

AN
INAUGURAL DISSERTATION

ON

Acute Sympathy

SUBMITTED TO THE

PRESIDENT, BOARD OF TRUSTEES,
AND MEDICAL FACULTY

OF THE

UNIVERSITY OF NASHVILLE,

FOR THE DEGREE OF

Doctor of Medicine.

BY

William Addison

OF

Tennessee

1858

W. T. BERRY AND CO.

BOOKSELLERS AND STATIONERS, NASHVILLE.

Dysentery -

As it is the custom for all medical students offering for graduation, to write a Thesis or Dissertation upon some subject pertaining to medicine; an account of which I have selected the one above mentioned; not that I expect to advance anything new as regards the disease; but simply to state what I think and know to be true. Dysentery is variously classed and divided by different authors; such as Simple, Bilious, Remittent, Intermitent, Typhoid &c. This variety of forms under which it makes its appearance is influenced by the condition of the system at the time of its invasion. If the system is saturated with =

Malasia, it assumes either the remittent
or intermittent form; If there is an
anaemic state of the system; a
vitiated state of the liquids; during
the prevalence of a typhoid epidemic;
it will very likely run into the typhoid
type; If any of the vicera is deranged,
this becomes a participant and the
danger is proportionally increased.
As I have before said, this disease
presents itself under various forms
and grades; varying from a slight
affection of the bowels, which passes
off in a few days leaving the
patient with a slight exception
in the enjoyment of health; to one
of the most dangerous and painful
to which man is subject.

In diagnosing a case of Simple =

lysis, there is but little fact
required. The symptoms are both
Local and general. The Local sym-
ptoms sometimes make their appe-
arance first; though generally pre-
ceded a few days by the premonitory.
Such as a chill, frequently very
slight, ^{occasionally} yet quite distinct; this is
followed by slight fever which
passes off in a few hours; Loss of
appetite, uneasiness especially in
the lower extremities. These are
followed in a few days if not
accompanied with griping pains
in the lower part of the abdomen;
recurring at greater or less intervals
according to its severity. A sense
of heat and weight, with a frequent
inclination to stool, and an =

inability to discharge nothing more than a small quantity of mucus, or blood and mucus; frequently not more than a tea spoon full is discharged, yet the patient will remain up 25 or 30 minutes, continuing his efforts to relieve himself of the imaginary weight that exists within him. This inclination to some extent, is under the control of the will; as I have known patients to lie perfectly quiet for hours, after having been convinced that this was only an imaginary weight and that one evacuation only gave place to another, whereas they might have been up 10. 15 or 20 times.

This is the simplest form of the disease, and the one most commonly met with, yet by no means invariably,

The Remittent and Intermittent are the next varieties most commonly met with, and prevails to a considerable extent especially in malarial districts.

The patient is attacked with a decided chill, followed by considerable fever; this may subside in 8 or 10 hours, or it may continue until the same time the next day; ending with a recurrence of the Siccina chill. In this as in the preceding variety the local symptoms may make their appearance with or a few days after the primary symptoms have set in; which is generally the case. In the more malignant variety, all the preceding symptoms are aggravated. From the first of the attack, there is high fever, nausea and vomiting, tongue dry with a

Brown or blackish coating, severe
pain in the head, general uneasiness &
The stools are more copious and of
a dark coffee ground appearance;
or having the appearance of soap suds
with coagulated blood and epithelial
scales floating within. The bowels
become tympanitic, and very tender
to the touch. The patient becomes very
restless, tossing himself about in bed;
will not admit of the lightest covering;
an incessant desire for water; constantly
calling for fresh air; great pain and
heat, frequently asking some one to
extinguish the fire that is consuming
his vitals; Cold extremities, clammy
perspiration; and in a short time
death puts an end to the agonizing
scene. I do not mean to say but =

what a patient may have an arm
of the last mentioned symptoms, and
then recover; yet when recovery takes
place it is slow and tedious.

The Causes are both predisposing and
exciting, a predisposition to dysentery
is produced by the influence of heat,
which deranges the hepatic function,
also the capillaries, relaxing the general
surface, which renders it less resisting
consequently more susceptible.

The exciting causes are various;
exposure to a current of cold damp
air, crude or indigestible substances
taken into the stomach, drastic
purges, worms in the alimentary canal,
hardness of feces, all produce or
aggravate the disease.

Cleanliness and ventilation is the

Best preventative we have, and
often have I seen the disease entire-
ly arrested in its progress; where
due regard had been paid to this
one particular. All decayed veget-
able matter should be carefully
removed from near the dwelling;
frequently you find the houses
built flat upon the ground, the
sills and floors of which soon
decay; this is especially the case
about negro houses, kitchens where
there is an abundance of fith
and moisture; My advice here wo-
uld be to get rid of such let the
expense be what it may.

As regards the Treatment of Dysin-
tery; He who relies solely upon
authors; will soon find himself erro-

elated in joy and dismay; as there is but few who agree in this respect. Consequently I say every practitioner has his own treatment, which is influenced by his success.

Having had a small share in the treatment of some 120 cases of flux during the last 9 months; I have witnessed the success attending the various forms of Treatment; and amongst them all, I have found none that is so efficacious in arresting the disease, as what may be styled the Salts and Laudanum treatment, I do not mean to say that this is relied upon exclusive of all other remedies; but with the assistance of a few auxiliaries, I have seen it fail in but few instances when

called early in the disease. Having
been called to a case of dysentery
I would administer 10 grs of Blue mass
& avars powder, to be followed in 6 or 8
hours by ʒss Epsomsalts and 12 or 15
drops of Laudanum. The patient
should have a preparation consisting
of ʒʒ Salts and ʒss Laudanum to a
pint of water; a table spoon full
of this to be taken at intervals of 2 or 3
hours, according to the urgency of the
Symptoms, throughout the disease.
At night the patient may take 10 or 12
grs of avars powder and chalk mixture
if there is considerable general fever
with pain in the head; great relief
and a reduction of the fever will
result from changing the head
and chest with cold water; at the same

time immersing the feet and legs in warm water. If the fever assumes either the Remittent or Intermittent type, Quinine may be given during the remission with the happiest effect, Quinine is also applicable where typhoid symptoms supervene; and may be given to a greater or less extent every day in conjunction with rhubarb & aces powder. This variety of the disease requires tonics and Stimulants; as the patient is generally faint with cold extremities especially morning and evening; Skin relaxed and not unfrequently bathed with a clammy perspiration, Quinine then with port wine will be of service, yet in the meantime we should not lose sight of the Salts & laudanum;

As we will now have to take an internal
or local view of the parts upon which
they have been at work; keeping every
thing as cool, clean & quiet as circum-
stances will admit of; and this is the
very thing we desire, for this offending
matter is continually being secreted
by the mucous membrane of the lower
bowel; and if allowed to remain keeps
up an amount of irritation, with an
aggravation of all the existing symptoms.

Then in my opinion nothing will
counteract this contraindication better
than our mixture.

As regards the local treatment; the
remedies should be in accordance
with the symptoms. If the bowels are
swollen, with tenderness, an emollient
poultice made from the decoction of

Oak bark, or what is preferable, the
Common peach tree leaves, where the
inflammation is more extensive a blister
should be applied to the lower part
of the abdomen, and cups over the
Sacrum. An enema of Starch and
Laudanum affords great relief; a
Solution of acetate of Lead or nitrate
of Silver assists greatly in combatting
inflammation. I might add other
remedies to this list, yet a few well
directed shots. is better than many dis-
charged at random.

As Convalescence advances so doth the
appetite, and I think well it may
far when the disease disappears in
search of other prey; it not unfre-
quently leaves its victim a mere
Skeleton and he thanks his God (not

the doctor) that he came off so lucky;
yet I say he should be cautious, as
a slight indulgence of his appetite
might produce very injurious conse-
quences.

Would that this was more worthy
of the reading of the honorable
to whom it is dedicated,