mony, ipecacuanha, and other diaphoretic remedies. But ipecacuanha has wholly failed in Dr. B's hands as a specific, or in any way active, remedy for the disease."

The local blood-letting, the calomel and opium, and the mild aperients, were the remedies to which the physician looked for the cure of the disease. But there were other remedial means from which the patients in many cases derived more sensible relief from their sufferings. To these means, however, of which the principal were opiate enemata to relieve the tenesmus, large warm poultices to the whole abdomen, and medicines to allay symptomatic vomiting, Dr. B. more fully alludes. He remarks that whenever, from the age or debility of the patient, it appeared desirable to give moderate quantities of a stimulant, such as brandy, no harm ever resulted from its use. On the contrary, a beneficial effect, we are told, was produced, however active the local inflammation might be.

"It may be thought," remarks Dr. B., "that this was owing to the prisoners having been weak from long-continued confinement. But there was no strongly marked sign of such weakness, and, when general blood-letting appeared to be called for, it was borne well. Indeed, the principal reason for preferring local blood-letting, even in severe cases, was that it seemed to be more efficacious, and not that any symptoms contraindicated general depletion."

"I need scarcely say," Dr. B. observes, "that the diet allowed in the earlier stage of dysentery, consisted merely of milk and farinaceous articles of food."

D. F. C.

ART. XVIII.—*Cholera, Dysentery, and Fever, Pathologically and Practically Considered; or the Nature, Causes, Connection, and Treatment of these Diseases, in all their Forms.* By CHARLES SEARLE, M. D., M. R., C. S. E., &c. &c. 12mo. pp. 120: London, 1847.

DR. SEARLE will unquestionably deserve the gratitude of every student of medicine, for even this attempt to compress within eighty duodecimo pages, printed in a type so large that almost the feeblest eyes may read it—the entire etiology, symptomatology, pathology, and therapeutics of some of the most important diseases which the physician is called upon to treat, and this too in a style professedly adapted to the comprehension of the unprofessional as of the professional reader. That the author has attempted all this, he has himself expressly declared.—Thus, in his Introduction, he states,

"In the construction of this treatise, I have endeavoured, in the few pages of which it is composed, to embody, in a style which may be understood by all classes, a comprehensive view of cholera in all its bearings. First, as regards its nature; then its most frequent causes, and the operation of those causes in developing the symptoms; next the indications of cure, as pointed out to us by Nature, and after this, the remedies which principle directs and experience has proved to be most successful in its treatment. This is followed by a detailed account of the practice which should be pursued, from the first moment of visitation, and through the various stages of the disease, in all its forms, from simple diarrhoea to its severest species, including that, also, of dysentery; and, subsequently, the treatment of the inflammatory febrile affection which so frequently succeeds to the attack of cholera, is also particularized, thus rendering the whole a complete, though concise, treatise on the subject, practically available to every person, professional or otherwise, in the hour of necessity. This is followed by the subject of fever, in which I have explained its phenomena, or pathology, its varied character, as modified by its numerous causes and the diversified circumstances under which it exhibits itself; occurring either as simple continued fever—as an effect of cold, or of influenza, bilious fever, scarlet fever, erysipelas, rheumatic fever, typhus fever, &c. &c., and with respect to all of which I have endeavoured clearly to explain."

"Upon the subject of fever, I trust it will be found that I have robbed this 'will-o'-the-wisp' of its proteiform disguise, and exhibited it in its unsophisticated character, not, as Broussais and Clutterbuck have taught, as the consequence or effect,

at all times, of inflammation, but as a reality in itself—a condition of the circulating system, which I have denominated that of *irritation*—an excited condition of the small vessels, intermediate between that of active inflammation, and the passive condition of congestive repletion,—a condition of the general system which may be brought about by a great variety of causes, but all referable to two distinct heads, which afford the two leading principles of treatment applicable to all cases.”

The work before us, viewed as a mere catalogue of the author's general conclusions, in regard to the nature, relations, and treatment of the diseases enumerated—as the simple outline of his pathological and therapeutical views—is not without interest. His suggestions are often plausible—sometimes probably correct. But he has certainly failed to prove anything—to reason out or support by facts the theories he presents, or the correctness of the practice he directs. Often his positions are the simple expression of mere truisms, without an attempt at explanation—without adding a single mite to our knowledge. Take for instance, the following.

“I may venture, without fear of contradiction, to say, that the influencing cause (of epidemic cholera), consists in some condition of the atmosphere, which operates by reducing the active powers of the system, and subverting the normal or natural healthy manifestations of life, and may, therefore, without impropriety, be called poisonous.”

In some instances, Dr. Searle, however, is more definite in his exposition of the causes of disease, and what has occasioned to others much doubt, and in relation to which they have not been able to arrive, after the closest investigation, at anything like a positive conclusion, he settles in a few words.—Thus of malaria, speaking of sporadic cholera, cases of which are of frequent occurrence in autumn, “from the combined influence of mobility of the system, and derangement of the biliary and associated organs, which so generally ensue from the preceding hot weather,—and malaria, which, at that season, is so much more abundantly developed by the agency of heat, and issues from drains, sewers, or wherever animal or vegetable substances exist in process of decay; its effects being, however, more particularly manifested in damp, filthy, low, or confined situations,—the individual in the condition of predisposition to disease above mentioned, being exposed to its influence, and inhaling such malaria, having his blood, it may be said, truly poisoned thereby.”

But what is this malaria—the nature and character of which have been so long inquired after, by a host of medical philosophers in vain? Hear Dr. Searle—

“Sulphuretted hydrogen, one of the offensive gases issuing from sewers, and a product of the decomposition of animal and vegetable substances, is so truly poisonous to the animal system, that a bird, or other small animal, exposed to an atmosphere containing but one fifteen hundredth part of this gas, dies almost immediately from its effects; and a horse has been killed by exposing it to breathe an atmosphere containing but one-two hundredth and fiftieth part. That malaria, which is a compound of this and some other gases equally noxious, developed by the decomposition of animal and vegetable substances, wherever they exist, may be truly affirmed to be a poison; and which under certain conditions of the atmosphere and states of the system, will produce cholera; and under other circumstances of exposure to its influence, will occasion typhus fever, dysentery, scarlet fever, erysipelas, rheumatic fever, influenza, or other modification of fever of a remitting type with local affection—either of the brain, lungs, or abdominal organs. The various states of the system, age, season of the year, condition of the atmosphere, composition of the malaria, its virulence, and length of time the individual may have been exposed to its influence—all being modifying circumstances influencing the results, or disease, to which it gives rise.”

So much for the author's views of the etiology of disease. The manner in which malaria acts in the production of disease, is by subverting the vital process of calorification; by diminishing the vital combustion, and reducing thereby the active energies of the system—calorification being, according to Dr. Searle, the primum mobile, or mainspring of all the functions.

“The heart's power being thus reduced, the blood is not freely circulated, and stagnation, or congestive accumulation of blood in certain of the vessels takes

place, and in those vessels more particularly in which the circulation is most feeble, or those the most remote from the heart's influence—or power of keeping the blood they contain in free circulation, and which is most especially the case in the veins of the stomach, bowels, liver, and spleen; and here, accordingly, stagnation of blood, or congestive fullness of the vessels, more particularly occurs."

The engorged and over distended vessels of the stomach and bowels, cause an exudation or pouring out into the alimentary canal, of the aqueous portions of the blood, or a portion of their more fluid contents.—Hence the watery evacuations in cholera; which are colourless, because the congested state of the liver prevents the secretion of bile. The cold profuse sweating in cholera, is the result of a simple exudation from the congested vessels, of the surface of the body.

Diarrhœa is, according to Dr. Searle, the result of a similar congestion of the vessels of the intestines—though less in extent—to that which takes place in cholera.

If the case of cholera be a protracted one—the watery purgings, with general inertia, cold, and depressinn of the circulation—will be followed by gastro-enteritis—indicated by its distinctive symptoms.

"The characters of the aforesaid symptoms," remarks Dr. Searle, "should be clearly understood: they consist of a sub-acute inflammation of the mucous membrane of the congested bowels, developed by the stagnated blood in the veins of the parts retarding the blood in its passage from the arteries, and thereby distending the latter, and exciting them into inflammation. This inflammation of the bowels implicates the lining membrane of the stomach also, and extends, if the patient live long enough, by means of the biliary duct, which opens into the bowels, to the liver also—to the extent, at least, of producing irritation, and the excitement of increased secretion of the bilious fluid: and the fever, which attends it, is developed in the same manner, that is, by the congestion of the venous system in general, retarding the blood in its passage from the capillary arteries, and exciting them, by reason of their distension, to irritation, or a condition of increased action—but short of that which exists in inflammation, and which, as constituting fever, will take place or not, as there may be power sufficient in the system, or the blood possess the requisite amount of oxygen and excitable qualities for the purpose."

Diarrhœa, according to Dr. Searle, is the mildest and most prevalent form of disease, resulting from the united influence of heat and malaria, followed by the conspiring one of cold, or other concomitant circumstance.—Dysentery is another variety, and the congestive typhus of Armstrong another—the latter being intrinsically the same disease as cholera, modified by climate, and is the form in which, perhaps, in its severest degree, it more frequently manifests itself in England.

"If fever and cholera both take place from the same cause—malaria—it may be asked, what constitutes their difference? In reply, I would say—in the operation of that cause; its amount, virulence, and intensity, as aided by concurring circumstances! Thus, we see fever with dysentery symptoms, lapsing—by the accessory agency or augmentation of depressing causes—as a humid state of the atmosphere, an attack of indigestion or the like—into cholera. The condition of the system in the latter case, being that in reality of the cold stage of fever, in an augmented degree. The native energies of the system being too much prostrated, by the extent of the cause, to bring about the reaction of the febrile condition; and hence the fact—that in the process of successful treatment, as amendment takes place, febrile action is developed."

"The disease above noticed, is in reality nothing more than the ordinary form of remittent or malarial fever of tropical climates, but to which it is by no means peculiar, it being the disease to which travellers are exposed during the summer months in the Italian States, the islands and shores of the Mediterranean, the banks of the Rhine, and as prevalent in France, Spain, Portugal, and during the autumnal months in England; and which malarial fever, when attended with bilious vomiting, or pain in the side or head, is often called bilious fever; and which, moreover, under particular circumstances, gives occasion not only to inflammation of the stomach and bowels, or symptoms of gastro-enteritis and dysentery, but also, under other circumstances or states of the system, to other local

inflammations of the membranous structure—such as of the joints, the knee, wrists, or other, occasioning pain and swelling of the part, and thus developing rheumatic fever; or of the membranes of the brain, then constituting brain fever; or, as I have often known in India, the same cause affecting the membranous coats of the eye, and occasioning muco-purulent ophthalmia, or the inflammation of the eye common to Egypt; or the malarial cause may give rise to a condition of *irritation*, or a less perfectly developed form of inflammation of the membranes of the brain, or spinal marrow, or sheaths of the nerves, and occasion then all the varieties of neuralgia (or nervous pain), and spasmodic attack, as sciatica, *tic-doloureux*, *epilepsy*,” &c.

After a rapid sketch of the pathology and principles of treatment of intermittent and remittent fever, fever from cold, with local inflammation,—all comprised in seven pages—the author presents us with the following general summary—

“Thus, if to the cause of intermittent fever—malarial impregnation of the blood, there be superadded, as an effect of heat—congestive fullness of the liver or bowels, and derangement of the associated organs; or the same symptoms as effects succeeding to cold, there will in either case be, more or less pain in the region of these organs, sickness of stomach, and inflammatory irritation evinced, modifying, in a greater or less degree, the febrile attack; or, if these symptoms exist in a preponderating proportion, they may obscure or mask the intermittent febrile one altogether; and thus, in proportion to the predisposing circumstances and constitutional disturbance which pre-exists, augmented in amount by the supervention of the malarial disease, a simple intermittent fever, or such as would ensue in a more healthy individual, is converted into a remittent, or a graver form of disease, with local inflammation and complexities daily augmenting in number, if the disease be not by timely means arrested: and thus are typhus and the graver forms of fever developed. And now, with reference to the *predisposing circumstances* and character of the attendant symptoms; in a man of intemperate habits, or another with congestive fullness of the liver and bowels, the excitement of fever succeeding to the malarial cause, will develop bilious vomiting, or inflammation of the liver, with pain in the side and difficulty of breathing; or inflammation of the stomach and bowels, or dysentery; or, in Europe, where cold is simultaneously in operation, and the lungs and air passages in consequence exposed to affection, inflammation of the lungs, or bronchitis; or the throat, as in scarlatina—will be more particularly affected, and thus will the fever be modified in character by the organ affected, and function it fulfils. The head also, is frequently affected; the brain, especially in persons who suffer from care and anxiety, perturbation, or excess of mental employment, and not less so in young children, is very frequently affected; and thus the pain or giddiness of congestion of the brain, or the delirium of excitement, which so frequently attends this form of fever. And again, as I have elsewhere said, in persons of a rheumatic or gouty tendency, swelling and inflammation of the joints, one or more, and often migrating from one to the other as from the knee to the wrist, or elsewhere, ensue; or, as I have known in India, and seen prominently in the garrison of Vellore, men going on duty as sentinels at night, and returning from guard in the morning, with their eyelids swollen and extremely painful, and the most inveterate form of muco-purulent ophthalmia follow as a consequence. And again in this country, from some no less obscure agency, or modifying circumstances, developing erysipelas. And I may mention also, women in childbed, its developing fever, or otherwise modifying the character of the inflammation of the peritoneum, or uterus, which is apt to succeed. And to this catalogue of malarial fevers, I might add many others—malaria being the ordinary exciting cause, I believe, of influenza, modifying the usual effects of cold, and developing this now too frequent affection.”

“And lastly, I may observe, to the development of the graver affection of typhus fever, we have only to look to the locality in which it is more frequently to be found, and the class of individuals more commonly the subjects of its attacks, to discern that it is a disease made up of an assemblage of the aforementioned elements, developed by cold, malaria, unwholesome diet, and deranged secretions, simultaneously or successively operating; one class of symptoms preponderating in one season, or under certain especial circumstances of its visitation—and another group in another, under different limitations; and thus, at one period, to be remedied by

calomel, diaphoretics, and evacuants more particularly; and at another period by quinine and stimulants, or under ordinary circumstances, by both timously employed. Its treatment in general, should bear reference to the preponderating symptoms at the time being, bearing ever in view the leading feature or fact in the case—that the disease is essentially based upon debility! The excitement of organs or inflammation present, being not the cause, but the consequence of fever and of general derangement,—a fact that must be ever borne in mind, and influence us in the whole class of malarial and remittent types of fever; and especially so, with regard to blood-letting, which, in relief of general fever and local inflammation, however properly it may be had recourse to at the early period of the disease, can seldom be practised with impunity at a later period; leeches, followed by a blister, are, therefore, the more appropriate remedies in these cases.”

The foregoing extract, which occupies three pages and a half of Dr. Searle's treatise, will give to our readers a tolerably correct idea of the pathological views inculcated by the author. Some may conclude, that we have given too much space to an exposition of them. We have been desirous of doing justice to the work before us, and of allowing Dr. Searle to explain his doctrines, as far as we were able, in his own words. He believes, that his opinions in regard to cholera, are “as deserving of respect, as those of any man living”—while he trusts, that in respect to fever, he has “stripped it of its protean disguise, and advanced sufficient reasons why his opinions on this subject, also, have more than ordinary claim to attention.”

We feel no disposition to attempt the refutation of, or to undervalue in the least, the pathological or therapeutical views of the author. There is much in relation to both which we approve. Dr. Searle has, however, in our opinion, made a few very great mistakes; first, in attempting to compress too much in too small a compass; secondly, in addressing his work to the unprofessional as well as to the professional public; and thirdly, in merely setting down his opinions in regard to the nature, causes, and connection of disease, without attempting to reason out these opinions, or adducing the series of facts by which their accuracy is established. His explanations are often the expression of mere truisms, and do not advance us the least towards a knowledge of the subjects to which they refer, while, occasionally, he presents as an established truth what is still matter of dispute, or at best merely a probable conjecture, to be proved or disproved by future observations.

Dr. Searle calls upon “the press generally, to aid him in the circulation” of his treatise, while “at the same time, he calls upon the profession and all mankind either to confute him in argument, or to exhibit by facts, reasons why the practice enjoined, and treatment recommended, should not be accepted as *deserving universal adoption*!” We really do not believe that the work before us possesses such transcendent merits as to require us to make any very particular exertion to aid in its circulation. The pathological views of the author will not, in all their details, bear, we fear, the test of a very strict examination, and although his therapeutical directions are, generally speaking, judicious, still we cannot in truth say that they are so perfect as to deserve universal adoption. D. F. C.

Aar. XIX.—*The Practice of Medicine: a Treatise on Special Pathology and Therapeutics*. By ROBLEY DUNGLISON, M. D., &c. &c. Third edition, 2 vols. 8vo: pp. 767-704. Philadelphia, Lea & Blanchard.

The work of Dr. Dunglison is too well known to require at our hands, at the present time, an analysis of its contents, or any exposition of the manner in which the author has treated the several subjects embraced in it. The call for a third edition within five years from the appearance of the first, is, of itself, a sufficient evidence of the opinion formed of it by the medical profession of our country. That it is well adapted as a text-book for the use of the student, and at the same time as a book of reference for the practitioner, is very generally admitted; in both points of view, for accuracy and completeness, it will bear a very advanced