

lectures. The clinics thus far have been exceedingly large, and the surgical operations performed before the class numerous and interesting. Some of the more formidable I will undertake to report hereafter.

I. D. B.

Albany, N. Y., October, 1865.

SPOTTED FEVER IN RHODE ISLAND, 1810-14.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—What I have lately seen in your JOURNAL, relating to spotted fever, induced me to turn to my note-book of the years 1810 to 1814, inclusive, in which years it prevailed as an epidemic where I then practised, viz., South Kingston, Washington Co., R. I. For four years there was not a single day that I did not visit one or more patients affected with what was so called, although a great majority had no spots, and it might more properly be called *sinking typhus*. I noted 575 cases which fell under my care during its reign as an epidemic; when it became sporadic I ceased to enumerate my cases. The greatest number that I visited in any one day appears to have been 15.

I propose in this communication to notice particularly the treatment.

April 5th, 1810, was called to Mrs. J. B., a tallish, light-complexioned lady, aged, say, 45. For some time previous she had complained of a very sore mouth, which at this time was better. This morning she was attacked with severe vomiting, after getting up and going into her kitchen closet; and at the same time was seized with pain in the left side, just back of her breast, accompanied by a chilly fit. I found her with pretty severe pain in the part above mentioned, attended with vomiting, which brought up a worm. The family as well as the patient expected that I would bleed her, supposing it to be an attack of pleurisy. I found her pulse, however, extremely weak and unresisting, her countenance pale, and I determined neither to bleed nor vomit, nor to give anything cathartic except ol. ricini. I also recollected that I had recently bled in a case somewhat resembling this, and had lost my patient, although I took blood but once, and but very little. I accordingly gave Mrs. B. two grains of opium, with oil of peppermint; the pain abated, and she got to sleep. I ordered an epispastic to the affected side, as also a repetition of the opium in case the pain returned. Left a mixture of camphorated tincture of opium, and spts. nitre dulc.

At night I was called again; the vomiting had recommenced, and she had brought up one or more worms. Opiates and spirits applied to the pit of the stomach checked the vomiting, and I put her upon wine.

The second day of her illness, I found her pulse weak; her tongue

whitish; the pain not considerable in her side; but she complained of some pain in the head, and sometimes the pain was in the abdomen; in fact it was a flying, shifting, unseated pain.

The next day, being the third of the disease, I went early in the morning to visit her again. I was met by Mr. B. at the door of his house, who informed me that his wife had just had a very ill turn; that her pulse stopped; that she became cold, and that he did not know but she was dying. This ill turn was one of the features of the disease—the *sinking typhus*—so termed by my particular friend, the late Dr. Miner, of Middletown. I found, upon inquiry, that wine had not been given to the amount which I had directed. I was informed that she had vomited once since I saw her the day before; and that two black spots had been observed in what she ejected. Her daughter thought them to be clots of blood, but the patient herself thought they were darker, and too black for blood. I directed the doses of wine to be increased; and, in addition, prescribed the wild indigo, with *rad. serpentariæ Virgin.* Blistered her neck and right side, as the pain had sometimes shifted to these parts of the system. Her skin was moist, most of the time; feet cool; tongue whitish and foul, with a thick fur. Mrs. B. took three grains of opium at night, and rested comfortably.

Next day my skilful friend, Dr. Peter Turner, met me in consultation; he approved of my practice and agreed to its continuance.

On the succeeding day, being the fifth, she seemed better; the fur began to start from her tongue, which looked very red when it came off. Her pulse had been irregular, but was now regular. Continue the wine, with ether, *spts. lavend. comp.*, and other former remedies. Although she was in some symptoms rather better to-day, she had two alarming new ones—hiccough and thrush. For hiccough I prescribed honey, taken very liberally, which I have found better than musk or any other remedy for this symptom. Bark and wine for *apthæ*.

Next day, being the sixth, I added *spigelia* to her decoction of *serpentaria*, by the advice of Dr. Turner, as a remedy for worms. A few days after, she voided nineteen worms—the common round kind—at one dejection. From this time she convalesced slowly, and had finally a complete recovery.

Spotted fever has in some sections of our country been termed the *winter epidemic*; but it appears in other localities to be as prevalent in warm seasons as in cold. In my own practice it prevailed with equal severity in the warm as in the cold season; for in the third week of July I was called into a neighborhood, in the town of Exeter, where three children had each died on the third day of the attack. They were treated by their physician for worms, with calomel and other cathartics, but as soon as the physis began to operate they began to die, and expired very soon.

July 15th.—I was this evening called to a case, the fourth in the

same neighborhood with those mentioned above; a child between 3 and 4 years old—all the cases in that vicinity being hitherto children; to a fifth I was called in the same night, and to a sixth the next morning. The two last were taken ill in a house where one lay dead, the patient of another physician. The words of my journal kept at this time, are as follows:—"This complaint was very uncommon; the face swelled, the skin appeared purple, the pulse was quick, the eyes had a vacant stare, subsultus tendinum came on the first day of the attack, evacuations were suppressed." I forbore all evacuations, gave infusion of serpentaria Virginiana, camphorated tincture of opium, bark and wine, and blistered the three to whom I was called; they all recovered.

The next notice of a case is one in which a girl, 15 years of age, passed clotted blood from the bowels. And I ought to have noticed before, that, previous to being called to Mrs. B., I was called to a young man, about seven miles from my residence, whom I found actually dying, when I arrived, with hæmorrhage from the bowels, and he expired soon after I saw him. His brother was seized with the same alarming symptom, but by a liberal use of *sach. saturni*, combined with opium, it was arrested, and he recovered.

The summer of 1811 was one of the hottest ever known, and the winter of 1812 the very coldest, and yet the disease continued unabated in both these extremes. It was sometimes combined with catarrh in the cold season. As it attacked persons in all kinds of weather, it also seized those of all ages and habits. Among others, the Hon. James Burrill, of Providence, a model of temperance and excellence, who, as State's Attorney, was attending Court in South Kingston, and was seized in the Court House. He went to his inn, and sent for me. [The town of Burrillville was named in honor of him. He died a senator of Congress, of consumption, at Washington, D. C.] In the course of his illness, his wife came from Providence, 30 miles distant, to see him, and brought with her their family physician, the venerable Dr. Levi Wheaton. Mr. B. was somewhat better when they arrived, and I invited the Doctor to visit a girl aged 10 years with me, a daughter of Judge Clark, whose children to the number of ten all had this disease during its prevalence. This girl was very ill indeed; she was so weak that it was with difficulty she put out her tongue, and when the Doctor and myself came out together, he turned to me and said I would lose that patient. I made no reply, but returned presently and told the Judge and his wife to trust to wine alone no longer, but to feed the patient with slings made of West India rum till she was made warm and revived from her deathlike debility. Upon my visit the next day, I was told she had taken a full pint of the article, administered as I had recommended, and that she was better; and I so found her. She rallied, and recovered completely.

The quantity of stimulants required in some cases, to have any

perceptible effect, was enormous, and it never intoxicated at all. Still, such cases were the exceptions, as a great majority did not require this treatment; all, however, required some supporting treatment, and none copious evacuations. An ipecac emetic and castor oil to relieve costiveness, were not found debilitating, but needful and useful. That stimulation was carried too far in some cases, has been often asserted, and without doubt truly, as relates to some practitioners.

The manner of seizure was sometimes sudden, various, anomalous, curious and surprising. In the same year and the same month that I was attending Mrs. B. in Rhode Island, Dr. Hale, of Hartford Co., Conn., was called to see a woman aged about 22 years, who was taken suddenly in the meeting-house, in the time of the forenoon sermon. She was put into a carriage and carried home; she was so sleepy on the way that her husband had much difficulty in preventing her from falling out of the carriage. The debility was so great that the Doctor tells us he dared not make any evacuation. His first prescription was laudanum and essence of peppermint. He saved her, but she convalesced very slowly. On the 20th of May following, he was called in great haste to see the child of this woman. In two hours after his first seeing it, "spots resembling ink spattered on very white cloth, appeared over the face, neck and breast." It died, convulsed, in about eight hours from the attack. Two of my patients were seized with blindness, which was the very first symptom, in a state of perfect health. One, a man aged 67, was attacked a mile from home when walking; their sight never returned.

I have seen it stated in a letter that I never lost a single patient during the prevalence of this epidemic in Rhode Island. This was a great mistake; both those patients struck with blindness died, and it has since occurred to my mind that I was too much afraid of producing debility at that time, so that I omitted to give an emetic to either of them, by which they might possibly have been saved.

Your most obedient,

JOSEPH COMSTOCK.

Lebanon, Conn., September, 1865.

Reports of Medical Societies.

EXTRACTS FROM THE RECORDS OF THE PROVIDENCE MEDICAL ASSOCIATION.
BY W. H. TRAYER, M.D., SECRETARY.

Large Substances swallowed; Perforation of the Œsophagus; Death.
—Dr. Collins reported the following case:—

"On the evening of Sept. 7th, 1865, I was requested to visit C. E. R., a farmer, residing in Barrington. I reached his residence about 10, P.M. I found him to be a strong, compact man, 46 years of age, and of uniformly good bodily health. I learned that he had for some