

## EXTRACTS

FROM COMMUNICATIONS RELATIVE  
TO THE  
MALIGNANT CHOLERA,*Received from the CENTRAL BOARD OF  
HEALTH.*

## THE CHOLERA AT HOLBECK.

CASES admitted into the cholera hospital, 109. Died 57.

When the disease first made its appearance here, it was of a very malignant and rapid form, soon running into the stage of collapse. The remedies then employed were small doses of calomel and opium, sinapisms, brandy, ammonia, ether, hot-air bath, &c.; but no impression was made, as the first five or six cases soon proved fatal, but they were aged, or intemperate, or pined and starved. We then used scruple doses of calomel every hour for adults; omitted opium, diminished the quantity of brandy, and found that our success was greater.

In the collapse stage of the disease, we think that the most benefit was derived from large doses of calomel, scruple doses of capsicum, with one ounce of brandy and hot water, every hour. In some of the cases the calomel was alternated with Stevens' saline. Some cases, we thought, were ameliorated by stimulant injections, containing capsicum and spirits of wine or brandy. We derived no permanent effect from transfusion, the patients rallying for a time, but eventually sinking. We invariably applied sinapisms to the spine and stomach, with hot-water to the feet by means of tins.

W. CASSON.

R. G. HORTON.

Holbeck, near Leeds, Sept. 20, 1832.

## THE CHOLERA AT PRESTON.

Although the *treatment* of the cholera in this town has been very unsuccessful, yet the means employed to prevent the spread of the disease have been attended with the most happy results. The disease has made its appearance in four different parts of the town at different periods, and always in districts where other infectious diseases usually prevail, yet by early interment in coffins smeared with tar and chloride of lime, fumigating the infected houses with chlorine, lime-washing the walls, scouring the apartments, and burning or washing the clothes of the deceased, the cholera has not in a single instance recurred in the same dwelling; and only in one

district was the disease transmitted to any adjacent houses, and in that instance it was entirely subdued after four deaths had occurred.

Only two cholera patients have been admitted into the hospital, and they were moribund when removed from their own dwellings, and died a short time after their removal.

JAMES HARRISON,

Res. Surg. of the Preston Board of Health.

Preston, Sept. 20th, 1832.

## SPEEDY PRODUCTION OF SALIVATION.

It really would appear from the tenor of recent reports to the Central Board of Health, that the experience of our Indian brethren, who have treated cholera in its native soil, ought not to be so much disregarded as the practitioners of Europe have seemed disposed to do. They (the former) have told us that bleeding and calomel, combined with opium, enabled them to save a much greater proportion of cases than has as yet rewarded the innovations of Europe; and recent reports to the Board the writer has now the honour to address, which intimate a tendency to return to this practice, seem to support the alleged great utility of the Asiatic method. Many years ago, when the undersigned had some thoughts of proceeding to India to pursue his profession, and when his head was of course full of tropical diseases, and of plans for their cure, he happened to witness a case of rapid salivation by an unusual method of introducing mercury into the system; and it occurred to him that if salivation was such a sovereign remedy in most tropical diseases as it was reported to be, and if the method of introducing the medicine into the body which he had witnessed in Scotland was to be as speedy in its effects in India as it was in a colder climate, then a very valuable resource might possibly be found, in adopting that method in the treatment of these very rapid and malignant distempers. Under this impression the writer drew up a short paper on the subject, and transmitted it to his late lamented friend Dr. Andrew Duncan, jun., who was at that time (1819) editor of the "Edinburgh Medical and Surgical Journal," and who did him the honour of inserting it in that most respectable periodical.\*

The plan consists in scarifying with a lancet some portion of the surface of the body, and sprinkling upon the wounded surface a small portion (finely levigated) of the powder of corrosive sublimate. A considerable degree of local irritation ensues

\* Vol. XV., page 46, 1819.

upon this operation, and in the case the undersigned had an opportunity of seeing a very rapid mercurial effect was produced upon the constitution. The gums became intensely sore, and salivation was established in less than twelve hours after the powder had been applied.

The writer of this is well aware that the result of a single case is not much to be depended upon; and that even were it established, salivation might generally be produced in this way on ordinary occasions; yet in the new and strange circumstances under which cholera places the human constitution, where the powers of life, that of absorption among the rest, are so signally depressed as to be suddenly almost annihilated by some subtle aerial poison, the chances are that no mercurial effect would be produced by the plan now suggested. All this may be very true, yet the undersigned still thinks the plan deserves a fair trial by those who may have great opportunities of using it; and he does not think that he would have been justified in entirely suppressing what he has thought of on this subject, whilst we are still labouring under the effects and the fear of a pestilence which seems hitherto to have set all human efforts to arrest and cure it, very much at naught.

W. MACLURE.

14 Harley-street, London,  
Oct. 13th, 1832.

#### CROTON OIL, CALOMEL, PRUSSIC ACID, &c.

I WAS led to the use of frequently-repeated small doses of irritating purgatives, as the most likely means of restraining the discharges. With this intention I have given a combination (in the form of a pill) of croton oil (Short's) with calomel and extract of hyosciamus, one-eighth of a drop of the former and a grain and a half of each of the latter; and have invariably found it restrain the evacuations. I repeat the pill every hour until that effect is produced; generally from six to a dozen pills will be required, when the evacuations (if any) will be of feculent matter, or frequently like chopped spinach. I have not found the vegetable astringents of the least use in restraining diarrhœa when it is of the rice-water-like fluid. I have seen it continue for days under their use, when half-a-dozen of the above pills put a stop to it. At first I gave the croton oil in quarter-of-drop doses every two hours, but frequently found it produce so much pain and uneasiness in the stomach, with frequent vomiting, that I reduced the quantity and found it answer much better. The incessant vomiting was a very troublesome symptom until I began the use of prussic acid, in doses of one and a half to two minims, every two or three hours, until

it abates, which I have invariably found to be the case after three or four doses. I had tried nitrous acid and various other medicines, with blisters, &c. &c. without the least effect.

CHARLES TROTTER, Surgeon.  
Stockton on Tees, Sept. 18th, 1832.

#### TREATMENT AT PLYMOUTH.—MERCURIAL REMEDIES, &c.

I am induced to add my humble testimony to the *essential importance* of the mercurial plan of treating the *second period* of the cholera, or that characterized by the rice-water evacuations.

In the course of the fearfully extensive experience which the medical practitioners of Plymouth have just passed through, numberless have been the instances in which the first stage of cholera has been successfully treated, and the serous discharges altogether prevented, by the immediate or early use of a warm *magnesia draught*, containing a few drops of laudanum, and half a drachm of the compound spirits of ammonia, repeated twice or three times within the hour; and then followed by a full dose of calomel (℞ss to ℞j), conjoined with extract of henbane, a small portion of opium, or some aromatic powder. By treatment such as this, varied according to circumstances, many lives, I am quite satisfied, have been spared. Of this the daily reports of the Board of Health give no information.

In the second stage of serous evacuation, the rapid introduction of *mercury* into the system is the main object which I have felt myself justified in attempting. Everything beside has seemed not merely secondary, but trifling, and even cruel. The repeated and persevering employment of calomel, in doses of gr. ij, combined *at first* with very minute portions of opium (gr.  $\frac{1}{6}$  or  $\frac{1}{8}$ ), the assiduous use of mercurial frictions, and the application of sinapisms to the epigastrium and front of the abdomen, in order to allay the irritability of the stomach and intestines—these are the principal remedial measures I have relied on in this period; and, in the majority of cases, with unquestionable success.

The patients do not bear large quantities of beverage without vomiting; so that I have only allowed them small spoonfuls at a time of toast-water, tea, or good beer, to satisfy the thirst, or rather to moisten the mouth and throat.

*Stimulants*, for the most part, have proved exceedingly prejudicial, aggravating the symptoms; and, by exhausting the little remnant of excitability, hastening the fatal result.