

leading journal of American dentistry,\* an unexpected opportunity has been given of impressing upon dentists the heavy responsibilities, hitherto generally unacknowledged by them, that attach to the extraction of teeth from pregnant women; and I cannot but hope that the views expressed may thus be made productive of decided and extensive good.

*Blue Hill, Milton, September, 1859.*

REMARKS ON INTERMITTENT FEVER, AND ITS TREATMENT,  
WITH SUGGESTIONS IN REFERENCE TO THE USE  
OF QUININE.

[Communicated for the Boston Medical and Surgical Journal.]

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FOR many months, and to the present time, Sept. 22, 1859, of the various diseases brought into Wards 32 and 33 of the Charity Hospital, under my charge, intermittent fever has been the most frequent. While a few of these were of recent origin, presenting the ordinary well-known symptoms, the majority were variously complicated, resulting from the frequency and duration of the attack, or occasionally, as it appeared to me, from an injudicious course of treatment, not in all cases had recourse to, by the sick, on their own responsibility. Almost invariably the liver was found to be functionally deranged, and, *en passant*, it may be stated that observation has convinced me that of all the important organs of the body, the liver is the most frequently implicated in a great number of diseases, and exerts a most powerful influence in almost all. The spleen was often affected, to a greater or less extent, and dysentery or diarrhoea was not an unfrequent attendant. With few exceptions, the alimentary canal was in an unhealthy state, as evinced by nausea, or vomiting, a furred tongue, a bitter taste in the mouth, loss of appetite, headache, and constipation frequently.

Within the last fifteen years, it appears to me that intermittent fever has become more common among our resident population, than had been previously observed, although then, as now, the greater number come from other States. To my mind, sufficient evidence has been presented to induce the belief that the prominent cause of the frequent and often severe complications, as also the oft complained of difficulty of preventing the frequency of a relapse, may not unjustly be attributed to the unbounded faith reposed in the alleged specific curative power of quinine, to the almost total exclusion of a required preparatory treatment, or the conjoined aid of other remedies. As an anti-periodic, the claims of quinine are universally recognized, and acted on; by some it is regarded, even in small doses, as one of the best tonics, in which

\* Dental Cosmos (new series of Dental News-Letter), August, 1859, p. 53.

opinion, judging from no limited experience at the bedside, I am not disposed, in all respects, to coincide.

Disclaiming the intention of disparaging, in any way, the real curative powers possessed by this valuable remedial agent, I am induced to believe that, as a general tonic, to invigorate the entire system, more especially in certain stages of many febrile diseases, it is not equal to the old infusion of the best red bark and Virginia snakeroot, quassia, gentian, &c., when well prepared. Satisfied of the intrinsic curative power of quinine, and also of the aforesaid infusion, both of which are in daily use in my wards, I cannot but regard them as possessed of different powers, if not modes of action, and that they are not equally applicable or beneficial, as remedial agents, in all cases, or at all times. Questioning all admitted into my wards with intermittent fever, as to the remedies previously employed, it was generally found that quinine had been almost exclusively relied on; and judging from the existing symptoms, the correctness of the above conclusion is submitted for practical consideration. Let it not, however, be inferred from such an opinion, that quinine, *per se*, is not fully appreciated, for of that I am certain; the fact, however, should not be overlooked, that, in common with all of our most active and valuable remedies, quinine is powerful for evil, no less than for good, and this, it is presumed, will not be questioned. In proof, however, of my estimation of quinine as a curative agent, reference to my recently published remarks on the Treatment of Yellow Fever, during the severe epidemic of 1858, will show, that while disapproving of the use of the once popular large dose of quinine, or any preparation of opium, at the very commencement of an attack of yellow fever, for the avowed object of cutting short the fever, and thereby arresting the progress of the disease, an idea—if I have correctly watched the different stages of yellow fever—vain and absolutely impracticable, the supposition was at the same time entertained, that at some stage of this fever, the use of quinine would eventually be advantageously resorted to, as a remedial agent, for the more successful management of some of the symptoms. This supposition became at last a fact, and at page 86 of those remarks the following language will be found. "To sum up the effects resulting from the step-by-step process of finding out and using this preparation—alluding to quinine, morphia and chlorine—in conjunction with the chlorate of potash and bicarbonate of soda recipe, let the following fact be stated, that, of the eleven patients last brought into my wards, one, in a hopeless condition, died, while the remaining ten were discharged cured." Such an occurrence, or anything approximating to it, certainly had not been observed during the preceding period of the epidemic, nor do I believe that, in hospital practice, similar success has ever been recorded. Indeed, in private practice, under the most favorable circumstances, equal effects are not always noticed. Satisfied that

this fact resulted exclusively from the introduction of quinine and morphia, &c., as fully laid down, I have no hesitation in remarking that, in the medical journals of New Orleans, it was deserving of notice, and would have obviated the remark made by one of the editors, that he had no doubt that quinine would in some way be a valuable adjunct to these remedies, but, to use his own words, "I will not direct it at present." Note, that this suggestion emanated from one who in past epidemics had strenuously insisted on the propriety and safety of large doses of quinine in the commencement of yellow fever, a practice which I opposed then, and I have thus far seen no reason to change my views. From this apparent digression, excusable from the importance of the subject, I resume that equally important one, the treatment of intermittent fever; but fearful of trespassing, at one time, too much on your pages, the conclusion will shortly follow for an ensuing number.

#### HYGIENIC TREATMENT OF GLUCOSURIA.

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It is well known that M. Bouchardat attaches great importance to hygienic treatment in diabetes. He wisely recommends that medicines should not be given until after a long and thorough perseverance in the course of alimentation, exercise, clothing, &c., which he prescribes. Although M. Bouchardat's advice in this respect forms the subject of several works which are probably known to all our readers, we have thought it of advantage to recapitulate the principal points, which we find in a paper recently published by him.

*Alimentation.*—The first rule to be observed in the alimentation of a patient with glucosuria, is abstinence from feculent substances, or at least, a considerable diminution in the quantity taken; which forms the basis of the treatment. The following list comprises the most common articles of this kind, which ought to be proscribed: common bread, made either of wheat, rye or barley, &c.; pastry; rice, Indian corn and other grains; radishes, potatoes, the feculæ made from them and from arrow-root, and other nutritious feculæ; the farinaceous pastes of all kinds, such as vermicelli, semoule, macaroni, &c.; the leguminous seeds, as beans, peas and lentils; chestnuts; buckwheat; preserves and other sweet substances and drinks. The exclusion of sweetened articles from the diet should be more rigorous and longer continued than that of feculent substances. The use of milk is unfavorable.

The substances which may be allowed are very numerous; I will enumerate the principal ones. Meat, of every description, may be recommended, either broiled, boiled, or roasted, or cooked in any other way, with such seasoning as may stimulate the appetite, provided that flour does not enter into the composition of