Dr. Jackson Nov. 5. 1835.

The number of elementary substances now known amount to 52. – The slightest alteration in the atomic composition of bodies, changes their properties; hence medicines act differently upon different persons. – All properties are divided into Static & Dynamic. – The Dynamic force is well illustrated in the increased power of the Magnet by Galvanism.

Nov. 9. — Force is by some considered as an innate principle in matter; – by others, as a distinct property, but penetrating it & causing its phenomena. –

By the term Force, we mean simply to imply a sufficient reason for the production of phenomena: – these can be known only by the human senses. – They are the result of forces. –

Nov. 14. – We start with the General Principle in our investigation that the "Organism of the Animal Economy is to be its own interpreter". –

There are two great groups of organs composing the An. Economy. – 1. The Nervous Apparatus and

Functions, - to which belong Sensation, - Perception, Motility, & Intelligence. - The diseases of this group, are all such as are classed under the Neurose Diseases, as Spasms, - Hydrophobia, - Tetanus, - Intellectual & Moral Aberrations, - Hallucinations of Sight, Taste &c. &c.

2. The Formative, Nutritive & Circulatory Apparatus, by the latter of which is meant not only the Heart & Arteries, - but all the vessels carrying the fluids into the different parts and tissues. - The Diseases of these are the Lymphatic & Sanguineous Irritations, - Inflammation, - Congestion, - Hemorrhage, - Altered Nutrition, - Vitiated Products &c. -

The Subsidiary Apparatus for the 1st Group may be considered the Eye, Ear, - Sense of Touch &c. - Muscles &c.

For the 2nd The Digestive & Respiratory Apparatus.

The Laws governing these groups may be 1. Simple local Impressions, - or 2. Impressions primarily made upon the Nervous System & then radiated to other parts, - thus a Chill is the indication of the morbid impression commencing in the Nervous System. -

Nov. 17. – All bodies may be divided into Organic & Inorganic. – The Organic have much Analogy. – They are composed of simple element & may be examined chemically. – Only 19 simple elements have been detected & these are divided into 2 classes. – 1. Those which are essential to their existence, as Ox. Hyd. Nit. & Carbon. – 2. Those which are accidental, – but not absolutely essential, – as Phosph. – Calcium, – Iron &c.

The Inorganic bodies consist principally of binary or ternary compounds, which saturate each other, – hence they are not liable to change unless acted upon by some external agent, – but the Organic are constantly changing.

Nov. 19. – Intense Heat & Exercise change the condition of the Animal Solids & Fluids, – hence it is said that an Ox, dropping dead from hard labour during the heat of summer, becomes poisonous. –

The changes in Animal or Vegetable Organic matter, are performed by the organs. –

Individuals are constantly undergoing constitutional changes, – hence we see the different treatment of disease

required by infants and adults. The fact that no part of the An. Economy remains permanent was known to Seneca & noticed in his writings. -

The movements of the different organs cease from several causes. 1. - Deposite of proper productions of the economy, but in improper places, as Cartilage in the Cellular Coat of the Stomach, - Bone in the Pleura. - 2. - Deposite of foreign substances, as Tubercles, - Cancer &c. - 3. Accumulation of fluids so as to arrest the action of the organs, - or Congestion. - 4. Change in the tissue of the organ itself. -

The origin of organic matter has been a subject of discussion. - All we know is that there are no sources of Animated Beings except from Living Beings, - or from the decomposition of such as were living. - But still we can know no other primary origin of organic matter than from the Creator. -

We have a few general principles to deduce from the preceding observations. - 1. Organic matter consists of a few elementary bodies. - 2. The structure of x-

the organs is always thus composed.-
3. Organic matter also enters into our aliment & nutriment
4. It may be active & assume different forms in being,-
or merely passive, with a capacity for receiving life.-
5. It is immutable in essence, but variable in form.-
6. In itself, it has no inherent power to take any form
or vitality,- but these are owing to external agents.-
7. The first cause of vital Phenomena, exists in the
mutual reaction between organic matter & the Vital
principle.-
8. Death is a loss of form of organic Matter.-
see p 9

Dr Chapman.- Nov. 13.- 1835.-

The following are the usual Laws of Epidemics.-
1. No two diseases of equal force can coexist at same place.
2. By continuance, Epidemics expend their force &
become gradually milder, & at length disappear.-
3. They are influenced by the sensible qualities of
the Atmosphere.-
4. They have not always distinct marks occurring

in every case, but may attack different organs & functions.-
5. They are as diversified in their approach, as in their mode of prevalence. -
6. They are capricious in selecting the persons they attack.
7. According to Pliny, they originate in the South, and proceed North & West; - but this is not always so. -
The reason of it is that the Epidemic principle in the atmosphere is sooner brought into operation where there is most Heat & Moisture; - Miasm &c. -
8. Two Epidemics of the same character rarely or never occur in immediate succession. -
9. Diseases depending upon Specific Contagion; - especially the Exanthemata; are more violent when they occur in the form of Epidemics. -

Nov. 19. - Fevers are of local Origin; - as for inst. in Vaccination. - Hectic Fever &c. &c. -

Fever is produced by Direct Sympathy, when the morbid impression is made internally by some substance taken; - but if it be made externally; - it is produced by Indirect Sympathy. -

The first impression in Fevers is made upon the Nervous System. –

Almost all Fevers are Gastric Fevers, – either Simple or Complicated with other Affections. —

Fevers are divided into Intermittent, Remittent & Continuous, – by many writers. – Cullen however divides them into Intermittent & Continuous & I coincide with him. –

Intermittent is a fever consisting of a succession of paroxysms between which there is a complete intermission or Apyrexia. – They are divided into Quotidian, Tertian & Quartan, – & of each of these there are several varieties. – The Tertian is the most common, & the Quartan least so. – See p. 10

Dr. Wood. – Nov. 1835

Oak Bark is derived from diff. species of Quercus. – Q. Alba or White Oak Bark, – Q. Tinctoria or Black Oak bark

The Black Oak Bark contains a peculiar principle called Quercitin, a yellow colouring matter, which fits it for Tanning. — Tannin – dose 3 grs. –

Galls. - Galla - are excrescences growing upon the Quercus Infectoria - & come from Aleppo, - Smyrna, & also Calcutta. - Incompatibles - are the Soluble salts of the metals, - as Iron Lead, Copper, Antimony &c. - the Alkaloids, - as Morphia Veratria, - Quinia &c. - Gelatin, - Min. Acids, - Alkalies & their Carbonates, - Lime Water &c. - hence these also are incompatible with all the Veg. Astringents, & deserve to be recollected in prescribing. -

Nov. 21. — Kino. - E. India is most generally used & is said to be the best variety. - From India & London. -

Catechu. - An extract from the Acacia Catechu. - This is an excellent application for elongated uvula, by holding small portions in the mouth & allowing it slowly to dissolve. - It comes from Calcutta & Bombay. -

Rhatany, Krameria. - Comes from S. America. - Peru. - Is similar in medicinal properties to Kino & Catechu - Communicates red stain to clothes like Kino. — Decoct. 3i. to Oj. - but Tannin is injured by boiling - It is preferable, - & from this should be prepared the Extract. When finely broken, closely resembles Kino.

See p. 15

Dr. Jackson – Nov. 23. 1835

All organic forms have a form limited by curves, – foundations lines &c. – but not so Inorganic – then they have straight lines & angles, as in Crystals – Their number is much greater than Inorganic. –

Organic bodies are regular but heterogeneous –

They are composed, each part, of solids & liquids. –

The simplest form of org. bod. is an imperforate vesicle & probably within this are several other vesicles. – This upon analysis, said to consist of Water, with Carbon & Ammo. Salts. –

Atrophy is a want of these elementary particles. –

Hypertrophy is an excess of these particles. –

Softening is owing to a disarrangement of particles. –

Hardening is owing to this connected with an alteration, similar

Change of constitution of vesicles & deposition of them out of their proper place produce Transformations & morbid Productions, – as Tubercles &c. –

The Laws which regulate the productions of organs are those which regulate Physiology & Pathology, – see p. 11

Dr Gibson, Nov. 23.—

On Gunshot Wounds.— Examinations should be made immediately after the accident, before Inf. sets in,— & it should be in the same position as when the ball entered.

Wounds of the Head,— are often very dangerous,— not only on acct. of the bone injured,— but also of the Scalp & Internal Membranes.—

Erysipelas of Scalp very apt to arise from Wounds, Stitches &c.— Treat it by Purgs,— sometimes Emetics, especially Antimonials,— & relieve the Stomach,— Be careful about Bleeding.—

Division of Scalp for Tic Douloureux;— or Emetics.— sup. 13.—

Dr Chapman, Nov. 23.—

Intermittent Fevers generally are easily distinguished.— That most resembling it is Hectic.—

Tertian is most manageable,— Quartan least.— Quotidian is apt to degenerate into Continued Fever.—

Intermittents in Children are usualy easily cured.— Post mort. appearances vary very much according to stage in which patient dies:— thus in Cold, merely

engorgement of Internal Organs, – but in Stot, we have Phlegosis of Al. Canal & Brain, & Ecchymosis & Softening of Mucous Tissue. –

Pathology always has been & is yet, difficult to explain. – Numerous hypotheses have been made, but to no purpose. My own conviction that it is of Gastric origin & the other organs participate by Sympathy. – Sometimes in recent cases, they may arise from Irritation or Congestion. – but in Chronic cases, from Inflammation. —

Malig. Int. – consists of cold stage only, because constitution is feeble, or cause is so overwhelming as to prevent reaction.

See p. 14

Dr Jackson. – Nov. 24. 1835

Every organ suppresses the existence of another organ & every function, another function. – Hence heart requires the existence of Lungs. – muscles. – of Nerves. —

The laws of formation of Org. & Inc. matter are perfectly uniform, – except in monsters. —

Elements of Org. bodies exists in 4 States, – Gaseous, Liquid, Semi Liquid & Solid. —

Does the blood contain uniform fluid? – It has been as-

serted & denied by high authorities & been thing showing it is that Arteries do not collapse after they are evacuated of blood, even if Abdomen be opened. —
In Hydrophobia, Air is found in whole cellular tissue, & in bloodvessels & this probably one cause of Death. —
It enters the blood from the spasmodic action of the respiratory muscles, forcing the air from the lungs into their bloodvessels. — The same thing occurs sometimes in persons who have been hung. — Air may also find access by being contained in our fluids & absorbed with them; — & also from external surface, as has been proved by the destruction of animals whose bodies only were immersed into noxious gases. — Thus Emphysema sometimes occurs over the body, — case of girl, caught cold scrubbing — Asthmatic? cats; subsides in few days. —
The same thing sometimes occurs from intestinal coat & great emotation, — also in Nervous patients. sup. 16

Gilboa - Nov 24 -

Compression of Brain after an injury sometimes arises from depressed bone & sometimes merely from the effusion of blood on acct of the rupture of the bloodvessels between the Dura Mater & Pericranium. Hence Trepanning becomes useful. - Injuries of Head are very various in their results, - slight ones sometimes producing death, while very severe ones, even when Brain is injured, & Ball lodges there, will sometimes recover. -

Wounds of the Eye by shot are dangerous to meddle with, - the Shot produces Cataract perhaps & can thus be extracted; - an early attempt is apt to evacuate the humours, - cut the Iris &c. &c. -

The Ear may be cut off without much injury to the sense of Hearing. - It is a very difficult matter to cut off the Ear, in quarrels &c. or even bite it off. - Use sutures. -

In Wounds or Operations about the Face, the Nerves are most important & should be most carefully avoided - particularly the Portio Dura, nerve of motion for the face. - from the Stylomastoid foramen. - See p. 17

Chapman's Nov. 24. –

Treatment of Intermittents. – In ancient times it was in a great degree empirical, it is yet in a great degree. It is divided into 2 parts, 1. that proper for the Paroxysm 2. That for Apyrexia. — During the Cold Stage, External & Internal Stim. – Ep te. – V.S. is very seldom necessary except in very malignant cold stage. – During the Hot Stage, Diaphoretics are indicated. – To allay irritable stomach use Alkaline Mixture – of Acac Gum

Pot. Carbon. – āā ʒi
Ol. Mentha – ♏v
Tinct. Opii – ♏xxx
Aq. Font – ℥iv
S. – Dose Tablespoonful every 4 hours
Drink Lemonade

Opium has been strongly recommended & has proved very serviceable. –

When local determinations, use V.S. & other appropriate remedies. –

During the Sweating Stage, little treatment required. – In most Cerebral affections connected with Miasmatic Fevers, – Opium has proved very serviceable. – especially in the apoplectic condition sometimes apparent. –

Profuse Sweating in Collapse, – remedied by Sinap. & Blister on stomach, – Alum & Brandy, – Friction with flannel &c. –

sup. 18

Dr. Wood. - Nov. 24. -

Logwood. - Hematoxylon. - Comes from Campeachy, Yucatan & also from Jamaica. - It is uncertain whether it contains any of the proper Tannin. -

Geranium. - Cranesbill. - An Indigenous plant. - Taste astringent, without bitterness, or unpleasant taste. - Hence given boiled in milk for Children. - Dose frs 20 ss.

Rubus Villosus & Trivialis. - Black & Dewberry. - Very useful in Diarrhea & other bowel affections. -

Uva Ursi - Bearberry. - Abundant in N. Jersey. - It is very useful in complaints of the urinary organs. -

Chimaphila, Pipsissewa - An Indigenous plant, growing in great abundance in sandy places. -

Its application to disease depends upon its mildness as a tonic, & upon its acceptability to the stomach. - It has appeared very useful in Scrofula &c. -

Decoction is preferable mode of administration. -

see p. 26. -

Nov. 22 - rainy; Nov. 25 - Clear & cold

Dr. Jackson. – Nov. 26th 1835. –

The next form in which the materials of the economy is Liquid. – The exclusive doctrines of Ancient Humoral & Modern Solia Pathologs are equally erroneous. – Every organ & tissue have their particular definite proportions of fluids, & when this proper proportion is wanting we have disease. – These fluids are movable, & hence thro' them we must operate upon the solids. –

9/10 of the Animal Economy consists of Fluids & sometimes more. – The solids & fluids constantly react upon each other & are mutually convertible into one another. –

Fluids are of various kinds & have been classified by Blainville, – 1. Common or general fluid – Water. 2 proper an. fluids, 1 stationary, 2 moveable. – 1. Serosity – 2. Synovia, Plastic Serosity, – Ovaries. – 2. Colourless, as Lymph & Chyle. – 2. Coloured, – as Art. & venous Blood. –

Each requires some notice. – 1. Water is indispensable to vital phenomena & perhaps also for Inorganic. – Absence of Water causes Death, – Inst. Desert of Arabia, – Plants without Water, – Cornea transparency, –

The largest proportion of Fluids of Economy consists of Water - 700 to 800 in 1000. - & the loss of it is shown by the shrivelling & shrinking of the whole external surface. - This is the essential feature of Cholera, - & is accordingly the basis upon which we must arrest it. —

Persons living in low, marshy situations have a larger proportion of Water & more subject to Hydropic effusions. - Sometimes there is too great a proportion of Water, - & then they are called Anemic. - Exposure will produce effusion instead of Inflammation & patient soon perishes. — See p. 27

Gibson. — Nov. 26 -

On Extirpation of the Parotid Gland, - its impossibility, - & the inutility of attempting to cut off any portion of this or other ~~portion~~ glands, - without being able to extirpate the whole. —

Wounds of Parotid Duct, apt to terminate in Salivary Fistula. - Gibson cures it by applying Caustic externally, - close the orifice & thus forcing the saliva into the mouth. Sewes are of most consequence & should be most carefully avoided. — Nasal Bones & other parts of Face. —

Wounds of Tongue are followed by profuse hemorrhage. At once draw out the tongue by Tenaculum or Needle & take up the bleeding vessels. —

Lower Jaw sometimes totally carried away by Ball.

Wounds of the Neck are dangerous on account of the numerous large vessels & nerves. — see p. 21

Chapman. — Nov. 26. —

The diet is very important in the cure of Intermittent. Light & nutritious food are recommended, — as Calves' Foot Jelly, — Eggs, — Oysters &c. —

Intermittents will not cure themselves spontaneously, nor can they be more readily arrested by allowing several paroxysms to pass ~~with~~ before remedies are applied. — They are apt to recur at septenary periods, — hence these should be guarded by Tonics &c. — to complete the eradication. —

℞ Pulph. Cinch. gr. xij
Lit. Spt. Nit. ℥ss
Tr. Opii. — gtt XXX
Aq. Cin. — ℥ss

— This mixture to be taken at the time when the return is expected together with a blister over Epigastrium, or upon Extremities, to time and to be in full drawing at the time of return. —

Continued Fevers are said to run their course without Intermission. – Some consider them as a single paroxysm attending from the beginning to the end of the disease, – & hence call them Continent, – but such, I am persuaded, do not exist in any case.

Most common is the Autumnal Bilious in U. S. – Symptoms. – Progress of Disease. – Duration is generally 7 or 15 days, & its solution apt to observe Septenary Periods. – Causes, are Miasmata, – Heat, – Indiscretions of Diet, Drink, – Exposure, – Clothing &c. &c. —

— Nov. 26. – Women completed the Bones. —

— " 4 P. M. – Presentation of base to Dr Dewees

— Dr Chapman. – Nov. 27. 1835. –

Prognosis. – Favorable, soft & slow pulse, – skin relaxed stomach quiet; – clean tongue, – bilious discharges &c. &c. —

Postmortem; shows an affection of mucous membrane especially of the stomach about the Pylorus, where we find the stellated spots. –

The yellow skin denotes a want of bile & is an effect of a peculiar state of the Capillaries arising from the

Gastro-Hepatic Irritation; - causing a change in their secreta contents. -

Treatment. - First examine the patient & see in what particular portion the disease may be located. - If it be found in the stomach, with symptoms of incipient fever, - clear prima viae; - acid. drinks. - sponging; - cold to head if necessary &c. -

After fever sets in, - V.S. with judgement & discretion - indicated by strong, full, active pulse, - hot skin, - determination to brain or other organs. - So much blood should be at once detracted as to check the disease & protect the organs from structural lesion. - I always induce a state approaching to syncope, or syncope itself, in sound & vigorous constitutions. - Great error to substitute frequent small bleedings at this stage. - Rationale is that small bleedings merely abate action, large one alters it & so weakens diseased action that the natural process arrest it. - This is exemplified in Pleurisy, - Croup, &c. — It also facilitates Convalescence. Local Bleedings comes in secondarily. — Stim. Pecularities as

revulsives, - while Cold be applied to the inflamed part. -
Experience has shown to me the superiority of Emetics over Purgatives. - They reduce & equalize Circulation, relieve pain in head; - allay stomach, - & hasten the solution of fever. - It destroys congestion, - subverts morbid association, probably by its action upon Capillaries. - They are applicable to early stage, before inf. of stomach - or after that has been subdued. - Tongue is an evidence of condition of Inflammation, - being white, or furred - also tenderness & burning of Epigastrium & lack of alt, retching of slimy fluid - jactitations, which is an infallible symptom of Gastritis. - see p. 22

Gibson Nov 27. -

Wounds of Neck by Steel Horses &c. -
In Chest, - the Ball is apt to glide round the ribs & sternum & make a circuit round the Chest. -
Duel between Mr Taylor & Com. Barney; on side of mountain - Second Shot struck Taylor on Sternum & passed round under the Arm-Pit where it was cut out. -
Wounds of Intercostals, - arrest hemor. by pressure, or by turning off the rib & taking up the vessel; - then returning it to its proper place

In Gunshot Wounds of Lungs, bleed the patient freely & frequently, - clear the clot & allow it to flow out through the wound. —

Duel between Henson & Capt Gordon, in 1810. - Wound of Chest, Capt. suppurated & remained open till 1811 - when it was syringed with warm Milk & Water, - washed out some foreign substances which had remained there & the Capt. recovered. —

Emphysema may occur from such wounds, - & if extensive, allow the escape of the air by punctures. —

Wounds of Heart generally prove fatal, especially if either of the cavities of the Heart be opened, - although the parieties merely may sometimes be injured by a ball &c. - & the patient recover see p. 29. -

Chapman. - Nov. 27. 1835. —

On account of the difficulty of determining the proper time for administering Emetics, - it is probably more safe to give Cathartics, & especially Emeto-Cathartics; so as to "clear the ship fore & aft." I prefer Calomel worked off with Salts & Magnesia —

In Bilious Fever, there is a deficiency or suppression of bile, - the liver being first excited & afterwards engorged so as to suspend its secretion. - Then small doses of Calomel institute that action in the mucous membrane, which detaches from it & throws off the dark tarry matter accumulated. Large doses of Calomel are improper. -

French Views combatted as being too limited, - the fecal & diseased matter more injurious than slight evacuants. -

Danger also of purging too much, - & the proper practice is to maintain a medium between the 2 Extremes. -

Cold Sponging & Enemata, with proper restrictions. -

Diaphoretics, especially Antimonials, now are appropriate. Tart. Emetic is the best of them, but the method of its operating is unknown. - Cullen always gives it so as to nauseate, - but Fordyce never does, - & my experience confirms the latter opinion, as sound. - See p. 30. -

Homer Nov 27 -

Synovial membrane is vascular where it passes over the capsular Lig, - but is not where it passes over articular Cartilages. - hence Artic. Cartil. never inflame. -

Hodge - Nov 27 1835 -

Menses are a secretion from the body & neck of Uterus. Symptoms of menstruation show that the Irritation is the Uterus, not in the Vagina. -

The menstrual fluid is a peculiar fluid - 1. less florid than arterial, - less dark than venous - 2. consistence, 3. odour, - 4. coagulation does not take place as in Imperforate Hymen, - They have been met by other arguments, - that it is owing to mixture of fluids of vagina &c, - but blood mixed with these same in hemor. will coagulate. - Odour not owing to mixture with other fluids, - because other secretions & even breath of females at this time has same peculiar odour.

It is a secretion not an effusion. - Time of their appearance. - Periodicity. - Suspended by Pregnancy & Lactation, on acct. of irritation being transferred from Uterus to Mammæ. -

We are ignorant of the causes of Menstruation. It requires the Anatomical & Physiological healthy condition of Uterus & Ovaries, & the lining membrane requires a peculiar stimulus, which comes through the medium of the Ovaries. — Gall & Spurzheim trace it up to the Cerebellum. —

Their periodicity is inexplicable:- but their regularity can be easily disturbed, especially in nervous females.- Nor can we discover a cause for their Cessation. — It shows the goodness of Providence in exempting her from pain & trouble, - & allowing her to give due attention to her children. — The consequences of this change however are very important. - There is a disposition to Plethora & or mobile Irritability change of nervous system. —

1. The blood is collected in Viscera & Extremities. - poor. full, slow & laboured pulse, - dullness, - oppression of Chest, - & Precordia & Intestines. -

2. At this period they become liable to Nervous & Spasmodic Affections, - as Asthma, - Angina Pectoris &c. —

Hence the danger of this period. -

Doct. Wood - Nov 28 1835. -

Granatum. - Pomegranate. - Rind of Fruit. -
Rosa Gallica. - Red Roses. - Confect. & Inf. Ros. Comp. -
Rose Water is made from Ros. Centifolia, & is apt to become injured by keeping, - but this may be prevented by distilling it a second time. -

An elegant substitute for Cold Cream may be made by beating up Fresh Lard with Rose Water. -

Persimmon. - Tormentil & Bistort, are sometimes used. -

Alumen. - Incompatibles. - Alk. & Carbonates, - Alkaline Earths, - some Metallic Salts. - as Acet. of Lead & Borax; - but the Veg. Astringents may be combined with it. - Used in Hemorhage, - Menorhagia, - & Colica Pictonum. - - Injections of it very useful in Epistaxis, - Hem. for Rectum, - Leech-Bites (saturated hot solution). - Local Inflammations, - of Eye, Throat, in Sol. of grs XV to ~~XXX~~ to ℥j. -

Preparations of Lead - besides being Astringent, have a peculiar action upon the human system. - Stupefied sedatives to the nervous energy. -

Jackson. - Nov. 30 1835 -

Serosity exists in cellular tissue & serous cavities - The only changes which takes place in it are Exhalation & Absorption, - & the Influence of Gravity. —

It sometimes leaks out of serous cavities into Cell. Tissue & thence is discharged by Punctures. - Case in Almshouse of Hydrothorax & Ascites, - needle punctures were made in the feet, - & many pails full were discharged so that the patient recovered. — A grand flood!!!

It is a limpid fluid, - heavier than Water. — Differs from age, - it being more abundant in youth, gradually decreasing by age, when wrinkles appear. - It is more abundant also in females than males - - Also more abundant in Sanguine than Lymphatic Temperaments. — Dropsy is owing to an accumulation of this fluid, - & Cysts are formed in the same manner by having the serosity poured into sacs of the cellular membrane, - without Animalculæ. Sometimes gelatinous matter is poured out with it, - forming a hardness round the limb or body.

& from this results the Elephantiasis of the Arabs.— Hence the difficulty of being reabsorbed —

Synovia — exists locally, wherever there are locomotive joints, & in sheaths of Tendons in Bursa. — Sometimes accumulates & forms Dropsy of Joints, & most commonly of Knee-Joint from violent exercise. —

Plastic Humour, — is a fluid which oozes from a solution of Continuity, after hemorrhage ceases — (Bleinwell) Probably it is only the Serosity. —

Fluids of Ovaries exists in cells, each containing an Ovum. — It accumulates after Conception, swells up the cell which at length bursts & the ovum escapes into Fallop. tube. — Its increase sometimes forms Ovarian Dropsy; when the cells either remain distinct, or are all united together. —

The next class of Fluids is the Movable, — & motion is essential to existence. — These circulating fluids are enclosed in vessels composed of various forms of cell. tissue Lymph, Chyle, Art. & Venous Blood —

The circ. fluids are constantly changing & hence differ from the Stationary fluids. —

Lymph is contained in a delicate order of transparent vessels. – One set of Physiologists (Hunters) consider it as taken up by Absorbents, – while others (Magendie &c.) consider as the colourless blood returning through these vessels, – as venous blood thro' the veins. — see p. 31

Gibson. – Nov. 30 1835 —

Injuries of Spine occur in the back, neck or loins, & the symptoms vary according to the portion injured. The Paralysis occurs generally from the Inf. & Enlargement of the Soft parts pressing upon the Spinal Marrow, than from Depression of Bone. —

Wounds of Abdomen, vary much in their results. The Peritoneal Inf. immediately ensues & lymph is thrown out in 5 or 6 hours. –

The wounds of the Stomach are most dangerous. — The whole of the parietes of the abdomen, – peritoneum, & edges of the divided stomach, must be sewed together & the patient kept very low by V.S. – rigid diet & nourish him chiefly by Enemata. –

Wounds of Duodenum generally fatal —

Wounds of Liver also dangerous on acct. of the large bloodvessels with which it is supplied. —
— Of Intestines less dangerous than that of other parts. — Nature is here more efficient than the Surgeon. — Probes &c. — to search for the ball, — are inadmissible. — The wounded Intestine should not be inserted one into the other on acct of the different surfaces which would come in contact. — but the edges must be sewed together by the interrupted Suture & the ends cut close, — so that the knots may pass into the intestines. Sup. 32.

Chapman. Nov. 30. 1835. —

When the stomach will not retain the Antimonial Diaphoretics, — use the Neutral Mixture, — Spt. Mindererii &c. — & sponge the surface with Tepid Water. —
Blisters are at this time usually applied, though some absolutely prohibit them on acct. of irritation, as Fordyce, — Moussais &c. — The discrepancy of opinion is probably owing to the time when they are applied. — They act by revulsion, — drawing the blood from internal organs to extremities. —

The use of Bark during the Remission is applicable when the tongue is moist & no cerebral determination. — But generally there is not sufficient Remission for Bark, & then I prefer those articles combining a Diaphoretic with Tonic Power, — as Cascarilla, Eupat. &c. —

Should this treatment fail, Mercury comes next, — but this is not resorted to in this City. —

Congestive or Typhus Fever. — Its nomenclature. — Divided into Nervous & Putrid, or by French into Ataxic & Adynamic, — by Armstrong into Simple, Inflammatory & Congestive. — by Chapman into Mild, Intermediate & Extreme. — I shall describe it as Congestive, — noticing also its modifications. — See p. 33. —

Jackson — Dec. 1 : 1835 —

Lymph is a constituent portion of the Animal Fluids — It is heavier than Water, contains Fibrine, Spirits does not — is analogous to serosity, — coagulates like blood when exposed. —

Chyle is the preparation of the Blood, — it exists in the ~~Lymphatics~~ Lacteals & Thoracic Duct & results from the Digestion of Aliments. — It does not exist, however, in

the Al. canal, - for here we have a different fluid which is not always the same as usually supposed. -

Office of Mesenteric Glands, worthy of investigation. -

It has a creamlike or milky colour, when the food contains any fatty or oily matter, - but veg. food produces a clear transparent chyle. -

The rosy colour commences in the lower part of the Thoracic Duct & gradually increases as it ascends. -

Colouring & odoriferous matter is never taken up by the Lacteals, - but by the common Absorbents. -

Gibson. - Dec. 1. 1835. -

The Mind of a Ball never produces any injury; but death sometimes results from its striking upon the pit of the stomach, without sufficient force to enter. -

The Spleen is seldom wounded, - but if so, it generally produces almost instantaneous death, from the effusion of blood. - Sometimes merely a small vessel may be ruptured, & the patient may survive. -

Wounds of Kidneys & Ureters. - dangerous but not always fatal. - Effusion apt to produce Peritonitis. -

Wounds of Bladder dangerous from effusion of Urine, - Case of Lad, hot iron running thro' from side of the Acetab, to the Linea Alba, & urine discharged from both wounds. - The iron was red hot & seared the parts as it passed thro: so that adhesion took place & the boy recovered. - Treatment, - by Catheter & Antiphlogistic remedies. -

- Of Perineum, apt to produce suppuration &c. -

— Chapman. - Dec. 1. 1835. -

Great variety appears in the symptoms marking the approach of Typhus. - Sometimes they are very mild & gradually advance to a favourable termination, - if not interrupted by bad treatment or want of fresh air: this is the Typhus Mitior, seldom met with in U. S. —

We have next a graver variety, - marked with more decided, febrile symptoms, & cerebral affections. — Its duration varies from 2 or 3 days to 1 or 2 wks. — Aver. 8 to 10 days. This the T. Gravior, consisting in nearly equal proportions of Congestion & Inflammation. — When Congestion is more predominant, the disease comes on rapidly, - the patient sinks into collapse & does not react. —

Etiology.— Most European writers ascribe it to a specific contagion, propagated by actual contact.—

It is generated also in crowded, ill-ventilated apartments. The estimated limits of the Contagion is 8 or 10 feet.—

The incubative period of it is not determined, varying from a few hours to 60 or 70 days.— Heat seems to retard its development.— Cogent, however, as are the facts which seem to prove its contagious nature, yet I doubt its correctness.— It is well known that this fever is generated in crowded places,— & hence those entering such ill-ventilated apartments may be affected without any contagion,— from the very nature of the atmosphere in such places.— Thus we know the numerous uneasy sensations produced by remaining long in a crowded Court-Room in Winter.—

But this view is strongly opposed by its being carried about by Fomites: & hence its Contagious or non-contagious nature is yet sub judice.—

It may arise from other causes, especially from whatever,— physical or moral,— depresses the nervous system.—

Artificial Typhus may be generated by the mal-treatment of other fevers by the practitioner, - & this is closely Analogous to the Genuine Typhus —
Some contend that there is one peculiar Typhus, which always generates itself by Contagion; & another arising from Heat, Cold, - Miasmata &c. which does not propagate itself by Contagion. - If this be true, they should be distinguished by a correspond-ing change in our nomenclature into Typhus & Typhoid.
Jackson. - Dec. 3. 1835 — See p. 40. —

Blood. - The manufacture of this fluid is the great object of the whole apparatus of Organic Life, & also its distribution. — The whole phenomena of Organized Being may be reduced to 2. - Nervous & the Blood. - & these are opponent forces. -
Blood is a fluid formed from extraneous substances for the nutriment & sustence of the An. Economy, - & its motion is essential to vitality. - In the higher order of Animals it cannot be suspended for more than 3 or 5 minutes, - but may be longer among the less perfect —

The Blood is viscous, - soapy feel, - peculiar odour, - saltish & saltish taste. - The quantity has been variously estimated from 5 to 30 pounds, in the human system. - It consists of 2 parts, - 1 The Red Globules, - & 2. a transparent fluid in which they float. -

When extracted from the body, it presents a diff. appearance - 1. We see the Aura, which is probably mere vapour from Water - It soon coagulates & separates into Serum & Coagulum or Clot. - The Clot contains the Globules, about which there is great diversity of opinion. - The most modern opinion is that each globule consists of 2 portions, - a central spherical nucleus, - surrounded by a gelatinous or envelope mass. - Their size in human subject is said to be about 1/3000 in. in diameter & are larger in the lower order of animals —

The influence of bleeding is to reduce the number of red globules, - much more than any other portion. -

Rest has great influence in causing Coagulation of Blood; - Prof Meyer says Stag. is owing to want of nervous energy But no satisfactory reason has yet been given, - probably Chemistry will hereafter solve the question. - See p. 41

Gibson - Dec. 3. 1835 -

Wounds of joints, very dangerous, - on acct of Inflamm & Suppuration; & it is impossible to determine previously how far such injury may extend. - Use the most rigid Antiphlogistic treatment, - & especially elevate the limb so as to retard the ingress of blood. -

If stitches be necessary, the needle must not pass into the joint, - danger of Tetanus. -

Gunshot Wounds thro' the Knee or Ankle joint, generally require Amputation, - but not always. Bronchocele

Punctured & Penetrating Wounds in Fingers, Toes, &c. - & the most dangerous are dissecting Wounds, - which are more rare here than in other countries. - The principal cause of the mischief is owing to the difference of Constitution, & the nature of the Subject. -

The effects of a bad Constitution, illustrated by an injury received by a student in 1827, - from a broken Pitcher. - Another case from being scratched in opening an oyster. - Fatal case of Kissam of N.Y. - from absorption of Pus in dissecting. -

Dec. 4 —

Treatment. — First use the cupping glass or sucking, — for the poison taken in the stomach has no injurious effect — Then apply Caustic or Actual Cautery; & if any other symptoms follow, use the Antiphlogistic treatment. — The same may also be said of bites of Snakes.

Ulcers. — Divided into Healthy, — Unhealthy & Specific. Ulceration occurs most readily in the Cellular Tissue. Simple Healthy Ulcer is most common, & generally healed by the most mild applications. —

The Unhealthy contains the Indolent & Irritable. — Irritable, treated by putting the patient on a Mercurial Course to correct Liver; — then apply locally the most mild substances, — 1st a Poultice, — moderately warm, — then Slip. Elm Bark, — teaspoonful of powder to Wineglass of Warm Water, forms a jelly, — repeat 2 or 3 times a day; — In two or three days change for something else. — Anodyne applications (1% finely powdered) necessary. — — Fresh Ulcers. ointment with Opium, & Spermaceti. — Lunar Caustic, — keep the edges flat. —

Indolent ulcers occur among the lower classes. — Edges are generally turned inwards, — while those which have the edges turned outwards are generally Specific in their nature. —

Indolent require the most stimulant applications & sometimes nothing less than hot iron makes any impression. — Generally, commence with Poultice & then Nitric Acid, gtt. I to ℥j Water & it produces a red healthy appearance. — After a few days change for Caustic, — to produce a Slough &c — Sometimes the patient may be allowed to walk about, — at others, he must be kept at rest, — with his leg upon an inclined plane. — Chloride of Soda sometimes. —

Varicose Ulcers are a species of Indolent Ulcers. It occurs in pregnant women, — labourers &c. — Owing to varicose state of Veins, & hence these must first be remedied by taking them up. — The diff. of result is owing to constitution, here & in Europe.

Drinking Beer in so large quantities in London is probably the cause of bad Constitution. — See p. 42.

Chapman. - Dec. 4 - 1835 -

The principal object in Congestive Fever is to exonerate the internal organs, - & this must be done either by bleeding, or by revulsives to restore the balance of circulation. - The former, if used, must be with much caution. -

Sinapisms act excellently as revulsives, - hence place one over Epigastrium & also to Extremities. - The effect is owing most probably to the action upon the Solar Plexus behind the Stomach. - Congestion is owing to deficient nervous energy. - hence we may apply Sinap. or Blisters to Nape of Neck. -

Stimulants increase the circulatory power, - & hence they either clear out the obstruction, - or increase the congestion, - & the practice is hazardous. -

The disease fluctuates much in its course & hence if local injury occurs, - or general debility of system, ensues, - they must be treated upon gen.l principles. -

Remarks upon the differences & revolutions in medical opinion. - See p. 44. -

Jackson Dec. 7. 1835 —

In cases of general health, the proportion in Coagulation is generally 10 pts. Serum & 3 or 4 Crassamentum. — Crass. increases in Inf. Diseases, & that sometimes there is no Serum at all; — but this not always so. —

Serum most abundant in Venous blood — in Scrof. Phthisis, — Anemia &c. —

These proportions differ at diff. periods of life; — at first blood is colourless, — afterwards red, gradually increasing to black, & again nearly serous in old age. —

Diff. between Art. & Venous Blood — in Colour, — in Art. having greater capacity for heat, — Art. firmer coag. — Blood from Hepatic & Splenic vessels differs from other pts.

The Chemical Condition of the Blood is very important to the Pathologist. — When first drawn, it appears to be homogeneous, — but Analysis shows several elements; — & this best shows 1. Water 780; — 2. Fibrine 2. — 3 Albumen 65 — 4 Fatty matter 2 — 5 Hematosine 133. — 6 Extr. matter not ascertained — 7 Albu. Sod. — 8 Muri Sod. & Pot. — alk. Carb. Phos. & Sulphates. — The Fibrine varies in diff. subjects. —

In the chick, the red blood is found in the vascular circle sometime before it appears in the heart.—

Besides the elements already stated, there are others under particular circumstances, as for inst. Urea, if Kidneys be extracted, & this proves fatal in a few days.—

The Serum may be considered an Alkaline solution containing Albumen, & this medium seems essential to its contact with Air.— If the Serum be taken from Art blood, it immediately becomes black, but if Alk. Sol. be again added, its colour is restored. — See p. 46. —

Gibson — Dec. 7. 1835. —

Cancer — is difficult to be detected, & other tumors have been frequently mistaken for it, & hence the numerous cures which have been said to be effected, —

The Female Mamma & Uterus are most subject to it.

When the Fatty matter of the Mamma becomes absorbed, & the Tumour dwindles away to a small size it is an unfavourable circumstance. —

The Bloodvessels do not run into the part, but are distributed around it. —

Cutaneous Cancer, occurs in old people; a fungus shooting out, at length, if continued, involves the subjacent parts. —

Genuine Cancer very rarely occurs except in persons advanced in age, - & usually in married women who have had no Children, - or in old maids, - sometimes in others. - If the Cancer ulcerates, - the cauliflower fungus is not tender to touch, - gives off an odour somewhat Ammoniacal, - at length becomes more offensive, - the Lymphatic Glands always become involved, - & this will distinguish it from Noli me tangere, - because this never contaminates the neighboring parts, - & if cut out, will invariably return. -

The disease arises from Animalcula entering the body. - This idea will not appear so ridiculous when we consider the numerous small animals which abound in every part of the system, - in the blood, - bile &c. - as well as the great variety which we take in with our daily aliment, - for inst, - in Vinegar, - Figs &c. &c. —

See p. 46.

Chapman. Dec. 7. 1835. —

It is difficult in any acute disease to determine the precise time proper for stimulants, — but after they are commenced in the second stage of Typhus, — it is necessary to watch closely their effects, to see whether they are beneficial or not. They should exhibit some of the Emmenotics. —

In Typhus Fever, the difficulty is increased, on acct. of the determination to the various organs. — The Carb. Ammo. is preferable, in small doses, & frequently repeated. — Wine they assists its operation. — These two remedies produce an action more closely allied to natural action than any other stimulants, — & Prof. Rush thought them the most efficient combination he ever used. — He very strongly recommended them in low cases of Ty. — Camphor Inj. sometimes. — Vapour Baths to produce sweating have been recommended, — & Diaphoretics in Fevers act by producing a change in the Capillary action & not by the effusion they produce. —

Blisters are less proper to extremities, unless called for by some topical affection. —

Opium is generally prescribed to relieve Delirium, - Tremors, Subsultus Tend. - Morbid Vigilance &c - The Acet. of Morphia or Acet. Tinct. Op. here have a happy effect. -

For a cordial & stimulant impression, - Wine is preferable, either Madeira or Sherry; - in some cases, Claret — But it should not be given in so large quantities as is sometimes prescribed, - for heroism in Medicine produces slaughter as well as in other affairs, - & on acct. of it, "Fools rush in, where angels dare to tread". -

Porter, - Ale &c. Carbonic Acid in shape of Acute Tonic & Stimulant powers, - so also ciders, - Champaigne &c. are sometimes preferred. - The Mineral Acids have been tried with success, by Tordyce &c — - but I do not consider them so advantageous except in the hemorrhagic state of Fevers. -

Cal. - Op. - & Ip. - prove useful in the Winter form, - but Mercury should not be carried to its full extent. —

Oil. Terebinth. - is also serviceable in this stage. —

Even after these fail & disease runs on, we must not ~~and~~ abandon the case as hopeless, - for recovery may take place.

For Phosphorus, - see my Therapeutics. —

Care must be taken in these low cases, lest from their diminished vital action, the stomach be injured & chemically decomposed, by too large quantities of the medicines given. —

Blisters & Sinapisms are useless, as the impressions will not be diffused, — but apply Rubefacient Frictions. —

If the patient cannot swallow, — apply the remedies to the Rectum, as Injections of Wine, — Musk, — Oil. Ard. Spirits &c. — & continue the endeavours to the last moment. see p. 49. —

Jackson Dec. 8. 1835 —

Pathology of the Blood. — For more than 1500 yrs. the Humoral Pathology prevailed almost universally, — but afterwards the doctrines of the Solidists were promulgated, — & became so popular, that the former was totally excluded. — We are now returning gradually to the old doctrines, — but from our more extensive knowledge, there is little danger of our embracing one to the total exclusion of the other. — Both demand attention. —

The first question in the enquiry is — Is the blood capable of being changed by disease? — Imperfect

nutrition is the great cause of Death in armies fleets, - so also Famine & Pestilence go hand in hand. —

The Blood is formed from extraneous agents; & these must be acted upon by the numerous organs in the body. - All these organs are susceptible of derangement, & hence the blood itself may be so likewise. -

1. Organic Changes, 2. Chemical, - 3. Particular diseases in which these changes are determined

1. In org. - those principally most frequently affected are Fibrin Albumen, - Col. matter, & alk. Salts. - These may be increased or diminished. -

2. the Chemical differences generally exist in the Albumen, Col. matter & alk. Salts. - In Inf. diseases the Fibrin increases, sometimes 3 or 4 times its normal quantity; so also the Albumen, - but the Col. matter & Alk. Salts decrease. - In Continued Fevers, however, the Fibrin either remains stationary or diminishes, - & in Typhoid, it decreases also. - & in these Fevers, the whole mass of blood diminishes. —

From the loss of the Alk. Salts, the blood becomes black & remains so, - & perfectly fluid. —

Changes of Blood occur in Gout, - & hence we have the diff. concretions in the Joints, - Arteries, - Bladder &c, - showing that there is a superfluity of Earthy & Alkaline Phosphates &c. — In Rheumatism, the change is in the Fibrin, producing a firm Coagulum, - & the Lancet alone is insufficient for its cure. - see p. 52

Gibson. - Dec. 8. 1835 —

The only certain remedy for Cancer is the Knife. - The skin immediately connected with the tumour should also be removed, to prevent a return of the disease. - The surgeon should cut slowly & cautiously, - so that not the smallest particle of the tumour remain, - examine it closely with the microscope, - be not in haste. —

Fungus Hematodes is much more malignant than Cancer, - & may attack any texture of the body. Occurs in young subjects from 3 to 30 yrs. - whose skin looks like a cold buckwheat cake, - unhealthy. —

A small tumour, elastic, - soft, - not painful at first. — It differs from Cancer, - Cancer is hard like potatoes, - but Fung. Hemat. very large & soft, - sometimes pulsating from

the vessels passing thro' it. – Dissect off skin, & come to a very thin Capsule, which is sometimes absorbed. – Under this we find a brain-like substance & cavities in it filled with Coag. blood. – The tissues are completely destroyed.

The lymphatic glands are not so apt to be involved in the first stage of the disease as in Cancer; but in the latter stage, there is no difference

Several cases of operations for removing Fung. Hemat. from diff. parts – but in all of them, the disease afterwards returned, & patients died. – sup. 54

Chapman. – Dec. 8. 1835 –

General Treatment of Fever given in a summary view. –

1. Determinations to Head, – treated by cold applications &c. – Topical Bleeding, – Stimulants to lower extremities & Blister to Nape of Neck: – The same, except Cold, – in Congestion. –
2. Great Restlessness & Want of Sleep, – generally owing to increased temperature of surface, & general excitement, – hence treat by Sponging &c. – Opiates &c –
3. Excessive Nausea & Vomiting. – Relieve by evacuating Stomach if necessary, – or quiet irritability by Oj. drempt Sod Tart &c. –

4. Singultus, - may occur early or in the latter stage of disease, - & is owing to irritation of Phrenic Nerve, - hence relieved by Cups or Blister to Back of Neck. - If it be owing to Gastric Affection, - it may be relieved by Antispasmodics & other remedies, - or by Counter-irritation. —

Besides the remedies mentioned, - the Dietetic Management requires particular attention. - The patient requires some drink, - & may take cool acidulated drinks. - All exciting causes must be excluded, - as Light, - Conversation, Company &c. —

The Room must be kept well-ventilated; Cleanliness must be particularly observed in every point. —

The patient must not be indulged in his desire to get out of bed & sit up, while Fever continues strong, - but when it is low, Typhoid, it is useful to arouse the patient, - move into another room, - & sometimes even ride out in a carriage

We must never betray distrust of a final recovery.

The Management of Convalescence demands much attention to prevent relapses. - Hence the patient

must be moved into another room, - or have all the appearances of sickness removed. - Cleanliness. -

Diet at first farinaceous, then small quantities of the lightest Animal food. -

Return very gradually to Indulgences or Pursuits. - Exercise may be allowed much more speedily after Typhus than after Inflammatory Fevers. -

When Tonics are used, - do not mix Acids & Bitters as this makes a most nauseous & disagreeable dose. -

Dec. 9. 1835 -

Variola is a disease of modern times, which was unknown to the ancient Greeks & Romans. - It was first noticed by the Arabs in an old manuscript dated 572. - It is said to have prevailed universally throughout the globe excepting in New South Wales. - - Prodrome, - Symptoms, - Progress &c. - may be classed under 4 different stages, Invasive, Eruptive, Maturative & Declining, each occupying from 3 to 5 days. -

There is great variety in its appearance & course, probably owing to the constitution of the patient, to the na-

tice of the Epidemic, - to the Situation & treatment. -
From the appearance of the Eruptions, it has been named the Vesicular, - Vesiculo-pustular, - Crystalline Watery, - Siliquose, - Varicose & Horny. -
Other varieties have been termed Erysipelatous, - Morbillous, - Miliary, - Sanguineous, - & Gangrenous or Putrid. -

Jackson - Dec. 19. 1835 -

Another disease in which there is a general alteration of blood is Dropsy, - the solid portions gradually diminish & the aqueous portions increase. This generally occurs at the close of life, & proves fatal. - It is said that another change in the Blood in Dropsy is that this contains Urea, when the Urine becomes Albuminous. -

Chlorosis also presents an alteration of the Blood; its cause is unknown. - The col. matter is very much reduced, more than ½ - & remedies are such as augment the col. matter, - as Chalybeate Tonics. - In such cases the nervous system is much affected, - with violent palpitations of heart to - so that one may suspect organic disease, - but must be treated very differently. -

Cholera also presents an alteration in the Blood. The serous fluids diminish & the saline principles disappear. Hence the solid portions increase 50 or 100 per ct. & the blood becomes so viscid & accumulates about internal organs. - This loss produces collapse

In Yellow Fever, there is a constant disposition of the coloured portion to escape, - the reverse of Cholera, - & in the fatal cases, - this species of hemor. takes place in Al. Canal, & from many other parts, - as eyes, - gums, - lips, &c. -

In Scurvy, - the blood is altered somewhat similarly. - It loses its disposition to coagulate, - & the solids also feel the influence - it owing to excess of alkaline diet, - hence cured by the Veg. Acids -

The Blood undergoes Pathological changes, - as follows, -

1. Plethora, or increase in quantity of Blood, - & the patient is then subject to acute Inf. - Hem, - Palp. of Heart &c.

2. Anæmia or deficiency of blood, - causing Palpitations, - affections of Head, &c, & it is difficult to distinguish between the effects of Anemia & Plethora, especially in Females with profuse menstruation. -

Another alteration in Blood is its disposition to Coagulate; sometimes it takes place in Heart or Vessels. — Then we have Violent agitation of Heart upon any Exertion. — They are generally termed Polypi, or Concretions & sometimes becomes so completely organized as to be injected. —

They occur under various circumstances, & generally from great debility of circulation. — Cases of Coagula in great vessels, producing almost instantaneous death. —

Refer to Andral, — & to Fenning in Trans. of Provincial Medical Society. — See p. 60. —

Gibson. — Dec. 10 - 1835 —

Lupus, has its origin in the sebaceous follicles, — & does not affect the neighboring Lymphatic Glands, — or deep-seated parts, — & if cut out, invariably returns. —

Syphilis, — ουν φιλεω, — Chancre from resemblance to the firm hold of Crab. — The Genital Organs are subject to other Ulcers than venereal, — & even apparent secondary symptoms may arise without a syphilitic taint, — It may arise from connexion with a woman afflicted with Fluor Albus, or other ichorous discharges. —

When the patient applies to the surgeon, - the history of the case is very important, & the same application usually produces a similar affection, so that its source can be almost identified by the appearance of the Ulcer. -

Chancres may attack any portion of the body, - but from obvious reasons, more frequently the Penis. -

Bubo is always preceded by a Chancre, - & if it ulcerates is merely a Chancre in the Groin, but Bubo may occur from a variety of other ~~causes~~ causes as Cold, Injuries of feet &c. - The Genuine Bubo from Syphilis, - generally occupies but one gland, - is very painful, & soon verges to suppuration, - followed by Ulceration. - See p. 65 -

Chapman. - Dec. 10. 1835

Variola arises from a specific Contagion, - operating by contact, or thro' the medium of the atmosphere. -

It is unknown whether it may be generated de novo, or not, - in 1823, it broke out here without any source of Contagion, - & in diff. parts of the City; - so other diseases assumed an emptive character. - But I believe the Virus lies dormant, until vivified by peculiar atmosphere, constitution &c. -

Variola, well developed, is readily discriminated. It is most likely to be confounded with Varicella, - which however is preceded by slight fever, - is vesicular & dries up in 3 or 4 days, - is pointed, - comes out in crops, - is merely raised cuticle like common Blister, - but Variola is cellulated & one puncture will not allow the contents to escape. - Sometimes, however, there is great difficulty. Varioloid sometimes very similar, - but is milder, earlier & more scanty eruption, - less variolous odour, - early desiccation, - & leaves behind it a smooth or rather elevated point. - Sometimes this also is difficult. -

Distinct Small Pox not alarming, unless retrocession. Confluent more so, especially if Typhoid condition. -

Post mortem appearances differ very much, - the mucous membranes of Al. Canal is phlogosed, - also the Lungs, - Arachnoid Tissue of Brain, - especially in violent cases. - If Typhoid, - we have livid or ecchymosed blotches of mucous ment. - Ulceration, - venous congestions of lungs & effus. in large cavities, - In Paris, found pustular eruptions in Al. Canal & even on Peritoneum. -

I have generally found Inf. or Congestion thro' the whole Al. Canal, - but never a regular pustule. - The mucous memb. was studded with points, which were mere Inf. of the mucous glands, - but it is so delicate, that a pustule would probably burst before maturation.

In prolapsus Uteri or Ani, where the surface has been long exposed & somewhat hardened, there may be pustules. -

Ulceration of the Cutis vera, producing pits, has been said to be peculiar to Variola, - but it is not so, as I have seen the same thing repeatedly in Varicella. —

Chapman Dec. 11. 1835. —

Pathology. - Small Pox is radicated in mucous membrane of the upper part of the Al. Canal, & thrown off to the skin as the means of cure. - Virus does not enter the blood; because, if so, we should have the same effects wherever applied, & we should have the rains in the natural & inoculated affections. - But we have here as in other diseases, a punctum saliens, - which extends by sympathy to other parts. —

We do not know why a person has Small Pox at all, & consequently cannot tell why he will not have it twice. —

Treatment. - Small Pox is incurable, - it will run its natural course, & tho' not relieved, may be palliated. - Hence when it is mild, - we have nothing to do, but regulate the diet & temperature of the room. -

If the disease be of the Inf. type, - & we suspect irritating ingesta, - we may resort to Emetics in early stage, - with due restrictions. - Next come the Saline Laxatives which are preferable to Calomel or active purgatives. - Then mild Diaph., - as Acet. Ammo. - Nit. Spt. Eth., - Neutral Mixture, - dilute solution of Tart. Ant. -

When fever is high, - skin hot & local determinations, - V.S. must be used pro re nata, - Also topical bleeding. -

Cold applications to the surface by aspersion are questionable, - Sponging is preferable. - Combat local determinations as in all other fevers, by revulsives, Antiphlogistics &c. -

Particularly keep the apartment cool & well ventilated. -

In the Typhoid form, the treatment differs on account of the preponderance of Congestion. - Commence with slight evacuations of Al. Canal, - Emetics & plunge into Calomel, - then careful V.S. - or topical bleeding, - but we must

early resort to such treatment as will sustain the Vis Vitæ, & produce the maturation of the pustules; as Sulph. Quin. & op. — Warm Baths &c. — Sinapisms & Blisters to extrem. or Epigastrium, (latter most efficient)
If prostration ensues, make a free use of cordial & diffusible stim; as Wine; — perhaps Spt. Ether. — especially where petechiæ, vibices &c. according to some writers. —
When Secondary Fever arises, treat it on same principles, Debility & nervous symps. — Camp. & op — Hoff. Anodyne &c. —
Applications to surface in Inf. Stage of Slip. Elm Mucil. &c or Flax Seed Mucil. — & subsequently with Ventrilio's or Camphorated Ointment, would, I think, be highly beneficial. —
To prevent Pits &c. cover Face with fine Cambric spread with Cerate, — or some assert if the skin be smeared with Camph. ointment; — or according to French, puncture the pustule on 1 or 2 day & apply Lunar Caustic. — My plan has been to subdue Inf. — open the pustules as soon as filled & wash with Milk & Water. — Exclusion of Light seems to be more important to prevent these deformities. —
For ulcerated Throat, — camphorated & other detergent gargles. —

See p. 67

Jackson Dec. 14. 1835

Is it possible for extraneous agents to enter the circulation, & act as injurious or therapeutic agents in producing or curing disease? — This is now a subject of positive demonstration. — The endermic application of medecines is strong evidence in its favour. — & this too without the influence of Sympathy. —
Injection of substances into the veins have produced their remedial effects; thus a solution of Tart. Emetic injected in Fem. Vein causing vomiting in 5 minutes, in case of strangulation by a large piece of meat. —
Poisonous substances &c. have been detected in the blood; (I refer to Christison on Poisons for other facts.)

We next proceed to the Semifluid Elements, — one only of which is sufficiently important for our notice — Fat, is deposited in almost every portion of the body, — but the manner of its deposit is yet unknown. — It is probable that there is no specific adipose tissue for the purpose. — It is of a veg. character, consisting of Hyd. Oxy & Carbon & differs principally in consistence. —

Fat is a reservoir of nutriment; & relieves bloodvessels of Plethora, after mature age; or in sedentary lives. — It accumulates in cellular tissue; around the heart; between muscular fibres, so as to cause atrophy of muscle: Origin not determined; some considered it as secretion; others as exhalation from Veins

Organic Character is also undetermined

Its composition differs in colour, odour; consistence, age of individuae; temperament, sanguine & lymphatic produce it most; — disease; decreases in all organic affections; & thus living skeletons are produced; — it increases also in some cases so as to produce disease — It is modified by disease; sometimes increased in consistence; sometimes fluid; — it accumulates more rapidly in some than in others. —

We next consider the Solids, which are the instruments executing the acts of life. — They are the parts which possess consistency to have a definite form; to contain fluids; & shape the body. —

Every organ has its proper physical consistency. —

& it is of the utmost importance that we determine what this is in a healthy state. —

It is only through the medium of organized solids that we have any vital phenomena. —

The solids differ in infancy, adult, & old age. —

1. The organization of man in embryo, commences at the lowest point, & passes on through all the gradations upwards, so that if at any point, the organization be arrested, we have monsters developed. —

The same thing happens respecting the nervous system. —

2. The type of every organ is formed, before the material composing it is developed or deposited. —

3. The organs do not all appear simultaneously

4. The organs all form from the circumference to the centre, & not the reverse as generally described. —

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Each solid has a definite form & structure, & vitality, & we may even say that every organ is an independent animal. — Their number is not accurately determined, but the following may be considered as

most correct - 1. Cellular Tissue, - 2. Vessels. 3. Serous membranes. 4. Ligaments. 5. Synovia. 6. Cartil. 7. Fib. Cart. 8. Tendons 9. Bones, 10. Muscles, 11. Nerves & Brain, 12. Glands, 13. Follicles 14. Mucous mem. 15. Viscera. 16. Ganglia & Homogeneous Tissue

Apparatus means an association of organs for any particular purpose

1. Solids differ as to their chemical constitution
2. They differ in their sensibility & irritability
3. As to their functional action. -
4. As to their deviation from natural conditions. -

All solids are subject to Lesions, & these are of two kinds - Vital & Structural. -

Vital lesions depend upon modifications of inherent or external forces. - These comprise Anomal increase of Excitability, - called Irritation, Inflammation or Congestion, - terms, of which in fact, we know nothing - On account of these we have an alteration in the Secretions, - a perversion, - or a total suppression. -

Structural lesions may be included 1. Number, 2 Size, - 3. Form, - 4. Position, - 5. Connexion. 6. Colour.

7. Consistency. - 8. Continuity; 9. Texture & 10. Contents. - One of these alterations naturally produces another. - They are either Congenital, or Acquired. - The first from a morbid degeneration in the Formative Impulse, & more liable to occur in proportion to Civilization. - Sometimes the Aberrations are mere Lusus Naturæ, at others, - Deformities; & at others, - Monsters. —

The retarded formations are the cause of the occasional resemblance between the human fetus & the lower order of animals; - the same thing occurs in other organic beings, - in vegetables &c. —

Malformations may occur in several successive generations, - or in the lower animals, in several of the same litter. - On the same principle, hereditary diseases occur:

1. Lesions as to Number of Organs - There may be too great or too few; - & some organs more apt to be wanting than others. - This condition may be acquired. - But a multiplication must be congenital in higher orders, - in the lower orders, it may be acquired. —

See p. 74

Gibson Dec 15 - 1835 —

Chancre in its primary stage, may be cured by local application, - but Bubo cannot as the system is more apt to be affected. - It was formerly considered that Mercury was essential to the cure of the disease. - but within 150 years this has been questioned. —

The Venereal Disease itself gradually grows milder, - so that at length it will cure itself - but is equally virulent when applied to persons unaccustomed to it. —

Hence the use of Mercury is not always necessary. —

In some constitutions, it is not adapted & produces very injurious consequences. —

To heal Chancres, - Black Wash, - Yellow Wash, - Chloride of Soda &c, - continuing each only 3 or 4 days, - & if these do not succeed, we may commence with small quantities of Mercury, 1/2 gr or 1 gr Cal. 2 or 3 times per day.

Whether the Fetus in Utero may be affected or not is a disputed point, - but probably receives the virus as it passes thro' the Vagina, - & then appears in a few weeks or months. —

But there are other diseases, - ulcerous, - aphthous &c. - which may be communicated to the nurse, & thence propagated to others. -

Gibson believes that Venereal Disease is not transmitted from either Father or Mother to the Child. -

The effect of Caustic when applied to a sore, may be too irritating, & produce the genuine Hunterian Chancre, with a hardened base &c. —

The secondary forms of Syphilis appear at various distances of time from primary attack; - & the matter from these does not communicate the disease. -

Every bone in the body may become affected. - The throat becomes ulcerated, and a peculiar hawking marks the patient; - this sore may be cured either by local applications, - or if it will not yield, a slight course of Mercury. — The skin is next attacked with copper-colored blotches, - after these fall off, the surface is covered with red ulcers. - Next the Bones are affected, - Condylomatous Tumours &c. - & every part of the system may be more or less affected. — see p. 75

Chapman Dec 15 1835 –

Vaccinia, or Cow-Pox. – Dr. Edw. Jenner first introduced into England, the discovery of this as a preventive of Small Pox, – he first observed it while a student in 1768. – He first published a small pamphlet in a very modest style in 1798, making known his great discovery, – & after this, it spread over the world. – Jenner first discovered it in the udders of Cows, – but thought it probably derived originally from the Grease of Horses, found about their heels. – But this has been disputed by Coleman & others. – This however only proves the identity of the affections in the two animals, – but does not prove the originality of the disease.

The identity of Variola & Vaccina has been strongly affirmed by many authors, – & as strongly denied by others for the following reasons. – 1. That Variola is peculiar to the human subject & cannot be communicated to animals. 2. That the two diseases are incapable of intermixture, each preserving its respective affection. – 3. If both fluids are inserted contemporaneously side by

side, - so that the pustules unite, they do not run into each other, but each side is distinct. -
4. Both fluids produce their effects, but both are restricted in their operations. -
Thus the question is still sub judice. -
The following rules should be carefully observed in the practice of Vaccination. -
1. It should not be performed under the age of 1 month.
2. Cutaneous diseases counteract its protecting power. -
3. The selection of matter is of some consequence. - Some prefer the pellucid fluid before suppuration which is more active, - but the scab has been preferred for a long time in this City for several reasons. - 1. It allows the disease to run its course undisturbed. - 2. The scab can be longer preserved, & 3. It affords a larger quantity. - But still I do not know that the change is beneficial, - for if the pus is inefficient, certainly its desiccation into a scab cannot increase its power. - There is also a great choice of scabs, - those which are hard, compact, round, & Mahogany colour, should be preferred. -

The compact portion of the scab should be powdered & moistened so as to make a ropy fluid & then insert this under the skin without causing much bleeding —

If it be successful, at the close of 3d day or 4th day we find a pimple which feels as if it enclosed a grain of sand, — at the 6th day it becomes a vesicle, depressed at summit, — with an efflorescence round the base, — at 8, 9 or 10 day, we have a pustule, with a fine large areola; this continues several days & then fades. — The centre first darkens, & then the whole becomes dark & hardens, & drops off during the 3d week —

Vaccination sometimes appears much earlier than it ought, & sometimes later. The Diagnosis between the Genuine & Spurious affection is a matter of great importance & they may be thus contrasted —

1. In the Genuine, we have no evidence of the affection until the end of 3d or beginning of 4th day, — & then we have a minute & elevated pimple, with a well defined margin & flat surface. — In the Spurious, an inflam. very soon appears like a common Phlegmon or Boil —

2. In the Genuine, - the Pimple gradually increases till the 6th day, when it is converted into a Vesicle, filled with pellucid lymph, retaining the same figure & construction. - In the Spurious, it reaches maturity before this period, & becomes filled with Pus. —

3. - In the Genuine, - the Vesicle changes to a Pustule from the 8th to 9th day, & has a well-defined Areola. -

In the Spurious, - the Abscess bursts before this time, & a scab or sore appears, - with a diffused, - irregular, - erysipelatous blush around it. —

4. In the Genuine, the Pustule at maturity, - is round or oval, - elevated, - with a well-defined margin & central depression, much resembling a buttonmould bound tightly under the skin. - The Spurious presents a conical or pointed appearance, like a common Boil. —

5. - Difference of Cicatrix. - The Genuine Scar is small, striated & cellulated. - The Spurious is scarcely perceptible, - or is very large, smooth & polished. —

Many circumstances modify Vaccination, so that at last, it cannot be considered as Positive Protection —

Chapman. - Dec. 18. - 1835 -

Respecting the Varioloid Epidemics, - there are two Hypotheses. - 1. That it is Genuine Small Pox operating upon a constitution, already protected by Variolation or Vaccination, - & producing Varioloid. -

2. That Variola & Varioloid are mutually propagated. I do not believe Varioloid is contagious; nor can small Pox be produced from it by Inoculation. -

During Epidemic prevalence, the same individuals may have two or three successive attacks of Small Pox. -

Variola & Varicella are sometimes confounded, especially when the latter assumes a malignant type. -

Neither Variolation or Vaccination affords any protection to Varicella; & hence the often apparent failure of these; when the latter has been mistaken for former. -

The failures of Vaccination in protecting against Small Pox, are gradually increasing; & that it is chiefly valuable in moderating the attack, & preserving life: - therefore it should not be abandoned, or Inoculation substituted. -

Rubeola. - This was introduced into Europe at about the same time with Small Pox, & was considered by the Arabians as a mere modification of it. - Sydenham gave the first correct account of it. -

Rub. Vulgaris is most common form, - symptoms preceding are like Catarrh complicated with Gastritis. - Eruption takes place generally in 3 days; but I have known it vary from 12 or 24 hrs. - to 10 days, - & when so long, the Fever usually intermits. - It usually comes out in distinct, circular, elevated spots, - which run together in crescentic or semilunar patches, - in the middle of which sometimes a vesicle, - & sometimes like Vaccella. - That on the Trunk - varies from that on the Face. - Sometimes wells appear on some parts of the body. -

The red Eruption continues for 2 or 3 days, - then turns darker & scales form. - Sometimes, the eruption becomes dark, mixed with yellow, forming Rub. Nigra. -

The Fever continues more or less until desquamation, - & the Cough is still more intractable, amounting even to Bronchitis, - Croup in Children, &c. -

It is generally very inflammatory; but sometimes becomes Typhoid, forming the Putrid or Malignant. — This has been supposed to be Scarlatina; but the skin is colder, circulation feeble; more nausea; more livid surface where the lungs were much affected. —

Rub. sine Catarrho, was first noticed by Willan. — In this country it is called French Measles. — It is milder — eruption earlier & more diffused & subsides in 24 hrs, — may occur & be cotemporaneous with real Measles. —

Original cause of Rubeola is unknown, but it generally occurs as an Epidemic in Winter & Spring. — It prevails without any long intermissions, in this City, at all times, —

It spreads very rapidly, — & brutes not exempt. —

It has probably a specific contagion also, — but it cannot be propagated by Inoculation. —

Latent period varies from 8 to 14 days. — Like Small Pox Measles may occasionally be had a second time, — but not usually. — Diagnosis of it generally very easy, — tho' sometimes it may be confounded with R. sine Catarrho. —

Measles not serious, except Epidemic. — see p 76

Jackson Dec. 21. 1836. —

The Colour of Solids varies much by disease, - it may be more or less deep & sometimes a new colour. - & generally this alteration is accompanied with a change of consistency. One of the most common causes, depends upon the blood, as in Inf. - or when col. matter is mixed with blood as when Animals fed upon Madder, - in Jaundice &c. - & in the Dead Body, the red colour is not proof of Inflam. -

Colour is diminished by natural disorganization of parts, as in Albinos, - by alteration of blood, - as Anemia, - some chronic diseases also, - by use of astringent remedies as Alum, - by poisoning with Oxalic Acid, - Sulph. Acid &c, - permanent whiteness. -

The Colour is much increased in some diseases as in some cases of Cholera, - in Pneumonia, - Apoplexy, - Disease of Heart, - Livid Death-Spots occur always after sudden Death & is no evidence of Poison. - Melanosis sometimes appears on mucous ment. of Intestines, - often in lungs of adults, -

Consistency alters by diminution & increase. - Diminution forms Ramollissement & after, more fluid & Gangrenous. - Consistence very important as a mark

of disease. – Thus mucous ment. in health, will tear in shreds only of about ½ or ¾ inch. –

In Induration, the Tissue is more consolidated than natural, & cuts differently with scalpel, gives a creaking noise &c. –

One of the most common causes of these alterations is Inf. –

Continuity is sometimes dissolved. – It may be from malformation as Spina Bifida, – Hare lip &c. – sometimes (rupture) accidental.

Texture altered by disease, – as in Bone, Colon, &c. – Transformation of Tissue, as Cell. Tissue into Cartilage or Bone &c. –

Formation of New Tissue, as Tubercles, – Carcinoma &c. – Sometimes both exist at the same time. – Most common in Cell. Tissue, – Glandular, – Skin & mucous membrane. See p. 78

Gibson. Dec. 21 – 1835 –

Fracture of Nose. – of Jaw & Alveolar Processes, – Lower Jaw teeth are loosened & irregular. – of Ribs at different points If broken at middle, – the angle may be salient externally or internally, according to the application of force. –

Of Vertebra. – Processes less dangerous than the Bodies, – & different results according to the different parts of the Spine, & whether Ant. or Post. Fascic. of Spinal Marrow be injured. –

See p. 79

Chapman Dec. 21. 1835

Unfavourable symptoms, - are slow or receding eruptions, - affections of stomach, cerebral or enteric organs. -

Post mortem, - Inf. of intest. & upper portions particularly

Pathology resembles Small Pox, except that Fever does not subside on appearance of eruption, - on acct. of irritation being still retained, instead of being translated. - It is radicated in Prima Via & other parts suffer sympathetically. -

Measles differ in themselves according to predominance of congestion or Inf. - & according to affections being chiefly of the Thoracic or Abdominal Contents. -

Treatment varies according to the severity of the Case. - Typhoid requires attention to Skin, - by sponging with Spirit, Diaphoretics, - Topical Bleeding, - Evac. of Stomach & Bowels by an Emetic & Mercurial Purge, - & afterwards the Diffus. Stimuli, - Carb. Amms. - Camphor, - with Opi. if necessary, - Sinap. & Blisters, - Temperature & Drink. -

Temperature should vary with Season & hence differ from Small Pox, which requires a low temperature always. -

Sequelæ, - Catarrh, - Pneumo, - opthal, - Aphonia, - Diarrhea,

Scrofula, - Phthisis & by some Hepatitis. - These must be treated as depending upon Chronic Inflammation. - & here Diarrhea is apt to be deceptive, - & instead of being treated by astringents &c. must be by depletory remedies. -

R. Nigra removed by dilute Muriatic Acid. -

Many of the sequela might be prevented by proper treatment, which should be Antiphlogistic, - & especially by Bleeding in the early stages, - & great care in convalescence from exposure, indulgences, &c. -

Scarlatina. - This is a disease of modern times, - & has been divided into Simplex, - Anginosa, & Maligna, - the 2 last sometimes called Cy. Malig. - & the last Malignant Sore Throat. - All may prevail simultaneously. -

I shall describe them merely as Phlogistic & Congestive.

Phlogistic. - Symptoms like those of eruptive diseases, less nausea, - more heat of surface, - sore throat & fauces with redness of lining mucus generally, - delirium apt to occur in evening exacerbations. - The affection of throat increased & even extends up Eustachian Tube so as to cause Ear Ache. - See p. 80. -

Jackson Dec. 22. 1835

Particular alterations of Texture occur in particular ages, - thus in youth, Tubercles, Polypi &c. - in advanced age Ulcerous & Cancerous Degenerations. - Sometimes it is owing to a deficiency or retrogration of formation, as Rickets - Viscera also the Veins, instead of being solid, are mere sacs containing gelatinous matter, as in fetal State. - Limbs & other tissues unemployed, retrograde to their former state from diminution of nutrition, - thus Corsets diminish the muscles of the Back, & curvatures of Spine ensue. - Hence in Inf. of Viscera, it is important to keep the parts at rest, & allow Nature to work a cure, as in Surgery. -

A very feeble irritation is often sufficient to produce very copious Hemorrhage, - & hence it is not always the result of greatly excited action. -

Secretions are sometimes modified in the diff. organs. -

Inflammation proceeds more rapidly, & soon destroys the Tissue. - It produces Pus, - which always consists of Globules seen by microscope, which exist in no other secreted fluid. - Inf. sometimes terminates in Gangrene of different kinds. -

New Formations are of various kinds, as Conversion of Cell, Tissues into Cartilaginous, - Osseous Depositions, - Tumors either Fibrous, - Tubercular, - Polypoid, - Encysted, - Cancerous, & Medullary, very distinct from T. Hematodes, - the former is constitutional; the latter local & if removed will not return; see Andral, Cruveilhier, Abernethy & Lebstein, - Scirrhous & Fungus Hematodes - in which last we have involved only the Capillary System; it is an erectile tissue, - & commences like Aneurism by Anastomosis, & may sometimes be cured by pressure. - If opened it bleeds most profusely, & even fatally. - The Medullary is situated in Cell Tissue & thus in Capillary System - see p. 82. -

Gibson Dec. 22 1835 -

Concussion of Spinal Marrow to be treated as of Brain. Fracture of Sternum; in which Trephining is not recommended, but keep the patient still & on good diet - of Clavicle - The principle of Desault's apparatus is to keep the shoulder upwards, outwards & moderately backwards. - Dec. 28. - Of Scapula, - Humerus, - Dec. 29. - Fore-Arm, - Olecranon, - Carpus, - Fingers, & Patella. -

Chapman Dec 22 -

The Tongue in Secretion at first coated; - afterwards presents clean florid edges & papillæ shooting thro' the crust. - Eruption appears in from 48 hrs. - to double the period. - First on Face &c & then copiously at Joints, Fingers &c & is very irregularly diffused in different cases. - Sometimes like Boiled Lobster & sometimes in more distinct Spots. - It fails at 5. & disappears at 7th day, - Fever sometimes abates, but as often not, when eruption subsides & desquamation ensues. - Eruption & Sore Throat controlled by the Fever. - If this continues, Throat may pass into ulcerated state, - throw out adventitious membrane, which may even pass down into Trachea & terminate in Croup. - In favorable cases, sloughs fall off about 8th day. -

Congestive Form modified by the Typhoid condition, & collapse is often decidedly marked; - but afterwards the system emerges, with much reaction, - Calor mordex - tend. of Eyes, &c, &c, - which is generally evanescent & soon succeeded by sudden & alarming prostration. - The Eruption also changes much in appearance, & some-

times the whole disease seems to be concentrated in the Throat, - without any Eruption on the surface. -

Duration from 2 or 3 to 8 or 10 days, of Scarlatina generally.

Since it has generally prevailed as an Epidemic, it has been so considered, - but it is dependent upon Specific Contagion, - & destroys the susceptibility to a second attack, - though by some this has been denied. - It adheres tenaciously to Fomites, - & Dr Percival traced its entrance into Edinburgh to a Box of Toys. - Case of its occurrence after Fumigation, Cleansing, - Ventilation carried to a very great extent. -

Incubative Period varies from 3 or 5 or 6 days to 11 or even 17 days.

Prevails at all seasons, - but more apt in Winter & Spring, & generally in Children, - sometimes in adults. -

Diagnosis. - In Measles, more Opthalmic, Catarrhal & Pneumonic Symptoms; - on 4th day, Vesicles come out & afterwards crescentic, - & faint red appearance

In Scarlatina gastric & cerebral derangement, - 2 days minute spots, scarlet colour, - Sore Throat differs also. - Appearance of Tongue also peculiar. -

Scarlet Rash differs in speedy occurrence of Eruption without previous ailment, is a diffused redness, - arises after too much food, - heat & suddenly cooled. - sometimes I have seen it spread considerably. -

Prognosis generally favourable, - but sudden changes are very apt to take place. - In the worse forms of it, especially if Epidemic, it is dangerous. - Affections of the different vital organs denote imminent peril. -

A White streak down each side of the Nose is said to be a mortal symptom. — see p. 85. - Lecture omitted, -

Jackson, - Dec. 28. -

The Contents of the Organs, are Organic or Inorganic. - The Inorganic may be divided into the Hard & Soft. - The Hard form the Calculi, of different kinds, as Salivary, Intestinal, - Biliary, - Urinary &c. &c. -

The Soft are usually contained in Cysts, - & are composed of modified Blood. -

The Organised are the Loaries, of various kinds, which exist in almost every portion of the Body. - Entozoa of which there are also several classes: Leeches have been swallowed -

Insects, sometimes swallowed in eggs, become perfect in the Stomach. - Likewise Botts in Horses from same source. -

We next come to the consideration of the Tissues of the Body, - a classification of which had been attempted as early as Galen, - but never approached completion till the time of Bichat, - which consist of 21 - 7 of which were General & the rest Special. - These have been simplified very much, & may be reduced now into 3. Classes, - of which the rest are mere modifications: 1. Cellular; Primitive, or Formative Tissue. 2. Nervous; & 3. Contractile or Muscular Tissues. - Each of which distinct in Chemical Constitution, - Nat. Functions &c. -

Each of these may be again modified & subdivided. - Thus the first modif. of Cell. Tissue is 1. the Dermoid or Exterior Envelope, - 2. Fibrous, Elastic Fibrous, - Cartilag, - Fibro-Cart, & Osseous, - all included under Sclerous or Hard Tissues. 3. Serous Tissues, wherever solut. of cont. with motion, & they are all formed in Sacs, - except one. - 4. Aqueous or Vessels. -

The Nervous Tissue or Dynamic may be subdivided 1. Ganglionary, - 2. Cerebro-Spinal & these may again subdi-

vided into several classes.-

The Muscular tissue has the peculiar property of contracting when excited.-

We next take up each Tissue, & consider its Physiological & Pathological Condition,- then combine them & form the Organ,- then examine the Functions & attach them to the Structure exercising them,- & the Pathological Modifications.- Then come the Dynamic Forces which set these in operations:- but course however is insufficient for all this, & we shall only give the Outline.-

Cellular Tissue, is spongy &c, exists in every portion of the body, & is the web first formed in which the rest is deposited. It is composed of Gelatin,- which is probably nothing more than Albumen.- It presents diff. appearances in diff. parts of the body, in some parts very dense, especially in the median line, so that fluids cannot pass over.- It is a good conductor of Electricity & being in but small quantity about Joints, the shock is there more felt.- It varies with age & sex,- more loose & abundant in infants & females,- hence diff. of form.- p. 88

Chapman. - Dec. 28th 1835

Hemorrhagia. - This term embraces every effusion of blood, - that has been divided into 5; as produced, - by Rupture, - Division; - Erosion, - Transudation & Dilatation. Hence it was always divided into Traumatic & Idiopathic. These are more accurately expressed by Physical & Vital. -

Another Division into Active & Passive, - or Tonic & Atonic has long prevailed, but being founded upon erroneous principles is now almost disused. -

According to present views, - they should be divided into Inflammatory, - Congestive & Passive. -

Traumatic or Physical belongs to Surgery, - & I shall consider only the Vital. - Symptoms, preceding are fullness & congestion of part, - sometimes intermittent character, - but generally there is continual febrile action, circulation &c. -

The part whence it comes is of much consequence. - Sometimes it affords relief, - but if too profuse, a collapse state of surface, appear & disturbance of the whole system. - Afterwards reaction takes place, - with irritable pulse &c. - sometimes nervous affections arise. - dropsy. -

Etiology:- Greatest liability about Puberty, as there is then an excess of Blood.- It varies with periods of life,- thus young,- the Nose or Lungs,- in middle age, Brain or Al. Canal,- in old age, Kidneys & Bladder are most subject.

Varieties of formation,- peculiarities of families &c. produce great differences in the parts affected.- Much may also be attributed to fulness of body,- & also to the reverse state, of scantiness of blood.-

Accidental causes also contribute to it,- as 1. Extreme Heat,- which accelerates circulation & relaxes Integuments.- 2. Cold- operating; diff. according to mode of application,- thus if sudden shock,- to surface,- or gradual.-

3.- Diminution of Weight or Density of Temperature.-

4. Violent Exertions or Excitements, bodily & mental.-

5. Obstructions or morbid condition of parts whence it comes or ~~from~~ remote parts of the body.-

6. When there is extreme tenuity of blood, from some pathological state,- so that it readily oozes through.- Scurvy, &c.

7. They are prone to shift, from suppression in places of long standing,- as Hemorrhoids &c.-

Diagnosis of Hem. cannot be mistaken. - When it is of the Inf. type, - there is a general fulness &c. - less in the Congestive, - while in the passive, there is paleness, - weakness.

The causes producing Hem. are of much importance in forming a Prognosis. -

Post mortem appearances differ much on acct. of caus character, - continuance &c. -

Pathology. - It is only an effect of preexisting abnormal condition. - The causes produced irritation & consequent afflux of blood, then Phlogosis & Hemorrhage. -

Genuine Spontaneous Hem. is now said to take place only by Anastomoses or Dilatation of Vessels. - This is supported by Bichat, & other writers. - The objection that the quantity is too great to exude from such a source is not of much moment, because I have seen large quantities from the Gums, Nose &c. - The change which takes place in the Exhalents, we do not know. - Their natural office is to secrete mucus, serum, perspiration &c. according to their location, - but in a morbid condition they allow the blood to pass thro' them unchanged. - See p. 89. -

Jackson. Dec. 29-1835.—

Cellular Tissue differs also in diff. Temperaments, thus it is abundant in Sanguinates, & may be seen by a glance of the eye upon the patient, & deserves particular attention in treatment of diseases.—

Diff. of localities influence it,—thus it is abundant in low, marshy places,—but the reverse in high, mountainous countries,—or in dry & warm regions.—

It is deficient in Sensibility & placed in no relation with other parts,—has no Contractility, though some facts would seem to show that it has,—as contraction of Scrotum & Skin by Cold,—in cold stage of Fever,—in lower animals composed almost entirely of cell. tissue. &c.—

It is variously modified by diseases,—as Increased either generally or locally,—Deficiency, as in Edema,—Change of Consistency, as Hardening, which occurs in infants,—for 3 days after birth, & proves fatal in 6 or 7 days,—it commences about the genital organs, or occasionally other parts,—& gradually extends,—the child does not appear to suffer much,—it moans,—but does not cry much,—It is rare in this country

Something similar to it sometimes occurs in adults. — Case of the Breast — sometimes in the Neck; once saw it after a very slight attack of Scarlatina. Another without known cause. —

Phlegm. Alba Dolens presents another modification of it. — But it is not determined whether it commences in the Cell. Tissue or in the Lymphatics. — Elephantiasis another. — This Tissue may be changed into other tissues, as in Tumours. Inflammation changes it. — Sometimes it is Erysipelatous — follows O.T. — It is very apt to prove fatal. — see p. 94

Chapman. Dec. 29. —

Hemorrhage generally occurs from the exhalents of the mucous tissues, — though sometimes from others. —

The dispute respecting Active & Passive Hem. is a mere dispute of definition, — for Passive Hem. takes place when there is local determination, without general disturbance, — with feebleness of particular parts. —

It was formerly supposed that in early life, Hem. took place from the Arteries, — in later periods, from Veins. — But I am disposed to attribute all Genuine Vital Hem. to the Arterial System. —

Treatment. - The expediency of interfering at all has been questioned, for very often Nature arrests the Hem. at proper periods, - but sometimes this does not happen, or the Hem. has been directed to a wrong place. -
The leading indication, when the practitioner must interfere is to arrest it - by lessening the quantity of blood, - by subduing force of circulation, - by sedatives, - by constringing mouths of vessels, - by causing a revulsion to a less important part. -
The second indic. is to prevent a recurrence by the removal of the cause, - which may be local or general. When from Debility, Tonics &c. & prevent local Congestions. Exercise exerts a very happy effect. - The general habits of the patient should be watched, - as this is of much more importance than the Hem. itself. -

Dec. 30 - Hemoptysis. -

This term does not express the pathological affection, - it is applied to Hem. from the Respiratory passages. -
It may be either Inflammatory, or the reverse, when the system is much debilitated. -

If of the former kind, the attack is preceded by a sense of weight, - burning pain behind the Sternum, - dry cough, diff. respiration, with a tickling sensation in the Trachea & Bronchia. - The countenance becomes turgid, - a feeling of suffocation arises, - a cold skin, perspiration, - & some fulness of circulation. - This occurs in what is generally termed Apoplexy of the Lungs. - Sometimes it is introduced by Fever, with Rigors, - Pain, - Disorder of Stomach & Bowels, - followed by Reaction & Gen. Excitement.

Sometimes it assumes an Intermittent Type, & may be Quotidian, - Tertian &c, - Some remarkable cases of long standing have been noticed by authors. -

One attack is very liable to be followed by others. -

The quantity of blood as well as the manner of its discharge, varies very much, - from a single mouthfull to many pounds, - either suddenly or long continued. -

Causes, are such as commonly produce Hemorrhage, & also some more peculiar to this species as, 1. Predisposition from conformation of body, - chest, long neck &c. - 2. Period of life. Persons are most subject to it between

the ages of 12 & 35, - more especially at Puberty. -

3. Tubercular Depositions in the Lungs. -

4. Certain occupations, which require a bent position, or exposure to irritating inhalations. -

Dr. Rush use to say that the Friends were so quiet without singing &c. that they were very subject to it, but my experience has convinced me otherwise. Many more cases occur among the Clergy, - probably because weak & unhealthy young men are more apt to choose that than any other profession, - & hence more in that profession die of it, than in others. -

5. - Violent mental or corporeal exertions, - irregular living, - suppressed chronic discharges, - or cutaneous eruptions, - healing of old Ulcers, - metastasis of Gout & Rheumatism - impure or rarefied atmosphere, - vicissitudes of weather, tying up large arteries in surgical operations, &c &c. &c

One fact however which cannot be satisfactory explained is its usual occurrence at night, while the patient is at rest & makes no exertion whatever. - Some have attributed to an increased susceptibility induced by sleep, - but if

think it is probably owing to the horizontal position & the flexed position of the Extremities; which is of great consequence in arresting the Hem. —

It is difficult to distinguish whence it comes, — but if it be from the Bronchial tubes, — it is generally more floid than if from the mucous mem. higher up. —

Apoplexy of Lungs is generally manifested by Percussion & Auscultation. —

The danger also varies with the part whence its issues.

Post mortem appearances differ, — Sometimes we find Extravasation into the Tissue; — or Tumours like Polypi, — Hepatisation, — or sometimes Lesions of other Organs. —

Pathology is the same as that of Hem, generally. —

It usually comes from the mucous membrane of the Lungs, — sometimes it is effused into the Cellular Structure, — Sometimes it occurs from a rupture of some vessels by violence, — by ulceration, — by Tubricles &c. — each of which present modifications in the appearance of the blood, — quantity discharged &c. —

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Inflammation of Cell. Tissue may terminate in Gangrene, - Effusion, - a species of Dry Gangrene in the Rt. Iliac Region, which I have met with in Typhoid Fever. - Sometimes it may be circumscribed in form of Phlegmon, - Also Furuncle, which is still more limited & forms a Core of Plastic Lymph & dead Cell. Tissue. -

There is another species of Inf. belonging to white blood & may be termed Lymphatic Inflam. - It is an induration or hardening, & feels as if it contained Pus, - so that it may be opened, & no pus, - but blood & lymph escape. - It is most common in Neck & Groin, - may be known by the general temperament, - exposure to Cold, - warm applications are injurious, - but local depletion & cold applications afford relief. - It is very tedious, - lasts weeks. - Disease causes effusion into this tissue, causing Edema & Anasarca, - the gelatiniform substance as in Elephantiasis. Sometimes Tumours either mild or malignant, as Scirrhus, Carcinoma, are developed in it, - for it is here that all such usually commence. -

Dermoid Tissue is a modification of Cell Tissue, - & by it we understand the external envelope in contact with the external world, - not the Skin or mucous membrane.

The Skin is compound, & is an Apparatus. —

The Derm is composed of numerous filaments woven together like felt, more dense on exterior surface, with small foramina, - & may be divided into Cuticular & Muco-derm. —

It Cuticular is more firm in some parts of the body than others, thus in the Sole of the Feet, - also in the Back, where its resistance causes the pain & difficulty of Carbuncle. —

It is loose & thin on inside of thigh, - about joints &c, - hence these are most favourable for Absorption. —

It possesses extensibility, as in Dropsy, Pregnancy &c, - but it has very little elasticity & hence wrinkles. - Sometimes the fibres are ruptured & leave Cicatrix. - But this is not a positive sign that Woman has been pregnant. —

The larger portions of cutaneous diseases do not attack the Derm, but the subjacent skin

The Muco-derm is more delicate & more extensive, - its diseases are not so well known see p. 104 —

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Except in the Apoplectic Condition, its suppression is unnecessary, unless very copious or in debilitated subjects. It is generally salutary & a substitute for V. S. — But if necessary from high action &c. — Bleeding is very useful. — As much blood must be taken as will make a decided impression at once. — & also when there may not be a general excitement; but debility with local determination to the lungs; V. S. acts as a revulsive. — After reduction, Leeches or Cups to Chest, & to distant parts, have been recommended. — ~~Bleed~~ Bleeding by local organ some are said to inc. Hemorrhage, — but I consider them as coincidences rather than effects. —

Certain limits should be observed in using these remedies. — Counter irritations by blisters to breast are very useful. — Also Cold applications to Chest & particularly Axillæ. — Some have even immersed the whole body in a Bath. — The objection to this has been urged that the blood is driven from the skin to the internal organs, — but from sympathy between ext. & int. mem. — it is probable that the bleeding ensues and continues. —

Ligatures to the limbs were formerly recommended to retain the blood from entering the lungs – Erasistratus (first Aut)
Other remedies are Common Salt, – teaspoonfull every hour
– Nitrate of Pot. very much used, – sometimes even ℥i in 24 hours: – its modus oper. I think is its irritation on mucous ment. of stomach. – Plumb. Acet, gr. j. of ij every hour, & often combined with Opium. – In large doses, however, it does not act favorably, but purges. –
The Vitriolic solution (Sulph. Zinc & Alum) has been highly recommended & also Prepn of Copper. – but not by me. –
Narcotics may be beneficial. – Op. better than others, particularly in early stages where there is irritation & spasmodic Cough. – Digitalis is precarious in its effects. –
Emetics may be adapted to Hem. of passive kind, but not in active Hem. – except in very small doses. – Ipecac. is better than the Antimonials, & combined with Acet. Lead & opium, they prove very beneficial –
Purging must not be overlooked. – Castor Oil or mon. aster. –
After the Suppression, – the sputum is generally febrile, & then it becomes proper to use Antimonials with Nit. of Pot. –

Very frequently however, instead of the Active Stem. already noticed, - we find a very opposite condition of system; - weakened by disease, - incipient Phthisis &c. - The same indications for cure are presented, - & as an additional remedy we may mention Ol. Jecob. - Capsic Antia &c. Kino, Catechu &c. - but these I do not much rely upon. - Better is Elixir Vitriol 10 or 15 gtt. diluted. - Much better are Emetics, whose mod. operandi is to equalize the circulation, "ubi irritatio; ibi affluxus." - to fill up cutaneous vessels, - to change in Capillary system

January 1st 1836. -

Cases illustrating the preceding practice - Case in 1807 where vomiting produced by Digitalis arrested the Hemorrhage & he recovered: - This practice submitted to further trial, & with such success as to inspire great confidence in Emetics. Other indications in the weak & debilitated state of system, without local congestions, are the use of Tonics & Astrin. When the Stem. is periodical, - Bark combined with Chalybeates, acts very beneficially. -

Hem.

Anomalous Affections depending upon pathological condition of Lungs, Heart, Liver &c, are of secondary importance & it first becomes necessary to cure the local disease.—

Relapses must be guarded against by avoiding the exciting causes,- as Cold,- Inordinate exertions of voice,- &c—

Attention to Diet,- if active, use veg. diet,- if feeble, small portions of An. sustenance & occasionally glass of Porter & Ale.—

Exercise must be moderate & judicious

Carefully watch pulse & bleed when it becomes fuller or more frequent, together with Antiphlog. treatment.

In this, sometimes Digitalis, when bleeding not admissible

Blisters to Chest,- or as divellents to Wrists & Ankles.—

In obstinate cases, Mercury may be tried

Emetics break up the habits & associations- & distribute the blood more equally throughout the system —

But after all, Hemop. becomes inveterate, & the best resort is to advise a removal to a Temperate climate, & a voyage if possible —

During Hem- if called; put the patient in bed, raise shoulders, & arteries limb, - cool room, - no company

or Congestion, — cold mucilag: drinks, — bowels in solute state, — & attend to general system more than to the mere bleeding itself

Since Hemorrhage either Inf. or Congestive & hence I do not place much reliance upon Astring: Acet Lead. &c but relieve the Inf. & Cong. by local or general remedies —

Epistaxis may be active or otherwise, — the first of which is preceded by Rethora, & fullness of Head &c — Most apt to happen in youth, puberty & old age —

Predisposition from Conformation. — The exciting causes are such as cause a tendency to the Head, — or excite the general circulation. — It occurs in Cerebral Fevers, — from suppression of other discharges &c

The only difficulty of Diagnosis is to ascertain the condition of system occasioning it —

Active bleed is salutary generally, — but if it is in advanced stages of disease, it is apt to exhaust. —

Large quantities are sometimes lost with impunity — Much depends upon the part whence Hemorrhage proceeds in its effect upon patient. —

In active stage very little treatment is necessary, - but if too great, - use the general Antiphlog. System, - & also to prevent a recurrence. - Sometimes it is of an inactive nature; - with feeble pulse & general debility of system, then a variety of expedients have been proposed. Place the patient erect, with head thrown little back, & feet in warm baths, - cold to neck, - nostrils or genitals, - or plug up nostrils with dossils dipped in Astringents, - or dusted with powder Charcoal, - Armen. bole - blowing thro' quill powdered burnt Cork up nostrils (Simms) - dip head in Cold Water, - Cold Baths - Sponge Tent, - or closing Nostrils. - In emergency, - Emetic may be tried. An active or even drastic Cathartic might act favorably as revulsions. - Other int. remedies useless —

After checking Hem. - patient may lie in bed with head raised & see that none passes down Post. Nares —

Prophylactic treatment must be to prevent determination to head, by revulsants, - depletion, fringes &c. Mercury has been recommended as a last resource. If local congestion, - cups or leeches to head &c

Then the system may be improved by Tonics, Chalyb. &c.
Epistaxis is sometimes secondary, & depends upon
visceral obstruction, - Other suppressions &c. —
Hematemesis was long supposed to come from ves-
sels of stomach; - but now it includes blood coming
from intestines, liver &c & ejected by vomiting. —
Coming directly from stomach is very rare; unless
from injury, - malignant fevers, - advanced Dyspepsia &c
Gastric
preceding symptoms are Anorexia or severe - pain or
press. - furred tongue at entire bott, - flood edges &c —
- afterwards precordial uneasiness, - dispos. to syncope,
- confused intellect, - vomiting &c - & often much
relief after blood is discharged. - Its continuance
however is apt soon to exhaust the patient. - It dif
fers very much in appearance, —
It may come also from other viscera, - from liver
called Melena or discharge of Black blood
Enormous quantities are sometimes discharged, both
by vomiting & stooling in a very short time. —
Acute cases of Gastric are produced by irritations causing the

stomach to become a centre of flexion, but chronic as
sociated owing to dyspeptic causes —
Not easy to discriminate between localities of Hemor.
Distinc. from Hemop. by having no pulmon. affection,
by ingesta of stom. mixed with it, — colour is darker. —
Pulmon. apoplexy distinc. by thoracic distress. —
The discharges are serious from exhaustion, & as evidence
of some internal structural lesion. — Of florid blood
more favourable than dark blood —
Post mortem show sub-mucous dark & engorged, though
after copious vomiting this sometimes not found, — somet.
ecchymosed patches, or scirrhous tumours, ulcers &c. —
Pathology. — When copious & spontaneous, it is from sub-
mucous, & inactive. — From Spleen, thro' Vasa Brevia, —
from Liver thro' Duct. comm. Choled. — Some from hæm.
mucous memb. from irritations existing in them, —
Treatment, — When any activity of pulse or warmth of skin
accompanies it, use general or local depletion or both, —
low diet, — cold drinks & cold applications, — Astringents —
& among others Spt. Terebi. is the best, when no hef. —
see p. 106

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The second modification of the Cell. Tissue is the Sclerous Tissue, which varies much in hardness:
1. Fibrous Tissue & Elastic Fibrous, 2. Fibro cartilaginous
3. Cartilag. - & Osseous Tissue. -

1. Forms coats for various organs, - muscles &c. - resists external & internal forces, - & is spread over the whole surface. - Composed of numerous interwoven fibres, - & so gradually passes from Cell. to Fibrous, that sometimes distinction is difficult. Richat considd. it arising from Periosteum. - It forms Lig. & Tendons, - envelopes of diff. organs, - ducts, glands &c. - Bloodvessels have not been detected in it, - it inflames in Inf. but probably from col. matter of blood, - without globules. - Naturally it has no sensibility, - but if twisted, painful. - It is however irritable & hence subject to Inflammations of various kinds. - Gout (if an Inf.) is peculiar, as in Rheumatism, - but its rapid metastasis would seem to show that it is not strictly an Inf. - Acute Inf. of this Tissue is often very serious, as in joints. - Laxity of the Ligaments of Joints often extend, - so that dislocation is very frequent. -

Inf. of the Periosteum, is frequently developed after mercurial treatment of Syphilis, & hence very important to caution a patient particularly to avoid cold & damps, - to keep well-clad. - Care must be taken not to open the tumours, lest caries follows, - nor treat it with Mercury as syphilitic. -

The Elastic Fibrous may be considered merely as a modification of Fibrous tissue. - It is yellow, elastic, - forms the middle coat of Arteries, - the Lig. nuchæ, - on the lower part of belly of Elephant, - attached to claws of Tigers, Cats &c, - Intervertebral substances. - Sometimes it relaxes, as in Arteries, producing enlargement of their Calibre, - or Aneurisms. -

2. Fibro-cart. is intermediate between fibrous & cartilage. - Has no sensibility, - feeble irritability & hence occasional Inf. - Ulceration sometimes occurs & is very troublesome. - It should not be treated with Caustic applications at first, - as they only prove highly irritating, - the parts being possessed of so little vitality, that they do not readily change from a morbid to a healthy action. - For the same reason, internal remedies exercise but very little influence in effecting a cure. - see p. 109

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Treatment of Hematemesis by Emetics I have found very advantageous by their influence over capillaries; by removing large masses of blood which oppress the stomach. A diminished force of circulation does not preclude them. Cases illustrating the benefits resulting from Emetics. Cold skin, nausea, prostration, cold sweats &c are counterfeits arising from the mass in the stomach hence Emetics relieve them. —

Other varieties of Hem. of course demand a variation of treatment, according to seat of Congestion &c. — Local depletion & cold applications are generally sufficient.

After proper depletion, Spt. Terebin. has proved highly beneficial in my practice of 30 years, given in doses of from gtt XX to ℥ss & frequently repeated. — The bowels sometimes become loaded, & may be best relieved by a dose of Castor oil ℥ss with Spt. Terebin. ℥ss. — The Menses are usually stopped by the occurrence of this Hem. & hence Purges act very beneficially. — Other vicarious discharges sometimes take the place of the Menstrual discharge. —

The Regimen should generally consist of cold acidulated mucilaginous drinks, - though sometimes stimulus will be needed. - When food is first taken after the attack it must be cautiously & in small quantities. -
To prevent a recurrence, we must examine closely to discover the lesion causing the Hemorrhage. -
Menorrhagia, - now is understood to mean a hemorrhage of blood from the Uterus, - & not a mere increase of menstrual discharge, which requires but little treatment. The Hem. may take place in unpreg. or unimpregnated Uterus either before or after delivery. -
Before delivery will be that of which I shall speak. -
It is active or otherwise. - Former may be ushered in with or without premonitions, - as with derangement of pelvic viscera, - uneasiness, - relieved by the Hem. if not too great, - but if too great, exhaustion & great prostration. -
Occurs at almost all ages, - varying in Constitutions, - predisposed by sitting, - dancing, walking, - equitation, Urinary - Leucorrhea, - Constipation, - Foot stoves, Warm Baths &c. -
Diagnosis easy, - Only confounded with the Increased

menses, & then distinguished by the nature of discharge. — It is very rarely fatal, — but if repeated & long continued, it causes a general derangement. —

Cure is usually easy, — sometimes not, as at cessation of menses, or Leucophlegmatic Temperaments. —

Anatomical characters but little known in recent cases, — in chronic cases, changes are found in Uterus. —

Pathology. — Blood exudes from lining membrane of the Uterus, without undergoing any change from the secreting vessels of the whole or of some part of the Uterus. —

Treatment. — When of the active kind, arising from Congestion, interference with it is generally unnecessary. — But if required, — Bleeding, — Laxatives, — Nit. of Pot, — & sometimes Astringents may be employed, of which Acet. Lead stands highest, & has by some been considered almost a Specific, — but I doubt its efficacy. — Dose pr ij. I prefer Ipecac. in small doses with Op. — so as not to produce vomiting. — The effect of this last I do not know. Digitalis has been proposed as a substitute for V.S. — but not proper, unless very feeble circulation, — but I see no

the former articles. — Ergot has been highly recommended, but reason will not support its use. — Dose Fluid, ℥ss to ℥ss. —
Opium should not be prescribed in early stages, — unless there be pain, — incf. spasm of Uterus, — & then after depletion. —
It may be given alone, — with Camph & Ip. — or Dover's Powder. see p. 111. —

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Cartilaginous Tissue has a certain degree of elasticity & resistance, — heads of bones, — connexion of joints &c. — It is sol. in boil. W. forming Gelatin. — Vital properties very feeble, has no sensibility, — is irritable & susceptible of Inf. — but this has been questioned by Lobstein & others. — Liable to mortif. & leads to osseous transformation, — to atrophy, — to White Swelling. —

Osseous Tissue forms Bony Skeleton. — Colour of bones is usually whitish, dull &c. — somewhat elastic, more so in other animals than Man, as in Tiger, Cat &c. — Structure changes with age of individual. — Composed of Org. & Inorganic parts, — Org. are varieties of cell. tissue. — Inorg. are Phosp. Lime & others. Vital prop. very low. — Not sensible in normal state, — but are in diseased. — Recently Swan has traced Nerves into them. — Externally they are covered with a Fibrous Tissue, the Periosteum. —

Bones always consist of central portion & Epiphyses, & they are generally double cones - apices at centre. -

Osseous Tissue may be developed in improper parts, as in Larynx, - Dura Mater, - Pleura, - Spleen, - Penis, - Ovaries &c. -

In proportion to Org. matter taken as food, - the calcareous matter predominates in Bones. - Skeletons of those dying of Phthisis are whitest, - but in Bears, there is so much fat that their skeletons cannot be prepared, - while Lions, - Tigers, Apes, &c, die of consumption & make good skeletons. -

Hence the Hygienic treatment to avoid Tubercles must be to preserve a good quantity of Fat, & revolutionise the whole economy which tends to tuberculous deposition. -

Bones are liable to numerous diseases, - as Rachitis, where the Org. prod. predominates, - is congenital or acquired, - occurs more in England than elsewhere, - also on the Continent. -

Fragilitas, - occurs from predom. of Inorganic Elements. -

Inflammation sometimes attacks them & produces change of structure as in soft parts, - may be either acute or Chronic. -

Hence we have Osteosarcoma, - Fungus Hematodes, - Medullary Fungus, - osseous Tumours. see p. 115

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The Topical applications best adapted are Cold, — by cloths wrung out Water or Vinegar, — or ice upon Pudendum, — or pouring from height on Abdomen, — Acting injections into Vagina or Rectum. — The Tampon is more to be relied on. —

Sometimes it occurs in debilitated or irritated state of system shown by pulse, — general appearance &c. — Then general Bleeding becomes impracticable, but Cups or Blisters to Lumbar Regions are proper, — Also the Top. & Int. remedies before mentioned, except Nitre & — Alum is useful, close Bls Sps sometimes combined with Opium. — Ext. or Tr. Rhat. — Tinct. Cin. — Elixir Vitriol. — Emetics may be used as a last resort, — from their action upon the Capillaries, — & from my knowing their efficacy as Emmenagogues, — in exciting the healthy secretion of the menstrual fluid, I have been induced to recommend them in Hemorrhages. —

To prevent a recurrence, we must first ascertain the pathol. conditions of gen. system upon which it depends, & remedy that. — If weak &c. — Aloetic preps. — Sacra Picra, — Elix. Proprietat, — Stimulant Emmen. — Tonics as Bark Zij to Sinett. Oij. — Ext. or Tr. Rhat. — the anti-Phlog. Prep. — Nutritious diet — Cold Baths & Moderate Exercise. — Org. lesions. —

Hematuria, voiding of bloody urine, - means a hem. which may proceed from Kidney, - Ureter, Bladder or Urethra. Generally I believe it is from Kidney, - & symptoms are generally referrible to that point. - Symptoms vary much from causes & diff. seats of the disease. -

May arise from ext. violence, - exertion, - calculous concretions, - acid Diuretics, - in Fevers, - also from Metastasis.

Generally in aged or infirm, - from organic disease, - bad habits, - cessation of menses, - & even painful dentition, -

Precise point affected difficult to ascertain. - Renal generally comes much mixed with urine, & dissolved. - Vesical, in clots with Pain in Pubic Region &c. - From Urethra, no mixture of urine, & no effort to pass it. -

Though not dangerous itself, it denotes some organic lesion. - Sometimes however large quantities escape. -

Post mortem phenomena not precisely known. -

Pathology very analogous to former Hemorrhages

Treatment. - If general or local excitement, - V. S. - cupping or Leeches, - demulcents, - decoct. of Peach or Rose Leaves, - Sat. Lead. - Alum, - Sulph. Acid &c. - Uva Ursi with Gallic Acid I have not used. -

If connected with gen. laxity of vessels, Emetics have been prescribed with much advantage. The Turpentines are also used. — Blisters to Lumbar Regions are serviceable & the objections to them do not hold in practice. —

The Balsamic Resp. also are given. —

Venæ Sem. treated similarly, — also Cold to Pubis, — & bougie or probe, if Urethra become blocked up with clot. —

Regimen very essential to prevent a recurrence, — avoiding stimulants, — except when great laxity, weak Gin & Water may be allowed

Hemorrhoids is a term used to signify Tumor from the Rectum. — Generally they are Tumours either externally or internally & called Bleeding & Blind Piles sometimes however it occurs without any tumours. —

When active, it is usually preceded by a sense of wt. & fulness in the belly & loins, — vomit. constip. — scanty & high coloured urine, — tenesmus &c, &c. — Venereal impulses also.

Tumours may be either very tender constantly, — or only an acute throbbing pain, — especially at stool. —

These are relieved by the flow, — but again return, & at

length become a fixed source of constant irritation to the system, - producing disorder of the stom & bowels, - fulness of the head & a variety of local affections. —

Predisposing causes. - Period of life most subject is after middle life, - either in Plethoric or enfeebled constit, —

Conformation of parts from their sectional condition the looseness of the veins also predispose. -

Stahl & followers thought males more subject than females, - but others & I myself think the contrary. - Amenorrhea & Pregnancy are both fruitful sources. -

Local determinations, as from disorder of Chylopoietic viscera, - debauch, - costiveness, - aloetic purges, - ascarides, - sedentary habits, - Riding on horseback, - Pregnancy & Parturition. - Intrinsic to Periodicity. —

In a strong constitution, - acting Hem. is generally salutary - but if it arise from sluggish abdominal circulation & gen. weakness, it may be serious. -

Anatomic. Characters vary, - sometimes mere tingescence of veins about Anus, - somet. tumours, - somet, it is complicated with other affections, - disordered intestines &c. -

Hemorrhoids may be traced to some obstruction to a free return of the blood thro' the veins of the Inf. Mesent. or Vena Portarum. –

Treatment. – If active will be necessary. – General, & local bleeding on lumbar regions; – Laxatives – Abs, Rest, & Diet. – If inactive, & the system much enfeebled & depraved, – it may be rendered almost exsanguinous by the discharge. – Then inject styptic & astring. – Cold or Ice Water ℔j; – fill the rectum with powder of any kind, flour &c – Sponge Tent, – Rest, – Acet. Lead, – dry cups & blisters to loins. – & in case of Emergency, make a last resort to Emetics. – If these fail, – apply Ligature or Caustic. – see p. 117

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Chronic Inf. of osseous tissue produces various tumours. –

Hypertrophy occurs either 1. Augmentation of both volume & mass, – as in head, jaw bone, – 2. Increase of size but not of the mass, – the internal cavity is enlarged, – as Spina Ventosa. 3. – Rarefaction, – or great enlargement of volume, with no increase of bony matter. –

The external surfaces of bones also vary. –

Bones are absorbed by pressure, as from Aneurisms —
Pathologists doubt whether Caries results from common or Specific Inflammation. —
Softening of Bones occurs in adults similar to Rickets in Children. — It may take place in a few days. —
Cases in which bones softened & curved in every direction. —
Any impression, moral or physical, excites pain in the injured bone; — the same is true with any organ, when diseased; — its sympathies are very much increased. —
Atrophy sometimes takes place; — bone becomes fragile. —
Serous or Cystous Tissues exist wherever there is solution of continuity with motion; — are transparent; — somewhat elastic; — shining; — provided either for support to organs; — or to admit of motion without friction. — They are of different kinds for performing their respective functions; — Thus in Brain, is delicate arachnoid; — in anterior chamber of Eye — in Chest, Pleura &c — Abdomen; Pericardium &c. —
Composed principally of Gelatin
They are divided into 3 Kinds. 1. Common Serous membranes of the cavities. — 2. Synovial; — 3. Mucous or lining membrane

Serous membranes undergo various modifications; their size & form vary with the organs. - Rupture is very rare. - They are displaced in Hernia. - Colour varies, - sometimes opaque, - somet. yellow in jaundice, - black from melanosis, - seldom mortification. - Inf. is very frequent, but in a natural condition, they are not sensible. - Thus acute pain in Pleuritis & Peritonitis, - but not always. - Inf. is developed here with great facility, - as applic. of Cold. - for there seems to be an organic sympathetic connexion between stem or opt. ment & serous ment. -

The alterations from Inf. - are, opacity, - great development of bloodvessels in the Tissue, or in cellular tissue beneath as contended by some pathologists. - See p. 126

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Blind Piles. - There are 2 kinds; Varicose & Spongy; - to the latter of which I shall chiefly confine myself. -

Distinction is not difficult; - Var. are dark, - conceal, soft & elastic - compressible & usually in clusters, - Spongy are of light red, somet. even transparent, & look like vesicles. - When inc. full or local Inf. - use V.S. - laxatives, - topical ap-

to allay pain & swelling. – to Leeches there are objections, if applied to tumours themselves, but put them on adjacent parts. they are however very little used. – Puncture of Varicose not safe from Hemorrhage, but scarification of Spongy Tumours have been highly recommended. – Palliative applic: of Steam – lotions of Lead W & Sand, – tepid Water Hemorrhoice &c: – liniments, Gool: cept. & Sand, – anodyne ointments. – Pulps of Gourd or Squash or Potter applied or Lemon, Saturnine Poultice with Sand – Anodyne injection or Suppository, – or Cold Water, – delicate touching with Sunar flaustic. – Bandage Rest & Position, – After Inf. – Ward's Paste for which see Ebrle – Balls Cop. – Sept. Tred. by Rope Ligature 16 pt 2 or 3 times a day. – Galls & Tar ointment, – Compression, – & quite equitation. – The best plan, however, is to extirpate them by a Surgical operation with Scissors. – The great dread of Hemorrhage is unfounded, for Varicose tumours are very rare. –

The Predisposition to attacks must be guarded by Diet, & attention to Bowels, & if visceral obstruction, alter by Mercury. When great feebleness, &c. Aloes are said to be serviceable. – They often afford great relief in many diseases. –

When suppression proves injurious, restore it by drastic purges, - stim. injections, - leeches & venisection.

Being however so troublesome, cures are generally desirable, & the consequences must be averted by diet, - occasional V.S. - & vicarious discharge by Setons. -

The great sympathy between the Rectum & other parts of the body is very remarkable, - Tetanus from Chronic Stones. -

Dropsy - a preternatural collection of serum or other fluid in diff. parts & cavities of the body - It has been variously classified, - but according to the tissue, - ~~Ascites~~, we have the Serous & Cellular. -

Dropsy of Thorax, Abdomen & Cell. Tissue present some analogy, - the skin is pale, cool, - urine high col., - digestion impaired, - thirst, - pulse irg. or small & weak, - or feeble & accelerated or soft & compressible, - languor, - debility & emaciation coincide with the swelling. - Fever exasperated in evening. -

It attacks all ages, sexes & temperaments. - If acute, it may arise from Phlogosis, - Sometimes Anomalous, as from Cold. - Cases from Suppressed Perspiration by Cold Baths, - by a Warm Bath, - after Cholic. -

Chapman. - Jan 7 1836 -

The causes of Dropsy are very various, - both direct & as a consequence of other diseases. -

Diagnosis is not generally very difficult; - but cure however is often perplexing, - even when recent & acute. - But if chronic & from organic derangement, the lesion is the source of disease & of more obstinate management. - Simple Edema from irritation of Cellular ment, - is the only one upon which we may venture a favourable prediction.

Post mortem appearances vary much according to nature & seat of disease. -

Pathology is unsettled, - formerly it was supposed to arise from want of balance between exhalents & absorbents. - This is erroneous, - for the Fluid of Dropsy is not the natural secretion of exhalents, - neither similar to perspiration or serum of blood, - but a peculiar diseased secretion varying in composition & colour. - The Absorbents appear to act more vigorously, - for emaciation is exceedingly rapid. - - It depends upon preternatural effusions, depending upon some antecedent pathological lesion. - It is usually asso-

ciated with Inflammation, - thus asphic. of cold externally causes an afflux to inward surface, - or heat may so excite surface that suspir. will not take place, just as in Scarlatina. - Dropsy may follow Lymphatics, from distention causing Inf. of Pericardium. - So also affection of other viscera extend the irritation to serous membranes & cause them to pour out fluid - lesions bleeding will cause serous surfaces to effuse, - or the circ. fluid becomes so thin that it leaks out thro' the patulous capillaries, - & this last forms the most prominent objection to the inflammatory origin of Dropsy, - but still the doctrine is supported by a great variety of facts. -

Effusions generally follow Inf. when chronic or subacute or much diffused. - But if local - Phlegmon follows - Thus in young & robust subjects, the Inf. of serous mem. is in patches & followed by lymph exsud, - but in old, - serum is poured out. -

Dropsy following congestion is generally supported by referring to effusions after obstructing venous circul. - as in Pregnancy - Ascites from obstructed Liver &c. - but these are explained by supposing the extension of Inf. from the seat of obstruction -

to the circumjacent serous or cellular membrane. —

Plethora refuted in the same way, for the congestion causes an extension of Inflammation. —

It is not Inf. alone which produces Dropsy, but associated with it, the vessels assume a peculiar secretory function, separating a distinct fluid — After the Inf. of the membrane is conquered, the effusion is greater than when the Inf. is highest, — just as in Inf. of mucous membranes — Hence it does not depend entirely upon Inflamm —

The Blood undergoes great changes, but always from previous disorder of the Solids. — Hence these passive effusions are owing to the great tenuity of blood in debility, Anemia &c — where the Int. Exhalents pour out serum like the Ext. pour out colliquative sweats. —

Hence either excited or enfeebled vascular action may produce the extravasation, — & the Analogy between this & Skin is very striking, especially of the passive kind. —

European Writers, till lately, considered Dropsy as a result of enfeebled & cachectic state of system, & treated it by stim but not with success. — We are apt to err on the Contrary

side, - but the medicine is a proper course for treatment.
It must vary of course with the condition of the system.
To evacuate the effusion is generally the primary object, but I am not sure that it should be so. - Not so much dependence is now placed upon the appearance of the Urine as was formerly. - In Inf. form, we must reduce action by gen. & local bled. - saline lax. - diaphs. - cool drinks, rest &c. then resort to mild Emetics - Cathartics & Sorbentia (Diuretics) - vomit. Diaphs. - & at last Mercury. -
In enfeebled form, - often there is local Inf. & we must watch carefully to detect the local affections. - Also apply the same class of Evacuants, - & most active Sorbentia. - We must also use some cordials & Tonics, to support the system. - The pathological condition causing the effusion must be remedied to prevent a recurrence of the disease. -
Part II. - Ascites. - ἀσκός bottle. - The effusion is generally in cavity of Peritoneum. - Sometimes suddenly, with symptoms of subacute Peritonitis, - but occasionally more chronic & gradual, preceded by dyspnoea, - general ill-health, - costiveness, deficient urine with lateritious sediment, - thirstlessness —

Swelling commences in epigastric region, - surface more dry & husky, - constip. - embarrassed resp. from slight efforts, burning palms & soles, - pulse veins very much, - sometimes febrile, at others not changed, - but in second stage generally hard small & contracted, - & hectic, - gradual decline. -
Causes, - Derangement of Liver, Spleen &c, most common. -
Diagnosis. - Sometimes confounded with Pregnancy, - In ascites fluctuation, - general history of case, - inquire into signs of Pregnancy, - commencement of swelling, - examin. per vaginam. -
Tympanites dist. by more elastic, - belching & flatus. -
Encysted Dropsy sometimes closely resembles Ascites. -
Prognosis, - Depends upon cause, - standing, - age, very intractable in old & in children, the latter seldom recover. -
Danger when great emaciation & debility, - diff. deglutit, - dry skin, - colliq. diarrhea. - Favourable - soft skin, - urine, lactation, - natural complexion, & visceral relief. -
It however must be looked upon as dangerous. - Change of colour usually appears post mortem. - as Peritoneum, - Mesent. Glands - Kidneys &c, - also Heart & Vessels by Polypi, Aneurisms - ossif. &c. - sometimes no derangement, & Blood alone is diseased -

Pathology. - It is thought to be generally owing to subacute Peritonitis. - Sometimes from

Treatment. -

of inflam. - first reduce this & afterwards remove the effusion - & by proper discrim. remedies may be selected to reduce Inf. & invigorate absorption at same time. - V.S. - with judgment. - if pulse hard, tense & corded, - ruddy blood, - hot & dry skin, - flances - thirst & other febrile symptoms, - V.S. may be repeated. —

Copious Flux. - Spontaneous or Traumatic, - often prove salutary & hence bleeding also. - Aid it by Tep. bleeding, - fomentations, - vesications. - It next becomes proper to evacuate the Fluids, because it is here merely as a foreign substance, & may excite an Inf. condition, just as in Hemorrhage. -

It is not taken up by Absorbents & poured into bloodvessels, & then secreted by the Kidneys. - It may be transmitted thro' the all-pervading, - permeable cellular tissue. - Anasarca & Edema are more prone to pass into the cavities, - and form Hydrothorax, - Hydrocephalus, - &c. - Cases also in the Alms House, - where the Fluid was discharged by the Stomach & another from the Vagina. - We may also refer it to Endosmosis & Exosmosis, - by electric or galvanic influence. -

Jackson. Jany 11. 1836 —

Inflammation of the serous memb. is very common, & is attended with some alterations. - At first no red blood vessels are seen but afterwards they appear either in this membrane or in the cell. tissue beneath. - In the Arachnoid no red blood ever enters; it is too delicate. - The lubricating fluid also dries, & the membrane is no longer smooth & gliding, but very painful from motion. - Thus in Peritonitis, Purgatives should be prohibited; so that the Peritoneum might remain at rest. - This always takes place naturally. -

Effusion resulting from serous inf. is of 2 kinds: Either 1. into subserous cellular tissue, - or 2. into the serous sacs. — They may be either bloody, gelatiniform, or Pus. -

On the surface of the serous memb. - Serosity & plastic lymph are poured out. - They soon become organized & form adhesions. They may become changed into cell. tissue. - Case of young man, in whom one lung was destroyed & place filled by cell. tissue, - while the other performed its healthy action. —

This plastic lymph & cell. tissue also exhibit a great variety of forms. — Serosity varies in quantity & colour. —

Serofemulent fluid is sometimes poured out, - as in the Pleura, - Peritoneum &c. - when they are inflamed. —

Sometimes also it is Gelatinform, - Sanguineous of different characters, - & one case I saw like Black bowel. —

Partial Pleurisy sometimes exists & can be detected only by Percussion & Auscultation. —

These Inf. differ also with the membranes they attack. - Thus Arachnitis occurs in children, & generally proves fatal, - correct. it is only at the top of the brain - at others, at the base, & when at the latter, it is very difficult to detect. - Children scream out suddenly both when awake & asleep, - are cross & fretful, - & have a dry hacking cough from the irritation of the root of the Respiratory Nerves. - These should lead us to suspect this form of Arachnitis, - & commence a rigid antiphlo. treatment with Bleeding, purging, - leeching to the spine & base of the Scull. —

Arachnitis occurs also in adults, - & is often an accompaniment of low Typhoid fevers, - but the patient is generally able to describe the pain, - so that the physician receives warning & adapts his treatment accordingly. —

Jan 7 12. – Inf. of the Pleura lining the Diaphragm, the patient is in most imminent danger; it is difficult to detect it by Percus. & Auscult. – It must be relieved by local depletion; cups; blister at base of Thorax. – In acute Inf. local depletion must be made immediately over the seat of Inf. – Partial Pleurisy is very frequent, especially of the Chronic kind. – Pericarditis is extremely difficult to detect; for very frequently exists so slightly & not to produce the common signs mentioned. – It is often partial, & found in post mortem examinations, without having been previously suspected. –

Peritonitis often is accompanied with so much prostration that the Lancet is inapplicable. – Puerperal Peritonitis appears to be too often induced by the use of Purgatives too early after Accouchement. – Something else appears to operate fatally besides the Inf. of Peritn. – thus in Penn. Hospital. –

Inf. of Tunica Vaginalis, causes Hydrocele –

All serous mem. are more or less liable to Tubrc, & Carcinoma – In children, it is very common in Arachnoid, lately discovered. – It also occurs in Pleura, – Peritoneum &c. – Hydatids, Tangets &c. are sometimes formed. –

Synovial tissue is found in apparatus of Locomotion. It differs from serous, - being more granular or villous, - more secreting, - approaches to mucous. - It lines all joints, - forms bursa mucosa. - Sympathy between joints & viscera. - It secretes Synovia. - Inf. of it is very common, - from cold, - injuries &c. - & often without cause in Scrof. or gouty constitutions - at first injected, - opaque &c - plastic lymph & other alterations like serous membr. - Sometimes great increase of Synovia without Inf. cause, as long marches &c. - in knee. - it occurs speedily, - is compressible, - but is the most serious which occurs in Surgery. - Inf. of theca of tendons, - as Paronychia. - Also of Bursa Mucosa, causes enlargement & secretion forming Ganglia & Hygroma. - Disease of Hip Joint, often shews itself by pain in Knee. - Gouty Inf. - is peculiarly prone to attack this tissue, - & there is great alteration in its secretion. - so that motion becomes difficult, & sometimes Anchylosis. - Concretions. —

See p. 134

Chapman. - Jany 12 - 1836

From appearance of vomiting spontaneously during Ascites - Emetics have been recommended by many. - I think they operate more particularly by changing capillary action & arresting the effusion. - Minor discrimination, however is requisite in early stage. Hitherto they have given way to Purgatives. The Hydragogues, drastic, are preferable, except in early stages, when bowels are irritable. - Then use Saline laxatives, as Cr. Tart Di to ℥j with Jalap 5 to 15 grs, - 1 or 2 pt. Ol. Carui, - - or Magnes. & Eps. Salts. - Castor Oil, - also the Diuretics, - which promote absorption, by diminishing the serum, & emptying the blood vessels, - hence these are called Sorbentia. -

The Alk. & their Carb, - as Potass. & Carb. Pot. - & other neutral salts. - Neutral Mixture. - Nit. Pot, depresses the circulatory system, - should be given in free solution, as ℥ss in Oij Water for drink, - & add small quantities of Tart. Emetic - Bitart. & Tart. Pot. - either singly or both combined with Carb. Pot, in equal proportions, - Sw. & Spt. Nitre ℥ij, freely diluted & repeated several times a day. - Small doses are useless - If it produces Fever, it must be discontinued. -

Diaphoretics often act beneficially, - especially when from cold, - or incurred unknown - Dover's Powder I have found best.

Fr. Ops. gtt V - Repeat this every 2 or 3 hours -

Sut. Spt. Nitre ℥ij — Infus. of Eup. Perfol. - Vapour Bath, -

Aart Vine gtt. X — I consider sweating very important. -

Agua ℥j — It diverts action from int. to ext. exhalents, establishes healthy cutaneous action, & promotes absorption. -

When Ascites is of a chronic nature, a diff. kind of treatment is demanded. - General depletion must be laid aside, but top. bleeding often is demanded, - followed by Vesication, - Active Cathartics of Hydragogue character, - as Elater & Croton Oil -

Gamboge	grs. iv	Tablespoonful every
Elater	gr. ss.	2 hours till purges
Sut. Spt. Nitre	℥j	
Water	℥iv	

Cabinca, either Ext. or Decoct. - Dose Ext. ℈i - Decoct ℥j -

Squill, - Digitalis in enfeebled constitution, -

Infus dig. ℥viij
Tart ste. - ℥iij
Cart Sod. ℥ij
Sut. Spt. Nit ℥i
Tr. Squill ℥j
Ol. Juni. gtt xiij
Tablespoonfull every 2 or 3 hrs. -

Tobacco has been highly recommended by Fowler - in Tr. dose gtt X or XV -

℞ Dry Scill
Ext. Colch
Tr. Tobac - ℥ss
Sut Spt. Nit. ℥j

This is Fenwick's Description

Teaspoon 4 times a day. - every morning purge with Cr. Tart.

Indian Hemp, somewhat similar to Tobacco. – Colchicum is occasionally useful. – Hence it appears that almost all the former are Narcotic & merely remove the effused fluid without producing any impression which will prevent its reaccumulation. — Jany. 13. 1836 –

But there is another set which remove the obstruction causing the effusion. The most efficient is Mercury; but from its indiscriminate use has produced as much harm as good. – It is applicable to sound constitution. Generally combined with Squill & Colchicum –

Nitromuriatic Acid. – Guaiac, – Sarsaparilla & Pipsissewa &c. – act more as general alteratives. –

In Cachectic condition, Tinct. Cantha. often relieves –

Tonics & bitter Infusions. – Popular Prescription. –

℞ Sam Swaip.
Hemlock
Horse Radish ā ā ℥iv
Cantharides
Cant Bp.
Bon Fil ā ā ℥ss
Cider (Yankee) ℔ij

Boil for 15 min & give a Wineglass every 2 or 3 hrs.

Chalybeates & Ferruginous Preparations

Tapping or Paracentesis is admissible when

distention is painful, - obstructs respiration &c. - some have considered early tapping advantageous, - I think that medicines act more readily after the evacuation. - These experiments however often fail from the removal of the stimulus of distention or from Peritonitis. -

Large blister to Abdomen sometimes relieves the necessity of an operation, - as I have seen in two cases - The water leaks out from the blistered surface. -

Encysted Dropsy occurs most generally in one of the Ovaries. - Its commencement obscure & slow in its progress - pain in the part & fever, - & gradual distention till it attains a size equal to full pregnancy. -

It occurs in all ages, - but perhaps more frequently at cessation of menses. - Sometimes from Hydatids, - from injuries applied upon that region. -

Distinguish from Ascites, - by local & prominent swelling, inclined to one side, - movable, & with it more as Trocar, - little thirst or fever, - & menstruation continues, - but it does not often continue in Ascites. - It may also be confounded with Ovarites, - but this is more painful & rapid, -

Adventitious tumours also require close examination.
Cases of Ovarian Dropsy may continue for 20 or 30 years.
Post mortem appearances differ very much, - sometimes a large sac, containing sanies or Pus, - distention of Peritoneum.
Fluid is usually thick & gelatinous, - various colours. -
- Pathology. - It is a local Dropsy, - induced by Inf. of the Peritoneal Covering of the Ovary. - It is difficult to explain it, but we have a close analogy in Hydrocele. - see p. 136

Jackson Jany 14: 1836

Angeal or Vascular Tissue, exists in every part of the body, & is essential to the Vascular System. - As far it can be traced, it appears to be a complete sac, of diff. forms; - its existence in the Capillary structure is evinced by the movement of the fluid thro' its transparent network. - In other positions it is tubular, as in Art. & Veins, - in others Cavernous, as in the Heart, - Spleen &c. -
True Tung, Hemat. is nothing more than an enormous development of the reticular capillary structure. -
Muscular fibres thrown around the proper Vascular Tissue, constitute the Heart. - In the Arteries, we

have the Elastic Fibrous Tissue thrown around it. –
The Veins are similar, but are distinguished by the course of the current of blood thro' them. –
Lymphatics have this tissue alone. –
This tissue possesses irritability & Inf. is not uncommon. & modifications of color are often found, – but must not always be mistaken for Inf. – But if the alteration of colour, be punctuated, – ramified, – involving other tissues; or altering the texture of the tissue, as thickened, – or softened &c. – or effus. of plastic lymph, – it is an evidence of Inflammation. – Venitis is more common than Arteritis. Arteritis is very obscure & sometimes not detected. –
Valves of the Heart are subject to Inf. – Ulceration & Erosion, marked by a great variety of symptoms. –
Inf. of Veins often takes place from slight surgical operation, & proves fatal. – Pus is thrown out & entering the circulation, acts like an Animal Poison. – This is sometimes the cause of Death of Puerperal Women, from Inf. of Veins of Uterus – & Pus. –
Ossification generally commences in the Fibrous Tissue & causes erosion of lining membrane. — see 139. —

Chapman. - Jany 14th 1836. —

I doubt the existence of large hydatids which contain qts. of Water, - but believe that they were confounded with sacs of the reflected portion of the Peritoneum. - The Hydatids may be merely vesicles of excited, but improperly fecundated, Corpora Lutea. - They are not so large in any other viscus. - Hydatids

Treatment. - General system must be attended to before the obstruction & cause, - but after the effusion, remedies are only palliative, & a cure is very rare. -

Abdom. Dropsy sometimes occurs between Peritoneum & Abdom. Parietes, - probably from the Cell. tissue there. - From the adhesion of Peritoneum at diff. points, - diff. cysts are found. - I have seen two cases in girls, preceded by cramps & pains in abdomen, - & appearing very much like Pregnancy. - Cupping, - Leeching, - blistering, - purgatives, & Mercury were of no avail, - both patients spontaneously disappeared. -

Hydrothorax, - occurs in old people, - with enfeebled constitutions by irreg. habits &c, - sometimes consequent upon Pleurisy, - & sometimes suddenly without much premonition, except uneasiness in Chest, & Dyspepsia

At length, dull pain, - diff. breathing, from going up stairs, or in horizontal posture; - cough dry, & afterwards thin flamy uncasiness; pain, - pulse hard, accelerated, or slow, pulse irregular, - pale complex. - Edema, - thirst & diminish. urine, - Bowels are very little affected. - Then perhaps sleep disturbed & wakens almost suffocated; - diff. resp. increased, - & utmost anxiety for fresh air, - pulse irreg. & intermit. & numbness from Heart to Deltoid & down the Arm. - Count. pale & ghastly, - Clammy sweat, - drowsy, coma, or delirium from interrupted circ. thro' lungs. -

Paroxysm subsides, but may be again readily excited. - This is the delineation of the worst form, - it varies much. It may exist in a slight degree, & unless complicated with effus. into Pericardium, - not be suspected. -

Death may occur from the slightest cause or motion. It follows Inf. of Pleura, - pulmonary affections, - lesions of Heart & Arteries, - metastasis of Gout, - Anemia, & hence is apt to occur after the Plenisy of old & drunken subjects has been removed by copious bleeding, - metastasis of fluid from other parts, as from Extremities. —

Diagnosis:- is difficult, & may be confounded with Abscess in the Lungs, or Empyema, - or Cardiac or Gastric lesions.
Charact. of Hydrothx. are pallor of face, - livid lips, - short labor. breath. on going up stairs especially in fair, - cold feet, - & starting in sleep. - Strike the Sternum in erect position & hear fluctuation (constant.) - Bichat says, press upon Abdomen & you increase suffocation, - but this also arises from Empyema, - or Cardiac affections. -
Percussion also gives a dull sound, - but this may occur from Empyema, - or Hepatisation of the Lungs. -
Auscultation gives the sound of Egophony, - but it is lost when the cavity is filled, - & returns when part absorbed. -
The History of the Case will give some light, - thus if Empyema, or abscess, - we should find previous Pleurisy or Pneumonia - If from stomach, - dyspeptic symptoms. -
Effus. of Pericard. connected with it gives us positive signs, - sometimes a sense of great weight, - small pulse, - no palpitation, - pallor & doughy countenance & a sense of oppression across chest, & a propensity to lean forward over back of a Chair. - If large, there is a protrusion of Cardiac Region. -

— To Insertion —

Jackson. - Jany 18th 1836 -

Nervous Tissue is an original tissue, not a modification of cell. Tissue. - It is widely spread in An. Economy & perhaps no point where it does not really exist. -

Its organic composition is Nervine, deposited in the meshes of the cell. Tissue; it is semifluid; various colours. - & varying in quantity, - causing the tissue to be either pulpy or firm. -

Chemical Analysis by Vauquelin of Nervine. -

Form of Nervous Tissue is not always the same; - it may be divided into 3 different kinds 1. Pulpy, - as Heat centre of Nervous System, - 2. Medullary as Nervous Chords. 3. Parenchymatous, - entering into structure of organs, - but not demons.

1. Forms what is usually called Encephalon or Cerebral. - Here originate the forces of the Nervous System. - It varies in colour at diff. periods of life, - & in diff. states of health. - It possesses no sensibility & may be cut, burnt &c. without pain. Its morbid alterations have not been determined yet ~~to be~~ whether they are owing to the Sub. of the Nervous Tissue, or of the Cell tissue surrounding it. - Hypertrophy has been known to exist; - & also Atrophy; - as of mass of the Brain. -

The next position in which we meet a modification of this pulpy tissue, is in the Ganglion, - as the Sympathetic, - Its colour varies from a grey to a rose colour, - & seems to consist of fibres variously intervowen. - Their function & Pathology are not known, but probably their influence is very great. - 2. Medullary or Fibrous, - consists of fibres, - white, - surrounded with cell. tissue, - & may be readily in different parts - Of this the Nerves are formed, - each Nerve composed of numerous chords surrounded by cell. tissue, - the whole included in a Neurilemma. - Colour varies with age, - white in adults, yellow before & after - It is an excellent conductor of Electro-Galvanic Fluid - If placed in thin layer it hardens & becomes Corneous, - while the Pulpy becomes soft like Fat. — Some parts of it are very sensible, others are not. - Thus the Optic Nerve is insensible, so also is the Anterior portion of the Spinal Column, & the Nerves proceeding from it. - The Nerves of Sensation vary in their particular structure, - & I believe that each Nervous Fibre has a peculiar structure, - because from wandering Neuralgic Pains, - I am convinced that the pain differs according the position or part attacked. - See p. 143.

Jackson, - Jan. 18. - for Chapman. —

On Diseases of the Nervous System. —

The Nervous system begins to grow from the exterior surface & thus gradually the Spinal marrow ascends the Spinal Column until the Optic Thalamus & thence the Brain is formed.

The Diseases of this system pursue the same course; - thus they generally commence by dryness & coolness of skin - sensation of creeping or chilliness &c. - thus gradually advancing to some of the organs or structures; - then arrested by some morbid cause; - & resulting seriously. —

First, we shall speak of those of function of Cerebro-Spinal Axis which are of 3 kinds; - 1. Of Sensation. - 2. Of Motion. & 3 Of Psychological Faculties. —

1. Sensation is not a vital property; - but has a peculiar apparatus appropriated to it. — It is connected with Pulpy matter (Velingen) located in Int. of Spinal marrow & Med. Oblong. The diseases are now comprehended under Spinal Irritation. It is seated in this portion of the Nervous System. — Sometimes in Cutaneous affections; - slightest touch produces agony - while more firm is not painful. - This occurs

sometimes only in particular portions. Sometimes it is fixed, – at others, wandering, floating about to every part of the body in succession. –

Jany 19th. –

Pathological conditions of Function of Sensibility. – are of 3 kinds, – 1. Neuralgia or Augmented Sensation, – 2. Diminished, – & 3. Perverted Sensation. –

1. – Depends upon modification of Post. part of Spinal Marrow & Nerves proceeding therefrom. – It may be general or limited. – General when diffused over a limb, half the body, – half the head &c. – more usually it is limited or fixed, as to one nerve, to a fibril, – or to a single point. – Sometimes it never changes Position, as in Face called Tic Douloureux, – at other times, erratic. –

Sometimes it is external & all the senses may be affected, – or it is internal, – affecting the int. organs. – It is Sensitive & functional. – It is simple, when nothing else but pain, – & complicated, – when Inf. accompanies it as in commencement of Inf. Fevers, – Yellow Fever particularly, – they often think it merely Rheumatism. – see p. 145. –

It is Paroxysmal & Permanent. – p. 145

Jackson. Jan 7. 19. 1836 —

In the Nerves of Organic Life, structure differs from those of Animal Life, - Organic, less fibrous, - more pulpy, - no cuticle, except in centres or ganglia, - more grey colour. - Nervous Tissue more abundant in Infancy, & gradually diminished becomes more dense, or atrophied, in Old age. -

Inf. of this Tissue is doubtful, - but the surrounding membranes are inflamed, - it softens, - Pressure interrupts the order of the molecules & the functions performed. -

Induration sometimes occurs. - Hypertrophy & Atrophy, - Tubercles deposited in cell. tissue. -

3. Parenchymatous, - Membraniform, or Expansive. -

This is supposed to exist from Induction, - but has never been demonstrated. - We find no point of the External Surface where there is no Sensation, - But in some organs we have it demonstrated, as in Retina, Auditory & Olfactory Nerves. - Besides this, the feeling which informs us of all our wants shows us that all the organs are well supplied with Nerves - Much however yet remains to be discovered respecting the Nervous Tissue, - & a fine field is here open. -

Contractile or Muscular or Sarcous Tissue is peculiar to itself, has its own properties, relations, functions &c. & is original in the Ani. Economy. - From this are formed Muscles, - but not solely, - because they are compound, - containing Musc. & Cell tissue, - Vessels, - Nerves &c. -

Musc. Tissue varies in colour, - generally red & owing to col. matter of blood, of which a very large quantity is required. When not much used it is white, as Breast of Poultry, - if very much, black, as Back meat of Poultry. - So in Fish. -

Sarcous Tissue itself is soft, - extensible, - retractile when cut, - force very variable, depending upon whether will is exercised upon it, or taken by surprise, - easily decomposed & becomes green, - excellent conductor of Caloric, - contractile by will & exterior agents. - Its formation or organization is not determined. Some think it fibres, - others, globules, - others, elongated cells of cell. tissue, jointed to each other, - filled with a substance which contracts by the will, - electricity, galvanism &c. The subject however is yet open for demonstration - & but little is in reality known of its minute composition. — see p. 149. -

Jan 7 19. – General Neuralgia varies in kind of pain; sometimes pricking, – great heat, – cold to patient. – But more frequently it is Fixed, – & the most diff. to cure in Face, from 5th Pair. – The pain is ~~sometimes~~ Paroxysmal at the Corner of the Eye. – (Case of its commence at 5 P.M. – lasting for 12 yrs. – continues from 2 to 4 hrs. – in Lungs & Throat, tickling sensation, hawking &c.)

Ocular Neuralgia is diff. to distinguish & treatment of little consequence, – but they recover in 1½ to 2 yrs. –

Sometimes in Supra, or Supra-orbitar Branches, – in Teeth & around the Jaws, – & Teeth are often drawn without relief. –

Sometimes the Disease is in Chest, & often mistaken for Phthisis Pulmonalis, – especially about Left Mamma. –

Neuralgic Pains in Abdom. Region, & often in Hypochondric region, & mistaken for Disease of Liver. – It is Paroxysmal, comes on towards evening, – most violent pain, relieved by Pressure. It may also be seated in Lower Extremities, – in Parts of Generation, – & often in Chord & Testicle. – It is useless to cut off the Nerve, – because the disease may be located at origin of Nerves, – but expressed at the end of them, – & if cut, – the end again becomes painful. –

In fixed Neuralgia, - Periosteum is often diseased. - Internal Neuralgic affections are often confounded with Inf. affections. - It attacks all the Organs, - as Lungs, Heart, Stomach, - Liver, - & Bowels, - Bladder, - Uterus, - & great discrim. is necessary lest it be mistaken for Inflam. - (Case which had resembled Asthma for 10 yrs. cured by a slight galvanic current from Base of Scull to Epigast.)

Simple & Complicated, - The latter is very common in females, arising from Prolapsus Uteri &c. -

Jan 7 20. -

The Causes of Neuralgia are very various. -

Remote are either Constitutional or Accidental. - The sanguine Constitutions & Temperaments are most subject to it, - & also those which have been injured or broken down from any cause, as Fevers, Dyspepsia &c. -

Predisposing, depend upon a developement of the Nervous Apparatus, - & a vicious augmentation of sensibility beyond what is natural. -

Exciting, are very various, when the two former causes exist, - for then, any derangement in the Stomach & bowels,

as Dyspepsia, - Constipation, - or even diff. Defecation, - Cold, - Heat, - Mental or moral excitement, & various other things, which will any derangement of the system. - Proximate, - or in other words, the disease itself, we do not know. - What it is that constitutes Pain is unknown.

Symptoms. - The painful sensations differ very much in their modes of approach, - sometimes they are slow, gradually advancing to agony & then gradually diminishing, because it is a fact that the nervous system becomes exhausted by action. - Sometimes the pain is very violent at once. - It is diff. in its character, - sometimes darting, incessant & so severe & agonizing as to surpass all description. —

The Local symptom is pain in some part or parts. — The General symps. are Cold skin, - small pulse, - less colour of the skin, though sometimes there is a slight flush near the part affected, & may be mistaken for Inf. — more or less derangement of Digestion & secretions, - urine high coloured & deposites a sediment just before the attack, - which to some persons, gives them warning, - During the intensity of the Pain the pulse may be usually small & contracted. —

Diagnosis is either General or Special. – General. – There is but little constitutional disturb.; – no fever or reaction, (for a fever wanted always cures the attack) – Absence of thirst or dry skin; – & the pulse not full hard & frequent as in Fever; – but quick, unless somet. there be some nervous irritation, – which subsides when the patient becomes more calm & quiet. – Skin is Cool. –

Special. – It is diff. to distinguish between Neuralgia & Inf. attacking the same parts & organs, – A few of these we will notice.

Rheumatism. – In this, Inf. & Neur. are somet. combined, especially when there is much swelling & pain, – (V. S. & Top. bleed. –) but when there is little of these & it moves from part to part, it is more Neuralgia. In Inf. Rh. the heat is augment. – Neural, – rather diminish, if any thing, –

Gout – local Inf. – & swelling, – integ. shining, – & acute pain. – Somet. the foot feels as if burning, & this Neuralgia resembles. – Neur. is now apparently supplanting the place of Gout in former times, – probably on acct. of Temperance. –

Intermittent Fever may be confounded, – Both cured by Quinine.

Hemicrania – has hitherto baffled all remedies; – Bleeding, Blistering, Purging, – Cutting Scalp &c. – It is a Neuralgia of the Pericranium. – Somet. it is located internally, & very violent.

See p. 155

Jackson Jan 21. 1836 —

Sarcous Tissue is destitute of Sensibility, - but has the power of sensible contraction by the contact of exterior agents. —

Glisson introduced irritability & meant vital power in organic substances. - Haller limited irritability to the contractile power of muscular fibre. - Hence the confusion of terms - & this may be remedied by limiting contractility to muscular fibre, - & irritability to phenomena of other tissue - or reject them both, & substitute Organic Force. —

reaction in various tissues by which the phenomena of life take place. —

Its colour is usually red in higher orders of Animals, - but in submucous muscular tissue, - it is usually a dirty grey. - (Case where musc. fibres of Intestines were red) —

Uterus is a modification of this tissue & appears like early appearances of Embryo. - It is more colored, - more elastic, & after executing its office, disappears. — It differs in diff. series of animals. — It is changed from Inf. - though it is not certain that Inf. primarily occurs in this Tissue, - it is first in cell. tissue, - gelatinform subst. is thrown out between the fibres, - & as soon as Inf. occurs there, - the muscles lose its power of contraction, either by will or Galvanism.

Inflam. may run on to suppuration & to ulceration & to gangrene. - Glossitis is very serious from the extreme swelling & suffocation threatened, - remedied by deep incisions. -

Hypertrophy is common, & was first noticed in the tissues - & in the Heart, the fibres are more dense & smooth. -

Atrophy takes place, whenever an organ is impaired. -

Softening, of muscular fibre, occurs in Scurvy, - & to some extent in Typhoid Fever, hence the slow recovery.

It has been said to be transformed into Fat, - but it is probable that the muscles become atrophied & Fat is deposited. - This occurs in luxurious & Gouty subjects. - Such was the case of Louis XVIII, - late King of France, - to which he fell a martyr. -

Parenchyma means a structure into which enters more than one elementary tissue. -

Thus we have 1. Nervous. - 2. Ganglionic Parench. - 3. Muscular, - 4. Vascular, - 5. Dermoid or Mucous, - 6. Pulmonary or Respiratory, & 7. Glandular or Secretory. - Each is peculiar, gives a particular sound upon Percussion & Auscultation, - each is modified diff. by the same agents, - & has its own special vitality. -

Jackson (for Chap.) Jan 21-1836

Diagnosis between Neuralgic affection & Inf. of Stomach — In both ~~always~~ generally pain. — In 1. Gastralgia, pain much more acute, — but in 2. Gastritis, sometimes no pain, or dull, — or insensible to pressure. — 1. Pain more during the night, — & no or very slight emaciation, — in 2. always emaciation. — The same is true with all nervous affections of Digestive Function. 2. Has red, pointed tongue & thirst, especially after meal, — but 1. Has not these marks. — (Barras on Gastralgia) —

Between Neural. of Bladder & Prostate & Inf. of these & also of the Uterus. In Neural. of B. & Pros. — pain is intense, — but urine distinguishes. — In Cystitis, — mucous sediment from urine, & even ropy discharge, — but not so in Neuralgia. — no sabulous deposites. —

Uterus subject to both. — Metritis, a sense of fullness of pelvic viscera, — pressure downwards & tendency to Prolapsa dull pain, — heat of vagina & touch neck pros pain — Metralgia, pain acute & violent, — but not weight & bearing down. —

Treatment, of 2 kinds, - Paroxysm & Interval. -
- During Paroxysm, general & local. - General is to excite a temporary fever, by heat, stim., narcotics & tonics, all at once. - Place in bed, - warm water, hot bricks, bottles, - bathing bath, - somet. in hot, neural, - stomach warmed. - Over Abdomen & Epigastr. more efficient. - Dry Heat in commencement of Paox. - & moist Heat towels close, - so as to imitate Paox. Fever. - Give stim. diff. stim. & opiates, of which variety, - sometimes Hot Toddy, - Hot Water, - Hot Acid, - Ether, - Black Drop, - & followed by Hot Drinks. - Ag. admis. - Spt. Lev.

Wandering Paox. & Visceral are most easily overcome by this means. - In Fixed more difficult, especially of the Fifth Pair. - A desperate case cured by the above practice pushed. - Black Drop, Ether & Tinp. - & followed by large quantities of Boiling Water. -

Local treatment. Painful applications increase the pain, - but Hand & soothing applic. relieve it, - somet. soft rubbing of hand, - somet. evap. lotion.

Spt. Camp	℥iv	
Tr. op	℥j	
Sol. Act. Lead	℥ij	
Ether	℥j	

Put it in Cup, - warm it & moist rag dip it, over the part.

Sometimes Hot Oil, - Oil, Camph & Laud. applied to the part, Hot Oil Baths. - Ointments or Liniments, as Oil from Laurel Berry ℥i, - with Laud. - Belladon. - Sol. of Cy. of Pot. ℥i or ℥ss in f ℥vj Water & apply by a rag. - (from decomposes.).

Acupuncturation sometimes efficient, - one of peculiar sensat. but somet. it augments the pain. - The Temperature can only be known by trial, except burning pain requires Cold. -

Another plan is to remove the Cuticle over or in the neighborhood of the part, & dress with 1 or 2 grs. of some of the Salts of Morphia. - This practic. for Fixed Neuralgia. -

During the Interval. - General treatment varies - The most efficient are Tonics, - especially the Met. Tonics & Quinine. - Of the Met. Tonics, - Carb. Iron is excellent. - somet. in very large quantities, one case of 10 pills per day. - Usual dose 5 to 10 grs every 3 or 4 hrs. - with Arom. -

Sulph. Cop. & Sulph. Zinc, I have found adapted to Intermittent form & associate with Sulph. Morph & Sulph Quin ā ā 16 gr

Fowler's solution, for Intermit. form, but great caution. -

Sulph. Quinia, in small & long continued doses to improve the general system & increase the quantity & quality of blood.

Narcotics must be employed during the Paroxysm & during the Intervals. - The Ext. Belle, - Ext. Cicuta, - Op. or Morphia - Quin. & Iron, compounded, often form excellent agents, to act upon the especial vitality of diff. parts, - Thus Neuralgic affections of Chest have been treated, instead of mistaken for Pneumonia, - by a Pill of

Ext Bell.
Ext. Cic. aa ½gr
Op. ½gr or
Sulp Morp. ⅙gr
Sulp Quin. 1gr. —

Give this Pill every 4 hours.

Gastralgia. - Narcotics associates. -

Examination of Spine must not be omitted. - It Sanfg 22. - must be made by Pressure, - or by application of Heat, with Cloth or Warm Iron passed slowly down the Spine, - but sometimes no Pain is found in the Spine. - Sometimes it is so sensible, that a moral impress. excites it. - Treatment adressed to this, is Local Depletion & Counter Irrit. - Cups or Leeches generally, - or sometimes these cannot be borne & a Seton is useful. - ~~Thus~~ Veratria grs iv to ℥j. & rub it up with ℥j or ℥ij Oil of Laurel, is a good rubefacient to Spine & to other parts. — See p. 155-6

Continued from page 148. -

When situated internally, it is very diff. to diagnosticate, - The most safe plan is to treat it first as Inflam. - & if this do not succeed, change to the use of Tonics, - Opium, - Diffus. Stim. - as Ard. Spts. - Hoff. Anodyne &c. - But if these be given at first, & the disease is Inf. - serious conseq. might result, - Vice versa it is safe. -

Ocular Neuralgia is somet. diff. to distinguish, - but in this the Conjunctiva is very rarely injected, - while in Infl. the vessels are enlarged & penetrate the Sclerotic Coat. -

To disting. it from Retinitis, is more difficult. - But here we have Pain in the Head, - variations of Vision, - with brilliant lights of diff. colors, - so that the patient feels as if surrounded with a brilliant light, even in darkness, - there is general turgescence of the head, - & reading is intolerable. - But in Neuralgia, the patient can bear the light, & read, - & there is no continued flashing of light, - tho' somet. when the pain is very intense, there may be a transient flash. - There is no heat, or redness & vision is good, - Somet. - but rarely, it is so violent, as to cause mental derangement. -

In Neuralgia of Frontal Sinus & Nose, there is a loss of Smell & dryness, - but no Inf. Symptoms. -

Of the Fifth Pair, - the suffering is most intense & least submissive to remedies. - The Agony is indescribable. -

Of the Chest, - may be confounded with Rheum. & Gout, & with disease of Int. Organs, - from which it must be dist. by Auscultation & Percussion. - See p. 151. -

When first applied, this ointment seems to produce a sensation as if Nerve was struck, & then relieves. -

Somet. Warmth to Spine will relieve, at others will not. - Also at the same time, use diffus. Stimuli. -

Somet. it will augment the Pain, - then suspend ironing. -

Other remedies are Blisters, - small & gradually prepared from ends of Spine to seat of Pain, - for there is danger of producing too much irritation, - even spasms, by approaching too quickly. - Croton Oil is less painful. -

Tart. Emetic pustules. - Setons along the Spine, at Neck, Back & Loins, appear to me most efficient. -

Mopa somet. becomes necessary, & frequently repeated. -

Always commence with the milder & proceed gradually if the disease do not yield. -

The Diet of patient must be attended to. – Coffee & Green Tea must be avoided, – Also Wine, Spirituous Liquors, – Hot Bread & Cakes, – strong meats & indigestible food of any kind, for a single error in diet, often defeats whole treatment.

Clothing very important, – Silk, covered over with Flannel, –

Rest is absolutely essential, – horizontal position, – or if any riding in easy vehicle or on horseback, which is better than in Carriage. –

Case however is generally protracted & difficult, & a knowledge of this will give the patient confidence in the practit. – They will however generally recover. –

Another & a severe condition sometimes exists & the class receives a diff. name, – There is a partial or total loss of sensation, – Somet. it is Local, as Lib, or Arm; Somet. General, – Somet. transitory & Somet. Permanent – the latter is ascribed to disorder of Nerves supplying the part – General is owing to loss of dynamic power. –

Treatment, – By penetrating applications to external surface, we may somet. relieve General, – If local make the applicat. to the origin of Nerves affected. –

Perverted Sensation, – as in Skin in cutaneous affections, when intolerable itching, especially at night. – Cupping to Spine, – & dress of Soft Silk – warm bleeding bath; Emollient Ointment, of Sweet oil, – White Wax, Spermaceti & Lead Water. –

Very small Papilla appear during the attack –

Sometimes they feel as if some foreign body or insect resting upon them. - This Mania a Potu Illus. -

The senses are susceptible of perversion, - both External & Internal. - We shall commence with Touch, - which may be Acute, Obtuse or Perverted. - These may exist from disease in expansion of nerves at ends of fingers, - in conductors, or in Brain, which perceives the sensation. -

Most usually, when Touch is Perverted, - the Brain is the seat of the affection. - If local, - Poultices soothing to ends of Fingers, - if Brain, - Depletion from Nape, - Purgatives &c.

Smell - of Reception, - Conducting & Perceptive Sensation. - The action of Fifth Pair is absolutely necessary to enable the nerves of Sensation to feel impressions. -

Perverted putrid smell is a fatal symptom in Acute Diseases.

Taste. - most active upon sides & surface just beyond the lips. - This sense may be much improved by cultivation. -

Putrid taste in acute or Typhoid Fevers is fatal symptom, - so also in Chronic cases, - where the putrid taste is such as to cause an abhorrence of food. -

Hearing. - When dry Meat, Stud. - Bresnay, oil, & Ol. Lent. - or Bals. Peru &c. - to excite secretion. - If Eustach. Tube is filled, - inject it with air or Water, - or Mucus in Typus. - Liquor in Cochlea may become vitiated. -

Uniform Pressure of abdom. muscles prevent accum. of gases. – hence injury of viscera supplying these allows distention

Fract. Rest.

Defined & Stated
Cause
Sequence
Prognosis
Pathology
Treatment

Feb

M	15	22	1	8	15	22	29
T	19	26	2	9	16	23	1. Sunset
W	20	27	3	10	17	24	
Th	21	28	4	11	18	25	
F	22	29	5	12	19	26	
S	23	30	6	13	20	27	
Sun	24	31	7	14	21	28	

Tonsils & Uvula, Forceps – Gibson's & Fahnestock's
Throat. – Probang, – Bullet Forceps. (Bond's) – Hooke w Bunch of Thread –
Stricture. – Bougie. – Stomach Tube