An Inaugural Dissertation

On

Congestive Fever.

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By

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Congestive Fever.

If it be true, as is asserted by some
contenders, that Malarial Fever is a unit,
and that Intermittent, Remittent, Congestive
Fever, are only degrees of one and the
same disease — the measure or criterion
of the intensity of operation, of the same
agent; — then the distinction which many
have endeavoured to establish between
these several forms of Fever, is only
a figment of the imagination, an un
necessary and unwarrantable assumption;
whether we regard it, in respect to diag
nosis, symptoms or treatment. If the
phenomena characteristic of Intermittent
Remittent and Congestive Fevers, are more
ly the external revelations, of the same
decrease movements of animal and or
ganic life, differing only in degree
or in the intensity of their expressions.
it cannot be denied, that an imp
ortant point has been attained in
removing at least one difficulty from
the subject of Fever, and strong
encouragement held out to the medical philosopher to believe, that persevering investigation will yet lift the hitherto impenetrable veil which has shrouded the etiology of fevers in Egyptian darkness. There are many however, and we are among the number, who have yet to be convinced of the correctness of this theory, and are contented still, to consider intermittent, remittent, and ague fevers, not as the legitimate offspring of a common parent, differing only in physiology, "facies non omnibus an tamen hae divers, qualis debet esse cororum", nor yet as totally different in their etiological relations. But sufficiently so, in a practical point of view, to justify us, in regarding them as groups of phenomena, originated, and maintained by, causes or agents, dissimilar in kind and effect, and hence, that a sound philosophy dictates the propriety of pursuing our investigations into the
Nature and remote causes of this class of fevers, without reference to a supposed identity or relationship of the exciting agent—cherishing the hope that after the problems proposed in these respective groups of phenomena, shall have been satisfactorily solved, and every element subjected to a rigid analysis, the sum of the three quotients taken together will indicate with mathematical precision the identity or nonidentity of the "Matrice Moti" or Malarial fever, and establish a degree of certainty in diagnosis, and success in the treatment, that the most sanguine had not dreamed of: And in the event that future investigations should establish and demonstrate the unity of the multitudinous class of fevers; the medical profession will have attained to a facility in generalization, a correctness in diagnosis, and a degree of success in therapeutics, that will revolutionize medical science, and usher in a sort of millennium in the
Medical world. But we are not sang

tine enough to believe, that the era of
the Millennial glory in medicine, is so
near at hand.

B. Wood in his "Practice of Medi-

cine," employs the term "pneumonia," to
distinguish this form of fever, and objects
to the word "Congenital," as it not only
belong to a "wast number of other affec-
tions," but is calculated to mislead
the practitioners or student, as to the
nature of the disease,"—that is—if we
rightly interpret his language, Congestion
active or passive, being an element or con-
tinuation in many diseases, it might be
inferred that Congestion, which he says,
certainly exists in this affection, was the
essential morbid condition, the source of
all the characteristic symptoms, and the
immediate cause of death in fatal

cases; in other words, he regards what
we call "Congenital fever," as only an
aggravated form of intermittent or len-

tient fever.—The Congestion being any
an accidental phenomenon, and bearing no relation, or a very uncertain one at least, to the result, and proposes to restrict the api = that Congestive, "to an affection, in which there is a great and sudden prostration, or deprivation of the nervous system, extremely dangerous inflammation."

We are not acquainted with Mr. Wood's peculiar views on the "modus operandi" of the malarial agent, but we have taken it for granted, that all we yet know of the class of diseases termed fevers, is from the symptoms, as expressive of the several conditions existing in the organs of animal and organic life, attaching that epithet which the most prominent and grave symptom or peculiarity seemed to suggest. A complete and perfect intermission is a striking peculiarity of what is termed intermittent fever, and hence the epithet—though it is admitted that congestion to some extent, exists during its early stage. More or less marked
Remission is noticed in fevers denominated remittent, and though there is some degree of congestion manifest at certain intervals, as it is only transient and productive of no immediately grave symptoms, the term remittent has been agreed upon, as an apt designation.

The term Congestive has been applied to denote fevers, in which the Congestive element was the most prominent, productive of the most dangerous symptoms, and terminating only in death or convalescence. We do not believe that the experience and teachings of Northern practitioners are altogether reliable in the treatment of Congestive fever in the Southwestern States. Every intelligent physician in the South knows full well that Congestive fever is a dangerous affection, from the fact that there is a congestion of some one or more important organs, and whether it regards...
theory be correct or not,—whether the congestion be accidental or an essential element of the disease. He looks to the congestion, as the most dangerous feature in the case, and employs the most potent remedies to correct this condition. Confident, that a resolution of the congestion, or, if you please, the eradication of the congestive element is the almost certain prelude of his patient's amelioration. And hence it seems to our mind, that a condition of the system, whether regarded as accidental or essential, which involves so unequivocally the issues of life and death, consistent with the other symptoms, ought to be treated as at least an important element, if not an essential part and panel of Dr. Wood's "Persian Fever".

If Dr. Wood asserts, the disease is essentially a "deprivation of the nervous system," or a "dangerous and
defective innervation, the effect of the malarial agent, we should think, that the use of artificial heat, as advised by him, calculated rather to aggravate the deprived state of the nervous system, and precipitate the patient into a hopeless collapse. And it is the testimony of Southern practitioners, with but few exceptions, that the hot air or water bath almost invariably increases the prostration, and decreases as a consequence the chances of reaction;—while on the contrary, decisive bloodletting which he so strongly recommends, is frequently attended to by Southern practitioners, in the worst cases, and with the most unquestionable success. Again, it now recommends, and consistently too, perhaps, with his pathological opinions, the free use of the sulphate of quinine, in the "prostrate" or worst cases. The experience of Southern physicians on this point, however, is almost unanimous.
that this medicine administered in any sized dose in the present cases of congestive fever is generally used than useless, and is rarely employed at but little relied upon, during the existence of the congestive state.

Another remedy of much value in the estimation of Dr. Good is Colonel, which he advises in some cases to be given to pyrexia. It is admitted we believe, that dephlegmation of the nervous system, or dangerous innovation, the essential pathological condition in congestive or putrid fever as taught by Dr. Wood, is the prominent pathological element in a dynamic or typhoid fever, and from the acknowledged unhappy effects of morbid irritation in the latter disease, we would naturally conclude that such an event should be as strongly deprecated in the treatment of congestive fever. We are at a loss to understand how it is, that a "dangerous innovation"
or deprivation of the nervous system, induced by the direct operation of the malerial poison, should be relieved by ptosisism and the same pathological condition of the nervous system in adynamie fever, generally aggravated by such an effect, as much as at least, that the event is usually guarded against.

Dr. Condie in a note to Dr. Watton's "Practise," treats this assumption of fever, as "a form of bilious intermittent," and straitway confounds it with "bilious remittent." When he says, "the remission of the fever in the congestive form are not well marked, or rather, there is an entire absence of the febrile exacerbations and remissions." We are at a loss to understand the propriety of calling it a "form of bilious remittent fever," when it is admitted that there is an "entire absence of the febrile exacerbations and remissions." We think that according to the testimony of Dr. Condie himself, congestive fever...
ought to be regarded, as a disease distinct both from remittent or intermittent fever, as the only point of coincidence according to him, is the cellular arrangement, which is quite as common, and certainly as much a condition in yellow fever, and Cholera, as in remittent and intermittent fevers.

Dr. Condick views of the pathology of this disease seem to coincide essentially with those advanced by Dr. Wood, "apertive instruments," and he recommends as the most important remedy, the free use of artificial heat, by warm water or followed by a full dose of Dover's Powder.

It is imprudent to place a patient in warm water, and administer a nauseating medicine, when his skin is clammy or "act with a copious perspiration," and all the functions of both animal and organic life prostrated, may not seem inconsistent to Dr. Wood and Condick, but we marvel, if ever...
intelligent southern practitioners would not consider such treatment, a very quick mode of dispatching a bad case.

That there is in many cases marked bilious arrangement, we will not deny, but that it is to invariable and grave a symptom, as Dr. Onslow represents, we have no reason to conclude from our observation of Congestive Fever in the Southern States. The function of the liver, is probably not more disordered in Congestive than in some other fevers, perhaps not more than in fevers generally, but we agree with him as to the value of Colomel as a stimulant and astringent, but not in combination with Aloes and Camp or Qh姜, followed by a Cathartic infusion, as advised by him during the Congestive period. No point, in the treatment of Congestive Fever, is perhaps more unanimously understood among southern physicians, than the dangerous effects of Cathartics, previous to the resolution.
of the Congestion, and the complete establish-
ment of reaction (if the term be proper,
which we doubt). Headache is a frequent
symptom, and in cases where it does not
actually exist, so strong is the proclivity
to it, that purgation almost invariably
excites a very troublesome evacuations, and
appreciates the phenomenon of congestion,
and in a large majority of cases, it
certainly would be quite as assiduous,
to administer cathartics in thecollapsed
stage of cholera.

Dr. Armstrong in his twelfth
lecture, describes a "sort" of fever which
he called "Common Congestious Fever" produced
as he believed by "Common occasions," as
he termed the exciting causes; but from
the history of the symptoms, it had
evidently the same disease, be it
Congestious Fever at the present day,
tho' modified in some respects
by Climate, habits &c. But the hot air
bath so highly extolled by Dr. Armstrong
would be absolutely erroneous in the
treatment of Congestive Fever in the Southern States at least; and a Dr. W. Armstrong regarded "nerous prostration" and "muscular debility," as the most prominent conditions in Congestive Fever.

Our own views of the nature and treatment of Congestive Fever, whether produced by Malaria as believed, and correctly so perhaps by Dr. Ross, or by "Common Occasions" as maintained by Dr. Armstrong, may be inferred from what has been already remarked. We contend, that in the absence of a knowledge of the properties of an imaginary agent, as Malaria; it is our duty, to regard the symptoms in Congestive Fever, as the result of the Congestion of the several organs, and to be treated accordingly; especially, when we know, that upon the resolution of the Congestion, and the establishment of reaction, depend the safety of the patient in a large majority of cases.