

AN

INAUGURAL DISSERTATION

ON

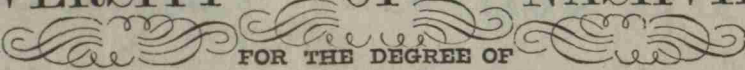
*Bilious, Remittent Fever*

SUBMITTED TO THE

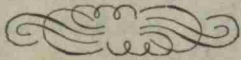
PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY

OF THE

UNIVERSITY OF NASHVILLE,



FOR THE DEGREE OF



DOCTOR OF MEDICINE.

BY

*W. B. Shapard,*

OF

*Shelbyville Tennessee*  
*" "*



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*W. B. Shapard*

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Fever is the great instrument in the hands of the destroying angel of accomplishing the destruction of physical man. Ever since the fiat of omnipotence, "dust thou art and unto dust shalt thou return," was uttered, fever has stalked over the earth like a conge-  
ror, hurrying generation after generation, of the human family off the stage of earthly action, to that ultimate destruction of man where there shall be no more death.

And, as no age of the world has been exempt from the ravages of fever, so, neither has any country or locality.

The proud and haughty Greek, while giving the world lessons in philosophy, was arrested by a morbid process in his own organization, which his own

philosophy could not explain. The 2  
Mongolic Egyptian, while viewing those  
tremendous monuments of his archi-  
tectural skill, and of his country's num-  
erical force, was seized with a thirst  
that his own Nile could not quench.

When the triumphs of Rome's soldiery  
was heard round the world - Scipio  
batling in Africa, Sylla in Asia, Caesar  
in Europe - fever was silently, but surely,  
doing its work of destruction, with  
tenfold more fatality than they.

In whatever region of the world the  
hardy Britton is called in following  
the fortunes of his country's ~~the~~ friends  
this his rival scourge of our race, is  
always in action.

As it is our country's mission to  
liberate the world from the manacles  
of false religion, and false politics



may it be her destiny, by carrying the laws of Hygiene to the ultimate perfection, to free it from its greatest physical evils, fever.

Nature is uniform in all her laws, and in the morbid process of the animal economy, as in other departments of her operations, there are classifications by genus and species.

The general traits of fever are the same everywhere, but, the species differ as widely as do the fevers of the vicinity of the Pontine marshes from those of the valley of the Nile or those of the New England States from those of the valley of the Mississippi.

The fevers of any of these localities may be modified by innumerable circumstances which reflect themselves

in individual cases. Of the genus, 4  
Fever, it may be said that there are  
chills, followed by increased heat of  
skin, quick pulse, languor, and lassitude.

Of the species, Bilious Remittent Fever,  
the following dissertation is intended  
as an outline view.

Bilious Remittent Fever, may be regar-  
ded as the endemic fever of marshy  
and alluvial countries.

It is rare in the mountainous and hilly  
districts of our country, except where  
there are large streams or ponds of  
standing water. It is almost exclusively  
a disease of the summer and autumn-  
nal months, affecting all ages, and  
all grades of society.

Its periodical elements is the leading  
feature of the disease - of which the  
intermittent is only a milder and the

5-  
Congestive a more severe grade.

But with these grades this epay has nothing to do.

The disease tho somewhat abrupt and well marked in its approach, gives warning of its coming by a disturbance in the innervation, as the languor, pain or uneasiness in the head, feeling of general soreness indicate. The tongue is slightly furred near the root.

During the first few days the patient is going about, and engaged at his ordinary business. A sense of chilliness, amounting often to rigors, marks the formal access of the disease. This is followed by increased heat of <sup>the</sup> skin, and acceleration of the pulse, constituting the febrile movement, attended with muscular debility, depression and reaction, and the daily exacerbation



impressed on all febrile action by 6  
The rhythmical movements of life.  
Now, follow the congestions, and the  
disturbance of function to which they  
give rise.

These are most generally, if not always,  
of the Spleen, Stomach, and Liver, as the  
nausea and vomiting, the fulness and  
tenderness of the right hypochondriac  
region, and the yellowness of the skin  
and conjunctiva indicate.

The disturbance of the nervous system  
is greater after the full development of  
the disease, the pains in the back and  
limbs being very severe; the face is  
flushed, the eyes are red, and the  
headache very distressing.

The action of the vascular system is  
greatly increased. The pulse during  
the exacerbation, frequently rising to one

hundred or even to one hundred and 7  
twenty or thirty beats in the minute.

Following the disturbance of the nervous  
and vascular system, we have disturb-  
-ance of the secretions.

The tongue being slightly furrowed at the  
outset, after the disturbance of the secreti-  
-ons, becomes covered with a dirty white  
or yellowish fur, retaining its moisture  
in mild cases, but in grave ones, becom-  
-ing parched and dry, brown or nearly  
black, on its upper surface, and red on  
its edges, and sometimes indented by  
the teeth, in consequence of being some-  
-what swollen,

The patient is often troubled with  
uneasy sensations, about his fauces,  
which causes an almost constant haw-  
-king. There is an entire loss of appetite,  
but, there is an intense thirst, cold and



acidulated drinks being called for.

The bowels are generally free from irritation, and instead of an increased action, there is ~~often~~ the majority of cases often torpidity which requires medication.

The stools are generally disordered, sometimes dark colored and offensive, but mostly bilious, with some shade of yellow or green, dependent upon the

The urine, in the remission is almost natural, but, during the exacerbation, it is scanty and high coloured.

The respiratory organs generally present, only hurried breathing which is, <sup>the</sup> characteristic symptom of the disease, usually occurring in the morning.

The duration of the disease is generally about ten days or two weeks. Mild cases occasionally, lingering much beyond this time, assuming in fact, a low lingering

type, known as the typhoid stage of 9  
bilious remittent fever.

The pathology of fever is not well understood. The most constant alterations in the fluids, is a diminished quantity of fibrine in the blood. This is, perhaps, always the case when there are no inflammatory complications. The alteration in the solids, is entirely dependent upon the development of congestion or inflammation.

These may be divided into those which are constant, and those which are accidental.

In bilious remittent fever, as the symptoms would indicate, the constant alterations are in the liver, stomach, and spleen.

The accidental alterations may be of the brain or spinal marrow, the lungs or of the bowels. The alterations in the liver and spleen, are the results,

most generally of congestion, those of  
The Stomach and the accidental alterati-  
-ons are, most generally those resulting  
from inflammation.

Of the liver there is increased volume,  
softening, and a change of its natural  
colour to a slaty or bronze. The spleen  
is almost, always enlarged, sometimes to  
four or five times its healthy dimensi-  
-ons, softened so much in many instances  
as to resemble loosely clotted blood, and  
of a dark color.

Of the Stomach there is redness, vascul-  
-arity, and softening of the mucous memb-  
-rane. An emanation from low, marshy  
grounds, in warm, wet weather, known  
as the marsh miasm or malaria, is the  
reputed efficient cause of bilious remi-  
-tent fever. Exposure to a change of  
temperature, from a high to a low degree,



is the most common exciting cause. 11

The diagnosis of bilious remittent fever is not attended with any great difficulty.

The seasons of the year and the locality assisting materially; as the warmer months and a near vicinity to malarial localities, favour the production of this form of fever.

The diagnostic marks are the daily remission of the febrile movement, irritability of the stomach, fullness and tenderness of the right hypochondriac region, yellowness of the skin and conjunctiva, suspended biliary secretions.

dirty white or brown fur on the tongue, severe pain in the head and back, and the urine scanty and high colored.

Even when the case lingers, and the typhoid element of pathology develop itself, the periodical remissions, and the absence

of any cutaneous eruption, prevent it 12  
from being mistaken for one of the fevers  
of the continued type.

The mortality of bilious remittent  
fever, under judicious management, is  
not very great, consequently, the prognosis  
is generally favourable. Long duration  
of the remissions short duration of the  
exacerbations, decrease of the pains  
indicative of local congestions or inflam-  
-mations, and an improvement in the  
character of the secretions, indicate a  
favourable event of the disease.

A short duration of the remission, long  
duration of the exacerbations, the local  
congestions or inflammations more intense,  
and the secretions more vitiated, argue  
an unfavorable termination of the disease.

The treatment of bilious remittent  
fever is reduced to the utmost simplicity.

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If the vascular excitement runs very high, general depletion by the lancet, if the local complications are very severe, depletion by leeches or cups, mercurial purge to unload the bowels and establish the proper secretions from the liver, and the use of quinine during the remissions, constituting its principal medication.