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AN
INAUGURAL DISSERTATION

ON

Dysentery

SUBMITTED TO THE

PRESIDENT, BOARD OF TRUSTEES,
AND MEDICAL FACULTY

OF THE

UNIVERSITY OF NASHVILLE,

FOR THE DEGREE OF

Doctor of Medicine.

BY

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Dysentery

In surveying the vast field of the Medical Science in search of a subject for my Thesis. I have seen proper to select that of Dysentery being one of much practical importance.

Dysentery is inflammation of the Mucous Membrane of the Colon and Rectum. Acute Dysentery - The disease may occur with or without premonitory symptoms in the former case it is preceded by general uneasiness impaired appetite dull pains in the abdomen constipation or diarrhoea occasionally the local symptoms make their appearance before those of a general character, in mild cases run its course without fever. we are presented in different cases of Dysentery with a

regular gradation in severity from
a very slight affection, occupying but
a small portion of the Colon and
Rectum, without fever, and passing
in a few days up to the most danger-
ous form of disease to which the human
frame is liable.

In the beginning of Simple Dysentery
there are generally gripping pains in
the abdomen irregular in their
position and attended with dischar-
ges from the bowels by which they
are partially relieved. after a while
a sense of weight is felt in the
rectum with painful inclination
to go to Stool without evacuating
anything more than a little blood
mucous. This feeling of tenesmus
increases until at length becomes
the worst feature in the case
the calls to stools are very frequent

3 attended with much straining so much so sometimes to produce prolapsus Anni. The passages are seldom less than a dozen in twenty four hours often double that number

After the first few evacuations the stools are small consist of a transparent whitish mucus mixed with blood as the complaint advances shreds of false membrane or small masses of coagulated matter are occasionally intermingled and in some instances Scybala are discharged though these are less common than might be inferred from many published accounts of Dysentery; the bladder and urethra sometimes sympathize with the rectum and along with tenesmus there is frequent and

and difficult micturition, there is
more or less tenderness in the
Abdomen. The extent of the disease
can sometimes be traced by ascertai-
ning what parts pain is produced
on pressure. There is always
fever unless in cases of very
small extent. The pulse is full
somewhat accelerated. Skin hot
and dry urine scanty. Tongue dry and
covered with a whitish fur secretion
of bile diminished

The patient experiences a hollow
ness or sinking in the Abdomen
attended sometimes with nausea
and vomiting.

In vast majority of cases the disease
takes a favorable turn between
six and ten days. The patient has
through a very small and thread
like fully pale and clammy skin

anxious features and somewhat livid
or purplish appearance under the
eyes and about the lips and at the
roots of the nails with much tenesmus
and tenesmus incessant discharges.
Swollen Abdomen with great tender-
ness on pressure. Such cases prove
fatal in a few days though they
are very rare. According to some
authors occur only during Epidem-
ies. Should the symptoms not give
way in a weak they are all apt
to become aggravated. The Abdomen
becomes swollen more tender. The
discharges more frequent the
pulse weaker and more rapid
the Tongue assumes a dryish appear-
ance thrown of its fur becomes red
the patient is exhausted the stools
are more copious instead of being

men are sometimes nothing
but blood, even after the worst
of these symptoms the patient may
recover though the convalescence
slow and tedious

In most cases of Dysentery the
bilious secretions are diminished
occasionally disorder of the stomach
and liver attend the disease
from the beginning sometimes
called Bilious Dysentery.

Dysentery is not infrequently
associated with other diseases.
It is very common in miasm-
atic countries during intermit-
tent and remittent fevers some-
times appearing as a distinct
disease. When a decided fever
preceded by a chill has existed
one or three days before

The Dysentery begins there can
be little doubt as to the nature
of the case the fever is aggravated
at certain times every day or every
other day in the intervals relaxes
or entirely interrups the
Dysenteries spasmodus undergoing
the same change to a certain
degree. Typhoid is another form
of the disease which occurs in
individuals previously
exposed to wet and cold
unwholesome diet fatigue
and recklessness of every kind
combined with contaminated
atmosphere to prostrate the
vital powers. nausea and
vomiting great thirst a frequent
and feeble pulse a brown
Tongue sores about the teeth

a dusky skin sometimes hot
and sometimes cold dark
livid spots brown black
stools more copious than
in the simple disease
sometimes hemorrhagic dischar-
ges consisting of coagulable
blood all of these symptoms
are not found in every case
but sufficient to indicate
the character of the affection.
in the worst cases the patient
appears to be struck with death
in the beginning and the
disease proves fatal in a few
days

When Dysentery is about to
terminate favorably the pain
becomes less frequent the stools
become more copious and less

frequent and assume a febrile or bilious character at length nothing but a slight diarrhoea remains which soon ceases. On the contrary a sudden cessation of the vomitings and tenesmus. coldness of the extremities a perpustular hue about the nails a very frequent and irregular pulse hiccough involuntary stools dilatation subsultus tenditum are symptoms of the unfavorable kind and together produce a speedy and fatal termination.

Treatment: In very mild cases without fever it is very often sufficient to give a single dose of castor oil with twenty five or thirty drops of

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Baudamum if the case be
of a somewhat higher grade
a dose of Calomical may be
given followed by castor oil
in a few hours. If there should
be evidences of a loaded Stomach
an emetic may be given with
the calomical should the
Symptoms increase and fever
with a strong puls. Abdominal
pains. Blood should be taken
moderately from the arm after
the patient is bled and
purged he may be allowed
to rest awhile on cooling
drinks refrigerant diaphoretics
if the skin be hot and dry
should the disease not seem
disposed to yield to this treatment

by the sixth or seventh day the
mercurial plan should be
carried to slight salivation and
at the same time if local
symptoms are violent a blister
should be applied to the
Abdomen. The Billious variety
requires a more energetic employ-
ment of mercurial remedies
calomel may be given in
doses of fifteen or twenty grains
daily or five grains three or four
times a day until some impre-
ssion is made on the mouth
in Dysentery associated with
intermittent or violent fever
The same course of treatment
should be pursued as in the
common form so far as regards

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the bowel affection but it
is highly important also to
bear in mind the indications
presented by the general
disease. The most striking of
these is for the use of measures
calculated to prevent the
return of the paroxysm and
no remedy is so effectual for
this purpose as Peruvian
bark or sulphate of quinia.
in the Typhoid form the
bowels should be kept clear
of irritating or depressing matter
This should be effected by
medicines calculated rather
to support than to weaken
such as infusion or tincture
of rhubarb or castor oil

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with oil of Turpentine in
small doses

it is often necessary to support
the strength of the patient
by stimulants and nutritive
drinks such carbonate ammonia
wine whey wine and water
brandy and water sulphate
of quina oil of Turpentine
egg and wine &c in hemor-
rage from the bowels acetate
of lead combined with opium
and hino is perhaps the
most effectual remedy