continued at intervals through the night. Soon after taking the six grain dose of calomel, profuse perspiration broke out, which continued for about two hours, when her skin again became dry, and so continued through the night. Her pulse has been variable, sometimes imperceptible, but never so distinct as to admit of its being counted. She is growing weaker, and her extremities appear to be more affected with spasms than her jaws.

She took no medicine through the day excepting a little manna, which was swallowed with much difficulty. Spasms continued through the day; and she expired at six o'clock in the evening, lacking a few hours of being nine days old.

The weather during this period was temperate, and the room sufficiently close, but well ventilated, with a moderate fire in it. There was no smoke in the room, as the chimney carried it up remarkably well.

I think it must appear conclusive that in the above case, the disease could not have been produced by either of the six of the first named causes. It is evident to me that it was produced by irritation in the intestinal canal. The functions of digestion were evidently impaired for two or three days before the attack. Those physicians who attribute the disease to tying or dividing the funis umbilicalis in an improper manner, must forget, I think, that the funis is not supplied with nerves.

Fatal as this disease has hitherto been, we ought not to despair of being able to treat it with success. A correct pathology will lead to a correct method of treatment, and that can be obtained only by induction from pre-established facts. If a derangement of the digestive or-

gans should be found to be the cause of the disease, it will throw much light on the pathology, and consequently upon the treatment of this hitherto obscure disease, which has been styled by an able physician the "opprobrium medicorum."

[We apprehend that the disease which forms the subject of the preceding communication, would be rare, if the practice were more general of procuring early and thorough evacuation of the alimentary canal, by means of castor oil. In examining the bodies of infants who have died of convulsive or spasmodic diseases, some portion of the meconium has usually, if not always, been found in some part of this canal; and where we have administered a drachm or two of oil, within an hour of the birth, which is our usual custom, we have never known any spasmodic affection to occur afterwards.—ED.]

VII.

A SINGLE THOUGHT ON THE EXPEDIENCY OF CURING CERTAIN DISEASES OF THE SURFACE.

By CHANDLER ROBBINS, M.D.

Read before the Boston Society for Medical Improvement, October, 1831, and published in this Journal by order of the Publishing Committee.

GENTLEMEN—I shall detain you but a few moments from the discussion of the interesting question which has been selected for this evening, for I propose only to state a single law in pathology which is somewhat obscure in its application, yet not so much respected as it should be in the treatment of disease.

There are occurring, I presume, in the practice of all, cases in which

the cure of local complaints of the surface accompanied by discharge, produces bad effects. Numerous instances of this kind have fallen under my notice; and some of them very melancholy in their termination. Being on a visit, a short time ago, to a friend in the country, a lady, during a morning visit, showed me her arm covered with the scales of psoriasis, and asked if I did not think corrosive sublimate would be good for her. I dismissed the subject, as we all do in such cases, as speedily as possible, but with an affirmative:—meaning, of course, the *internal* use of that medicine. A few months after, I accidentally heard that this lady was dangerously ill of a disease of the kidneys; that she had placed herself under my care, and that the course I prescribed had cured the disease, but induced another which was about to terminate her life. On inquiry I found that she reported my reply to her physician, who forthwith prepared a *wash* of the muriate, which was applied with great punctuality, and without constitutional treatment. This lady died shortly after, of this same disease of the kidneys.

A distinguished literary gentleman in this vicinity related to me a like history of his mother, whose death succeeded and was doubtless caused by the regular, scientific, *secundem artem* cure of a similar eruption. A third is now present in my mind, and a few moments' reflection would bring a host of others.

Yet cases of the same disease, and others much worse, are daily cured by quack ointments or regular prescriptions, by washes, baths, &c. without any bad consequences whatever. Under these circumstances,—knowing all these facts,—when a case presents itself for treat-

ment what course are we to adopt? Suppose we have the medicine in our hands, which we know will answer the immediate purpose of the patient, how are we to decide whether its use may not eventually endanger organs more important to life, and perhaps the life itself of one who throws himself entirely on our judgment. This is the great question, and it is one which has received a great variety of answers.

It appears to me, that in deciding it, the plainest rule is, to ground our opinion of the probable effects of removing the disease, on the effect its access or establishment produced on the general health.

The disease has either improved the health, injured it, or produced on it no perceptible effect.

1. In the first place, we can seldom fail by close inquiry, to bring to the recollection of the patient some local difficulty, some dyspeptic trouble, or pulmonary irritation, some morbid paleness of the skin, or other unhealthy condition, which left him about the time the cutaneous affection made its appearance. If this is the case, and the system continues to perform its functions more freely since the establishment of the eruption, it appears to me we should proceed with extreme caution, and if we do anything, act chiefly through the system at large. A single case will illustrate this rule.

A gentleman whose health had been delicate from his youth, but improved on the eruption in his groin of a disease commonly called salt rheum (a name which is derived, I presume, from the saline properties of the rheum or discharge which attends it), allowed the disease to remain by him many years. At length he applied to it some rose-water ointment, which removed it in the course of a few days:

the discharge ceased, the itching abated, and, after a time, the diseased skin gave way to a healthy one. Several weeks after this, he was attacked by hepatitis, and suffered excessive pain both night and day, until the free use of calomel, vesication and bleeding, gave him relief. It may be thought that the affection of the liver was not connected with that of the skin. The sequel of the case seems to show that it was. For twenty-five years this gentleman was subject, several times in each year, to similar attacks, and seldom, until the mercurial and blister took effect, did he get any abatement of his pain.

About twelve years ago, the eruption reappeared in the groin, and the attacks of hepatitis ceased. Occasionally, however, a slight return of the pain compelled him to rise in the night and swallow a calomel pill,—which he always kept in his chamber,—and at these times, he informed me, that the groin had always for several weeks been smooth and dry.

At length the liver complaint left him; but in its place, whenever the eruption had disappeared, he became harassed by a dry, hard cough, which resisted treatment with great obstinacy. Always, however, as the cough abated, slight itching was felt in the groin, and by rubbing it smartly, the surface became abraded, moisture oozed out of it, and the cough departed as by magic. I have often wondered that a cough which so agitated the whole frame, and interrupted the night's repose, could continue so long and recur so often, without inducing structural disease of the lungs; yet, in this case, no such result has been perceived; the patient is now in good health, and annoyed only by the itching and discharge of the

cutaneous disease. For this he has uniformly declined taking any internal remedies, and has learned to avoid those which are external and local.

I have used the term hepatitis, perhaps improperly in the foregoing detail. The paroxysms were unattended by fever, and consisted of excruciating pain in the region of the liver, cloudy yellowness of the skin, and prostration of strength. The substitution of cough for this disease was probably occasioned by his removal from a warm to a cold climate.

In the case thus briefly stated, there appears to have been an evident alternation between the disease of the surface, and that of the liver and lungs: and it is hard to avoid the conclusion, that the latter organs would have escaped entirely, if the eruption had been encouraged from the first. There seemed to have been some element in the circulating fluid which required to be thus poured out, and which, if long retained, acted as a poison, or, in other words, excited disease in the organs most predisposed to morbid action. There may be too much of humoral pathology in this idea to suit the sentiments of this age; but I apprehend that no man can labor long in the field in which circumstances have called me to toil, without imbibing a greater respect for those doctrines than we have been taught, by the great masters of our pupilage, to entertain for them.

The blister, in the case related, did certainly produce ease, but it required the aid of other and very powerful evacuants; and then its effect was slow and hesitating: though the irritation it produced was great, and the discharge abundant, it never acted with the imme-

diate, and decided, and finished relief, which attended the slight itching and scarcely perceptible oozing on the diseased surface.

Let us take this patient in his present condition. Can a doubt rest on the mind of any one, that an attempt to cure his salt rheum, and particularly by external applications, would be hazardous and unjustifiable? Certainly not; and we are led to this conclusion by the fact that his health has been evidently improved by the discharge, and, as a natural consequence, suffered whenever it was arrested.

2. But if, in the second place, the previous health was good, and the disease has proved only a source of constitutional irritation and general uneasiness, and still continues such, then there can, I think, be no hesitation in applying our remedies, and curing it as effectually as possible.

I say "and still continues such," for it is well known to happen frequently, as in some forms of porrigo, that the eruption, contracted perhaps by inoculation, proves at first a source of constitutional disturbance; but, after a time, the system becomes habituated to it, the health is recovered, and the patient carries his disease about as an accustomed, and almost necessary stimulus. A rapid cure, under such circumstances, would doubtless be ill-judged. A lady of my acquaintance, of nervous temperament, made at night an external application to a cutaneous eruption of this nature, and before morning was attacked by a disease of the brain, of which she died; and a merchant, whose case is well known to most of you, by similar means was made a maniac, and, subsequently, a *felo de se*. In all cases of this kind, the decision respecting a cure should be

the same as before, i. e. if we act at all, it should be through the system at large.

I am aware there are many instances in which the health, having been good previous to the eruption of the disease, has not been apparently changed by it, either for better or worse. In such cases we are to be governed by numerous circumstances which would require much time to detail and illustrate. Generally, however, unless some external cause can be detected, the disease should be regarded as an early effort of the constitution to relieve itself of that, which would, if retained and accumulated, become eventually a source of more serious trouble. I have recently known two persons die of rapid and overwhelming febrile disease, who had, a few months before, thus incautiously healed up a small spot of commencing psoriasis, which appeared to them of trifling importance. Other cases might be collected, of sudden and violent and fatal diseases of the brain, and other organs, occurring under similar circumstances. In most cases of this kind, therefore, we should proceed cautiously, and never without constitutional treatment.

With these explanations I will repeat that the plainest rule with regard to the expediency of curing diseases of the surface such as I have referred to, appears to be, to ground our opinion of the probable effect of removing them, on the effect their access and establishment have produced on the general health. This rule I have been in the habit of regarding for many years, and it has never yet, to my knowledge, led me into trouble: and being more and more convinced, that, for all practical purposes, it is better than any of the nosological

distinctions with which our books abound, I hope to be excused for offering it to the notice of those members of the society, who may think the subject of any importance.

MEDICAL JOURNAL.

BOSTON, DECEMBER 13, 1831.

INFLUENZA.

AN influenza has been prevailing extensively in this city for the last three or four weeks, and still continues to afflict many families. Its symptoms are the same as at former periods, and are too familiar to every practising physician to require enumeration. As in times past, its immediate are not so serious as its more remote consequences, and it becomes all who are seized to watch vigilantly, lest any severe injury comes of it to some vital organ. Several cases in which the disease has terminated in ulcerated sore throat, have already proved fatal.

The same disease, we understand, is extensively prevalent in New York, Pennsylvania, and Maryland.

THE CHOLERA.

THE latest speculation respecting the nature of this disease and its mode of communication, allies it to the influenza, the dengue, and other complaints that have an atmospheric origin;—diseases that spread wide, and pervade cities and families, but cannot yet be considered as in any way communicable by contagion. This view of the subject is taken by Dr. Smith of New York, and though

it is as plausible as any other, yet we hope it may prove false. It were certainly better that it should be of a nature to be excluded from our shores by proper measures of police, than so entirely beyond human control as are all meteorations epidemics.

The opinions we allude to are contained in an Inaugural Address delivered at New York, by Dr. Smith, one of the professors of the College of Physicians and Surgeons. He ranks all epidemics under three classes, viz.

1st. Contagious epidemics—or those diseases which arise from specific poisons, generated by disease in the human body, and communicable to healthy persons by both mediate and immediate contact. Their extensive prevalence is favored by a peculiar state of the general atmosphere.

2d. Infectious epidemics—or those forms of disease, mostly fevers, which prevail in the summer and autumn, and which are produced by the miasmata or malaria exhaled from decomposing animal and vegetable substances.

3d. Meteorations epidemics—or such diseases as originate from certain insensible or secret qualities of the general atmosphere. They prevail in all situations and seasons, and often spread over extensive tracts of land and ocean.

After showing his reasons for believing that the Cholera is neither contagious nor infectious, he thus offers his views of its true character.

In deciding that the disease does not belong to the first two classes of epidemics, we are naturally led to reduce it to the third; and that this classification is not arbitrary or forced, will clearly appear upon comparing the phenomena of the disease with those of epidemics, which are gene-