

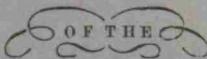
MANUSCRIPT
INAUGURAL DISSERTATION,

ON

Symptoms Syphtilic Phimosis



PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY



UNIVERSITY OF NASHVILLE,

FOR THE DEGREE OF

DOCTOR OF MEDICINE.

BY

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OF

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1854

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If excuses could supply the
place of a Thesis, or apologies
meet the requirements
of a Medical Student
on becoming a Candidate
for graduation, I could
"come forward" with more
confidence, and with much
less embarrassment. Knowing
however that they cannot
answer the purposes alluded
to, I will proceed to offer
something upon Typhoid
Pneumonia; or rather upon
the symptoms of that disease,
as ~~were~~^{were} presented to my obser-
vation in the winter of 1833-6—
at which time the disease was
almost entirely absent near

now to me, we have accounts given of the disease in the United States, as early as 1806 in Newfield a Town in the State of Massachusetts; whence it spread gradually, winter after winter, from one portion of the country to another, until in 1813 it reached Philadelphia, and in 1815 it prevailed in South Carolina. The same disease, probably, — though under different names is spoken of by the older writers. This disease seems to have received names, according to the predominance of particular symptoms as is yet the case as for instance in violent

Cases the patient being suddenly seized with a chill, accompanied with marked coldness of the surface. This is denominated cold Pneumonia. Cases in which the head is affected with pain and ^{other} cerebral disturbance, before the Pneumonic Symptoms are developed, has been called Head Pleurisy. In Autumn, in certain districts of country, as valleys of low lands containing fruitful sources of malarial poisons, the disease not unfrequently takes on symptoms peculiar to such countries, thus receiving the name of Bilious Pleurisy. Notwithstanding these names seem to be very

appropriate in many cases—
Taking into consideration the
symptoms of prostration that
so frequently attends throughout
the whole course of the disease,
and the rapidity with which
the patient sinks, the term
Typhoid Pneumonia has been
employed as more expressive
of the true character of the
disease. In its mode of attack,
and the general symptoms by
which it is ordinarily attended.

There is not much uniformity.

Usually however, it is mark-
ed in by a distinct chill,
of severity and long continuance,
the heat of the whole surface
being much below the standard

of health. It sometimes happens
that the life of the patient is
destroyed in this Stage, Nutrition
failing to be established Nature
seems to make powerful efforts
for the relief of the sufferer in
the establishment of Nutrition which
she may partially do. But by a
return or renewal of these alarming
symptoms, attendants in such cases,
as flagging of the pulse, coldness
of certain parts, delirium Subduc-
-tus Sindrorum, & the patient expires
suddenly during the cold Stage.
The Respiration is short and oppres-
-sed, pain in one or the other side
of the chest is sometimes complained
of. Though not always so; Pain
in the head, back and limbs,

of the most excruciating charac-
-ter. The muscular strength is
greatly prostrated, from the
very onset - a sense of general
unrest and great restlessness
is exhibited - After a longer or
shorter period, prostration ensues.
if death does not. The heat
of the surface is restored,
though not often above the
standard of health; The heat
is unequally diffused over
the surface, portions being
considerably hot, while others are
comparatively cold. Sometimes
the skin is hot, dry and harsh;
at other times, cool and clammy.
The pulse when prostration
ensues becomes somewhat

fuller - a little quick, and frequent.
Though in a majority of cases
the pulse is not much increased
in frequency, and in but
very few cases does it acquire
any degree of tension, but
usually soft and yielding to the
slightest pressure. During the
febrile stage oppression of the
chest, and difficulty of breathing
is increased, and cough
within the first twenty four
hours not unfrequently comes
on, which tends greatly to
aggravate the thoracic symptoms.
If the cough be dry and the
expectoration scant. On the
other hand, if the cough is
attended with free expectoration,

the symptoms are to some extent relieved. The matter expectora-
ted is generally of an ash
or dark brown color - the
respiration besides being
Oppressed, is usually hurried
and irregular - the patient
often utters deep and heavy
sighs, and a sense of weight
or constriction about the
procerbia, with almost
incessant attempts to relieve
himself by changing his
position; raising his shoul-
ders summingly with the
object in view of getting
air.. There is a peculiar
manner suspended over the
face, distinct from any of the

usual redness of Yers, tho
face seems to be puffed
except. Around the mouth and
over the chin, which seems
to be the reverse; unusually
pale or white and constricted.
The Tongue in the first
Stage of the disease is not
unfrequently clean, but less
particularly about the edges,
sometimes, it is thickly coated
with a yellowish mucus,
which in the progress of the
disease changes to a brown
or black. The tongue becoming
at the same time, dry, hard,
and rough, and very often
chapped. This state of things
will sometimes occur at the

very onset. Upon the separation
of this crust, the tongue
presents a bright red glitter-
ing color. This often purifies
the fauces. In many cases
delirium is present from
the onset; where there is great
pain in the head. A little
on, in the progress of the disease,
the teeth and the whole interior
of the mouth, becomes
coated with a dark colored
sordes. The breathing becomes
shorter, and more oppressed;
the strength more prostrated.
The pulse smaller and weaker.
The sinewous twiching
increases, the patient sinks
into a low muttering

delirium ~~and~~ the fatal event
pretty soon takes place.

The duration of this disease
is very variable. we have ac-
counts of it having proved
fatal in three hours. it ^{is} not
improbable, though I have
never seen this happen.

so far as I have observed the
course and duration of this
I think about Eight days
would be near the average
duration, though sometimes
protracted considerably
over that time but when
an early and an appropriate
treatment is instituted,
the disease may generally
be controlled in a few days.

But often when every thing
seems to promise a favourable
recovery. The patient is suddenly
seized by some new symptoms,
or symptoms not anticipated,
and for which we are not
able to account, as pain in
the region of the Liver,
head, bowels, or any part,
none being exempt. I have seen
persons suddenly cry out
with pain in the hand, shoulder
or the Eye, giving evidence
of the most intense suffering.
The pain frequently described
by the patient as resembling
Toothache But they will say
it a thousand times worse.
The bowels in some cases are

not much interrupted. In others diarrhoea; and combined with some difficulty in many cases.

Other symptoms frequently come up in the course of the disease, the following are some of them. Stiffness of one side of the neck, swelling of the tonsils with great difficulty in swallowing - various other glands are occasionally involved. Sometimes symptoms of genuine exophtalmus presents in the course of the disease