

AN
INAUGURAL DISSERTATION

ON

Biliary Derangements

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To understand the cause & frequency
of Biliary derangements which are
so prevalent in this & other warmer
climates, it becomes important
first to understand the Anatomy
and Physiology of the Liver.
a gland which has been accused
with having produced more
of the ills to which mankind
is subject, than any one organ.
and though often wrongfully
accused, is nevertheless more
often implicated in the common
diseases of this & all temperate
& hot climates than any one
organ or gland of the human
organization. It has become
very common among Drs to
estimate the value of this organ

by its size, somuch has this been dwelt upon that to make Drs. it is only necessary to tell some men that the Liver is the largest gland in the system, & then let them know that calomel will act on it, & they start on their mission, (of I will not say what) But we have other & more reliable means of judging of its importance, viz Anatomical structure & Physiological action with the character of its secretion, & it is from these that we should draw our conclusions of this & all other organs glands & tissues which enter into the mysterious machine whos Architect is God & whos motive power is simply the will of its maker, yet this machine is governed

by laws, some of which are more vital than others, & we have been enabled by Anatomy & Physiology to understand in what kind of structure & combination of structures some of the most vital parts reside. We can however no more define this vital principle to reside in one definite organ, than we can define the precise seat of the soul or how mind & matter are united, and notwithstanding we have ~~have~~ theory on theory written on this subject we only know that man has a soul & that while the lamp of life holds out to burn tis, within the body, we may however say that the Blood is or does contain the vital principle,

this we regard as true & that it is as near defining the question as we will ever be able to do.

This fluid is found in all the structures, beside we have supreme authority that the Blood contains the life.

We find the Liver occupying a median position in the body & in intimate relation with other important organs & forming the connecting link between the portal & general venous circulation.

Its principal & larger portion being made up of the minute ramifications of the Portal vein Hepatic artery & vein with the Hepatic duct nerves & Sympathetics, being held together by interlobular areola

tissue & Peritoneal covering.

The coats of the vessels here being the same as in other portions of the body viz an external fibrous a middle yellow fibrous & an internal or serous. The Lymphatics are the same as the Veins & arteries the Hepatic duct has but two coats an external fibrous & internal mucous. The nerves are also fibrous, & these are surrounded by a serous and areola covering. Thus by Considering the tissues which go to make up this organ, we find it largely fibrous. peculiarly combined with mucous & serous membrane. To complete the anatomy necessary for our present purpose it remains to speak of the manner

in which the above tissues are arranged to form the Liver proper, we find fixed the Portal Vein Hepatic artery & duct nerves and Sympathetics entering at the transverse fissure surrounded by Glisson's Capsule, & thence dividing & subdividing until they become capillaries the artery emptying by its capillaries into those of the Portal vein & these being intimately coiled around the Hepatic duct form one of the small granules or Lacune which when connected with others constitute the organ, in the centre of each granule (which is not larger than a millet seed) arises the Hepatic Vein.

It now remains to notice one of the peculiarities of this organ, which is the Portal vein. We find here a departure from ~~the~~ general course pursued in the origin & distribution of arteries or veins, it does not follow either the laws of the one or other, nor, does it circulate blood of the same constituents, whereas all arteries may be said to arise from the Heart their distribution being accomplished by bifurcations, all veins arise by capillaries & empty into the Heart. But in the Portal vein we find it arising by capillaries from the abdominal viscera & forming one trunk, but —

instead of going to the Heart it passes to the Liver & is there distributed like an artery, so that it both resembles an artery & vein & yet in the truest sense is neither, Having given some of the anatomy & Peculiarities of this organ we proceed to the Physiology proper, which consists in the elimination of Bile, first then let us see of what the Bile consists according to Berzelius & other chemists Bile consists essentially of water Bilirubin mucus & salts, but as Physiologists we will understand the analysis better perhaps by saying that it consists of Carbon Hydrogen Oxygen & Nitrogen

with sulphur & perhaps other salts, there being a large proportion of Carbon in this secretion has given rise to a beautiful theory of the Liver assisting the Lungs in decarbonizing the Blood when the latter, from disease or other cause become incapacitated to perform this important function, how far it may assist is doubtful we know however that it can not supply the place of the Lungs.

This organ becomes the more important from the fact that it performs a two-fold office, viz, separating from the Blood material if it remain in the circulation would prove

pernitious to the system at large secondarily by secreting the Bile which figures so highly in assisting digestion. In the first instance it frees the Blood of Carbon and Albumen which leaves it rich in fibine the nutritious principle and by lessening the Carbon it becomes more easily oxydized in the Lungs where it passes through its last refining stage preparatory to being distributed by the arteries to supply the growth and waste of the entire Organism.

In the second instance the Bile being secreted, passes out through the Bile duct Duotus communis Choledochus & is discharged into the Duodenum in common

with the Pancreatic juice forming with the Chyme a soapy compound which by this means is capable of being absorbed by the Chyle vessels & in this way a portion of the Bile becomes reabsorbed & returned to the circulation, through the Thoracic Duct emptying into the junction of the internal Jugular & Subclavian Vein of the left side near the shoulder, thus the Bile becomes important to the manufacturing of Blood, But still there is a portion thrown off with the feces, consisting principally of the colouring matter with that portion which would be injurious to the system.

Having given some of
the outlines of the Anatomy &
Physiology of the Liver, we pro-
ceed to examine into some of
the Biliary derangements to which
this important organ is subject,
and especially while the general
system is suffering from disease
and why it is that we direct
our remedies to this organ
under so many different forms
of disease, not that we intend
to have medicine sent to the
Liver indiscriminately, but
that we may not take the opos-
ite theory that the Liver is seldom
at fault & consequently be infl-
uenced to direct our remedies
to other organs less often at

fault, and more difficult to reach.

It would seem that Physicians will have some ~~some~~ favorite organ through which they expect their remedies to reach the disease of their patients, But is a dangerous doctrine, the idea of giving medicine, to disease, we are compelled to give medicine to the patient & let the circulation carry it to the diseased or deranged organs & in this way only should we expect a specific or local effect. It therefore becomes necessary that we understand what structure is diseased. and then study well the modus opera-ndi of our remedies & then we may give them with some hope

of success, and having experience & science to guide & warn us of the necessity of watching the action of the Liver we may do so & yet not neglect other & even more vital organs. And as we set out to write on Biliary derangements it will not be expected of us that we point out the necessity of watching each one of the various organs of the Body. But that we proceed to the subject under discussion which is to shew how this organ may frequently become deranged. And to do this we will arrange the various morbid conditions under three heads. viz 1st functional 2nd structural & 3rd Auxilliary.

Then first of the functional,
this form may be arranged under
three sub divisions. 1st diminished
2nd increased & 3rd suspended secretion.
We then commence with diminished
secretion which may result from
a congested state of the Portal
circulation, the Blood not passing
fluently through the glands & not
supplying the secretory apparatus
with a sufficiency of material from
which to eliminate Bile, and this
no doubt is the case in a large
proportion of diminished secre-
tion cases. again we may have a
changed condition of the Blood
circulating in the *veina Portorum*
from a deranged condition of the
absorbent capillaries of the vein,

or from there not being sufficient nutrition or food taken into the alimentary canal to supply the capillaries with Blood from which to eliminate, or we may have diminished secretion from nervous influence acting on the gland destroying its secretory power for the time being this may be from two causes, the mind & external violence or disease. But we may have this derangement under the reverse of circumstances, as in inflammation when the excitement transcends the secreting point, on the same principle that Diaphoresis cannot take place when the heat of the body is above a certain temperature,

These are some of the functional derangements from which we would expect diminished secretion.

Increased secretion on the other hand may be expected to arise under different circumstances & is by no means so common as the preceding, it does however occasionally occur & when so it may be from morbid excitement in the Duodenum from irritability caused from irritating matter passing ~~the~~ canal. This is evident from the fact that the natural stimulus of the ingesta passing along the canal causes an increased flow of Bile to the Bowel & from a knowledge of this arose the theory that mercury by its irritating effect, causes

an increase flow of Bile. a theory
not entirely void of Philosophy
but by no means correct. we believe
however that it is quite probable
that it does often act as an aux-
illiary in this mechanical way
but that its principal action is
in a different way is now too
well known to require Comment.

We may have a superabun-
dance of Bile from slight inf-
flammation stimulating the
glands abnormally or it may
be from Nervous irritability.
Again we may have superabund-
ance of the Bile material circ-
ulating in the Portal Blood fr-
om the Capillaries being over
stimulated. & lastly an hypertroph^{ied}

condition of the Liver itself
producing an abnormal quantity
of Bile. But as we apprehend these
causes are not very frequently
operating, & as we live in an age when
physicians like to see Bile & are not
disposed to be alarmed at copious
evacuations of it, we leave this
part of our subject to take up
the third variety (which is perhaps
much more rare than either of
the previous.) When a total suppre-
ssion exists of course there is great
derangement for there must evid-
ently be great obstruction to produce
it. and we can conceive of but
few circumstances capable of
producing this state short of orga-
nic lesion of the parts engaged

in secretion. yet it may be possible in cases of obstinate & complex congestion or where the liver is completely inundated with Blood as in cases of high inflammation causing tumefaction & compression, this state might also be produced by paralisis of the nerves entering the Liver. But we have no recollection of having seen this point discussed & think it would be very difficult to prove. we often see partial paralisis & still the part keep up its natural secretion but how it would be in compleat Paralisis of the Nerves of the Liver we cannot say

We now proceed to notice the structural derangements,

These need not detain us long for although there are various lesions which would lead to these derangements yet they are with a few exceptions so rare that they are not of interest in our description. nor do they come fully under the head of our subjects but principally under the head of disease of these organs. we will however notice them here & for purpose of description we divid the derangements arising from this source into two. diminished & suppressed secretion, & we may as well say that the same causes which produce the first will also produce the last only requiring complete instead of partial destruction. we will first notice diminished secretion & this

perhaps most frequently occurs from abscess within the structure of the Liver destroying a portion of its structure or by pressure on the Portal vein from abscess in the Liver or spleen or any of the surrounding viscera. Any lesion of the the Portal vein incapacitating it to carry on a sufficient circulation.

Atrophy of the liver from lack of nutrition produced by lesion of the Hepatic artery. Any lesion that would lessen the amount of Blood in the Portal vein would cause a diminution in Bile. Of the second variety suppression. This cannot exist long without causing death as a total suppression could not

exist without entire destruction
of the Liver or Portal vein of cou-
rse a lesion of that character
must sooner or later prove
fatal. But if this state could
exist at all it must be in
some such case as where the
portal vein enters the Liver by
gradual pressure there might ^{cause} obli-
teration of the vein & consequent-
ly suppession. Or there may be
a conditition in what is called
fatty degeneration that would
produce this derangement & there
may be a few other causes but
all must be very rare & are
of so little importance & so im-
medial that we can imagine no
treatment that could do good.

We now come to the third & last division of our subject which is one of more importance to the Physician than either of the preceding, from its frequency.

Viz the auxilliary causes of derangements. It is hard to conceive of a disease of any considerable extent which in its course may not implicate the Liver, most commonly its function only, But occasionally bringing an structural disease of this organ.

We will therefore attempt to show how this is done, & in doing so we will name but a few of the many common & well known diseases of our country, and first Remittent fever

which from its frequent connection with Biliary derangements has received the common title of Bilious fever, in this common malady we find various ways in which the Liver may be influenced to take on a morbid action. first in this disease we have extensive derangement of the alimentary canal, digestion & nutrition are more or less deranged & as we have already seen this cannot occur without more or less disturbance to the function of the Liver, again there seems to be a tendency in this disease to enlargement of the Spleen which has its influence on the Liver.

It is also very common in this disease to have congestion of the Portal system which we have before shown is a prolific source of Biliary derangements.

The nerves are also generally affected in fever which exerts great influence over all the secretions or secretion may be checked in this disease, by the high temperature caused by the fever.

Dysentery though usually the effect of Biliary derangements, is nevertheless occasionally the cause, producing as it does great irritability of the alimentary canal as a natural consequence it would excite morbid secretion from the Liver.

Injuries to the cerebrum has long been supposed to produce abscess of the Liver, but how has also been a disputed point for a long time & perhaps our answer is yet vague we consider if done at all it must be through the nervous influence.

Disease of the Kidneys by causing general Congestion as well as by the poisonous effects of Uric Acid circulating in the Blood, is well calculated to produce derangement in the structure & secretion of the Liver.

Inflammation of the Lungs may cause derangement by placing more work on the Liver than it can perform & we

might go on to enumerate nearly all the ills to which flesh & blood are heir. but it is needless here. it is only necessary to understand the wide range of relations between this & other important organs & functions to see at a glance how it is possible to have those derangements in nearly all unnatural conditions of the human body