

eases, it affected Children and the younger Persons more generally.

10. *This is a Real History of the distemper as it appeared in Boston New-England*, taken clinically from the life and not copied. There is no stroak or clause, but what I can vouch by real not imaginary cases. It is founded only upon observations or *phanomina*, that is upon the Symptoms that appeared in the course of this Epidemical disease; it must therefore be of permanent truth.

Account of some Puerperal Cases, which occurred at the Boston Almshouse during the winter of 1823-24. By JOHN WARE, M.D. Physician and Surgeon to the House.

BEFORE relating the cases which form the more immediate subject of this paper, it will be proper to notice the state of health in the Almshouse, before, and during the period in which these cases took place.

In the months of October, November, and the beginning of December 1823, there occurred a considerable number of cases of simple continued fever, the duration of which was generally not less than fourteen days, and the termination favourable, although the course of the disorder was very little, if at all influenced by medical treatment. In some instances, during convalescence, in consequence principally of improper diet, a diarrhœa took place, which in one patient proved fatal at the end of more than three months from the accession of fever, and in several others produced a long and tedious recovery.

During the winter there was among the subjects of the house a remarkable disposition to such bowel complaints as are usually met with at the latter end of summer and the beginning of autumn. From the middle of December to the middle of March they were very generally afflicted with diarrhœa, particularly so during the mild and open weather of the early part of the winter. This affected not merely those in whom it was the only complaint, but extended also to patients suffering under other diseases, particularly those of a chronic nature; and in these it proceeded to such an extent as to merge in itself the symptoms of the primary disease, and become the principal, or in fact, only object of attention.

The evacuations in this disorder consisted principally of undigested food, and thin mucus; though in many cases blood was mixed with these substances in considerable quantities.

There were also some patients, whose complaint might be considered as a true dysentery. It began with discharges of blood and mucus, accompanied by violent griping pains, a quick small pulse, dark and dry tongue, thirst, &c. It often terminated fatally. Cases of the latter kind were confined principally to children, and for the most part to those of a feeble and depraved habit of body. In these the disease from the first produced great prostration of strength and coldness of the extremities, and commonly ended fatally in three or four days; or when it did not terminate thus, passed into a diarrhœa which continued for several weeks or months.

It was difficult to assign any satisfactory causes for this state of things. Complaints of such a nature, are always in some degree prevalent in the Institution, particularly among new subjects, and are to be attributed, in part at least, to the peculiar diet of the house operating upon digestive organs, whose powers have been impaired by irregular habits of life. Many alterations in the diet of the subjects were made with a view to this very difficulty, and the diet of the sick in particular was entirely new modelled, but without much effect. The house in general, was as clean and well ventilated as usual, and as well as in such an establishment could be expected; the subjects being almost universally of that class and character, who can only be made clean and comfortable against their will, and who constantly relapse into a state of indolence and filth when left to themselves. It is worthy of remark, that during this period one of the superintendents of the house was twice seized with diarrhœa, and was sick from one of the attacks nearly a month,—although she slept in a distant part of the house and partook of a diet entirely different from the subjects.

I have introduced this account in order to show what was the general state of health when the cases occurred of which it is my object to give a more particular description.

The room in which women are confined, called the Nursery, contains, not only puerperal patients, but women nursing children, and young children, destitute of parents, who are under the charge of the attendant upon this room. It contained during the greater part of the winter five or six beds, and from eight to twelve occupants, exclusive of infants at the breast, of which there were three or four, the greater part of the time. The room is about 25 feet long, 20 wide and 8 or 10 high, having an open fire place and a sheet iron stove; in each of which there was frequently a fire. It has two windows, both looking to the north-east, and two doors, one of which was closed for the winter.

The Puerperal women in the Almshouse when they are young and healthy subjects, do commonly very well; although their infants, which are generally illegitimate, from the neglect and carelessness of their mothers combined with the confined air of the place, are seldom healthy. All those delivered between May and November 1823, recovered as rapidly as usual. On the 26th of November, Catharine Hunter aged about 18 was delivered, and during several days was recovering so rapidly that it became unnecessary to pay her daily attention. On the 3d of December, I was requested to see her, and found her labouring under severe and alarming symptoms. There was considerable and constant pain in the region of the uterus, which was increased by pressure. The whole abdomen was very sore, but not tense. The lochia had ceased, but the milk continued to flow. There had been frequent chills, but I found the skin universally hot and covered with a profuse perspiration, which gave a slimy feeling to the flesh. The tongue had a thin tough white coat. She complained of constant nausea, and some retching which brought up nothing but the liquids she drank. The bowels were affected with diarrhœa. The pulse were very small and rapid, never less than 120 in a minute, and often more. The respirations were short, hurried and imperfect, with sighing and oppression at the precordia. She had severe headache, with great and general restlessness and want of sleep. The thirst was excessive and uncontrollable.

An emetic of tartarized antimony and ipecacuanha, with calomel, was first administered, which operated thoroughly and with considerable temporary relief. This was followed by a blister over the bowels, a cathartic of calomel and jalap, and a few doses of calomel and opium, but the patient then refused all medicine and took nothing afterwards, except liquid to assuage her thirst. I have only therefore to detail the remaining history of her case. After the operation of the medicine and the application of the blister, the flow of lochia returned, and continued, with short intermissions, till death; its colour, however, was dark, and its smell, particularly towards the close of life, offensive. Delirium came on about the 5th or 6th day, slight at first and only during the night; afterwards more violent, and continuing both day and night. In short the appearances during the last eight or ten days, did not differ essentially from those which are observed in the last stages of ordinary fevers. There was the same black tongue; lips, mouth and teeth, coated with black adhesive mucus, the same cadaverous aspect of the countenance, delirium violent for awhile and then sinking away into a low muttering stupid state.

and subsultus tendinum, all ending in death on the 17th of December, about fourteen days from the time at which her disease had first become well marked, and twenty two from her delivery.

On dissection, the mucous membrane of the uterus proved to be the principal seat of disease. It was in size about as large as the egg of an ostrich, the parietes very thick, of a spongy vascular texture, and quite soft. The mucous membrane was of a very dark colour, thickened in some parts to a quarter of an inch, soft and easily torn with the finger. Its cavity contained a considerable quantity of a substance which resembled venous blood coagulated, and passing into a state of decomposition. It adhered to the uterus so closely, and resembled the texture of its internal membrane so nearly, that in some places it was difficult to decide exactly where the division between them existed. It obviously supplied the materials for the lochial discharge. The peritoneum was in some parts of the abdomen slightly inflamed. The mucous membrane of the intestines was redder in some parts of its course, particularly in the large intestines, than was natural, but could hardly be considered as affected with inflammation. The bowels contained a considerable quantity of a thin yellow mucus, mixed with a small quantity of fecal matter. No other parts were examined.

CASE II. In the beginning of December, Caroline Hadley, aged 20 was confined.

CASE III. December 6. Eliza Coltman, aged 22.

“ IV. “ 11. Mary Decosta, 30.

“ V. “ 27. Charity May, 18.

“ VI. January 6, 1824. Mary Moore, 25.

All these subjects were successively affected with very nearly the same symptoms as the first patient, although not all so severely. In several, however, the commencement of the disease threatened to be as alarming and dangerous, but yielded in a few days. I proceed to point out a few circumstances peculiar to the different cases.

In the subject of Case II, an emetic and cathartic produced a suspension of the disease for several days, when it returned, so as to require a repetition of the same remedies with the addition of a blister. But although in this way relieved from immediate danger, she suffered afterwards, for several months, from a depraved state of the digestive organs and a constant diarrhœa. Indeed it was not until the next summer that she could be considered as entirely well. Her milk did not leave her, and she continues to this time, to nurse her child.

In Case III. although the attack was similar to that in the other cases, yet in its progress the disease took an entirely different course. After the first few days the severe symptoms subsided, she became stationary and remained for as many as ten days in a weak, apparently sinking state, with a moist warm skin, a quick feeble pulse, disordered stomach and diarrhœa. During this time her lungs became affected, with pain in the side, constant cough, expectoration of mucus, febrile paroxysms and emaciation, her appetite bad, and the diarrhœa continuing with occasional intermissions. In this state, apparently on the verge of phthisis, she continued without amendment for nearly two months and then slowly recovered under the use of blisters, digitalis and a milk diet. She was not able to leave the Hospital, into which she had been removed, for more than four months after her confinement.

In Case IV. the first symptoms of the attack were comparatively mild and yielded immediately upon the exhibition of remedies. There was afterwards no return of the disease.

In Case V. the disease began with the usual symptoms, and severe in degree, but ceased after a few days. Again they returned, accompanied by a higher degree of soreness, pain and tension of the abdomen; again they yielded in part; but a good deal of tenderness and pain upon pressure, in the abdomen, remained, and continued with diarrhœa, loss of appetite, emaciation and a quick pulse for many months. She was exceedingly obstinate and perverse with regard to the use of remedies; and it was not till after long suffering that she submitted to the repeated application of blisters and a slight mercurial affection, after which she soon got well.

In Case VI, the disease was of longer continuance, but milder in degree than in any other. It continued for more than a fortnight before any considerable abatement took place; and the diarrhœa by which it had been accompanied continued a good while after all other bad symptoms had vanished, after the strength had amended and the appetite had begun to return.

These cases I have put into more immediate connexion on account of the great rapidity with which they succeeded each other. The VII. case occurred at a longer interval, as no woman was confined in the nursery for a considerable time. Caroline Sholtz, was delivered February 8th, and after being as well as usual for 5 or 6 days, was seized with symptoms similar to those which have been related of the other cases. These were suspended by active medicine, and the next day her appetite had so far been restored that she made a dinner

on beefsteaks. She was consequently taken down the same night more severely than at first. Her symptoms were very nearly similar to those of the first case. She was delirious and afterwards slightly comatose, her tongue and mouth dry and black, her strength much reduced, whilst at the same time she suffered from a constant diarrhœa. At the end of a fortnight, however, she became convalescent, and regained her strength for a short time, rapidly. Imprudence in her diet after a week's amendment, produced a great degree of irritability of the digestive organs. For many days, she rejected every thing taken into her stomach, and was exhausted by a constant diarrhœa. She partially recovered from this state of things, but never entirely regained the appetite and power of digestion which she exhibited on the subsidence of her original complaint. Her situation from this time to her death was very unequal. When she and those around her could be made strictly attentive to a proper diet, she amended; but upon the whole she lost ground. Three days before her death, some of her considerate attendants procured for her a meal of baked pork and beans, of which she partook with a pretty good appetite. In the evening she was seized with violent pains in the bowels, vomiting and diarrhœa, but conscious of her imprudence would not send for assistance till the next day, when she had become much exhausted. I found her with a weak feeble pulse, cadaverous aspect, and cold extremities. From this state she partially revived, but soon relapsed into it and died on the fourth day; six weeks from the birth of her child. No examination was made of her body.

It is proper to observe that a few weeks before her delivery, this subject had been afflicted with dysentery, the vestiges of which remained at that time and probably had some effect in predisposing the digestive organs to the derangement with which they were affected and which finally proved fatal.

Of the treatment of these cases there is little satisfaction in speaking. That which I adopted was in the first place to administer thorough evacuants, and the benefit produced by these was in nearly every case very unquestionable. The discharges from the stomach both of mucus and bile, were copious and discoloured, and the stools of a similar character. The headache, soreness of the bowels, nausea, and unnaturally moist skin, were generally relieved. I next blistered the bowels and gave calomel, with opium in sufficient quantities to restrain the diarrhœa, which was in every case a prominent and most formidable symptom. Where the mouth became affected, as it did in the VI. and VII. cases, I was induced to

think favourably of its effects. Laxative medicines were also occasionally prescribed after the first evacuations, and could a proper attention to diet have been enforced, I believe their effect would have been beneficial. Bleeding I did not employ, both because the character of the disease itself did not appear to me to require it, and further because some of the subjects were in such a state of exhaustion from previous diarrhœa as to render it doubtful how they would sustain the operation.

My impression, however, with regard to the medical treatment of these cases is, that in private practice they would all have probably recovered merely by procuring proper evacuations, by blistering, and possibly bleeding at the beginning of the disease; with a careful attention to the bowels, diet and regimen during its course. The crowded state of the room in which these patients were, the want of sufficient ventilation, the disturbance produced by the numbers of people constantly in motion, and more than all the impossibility of convincing persons of this class of the necessity of a strict attention to diet, had evidently a most unfavourable effect upon the welfare of the sick.

The rapidity with which the six first cases of this affection followed each other, and the large numbers which resort to the almshouse at that season of the year, rendered it difficult to make such arrangements as prudence would have suggested, for remedying these evils. During the long interval between the VI. and VII. cases, some measures were taken with this intention. The room was cleared of the children and part of its adult inhabitants. The seventh case occurred notwithstanding and advanced as has been seen. After its termination, the inmates of the nursery were all transferred to another room, and it was thoroughly washed, scoured, white-washed, dried and ventilated before being again inhabited.

In the beginning of April, Eleanor Campbell, in the last stage of pregnancy was attacked with vomiting and purging. She resided at this time in another room but was after a few days, removed to the nursery and delivered of a child which died a few hours after birth. The symptoms which had affected her before delivery, continued afterwards, and reduced her to a state of great weakness. She recovered gradually after a sickness of several weeks, during which the most troublesome symptom was diarrhœa. I could not attribute her recovery to any medical means employed, but rather to the quiet and cleanliness which prevailed around her and to the tractability with which she finally consented to submit to the regimen prescribed for her. This was the last case of puerperal sickness which oc-

cured, and this I could not consider as of the same nature, or proceeding from the same causes with the preceding ones.

In the months of April, May and June, several women were delivered in the Nursery and recovered as rapidly from the effects of parturition as is common.*

During the occurrence of these cases in the Nursery, two persons were delivered in other parts of the house, one of whom had been a good deal affected by diarrhœa previous to her confinement, yet neither of them suffered afterwards anything beyond the usual concomitants of the puerperal state.

Two questions of some interest are suggested by the consideration of these cases. 1. What was the nature of the disease, and 2. Was it propagated by contagion. With regard to the first I should answer, that I believed the disease to be puerperal fever, modified by the circumstances under which it existed, and accompanied by some symptoms which it does not generally exhibit. With regard to the second, I feel great diffidence in expressing an opinion. It is well known to be the opinion of some who have attended lying-in establishments, that when one case of puerperal fever occurs it is generally followed by others, and that its propagation is dependent upon contagion. Whether the facts which I have related afford any additional proof in favour of this doctrine, not being able to determine for myself, I leave to the judgment of my readers.

Cases, with Remarks. By Dr JONATHAN SIBLEY.

CASE I.—PUERPERAL CONVULSIONS.

A LARGE healthy woman, twenty-three years old, who had reckoned her full time with her first child, finding herself indisposed in the night, called me very early in the morning. I found her with slight pains, walking about the house, and occasionally seating herself in a chair. In this situation she was attacked with a violent convulsion when I had been with her but a short time. Immediately I took from her arm a pint of blood, and then carried her to bed entirely senseless. After stating to the friends and attendants as well as I could in a few words, the situation of the patient, and endeavouring to fortify their minds against another attack which we had much reason to fear, I then made an examination, and found, to my great consolation, the os uteri *somewhat* dilated.

* During the months of November and December, of the year 1824, several women have been delivered in the same room, and under circumstances equally unfavourable as the last year; yet no similar cases have occurred.

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