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AN
ACCOUNT
OF
THE YELLOW FEVER

AS IT PREVAILED IN PHILADELPHIA
IN THE AUTUMN OF 1762;

A PAPER PRESENTED TO THE COLLEGE OF PHYSICIANS OF PHILADEL-
PHIA AT ITS STATED MEETING, SEPTEMBER 7, 1793.

BY
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FIRST PRESIDENT OF THE COLLEGE.

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ACCOUNT

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THE YELLOW PAPER

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INTRODUCTION.

OF the Yellow Fever of 1762, as it occurred in Philadelphia, no account has ever been published. Dr. Redman's paper, heretofore existing only in manuscript, in the possession of the College of Physicians, has been judged worthy of publication, partly for this reason, but also for its own merits as a contribution to clinical medicine and to medical history. A sketch of the life of its author* may serve as the best introduction to the Letter; for the presentation of which a vote of thanks was passed by the College, after its reading, September 7, 1793.

Dr. John Redman was born in Philadelphia on the 27th of February, 1722. He was educated by his parents with a view to his entrance into one of the liberal professions. After finishing his academical course, he entered upon the study of medicine with Dr. John Kearsley, then one of the most respectable physicians of Philadelphia. Upon the

* The substance of this brief sketch is taken from the Philadelphia Medical Museum for 1808.

expiration of his apprenticeship, he went to Bermuda; where he practised for several years, with such success as to be able, with the property he inherited from his father and a small loan from a relation, to go to Europe to complete his studies. He spent a year in Edinburgh, while the medical school of that city was in the hands of the first Monro, Sinclair, Alston, Plummer, and Rutherford. He also passed a year in attending at Guy's Hospital; and some time afterwards in attendance upon lectures, dissections, and hospitals in Paris. He finally graduated in the University of Leyden, in 1748, under Albinus, Gaubius, and Muschenbroek, at a time when that institution still retained much of the reputation it had derived from the name of Boerhaave.

After thus receiving the highest honors of his profession, Dr. Redman returned to his native country, and settled in Philadelphia. As a practitioner he was very successful. Combining at first surgery and obstetrics with general practice, the delicacy of his health obliged him afterwards to decline all but medical cases. It was observed by his grandson, Dr. John Redman Coxe, that, while "his principles in medicine were derived from the writings of Dr. Boerhaave, his practice was formed by the rules of Dr. Sydenham. He early saw that the modes of practice recommended by that enlightened physi-

cian, in the 17th century, in England, were equally proper, in the 18th century, in America, from the sameness of the manners of the inhabitants of both countries, in those different periods of time. He saw distinctly the truth of Dr. Sydenham's remarks upon the laws of epidemics, and regulated his practice by them. He considered a greater force of medicine necessary to cure modern American than modern British diseases, and hence he was a decided friend to depletion in all the violent diseases of our country. In the diseases of old age, he considered small and frequent bleedings as the first of remedies; and to them he thought himself indebted for much of the ease he enjoyed in his descent down the hill of life. Towards the close of his life, he read the works of Cullen, Brown, and several other physicians, who had called in question the truth of Dr. Boerhaave's principles in medicine. He admitted their objections, and embraced some of the modern opinions and modes of practice with the avidity of a young man of five and twenty. He published, about the year 1759, a defense of inoculation, and advised the use of mercury to prepare the body for the reception of the small-pox. He entertained a high opinion of that heroic medicine in all chronic diseases. He introduced the use of turpeth mineral as an emetic in the gangrenous sore-throat of 1764; and such was its efficacy, that he did not lose a

patient who took it in the early stage of that epidemic."*

Dr. Redman was elected one of the physicians to the Pennsylvania Hospital immediately after its establishment; and, afterwards, was chosen the first President of the College of Physicians of Philadelphia. He discharged the duties of these stations faithfully, and reluctantly retired from them, only in consequence of the infirmities of age. He served also, for many years, as a trustee of the Colleges of Philadelphia and New Jersey.

He was faithful and punctual in his attendance upon his patients. His manner was bland and agreeable, and his conversation often facetious and full of anecdotes; though also frequently serious and instructing. A lady, whom he attended in a fatal consumption, said to one of her friends, that "death had nothing terrible in it when Dr. Redman spoke to her about it."

Not long after his settlement in practice in Philadelphia, he married a lady of uncommon accomplishments, by whom he had two sons and two daughters. To these, and to all the members of his family, he was very closely and affectionately attached.

Having from early life been decidedly religious,

* Phila. Med. Museum, 1808, p. 51.

in 1784 he became an elder in the Presbyterian Church, and devoted himself assiduously to the duties of that office. He was, however, a stranger to bigotry, and often worshiped with sects of Christians different from that with which he was united. He gave secretly and liberally to the poor; and, when confined by sickness, would convey his bounty to them by the hands of a friend. When retired from practice, he visited many of his old patients regularly two or three times a year, always leaving behind him some pious remarks, or anecdotes, that were not soon forgotten.

With all these virtues and this piety, he is described as having had, in early and middle life, a quick and irritable temper, whose impatience, however, was very brief in duration; and he was sometimes known to make acknowledgments to his pupils and servants for even a hasty expression. In person, Dr. Redman was rather below the middle stature; with dark complexion, and black eyes; and a manner, both in speech and gesture, of uncommon animation.

At the age of about 86, without previous signs of unusual indisposition, he was attacked with apoplexy, and died in a few hours. This took place in March, 1807. He was buried, at his own request, in the Presbyterian church-yard on Arch Street, in

the same spot in which his mother had been interred fifty years before him.

Undoubtedly, Dr. Redman must be regarded as having been one of the most eminent physicians of his time. He became successful and distinguished, by his ability, industry, and character, at a time when, the science of the profession being less advanced, and less diffused, than now, much more depended upon the individual man than upon either his training or his opportunities.

It has been thought proper, in printing the paper which follows, to adhere strictly to the letter of the original manuscript. If its didactic value be necessarily diminished by the lapse of time which has occurred since its preparation, there is yet so much in it of practical observation and excellent sense, as to entitle it to rank as something more than a merely curious fragment of medical literature.

THE YELLOW FEVER

OF THE

YEAR 1762.

GENTLEMEN :—My memory being much impaired by age and infirmities, and especially by a severe and long fit of the rheumatism the winter before last, affecting at times my head, and also from the effects of a former, and more lately a second attack of the influenza, I have endeavored to assist my recollection respecting the yellow fever, which raged among us chiefly in the southern parts of the city in the year 1762. By recurring to and examining the contents of my day-book in the months of August, September, and October of that year, and by making some enquiries of an ancient woman and others, whom I remembered to have attended at that time

under particular circumstances, (being deprived of any notes I might have then taken, or at least not now to be found,) hoping thereby to render such and the best information I can, at this distance of time, on the subject to the College of Physicians, respecting our mode of treating the disease at that time—and which I believe was the most successful—as may be agreeable (though perhaps not fully satisfying) to their wishes, and of some use in their important deliberations on the present alarming disease among us.

By the aforesaid retrospection, I find during the whole month of August my prescriptions were chiefly and almost solely for dysenteries and some fevers which appear to be of the remittent kind and rather slight, by the nature, quantity, and continuance of the medicines to each patient.

The 28th of August appears to be the first instance of my prescribing directly as to one in the yellow fever, according to the medicines and mode of practice I pursued therein, as hereafter

mentioned; and, as I then had but a small share of practice below Pine Street, (just beyond which it began,) comparatively, with Drs. Bonds and some others, I have some notion that they had patients in it thereabouts a week before me. From thence to the 1st of September my share of patients with it was small, not above four or five; though the others had, I think, in that space of time, many more additions in that quarter. But from that time they daily increased upon me, so that by the 15th, or rather from the 20th to the 25th, (when it seems to have been at the height of its progress,) as appears by my book, I had daily to attend eighteen or twenty patients in the different stages of it, exclusive of convalescents. From the 27th it appears to have gradually declined, so that by the 20th of October I had but two or three fresh patients in it, and those I believe only such persons as had lately come to lodge or live in that part of the town. After that I had but one new patient that appears to have had that fever in its full force, all others

being, according to my prescriptions, either convalescents from it or dysenteries and remitting fevers, with some symptoms analogous to the precedent fever, but not very dangerous, and, if I recollect right, seldom fatal.

The fever aforesaid was mostly circumscribed between Pine Street northerly to three or four squares from thence southerly, and extended from Front or Water Street to Third or Fourth Street westward. Some few had it nearly as low as the Swedes' Church, and even to Moyamensing, but not many. I had only one patient near the last-mentioned place. A few had it also about the bridge and along Dock Street, and some higher up in Second and Front Street toward Walnut Street; but very few above Walnut Street were affected with it. Its first and greatest ravages were about the new market and the square to the eastward of it, in which—after some considerable search and tracing it—it was found to have originated in a number of small, back tenements, forming a kind of court, the entrance to which was by two narrow alleys

from Front and Pine Streets, and where sailors often had their lodgings, to which a sick sailor from on board a vessel from the Havannah (where it then raged) was brought privately after night, before the vessel had come up to town, to the house of one Leadbetter, where he soon died, and was secretly buried; and I believe Leadbetter, with most of his family and many others in that court, soon after fell a sacrifice to the distemper; and from thence it spread rapidly, first affecting the houses nearest adjoining in Front and Pine Street.

The patients were generally seized with a sudden and severe pain in the head and eye-balls, which were, I think, often though not always a little inflamed, or had a reddish cast, great prostration, or rather depression of spirits, pain in the back and bones, a sick stomach, generally attended (but in various degrees of violence) with frequent vomiting, more or less of green or yellow bile, and was distinguished from the cholera morbus by not having a purging with it. There was also a kind of cardi-

algia or burning heat about the scrobiculus cordis with great oppression; but, if I remember right, not much pain like a colic. Nor do I recollect any chill *generally* preceding the above symptoms, however it might be with some. The skin was dry, with a disagreeable burning heat in it, sensible to the hand of others when applied. The tongue was not peculiarly dry at first; in some rather moist, but not covered with much mucus, if I remember right. The pulse was not generally very full or tense, but very quick in the beginning, by which the degree of fever was chiefly designated; yet in some persons previously very plethoric, from high living and other circumstances, some fullness, without tension, was observed in their pulse in the first stage; after which, in many the pulse become so moderate in every respect as to be scarcely distinguishable from a person in health. Tho' very restless, and often tossing about or changing position from oppression at the præcordia, I think they were but seldom very delirious; but if the disease continued to increase and resist

the power of the medicines, they rather grew comatous, which was a bad symptom, and generally continued till death, unless the black vomiting came on and roused them by its frequent ejection; and even then some appeared quite sensible, tho' not capable of preserving their thoughts very regular and steady on any subject. They soon became yellow in their eyes and skin universally, which daily increased, and became extreme in some before, and always after death; and in those which recovered, it continued during the whole convalescent state, and in some great part of the whole outward skin came off in scales.

I do not remember to have seen any petechiæ, but just before or immediately after death there appeared many livid spots in several parts. Their urine was generally high coloured or yellowish; and, though sometimes it might have some sediment, I do not recollect its being at any time so regular as ever to pronounce upon it as critical in those who recovered. I rather think that we judged more from an abatement

in the high colour and yellowness, of its being a favorable and promising symptom.

They generally died on the fourth, fifth, or sixth day, some few later; but after the seventh day, or even sooner, if the pulse was much calmer and slower, without a coma, but inclined to an easy, natural sleep, tho' short, the urine nearer to a straw colour, with a moist skin and tongue, and the bowells easily kept regular, we were encouraged to hope and promise much, and generally succeeded in our prognostication. Yet some failed us after, if they had only some, but not all the above promising symptoms clearly. But whether any failed after having all of them fully confirmed, by a relapse or other ways, I cannot at this distance recollect. From former experience on a similar disease among us, I believe the practitioners mostly avoided venesection and emetics; few persons, after the heat of summer, being so plethoric as to indicate the former, and which on a former occasion they had found ruinous, as sinking the patient too low to bear the *medicines immediately*

necessary to succeed, and beyond the power of their best invigoratives to support them under *their operation* and the debilitating force of the disease. And as to the latter or emetics, they had been found often to increase and perpetuate the vomiting beyond relief afterwards. As to myself, I had early imbibed a prejudice against them—and in favour of the saline purgatives—in the case, from observing, about the year 1741 or 1742, when the yellow fever was first introduced here, while a pupil to Dr. Kearsley, Senr., that, by the use of them in the first stage of it, he saved most of his patients; while others, by emetics, lost many if not most of theirs. I, therefore, in pursuit of the same practice, immediately began with ℥j of *genuine* sal Glauberi every hour or two, till, by taking four, five, or six doses, the bilious matter was turned downwards and plentifully discharged—and I believe most of my brethren used the same or something similar for the same purpose—assisting the operation and supporting the patient with wine and vinegar whey, thin gruel, or barley

and raisin drink with a little wine in it, and at night some light cordial anodyne. Next day repeated two or three doses of the same, if the indications made it necessary; or immediately began the use of an antiemetic powder, composed of tartar. vitriolat. gr. x, and a half or whole drop of ol. cinnamon every four hours, in a spoonfull of simple mint or cinnamon water, and two spoonfulls of a strong decoction of snake-root every two hours, continuing the forementioned drinks warm, in small quantities at a time, as often as they could bear it; giving, also, instead of one of the above powders, daily a dose or two of the sal G., when indicated as necessary, by a return of sickness at stomach, or the not having two or three stools a day, as long as the dejections appeared bilious, and as soon as that and the vomiting or sick stomach quite ceased, omitting the antiemetic powders, but continuing the decoct. Serpentar. Virgin. We also gave with it, or between its doses, a spoonfull of a vol. neutral mixture, (to be specified hereafter,) and, to aid the design of keeping

up a free perspiration or gentle but constant moisture on the skin, we added a bolus of five or six grains of theriac: venet: with three grains of camphire every four or five hours, or a bolus of theriaca, consisting of ℥ss or ʒij and four or five grains of camphire, at bedtime, if the bowells were inclined to be too loose during the perspirative course. This or the asthmatic elixir were the chief anodynes I used in the case, liquid laudanum not being then so much in use as it has been since, except in cases of extreme pain, or those which were spasmodic,—I mean in my own practice. Whether others were more free in the use of it, I cannot say. Being afraid of inducing a stupor, as many were inclined to become comatose on the subsiding of the pulse, and which always portended a bad issue, I sometimes added four or five grains of rhubarb to the anodyne bolus, if a discharge from the intestines was too long protracted. Here I must adjoin what should have been mentioned before, but escaped my mind at the time, viz., that almost from the beginning was applied to the pit of the

stomach an anodyne stomachic plaister of the-riaca, etc., and renewed daily as long as any sickness of stomach or oppression of the præcordia prevailed, and for some time after, though not so often renewed. This afforded more relief than some would expect, and was often sensibly usefull as well as comfortable to the patients, under the symptoms above mentioned, and also in the hickups which sometimes affected them. The drinks before mentioned were alternated with some pleasant herb tea or simple water acidulated with the mineral acids, good rich beverage, or lemonade, or even weak punch, made with boiling water, and drank when cool; also water, well stored with ripe, acescent fruits, roasted or raw, and weak wine and water, and changed, as most agreeable to patients, unless where any particular symptom required a strict adherence to any one or more of them. I think we seldom gave pure wine alone; and, if I recollect right, it was not always, or rather but seldom, agreeable to the patients themselves. We seldom used epis-

pastics unless they became comatous, and then not often with much effect; yet could not avoid trying them as a last resort, or to satisfy others connected, that every possible effort was made to save them, and prevent the painfull feelings of those connections if they had been omitted.

Some patients had bleedings from the mouth and nose, and with the intestinal dejections, in which cases our chief recourse was to the mineral acids in all their drinks: red wine and water cold, and a strong decoction of cort. Peruv. two parts, serpentar. Virgin. one part, with a little astringent spice, and omitting the serpentaria altogether, if the pulse became regular and not sunk below the standard natural to a debilitated state. The bark in substance was not much used, at least, I am sure, not by all the physicians or practitioners; and the reasons, as near as I can recollect, were, that some at that time were not yet got to be clear in their judgment, (as has been the case since,) or not accustomed to, perhaps prejudiced against, the use of it in that form, while the pulse was too

quick and no sediment in the urine. But an objection of more moment, with me at least, was, that it brought on an oppression or sickness at stomach, so as often to be rejected, whereby the symptom of bleeding aforementioned, already too dangerous, (when that was the case,) was considerably increased, and consequently the injury resulting far exceeded the advantage that might otherwise have been expected from it. Whether any were so determined in their judgment, or so adventurous to persist in that mode, I will not say; but if they did, I believe the consequences were not such as to bragg of, or to encourage an imitation of them.

Some used instead of the plaister a fomentation of spices stewed in wine or spirit, and, I believe, with advantage; but I had too much confidence in and experience of the good effects of the plaister to relinquish its use; yet, as I believe the fomentation to be a proper and good application as far as it went, I had no objection to its use, and often ordered it occasionally, pre-

vious to every renewal of the plaister, provided it was not substituted entirely for, or set aside the use of the plaister too long at a time.

After two, three, or more days, continuing the perspirative or sudorific course according to the indications, if the symptoms appeared quite or nearly as promising as mentioned in page 13, whether the urine had a sediment or not, but especially if it had, I then substituted in the room of most or all the other medicines a free use of the decoction of the bark and snakeroot, equall parts, diminishing the latter and encreasing the former as the convalescent state advanced; allowing whey of wine alone without vinegar, and a more free use of wine in their gruel or panado, and barley drink, agreeable to their palate or desires, and leaving them to the largest use of any, or sole use of either, as they chose themselves, together with sometimes a cup of beef tea, or broth made of chicken or any of the white meats, or a small portion of those meats dressed agreeable to their palates, once or twice a day, if they desired it, without any

urgency from others, which I rather wished to be avoided; ever thinking it best to wait till the stomach, that truly vigilant centinel and instrument of nature, should prejudge without perswasion, and notify the necessity and propriety of a new, and more solid and durable supply, which it generally did soon after the free use of the bark, and then only could we be sure of its sitting easy on the stomach or being properly digested and diffused. Tea, coffee and chocolate, (not too rich,) and toast, were also now allowed, as they had been through all the disease, under the same proviso of their being agreeable to and desired by them. As the convalescent state advanced, nothing more was necessary than a prudent gradual increase of solids in their regimen, with fresh air in proper weather, and seasonable moderate exercise, and the daily use of a tonic medicine, made by infusing in wine nearly all the same ingredients as are used in making Huxham's Tincture, which was not then got into such general use as it hath been since, and sometimes a little

rhubarb was added thereto. Yet with most the recovery was slow and tedious, and often needed the addition of chalybeates, with bitters and country air, before a perfect and complete restoration of all the natural functions could be obtained, especially in the weaker sex.

Thus, gentlemen, have I endeavoured to give you a concise and plain narrative of the disease then imported and prevailing among us, and our generall mode of treating it, in the best manner I could from recollection, without attempting to theorize upon it. But a plain inference from our manner of encountering it is, that whatever might be the specific quality of the morbid cause, its effects were a stagnation and corruption of the bile and the contents of all the abdominal glands, dissolving the blood and other fluids, and thereby depraving and debilitating all the functions of life, and rendering them unfit and unable to preserve it, and that our chief curative intentions were to discharge the morbid matter as fast as possible, first by the *prima via*, and then by the pores of the skin and uri-

nary passages, at the same time using such medicines as tended to correct any acrimony in the fluids, resist their effects, and strengthen the whole habit for their expulsion, and with such kind of nutriment as was adapted to the same purpose, or to restore strength to the debilitated powers after the disease was terminated. I should now conclude, with only adding more particularly some of the prescriptions mentioned only generally in the narrative, but a few things having occurred while writing which were omitted to prevent interruption. I shall now add them first, viz.: Tho' an early prejudice induced me to prefer the Sal Glaub. Ver., yet I believe others used the Tartar. Soluble and Crem. Tart. with rhubarb or jalap with equal advantage, provided the evacuation was seasonably and duly obtained. But none that I know of used either mercurials or antimonials; however, that need not make us suppose that they might not have been used had the physicians then been possessed of that knowledge which longer time and experience, and greater

enlargement of medical science has afforded us, and whereby we now know that they may be used with advantage in cases where formerly they were thought more likely to do great mischief. Nevertheless, I hope those of the present day will use great precaution and precision in their observations before they determine on the propriety and safety of them in preference to others. Though I said that V. S. was avoided, yet there were particular cases and circumstances that seemed to require it. Such, for instance, as pregnancy with a full pulse, rather tense than otherways, with great pains; as was the case with the woman mentioned in the beginning of this, who was at the end of her reckoning, and seized so suddenly and severely with pain on the top of her head that—as she informed me lately—she verily thought it occasioned by a clap of thunder that happened at the same instant. She was bled moderately; the blood was dissolved, and therefore not repeated. She had the symptoms as usual with others, and was delivered early on the fifth day, (a few

hours after which her husband died, on the fourth of his illness, having been comatose very early,) and tho' under these deplorable circumstances, with a free discharge of the lochia, great paleness and coldness of the skin in her face and arms, and a pulse scarce perceptible the whole night, she gradually recovered from them next day under the use of the medicines aforesaid, rendered somewhat more cordial by a larger proportion of Tinct. Croci and spt. lavand. to the Vol. neut. mixture. The child was alive and well, and next day appeared yellow all over; was weakly for three weeks, and then grew healthy and hearty, and lived to be the mother of children.

And here, for the encouragement of those who may be engaged in obstetric cases under such circumstances, I choose to mention that the midwife, tho' much terrified, so as scarce to be retained till it was over, and must, from her office and situation, for some hours have received much of the effluvia that came from her patient, yet she escaped the infection entirely.

Whether this be from a kind, superintending Providence over us, exercised peculiarly in our favour in the execution of duty on such occasions, let every one judge, and practice accordingly.

Pediluvia, on account of the pain in the head and also for cleanliness, were used at first, and then bathing the feet and legs with vinegar, also the hands and face with the same, and continued to the forehead by a cloth wet therewith, and a bowl of vinegar in the chamber with a hot iron sometimes put therein, which served for the benefit of both patient and physician, and attendants; and indeed was usefull for dipping the hand therein and rubbing one's face before approaching the bed and feeling the pulse. This was the chief preventative or preservative I used, besides great temperance, avoiding to visit patients fasting if possible, and keeping tobacco in my mouth while in the sick-room, not from any expectation of benefit from any quality in the tobacco, except that of preventing my swallowing my saliva. This

method I found better than a constant use of preservatives, which after a little time I perceived to affect my mind with such fears as I thought were likely to render me more susceptible of infection than the omission of them, and so discarded them and went fearless tho' not thoughtless wherever called, and I thank God have been preserved harmless from such ills to this day; whether that fearlessness was well founded, or only arose from that presumptive illy founded confidence and insensibility that too many I suspect have, not much for their own good, I will not say, but it had its use, at least for the good of others. And here, my brethren, I beg leave to add one more thought not quite forreign to the subject, that with all my apparent courage something would and often did obtrude to raise my fears, and a sense of danger frequently affected me, but how far effectually must be left to Him who knoweth all things, and searcheth the hearts and tryeth the reins of the children of men. But thus much I know, that when that Light which

shineth in darkness led me to the exercise of piety and virtue, it made me happy even in the midst of danger or troubles, and when slighted or neglected it rendered me miserable, tho' surrounded with every other circumstance capable of giving pleasure to the senses. But to proceed. I observe further, that I was often astonished to see how well the stomach would bear the small doses of sal Glauber. when everything else, even the simplest and pleasantest drinks, were almost immediately rejected. A *spontaneous discharge* in the beginning, especially if bilious—but *which* seldom attended—always abated the sickness and vomiting, and rendered relief easier and more speedy. Yea, and if in the midst of the sweating course the oppression of the præcordia returned, or any other symptom denoting or indicating a fresh accumulation of corrupted bile or lymph, or the previous discharge of them had not been sufficient or complete, a few spontaneous intestinal dejections, whether bilious or not, gave a speedy relief, and therefore a common laxative clyster,

in order to produce such dejections while other medicines were preparing, sometimes almost precluded the necessity of using them. But I generally gave three or four drams of the saline purgative to make sure of a more complete discharge, and so prevent a recurrence of those symptoms in future.* And it was remarkable that they sweat more easily and freely after well emptying the bowells than before. And here I must not omit, what should have been mentioned before, (and for which I am indebted to the recollection of Dr. Rush, who was then my pupill,) viz., that a peculiar diagnostic

* Here I think it right to add, in confirmation of the benefit of keeping up a discharge from the bowells, that the woman before mentioned lately informed me that though pregnant and expecting her labour every day, I kept her intestines daily in a lax state more or less till the symptoms of parturition commenced, which was on the fourth or fifth day of her disease. Yet she and the child were preserved, and she recovered as fast as most of the others. I find also that I often enjoined a few grains of rhubarb with the bolusses, especially the large one at night, which I suppose was intended to obviate its binding quality.

symptom attending it, and by which the doctor remembers my having distinguished it from the autumnal remittent that also had been prevailing, while other symptoms were too obscure to determine upon, and that was a very great sensibility about the *scrobiculum cordis*, so that a slight pressure thereon would occasion a painful or very uneasy sensation, which in some increased so much as not to be able to bear even the bedcloaths without pain and restlessness. On further recollection I find that *flor. camomeli* were added to the decoction of *serpentaria*, especially toward the latter end of the perspirative or sudorific course.

With respect to acids in use as medicine, they were chiefly of the vitriolic kind, both the *spt. vitrioli dulcis* and that denominated *elixr. vitrioli*. But from a considerable experience I have had since of the special good effects of the *spirit. salis marini*, internally used in a very putrid kind of small-pox which at one time prevailed among us, attended with livid spots on the arms and legs in great numbers, and in some

with mortifications, and also in speedily removing an indurated tumour on the lips of children in the same disease, which otherwise soon terminated in a gangrene, which destroyed the whole cheek of one side before the patient died, which they always then did after languishing very miserably for many days; in which last case the early and constant application of a piece of linnen, two or three double, wet with three parts vinegar and one of spt. salis, and frequently renewed to the part while only indurated or but little discoloured, were peculiarly and often speedily efficacious to prevent a gangrene, and in the former cases the frequent application of vinegar, with a little spirit and some strong, bitter decoction, such as wormwood, rue, camomile, and dittany to the legs, where generally the livid spots appeared in greatest numbers, and indeed in a few cases wholly livid from the knee to the toes (some of which they lost) was peculiarly beneficial, and especially as they were much disposed to breed maggots if omitted some hours, as was too often the case during the

night by the inattention of nurses. In these cases were also used plenty of acidulated decoction of bark with a little snakeroot and camomile flowers in it, and a plentiful use of wine and water was allowed, or sometimes pure wine if agreeable to the patient, which it generally was in these cases more than in the yellow fever. Nay, I knew a negro man who recovered beyond all expectation (being all over corrupted) upon the use of near a pint of rum every day, to which he had been long accustomed and craved much, but to which his physician only consented on supposition that nothing could save him, and thought it a pity to debar him from what he so earnestly desired. I say from these considerations I have been led to imagine that the marine acid might be preferable to the vitriolic in the fever which is the subject of this narrative, and Dr. Rush says he remembers to have heard Dr. P. Bond speak favorably of it at that time, but I had not then got into the use of it.

As to emetics, I have only further to add that

the husband of the pregnant woman aforesaid, having had an attack of a remittent, as appears by my book, two or three weeks before his seizure with the other, I imagine his first symptoms must have led me to suppose it was only a return of his remittent, as it was not my usual practice to give an emetic in the other, for he had a vomit and dyed on the end of the fourth day, very yellow, having been very comatose for two days before, as I have already mentioned.

From a further inspection of my day-book and recollection of circumstances, I find I must have had one patient as early as the twentieth of August, but was overlooked, from his fever at first appearing to be only of the remittent kind, according to the medicines prescribed, to the end of the third day, when, a considerable remission or intermission appearing, he commenced the use of the bark, which judgment of his case I was the more readily induced to form from the circumstance of his living above a mile from and to the southward of the city, near low and wet grounds, where remittents and intermittents

then prevailed, tho' he sometimes came into town and transacted business near the place where the yellow fever had then just began to appear, and I had not then seen any of them. But as I now recollect that he grew worse on the end of the fourth day, so as to discontinue the bark, became gradually comatose on the fifth, when on the sixth four blisters were applied, besides other medicines administered, and dyed on the seventh day, some yellowness appearing the day before, and much increasing near the time of and after his death, we have no doubt of his having received the infection of the yellow fever, though probably somehow commixt with a remittent from his having been previously affected with the seeds thereof, and by giving that cast to the symptoms at the beginning disguised it for awhile.*

* Upon a more close inspection and recollection, I also find that I had a few more scattered patients after the 20th of October up to the end of that month, particularly one Mr. Ab. Judan, whom I attended in consultation with Dr. Cadwalader, and who dyed on the 30th with a black vomit-

As to the use of the bark in substance, I have only to add that a sensible man, of a corpulent but vigorous habit of body, informed me that, under the yellow fever in 1748, when it was very fatal here—his physicians having prescribed it in that form to him,—(on what day of the disease I cannot say,) he became so oppressed and restless that they were obliged to desist and return to other medicines, which carried him safely through without the renewall of that or any other bad symptoms.

I do not wish to trouble my brethren, or spend their precious time in recounting apparent trifles, but, as in such important matters as malignant and dangerous diseases as well as on some other subjects, a minute circumstance that may at first be deemed but of little worth, may prove of great moment on some future occasion, I shall conclude my narrative with observing that I do not remember that Dr. K., Sen. ever

ing; and also two in the first week of November, but none afterwards.

gave me any other particular reason for his using, so early as he did, the saline purgatives upon the first appearance of the yellow fever here, but that, in the course of his medical studies and reading, he had met with the following practical observation in an old author: "That in all fevers of the putrid, bilious, and malignant kind, accompanied with a moist tongue, he had always found the saline purges far more proper, safe, and efficacious than emetics"—which he carefully treasured up in his mind for future use; and, perhaps, as he spent some months in Barbadoes (where it often prevailed) before he came to this city, he might have had an opportunity there of confirming the sentiment. And may not this be a hint also to us not to slight or neglect the practical observations of even antiquated authors, because they do not quadrate with the more enlightened theories of the present day? Yea, tho' we may with some reason, from the enlargement of medical science since, smile at their mode of theorizing upon them. Let us rather pay all

due respect to their memory, and give them all the credit we can, for their great and often painful attention to what might conduce to the progress of the healing art and the benefit of mankind; and but for which possibly we might not have yet been so far advanced in successful practice as we now are, whatever we might have been in diversity of theories. Is not old Sydenham an eminent instance of the truth of the above observation? whose theory is often such as almost to disgust a modern theorist, and yet whose practical observations are such (at least in the principal matters of them) as that he who attends to them most seriously, and follows them the most closely, will be most abundantly compensated, with satisfaction to himself in practice and benefit to his patients.

Perhaps few of us, with only the same opportunities and degrees of knowledge which the ancients had, would have advanced so far, or done as much or as well as they did; and, therefore, in a comparative view, all circumstances considered, they may possibly far ex-

ceed the most of us in the degree of credit they deserve, especially when it is considered that some of them were chiefly if not solely indebted for their knowledge and success to their own assiduity, industry, and attentive observation. But, lest I become tedious, I shall now conclude with hoping, yea, assuring myself of the candid reception and construction of this small attempt to evidence my respects to the College of Physicians, and hearty concurrence with them in their important deliberations on so critical an occasion, and thereby yet contribute, as well as I can, (though not largely or actively,) through them, to the publick utility, which, if in the smallest degree should be the case, it would answer my highest wishes. Not doubting also their kindly overlooking any defects arising from not having time to correct and transcribe what I have written, or from impaired faculties.

I am, gentlemen,

Your respectfull fellow-servant,

JOHN REDMAN.

PHILADELPHIA, September 3, 1793.

From further consideration on the experience and numerous instances we have had in later years of the good and sometimes surprising effects attending the use of calomel and other mercurial preparations, in resolving and removing obstructions of the liver, with incipient dropsies, as well as those of the other viscera, particularly infarctions of the mesaraic glands, and also in some autumnal bilious fevers, by procuring large discharges not only of scybala and fluid bile, but also such as was very tenacious, as if it had been impacted in some of the biliary ducts, to the great and immediate relief of the patient—of which Dr. Carson gives a remarkable instance in himself—I have no doubt, but had we then been in the use of it, and given a dose of it immediately preceding the saline purgatives, it might have produced a more speedy and copious discharge of the bilious morbid matter, and perhaps more complete in the first instance, besides probably anticipating or preventing the necessity of repeating so often

the saline doses, to the no small comfort of the sick, to whom so many and frequent repetitions were very irksome. I therefore most heartily concur with those who are in the use of calomell and jalap for the purpose of evacuating the biliary and other contents of the stomach and intestines in the beginning of the disease. But as the first and even the second dose of those dry and indissoluble powders sometimes fail of producing the desired effects, to the loss of too much precious time in the cases, and considering, as I do, the neutral saline purgatives as more apt to pervade and scour the biliary ducts and intestinal glands, and probably with less stimulus than jalap or other such substances, and possibly acting as much or more by their solvent than stimulant qualities, which is of no small moment if the bile or lymph to be discharged be very tenacious, as Dr. Mitchell sometimes found it on dissection—I am apt to think that three or four drachms of the salts, given in due time after the dose of calomell, might

more speedily and efficaciously produce the effect, and save much of the time necessary to wait before they dare venture to give a second dose of calomel and jalap; and therefore wish and recommend, on some proper opportunity, to make the tryall.