

12902

No. 372

AN  
INAUGURAL DISSERTATION

ON

*Intermittent Fever*

SUBMITTED TO THE  
PRESIDENT, BOARD OF TRUSTEES,  
AND MEDICAL FACULTY  
OF THE  
UNIVERSITY OF NASHVILLE,  
FOR THE DEGREE OF  
Doctor of Medicine.

BY

*William G. Jones*

OF

*Mississippi*

1858

LIBRARY

W. T. BERRY AND CO.

BOOKSELLERS AND STATIONERS, NASHVILLE.

The mere history of a disease can not benefit the young practitioner in making out a correct diagnosis or aid him either in the administration of medicines or forming a correct prognosis therefore I shall say but very little in regard to the disease now under consideration.

This disease has been known to the medical world for a great many years. It has puzzled some of the greatest and wisest medical philosophers the world has ever known. For many years many of the medical men gave their undivided attention to this perplexing and annoying disease known as intermittent fevers and I am sorry to say they were ignorant of a remedy for it.

But at last in an "hour when we  
thought not, the mighty-remedy came.  
But more of this after awhile.

This disease exists in all climates and  
in all countries where malaria is  
generated, and no where else is  
this disease to be found.

During the present age this disease  
is regarded by many of the medical  
philosophers as being a remarkably  
simple and common disease.  
I admit all of this very frankly.  
But at the same time I regard it  
one of the most extraordinary diseases  
with which the physician has  
to contend. And because of its  
prevalence in our lovely valley  
I think it imperiously demands  
our earnest and special consideration.

Although intermittent fever is  
regarded as being so very simple,  
yet I can say nothing simple about  
it; I have been its victim occasionally  
for the last ten years past, have  
felt all of its different and distinct  
phenomena and still I can feel  
nothing simple connected with it.  
Therefore I am made to regard it  
as a very remarkable disease.  
If the physicians of the present  
time <sup>were</sup> as destitute of a remedy for  
this disease as the physicians were  
when two of the greatest and wisest  
philosophers the intellectual world  
ever saw went out, would they  
not then be constrained to exclaim  
with the physicians who had the  
honor and glory of waiting upon these

two great luminaries of the  
intellectual heavens whose very  
names and deeds will be handed  
down to generations yet unborn  
I allude to James Hirst and Oliver  
Cromwell.

If their physicians could have  
had sulphate of Quinine, these  
two mighty men would not  
have died of intermittent fever  
But since their time, fortunately  
a specific has been found for  
the treatment of this disease.

And it is as certain to cure it as  
malaria is to produce it, and that  
is as certain as the sun shines  
All diseases are complicated until  
their remedies are known, then  
all are quite simple

This disease prevails at all the seasons of the year, but it is much worse during the spring and fall than at the other seasons of the year.

The reason for this I am not able to give.

It is thought by many to be much worse in the fall than at any other time of the year I believe this to be correct, judging from what has heretofore been in my own neighborhood and came under my own observation.

This seems to be one of its phenomena I am at a loss to account for this however I suppose it is owing to its character, condition or quality of the malarial which produces the disease.

Persons of all ages and all species  
may and do have this disease, none  
are exempt from it; however  
middle aged persons are said to be  
more liable to it than young or  
old persons. I believe no one  
attempts to account for this  
phenomenon. no one thinks  
himself sufficiently vain to  
attempt such a thing.

It is useless and extreme vanity to  
waste time and paper in telling  
what it is that produces the disease  
now under consideration. Every  
schoolboy knows the answer to  
this question, and can answer it  
as soon as it is propounded. All  
will say, all will exclaim malaria  
with one voice.

The immortal Sir Cullen and many of his contemporaries have a great deal to say about all of the phenomena which characterize the disease.

A great many speculations were offered in regard to the cause of this periodicity, but all are fruitless. Many have attempted to account for the different changes arising during the progress of the disease. But all are worthless and deserve no confidence. The changes which occur during the progress of this disease are more remarkable than they are in any other forms of our malarial fever except congestive fever. Whilst the changes are great and deserve special attention they are



not so fatal in this disease as they (that is the changes) are in the other forms of fever. This disease itself is not so fatal as the other forms of fever which are produced by the same specific cause. This is the mildest form of the malarial fever and is regarded as the type of all the other malarial fevers.

I shall not attempt to give a history of the character of an ague fit, but simply give the facts as they really are. I offer no speculations whatever in regard to the phenomena of this disease, but will give the symptoms as they are known to occur and also give the treatment of the present day.

This troublesome disease always comes on with an ague fit: sometimes this ague is very perceptible, then again it is remarkably slight: in fact it is so much so that the patient scarcely knows that he is laboring under one of these agues. As a general thing however, the first ague is very slight, afterwards they are more severe, last longer and generally of about the same length.

An ague in the beginning of the disease may come on during the day or night: and as a general rule they continue from a half an hour to one hour and a half sometimes much longer.

After the ague goes off then a fever comes

on and lasts generally from three to seven or eight hours.

A person who is just on the eve of taking this disease first experiences an uneasiness, a sensation of weakness and feebleness in his epigastrium, feels very weak, has an inclination to do nothing, gets languid and listless, and does not want to do the least possible labor, either physically or mentally, in short he becomes entirely stupid and almost lifeless.

By this time he begins to sigh, yawn and has great inclination to stretch and yaw so. For the moment being this stretching seems to relieve him but it does not, he grows worse all the time. He soon feels chilly and especially all along his back, on both

both sides of the spine, cold chilly sensations will seemingly begin about the sacrum and run up the back to the tops of the shoulders.

By this time the blood begins to leave the superficial capillaries, and he becomes pale, and as a general rule his features shrink, his skin is becoming very dry and quite rough, it begins to look like he had been exposed in the cold for a great while.

These uneasy sensations continue for a few moments when the patient begins to shiver just as though he had been out in the cold for a great while, his very teeth will chatter, it is said that they have been shaken out, but I can't believe it. His face, lips, nails, and ears turn blue.

his breathing is very quick, and his pulse becomes frequent and feeble. His whole desire is to be near a very hot fire, and wants cold water all the time.

He now begins to complain of pain in his head and back, and generally all the secretions become diminished, he tries often to make water, but he is able to make but little at a time, and it is generally pale, as a general rule his humors are castive, and his tongue is dry and coated over with a white coat.

This distressing state generally lasts from one half an hour to one hour and a half. Then it goes off gently with slight flushes of heat about the face and neck. After a while the cold stage

ceases altogether, and the skin and features resume their natural appearances, but this is only for a few moments, the face becomes red, hot and dry, the temples begin to ache and throbb, the head begins to ache severely, the pulse becomes full, strong and rapid, the respiration is deep but oppressed, and the urine is yet very scanty, and very highly colored, it is of a yellow red color.

After this disagreeable state of distress has lasted for several hours, it begins to pass entirely away, and the patient begins to sweat and improve in his feelings, the fever is gone, the pain in the back and the headache are also gone, his pulse is again regular, and his urine

is again plentiful but still retains its high color it will do this for some hours afterwards

By this time the patient feels almost entirely well, and the first-thing he wants is something to eat.

After he has had a number of these paroxysms his appetite becomes quite good. It is almost useless to say that these paroxysms are divided into what most authors call species, that is, one of these paroxysms occurring at the same hour every day, is called quotidian ague, when it comes on at the same hour every other day (that is if the patient be well during the interregnum) the patient is said to have tertian ague, and when the paroxysm comes on at the same hour every third day it is called qu

This disease has been correctly divided into three stages, namely, the cold, the hot and the sweating stages, and these occur as above named.

As regards the treatment of this disease I have but little to say, as there is but extremely little to do.

Many years ago, before Quinine was known to master the disease, a great deal was done for the patients during each stage, but medical history and common sense tell us that all their efforts and medicines were spent in vain.

During that time they gave Calomel, opium, bleed, blistered, put them and bathed the patients in warm water, but all these were found to militate against the welfare of the patients.



Fortunately for the patients and  
profession the treatment for this  
disease has become greatly modified  
and is now quite simple.

During the cold stage the patient  
is always able to go to bed and  
cover himself up so as to keep as  
comfortable as possible, nothing ought  
to be done. When the warm stage  
comes on give him as much cold  
water as he wishes, keep him as  
comfortable as you well can.  
So soon as you discover the hot stage  
on the eve of departure, and the  
sweating stage comes on then ~~give~~  
begin with about 4 or 8 grains of Quinine  
for an adult. Keep up this treatment  
for several hours and the patients  
will have no difficulty in getting well.  
Opium or morphine may be given if necessary.