AN

INAUGURAL DISSERTATION,
ON

Billious Remittent Gastric Remittent fever

SUBMITTED TO THE
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BY

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OF

Waller County Geo

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Billious Remittent - Fever, Gastric Remittent.

Under the influence of prolonged heat or unfavorable situations remittent fever while it still retains its inflammatory character assumes the appearance of derangement of the biliary apparatus with a yellowishness of the skin constituting the billious or biliary inflammatory variety of remittent fever. Its analogy in course and history to malignant intermittent as declared by Dr. Dickin to be very close "from a continued fever it is widely separate." The chief seat of the disease is in the stomach and duodenum with the inflammation of which the brain greatly sympathizes. Hence in addition to the vomiting violent pain in the stomach and back there is often excruciating head-ache most-felt in the supra-orbita region and delirium here the
flushed the eyes full injected and as it were in-
flamed. The nausea is increased vomiting comes
on and much bile is ejected in this way, and
sometimes passes off by the stool. The pulse is
fuller and sometimes rises 90 and is hard. Often
also it yields to the pressure of the physician-
finger and beats from 90 to 120 in a minute.
The breathing is more hurried restlessness great
thirst. At times the patient in this state of nausea re-
jects every thing offered to him in the way of al-
iments and also of ordinary drinks. The tongue
is loaded with a yellow deposit in the center and
is red at the borders and point. Dr. soon exhibits
a brownish yellow crust or fur. Delirium some-
time occurs and aggravated pain in the back
and limbs. although often with the fibril reaction
there is diminution in this respect. After a pe-
riod of indifferent duration a slight moisture
and lesions observed after death as inflammatory and mortification of the stomach and duodenum. This
fur is supposed to bear a resemblance to the yel-
low fur. This peculiar fact has been noticed
by Pringle and other army surgeons.

Symptoms - The first and most uniform symptom
of bilious remittent fever is an indescribable un-
healthiness of the stomach soon followed by languor
and weakness. To this succeed coldness and chill-
ings of varying degrees. Vertigo caused violent pains
of the head and back. The face is pale, skin dry,
corrugated. Eyes languid and hollow pulse fre-
quently and small breathing laborious and interrup-
ted by sighs. These are the symptoms corres-
ponding with the cold one of intermittent fever with
the continuance of the paroxysm. There is a blend-
ing of the sensations of cold and heat - but the lat-
ter acquires the ascendancy and the face becomes
flushed: the eyes gull injected and as it were in-
flamed. The nausea is increased vomiting comes 
on and much bile is ejected in this way, and 
sometimes passes off by the stool. The pulse is 
fuller and sometimes rises over 90 and is hard. Often 
also it yields to the pressure of the physician-
finger and beats from 90 to 120 in a minute. 
The breathing is more hurried resting great 
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period of indifferent duration a slight moisture
shows itself in the face and forehead which gradually extends over the rest of the body and brings with it a decrease in the violence of the symptoms. A remission—in fact, in the remission the pulse returns almost to its natural standard as regards force and fulness but it is still somewhat more frequent than in health some but greatly mitigated headache and pains of the back remain as also do an unpleasant taste in the mouth anaesthesia oftentimes a short and sometimes a barely perceptible remission it may be called diminution of the fever. A fresh paroxysm or exacerbation comes on which is now however seldom ushered in by chill but there are aggravations of headache gouty restlessness and anxiety Cardiogia nausea vomiting and sometimes bilious depictions. The matters vomited are often of a changed colour.
being sometime like a mixture of bine water and coagulated milk at other times glairy, mixed with dark grumous matter or particles of bile. The febrile heat, unquenchable thirst and delirium returns the throat tongue becoming encrusted with a dark or black matter in the center which also shows itself on the teeth and inside of the lips. The breath is offensive and hot. These symptoms are mitigated in a fresh remission which however is shorter and more imperfect than before and is soon followed a renewal of the exacerbation with aggravation of the disease and includes great muscular weakness and prostration. If this seeming exception to this latter is during the irregular effects delirious excitement in a puerperal period. The vivid flushed of the face is now replaced by a dingy, life appearance approaching to a
dirty blue more evident in the face where the disease has continued for several days with increasing disability. The skin and eyes are apt to assume a dull yellow color at the same time that the features are shrunk and hollow. This yellow color following the discharge of bile has contributed to the use of term "billions" by which the remaining forms of warm latitude are generally designated into a discussion as to the propriety of this pathological view I shall now not engage. That the liver is greatly implicated by functional disorders at the same time that there are constant and evident lesions of the stomachie and duodenum, I may be well doubted however whether the change of the skin be dependent on hepatic derangement as much as a morbid condition of the general capillary condition. In some conditions
or cases the strength is greatly prostrated from the beginning in others it decreases gradually in the latter remissions but although the patient himself makes no mention of it the extremities are rather cold during the paroxysm and at the very time in which the skin of the thorax or abdomen are distressing hot. The perspiration is in the earlier remissions is subsequently insensible. But it is replaced by a cold clammy sweat on the extremities. The secretion of urine varies in its character with the successive changes of the paroxysm. It is in the beginning of the latter pale thin and copious at its height high color or of a deep reddish brown scanty and cloudy and at the decline it is still very turbid and high color and lets fall a sediment which is sometimes like brick dust. And again of a muddy flocculent appear
ance. The closing scene in fatal cases is well described by Dr. Currie. In his description of the bilious remittent fever as it usually appears in Philadelphia in summer and autumn, "of late years we see little of this fever in the city and contiguous districts. On the confines and adjoining regions it still common enough and in seasons of epidemic visitation it appears to assume features of violence and complications that might satisfy the most exacting of our professional brethren from the far south and west," Dr. Currie says. "When this fever proves mortal and the strength is nearly exhausted, the patient as in the last stage of other fevers lies altogether upon his back and frequently slides to the foot of the bed. In this condition he has more or less twitching of the tendons at the rest; and
is affected with low delirium in which he mutters incoherently to himself. His tongue, his teeth and lips are covered with a dark colored corroded exudate. His tongue trembles when the rust-forths from the mouth for inspection. His eyes appear dull and stupid, insensibility which in the early stage of the disease was too acute is now the reverse. His hearing becomes impaired, the eyes with mouth half opened. He sees objects indistinctly and clouds appear to hover around him. A stupid insensibility paralyzes all his faculties. The sphincters lose their retractive power, the feces and urine involuntarily. And as if lamenting his hopeless condition tears streak down his ghastly face. The pulse hastes and only moves in tremors loosening on the slightest pressure all motion. A cold and clammy sweat
becomes his torpid limbs; his fingers his nails
his lips grow purple. This respiration becomes
interrupted by a collection of phlegm occasioning
a peculiar rattling in the trachea vulgarly
called the death rattles. Frequently interrupted by
hiccups. These symptoms are generally soon
by death. In some cases this fever is pro-
terminated from one to four weeks in others it
terminates in a perfect termination in so
many days especially if properly managed.
Cold and clammy sweats are almost invariable
signs of approaching death. In every stage
and period of this disease a perusal of the de-
scription by Dr Currie of the bilious remittent
form of Philadelphia written in 1798 and
of the well written essay of Dr Bowling as
it occurs in the Southern part of Alabama.
will satisfy the attentive reader of the general
sameness of the pathogononetical character of this disease in places situated far from each other by many degrees of latitude. The same general condition of atmospheric dis-temperatures by heat and moisture alternately with coldness and of particular con-
dition of soil being present, Dr. Bowling thinks that the representation of some authors of the bowel being obstinately constant in the form is a mistake. In this belief he is countenanced by Dr. Currie. He describes diarrhoea as an un-
usual disease but this writer judiciously states in another place of his description that in cases marked by high arterial action or inflammatory symptoms the operations of bile is an unusual symptom and the patient is inclined to be constant until after the preternatural and strong action of the arteries.
is reduced by depletion. Dr. Cunin states that in beginning of description that in many cases the cold stage is accompanied with cholera. In others especially when the febrile attacks persons of a plethoric diathesis are strongly disposed to local inflammation. It is attended with looseness. It is not uncommon however as Dr. Berson relates to all they who have seen the disease must know for a perfectly accustom least natives residing sickly and strangers frequently familiarized to the air of these places for often the tenth or twelfth day into a low state of fever resembling the less severe grade of Typhoid Fever obtaining the designation of the Typhoid Stage of billions fever. Diagnosis. It is well remarked by Dr. Bornick between a well marked case of remittent
from the distinction is palpable and the diagnosis and yet they run into each other by such imperceptible gradations that they physicians is sometime puzzled under which head to place a given case. A case is the distinctly transmitted at first will prove if neglected or injudicious treatment sometimes gradually and almost imperceptibly assume a remnant form when they are at least but modifications of the same disease and may be supposed to present to present corresponding pathological changes. Dr. Cunis says expressly from the remission it differs in no essential respect excepting in the violence of its symptoms. The remission in most cases of each being one day more perfect than another.

Dr Diton also mentions the striking analogies of billions remitted in its course. 4
progress with the period of the double tertian
formity described particularly known evi
to mines and the common people that the exac
turbation of alternate days offer a very not-
table correspondence in times of invasion
mode of access degree of violence and length
of duration. They preserve throughout in many
cases to the particular determinations which they
are connected or complicated thus the head
will be most affected in the first-third and
fifth days and the bowels in the
second and fourth and as on. We must oc-
casionally with examples of equally ob-
vious analogy to the Triple tertian. This
will occur on alternate days in that two
definite exacerbations with but a slight
and transient recession between them.
The distinction between remittent  
Typhoid
fever is sufficiently obvious at the outset but as the period is prolonged there is no little community of symptoms among these diseases. The typhoid stage of bilious remittent approximates very closely to typhus proper and the pathological changes is or ought to be in harmony with the general symptom in treatment.

Prognosis This is always grave when bilious remittent terminates favorable. The remission becomes more distinct and are marked by a warm and diffused moisture of the skin, a copious sediment of the urine a more regular action of the bowels moisten tongue less frequent pulses with diminution of nervousness and inclination to natural sleep. The season of the year and of the weather and especially present an evidence constitution and a particular locality modify not a
little the result Great- and sudden deterioration to a particular organ is a bad argument. The constitution and habits of the individual himself as being unacclimated or of intemperate habits will influence us in making an unfavorable progress.

Treatment—In the treatment of this fever is an analogy to that of the simple inflammatory with this important reservation that we cannot bleed with the same freedom nor frequency in the latter as in the former. In the young and vigorous subjects recently arrived in a sickly region association to an extra-short of syncope when had recourse to early in the disease will precede other remedies but— if we look for a solution or some material curtailment of the disease by this means we shall be greatly disappointed. The pulse is read.
ily reduced by concussion but it soon recovers its morbid character and shows that it does not represent simple vascular treatment worse we run assumed that gastritis and associated diseases of the brain and meningitis was present in every case of the form. We could not hope to remove them by copious blood letting to prevent disorganizing inflammation and allow time for the tissues to recover gradually normal rate and the nerves and vascular to be correspondingly tranquilized is all that we can expect by any mode of treatment in this form. May I not add in all forms however strange it may be evidence of inflammation associated with them accordingly after a full concussion we must rely on topiest depletion by cups or leaches for the relief of the head and stomat.
In those who are natives or long-residents of warm climates or sickly regions, topical depletion must generally be preferred to immersion. It may be of some benefit sometimes to use warm mustard cataplasms or other fomentations with results little less impressive and satisfactory than those obtained from the other means. The continuation of the treatment will consist primarily of the cold bath and cold to the head. I must here recommend the strong mustard and hot-baths as was directed in your bygones, to prehend a point into a reaction than limping about with bare shins. If he should be so fortunate as to recover from the fiery treatment of heat, roasts and blisters, but wisdom in these latter days has pointed out a better way. This wisdom I have -
seen many days past, but feared to act till I now see it—through my honorable teacher, Dr. Bowditch, who has made the way clear and plain and helps me to see the great good of cold water; drinks if caused by the patient purgation enema in the lower stomach.

The close resemblance between the hot stage of intermitting and the expectation in remittent fever would of itself (apart from direct experience) encourage us in the latter to use the remedy of the cold bath, which has been found so effective with the knowledge derived from long and attentive observation of the beneficial effects of this remedy in nearly all the cases of fever, including the remittent. I cordially concur with Dr. Bowditch in regarding it as among the most efficacious of our febrifuge remedies. All that we can hope or anticipate from blood letting
may be obtained in a majority of cases by the use of cold baths. While the latter promises the drying and obvious advantages that we can repeat it as often as the symptoms are renewed that require it, it may be used by affusion where the patient is able to sit up and in other cases where there is great local determination, but as in the腼刺head we may direct ice or cloths taken out of cold water to be applied to the parts with the marked soothing effects. For and irritable stomach or craving thirst. This remedy and an allowance of ice water for drinks or ten bits of ice allowed to dissolve gradually in the mouth are preferable to all the draughts and nostrums hitherto devised. Immersion can be practiced where a bath tub is at hand by assistance raising the patient in a sheet and placing him gently in the water, if a prompt and deadly sedative
impression be desired Cold Water may be poured
at some height - on the head and along the spine
If this is not done will or produces too much of a
shock take a sponge or a large towel and both
the patient - till he is cooled of his febrile heat and
the pulse is softened and easy and he will then be
willing to say God bless you my Dr -
for ordering such a remedy But while this is
a quick remedy we must be cautious not to use
it - where there are great discharges of debility
because in such cases if we should fail obtain
its tonic effect - we have only aggravated the then
existing difficulty by driving the fluids to the centre
the system being too weak to produce reaction Remember
the use of
in such cases where cold water is had recourse.
To be sure to use much friction This will stimulate the
Capillaries and promote greatly the reaction &
a determination to the surface. In continuation of the
treatment of remittent fever we have recourse
to enemas as a means of relieving the lower
bowels; the stomach and upper bowels ought
To be spared the irritation of alter emetics
or drastic purgatives. But in an rect on
this account, to deprive ourselves of its cool-
thing or sedative effects of colonel in dose of
five grains with a little gum arabic every
4 hours. If sickness of stomach or nausea
follow its use we not worry and intellest that
stomach with aromatics, or Cordials or even
effervescing draughts but give merely a few spoon
fuls of at a time of tolerable thick gum
water. If the patient feels some inclination to go
to stool or movements in his bowels
showing that the colonel has passed down
wards, is a simple change of salt and water.
will suffice to procure a bilious evacuation which is an evidence not a cause of relief. Should not this not be deemed sufficient treatment? Rheuma + magnesia may be administered; I repeat that active purging should be avoided but yet as part of sedation that Colonel may be administered in the manner already directed. Nor would I recommend saline but on the contrary that 21 should be depurated Colonel often performs good service without causing either purging or retention. Dr. Bates has certain stomach and fibril heat—causes a cool & soft skin and moist tongue. It is not an important index as to the relief of the intestinal catarrh and chiropractic views generally. Opium with held until venesection or caressing + leaching of Colonel has reduced the inflammation and fibril excitement.
and brought about languor and a more distinct remission will now display its proper soothing effects by inducing sound and refreshing sleep and by completing the beneficial effects upon the skin and capillary tissues in general which was begun by the Colonel. This last medicine is safe but proper and safely given during all that period of fever in which the system is not to be affected by it—That is during the period when it fails to activate its own as we have the slightest evidence of incipient phthisis the wrought on to desist from its use. We have now procured its appropriate sedation and counter-inflamed effect and a reaction curing inflammation of the delirium glands can not but be injurious and more or less subversion, the good already accomplished
Now shall I dare to bring to notice the following treatment after having urged so carefully the very mild course of treatment above considered. But allow me to say that, in unburned things, I do know that I have in my short practice have been the means of breaking up severe attacks of bilious remittent fever by first giving and emetics followed afterwards by a large dose of cannabis combined with an oil. I have often been called to see a patient and find him suffering with a severe headache, pain in the back and legs, pulse full and strong, suffused eyes and delirium. The question then came to my mind what is the great cause of this distress? The answer comes to a cited bilious condition. The liver is loaded
the stomach & abdomen is caused by its acid influence upon it. It is not healthy bile. To this is added other morbid and poison matters. Maybe they get rid of this but she is too weak. I then determined to aid her by giving a full dose of speciosa. This medicine here performs many times what would take a week by the mild means of the administration of speciosa under these circumstances I always cause the patient to drink a large quantity of warm water. It seems to have a happy effect upon the whole system. It washes out the stomach and leaves the patient free from thirst. The pain is gone from the head & a gentle perspiration is diffused over the whole body thus as it were making a clean shaking of the fever in 24 hours.
giving the full opportunity to bring to bear the "Champion Curmudgeon." If we can by any means bring about a decided improvement in this fever we have it under our control. It may be asked upon what consistent rule would you join the traction in the last-described condition which appears to contraindicate something when there is so much fulness of the head. The answer is this: while under the nauseating influence of opium the whole arterial force is completely reduced. But in case we fail in this under-diagnosis we will have to go back to first-principles and use the slow but progressive treatment. Of course this treatment will depend very often upon the stamina of the patient whether we bring all our forces to bear upon him at once or act by degrees if robust and strong.
we can come to a full change at once, but if
affirmative and of a weak nervous tempera-
ture, of course we must be careful not to
produce a shock to sink below equilibrium
and by so doing bring our patient into the
and irreconcilable condition. It is certain
we have a great many difficulties to contend
with in this fever. The nausea and prostration
leads our minds to many means and reme-
dies under such circumstances. I have found
such as opium as sedative. If I have often
found half grain doses of codeine or
add one or two drops of opium on eight or
of morphia grain in a little warm water. The
two remedies act in great concert in overcom-
ing the gastric irritation and checking
the nausea and vomiting. Great comfort is
often had in connection with these med-
...
derive by ringing clothes out of cold water and keeping them over the region of the
vomito - wetting the face with a mixture of
Camphor. If the vomiting continue we add
continue theimonial powder. And if
there be no other at any time to be great pro-
stration we give pure Molybdenum
mixture and sometimes the suspension will
be found useful in supporting the nervous sys-
tem. I will mention here that I have
used the lime water & milk with great
success in checking nausea & vomiting
If these remedies do not control the
above condition in the course of a few
days we had better use a blister of this
to the epigastrium if the state of inflam-
motion will admit of it. If not pursue
with ice and cold water cupping & leaching &c.
The syringes should never be forgotten in all of this condition. Sandnaum or cold water will often afford signal relief if but persevered in. This may always be used also where there is a tendency of the bowels to run off. Every time the bowels discharge their contents, at the same time it gives you at strength to the patient. Of course it will be found necessary here to consider some means the best calculated to nourish our patient. What kind of aliment is best my experience has led me to believe that does much good is far better than any thing else - made as follows: Wash corn meal, boil it with a sufficient quantity of water boiled from on to two hours; then add to quick one part of but milk. This will be retained on the stomach when all other articles are
rejected at the same time it will be found to sustain the patient well. In connection with the above from I might have within something in regard to congestion its effects in treatment but I hope it will be considered that I have been tedious enough but of course it matters not what condition there may be in it must be met on philosophical principles.

Reduce congestion or inflammation by equalizing the circulation keeping the bowels gently open also the kidneys. Indocin means will determine to the skin. Bleeding cupping leaching cold water blistering bathing friction are the great remedies to be relied upon. Assist motion but do not wound her child a fair chance she will do right nine times out of ten. This is my thesis to the president and faculty of the medical college of Nashville.

Daniel Abbey