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AN

# INAUGURAL DISSERTATION

ON  
*Syphilis as it  
appears in its three pathological  
aspects.* — 22

SUBMITTED TO THE

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BY

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OF

George Peabody

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To  
W<sup>4</sup>E, Bowling M.D.  
this dissertation is -  
very respectfully dedicated  
By  
The Author

Dysentery as it appears  
in its three pathological aspects

From the mixed character of this disease it has always been a question among pathologists, how to classify it, some considered it as an inflammatory affection, and that it was essentially & at all times contagious; while other writers appear to establish it as a genus under the division not of fevers but of fluxes, without any notice of fever, or contagion De Good arranges it under two distinct heads, Simple dysentery and dysenteric fever: I deem it altogether unnecessary for me to consider the disease in all of

its species given by the older  
writers, but I shall pass them  
by & take the disease up as  
it appears in its three great  
aspects, The first variety that  
I shall mention, is the simple-  
st form of the disease, and  
on that account has been  
called lycenteric per se, this  
form of the disease is generally  
very easy to manage if taken  
in time; a person may feel  
a sense of lassitude, want of  
appetite, nausea, depeeped pulse  
a slight chill; and after the  
chill passes off, he will have  
heat of the body, great thirst  
and dry skin; pain in the  
bowels, costiveness & often

diarrhoea, in this division  
of the disease the patient does  
not seem to have any malarial  
or typhoid diathesis, it is  
phlogistic in its character and  
seems to be dependent on infl-  
ammation of the lower bowel  
and especially the sigmoid  
flexure of the colon, the patient  
has a great inclination to go to  
stool, the faeces are small  
mucous and bloody, sometimes  
there is no blood voided at all  
they are often of a clay like  
appearance, or washings of meat  
when they are of the last  
kind mentioned, we may  
consider it as a favourable  
omen that the disease is

not of such a phlogistic grade as there would be if they were bloody or streaked with blood. Hematemesis seems to be almost a constant attendant with this disease, and the violence of this symptom affords us a very accurate measure of the degree of danger which may accompany the disease in whatever type it may appear, the termina are very great and distressing and the patient will complain continually of soreness in the abdomen. The prognosis of this form of the disease is generally a favourable one, when the inflammation is not very great & the

to emia, tenesmus, and tenderness  
of the abdomen abate & at the same  
time the skin becomes moist, we  
may come to the conclusion  
that the disease is rapidly ten-  
ding to convalescence; and if  
the stools at the same time turn  
to a more natural consistency  
we may be almost certain of  
the fact, I shall now notice  
the second variety of the disease  
A person has dysentery & is at the  
same time, under the influence  
of malaria; the great character-  
istic symptom of this variety,  
and which will enable us to  
distinguish it from all other  
forms of the disease, is the  
distinct paroxysms which appear

at different times in the course  
of the affection, And although  
a great many of the symptoms are  
identically the same as in the  
variety I have just mentioned  
still we can distinguish them  
with great certainty & exactness  
A person is taken with a high  
fever, has a distinct chill, there  
is more or less congestion, the  
spleen is enlarged, it frequently  
begins with a diarrhoea and  
afterwards the faeces become  
bloody with mucous & sometimes  
pieces of fleshlike substance come  
off with them; frequent going to  
stool; the stools are generally  
very small in quantity, And  
in the advanced stage of the

disease the faeces assume a very disagreeable smell. The patient may have an intermission or remission, every day or every other day; and as soon as the fever goes off, the dysenteric symptoms somewhat subside and then his whole body becomes moist with perspiration. And with the exception of his having dysenteric symptoms, he will seem to be laboring under ordinary malarial fever in some of its forms. I shall now take up the third variety of this affection. A person who has great debility of the system, with a loss of vital power, is taken with nausea & vomiting, feeble & irregular pulse

with rather a dark looking tongue, the skin may be very hot at one time, & perhaps the next hour, he will be as cold as ice, We may say almost for certain that he will have spots of some kind about the body; and they are generally of a dark color this stools will be dark & often have a reddish appearance, they will be much larger and will have a foetid odore & for the most part are very offensive  
He has diarrhoea in the begining and it will continue throughout the whole course of the disease; when this is the case, it is a dangerous symptom; the fever is generally slow and continued

All of these symptoms make out a disease that is more malignant and fatal in its character than any other known to the profession. There is a loss of strength, depression of spirits, and the patient will look dejected; this is attended with violent pains & sickness & if not skilfully treated, with great peril. For when the spirits are much exhausted & the heat of the system diminished, by such copious & frequent stools a coldness of the body may ensue and there is a danger of death even in the acute period of the disease.

Causes. Among the various causes which produce this affection may be enumerated; obstructed

perspiration by cold, a sudden change in the atmospheric temperature, is a frequent cause of mucous inflammation of the intestinal canal; a cold & moist autumn succeeding, a warm & dry summer is peculiarly favourable to the production of the disease, Some writers assert that malaria has an agency in the production of the disease to some extent I believe it has, but I don't believe that malaria of itself is capable of producing the disease, still I believe that it acts as an agent from the fact that in hot & marshy countries a person may have malarial disease and

at the same time have pure dysentery, the torpor of the hepatic & cutaneous functions in this disease, is proof enough that the cause is dependent upon the united influence of changes in the atmosphere <sup>upon</sup> & Malaria.

"Dr - Johnson says most emphatically that in every case of dysentery that has ever come ~~over~~ under his observation, two functions were invariably disordered, from the very onset, these were the skin & the liver; farther he says I defy any one who has regarded this disease at the bedside, to produce a single instance in which these functions were carried on in a natural manner at any period of the disease."

He is very correct in his conclusions, but I think he carries it too far, for most of the late writers in treating of this disease seem to pay but little attention to the liver, as if it underwent but little or no change at all, Let that be as it may, I know that this organ is often disordered in this disease, but whether it follows, as a natural consequence or not I am not able to say, Among the causes may be mentioned; the immoderate use of unripe fruit & indigestible articles of all kinds that have a tendency to irritate the bowels, Post-Mortem appearances. There is more or less inflammation of the large intestines, but in most instances inflammation &

its consequences are found nowhere  
but in the mucous membrane of the  
colon & rectum, there is sometimes  
inflammation of the mucous mem-  
brane of the stomach & it has been  
found of a deep red or purple col-  
-or, soft & pulpy, and often gran-  
-ulated; there is often structural  
disengagement of the liver, and  
its whole structure is sometimes  
apparently destroyed Treatment  
In the treatment of this disease  
it must vary according to the  
violence of the symptoms & its com-  
-plications with other diseases  
If it is simple dysentery it should  
be treated like all other simple  
inflammatory affections, And if  
there is existing in the system

at the same time a malarial or typhoid diathesis, co-labouring with it, one remedy should be directed accordingly; we should therefore first see which of the three great aspects it may assume; And if after we have made all necessary examinations, we should come to the conclusion that it was a case of simple dysentery, we should give our patient a purge (Epsom salts is one of the best) and then give him an anodyne, if <sup>this</sup> does not prove to be sufficient to reduce the local inflammation, we would give a large anodyne, with this treatment the <sup>patient</sup> disease will rapidly tend to convalescence, in a very short time By some of the old

whilst opium was considered as  
a nuisance in the treatment of dys-  
-entery; But it is our only sheet-  
anchor in this disease throughout  
its whole course I believe it is  
the only remedy in the whole category  
of medicines, that we can rely  
upon in the treatment of dysen-  
-tery, I would not take the re-  
-sponsibility on myself to manage  
a case of dysentery without the  
use of opium or some of its pre-  
-parations; Where there is great  
irritability of the lower bowels  
it is a good plan to give Clysters  
for this purpose Slippery Elm  
infusion answers a good purpose  
or we may use sweet-oil and  
starch, we may accomplish a

great deal from anodyne clysters  
for this purpose we may use laudanum or some of the salts of  
morphia in gum water or starch

In the second form of the disease the patient has a distinct  
chill; and it looks reasonable  
that we should employ quinine  
which is undoubtedly one of the  
best remedies we have, in this  
form of the disease, The best  
plan we can pursue is by giving  
a dose of Epsom salts & then  
give, sulphate of quinine and  
if the patient complains of pain  
and great tenderness of the ab-  
domen, we should give him a  
large anodyne; or we can use  
as a purge castor oil & turpentine

these parts of the former to one of  
the latter, we can give calomel  
or blue mass to advantage where  
the glandular system fails to perform  
its natural function, but as a gen-  
eral thing it is not admissible in  
this disease. In the advanced stage  
of the disease, when the system  
is very much reduced we can  
gain a great deal by the application  
of blisters. The counter-irritation  
produced by the blister, seems  
to overbalance the irritation  
within & we have a happy  
result, but we should be  
particular & not use them  
injudiciously for they may  
prove a source of evil, in-  
stead of good, to the patient.

The third form of Typhoid diatheris  
All writers when they come to  
the treatment of this form of the  
disease touch upon it as lightly  
as possible And of course I am  
at a loss to know what is to  
be done in such a loathsome  
& fatal disease as the one under  
consideration, sometimes I  
think that Physicians are in the  
habit of doing too much in this  
affection, & they kill their patients  
by giving them active medicines  
when they really do not need them  
Would Calomel be admissible here  
not by any means, give calomel  
to a patient that is sinking  
lower & lower every minute, when  
the vital powers & energies of the

system are depressed & he looks like  
pale death itself." To give calomel  
at such a time as this in my  
humble opinion, is but to aggravate  
the symptoms of the disease & to  
hasten the death of our patients.  
In this form of the disease the  
plasticity of the blood is diminished  
and to give calomel, is but to  
diminish it still more & we re-  
duce our patient, to such a  
low state, that it would be  
a matter of impossibility to bring  
about a restoration. I believe  
one of the best plans we can  
pursue, is, when the bowels  
act too freely, (which is nearly  
always the case) we should  
give large doses of opium & if-

we wish to give something to  
cleanse the bowels of allirita-  
ting articles, we should give  
turpentine, with a small por-  
tion of castor oil. Having in  
view at the same time, that  
he has a downward tendency  
& that we should give him  
something, rather to sustain  
than to weaken his bodily  
strength; for this purpose  
we have no better article  
than turpentine; and it would  
be a good plan to give it  
throughout the whole course  
of the disease, Where the hemo-  
-rage is very great, we may give  
sugar of lead to advantage com-  
bined with opium. In the

latter stage of the disease we  
may sustain our patient with  
beans, or a very good article  
is the syrup of dried peaches.  
In advanced cases, there is  
often a predominance of alkali  
in the secretions, at such  
a time, some of the vegetable  
acids are invaluable, Vale vale

Se hoc multi multa omnis aliqd  
nemo satis.

J. H. Rucker,  
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