Fevers. - The question of the identity of these two diseases, has been of very great

- interest. Respecting which much diversity
of Opinions at one time prevailed. It is
believed by some writers upon the subject -
that Typhoid, & Typhus Fever was one and the
same disease. While others assert that they are
essentially different though we find them presen-
-ting Symptoms very much alike in their Charac-
-ter. I believe them to be different diseases -
Typhoid Fever attacks a Persons lip abruptly -
A Patient that is attacked with Typhus Fever is
Caused to take his bed almost immediately -
instead of having Diarrhoea in Typhus. There will
be Constipation. Delirium occurs much ear-
-lier in Typhus, than does it in Typhoid Fever -
Also does the Eruption (Rose Colored), it occurring
in 3 or 4 days in Typhus - when on the other
hand it does not appear before the 7 or 8 day
and sometimes later - the Eruption in Typhus
does not disappear but very little if any ^{on pressure} it is

not raised above the surface of the skin as
it is in Typhoid, and the infrequency of
the Abdominal Symptoms, ^{in Typhoid} that you have
so constantly in Typhoid, and other Sym-
-toms I might innumerate, ^{These} but will not tax
your Patience in so doing
Prognosis.

This, I think, should be guarded against, for
independantly of Typhoid, as it is thought by
some Authors ^{as} being almost a fatal disease.
perforation of the Intestines is apt to occur
and most frequently in mild Cases, and when
this is present it is thought to be in a large-
majority of Cases fatal. Though this disease is
regorded by some, to be a serious & almost-
fatal disease. I do not Regord it or severely
any disease as being essentially fatal. The
Most unfavourable Symptoms of this disease
is Complete Delirium - profound Coma - Rigidity

— of the limbs, excessive diarrhoea & hemorrhage
from the bowels, — Though these Symptoms be
present. the Case should not be regarded as
a hopeless one — and permit the Patient to
go down in his grave, without making
an effort to save him. for Certainly there
is no Condition so low; no Symptom so
fatal that death should be regarded as
inevitable. If the Patient is to Re-
cover, the pulse & heat of the Skin will
diminish. a Restoration of healthy secre-
tion, and a disposition in the tongue
to become moist & clean.

Cause —

It is ^{now} believed generally acknowledged by
the Profession that we know ^{nothing} really of
the Cause of Typhoid Fever. — Yet there
exist a variety of opinions upon the Sub-
ject. Some believing that it is generated

- by a poison - exhaled from human bodies - when
many are crowded together in galleys ships &c,
and some again, that it is produced by a vi-
-tiated state of the Atmosphere - from a putrefa-
-ction of dead Animal & vegetable matter - and
thus still that ^{it} originates in an Animal Poision
and is Contagious, - as an objection to the 1st
proposition, I will quote from Watson - Prac-
-tice. page 974; The natives of the Arctic -
-Regions, who, in order to shelter themselves from
the coldness of their climate - lived during the greater
-part of the year - in close and subterranean
-dwellings, from which the fresh air is
-studiously excluded - and in which the Atmos-
-phere become so offensively foul as to be scarcely
-supported by a stranger. Yet Typhoid
-Fever is not known among them. I also
-think it impossible that ^a vitiated state of the
-Atmosphere - from the putrefaction of dead

- Animal & vegetable matter - could give rise to this disease. if so, the Medical Student who spend a greater part of their time - in the dissecting Rooms. in haling the foul & offensive Air - would certainly Contract the disease. but we find them as free from it, as any other Class of People. but the - Circumstances mentioned. may and no doubt do sometimes - act as predisposing Causes. They are apt to produce a debilitating effect. and when the Patient has imbibed the true exciting Cause. which may not be able to bring the System into Subjection. these pre disposing - g. Causes. (as I prefer Calling them), may by the influence they are Capable of exerting, enable the true exciting Cause to act, & by this indirect means. be the Cause of producing Typhoid Fever. It is, as has already been remarked ~~believed~~ ^(believed) by some, writers, that the Cause of this disease

- Originates in an Animal poison, and is Con-
- tagious. This proposition Coincides, with my
- own belief & ~~Respecting~~ the Cause of Typhoid
- Fever - My own impression, is that it is Capable
- of importing its self from Person to Person.
- Not with standing This is denied by ~~Men~~ ^{Men} of high
- Authority, honor & distinction. Dr Wood asserts
- that a Case cannot be shown where Typhoid
- Fever was ever transmitted ~~from~~ ^{to} a Person labouring
- under this disease to a healthy Person - Others
- will tell you that it cannot be contagious from
- the fact, so many Persons, who have intercourse
- with the sick, do not contract the disease
- I have had them to tell me, that it was im-
- possible for Typhoid Fever to be contagious -
- that they had nursed Patients (Typhoid), even ^{had} sit
- by the bed side when the disease was at its height
- day & night, yet they escaped the disease.
- I admit that if they had never had Typhoid Fever

- That it was an escape. and nothing more.
but the force of this Argument, or Reasoning
is, I think, Completely broken down, by the
well known fact, that in respect to diseases,
which are acknowledged by all, to be Con-
tagious. and which in fact, are ever prop-
agable by inoculation. Variola for an exam-
ple. the same kind of exemption not only
happens. - we meet with the same exemp-
tion in Rubella, Scarlatina, Dymanche-
Poxidea &c. No one will deny the Contagious-
ness of the above mentioned diseases. - neither
do I believe that any one will pretend to say
that ^{those} who are exposed to these diseases, will certain-
ly Contract them, it is well Remembered that
Rubella made its appearance in this City -
(Nashville), a few weeks ago, ~~and~~ all that was
exposed to this Poison, if I may so speak,
have Rubella. that had not had it previously

No, several of my Roommates testified to me
that they had never had Rubella. Yet they rem-
ained exempt. notwithstanding they were
equally exposed. as any that contracted the
disease - enough I think has been said upon
this one point. I will now proceed to investi-
gate the Contagiousness of Typhoid. Now I
do not wish to be misunderstood in reference
to the Contagiousness of Typhoid Fever. I do not
believe & in fact I know that it is not alto-
gether as Contagious as those diseases. that
I have had occasion to refer to. yet I assert
that it is to some degree Contagious, and will
proceed from my own observation & the
observation of different Authors, to prove
my assertion. Typhoid Fever made its
appearance in my section of County, in the
Year - 52 - previously such a disease was
hardly known to exist there - I mean the County

in which I live. The first Case that occurred was in my little Town Paris, in a few days other members of the Family was stricken down with the same disease - and in a brief period of time every member belonging to that family was attacked with the same disorder - They were visited by their friends - which a greater Majority of them also Contracted Typhoid Fever. and it seemed to spread in some way (by Contagion), until a very large Majority of Persons who had Communication with the Sick had Typhoid Fever. whilst those that was not exposed - remained entirely exempt. This disease has been more or less prevalent with us ever since & I notice that those that have intercourse with the Sick is very apt to be affected. whilst those that are not exposed do not have it. Dr Austin Flint in

delivering a lecture upon this disease. Said;
I did not believe in the contagiousness of
Typhoid Fever until a few years past since
that time I have been forced to change my
opinions. & believe Typhoid Fever to be con-
tagious. by witnessing instances similar
to those I have already related. I will not
therefore tax your patience in stating them:
I could relate other instances, given by Drs
Watson, Plymmer, Eberle & others going to prove
the contagiousness of this disease. but believ-
ing that I have stated sufficient proof to
convince the unprejudiced, that Typhoid Fever
is propagable by contagion. I deem it unneces-
sary to proceed any farther with the subject.

I proceed therefore gentlemen to the
Treatment of this protive form of disease.
and the first ^{Question} that presents its self to our
minds is. Can we not show that the disease or

in other words, have we a Remedy that will
act as an Abortive. I say Not. for it is
~~proved by~~ ^{proved by} ~~practically~~ all writers upon the subject
that Typhoid Fever is a self limited disease,
therefore Cannot be cured. Yet a great many
Remedies have been recommended, and in
fact are now used for the purpose of curing
this disease. Various Tonics, Antiperiodics,
Opiates, have been recommended, one
Physician asserts that he cures all his
Patients by the administration Tonics, others
asserting that they cure Typhoid Fever by
Opates - and others again by Purgatives,
but what influence does such assertions
have upon the minds of enlightened &
scientific Physicians, none; for it has
been said Typhoid Fever will not admit
of cure but will run its own course -
untill it has arrived at its termination

either to end in death or recovery. & if it would admit of Cure, we should never think of doing so by ~~Op~~ ~~tho~~tics. Such as Calomel, Blue Pill & Hydrag Cum Creta which are usually resorted to for this purpose. for Calomel is a defibrinating medicine, the fibrin ^{of the blood} being always diminished already in Jaundice, and as this is the Case, we should not resort to measures to lessen it still more. and in addition to this objection, the bowels are in such a very easy Condition to induce Diarrhoea, if it be not already present, we should abstain by all means from the use of Cathartic Remedies. for the purpose of avoiding Diarrhoea. as it is a very serious Complication, it is advised by Astruc, that if the bowels are Costive, to let them remain in that Condition, for 3 or 4 days, by so doing

- the necessity for starting the bowels by
Purgative Medicines, is frequently superseded
by a Spontaneous action of the bowels -
which is for a purpose - I saw several
Cases of Typhoid Fever treated in this way
by my worthy Preceptors, Dr. W. & Dr. P. Kendall,
last year during my stay in Louisville,
Dr. Flint's mode of treatment, is to give
his Patient, from the beginning 1℥ Morphina,
and 1oz brandy every 4 hours - suffering the
bowels to remain if they be inclined to
be Costive 3 or 4 days. Then should it be
necessary, start them by giving a mild
enema - giving his Patient plenty of nutri-
tious food. he says that in this disease the
Morphina will not Constipate the bowels, nor
will the brandy act directly; in the Commence-
ment of the disease as an ~~Antispasmodic~~^{Stimulant},
Spt. Turpentine is highly recommended

in this disease giving it in minute doses at the commencement of the disease. it is said that perforation of the intestine will very rarely if ever occur. if the patient is kept under the influence of Suspensives. though by others. it is not so highly recommended. My own idea in regard to the treatment of Typhoid Fever. is to give as little medicine. as prudence will admit of doing. all that we call do in the treatment of this disease. is to ~~favor~~ ^{favor} ~~secretion~~ ^{secretion} if possible. and assist nature in her efforts. This is all we try to do - finding we cannot cure the disease. If I were called to treat a case of Typhoid Fever. I would order the patient to be placed in a comfortable room - admitting plenty of fresh air to come into the room. Removing all filth from the

Room & about his person. I would then
Commence my treatment with small doses of Sur-
-pentine, believing this to be as good a Remedy
-as any - giving it in small doses say 2 to 3 Drops
every hour in Mucilage of Gum arabic. It is
thought by some, to be best given in combina-
-tion. Turpentine, ℞. Sassafras aa. ʒi. Mucilage
Gum arabic ʒ 3½ given in doses of ʒ ʒi every
two hours. - I would suffer the bowels to
remain Costive if they should be so, for a few
days - if I then thought proper to move them.
I should do ^{so by} giving an injection of Turpen-
-tine or some mild enema of a different kind.
Should Retention of Urine occur I would
use the ordinary means for correcting it. if
Hemorrhage occurred. Turpentine, is said
to answer as well ^{as} opium to correct it. I would
suffer my Patient to have Cool water to
drink, and a sufficient Amount of Nutri-

Tious food. in advanced stages. I would partly force him to use food. Such as beef Tea. Porched Egg &c. for in advanced stages. Patients are generally Comatose & indifferent in regard to such things. I would administer Stimulants, such as brandy. Ammonia &c. if there was delirium ~~or~~ ^{if} there his head and apply the ice Cap. Sponging him also occasionally. if there be high heat of surface with Vinegar & water.

I submit this Thesis, Gentlemen to your kind Consideration, if there should be found anything in it, that ^{does not} coincide with the experience of your enlightened minds. You will please let your Criticisms be mild, for We that made men, did not intend them to see alike nor think alike. but to the Contrary - that all great men should differ. I have the honor of ascribing my self. Most Respectfully Yours.

January 13th 1857. — J. W. Pritchett