

AN

# INAUGURAL DISSERTATION

ON

A Fever, denominated, Typhoid,  
which prevails, in Northern West  
Guru.

SUBMITTED TO THE

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BY

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Observations on a variety of Fever,  
denominated, Typhoid, which made its  
appearance, in Northern West. Penn. about  
the close of the winter of 1848.

This may be preeminently styled, a mala-  
rial region of country; for although, in the  
greatest extent of its surface, it is rightfully  
considered an elevated section of Country,  
still its surface is traversed, by numerous <sup>streams</sup>,  
with wide swamps, intersected by lagoons.

Interspersed over its high lands, are many  
Glades, which retain a great amount of  
water near their surfaces, till the middle of  
the summer season, and frequently later.

From an examination of its Topography,  
the existence of all the circumstances, nece-  
ssary, for the production of Miasmata, would be  
inferred; and a short residence in it, dur-  
ing the summer and autumnal months,  
would be sufficient to verify, the correctness  
of the inference.

All the varieties of Fever, thought to be pro-  
duced, by miasmata, (Intermittent, Remit-  
tent, Congestive &c), are found to prevail

very generally, throughout the entire country, in the higher, as well as the lower localities. I have premised these remarks, not because it is considered that miasma, has anything to do with the production of Typhoid Fever (for were this the case, instead, of first meeting with it at the abovementioned period of time, it would have existed from the settlement of the country, and been ranked among its indigenous diseases) - but from the conviction, that miasma in a great many instances, exerts a modifying influence over the disease, both as it regards its phenomena, and treatment.

Remedies, which in other localities, have been esteemed pernicious in Typhoid diseases, are not only borne without injury, but exert a decidedly beneficial influence over the disease, in the locality under consideration.

Mercury and Quinine remedial agents, though interdicted, by Northern Practitioners, are found, highly beneficial in the South, in this variety of Febrile disease.

Typhoid Fever as it prevailed in the section of Country designated, - is a species of Febrile disease, characterised by debility, the system whilst under its influence, presenting well-marked indications, of depression, and exhaustion.

In many cases that have fallen under my observation, it has resembled very closely, what is described in Surgical works, as a state of prostration with excitement.

The first cases occurred during, the general prevalence of Cholera in the Southern, and Western States. That section of country did not then, nor has it ever suffered, from the ravages of Cholera. But its atmosphere had a decided tendency to Cholera, which manifested itself, in an irritable condition of the alimentary Canal: Emesis, and Hypercatharsis, were frequently induced, under the most cautious medication, and were the means of a rapidly fatal termination in this, as well as in other species of Fever, of a less serious character.

The first six or eight cases, terminated fatally, despite the efforts, of the entire skill of the profession around them, - worn out by

Diarrhoea, induced either by a cholera ~~diathesis~~  
or too active medication.

The cases that have fallen under my care, have occurred in the proportion of four, during, the winter, and variable months of spring, to one in the summer, and, autumnal months.

Common summer and autumnal fevers, have, since the appearance of this disease, in the above-mentioned section of Country, sometimes assumed a low, lingering, form, like unto, and requiring a similar treatment to, this disease. In all such instances, an unusual amount of intestinal irritation has been present, and those practitioners, who have resorted to a free use of purgatives, in our ordinary fevers, have been most perplexed with such lingering cases.

Debility, has been the characteristic symptom—The exciting cause, whatever it may be, has depreded the vital energies, as evinced by the general obtuse state of the senses, and the enfeebled, though in many instances, highly excited, condition of the circulatory apparatus.

As a general rule the first symptoms, differ but little from those, which usher in other

febrile attacks, the only difference I have noted, (with the exception of the indications of debility ~~the~~ already mentioned), is a peculiarly distressing pain of the head, of its temporal and frontal regions, and which has invariably disappeared, about the termination of the third day.

After the cessation of this suffering about the head, many patients persuade themselves, they are better, and manifest a good deal of incredulity when informed, they are suffering an attack of fever, from which they cannot, at best recover, under several weeks, and this idea of improvement, has followed many cases, through their entire course, the patient not failing to answer better, when interrogated as to his condition at any time, until fairly in a state of convalescence, when general malaise, a sense of his debility, and irritability of mind, and body, present themselves. The lesion in such instances, is, doubtless in the nervous system, which has been rendered, incapable of transmitting to the mind, correct impressions, as to the condition

of the tenement it inhabits. This condition of the mind has existed, in some of the mild, and in most of the severe cases, with which I have met. The mind may, under such circumstances, be entirely healthy as it regards its manifestations, towards, surrounding objects, or there may be an apathy, or condition of general inattention, present.

The condition of the skin and perspiratory function, have differed much, in different instances. The former having been hot and dry in some cases throughout the entire course of the disease; - in others there has been no appreciable departure from its normal, soft, perspirable, pleasant, condition, during a very protracted attack; - and again, in others profuse perspiration of the head, breast, and upper extremities, or over the entire body, has been so frequently present, and has persisted, so long, that apprehensions have been excited, lest they might exhaust, and wear out a patient, who, in other respects, promised to do well.

I have seen a few instances, in which, a profuse perspiration of the head, breast, and, upper extremities, succeeded a regular co-

cerbation of fever, during the afternoon, giving a temporary alleviation, to all the existing symptoms. In the cases, immediately alluded to, the feet and hands, became cold in the forenoon, previous to the increase of febrile excitement; and this periodical coldness of the hands, and feet, has not been an uncommon occurrence, in the disease, as it prevailed in that particular locality.

The condition of the circulation, has differed as widely, as, that of the skin. In many cases, the pulse has been abnormally slow and languid, during the entire course of the fever;— whilst in others, there has been, but little variation from the healthy pulse,— the manifestations from this source, being, by no means commensurate with the existing amount of disease.

The three conditions which I have observed, are, an exceedingly, frequent, quick, and feeble, pulse, that in which it differs none, or but little, from the healthy pulse,— and that in which, it is morbidly slow, both as to its frequency, and stroke.

In every case, there is deranged action of the secretory organs, their functions suspended, or products vitiated.

The Tongue, always indicates a serious amount of visceral, ~~and~~ disease.

Its conditions are pretty generally the same. Contracted and small of volume, tip and edges red, and in grave cases, of a dark, purple appearance, the surface of the organ, covered with a dark brown or black coat, sometimes moist, at others dry, rough, and cracked, the teeth and gums covered with dark sores.

The disease, has been uncertain in its duration, usually terminating about the close of the third week, though sometimes convalescence has occurred, at the end of the second, at others not before six or eight weeks, have elapsed.

The course of the disease and period of convalescence, very frequently, occupy, several months.

The only troublesome complications, I have met with, have been inflammatory action usually, of a low grade, of the lungs, characterised by hacking cough, and difficult

respiration,— and an unusual amount, of  
intestinal irritation.

The prognosis is favourable, in the absence  
of these, or other serious complications.

I have been favoured with no chances for  
post mortem examinations, consequently,  
my notions as to its pathology, are derived  
from the investigations of others, and a careful  
observation, of its symptoms, course, and ter-  
minations.

Medical writers, have generally located  
its pathology, in disease of the follicles of  
the intestines,— a peculiar inflammation of  
the glandular patches, of the small bow-  
els. But is this sufficient to account  
for, the various morbid appearances, in  
Typhoid Fever. Is it evident or is it yet  
to be demonstrated, that inflammatory  
action of the kind in question, or even, when  
general enough to implicate a very consid-  
erable extent, of the mucous surface of the intes-  
tinal canal, is sufficient, to give to this dis-  
ease, its peculiar, low, sunken, lingering char-  
acter,— or are we to suppose, that the cause

whatever it may be, exerts a positively, depressing, deleterious, influence over the system, sinking its energies to a state, in which healthy glandular action, cannot take place, and that the inflammation, and ulcerations, which so frequently occur, about the glandular patches of the bowels, are the consequence of deranged and vitiated secretions, reacting on them. This question is thought worthy, the consideration of the profession.

In the treatment of Typhoid Fever, the grand indication, is to get the patient in a condition, in which he can be safely carried through the disease, by the administration of tonics, and stimulants. When properly administered, they never do harm, and are borne in many instances, to a surprising extent. But first, as to the treatment of the disease, in its incipient stage.

This is preparatory, and consists in clearing the bowels fully, of their contents, that they may not, by their retention, be permitted to aggravate the disease, nor excite the

bowels, by their fermentation, to invigilate  
action. For this purpose, any of the mild,  
or purgatives, or Calomel, with Opium,  
or Doveri Pelvis, may be given, followed  
by castor Oil; if the practitioner pre-  
fer it. Nothing drastic, or irritating,  
should be given at any time, or under  
any circumstances.

After the bowels have been fully freed  
of their contents, by this course of treatment,  
the patient should be slow'd, and cautious-  
ly, if it be a grave case, put under the  
constitutional influence of Mercury, not  
because it will arrest, and cut short the  
disease, as in many other species of fever,  
but because, it places him in a condi-  
tion, in which a cautious, but in some in-  
stances a liberal administration of Stim-  
ulants, will in simple, and uncomplic-  
ated cases, certainly bring about a  
favourable result.

It is necessary to ~~use~~ much caution,  
in attempting to induce the mercurial  
impresion, for if this medicine be given,

in portions too large, or too frequently repeated, in small doses, it will certainly irritate the bowels, produce watery and exhausting stools, and aggravate the intestinal affection. Calomel and the Blue Pill, are the preparations I have generally used, preferring, always in grave cases, the Hydrarg. Sub. Muriat.

It should be given, in doses of a grain, once in three, or four hours, or of two or three grains, once six or eight hours, with or without Opium, as circumstances may require. If tolerated well by the bowels, e.g., if it do not produce more than one, or two, good, consistent, ~~silious~~, stools daily it should be given alone, because of the tendency of opiates, to arrest the action of the secretory organs. If however the mercury, produce purging, Opium must be added. Six or eight days, and frequently much earlier, will suffice to induce its peculiar effects.

In mild cases, it will be sufficient, if the mercury, only, by its stimulating effects, keep

up, a healthy action of the secretory organs, as evinced by their healthy manifestations, and the character of the dejections, but if the case threatens to linger a long while, if it do~~s~~ not improve, its peculiar effects should be induced.

Severe cases, should be blistered over the abdominal region, and upper, and lower, extremities, over the abdomen, to subdue or avert intestinal disease, at the extremities to keep the circulation equalised. Episartics, when applied just in anticipation of the stage of collapse, answer the valuable purpose, of lessening it in degree, and shortening its extent.

After the patient has been physalised, or sooner if indications of collapse supervene, wine and Quinine, should <sup>be</sup> literally administered. But few cases, will require less than a pint daily; and I have frequently given double that quantity, with the happiest effects.

Its exhibition, can be properly restricted to no period of the disease, as many cases bear it advantageously, from their commencement.

While the wine affords a healthy degree of stimulus, improving the energies of the system, the Quinine should be given, for its permanent tonic properties, in doses of from two, to four, or six, or eight grains, once in two, four, or six hours, according to the urgency of the case, allowing the patient, intervals of abstinence from its use, as circumstances may require. When the Wine and Quinine have failed to effect the object, in arousing and sustaining the system, I have frequently added a few grains of Sulph. Camphor, to each dose of the Quinine, and in other instances, administered the Carb. of Ammonia, freely.

A good article of Brandy, is sometimes preferable to wine, because more stimulating.

By this method of treatment, where the pulse was frequent, feeble, and compressible, a reduction in its frequency, and an increase in its volume and force, have been produced, - and when it was morbidly slow and languid, it was thereby brought up to

the healthy standard, and the feeling and appearance of the patient, much improved. But this condition of the disease, is generally overcome by the stimulus of the Mercurial impulsion. Many cases which had presented this character from their onset, were, as soon as the peculiar effects of this medicine, produced, apparently, and really, much improved, — the languor of mind and body, giving place, to a much more healthy condition of both, and the secretory and assimilating ~~functions~~, resuming to some extent, their accustomed, healthy actions.

This method of treatment has been eminently successful in my hands, in the treatment of this disease. I have not lost a case, to which it was applied in fully two years, — my case book in that time showing about fifty cases, which were esteemed grave enough, to be noted for reference, and I have some cases noted that were so low, as to be hardly conscious of surrounding objects. A few in which

Cold extremities and Hiccups, persisted from ten days to two weeks,

I have continued the counter irritation, to the extremities, and bowels, in most of my cases till convalescence was fully established, and have made a practice of allowing, as much mild nutriment, as the patient desired, unless symptoms of intestinal irritation, were strongly developed. Where Diarrhoea, supervened, I used the sugar of Lead, in doses of three or four grains, with half grain of opium, as often as this complication required it; and when this remedy failed to meet the indication, mucilaginous injections into the Rectum, were added. In cases in which, from the appearance of blood, or a purulent mucus in the dejections, ulceration of the bowels was inferred, the Nitrate of Silver in the form of pills, or emulsion of Turpentine, was administered.

The bowels, when the debility is not great, may be suffered to act, once in twenty-

four, or for ty-eight hours; - but when the debility was extreme, I frequently suffered them to remain, six or eight days, unmoved, - and in two of the cases in which the Hiccup and cold extremities, persisted so long, one of the patients, had one evacuation, only, during ten days, - the other was twelve days, without a stool; - and I doubt not, that a full evacuation from the bowels, would have sunk either patient, at any time during that period.

Though, it was not altogether from an apprehension of this kind, that the bowels were suffered to remain so long inactive! Their dissolution, was almost constantly expected, and they were therefore abandoned, except so far as to give, Brandy or Wine, as freely as it would be taken.

The whole of which is  
Respectfully submitted

Paul. S. Jones

