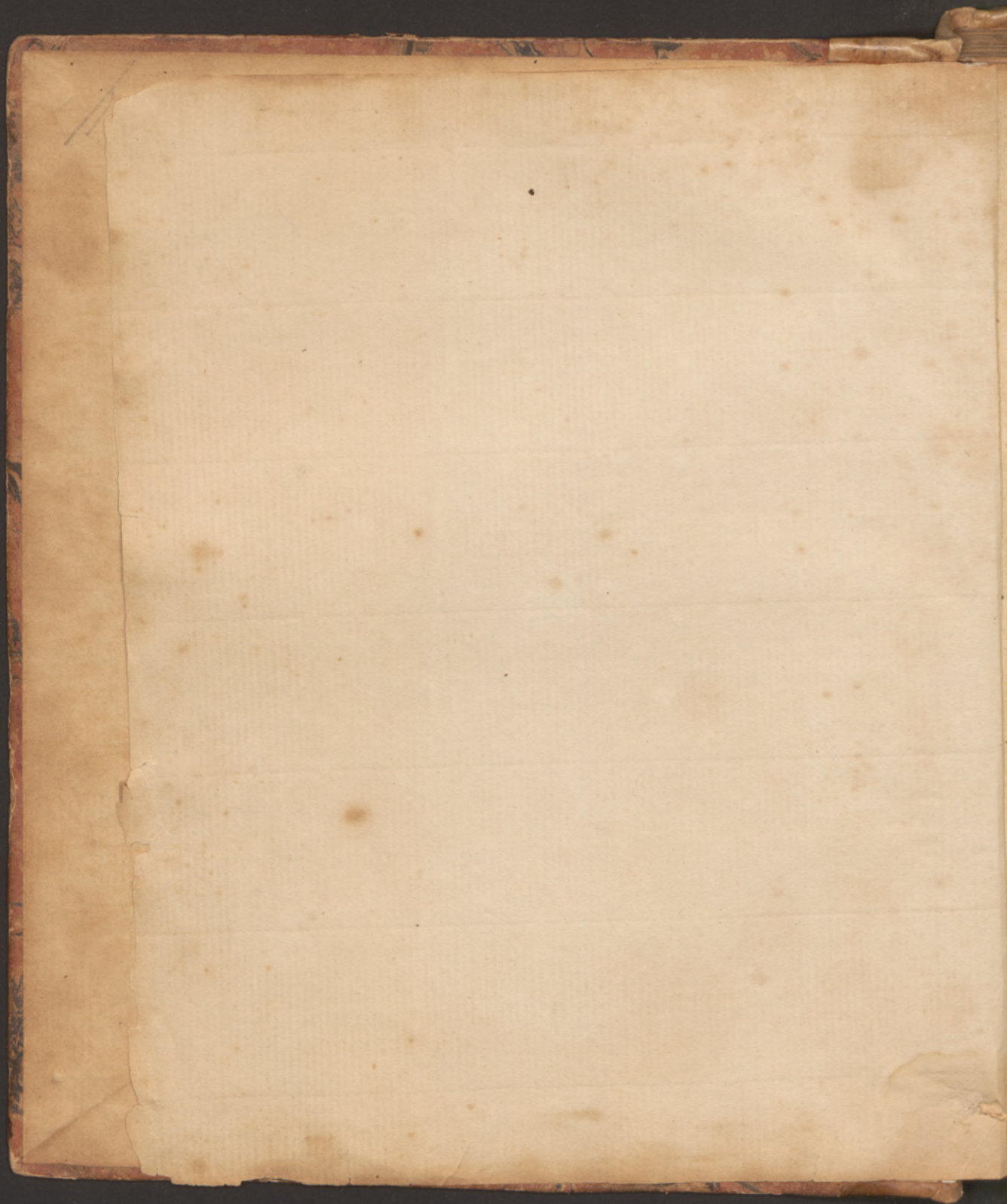


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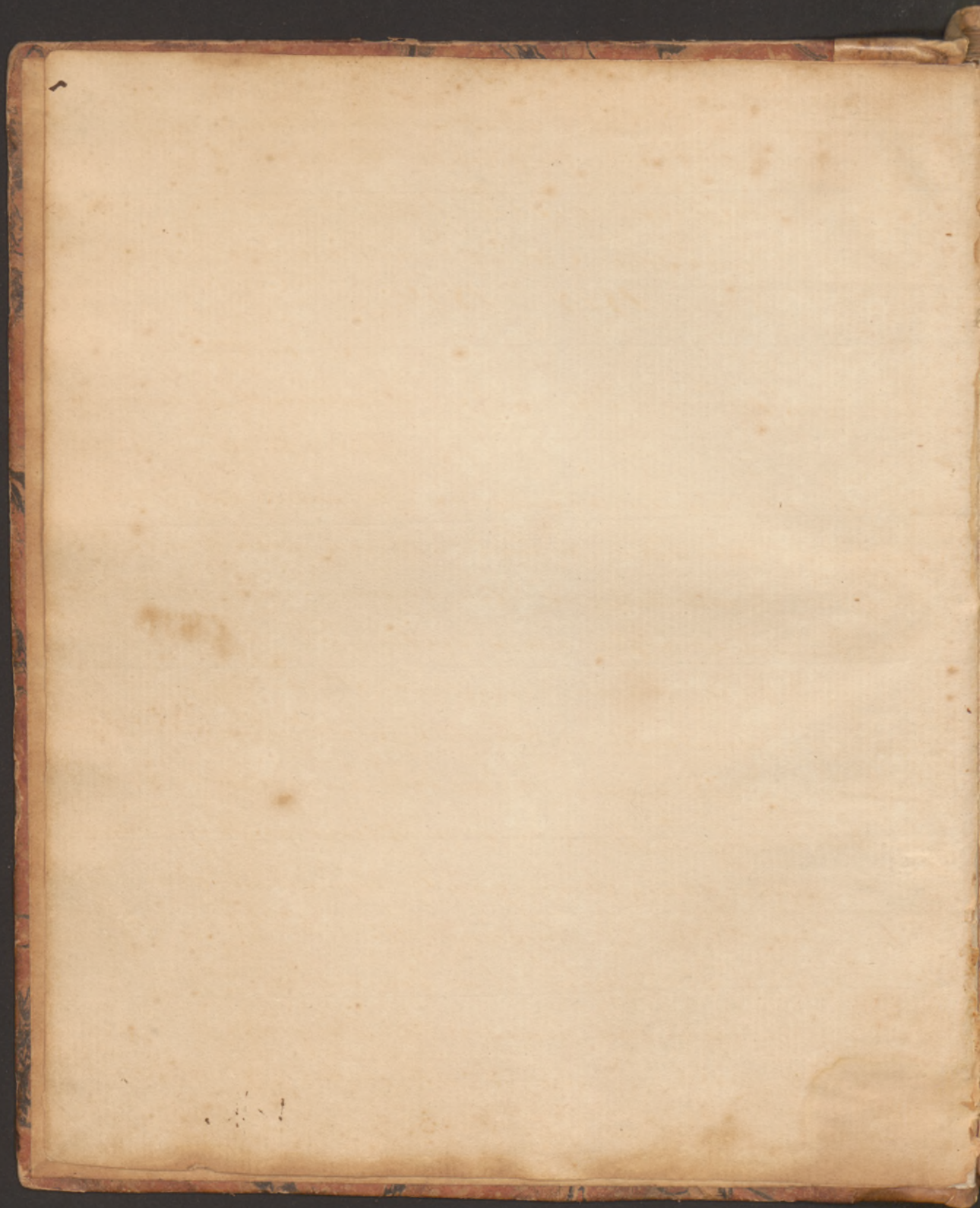
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Extracts from a course of  
Lectures given by James  
Jackson M.D. in Boston  
1818—1819.

Nov. 1<sup>st</sup> 1818

Lect. 1<sup>st</sup> The subject of medical science is  
As the human  
body is daily obnoxious to some one of the  
various diseases which afflict mankind, the  
object of medicine is to preserve the health, and  
to restore it when it is lost. The knowledge  
requisite to the attainment of this science, is  
an acquaintance with Physiology and Natural  
History— It relates to matter and mind, and  
embraces their properties, relations and laws.

There are four great divisions of medicine  
I. Physiology. II. Hygiene. III. Pathology. IV.  
Therapeutics. From these are derived the rules  
and precepts of the practice of physic.

The whole science is not embraced in this  
course. There is much that belongs to Anatomy,

Surgery, and Midwifery, to Animal Chemistry, & Materia Medica. There remains something to this course in each division. —

## 1. Physiology.

Physiology treats of the science of life — It embraces 1. a consideration of — I. The composition of our bodies II. Their structure. III. The properties of our bodies and minds. IV. Their functions —

Thus far, our race may be considered in what is common to them, — But considerable differences are to be perceived among individuals. Of these we take notice under — V. Varieties. They are all influenced by and exercise an influence upon external things. Hence we consider — VI. The relation of the human system to external things. It is by the agency of these that the functions of life are maintained. From a deficiency in them life may cease; and, if it do not, it must ultimately terminate by a loss of the properties of vitality. They are different modes of the termination of life considered



under VII. Death. - A very large proportion of what relates to this division (Physiology) is taught in other courses. Such parts will be considered in this course as are not so readily embraced in those. -

Lect. 2.<sup>nd</sup> 1. The composition of our bodies may be divided into elements ultimate and proximate - Their distinction 1. Ultimate. These are the same as in common matter, Oxygen and certain combustible matters <sup>or hydrogen & nitrogen</sup> in compounds binary and ternary, &c. These combined also in common matter but not in the same proportions, &c. that cannot imitate their combination in living bodies. -

2. Proximate. All the substances in our bodies are composed of the ultimate elements. The simplest combinations of these constitute the proximate elements. These elements are compounded by living power, and when decomposed cannot be recombined. Chemical compositions remain perfect, while defended from foreign influence; - vital compositions are the result of life, and this requires foreign influence; and however aided, the

Vital combinations are necessarily transient. If  
chemical composition be destroyed, the same ele-  
ments may be recombined and constitute again  
the same substance. Not so with vital combina-  
tions, they cannot be recombined after being once  
destroyed, such as exists in proximate elements.—  
The principal proximate elements are to be found  
in the blood. They are Albumen, fibrin and red  
globules.— These elements of the blood go to constitute  
the substance of the body, particularly the albu-  
men and red globules.— These are distinguished  
from each other, by the colour of the red globules,  
and the coagulation of the lymph, which takes  
place at  $150^{\circ}$  F. — Fibrin is supposed to con-  
stitute one of the principal solids. In other parts  
the different proximate elements are none of the  
blood are not well distinguished. The fluids derived  
from the blood are exhaled, secreted and excreted.  
The solids are formed by an analogous process.  
Exhalations are mainly aqueous, secretions alkaline  
and excretions acid.— Secretions generally have  
the same quantity of water, as the albuminous con-  
stituents of the blood.— Exhalations have more

Secretions contain the albuminous contents of the blood  
and in each a peculiar animal matter. Excretions,  
are more compound, - Cells contain free Curdie cells.

II. Structure of our bodies. - This is prin-  
cipally taught in the school of anatomy - As  
it is of great importance, shall mention it here.

The body as to its structure may be divided  
into simple and compound. - 1. Simple -  
is the structure of minute parts in different  
textures, as fibres, laminae, &c. 2. Compound -  
is the structure of organs in which simple  
parts, similar and dissimilar, are combined  
mechanically. - The organs are also to be noticed  
their form and connection -

III. The properties of our bodies. They are  
of two kinds, physical and vital. - 1. Physical  
being properties which are also found in dead  
matter - such as gravity, elasticity, electrical  
properties, &c. Likewise such as are mecha-  
nical, arising from the configuration of organs  
and their adaptation one to another. -

II. Vital, which are divided into - 1. Organic,  
belonging to all organized beings; -

2. Animals, or such as are peculiar to animals  
These are not all found in every animal -  
1. Organic. properties are a. Mobility, b. Irrita-  
bility c. Vital affinity, d. Protoplasm, e. Sympathy  
2. Animal. These are in part corporeal, & in  
part intellectual. The latter to be noticed only  
as they are connected with the former - They  
are f. Sensibility, g. Intellectual powers, h.  
Property of transmitting volitions i. Sympathy.

Section 3<sup>rd</sup> a. Mobility, is the power of mo-  
ving - It is exhibited in muscular fibres, in ves-  
sels and other parts. Generally considered as deri-  
ved from other organs. - The power of motion is con-  
sidered as contained in the parts in which it is  
exhibited, and not made under the influence of the  
will, this influence being communicated to the  
parts through the medium of the nerves - Hence  
it is altogether an hypothesis that motion is deri-  
ved from the nerves - If this be correct, either motion  
takes place in the nerves, in which case they possess  
mobility; or, if no motion takes place in them,  
they have not that property, but only the power to  
give it to other parts. In either case the property is

distinct from other properties. — b. Irritability —

The power of being affected by stimuli, so as that involuntary functions may be induced. — The first moves by the irritation of a nother substance.

It is various in different organs — Possessed by all that have motion, and by some that have not —

As the muscles possess both irritability and mobility, whereas the mucous membrane possesses irritability only — Irritability and mobility differ, as it regards strength, the one may increase and the other decrease, so is the case with the alimentary canal, the irritability of which is increased the frequent exhibition of an emetic &c. —

c. Vital affinity. The power by which the ultimate elements of matter are united and kept in combination in ~~ex~~ living bodies — The elements of animal bodies are not governed by the same laws as dead matter, they are not combined by the laws of chymical affinity — As is evident from the decomposition of the living body after death — Why does this take place? is it not because the body is deprived of that vital principle, &c. — This vital affinity exists in fluids as solids. —

for we find they undergo decomposition as do  
the solids. The analogy with chymical affinity -  
Chymical affinity remains the same, and exerts  
the influence on different bodies - Vital affinity  
is different. it is not inherent like that, but is  
derived and transient. It is a property which  
the part possesses while it is alive - Duration of  
life in individuals of ~~life~~ particles very limited -  
Some suppose they may be worn out which  
is not the case. as they are defended by the suc-  
cus membranæ - of Vivification. The power of  
bestowing vital properties on common matter.  
Whatever be the vital properties, they are given by  
the body enjoying to that which was previously  
destitute of life. This power exists under different  
modifications in different parts. - The matter ass-  
milated receives different properties in succession  
nor does all this matter become endowed with  
every property. - i. e. Synergy. The powers whereby  
several organs, or parts of the same, conspire to affect  
one object; acting either simultaneously or in suc-  
cession - In order to affect one organ a number  
must be affected at the same time - a number of

functions are performed at the same time for the same purpose - as is the case with the uterus, where the organs operate by a power within themselves - while the mind does not take cognizance of these

(Distinguished from sympathy -

f. sensibility. The power in our corporeal organs on which external material substances act in producing perception. - It exists in animals but in vegetables - This property is various, or modified in different organs - The sense of touch is common to the brain through the medium of the nerves, hence if the nervous communication is interrupted or cut off the sensibility is destroyed - The mind does not exist in every part of the body as the mind possesses the power of perception, and the fingers of sensibility. - Intellectual powers. The mind may be considered in a certain sense as uncomplexed, or as a unit; yet it certainly performs various functions, and these by various powers - The most necessary for us to regard are perception and volition - The first enables us to recognize impressions made on the bodily organs; the other to act on bodily organs -

There is a power in the body that assists <sup>our</sup> percep-  
tion. — motion is under the control of the will,  
the nerves transmit the desire of the mind to  
the muscles to be moved, which become submiss-  
ive, and obey its dictates. — But this power is  
not possessed by all muscles, for instance the  
heart &c. are not under the influence of the will,  
i. Sympathy. There exists among all parts of the  
living body, intimate relations, all correspond  
to each other, and carry on a reciprocal interchange  
of sensations & affections — These links which unite  
together all the organs, and cause one part to  
feel with another — when one part feels pain the  
others suffer also — is called Sympathy —

An influence exercised by one part on others, more  
or less remote from it, without mechanical connec-  
tion — It is impossible to explain how this power  
exists, but that it does exist is an established point  
Mr Hunter distinguished it into, contiguous,  
contiguous and remote.

contiguous in contiguous parts, remote as in the  
heart and shoulder — It is also active & passive



15 27  
Lect. 11<sup>th</sup> IV. The functions of our bodies.

The division of functions and their relations.

Divided into vital, natural and animal functions.

Two classes. — First class. Those functions appertaining to individuals. — Second class. Those appertaining to species. — First class. Two orders. Organic & Animal.

1. Organic; common to all living organized beings. In man these are, 1.<sup>st</sup> <sup>those which</sup> Assimilation, including a. Mastication b. Deglutition c. Digestion d. Absorption of chyle e. Sanguification f. Circulation g. Respiration.

2.<sup>d</sup> Excretion, including a. Exhalation b. Secretion. c. Nutrition. 3.<sup>d</sup> Evacuation, including Peristaltic motion, b. Lymphatic absorption & perspiration & urinary excretions. — 1.<sup>st</sup> Assimilation is a function common to all animals, by which substances extraneous to them, are introduced into their bodies, and

subject to a peculiar system of organs, their qualities altered and new compounds formed; fitted to their nourishment and growth. Animals alone are provided with organs of digestion, all of them from man down to the polypus have an alimentary cavity pervasively stretched & length. The existence of

assimilation appertains man & he has been taken as the

subject to a peculiar system of organs, their qualities altered and new compounds formed; fitted to their nourishment and growth. Animals alone are provided with organs of digestion, all of them from man down to the polypus have an alimentary cavity pervasively stretched & length. The existence of

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subject to a peculiar system of organs, their qualities altered and new compounds formed; fitted to their nourishment and growth. Animals alone are provided with organs of digestion, all of them from man down to the polypus have an alimentary cavity pervasively stretched & length. The existence of

as the essential characteristic of the animal kind.  
1. Mastication. In man when food is taken in  
to the mouth it undergoes "mechanical oppression  
or mastication, by means of the lips, jaws and  
teeth, with which these are furnished, the muscles  
by which they are moved, and those that form  
the parietes of the mouth - It then passes  
through the esophagus into the stomach by  
the process of Deglutition - The stomach being  
the common receptacle of the alimentary canal, it  
is here that the food undergoes the process of  
c. digestion - principally by mixing with the gas-  
tric juice, it forms chyme - On this state it  
passes through the pylorus into the duodenum  
here by mixing with bile and pancreatic juice  
it is here separated into two parts the one nutri-  
mentitious, the other chylous or nutritious -  
The chyle is taken up by the absorbents  
and goes to nourish the body, and the fecal  
is carried along the alimentary canal, and ex-  
creted - The aliment is dissolved by the gas-  
tric juice, and by the assistance of bile and  
pancreatic juice - chyle is formed, which has al-

ways the same nature and properties, which may  
 be the kind of food received into the stomach—  
 But there is a difference in food as it respects  
 the quantity of chyle it produces— Animal  
 food affords more nutritious particles than  
 vegetables— Animal producing 90 parts chyle,  
 while vegetable only 40 in a hundred—  
 2. The chyle is now taken up by the lactals &  
 conveyed into the stomach's duct through the  
 mesentery, which is called the absorption of chyle  
 & through the chyliferous vessels it is carried  
 which is called and emptied into the left sub-  
 clavian vein, where it is changed into blood—  
 This is called sanguification— This process where-  
 ever it is effected, is analogous to digestion— & circu-  
 lation. The fluids are now sent to every part of  
 the body, and so much as is necessary for the nour-  
 ishment of the body is distributed. The remain-  
 der is brought back through the veins to the  
 lungs— where it is exposed to the atmospheric air  
 by respiration, undergoes a change in its proper-  
 ties & colour, becomes arterial blood, or fit for nutri-  
 tion and is again distributed over the system—

This change is effected by the oxygen of the air uniting with the carbon of the blood, forming carbonic acid, which is thrown out in expiration. This leaves the blood in a proper state of circulation - *g. Respiration.* It is supposed that animal heat is derived from respiration as the blood, by experiment, has been found to be two degrees warmer in the arteries than veins or after it has been exposed to the atmosphere air from the oxygen it retains from the air -

But this theory admits of much speculation. It is well known that animal bodies possess the power of generating heat, since that they preserve the same temperature - While inorganic matter always preserves the temperature of the surrounding substances -

*Part 5. 2<sup>d</sup> Formation.* This may be considered as the origin of the organic functions - The albumen altered in its qualities by a series of decompositions, unimpaired and rendered similar to the substance of the being it is to nourish, is applied to the organs of the whole body it is to repair, from the blood

The instrument of this formation are the extreme ves-  
sels or capillary systems - There are undoubtedly  
smaller vessels concerned in the function of nutri-  
tion than we can discover, by which the functions  
of the body are carried on - We find these vessels  
of nutrition in the stomach, and absorbents

The heart and arteries have been considered as  
mere mechanical tubes - But as one artery may  
become more distended than another, this doctrine  
must be incorrect - The blood however is carried thro  
these vessels to the capillaries, where it is distrib-  
uted thro every part of the body - The blood moves  
in different directions in these vessels, and does  
not always bear the same proportion to the ar-  
teries - The fullness of the heart and arteries has  
some influence upon the capillaries - But they are  
much more dependant upon the capillaries for their  
fullness - The capillaries have a peculiar oppor-  
tunity by which they admit such parts of the blood  
as suits them and will become nourishing to the body  
part it is to nourish - The same matter is not  
taken up by every part - each part selects such parts

of the blood as is most congenial to its nature,  
Thus the fibrin is absorbed in form of lumps & here  
we see these pulsating vessels have a peculiar ap-  
pearance, or irritability. As for example in the  
two passages in the pancreas - The epiglottis  
closes when any thing is except air, is coming in  
contact with it - The fibrin of the blood being the  
same with the fibres, the fluids must undergo some  
change - Consequently secretion and reabsorption must  
take place in these vessels - This change which  
is effected is analogous to digestion - 1<sup>st</sup> By exha-  
lation 2. secretion then an alkaline, 3. reabsorption  
which aids in taking away those things which  
are redundant - The absorbents take up the secon-  
dary fluids. - 3<sup>rd</sup> Excretions a. by peristal-  
tic motion b. Lymphatic absorption c. Pers-  
piration d. Renary excretions - 1 Those which  
have one passage 2. Those which have more passages  
than one - 1 The elementary canal, here the  
matter is not discharged alone; but there is mix-  
ture with it bile, mucus &c. which occasions the thick-  
ness of the feculent matter in discharge &c.

The blood is a heterogeneous substance - The  
old matter is excreted - These excretions are carried  
to those parts which have external openings -

This process is performed by the extreme vessels  
as are the secretions - These excretory organs  
are capable of performing each of their offices, as  
we may observe in the urinary excretion since  
skin - For instance in case of strangury, the  
excretion is carried on by the excretories of the  
skin, and vice versa -

Lect. 6<sup>th</sup> This lecture was wholly devoted  
to the books which are required and recom-  
mended by the Massachusetts Medical Soci-  
ety for the student to read & study -  
which may be seen in the 2<sup>nd</sup> no. of the  
<sup>Amherst</sup> medical journal -

Lect. 7<sup>th</sup> also upon the same subject -

Lect. 8<sup>th</sup> 11. Animal functions - First class  
second order - Animal functions occur only in  
animals, but all of them are not to be found in every  
species of animals - Genera 1<sup>st</sup> Sensation - This is pecu-  
liar to all animals, as a small, or slight c. hearing  
& feeling & feeling, including touch - These constitute

The external senses. 2.<sup>d</sup> Exercise of intellectual powers  
as of a. Perception, b. Consciousness c. Attention  
d. Memory e. Reflection f. Imagination, g. Judge-  
ment, h. Volition, &c. These are not all peculiar  
to every species— 3.<sup>d</sup> Exercise of bodily organs under  
the obvious control of the mind— a. Locomotion b. Voice.

1.<sup>st</sup> Sensation. The external functions are  
called into action by the influence of external  
objects acting upon the senses— Sensibility varies  
in its acuteness, or differs in different organs,—  
one is more sensible to external objects than another  
In different persons also we may observe a difference.

If we notice the eye or the ear— we perceive the  
eye has certain organs peculiar to itself by which  
as the organ, by which it receives the rays of  
light, and so arranged them as to occasion seeing.

The ear also so modifies the air as to produce  
sound or hearing— There is one kind of sensation  
however, viz. that of feeling, which every part of  
the body is capable of enjoying, in a certain degree—  
Some parts of the body possess a much larger  
of this sense than others— The fingers possess this  
function to the greatest perfection— Hence we always



make use of them in the exercise of this function —  
 Observe the contrast in the ends of the fingers and  
 the nose — It is not by an organ alone that we are able  
 to discriminate, least accurately, but by a certain  
 peculiar organization — Thus it is by a peculiar  
 formation of the ear, which is seen in Anatomy,  
 that it receives the air, and causes hearing —

2.<sup>o</sup> Of intellectual powers — see, which have  
 been mentioned —

3.<sup>o</sup> The exercise of bodily organs under the  
 obvious control of the mind — Why or Locomotion  
 and voice — The locomotion the part or the  
 muscles in constituting that part possess the power  
 or of moving in themselves — Although they are  
 under the immediate influence of the mind, which  
 operates upon them through the intervention of the  
 nerves — The voice is performed by the organs of the  
 mouth, so constructed as to produce the air —

Comparison of the animal and organic, organs &  
 functions — The animal functions are double and  
 organic single. Consequently the organs that perform  
 these <sup>double</sup> functions are double, and divided by a median  
 line on which depends the symmetry and economy

of the body— These two organs generally correspond to each other— As we may observe in the eyes, ears, the heart, &c. &c. But we find exceptions to this rule, as there are many which do not perfectly agree in each respect— we frequently observe a difference in the eyes of the same person, the strength of one being greater than the other, causes the weaker, one to turn aside and becomes squint; while the strong eye looks straight forward at an object, the other is turned in towards the nose to avoid the rays of light which fall direct upon it.— We may likewise observe a difference in the ears of the same person, for which reason he is not able to distinguish nice sounds in music— while one whose ears harmonize and who is said to have an ear for music, will discriminate the least discord in any note— the other is not able to distinguish one sound from another—

The sides of the face also are not always perfectly similar, owing principally to the sides of the nose not always corresponding, being sometimes more

attracted to one side than the other - The limbs also do not always correspond as to the size and strength, an instance of which was mentioned, in which the small clock did not suit both legs

This difference has been attributed to the exercise of the right leg more than the left - (this being the one usually the largest) - This cannot be correct as they generally correspond and harmonize in all their actions & movements

The brain is thought sometimes, not to be perfectly balanced - In consequence of which some few men meet with those who have no decision of character, but are always vacillating and undecided in most all pursuits or objects - This is attributed to the unequal ~~and~~ position of the brain, in consequence of which the person is not able to bring both sides to balance at the same time -

The animal functions exist in two states - sleep and waking - The organic functions do not sleep but are always ready <sup>to</sup> perform their functions -

The excitability in the animal functions is soon exhausted, therefore requires sleep or rest in

order to accumulate a sufficient quantity  
to carry on its functions properly. consequently  
the Animal functions are not always ready for  
action - Sleep is perfect and total or imper-  
fect and partial - Perfect when all the organs  
are at rest - Imperfect and partial when part  
of them are asleep - We many times see  
persons perform locomotive functions, while  
most of their organs are asleep, & a person may rise  
from his bed & see himself go to his usual business  
and not be conscious of it upon waking - This  
may be termed partial sleep - The animal  
functions are subject to education and under  
the influence of habit - It is a great measure  
from education, that the ears of a person who has  
made that his profession, is able to distinguish  
the least jar or discord in music, while a person  
who has attended but little will not be able to  
distinguish. It is by the influence of habit also  
the painter is able to see on a piece of painting  
very readily, while a nother would not - Very the  
small the apothecary will distinguish his name

icium which is from education and habit - so also with the sense of touch - also from the loss of one the others become more sensible - which arises from the greater use we make of the remaining senses - The organic functions differ in these respects - They are single while the animal are double.

In the organic functions there is a dependence on different organs to perform a certain function - This we may observe in the reception of food and its digestion - The aliment is received into the mouth where it is masticated - is then carried through the esophagus into the stomach, where it is digested - The chyle is separated taken up by the absorbents, carried to the thoracic duct, through which it passes and is emptied into the blood-vessels, by which it is distributed to the nourishment of every part of the body - Therefore we see that aliment must continually be supplied or these functions will cease - The animal functions are not thus dependent on each other - The O. G. are liable to sympathy - when one function, for instance, the stomach is affected, the others all sympathize -

These functions are not under the control of the mind as are the animal. Notwithstanding the organic functions are not subject to sleep & somnolence, they are more or less influenced by the sleep of the animal. They then go on more deliberately, and are performed more perfectly. Some of them are constant the others occasional. The organic may be said not to be influenced by habit, but this is not invariably the case with all of them. For we find the great excretions may be regulated by habit in such a manner, as that we shall have a discharge at the same hour of each day. — By the animal functions external relations are ~~and~~ maintained and operations of the mind performed. By organic functions foreign matter is converted into substance suited to the nourishment of the body — and the internal economy of the system is maintained.

The greater number of diseases ~~the~~ arise in consequence of some derangement of some of the organic functions — on them depends the maintenance of life and health. The system not independent of each other.

The mind takes cognizance of some of the organic system and controls some operations necessary to it. From the cognizance it takes results <sup>the</sup> appetites consist in wants or desires arising from certain states of the organic system - though the mind does not distinguish what constitutes these states it has desires produced by them - these appetites essential to prompt conduct, and the source of very many of our actions - The mind also has something similar in this respect - desire of knowledge, of action and of affection - The mind controls the evacuations except in extreme cases - The mind and body influence each other by sympathy; this to be noticed hereafter.

Rect. 4<sup>th</sup> second class. Three orders - those of male, those of female, and those common to the two - 1. Those of the male are or secretion of seminal fluids <sup>to erect & keep</sup> 2. Those of the female are a. menstruation b. conception & gestation c. parturition d. Lactation 3. That common to both, Copulation - The 1. & 2. genera of these functions may be considered as analogous to organic functions - not being under the in-

fluence of the mind. — The 3<sup>rd</sup> may be said to be  
under the influence of the will, for they are per-  
formed by the consent of the mind. — These  
functions also sympathize with the mind or  
the mind with them — for by peculiar thought  
there is a much greater secretion of seminal  
fluid, as well as ejection — There is also a sympa-  
thy between these organs and the whole system —  
which we observe at the age of puberty, when  
a universal change is effected in the system —  
The voice is altered in the male, but certain  
evacuations are established in the female — If these  
evacuations are interrupted the system  
sympathizes — In the male so great is the sym-  
pathy between these organs and the system that  
the voice does not change if the testes are  
removed — Hence there are people that suffer  
castration in order to preserve their voices  
and become great singers — During conception there  
is a very remarkable sympathy in the system — Most  
observable in the mammae — After delivery there  
is a secretion of milk established which continues  
while the mother wants to nurse the child —



Relation of functions. — Two kinds of relations — First, mechanical, depending on the connection of organs, on their motions such as are obvious directly or indirectly, and on the transmission of matter — The performance of one of these functions effects the other, as one part operates on another — Some pretend that the relation between the stomach and the brain is owing to a nervous effusion arising from the stomach to the brain — but we believe this is not correct

Second — Vital, maintained by vital power, and not depending on any known motion or transmission of matter, — There is two kinds of vital relations — a — where the <sup>connection</sup> relation between the parts related is obvious, and the influence is always maintained in a sound state of the organs — Maintained by sensibility, and the power of transmitting motion —

This relation is very obvious in between the brain and the retina, when an image is painted on the retina, an impression is carried to, made upon the brain — when any of our senses are called into action, an impression is made upon the brain

How is this communication effected? This must be correct on by the means of some vital principle and not by the transmission of any matter from the organ to the brain.

The relation of distant parts, or their dependence upon each other, is maintained by sensibility, or the power of transmitting motion - &c. Where the relation is not obvious and the influence less constant and uniform, the relation is maintained by sympathy - The sympathy of the whole system with parts is most obvious where the difficulty is the greatest; and this whether the difficulty arise from the magnitude of the operation to be performed, or from inability to perform it with ease - If one part of the system is diseased, the whole will sympathize with that part; or a part will sympathize with the whole - This is not the case with every part of the body at the same time - There are several different systems that compose the body, as the nervous, absorbent, circulating &c. We are very apt to think the whole body diseased when but one of these systems are affected -

When parts are diseased the system sympathizes  
 but does not when in health — Persons differ  
 with regard to sympathy — people of feeble habits  
 sympathize much more readily than those of a  
 robust healthy constitution — The nervous system  
 of the feeble being more readily affected by any local  
 affection — This differs from ability —

Of Force or strength, Organs are not at all times equal-  
 ly prepared for performing their functions — At  
 sometimes they are more, at others less readily ex-  
 cited — In most healthy states, the muscles maintain  
 a certain degree of contraction, the capillaries a cer-  
 tain degree of fullness, and the organs a certain  
 degree of torpor — In these cases the body  
 is supposed to be in tone, and is compared to  
 a musical chord, when sufficiently tense to  
 produce by vibration a true appropriate tone —

The varying states of the organs arise imme-  
 diately from different degrees and states of power,  
 This may be measured by its effects, Two bodies  
 may be in health, & yet differ much in their  
 strength therefore it is said that all the powers  
 of the body increase and decrease together —

This cannot be determined by the state of the pulse - but goes to prove that this is not the case, as it may be increased in one part and not in the whole - These effects to be regarded in three respects viz. - as to rapidity, perfection, and duration - The deficiency of strength, or debility actually gives rise to many embarrassments in the living body, but has been charged with more evils than belong to it -

When the muscles are in a proper state of contraction and ready to move whenever called by the will into action they may be said to be in a proper tone - When the animal body has a proper degree of fullness it is in tone - when fullness ~~is~~ <sup>with</sup> softness, there is a want of tone -

The varying state of the organs arises immediately from different degrees & states of power -

We may judge of the strength of the person by the strength of the digestive powers - Thus one person will digest food which another cannot - his stomach is then in tone - These powers may again be known by the length of time different persons can work upon the same food

Thus one may labour 10 another 1<sup>st</sup> another 15 —  
The latter therefore may be said to have the  
greatest strength, and to be in tone —

But a system not able to perform these functions  
to that length of time, is feeble which is an evi-  
dence of weakness and debility — which has been  
the cause of many diseases — The functions may  
be in a sound state although weak & debilitated  
— and not able to perform to the extent of  
another in perfect tone — Debility may be con-  
sidered as direct & indirect — When it arises  
from want of food it may be called direct  
when from excess or intemperance, indirect —

Sect. 10.<sup>th</sup> V. Varieties among the hu-  
man Species. — These may be ranked under  
four heads. — 1. sex. 11. Age. 111. Race. VI. consti-  
tution or temperament. — 1. sex. The differences  
in structure and functions — these are great & gene-  
rally well known — Properties alike in kind but dif-  
ferent in degree; as in motility, irritability, sensibility,  
& sympathy — Females in general possess more  
sensibility than males — there is likewise a great  
or medium, as sympathetic feelings — The labours

of one part more readily affects the whole system, as in the organs of gestation —

11. Page. — Of infancy and childhood, youth, manhood, old age. Duration of life — 111. There is a difference in the races of men although of the same species — Hereditary differences. The offspring of two will resemble each other although not perfectly —

The offspring of the horse and the ass partake of the nature & resembles them both — No greater is the tendency of children to resemble their parents than they learn in hereditary diseases from their parents as the gout, scrophulous &c. which are hereditary diseases — Nations also preserve a difference such as to show unequal peculiarities as to race — This is a subject of natural history — The source not easily discerned, there is a gradation of men — European, Asiatic and African in which there are differences strongly marked —

This difference may be observed in shape of the head, the African forming a middle place between the European and the monkey — There being about the same difference between the European &

African, as the African & monkey in the facial line or slant of the forehead - The same difference exists also in the forearm, the African's being longer than the European, in the same proportion that the monkey is than the African in proportion to the body - There are other peculiarities also, as in the shape of the foot, &c.

They differ also in mental endowments, the African being much inferior in intellect to the European - This by some has been attributed to education - It is not all owing to education, for as to their powers of mind, or capacity for receiving an education, they fall far below the European as a people -

No Constitution or Temperament, - There is great diversity among the productions of nature, in the vegetable as well as the animal kingdom - Even in the grass we do not find two species alike - So also among all the nations & races of man upon the earth we do not find any two that in every respect resemble each other - The resemblance is more or less perfect - Some

resembling each other much more than  
others - There is a general resemblance in  
in nations, or some peculiar marks by which  
we determine a person to be of one nation -  
They are therefore thrown into groups -  
As Spaniards, Germans &c. - Their general  
peculiarities depicted by caricatures -  
The ancient divided them into temperaments  
which they called Sanguine, Choleric, mel-  
ancholic & phlegmatic, distinguished by the  
different fluids - The names founded in theory  
the distinction in observation - When a  
physician is called to a patient it is nec-  
essary that he should determine the tem-  
perament of the & properties of the body in  
order to fix upon a proper quantity & quality  
of medicines - The difference is most obvious  
in the organs and functions, if these are per-  
fect the of the system will be in a proper  
state - If the powers exhibit disorder, we  
find the organs also deranged - The external  
marks however do not all correspond -



1<sup>st</sup> The sanguine temperament is marked with  
 succulent appearance in the countenance, the hair  
 red, chest full or large, & the abdomen  
 a certain rotundity of form as in females, pulse  
 full & frequent, large share of irritability and  
 sensibility - Not permanent; but easily changed

Medicine operates upon them more readily, &  
 symptoms appear favourable - when they as read-  
 ily relapse again into the same state - 2<sup>d</sup> Chol-  
 eric differs in having the hair darker, less  
 softness in the skin - The abdomen as well as  
 chest large about the loins, somewhat irritable  
 but not so much so as the sanguine - bile  
 stronger and affects the whole body as in  
 putrefaction, easily angry. - 3<sup>d</sup> The mel-  
 ancholic differs from both the former, their

complexion is darker there is a sharpness  
 of features & dryness of skin, eye brows large  
 & bushy & sometimes meet, the body smaller  
 possessed of but little irritability & sensibi-  
 lity, passions not easily excited, but when  
 raised they are more permanent & lasting -

They act without any intermediate agent, or  
there is no intermediate agent between the object  
& the thing effect produced, the power being sus-  
pended. — Others powers as lightning effect the  
vital affinity & suspends life. — Persons who  
die in this manner have their limbs flaccid,  
the muscles do not contract, & the blood rem-  
ains fluid. — By this kind of death animals  
which are hunted, die in the chase, their flesh  
also is more tender, & sooner turns rancid to  
putrefaction, than the flesh of those which die  
the common way, in consequence of the powers of  
life being at once destroyed. — How shall we  
know their effects upon the body? shall we ex-  
amine its their weight, colour, or chymical effects?  
By neither of these can we distinguish them pre-  
cisely, their effects are only known by the best of  
examination, whether it be morbid or nutritious.

Substances applied, operate either upon the  
irritability or sensibility. — Stimulants act  
on the irritability, their effects always local  
but those of some more readily propagated by  
sympathy than others. — They act on the whole of

form in succession indirectly or on the whole system,  
 The immediate effects are also upon the system  
 are always local - sympathy either general or  
 local - The effects propagated by mechanical, as  
 well as by vital relations, - The agents acting on  
 the sensibility - These are various - External things  
 acting upon the organs, change the functions of cer-  
 tain organs - These functions are not changed by  
 by agents acting upon the vital parts, or irritability

VII. Death, or the termination of life is not al-  
 ways in the same mode - In order to understand  
 death, it is necessary to know what is necessary  
 to the maintenance of life - In order for this two  
 conditions are necessary - One that the body possess  
 certain principles of vitality - This alone indeed  
 occasions us to consider eggs, seeds, & some dormant  
 animals as possessed of vital officine. Certain  
 animals & insects may lay dormant for years &  
 then be brought to life by moisture & other agents  
 On these life may be said to be dormant - The  
 other condition necessary to the maintenance of the  
 powers of life, is that there be certain vital func-  
 ions going on viz - those of circulation, respiration &

These may cease for a time, & still life be restored, as in case of a person apparently drowned. But when these functions cease entirely, life has departed as far as common observations go. But in this case the body retains some of its vital properties, those especially of organic life. The irritability continues for a time, much more the vital affinity. In order to support life it is necessary that the capillary vessels should be full & distended with red blood. In order for this, that respiration should be kept up. If this cease, the heart will send forth black blood to the extremities. The capillaries will cease to be distended & death will ensue. Death may be distinguished by expiration & absolute rest. Expiration may arise from failure 1.<sup>o</sup> of the respiratory organs. 2.<sup>o</sup> In the encephalon 3.<sup>o</sup> In the heart. In what way does life depend on the brain, not from the transmission of any matter. Death occurs in consequence of either one cause, which destroy the properties of, making this may be partial or general. An effect may be produced by a foreign substance,

sufficient to destroy life in the part to which  
 it is applied, & by sympathy in the whole system  
 absolute death does not take place until decompo-  
 sition has commenced in the body. When life is des-  
 troyed by disease death acts gradually upon the body,  
 destroying the organs in succession, untill it reaches  
 the heart; then the body dies. On death from common  
 diseases, the mucous collents in the air passages  
 then being not sufficient to retain or strength  
 to throw it off, it obstructs the breath, consequ-  
 ently when is not sufficient to change the blood  
 the heart weakens in its force - shows black blood  
 to the capillaries, & the body dies -

Lect. 12<sup>th</sup> Pathology. - This branch of medi-  
 cine science relates to the doctrine of diseases -  
 What do we understand by disease? It is known only  
 by contrast with health - we must therefore define  
 health before we can understand disease. - What is  
 health? it has its limits - It is when we are free  
 from pain & suffering; the composition & structure  
 of the body is perfect; the spirits &c. must be  
 felt at its usual time, & all the organs & functions

must be in tone — Disease is a deviation from  
all these — The living tissue's disease is indicated by  
symptoms — The the dead body its vestiges are  
seen in change of organization, in unusual distribu-  
tion of the fluids, in unusual disposition of them —  
in change of colour in the parts, & in the presence  
of substances not usually found in the body —  
Difference between disease & disorder — The disease  
a change is effected in the structure of the part —  
The disorder the organ may be perfect & its function  
disordered in consequence of a disease of some other  
part — The heart for example may be sound, but  
in consequence of a disease of the aorta of the  
artery, the its functions will be disordered, as  
may be perceived by the pulse — During life, then  
we recognize disease by symptoms — Distinctions  
in respect to these — Symptoms Obs. such  
as the physician may ascertain from his own  
observation, 1<sup>st</sup> such as he can learn only from the  
report of the patient — 1. Under his division we  
have 1. such as are manifested in the patient & are  
ascertained by inspection & examination; 2. such  
to be perceived

no one manifested in the evacuations, — 1. Those of  
figure, colour, motion, position, temperature, dryness  
& moisture of the surface, which can be examined  
pulse, respiration, voice, cough, sneezing, gaping,  
hicoughs; & those ascertained by touch, pressure, per-  
cussion — 1.<sup>st</sup> Figure, every thing that goes to make  
up his expression — As fullness & tension of the face or  
emptiness also, may be observed &c. 2.<sup>nd</sup> Position, likewise  
is very important to be observed by the physician if  
for instance you find your patient walking, you  
may make up your mind that either he is negatively  
enfeebled, — but if you find him bent forward with  
both hands upon his sides, you may conclude he has  
the cholick, or some other violent pain — The strength  
of the patient may also be ascertained by the position.  
Much however is owing to the passions, whether they  
have been excited or not. 3.<sup>rd</sup> Colour, also of the body  
may be observed — as the cholick, & yellowness of the skin  
& tunica conjunctiva, of the eyes, in tetanus, sallowness  
countenance, laid appearance under the eye, paleness  
of the lips. 4.<sup>th</sup> Motion owing to disease the reading  
no motion in the body is very much impaired, —  
It may also become sense & insensible.

5. <sup>th</sup> Temperature must be noticed. That of the  
loose extremities & trunk & the time of they  
remain in a high or low temperature. The  
report of the patient & your own observations,  
do not always agree. The patient may complain  
of cold, when by the thermometer his temperature  
is much above the natural heat. 6. <sup>th</sup> Dryness &  
moisture of the skin &c. & certain eruptions may  
be observed, as may be seen by the temperature  
to which he belongs. The degree of the disease  
may be determined by the degree of moisture or dryness  
upon the surface of the body, the appearance  
of the eyes, nose, & mouth; but principally from  
that of the tongue. We find the tongue usually moist  
& that from its own secretion. By a change in  
the secretions appearance of this organ, or in its se-  
cretions are indicated all the different changes which  
appear in the various sections in the circulation.

Thus by the coating upon the upper surface of the tongue,  
we discover the different stages of the disease, & its  
favourable or unfavourable crisis. This coating  
is deposited & removed by degrees; first the edges  
then the middle, afterward the root of the tongue.



Next we have to consider the circulation, which is of the greatest importance. Much indeed may be learned from the state of the pulse. — The first is the usual place to examine it although we sometimes examine it in other parts, the radial artery sometimes divides & passes on the upper side of the wrist, in which case we find but a very small pulse in the usual place. The frequency of the pulse depends much on the age, sex & disease of the patient. The natural standard for a man in health, is 73 beats in a minute. In adults whenever the pulse rises to 80, it indicates disease; somewhat serious at 100 & if they continue at or about that in chronic diseases it is very serious — In some people it sinks in disease & rises again as health returns — In some instances the natural standard is as slow as 50 or 60 — In females it is naturally more frequent than in males, & in children still more so — As in them the pulse may rise to 120 without any disease but I even higher; but if it that number it indicates some disease — The frequency of the pulse is influenced by the kind of disease — In acute it may rise to 120 with impunity, serious at 140 — Influenced by the same

or local situation of the disease. For instance if it be in the heart or brain & the pulse diminish in frequency, it indicates danger. But in disease in general, when the pulse diminish, it is an indication of decreased disease.

Sept. 13<sup>th</sup> We come now to speak of the fullness which is opposite to smallness. An unusual fullness is not a sure proof of an unusual quantity of blood. It may rather be attributed to a unequal distribution. There may be great fullness of the whole circulation, in the arteries, veins & capillaries & not disport greater quantity than usual, being unequal in its distribution. Neither is smallness a sure indication of deficiency of blood - as the pulse may be small & still a plethoric habit prevail. The pulse will rise after bleeding in many complaint diseases, but in hectic complaints there may be a real want of blood. Next is hardness which is opposite to softness. Hardness is a common indication of a puffy coat; & that of an inflammatory complaint. This puffy coat appears in consequence of the coagulation of

The blood, on the separation of the crassamentum from the serum. In this case the separation is longer in taking place & therefore gives time for a more perfect deposition of the fibrin, consequently renders the buff more conspicuous. This is influenced by various other causes, as the state of the coats, the quickness with which the blood is drawn, & the size & shape of the vessel into which it is received. A hard pulse has the feel of a stick rising under the finger - A small pulse has the same feeling which is called a wiry pulse - As in Pleuris Pulmonalis, inflammation &c

Softness is opposed to hardness & is in consequence of a peculiar softness of the coats of the blood vessels. It is characteristic of a particular inflammation of the Lungs pleura &c. Strength & weakness. - If the heart is excited & throws the blood with force it may be said to be strong - A weak pulse is characterized by a feeble & languid motion of the heart. - A strong pulse is not a sure indication of a strong constitution, as we frequently find feeble persons with strong pulse & vice versa. - Weak pulse is not always found in the most feeble people. Although this is unusual the cause yet it is not invariable.

Notwithstanding the pulse is usually regular,  
it occasionally intermits, which should be ob-  
served, although it is not of the greatest impor-  
-tance — It may be observed that it is common  
for the pulse of some aged people to intermit  
while in health & to become regular in disease —  
It may arise from some organic affection of the  
heart or arteries, when it does arise from disease  
it is of some importance — If it arise from habit  
or from old age — it is a mark of disease —  
The pulse being sometimes full, & then succeeded  
by a very small one, constitutes an irregular  
pulse — Upon this subject Bichat & Soliman  
may be read, who pretend to be able to  
be able to foretell the termination or rise of a  
disease by the pulse — The pulse varies according  
as the organs of particular viscera are affected  
of the abdomen or thorax. — Different men too  
make various discriminations, as Dr Rush says  
but they appear somewhat fanciful — The  
pulse differs in the different viscera above  
& below the diaphragm — In pulmonary fever

has also been distinguished by them, by which they would prognostice in the favourable or unfavourable crisis of the disease, & at the commencement disease will follow, as the hemorrhage from the nose calamities &c. The frequency of the pulse may be always be distinguished with ease, but we should always be attended too. Great advantages are also to be derived from a frequent counting these pulses. There is a difference between a quick & a frequent pulse. In a quick pulse the stroke is performed instantaneous & a longer diastole. In a frequent pulse they follow each other in quick succession. As the heart & other of aged people sometimes become a dryed & accession an essential difference in the appearance of the pulse it is necessary they should be particularly examined. We find sometimes better to be discerned by the radial artery, & repeating just before it comes to the wrist, & going above or under as before the wrist. Next we come to speak of the symptoms arising from diseases affecting the organs of respiration. Respiration is performed by the arteries of the thorax, by the ribs &

muscles, when these are injured, respiration is  
affected — likewise by apoplexy & suppurated  
tubercles, as in diseases of the mouth, nose &c.

Part 14<sup>th</sup> The causes affecting respira-  
tion should <sup>require</sup> be particularly attended to. Difficult  
respiration arises from various causes — It will be  
disturbed in inflammation of the Lungs pleura &  
other vessels of the thorax — This is also the  
case with the abdomen & its perities, likewise the  
diaphragm — In order to determine whether the  
disease is above or below the diaphragm, attention  
should be had to particular appearances — If  
below it may be ascertained by pressing the hand  
upon the <sup>to</sup> sternum, provided he depends upon the  
dilatation of the thorax for respiration, he will  
be disturbed & uneasy — And on the other hand if the  
disease be in the thorax & he depends upon the diaph-  
ragm & abdomen for respiration — pressure be made  
upon the abdomen he will feel pain on inspiration,  
When both the chest & abdomen are diseased re-  
piration must depend upon the voluntary muscles

In this case the air passages become diseased, the  
trachea narrowed — See therefore Livers his Lungs, &c.

his chest or whole is motion, then expands his whole chest & abdomen. both voluntary & involuntary muscles to get his breath - When there is an accumulation of mucus in the trachea, there is a peculiar noise in respiration - Likewise if the trachea be soft & flabby if smooth & dry, a noise like rattling is heard

There is sometimes also an inflammation in the mucous membrane of the air passages which occasions great difficulty of breathing - All these symptoms may occur & still the difficulty be in the thorax, as in Hydrothorax. In hydrothorax the water necessarily presses the lungs, & whatever compresses the lungs occasions great difficulty in respiration & a sense of suffocation. Respiration is often affected from sympathy, generally, for instance when a remote part is diseased, respiration is disturbed, arising from sympathy, which operates through the medium of the nerves - Affections of the ~~lower~~ brain also affect the breathing, in proportion as the medulla oblongata is compressed -

Voice. - The strength of the voice depends, most upon the state of respiration, the tongue, nose &c. Also when the system is affected, whether idiopathically,

or, <sup>some</sup> sympathetically. A strong or a weak voice  
does not depend always upon the state of the lungs.

A person may have a low & weak voice & strong  
lungs & vice versa. Yet the voice is changed &  
becomes weak in many diseases as has been observed.

Cough. What makes a cough? When any foreign  
substance is lodged in the trachea, larynx or any  
of the air passages, cough is produced from irri-  
tation of the membrane, which removes the sub-  
stance from the part. When a cough arises from  
irritation, it does not always prove that there is  
any foreign substance lodged in the air passages.  
As it may arise from sympathy with some remote  
part. In diseases of the contents of the abdomen  
as of the stomach &c it may arise from sympathy  
also in diseases of the uterus in females. Therefore  
when you meet with a cough first ascertain its  
cause & appearance. When there is no matter  
expectorated, but a dry cough, it is not of the  
most dangerous nature; but if a large mucous  
is discharged it requires some attention.

This kind of expectoration is generally hard  
pungent, hard & tough, not easily movable in water.



When we find a purulent, opaque mucous thrown out of a greenish yellow colour, there is some deep seated disease of a very serious nature. When the patient is afflicted with a dry hack, we may expect some formidable disease is pending. The largest & loudest cough is not always the most serious. We frequently meet with a large & broad chest, in such persons, when coughing is excited, they make a noise as if the heavens & earth were about to meet, & still the cough be very harmless. While on the other hand, if the chest be small & contracted, & very small cough may be very troublesome, & the most serious in its consequences. Sneezing is generally occasioned by a fullness of the head, & a distention on the Schneiderian membrane, which is communicated to the diaphragm through the medium of the nerves. The operation of sneezing has a tendency to clear the head, & brighten the ideas. Yawning & Gawning - promotes circulation. Hiccough, when arising in consequence of disease, is a very unfavourable symptom, therefore requires some attention. Touch, Percussion & Compression. It is advisable to examine people while in health & observe

The difference which is usually apparent in different persons - In consequence of a peculiar locality, we feel things in one person & not in another - It is by the sense of feeling that we ascertain the state of disease, & discover many of the abdomen, as ascites, by placing the hand upon one side & tapping with the other -

By percussion we ascertain many important diseases of the thorax. If we strike the thorax when in health with the ends of the fingers, it will give us a hollow sound, like that of an empty cask or which contains not any thing except air - In case of Hydrothorax, we have a dead sound, as of a cask filled with water - If we strike over the spot of the heart, we have a sound as if the thorax was filled with flesh -

Sept. 15<sup>th</sup> 2<sup>d</sup> Evacuations. 1<sup>st</sup> Those common in health & disease. 2<sup>d</sup> Those peculiar to disease. The evacuations in disease are not all the same as in health, as we have some which we do not have in health. As the unhealthy evacuations from scrophulous & ulcerated sores - From the Nostrils in Catarrhs &c. 1<sup>o</sup> From the Skin, Lungs, Mouth, & many Spitting

Histories, testes &c. The appearance & variations  
 of these evacuations must be particularly attended  
 too - 1<sup>st</sup> Those of the skin. - In health there is  
 always an insensible perspiration from the skin, &  
 upon the continuance of, this depends the health of  
 of the patient - This keeps the skin soft & supple,  
 but it varies in people very much according to his  
 different temperaments - When in health the  
 skin is moist & supple when diseas'd the perspira-  
 tion varies in quantity & quality, & any change  
 in this evacuation is an evidence of some alteration  
 in the disease - We must observe whether the quantity  
 be increased, & whether its quality be the same as in  
 health - When it is increased or diminished - how long  
 it continues to vary - Observe the quality, whether it  
 be adhaerent - & whether there be an increase or di-  
 minished heat - Its variations in sleep & waking,

2<sup>d</sup> From the lungs, whether either be increased  
 or diminished, but this cannot be ascertained with  
 accuracy, without some difficulty - 3<sup>d</sup> Those from  
 the mouth, Observe whether the saliva be <sup>changed</sup> increased  
 in quality or quantity - 4<sup>th</sup> From the kidneys, more  
 is to be observed with regard to the urine than of

rather of the former, except the skin, & perhaps more  
important than even that. We cannot fix upon  
the precise quantity voided at a time, but is gene-  
rally from 10 to 15, but varies in different persons  
& diseases & in the same disease - Urine in health  
deposits a laberitious, mucous like sediment -

In disease the quantity may be increased, like-  
wise changed in its quality, whether of a local or  
general nature. When we find a large laber-  
itious red sediment of uric acid it is an unfa-  
vourable symptom in acute diseases, but not so in  
in chronic complaints. When there is a larger  
quantity than usual, of urine voided & discharged  
the saline substances are so much diluted that  
it passes off colourless - We frequently find  
two acids, the phosphoric & uric - the latter  
being heavier sinks to the bottom while the  
former is deposited on the sides of the vessel.

The various changes & appearances of the urine  
must daily be observed - 10<sup>th</sup> The Urine, -  
Great attention should be paid to the vari-  
ations - Ascertain what has been their usual  
quantity, & whether they are now suppressed, & whether

The true feces are evacuated, as they may be  
 a mucous & bilious discharge & nothing of the fecal  
 matter - The alvine evacuations should be uniform  
 & regular in their occurrence - A costive habit  
 or any retention of the feces, is very injurious to  
 the system, & deranges its functions, if they are ha-  
 bitual - Many persons will go several days  
 without a regular discharge, & then evacuate an  
 unusual quantity, which is very injurious -

The quality also should be observed, which  
 should be like of a brown or yellow colour -

Indigestible food & colouring matter change its  
 appearance, & sometimes occasion too great a secre-  
 tion from the mucous membrane by the irritation  
 of <sup>its products</sup> indigestible food, or its being in too great quantity -

Any substance which produces an irritation, neces-  
 sarily increases the secretion; for instance if a foreign  
 substance be lodged in the eye, it occasions a very  
 copious secretion from the membrane of that organ  
 followed by inflammation frequently - So likewise  
 with the mucous membrane of the nose & mouth -

Other foreign & indigestible substances, produce a great  
 secretion of bile from the superior parts, less from inferior

but if it be mucous more profuse — 3.<sup>d</sup> From the  
arteries. — This evacuation not important in the male  
but the periodical evacuations from the female must  
be had in view in all our attendance upon them —  
We must ascertain whether they have been regular  
in their occurrence, & whether the usual quantity  
has been voided, which, in health, is generally about  
4 $\frac{1}{2}$  ℥. If they very exceed them with those in  
health. — The menstrual discharge does not  
coagulate like common blood — 2.<sup>d</sup> Those peculiar  
to diseases — First those from the mucous membranes.  
The mucous membrane in a healthy state does not  
secrete a sufficient quantity to be discharged.  
When any irritating substance is applied to  
the mucous ~~membranes~~ glands it occasions an  
increased secretion — & when this is increased  
without any venial matter being applied, it  
indicates a debilitated state of the system —  
We must observe whether it be transparent or opaque,  
if the mucous be transparent & adhesive it is  
considered healthy, but if opaque & purulent easily  
mixable in water &c, it is unhealthy — Next  
that from the blood vessels — These when the

occur in disease or sometimes salutary & form a  
crisis to the disease — 3.<sup>d</sup> Those from ulcerated  
surfaces, when these are profuse & healthy, they are  
favourable, — We must consider whether these dis-  
charges are natural or artificial, & whether they  
are morbid or healthy — In the former, they require  
particular attention — In the case of blistered  
surfaces if they dry immediately, indicates debility.

Sept. 10. L. 11. Under this head we find these  
symptoms which are learned from the patient.  
They are those which regard sensation, appetite,  
intellectual powers, moral affections, emotion, &  
passion, when awake & when asleep — 1.<sup>st</sup> Sensation  
We sometimes meet with difficulty in ascertaining  
the true state of the disease, from the patient,  
owing to his want of terms or language to express  
himself, or the sensation which he feels — by which  
much the physician may be deceived with regard  
to its nature. — We can judge many by their out-  
ward symptoms, when the patient may be ig-  
norant himself of his true state or his disease.  
(Thus when we see the patient express a lack)

of anxiety &c. are info an affection of the stom-  
ach. — If you wish to ascertain the nature of a  
disease without making a direct enquiry; must  
such as will enable you to judge of the real dis-  
ease, without coming direct upon the complaint.  
Pain is the most prominent symptom, by which  
we can judge of disease — Likewise the source  
of — arising from sympathy of one part with  
another, as the loins with the intestines cause  
in disease of the viscera. As in fluxor albus  
which is chiefly felt in the loins by sympathy  
of that part with the uterus — Difference between  
pain & aching — pain has a sensation of itching  
&c. — The sensation of cold & heat must also  
be attended to — although it is not a sure  
criterion by which to judge, because the sensa-  
tion conveyed to us & that expressed by the patient  
do not always correspond — We cannot always  
ascertain the degree of pain by the expression  
of the patient; for by judging in this way we  
should be led into error. As we should conclude  
one person affected with the most severe pain  
when in reality it was not so great as in our



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that made little or no complaint at all -  
Hence, we see the importance of being acquainted  
with usual disposition of the patient & their  
manner of expression & the great or little pain  
which in pain, in order to form correct conclu-  
sions. - The appetite also must be taken into  
consideration. - The appetite fails in disease &  
its return indicates returning health. The  
appetite sometimes returns sooner than it can  
be gratified, as the stomach remains too  
weak to digest the food that the appetite  
would crave. - We next mention the Intellectual  
faculties. They may be considered as they  
relate to the mind & body. They may be influ-  
enced by physical as well as moral causes,  
and thus every kind of energy & slight return,  
for instance effects arising from food received  
into the stomach of difficult digestion.  
It throws the mind into a state of dullness,  
apathy & melancholy, as well as on all the animal  
faculties. - An unusual constipation of the bowels  
sometimes very perceptibly operates on the mind -  
producing a greater degree of irritability & nervousness

Non usual — We should observe the appearance during sleep as well as while awake.  
In this state the animal powers are abated but not perfectly so. As the patient is mostly very restless & uneasy during sleep, which renders it imperfect. We must ascertain whether this disturbed sleep arises from causes existing in the mind or body. It sometimes arises from food <sup>of diff. nature</sup> being taken into the stomach just before going to sleep. Other restless appearances sometimes arise from organic affections of the heart, which is necessary to be determined. It is likewise important that we should be acquainted with the period & order of these symptoms occurring, as there is hence to explain the appearance of them. If we should wish to know what gives rise to these symptoms, we must in the next place consider the Causes of Disease. These should be sought for, although they are not always to be ascertained. If you should be asked the cause of a disease, when its true cause is not obvious, you may answer from a cold, this

may satisfy the enquirer, although it may not  
the Physician himself. — Remote Causes —

They are predisposing & exciting. Each cause has  
properties in respect to the living body more or less  
peculiar. The disease does not necessarily follow  
from the remote cause — The proximate cause  
necessarily & immediately produces the disease or  
is the disease itself — The exciting cause  
will produce different diseases in different  
individuals, according to the disease to which  
they have a predisposition. —

LECT. 1<sup>st</sup> Remote causes have been  
divided into Predisposing & exciting. The predis-  
posing are either inherited from the parents,  
or from a remote cause to which he has been  
exposed. — Exciting, A number of persons  
may be exposed to the same exciting cause &  
it produces different diseases, from their peculiar  
temperament: to different diseases — The exciting  
causes may be various — by removing the exciting  
cause does not necessarily remove the disease.  
Predisposing diseases arise in different seasons  
of the year, as the catarrh in winter &c

Proximate cause, The real state of the part  
or system under disease. As diseases some  
times consist in a succession of changes, so they  
sometimes have a succession of proximate  
causes which are allied to each other.  
In order to ascertain the proximate cause, we  
must first learn the remote cause, by enquiring  
of the patient, into his former & place of living  
his exposures to certain remote causes, by  
consideration of the changes induced as manifest  
ed by the symptoms, & by an examination of the  
effects to be noticed in the bodies of those who  
have died under disease. - The elements, necessary  
to determine the proximate cause not always  
sufficient - Rules for the interpretation of  
symptoms, so as to ascertain the seat & prox-  
imate cause. We must ascertain the first sym-  
ptoms by various enquiries, & in what part they  
first occurred, In what organ or subordinate  
organ they appear, whether they are from prime-  
ry or secondary causes or whether from some  
pathy &c. They may be divided into,

pathognomonic, diagnostic & prognostic  
 symptoms or signs. — I.<sup>st</sup> Pathognomonic  
 symptoms are those which are found in a dis-  
 ease & always occur in that particular disease  
 as spasmodic symptoms prove that tetanus  
 is present. II. Diagnostic symptoms these  
 are they by which we distinguish disease or  
 discriminate one disease from another,  
 III. Prognostic are symptoms by which  
 we are able to foretell the event of the disease  
 as, if we observe a profuse sweat on the up-  
 per parts & not on the lower, we predict a long  
 & dangerous disease. Termination of disease  
 they terminate in health, in other diseases, or  
 in death. There is a natural tendency in the  
 system to the recovery of health. A large  
 proportion of diseases end in health, which  
 is owing from the fact that a person is  
 diseased many times & dies but once.  
 Therefore when there is tendency to health, we  
 should not intercept the salutary efforts of nature  
 by administering any powerful medicine except

that of a mild nature) - Therefore it is necessary to know when to administer medicine & when not to, & the loss of susceptibility to causes of irritation after a certain period. The susceptibility to irritability <sup>being</sup> causes becomes impaired by constant use or habit. As by the constant use of opium, the eye becomes so habituated to its use that it is very much out of tone without it. Thus the infusion of tea & decoction of coffee, may at first be offensive; but the stomach, by the daily use of it, soon becomes deranged if it is not regularly received. Diseases differ among themselves in various respects. The most obvious & important of these differences to be noted, & that chiefly to express the terms in common use -

1. In respect to their origin they are 1<sup>st</sup> Hereditary. An hereditary disease is a disposition to some disease inherited from parents; but not the disease itself - as the scrophula, which may appear in youth. The gout, which manifests itself perhaps at

100 or 120. & organic affections of the heart which may not appear until 50. These may be brought into action sooner or later, as they are excited by some proximate cause.

2.<sup>o</sup> Congenital. These are diseases born with the child. 3.<sup>o</sup> Family. Are diseases which are introduced by the parents & occur in the whole family as is the case in Phisio Pulmonalis.

LECT. 18.<sup>th</sup> Adventitious diseases of which the causes appertain to certain ages. Diseases of this nature occur at different ages, as dentition in infants, hydrocephalus at the age of 12 or 13, chlorosis at puberty, organic diseases of the heart & at 50. 6. to either sex, diseases likewise differ in the sexes, we find one sex subject to one disease the other to another, as the female to chlorosis, catamenia, &c. particular seasons of the year influence the occurrence of particular diseases. In warm seasons those below the deep-brain as colera morbus, iliac passion,

disentery, diarrhoea & inflammations of various parts. And in the cold season, diseases that are peculiar to the parts above the diaphragm; a pleurisy, pneumonia, asthma, &c. & modes of life & habits. These should be carefully observed, by a strict observance of the regular diet, temperance, & exercise; constitutional diseases may be kept back & others prevented from occurring, & climates. These also promote the occurrence of diseases. In warm climates those peculiar to the warm season & seasons; those of cold climates, & diseases of the colder seasons. f. Effluvia from particular sources. G. Diseases arising from the decomposition of animal & vegetable matter; H. Diseases acting on whole communities; I. Idiosyncrasy or peculiarities of temperament; which is a peculiar habit, some have to particular diseases, as one person may be peculiarly disposed to dyspepsia, another to some other disease. And by exposure to cold or some other exciting cause the French disease



of his constitution is brought into action. Our  
object should be to cure the disease as soon as possible  
i. preceding diseases, these bring on others, or render  
the system more liable to them than before.

5. Contagious. When a disease is prop-  
agated by coming in contact with a diseased person  
it is said to be contagious. It may however  
be communicated by the insensible fluids em-  
inating from the body affected. Hence it is  
not absolutely necessary that we should come  
into actual contact in order to take the disease.

Neither does it depend upon the quantity,  
but rather upon the quality of the matter, &  
the disposition of the person to receive the disease.

It will also produce the same disposition to  
communicate it to another & he to a third &c.

It is not of a solid but of a fluid insensible nature  
transmitted through the air. As in Hooping-  
cough it is conveyed in an insensible form.

Every person is not equally liable to contagious  
diseases. & after having them once the suscep-  
tibility is entirely destroyed.

How these diseases originate is unknown,  
there being found on the animal of medicine  
does not explain their origin, for their first  
production is ad incognita. This matter is  
a peculiar secretion from the discharge body -  
It is not increased by being mixed with the  
atmosphere; but is rather diffused & diluted  
in it in such a manner as not to act sensibly  
upon the system. & at a small distance  
is not capable of acting at all. -

The infectious & contagious diseases synonymous  
they are not, they ought to be used as distinct  
terms. - Infection means to imbue or immerse  
in a disease. Thus when a person is long ex-  
posed to miasmata miasmata, & is finally at-  
tacked upon by the fluid he takes the disease by  
infection. The disease may arise from infected  
persons; but generally from the ground or from  
noxious matter arising from the decomposition  
of vegetables. Diseases arising from the  
confinement of many healthy persons in the  
place are produced by infection. -

II. In respect to their occurrence they are 1<sup>st</sup> Stationary 2<sup>d</sup> Intercurrent - Diseases of particular constitutions of the year may be said to be stationary - Those which return & occur at any season of the year are properly intercurrent diseases

III. In respect to their prevalence they are 1. Sporadic. These are those diseases which are generally scattered about, or prevail indifferently at particular places & times, attacking but a few individuals in a place - 2. Pandemic when diseases prevail generally or when they affect the whole community - They may be divided into a. endemic those that occur at particular spots & are liable to return in the same places. b. epidemic when they are not so much limited, but prevail whole countries, & sometimes continue for 2 or 3 years. These are generally acute diseases -

IV. In respect to their seat they are 1<sup>st</sup> General or local. 2<sup>d</sup> Idiopathic, or symptomatic - Idiopathic when the disease exist independent of any other - Symptomatic when it exists in consequence of some preceding disease

as fever from inflammation, or, 3.<sup>d</sup> Fixed, wandering or retrograde. Fixed when the disease remains stationary, or continues in one particular part, wandering when the disease goes from one part to another, as in Rheumatism Retrograde when a disease has affected one particular part & left the same - & then returns again by metastasis, as the gout - 4.<sup>d</sup> External & internal. External when the external parts are affected, as in Abscesses & ulcers - Internal when some of the internal parts are diseased. 5.<sup>d</sup> Placed in parts of different structure, or texture even in the same organ or o. a. in the mucous membrane; b. cellular membrane; c. in the serous membrane; d. in the fibrous texture &c. V. In respect to their nature, or character they are 1.<sup>st</sup> Light, mild & small; grave & great 2.<sup>nd</sup> Regular or irregular which need no explanation; 3.<sup>rd</sup> Benign, or malignant. Benign when the disease is not mild, but implies a violent but soft disease, malignant when the disease begins mild but unspeakably

terminates fatal. 4<sup>th</sup> Disguis'd or manifest.  
Disguis'd when the real nature of the disease is  
not understood. Manifest when the true seat  
of the disease is obvious.

Sect. 19<sup>th</sup> VI. In respect to their extent they  
are 1<sup>st</sup> Dangerous or safe. Diseases that affect  
any of the vital organs or any of the important  
viscera may be said to be more dangerous than  
those affecting other parts. A disease however  
may prove dangerous affecting any part of the body  
although there are many which are & may with  
propriety be considered safe. 2<sup>nd</sup> Depraved or  
injurious, or salutary. Many diseases may prove  
injurious to the system, although they may be  
removed. Others may be considered as salutary  
by removing some noxious matter in the sys-  
tem - of these are fevers. 3<sup>rd</sup> Curable, incur-  
able, or mortal. Those diseases that may  
be controlled by medicine may be considered as  
curable. Those which cannot be managed by  
medicine are considered as incurable.

VII. In respect to their form & constitution, they  
are 1<sup>st</sup> Simple, or compound & complicated.

2<sup>nd</sup> Acute, peracute, & Subacute — when diseases undergo regular processes they are acute, when they are lengthened out longer than usual peracute & subacute when a little longer than acute —

3<sup>rd</sup> Chronic, those that have no immediate termination or crisis, for example the gout.

4<sup>th</sup> Continued, remittent & intermittent —

Continued are those that remain the same for any length of time. The remittent when the violence of the symptoms remit or subside in a degree, but <sup>not</sup> entirely, as the Remittent fever — Intermittent, when the symptoms leave the patient entirely for a time & then return again in the same manner. Example the Intermitting fever. 5<sup>th</sup> Periodical, when the disease is regular in its returns, or occurs at regular intervals —

Of the Arrangement of Diseases, & etiology. This is the classing & arranging diseases in a systematic manner — They have been arranged into classes & orders, like plants & minerals.

Yet these are not altogether correct, for the same disease manifest themselves by different

symptoms, in different individuals. If the same  
 diseases always produce the same effects or  
 symptoms, all other circumstances being the same,  
 this arrangement might be made; but this is  
 not the case as we find considerations differ.  
 Although the lists of complaints are numerous,  
 yet perhaps the elementary diseases are few. The  
 variety is produced by the difference in the  
 degree, & by the combination of two or more  
 elementary diseases. The reason why diseases can-  
 not be arranged like plants & minerals, has been stated.

The difficulty is insuperable if we like we attempt  
 to arrange diseases in a single table. This  
 difficulty is obviated if we make use of two  
 instead of one. The first table should  
 symptoms, methodically arranged & referring  
 to the diseases in which they appear.  
 The second to contain those diseases.

The first table of symptoms should be  
 arranged under five classes, viz. 1. symptoms  
 of composition, i.e. manifest in a change of con-  
 Figure; 2. of structure; 3. of properties; 4. of op-  
 tunities; 5. of functions.

In the arrangement of systematic nosology,  
diseases have been arranged into orders, genera,  
species, & varieties. Orders relate to the different organs,  
Genera, to the different textures in each organ, & species  
to the <sup>particular</sup> different kinds of affection. Varieties, to the  
differences, in each affection, in degree, & perhaps, in  
other respects. The second table to contain the  
actual diseases which affect the human body,  
considered as simple or elementary in regard  
to their proximate causes. There may be some  
question as to some affections, whether they should  
be admitted into this table. It is best to admit  
these, & to diminish the table hereafter, if the ad-  
vance of science shall permit. Also in this table  
should be included those sympathetic diseases  
which occur in the whole system, or in any sub-  
-ordinate system in consequence of some local  
disease. Lastly should be included certain  
diseases, arising from the presence of certain  
remote causes, to agree with the system.

In denominating diseases, it is best to take  
the names most commonly employed, so far as  
they are appropriate.



Sect. 20.<sup>th</sup> I. Fevers, or fevers, are diseases, without any primary local affection, generally affecting the whole system, preceded by languor, lassitude & other symptoms of debility.

II. Phlegmasia, synocha fever, with inflammation or topical pain; the function of an internal part being at the same time injured, the blood upon per-  
fusion exhibiting a buffy coat. III. Hemorrhagic, pyrexia, with a profusion of blood without any external violence, the blood drawn from the vein having the same appearance as in Phlegmasia -

IV. Profluvia, pyrexia, with increased sensibility, not naturally bloody. V. Adynamia, a diminution of the involuntary motions, either vital or natural. VI. Dolores. VII. Spasmi  
Irregular motions of the muscles, or of the muscular  
fibres.

VIII. Dysorexia, Disorders of appetite, the symptoms not primary, but symptomatic, they  
sometimes however appear as primary. IX. Uvula, Disorders of the judgment, want of recollection in the mind referable to physical causes, generally; but not in all cases they are sometimes idiopathic. X. Morbi Organi, organic diseases arise from disease in the

structure of the parts not properly eliminatory  
or in affection of the stomach or cholera-disease  
it may be effected. It is convenient to consider them  
by themselves. XI. Morbi. ex. accidentibus in cor-  
pore inclusis. Diseases from foreign substances  
in the body. They produce a variety of symp-  
toms. XII. Morbi Sympathicis, Sympathic diseases  
produced by a variety of arrangements. (Placed  
by themselves to show how they present themselves)

These are all the primary diseases that occur in  
the body. Secondary are of more importance than  
primary. A full nosology divides these diseases  
into orders, & to arrange all their symptoms under  
their respective heads, & again the actual diseases  
opposite to their symptoms. It requires time to  
make these arrangements perfect, yet they may be  
done by each person.

## Therapeutics.

The fourth branch of medical science relates  
to the treatment of diseases. There are two general  
modes; active & watchful or expectant. These  
considered generally - We may wonder over the hurry  
upon to ascertain whether the symptoms occur which

effect a cure - If accidents occur they employ  
some remedy, but not upon the primary disease

As in case of fractures & bones, so in diseases -

The active method is different from this, here you  
employ means to check the disease. Some Phys-  
icians always pursue the active, others the mild or  
expectant - It is important that a physician should

know when to use active means & when none at all.

Very interfering with nature, we many times injure  
rather than cure the disease - Diseases are

mostly compound. we must analyze the disease  
to ascertain whether one or more organs is affected,

thus we shall be able either to direct our treat-  
ment to the most important part, or to the the

most dangerous affection, or to combine means  
so as to effect several purposes at once -

Of intentions & indications, we first have  
the indication, then the intention. From

the symptoms we determine the indication  
& our intention from the true effect which fol-  
lows the employment of such medicines as the

symptoms indicate - Thus when any foreign or in-  
digestible substance is lodged in the stomach the symptoms

indicate its evacuation, & the vomiting of the substance

causes & indicate the use of a vomit - we therefore administer a dose of ipecac & with the intention of throwing off the offending matter. The distinction between rational & empirical practice -

Indications furnished by the symptoms by remote causes & by proximate causes - The symptoms may furnish indications to particular diseases; they are the least satisfactory. We must pursue them with caution. Thus in the cholera we cannot rely on the symptoms unless experience has proved them to be safe - we must then have recourse to the remote cause. If the remote cause be removed, the disease is not always removed, but will continue as an intermittent fever.

This however is not always the case - we must therefore remove them before the disease will subside - The indications from remote causes more safely pursued than the symptoms, but they are often inadequate - Indications from proximate causes the most important & satisfactory, & must be removed. Although they sometimes follow in a succession of processes they may sometimes be interrupted, & their occurrence checked; but not always with

impunity. The indications may be clear, but our  
powers limited. Means to be employed for the  
removal of diseases. The agents for the removal  
of diseases act agreeably to principles, considered in  
framing of the relations of the human system to external  
things. Every remedy operates on the irritability or sen-  
sibility or vital affinity - Mercurials are sometimes  
employed to lessen the disposition to disease, some agents  
increase the vital powers indirectly. The operation of  
some remedies is not understood, we must therefore some-  
times act empirically for want of our indications. We  
must therefore employ such remedies as tend to remove  
the pain & disease. On the mode of operation of  
some of the principle remedies employed in disease,  
1. Bloodletting, general & local. General bleeding  
should be from a large vessel, when the whole system  
is affected, & from a large orifice when we wish to  
produce immediate effects on the system or procure sym-  
ptoms - Local bleeding is by means of cupping &  
leeches &c. Some contend that the immediate effect  
is to remove phlogiston, others that some morbid  
matter is drawn off. When the circulation is ex-  
cessive, the obstruction of blood lessens the irritation

I experiment, so far as it regards the distention of  
the heart this is sufficient; but the blood vessels do  
not dilate & empty themselves. Taking away blood  
occasions a greater contraction. — By what power do  
the arteries contract? They have the power of elasticity  
they, & another which is brought into action after the  
power of elasticity has ceased to operate. This is  
their vital power. Elasticity would not reduce  
the blood much below their common disten-  
tion. — They exert their vital or their second power

Of the blood vessels, be reduced below their elas-  
ticity their vital power operates. The heart is  
affected most, & the osseous heart by bloodletting.

When the power of the arteries is collected into vessels  
it demands the power of the whole system.

The symptoms, arising from blood being drawn in  
great, or in too great quantity, are sympathetic, or  
faintness &c. Bleeding also affects the capillary  
system. When the secretion is also diminished  
for want of proper distention. These effects however  
are soon removed in persons in health, as blood is now  
formed in greater abundance than before. The dispo-  
sition to plethora is increased by bloodletting, therefore

persons in the habit of being bleas frequently become plethoric  
On disease. The veins are not equally full  
at all times - This variation in the fullness of the  
veins does not arise from too great or too small a  
quantity of blood in them; but from an unequal  
distribution of it. 1<sup>st</sup> There is a plethora ad vias  
2<sup>nd</sup> a plethora ad vasa. In the first the strength  
of the heart is increased & acts with increased force,  
On the second the heart ~~acts~~ is languid & feeble,  
while the vessels are full - The pulse slow & feeble -  
consequently the blood is collected in the heart.

Therefore from a diminution of blood, the heart  
will act with more vigour. The plethora ad vasa  
is a fullness of the vessels. They may be comparatively  
too full - Therefore by the obstruction of blood the  
fullness is diminished & ease & relief is given to the  
vessels - There is sometimes an inequality in the dis-  
tribution of the blood; but we cannot tell when that  
happens - The external veins are not a sure guide -

In the large veins & capillaries there frequently  
an inequality, or in faintness we find the pulse full  
& strong, in consequence of the blood, leaving the capilla-  
ries & causing a too great fullness of the arteries -

In spontaneous hemorrhage from the lung, from  
a too great fullness of vessels, relief is obtained by  
bleeding — the capillaries are sometimes full & the  
the large vessels are smaller than usual — When  
differential states of plethora produce disease — In plethor  
vins from a diminution of blood — Hence it is  
improper to take a large quantity from old people

In disease from plethora or excess bloodletting is  
required, & with more confidence than the former

Universal plethora may also occur — How can the  
letting relieve when plethora does not exist, If the heart  
is diseased it is required, still more proper when  
the lungs are affected, a relief is obtained as  
the blood is drawn — The vessels of diseased  
parts contract more than those in parts which are  
in health. If a spontaneous inflammation or  
depletion will act upon a hot part; not so when  
it arises from the introduction of a foreign body

LECT. 21<sup>th</sup> Of the medicinal powers

1<sup>st</sup> Stimulents. Whenever power is deficient, employ  
stimulents — When tend to awaken & bring into action  
the powers of the system which lay dormant — The ex-  
cite of the brain tends to increase them — What if you



increase the action beyond the power, it tends to debilitate  
when the patient cannot tolerate stimulus with  
ease. — 2<sup>o</sup> Tonics or permanent stimuli  
They do not act on one part only, but on all, they  
are used when the organs do not perform their  
functions with perfection. By some they are sup-  
posed to act on physical principles — They act  
in so small quantities, they cannot be supposed  
to act on the fibres — The powers of the system  
appear to be increased by them. Tonics  
do not always remove debility, by increasing the  
powers. They are useful only to carry the patient  
over the bridge & no farther & then bring you patient  
to a proper state to receive nourishment from food  
& exercise. — 3<sup>o</sup> Astringents. These tend  
to diminish secretions, & check hemorrhages from  
the open mouths of extreme vessels. They again  
are supposed to act on the living fibres. They  
act on distinct parts immediately, as the sulphate  
of copper in hemorrhages from the uterus. 4<sup>o</sup> A-  
stringents. When certain medicines alter the state  
of the parts, they are called alteratives. The mercuri-  
als are the most remarkable medicines of this class.

Their most obvious effects are seen in symples. The  
stronger they alter the state of the part, & are there-  
fore called specific stimuli, because they act on a  
particular part by sympathy. They have constitu-  
tive affinity or power, we see a priori they are not  
in all cases capable of effecting a cure, but from ex-  
periment we learn that mercurials will control the  
morbid action. When the disease has a circle of  
processes to perform they are not capable of being or-  
dered by alterations, as in variolous &c. Antimony  
also act as an alteration, this is from the vegetable  
kingdom. 5.<sup>th</sup> Sedatives. Some pretend there are  
no sedatives, but I believe there are. They first  
exert the powers & then exhaustion follows. Opium  
is the most remarkable of this class of narcotics, it  
affects the organic actions, it will remove pain  
no previous fullness, quickness or any excitement  
is perceived in the pulse. 6.<sup>th</sup> Refrigerants.  
7.<sup>th</sup> Emetics. They operate by producing a con-  
pulsion of the stomach between the diaphragm  
& the abdominal muscles. They produce a spas-  
modic contraction of the pylorus & muscular  
fibers. By sympathy they operate on the whole system.

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Their operation is promoted by administering large doses  
of the warm liquors. Opac & antimony are ar-  
ticles which will always produce this effect if  
given in proper quantities. These medicines relieve  
the stomach by evacuating the oppressive matter,  
they also give it tone, which enables it to perform  
its functions with ease. As every part of the body  
is properly united with the stomach, any affection or op-  
eration produced on the stomach, is felt by  
the whole system. These medicines act also  
as alteratives.

Lect. 22<sup>th</sup> Cathartics. These increase the  
peristaltic motion of the intestines, also the secretion  
of the mucus & bile. Different articles produce  
this effect in different degrees. Hence some of  
them are called laxatives, others purgatives &  
stropic purgatives. Some merely produce an in-  
crease of the peristaltic motion, without affecting  
the bilious secretion. When there is an unusual load  
upon the stomach, or an oppression of offensive matter,  
cathartics tend to relieve it, by causing an attraction  
in the determination of fluids. Thus they relieve the  
head in some cases by causing a determination to the bowels.

The saline purgatives do not occasion so great  
a determination of blood, as many others. Some  
have a tendency to stimulate & increase action  
therefore when there is already an increased action  
they should not be used. 9.<sup>th</sup> Sudorifics.

These are medicines which increase the sensible perspiration. Diaphoretics increase the insensible perspiration. In order that their remedies should have their due effect the air should be kept from the patient or uniform. & the patient in a horizontal position. Some articles increase the heat & not the sweat. Warm water tends to produce perspiration also herb teas; but the more surely to produce its proper effect employ nourishing doses.

Applications to the skin also have a good effect as warm liquors &c. It even happens that cold produces perspiration - Sweating is a solid evacuation, by its causing a determination of blood to the skin. It is useful in the cure in the course of diseases; but not the cause of any.

10.<sup>th</sup> Diuretics, are articles used in case of difficulty of the urinary, or some other parts, occasioned by an obstruction to the passage to the urine.

In health they increase this evacuation, but in sickness they often fail. Liquids of any kind tend to increase the urinary discharge. In summer the discharge by the skin is increased & the urine diminished in winter an increase of urine & perspiration is obstructed. Some contend that there are no remedies, but there are other articles which have a direct effect upon the kidneys themselves. If you produce any irritation upon any one part of them, you increase the urine. Digitalis & a super tartret of potash are of this class, the former used in drops, indirectly as a diuretic.

11.<sup>th</sup> Emmenagogue. No article acts specifically as an emmenagogue except the uterine or Spinae eggs. This however is not recommended. We are not certain of any other article, having a direct effect upon the uterus. The cortex has a partial action.

12.<sup>th</sup> Anthelmintics. There are supposed to be articles in the Materia Medica, which act on the intestines, others that kill the worms.

Thus any article which has a tendency to injure or kill them, occasions their expulsion. By abstinence from food the same thing happens in all diseases.

most opposed in Lumbagoes & heaves. The effect  
is produced by emptying the lower part of the cone  
preparation of Zinc & arsenic & of the class  
The volatile oil of turpentine in Lumbagoes  
13<sup>th</sup> Lithontriptics. are articles employed  
to check the further formation of calculi in  
bladder, kidneys, ureters &c. Mr. Brandt, they  
state if the uric acid predominates, the alkalies  
magnesia & if the uric acid is discharged, it  
is beneficial; but if the Phosphoric acid part  
the mucous acid is most beneficial. They do  
not act chemically, but insensibly on the part -  
magnesia, or lime, acids, & purgatives  
14<sup>th</sup> Expectorants. No articles act directly as expec-  
torants, they effect the inflammation of the mucous  
membrane & cause expectoration. 15<sup>th</sup> Epis-  
pastics & 16<sup>th</sup> Rubefacients. produce an  
action upon the skin. When they produce & dis-  
charge upon the skin with or without inflammation  
they are epispastics. Rubefacients, when they pro-  
duce a determination of blood to the part, & to the  
other contiguous parts. Epispastics sometimes  
a permanent inflammation which may relieve some

internal part. As tonic stimulus whether on the  
 parts of the parts. Resection upon the head when  
 that is proper of the brain. If on the region of the  
 brain in epilepsia. 17<sup>th</sup> Evacuation & 18<sup>th</sup> Diaca-  
gogues. The former are articles which increase  
 the discharge of mucus from the membranes of the  
 nose - Diagogues are those which serve to increase  
 the salivary discharge. Mercury has the most  
 powerful effect of this kind. by its effects on the  
 salivary glands. 19<sup>th</sup> Purgatives, employ-  
 ed when the urinary parts are affected. Mucila-  
ges, gums & flavours. Acids & alkalies may  
 specifically, when each other, but not upon the  
 organs. We should use means to prevent an acid  
 disposition, rather than correct it after it has formed.

Book 23<sup>rd</sup>. The Description & Treatment  
 of Particular Diseases. It is the pre-  
 ceding parts, not more applicable to theory, so to the  
 practice of physic. Let us practice be, then  
 referred to in show, & must theory be in it.

Diseases to be considered in the order which will  
 render them most intelligible; & as all cannot be  
 considered, the most important will be treated.

Particular diseases to be considered generally in a  
general mode as well under the consideration of  
most convenient or advantageous. This des-  
cription is divided into History & Philosophy.  
The History of a disease explains its causes.  
In describing a machine we cannot have a full  
idea of it, unless we have the parts exhibited - so  
also in describing a disease.

**Phrenitis** We cannot give a just  
idea of phrenitis. It is a disease in which all or a  
part of the functions are deranged. It extends  
to the mind as well as body. The whole aspect  
is altered, the size of motions, language, countenance  
& other symptoms of debility. When there is no  
local or affection on which the disease depends  
it is idiopathic, symptomatic, when it arises  
from a disease of some other part.

In order to arrange these symptoms, there  
must be some theory. We shall first take the  
most simple view of this disease, then a more  
complicated one. This is a disease to which all  
are liable, more especially those who are feeble, those  
who are irregular in their diet & diet.



Those who over labour & intemperance in eating  
 & drinking, soldiers in armies, those confined  
 in crowded places, anxiety of mind & watching often  
 produce fever. There is a peculiar idiosyncrasy  
 in some to fever: what is fever? when it arises  
 from a great heat there is an accelerated pulse,  
 this is idiopathic & symptomatic. The most essen-  
 tial symptom in an idiopathic affection, is its  
 affecting the whole system at the same time; but  
 not the whole to so every part to the same degree  
 as one organ may be more affected than another.  
 The mind also as well as the body is deranged.

The phenomenon of fever occurs in certain or-  
 der. There is a succession of symptoms. In the  
 on perfect in their occurrence they are called a pro-  
 cession. This procession of fever may be divided  
 into stages. These stages have their periods like  
 the disease. Fever is divided or may consist of one  
 or more <sup>periods</sup> ~~periods~~ <sup>stages</sup> consisting of four  
 perfect stages constitutes an epidemic. An epide-  
 mic or single & perfect procession consists of four  
 stages, the access, cold stage, hot stage & crisis.  
 Symptoms of the access, 1st of the <sup>system</sup> ~~system~~

There is lassitude, languor, the power, as well as  
the disposition to exercise the animal powers is effe-  
cted. It is necessary that the mind as well as the body  
should be excited, he cannot exercise the animal  
powers so well, being in pain. This  
may arise in any part of the body, more particularly  
the head, sometimes, in the limbs, it is an itching  
rather than pain, restlessness, & a constant desire  
to change his place, paralysis, coma, stupor, some-  
times with or without coma, delirium, ~~some~~ ~~times~~  
ludicrous, instability of motion which arises in kind ~~delirium~~  
& restlessness. Next symptoms in the Organic  
system, This system is probably first affected.

1<sup>st</sup> the appetite is changed - the appetite for  
food is lost or depressed while that for drink is  
increased, digestion is many times stopped at the  
time the access takes place - The peristaltic motion  
are so diminished, that constipation takes place.

The secretions & excretions are diminished. In consequence  
of the diminution of the secretion of fluids the solids  
are diminished, the tongue becomes coated, the sto-  
machus & a diminution of all in the action of all  
the extreme vessels. Palloriness of the skin from

a constriction of the extreme vessels, then symptoms arise from a stoppage of the perspiration, & nausea. If vomiting also occur. The vital functions also are affected during this stage. The pulse do not rise above 90 - There is peculiar sensation about the heart. respiration becomes slow, with anxiety as well as oppression of the breast. Then on the most numerous cold symptoms. There is also depression of strength, as a man a few hours ago may be well at work, now is so depressed as to be unable to sit up. In this case his strength is not lost, but depressed. As an elastic spring <sup>part</sup> which springs when pressure is made upon it by a weight, will recover its former place, when the pressure is removed. There is not limits to this depression as green wood is sometimes brought in by it.

This stage exists sometimes a day or two before the other stages appear, sometimes even for weeks & months but not generally more than 2 or 3 days

Sept. 21<sup>st</sup> Cold Stage. The symptoms of this stage are not such as one confined to this disease, but occur in other diseases, as in pertussis. Coughing & such cold stage shivers, rigors & shuddering are

appearance of greenish. The skin is & cold  
not uniform; the tongue & the fauces become more  
dry, the tongue adhering to the roof of the mouth.

When we attend to the secretions, sometimes both occur  
at the same time. At the termination of the cold  
stage the symptoms are relieved by vomiting or thro-  
wing off the offending matter from the stomach.

This stage has a precise beginning; but termi-  
nates gradually into the hot stage. At the termination  
of this stage in the hot stage the patient feels cold  
when to the touch of the physician quite warm  
& vice versa; he may give off heat to the  
living body & cold to dead bodies; his colour changes  
into yellow, red &c. his eyes also become red.

The skin continues dry generally but not always.  
The pulse becomes more frequent, if not a greater  
fullness, respiration becomes obstructed, the pain  
more violent & distressing, as well as more extended  
over the whole head, these pains are uncertain, they  
is frequently a delirium, sleep is disturbed, he  
has an aversion to food & a repugnance to swallow-  
ing. The thirst becomes extreme & unwillingly  
is gratified. There is an unpleasant heat in the

mouth - the discharge of urine is small & clear  
 At this period some of the symptoms of the acute  
 continue as of restlessness & depression. - She  
 is incapable of any clear & distinct ideas, some-  
 times delirium occurs, symptoms relieved by bathing  
 There is an incapacity to measure time, a few  
 minutes many times appears very long, & sometime  
 a long time appears short. These symptoms continue to  
 increase for a time, then terminate

The cold stage is sometimes wanting but the hot  
 stage very seldom. The hot stage terminates in crisis  
 by hemorrhage, <sup>or</sup> inflammation & then do not always  
 terminate the acute progress but sometimes the inflam-  
 mation brings on a termination of the disease. A  
 hemorrhage that will ~~not~~ terminate a fever is gene-  
 rally violent. The inflammation & hemorrhage may  
 be favourable when it goes on to form a crisis  
 this <sup>is</sup> ~~terminates~~ the contest. The crisis may be  
 favourable or unfavourable according to the  
 when favourable the symptoms are of three kinds  
 1<sup>st</sup> show of subsidence. 2<sup>nd</sup> of 3<sup>rd</sup> The exercise of  
 healthy action. 1<sup>st</sup> show symptoms that mark the  
 subsidence of the disease. The urethra functions

with more ease, & is more capable of exerting himself  
he retains the use of things as well as the direction of them.  
The hypochondriac perceives the change before the patient  
himself. 1<sup>st</sup> the appearance of external symptoms  
the contraction of the external vessels is removed &  
the vessel are open, for a large draught of cold water  
the symptoms often subside, the dryness of the  
mouth & fauces ceases, the coat is removed from  
the tongue, in short all the morbid symptoms  
go off & the healthy ones show themselves. Not  
only negative symptoms subside, but positive ones  
come on. 2<sup>d</sup> If the healthy powers were restored  
at once would the appearance in every respect be before?  
No, the organs & functions will be different in consequence  
of the contents of the stomach being new or unaltered.  
2<sup>o</sup> In consequence of the contents of the alimentary  
canal being unaltered, the secretion of fluids will be  
different or in an unusual quantity, & a discharge  
is brought on in consequence of the efforts exerted  
to throw off these foreign bodies. The evacuations  
from the skin or by urine sometimes prove critical.  
The first form does not consist in a healthy state  
in all the functions, by a discharge of their contents.

When evacuations are sometimes large & excessive, the symptoms occur in succession, sometimes on intervals of several days, or more distant periods.

Part 25. The Crisis unfavourable.

When there is an increase in the morbid appearances, & an indication of the failure of the power; a pressure on the parts, the countenance becomes unnatural, features indistinct & a general inexpression of the countenance. Of course the general characteristics of the person are lost, there is some want of the usual contractions of the muscles, but a general flaccidity; the eyes are changed, the tongue furrowed, moist or dry; face pale, change from a red to a cadaver colour, now pinched in, the means of laying implies want of power, he slips down to the feet of the bed - there is also some probability to motion - picks at the bed cloth - mouth dark & tongue dry leads with a click coat or very close skin hot & dry - sometimes cold sweat - breast warm, sometimes cold, hands cold, arms warm, evacuations large, but not well concocted & mixed, nausea & vomiting decrease, - all the evils large, are involuntary - in this case thirst is excessive - the pulse frequent small & diminished sometimes slow

but not in direct order as one organ may fail before  
another — when the brain is not affected, respiration  
is quick. — Under these circumstances if the patient  
be moved he sinks or falls — & faints in an erect  
position — Thus the patient sinks by convulsions  
first at the extremities then at the center —

Next deviation of the stages. They are not  
always uniform. 1<sup>st</sup> The access & cold stage last  
generally about 2 or 3 hours. The hot usually  
from 2 to 4 — & the crisis about 4 hours. The  
symptoms of the hot stage subside gradually. If  
the crisis may be 6 hours — An epidemic is more  
10. sometimes even 24. This prolongation is owing  
to the hot fit — Hence on the principles of fever.  
The symptoms of the access generally run into  
other stages. — According to Sydenham, it is  
the exertion of the system to throw off some  
morbid matter. The symptoms of the access  
run through the other stages to the crisis, & as  
the symptoms of the access go off heat is not  
rising if the other stages do not intervene — The sym-  
ptoms of this stage come in gradually, therefore  
they are not always observed — Sometimes they do



not occur until the moment the color stage commences. We cannot fix upon any one or more symptoms or distinctly characteristic of fever, as there are none that are necessarily so. - The best symptom is that the whole body is sick, without any one part particularly - The description here given may be considered as referring to a milder, rather than to any extreme case. This is inevitable in endeavoring to give distinct & just ideas of all the parts. In almost every case some symptoms are wanting, & no symptom which may not be. The disease shows itself in the whole system, but irregularly. -

Of Compound Fever.

This is a fever of more than one period or parts of paroxysms. They are continuous, intermitted, & remittent fever. In general, fever appears to regard diurnal periods. They are divided into intermitted & continuous. Of intermitted, they have paroxysms recurring daily, or every other day, & at the intervals, between the paroxysms, the patient is free from the symptoms of the disease, while in the other they continue through the disease. The symptoms occur regularly every day or every other day, which are distinct -

The interval is from the commencement of one  
excess to that of another. The intermission for  
the termination of one to the commencement of another  
They are of different types or forms - quotidian  
tertian & quartan. The quotidian runs in 24  
hours, tertian in 48. & the quartan in 72  
hours. The tertian is the most common.  
All that is peculiar in intermittents, is its type.  
The paroxysms of an intermittent resemble a  
febrile remission generally: but they are more distinct & more  
The cold stage is more frequent & more than in continued  
fever, more severe & longer. This is not, to be relied  
on uniformly. Some epidemics continuing several on the  
active stage in part by severity etc. of the cold stage  
sometimes the other stages most severe - When however  
more in crisis, but it is less perfect than in other  
It is the first paroxysm, than in remission. According  
to Dr Ferrius if this was not the case the disease  
would not recur again - The second paroxysm  
occurs on the third day or 48 hours, sometimes they  
vary from 40 to 50. but this is not considered  
as an irregularity - When the symptoms resembling of  
the intermitting paroxysms, the fever is not properly

well, although he may be called so, he has a pain in his head & throats, nausea at the stomach - he will almost never before the next recurrence of the disease.

The paroxysms are less distinct during the first week, then after a hot skin, it is at this period that it gets the name of remittent - After this they become more distinct - When however the close of the fever is distinct again: but less severe as well as less distinct.

The duration of the disease according to Boerhaave is 4 weeks - The disease often forms a crisis & terminates in health after a severe paroxysm.

Sept. 20<sup>th</sup> Tertian sometimes ends in death, by frequently producing other diseases, but very seldom if it is a simple tertian - From the violence of the paroxysms it exhausts the patient & excites insensibility - Quotidian are less frequent than the tertian, & it is the opinion of many that the tertian is the true form of intermittents & the quotidian are double tertians - Quotidian paroxysms are longer & the remissions very short, whether apparently more so than the continuance, when very attonch paroxysms resemble each other it is a double tertian - Quotidian occur on the third day & last

not made up of distinct Periods. It is the opinion  
of many however that it is formed of regular periods  
but that the second comes on before the first goes off  
or that the second begins before the first has passed  
its crisis consequently leaving no intermission. At  
least from 7 in the evening till 2 in the morning  
there is a subsidence of the fever, although  
the depression of strength is not removed. Periods  
of remission. In the evening the symptoms more or  
less morning or noon more severe on the second day  
& so on alternately, increasing every other day so that  
the 7<sup>th</sup> sometimes as the 14<sup>th</sup>. After this period it is  
stationary for a week, then the disease declines, till  
at length a crisis is formed, but not so distinctly  
as in intermittents — On one day there is some mark  
of crisis & the following not only for a number of days  
while one symptom decreases another increases —  
The patient submits to the disease with quietness, the fever  
goes on with more mildness & less noise —

Rect. 2<sup>d</sup>. — There is a great variety of fever  
they have a specific difference. The varieties  
depend on many circumstances. A man often being  
unwell for two or three days, is then taken with pain

11  
Cold shivering & rigors, which are succeeded by heat,  
with incoherence & delirium - the first night often  
very long in the morning he has a quiet nap for a  
few minutes like a remission - his appetite now  
begins to fail, he has a degree of pressure in the chest  
& pain in the head & back & legs, sometimes in-  
cessant great discharge of urine - There is a yellow-  
ish sallowness, red & or dirty colour of the skin, the  
tongue has a full coat of a yellowish colour &  
very dry - skin hot & dry - pulse from 85 to 100  
but 92 is the usual standard - If you now exhibit  
an emetic & relieve the alimentary canal, it will ar-  
rest the disease & perhaps stop it altogether. If  
you are not called in a late period enquire into  
the history of the disease if 2 days after the dis-  
ease has ceased, you will not give the emetic, ex-  
acerbation more severe, the second <sup>in the evening</sup> more so than the first.  
Delirium arises, heat & pain more severe - next morning  
more relief from the exacerbation, on the third day  
more severe, relieved by vomiting - fourth still in-  
crease followed by nausea, two discharges, fifth  
nausea, still continues, every thing disgusts him, more  
cold water is offensive - stupor & diminishes

Tongue becomes more dry - pulse quicker than on  
the 5 & 6 - 4 diarrhoea, very little fecal matter -  
The tongue broken, but covered with sores - Thus it  
continues for a week - on 14<sup>th</sup> day you find the tongue  
begin to grow clean at the edge, - has some appetite  
diarrhoea, but severe - urine increased in quantity -  
thus it goes on to the 18 - pulse diminished to 95, with  
the 17 when the tongue grows bright - has some pain  
for food & exercise, as urine 40. his voice begins to  
return - but in an unnatural position - he moves  
- his countenance more natural - but after the  
17 if any little circumstance occurs, an exacerbation  
is felt, but if nothing of this kind happens he grows  
better on to the 21. - This course of symptoms in  
active fear - A rather example - A patient who  
he dull & melancholy for a week but not sick,  
every thing goes wrong - but when he returns his mind  
the has some chills, after some days, loose stool,  
appetite impaired, dull & heavy - you find him a  
week when you come to see him - his general appearance  
is altered, has a dull, sallow or dirty countenance, his eyes  
dull - stupidity prevails, he is unwilling to give an-  
swers when you speak to him - his tongue, skin & mouth

one day - no limit nor recovery, although there is some-  
 thing disagreeable - paine diminished. Thus he is brought  
 to his bed - in the 2<sup>d</sup> week with stupor, in the 3<sup>d</sup> week  
 week the strength is gone - there is a murthering de-  
 lirium, skin dry - the tongue is dry & sticks to his  
 mouth - If you put your finger, he puts out his tongue  
 from aversion. - The coat now peels off & leaves the  
 tongue red & dry - in the 4<sup>th</sup> week he begins to move  
 very slow - begins to hear on opposite forehead, before he  
 has really convalesced, or his stomach will digest it - you  
 may now give him curries, which he is at first pleased  
 but soon grows tired of this kind, which must be stopped  
 for a week - Thus he continues for 5 or 6 weeks in a torpid  
 dull state & has no recovery any stage - his appetite is very  
 voracious - Thus his desire for force increases, before  
 the strength of mind or body - You may be assured by  
 a child able to play about 11 or 12 o'clock, he then wants  
 no less power - his pulse on repice - in the morning he is  
 better - Thus he passes on for a number of days, till the 2<sup>d</sup>  
 week when the excoriation grows more severe - 3 weeks  
 still more so, mouth very tongue clear thus he gains strength  
 the disease in this manner - You may see another kind of  
 a man out of his business pale, serene with pain at his work

The pain is transferred from his extremities to the head, he  
changes in posture, he becomes faint, & throws him-  
self down upon the bed - pulse ~~is~~ frequent & reduced in  
the course of 24 hours - This is a putrid fever  
The first may be called a bilious fever - the 2<sup>d</sup> &  
nervous or cephalic - & the 3<sup>d</sup> fever of the stomach.  
Leck 25<sup>th</sup>. Autumnal Fevers, these  
seldom continue more than two weeks, when proper me-  
dicines are employed, sometimes not more than one - that  
is you may leave the patient by this time & though not  
perfectly well - some not short of 3 weeks - they differ in  
different seasons. - It has been supposed that there are  
certain critical days, on which the crisis is generally  
formed, which are the 3. 5. 7. 9. & 11 which observe the  
tertian type, & the 14. 17 & 20 which observe the  
quartan - This has not been observed by myself  
although it may have been by others - Terminations,  
when the commencement is very violent, it frequently termi-  
nate favourably; <sup>by crisis</sup> but if the disease comes on gradually,  
it continues longer, In this case be diligent to use proper  
care & to employ suitable remedies - The continuation of fever  
generally terminates at once by crisis as is intimated  
sometimes also terminates by hemorrhage or by <sup>crisis</sup> imper-



115  
If these do not prevent the disease, they increase the  
Symptoms of a Low & exhausted state of the sys-  
tem in fever - This state of the system is frequently  
induced by giving cordials & stimulents, before the  
return of the disease puts them out - When it  
is an indistinct appearance of the counterence - the voice  
is lost - the patient is unable to bear exercise  
or of any kind - he has lost his mind he appears as  
if he were asleep when awake - the tongue is dry -  
appetite for food entirely lost - he takes a bottle  
sometimes two, of wine, a day, which induces this  
state - sometimes the patient is unable to take food  
from gulping up the wine - this discharge is  
very disagreeable to the senses - the abdomen is sunk  
in so the protuberance - the skin rough, hard, & dry -

Thus he becomes emaciated to a great degree - Consumption  
is sunk, or a hollow, non sharp, lips thin - the  
cheeks thin, skin loose & dry, a relaxed & dirty appear-  
ance of the whole, this colour is peculiar to a real state

When symptoms continue, the patient sinks & death  
follows - Very proper nursing & care after a long sick-  
ness - he sometimes recovers - Of the appearances  
after death - The opportunities of examining them attend

in respect to simple fever whether ephemeral, intermittent  
or continued, are very infrequent - Examinations have  
been made without any reference to the symptoms it  
was obviating in life - The simple continued fever does  
not depend on any organic change - Formerly the  
structure was not so well understood as now, & of  
the brain - In order to ascertain the disease every  
part must be very minutely examined - Some have  
contended that the disease was seated in the spinal  
marrow, but that is unknown - The examination  
should be made by men well versed in the disease  
as well as anatomy, both morbid & healthy -  
Causes of Fever. Many phenomena noticed in the  
history of fever have not been noticed. A distinction  
has been made which is theoretical. But this not  
only tends to give mistaken views, it facilitates the ex-  
amination of facts, even if incorrect - It is much as  
is commonly thought essential to the disease has  
been described. The remainder may be more distinctly stated  
after discussing causes - It is important to regard  
the distinction of proximate causes, because it has not  
been satisfactorily ascertained. Remote Causes - Some  
pretend to know of them there is not almost evidence. Let

they produce cannot be doubted, yet they often occur without producing fear, & even produce other diseases -

They are the occasional or exciting cause - They are causes which generally tend to interrupt the regular performance of the functions - The disease gets its character from the predisposing cause - The disease is brought on at one time by one cause & another by another - There is no doubt but there is a cause producing the disease -

1<sup>st</sup> seasons. With us, fevers arise most frequently in summer than in winter, generally in August & continue to increase through Sept., Oct., when they gradually decline in Nov, & Decem<sup>r</sup>, when they disappear -

When fevers are the least frequent they are the more distinct - The nature of the fever varies in the different months, consequently our treatment should vary according to the nature of the disease - The occurrence of fevers with us is very rare in winter, although it may happen, but in Great Britain more frequent in winter in than summer, & of the qualities of the weather, of heat & moisture, hot alone will operate as an occasional cause of fever, at 85 or 90°: Moisture does not operate directly as a cause, unless the cloth or maintenance & then exposed to sudoration; but in this way operates indirectly

Heat & moisture together, by producing the decomposition of  
dense vegetable matter will produce, or produce as a cause  
of fever, when they are in a proper state for the effect.

Dry seasons most favourable. The decomposition of veg-  
etable matter produces the marsh miasmata, which  
is a noxious cause of fever - The intermettents is the fe-  
ver usually produced by this cause - It does not act at a great  
distance - Its action is diminished as the distance increases.

It will not generally produce the disease at a greater dis-  
tance than 50 miles - It is favoured by the wind -  
Against the wind it will not get more than a few yards -  
Low grounds, or plains, are more liable than more elevated  
land situations - The disease is more liable to be pro-  
duced in the evening than any other time - More liable  
at the foot of hills, than at their tops -

Sept. 29<sup>th</sup> - Marsh miasmata, is another  
or cause of fever, the nature of this is unknown  
some think this arise from animal or vegetable matter  
some contend that it arise from insects, with veg-  
etable - In this country the decomposition of hemp  
& flax have given rise to intermettent fevers - It has  
not yet been shown to give rise to fevers - When it is  
doubt that vegetable matter does give out something which

produces fever - It is also said to arise from living soon  
 when a large number of them are crowded together in  
 small apartments - It is from the sick, & from contagion -  
 Another undergoing decomposition. Off fever arises  
 from living present. it would in the slave ships, when  
 so large a number of them are crowded together in  
 the hold of the ships - The case of two Englishmen  
 being crowded in the hold of Calcutta, when 19 out of 20  
 died in one night. does not from this to be a cause, as  
 it is doubtless from the insupportable stench emitted  
 from their bodies - In the French revolution, when some  
 men were crowded together in the holds of small ships, in  
 fact & said. They were not affected with fever -

The Eng. observed that in the hospital of Plymouth  
 when men were from long voyages & crowded together in  
 small places, did not induce fever unless they went on  
 shore - When if heat & crowding produces fever  
 they would be the most liable. - Sick producing fever  
 From what can be learned from such places it does  
 not produce fever. Contagion, this does not produce  
 fever so readily as the small pox; but in a less degree -  
 Not by a short exposure; but by infection or a long  
 course - of a number of success of bodies in long term -

men will be affected with fever, & how when they are exposed  
but a short time - Animal matter after death, is supposed  
to induce fever. - Many diseases arise from this source  
; but no satisfactory evidence has been found that fever  
has been induced from animal matter. - Curious matter  
is daily undergoing decomposition about slaughterhouses  
& vaults, but we do not find that fever is produced - Must  
does it arise from burying grounds, as many have imagined  
As in Paris & Germany, they were not exposed to the air.  
- The Hospital is a manufactory for disease, by means of  
houses - Hence we see that only one kind of fever  
has as yet been found. That of most kinds  
& that only by long exposure - But some that do not oc-  
cur in this country, neither exposure to marshy grounds, nor  
other causes, or weather states - it then acts, & remains  
even some after a long time after the operation of the put-  
ter or exposure - Thus the remote cause may act a long  
time before the fever is brought in to action by the ex-  
acting cause - It most frequently occurs in the warm re-  
gion & southern climates.

Lect. 30<sup>th</sup> Proximate Cause of fever. The opinions  
of men, on this point, are numerous. Whichever opinion is  
formed of the system, they enter form of fever - There is one

opinion that has been maintained by a large portion of  
 physiologists, - viz. that fever is in part, or in whole  
 a salutary effort, to remove some evil. There is a rea-  
 son for this opinion, which is that a great number of pe-  
 vers, humors in heated or salutary. - What part are  
 salutary? There is a difficulty in tracing a line between  
 the morbid & salutary processes. If this could be done  
 we should probably ascertain the proximate cause -

Quellen & Fordyce have thought that all that pro-  
 ceeds fever was rigor, but the cold stage is sometimes  
 wanting. - The various opinions respecting the  
 proximate cause may be reduced to four, 1<sup>st</sup> in  
 composition, that some morbid matter entered into  
 the system. This is the opinion of Sydenham, - some  
 supposed that there is some foreign substance received into  
 the blood, but not into its composition, therefore the  
 substances do not produce fever by change of composition

2<sup>nd</sup> Change in its structure. This has not been sup-  
 ported by any pathologists. (Some see it not in com-  
 position or structure). 3<sup>rd</sup> In the properties, 4<sup>th</sup> In the  
 function. viz Quellen & Hoffman. It is the opinion of  
 Quellen that the remote cause on seething. Not all the vice  
 change is produced in the brain. That these substances produce

a change in the structure of the brain. It has been  
a vis medicatrix naturae, in the system. His opinion  
is that the diminished energy of the brain causes a con-  
traction or spasm of the extreme vessels. This causes  
an increased action from the center to the circumference  
which fairly overcomes the contraction of the extreme  
vessels. There is no satisfactory evidence of diminished en-  
ergy of the brain, & it does not appear that there is any  
obscure, before the cold stage, which ought always  
to be - The power, in fevers, are generally decreased in  
stead of increased. - No. Linnæus & Physic place the  
cause in the spasms of the extreme vessels & the expan-  
sion of the nerves. Since at the end of the disease the  
contraction is relieved. According to this theory if any  
of these appearances are wanting at any time they must  
be through the remission of the fever. - When an man  
who continues that the heart is not unusually excited. The  
fever still go through its natural course & therefore the  
theory must fall. Hallerback & others believe that fever  
depends on an inflammation of the brain, or on some local  
affection. - But we do not find this to be the case in  
fever, for the whole system is affected & not locally.  
Hence this system must fall, as no arrangement of the  
brain has been found on dissection



after death. Various pathologists have believed that all fevers do not always arise from the very one particular organ, but sometimes from one, then from another, as was the theory of Astruc & others. - Brown's theory that debility was the proximate cause of all fevers; if this were the case the fever must continue all infinitum. As the debility always increases to the end of the disease.

Phyllis also supports this theory, with one exception. The fevers foreign substances do not have their usual effect on the system. - All the stages are not peculiar to fever, as the colic stage is sometimes wanting, also the hot - In the crisis the evacuations, <sup>by being in power &</sup> on the effect of a forming crisis, & not a cause of the crisis.

Sect. 31. <sup>th</sup> varieties in fever. There is not any fever from which is regular. It is only when the deviation is considerable that it is called an irregularity or variety. Besides the different types there are many varieties of fevers. When fevers approximate very near to each other, they are called regular, when a considerable deviation is observed, it is a variety.

The principal varieties of simple fever founded on the unequal affection of the system, the lines are not distinct. First, the animal system is particularly affected. Symptoms -

First the brain is particularly affected. or in consequence  
consequently evolution is impeded. in consequence of  
which tremors take place & contraction of muscles  
spasms. - great prostration of strength; pulse great  
& small; skin dry - tongue dry with a thick coat  
to be furrowed over. - These symptoms occur in the  
fever, but they differ in their rapidity & source.  
This is called typhus. Mild or granular typhus  
more severe when the patient is most prostrated  
& the tongue most furrowed. This called typhus  
nitidus. - Second. The chyliferous vessels  
particularly affected. Symptoms. The coat  
upon the tongue is thicker & always constant. It is  
coat very thick; but less than in other fevers -  
Great oppression of the chest - nausea - vomiting  
of mucous mucus with bile, which at first is yellow  
after a long time becomes green - fulminant of the ob-  
-dormant for considerable time followed by diarrhoea  
of brown & sometimes of a green colour - If a little  
be put into a vessel of water, you discover the colour  
yellowness of the skin. - Then on the gastric  
symptoms. Sometimes when you succeed in removing  
these symptoms, you remove the disease, but not  
always

Which circulating system particularly affected. There is difficulty in forming an opinion on this point.

Symptoms. Pulse small & rapid; but other parts of the system are not affected in an equal proportion. He can for a short time attend to his business. - The secretory system is also affected as the skin becomes dry. - Tongue denuded, It is not a bilious inflammation or typhus; but is called slow nervous fever. -

Howev<sup>r</sup>, the powers of visce affinity particularly affected, as is manifest by the tendency of the fluids to putrefaction. Symptoms. The contents of the stomach very coarse in large decomposition. After death, the solids & fluids undergo this change sooner than parts made of other viscous. Ardent heat, & acrimony - The putrefaction is greater than in typhus. - The pulse is soft & rapid, often full, but not hard. - The proper secretions do not take place, - The fluids are crude not undergoing their proper changes. - see blood flows out - the vitality of the blood is lost; it is exhausted under the skin -

It seems the want of power, this disease has been called catarrhus, or putrid fever. - There are other varieties, but they are perhaps less distinctly marked - which are infectious, & other comp. said, or local fevers, & pain

& oppression of the parts; the mind is also  
deranged. There is a variety in the degree with  
which it is affected - Inflammation is some-  
times violent, & then slow in its progress - Pain  
serves as a mark of inflammation - There is  
a sense of weight & uneasiness according to the  
degree of congestion, & if this is violent in the  
brain the patient becomes comatose & even  
epileptic - There is also sometimes congestion  
in the lungs, which interrupting the functions  
of the brain occasions madness - This obstruction  
or congestion is irregular; - if the state of the  
skin is interrupted in its function, it causes  
& determination to some particular internal  
part - (Ornström's work upon irregularities  
may be consulted) - Once more, one part of  
the system may escape, when all the other parts  
are affected - In this case the medicine may  
not have its effect upon the disease, but spend  
all its force upon the unaffected part -  
Hysteria is mentioned by Foreyer as another  
cause of irregularity - A little affection of the  
stomach brings on convulsions, affection of mind  
supplies &c - When hysteria occurs it embarks

the physician, it being difficult to manage —  
 this occurs more frequently in females than males.

You would suspect spasms, convulsions &c as  
 symptoms; but globus hystericus is the most  
 characteristic of ~~the~~ hysteric. — All these  
 opinions are not correct they enable us to form  
 some distinct ideas of Fever —

Irregularities in Intermissions. All they  
 are not very more than two hours, they are  
 not irregular; but if they occur at shorter  
 periods, or very more than two hours, or appear in  
 50 hours they are irregular — Why on occasion  
 they are prolonged, & then to more than 50 hours they  
 are irregular —

Lect. 33<sup>th</sup> Epidemics — These occur  
 perhaps once in 2 or 3 years, & there appears  
 to be an regular succession in their occurrence.

Causes — Rather than acknowledge ignorance  
 men will assign a variety of causes for epidemics,  
 & they look to the miserable state of the world  
 it is said that hot or some particular season  
 have a tendency to produce epidemics, but the  
 influence is refused the most even by their countries

through means of different characters, & the  
cause has been imputed to the food which we  
take if it has been bad or unhealthy — Mr.  
Webster supported the view that they occur  
with the appearance of the comets — This opinion  
has not been without its advocates —

It is also said that exhalations from  
the earth produce epidemic fevers — Grant  
this to be the cause, we derive not benefit  
it, as the cause is not known till we see  
the effect — The causes are finally unknown  
Some contend that they have a particular  
character, — Symptom that they excite  
& convert other diseases into the same —  
All <sup>those</sup> who have the predisposition, on being  
exposed to the exciting cause, will have  
the disease; but if they are not exposed to  
the exciting cause, they will not have the  
disease, although possessed of the predisposi-  
tion — That every disease has a specific char-  
acter in epidemics, cannot be established —  
Although there may be some symptoms which  
resemble each other, there is a difference in  
the characters of the disease. & this is not

a difference in degree, but there is a specific difference in the character of the disease & many varieties in epidemics. — If there is a specific character in epidemics, a uniform mode of treatment might be proposed, but as this is not the case, this routine of practice is not to be adopted. If a case should happen out of the common course this mode of treatment would fail & we be left without a remedy —

Fever, common in summer & autumn in our climate — In summer or about July diseases of the gastric organs appear. Symptoms, heat, prostration of strength & they continue 2 sometimes three weeks & as the season advances they assume the form of a regular fever, & continue three or four weeks — they are of a typhoid kind

Epidemics of a more violent nature are called malignant or yellow fevers. — This type is intermittent — The epidemic that prevailed in this vicinity was continued — The hot stage violent but not uniform — The patient was checked & sweat down immediately —

When it violent inflammation of the brain  
or intestines, the skin becomes yellow, from  
which it derives its name, but is not char-  
acteristic of the disease - The black vomit  
or the discharge of matter resembling coffee  
grounds, is considered characteristic, but is not  
in all cases - Has been examined by Dr.  
Wenroft & others - Spotted Epidemic  
The first attack is violent, but becomes less so  
afterwards - The excess & cold stage occur successively  
at once & extremely violent & life is destroyed  
The hot stage more mild - This disease has been  
very mortal, but at present not so much so as  
formerly - Symptoms, There is commonly some  
local affection, & congestion of the brain, dis-  
tension of stomach, misery & lungs - (Detection of pulse  
but <sup>are</sup> not characteristic) of the disease, as in yel-  
low fever - Sometimes erysipelatous inflammation  
appears -

Spec 34<sup>th</sup> Prognosis - It is observed  
if the whole disease be mild the prognosis  
will be favourable - The symptoms may however  
be severe & the prognosis favourable - Milder  
is not always to be considered unfavourable, nor milder



more favourable unless the whole system is in the  
 state - Unfavourable when there is great pain  
 and depression, the mind impaired, the coun-  
 tenance sallow & a peculiar expression, if  
 the pulse is feeble & frequent in the crisis & late  
 stage, it is requires attention, more particular-  
 ly the frequency - if one part of the body is hot  
 & another cold it is unfavourable, also if profuse  
 & frequent evacuations with sinking, but if relief  
 is obtained by these evacuations, favourable -  
 when the skin is dry & the appearance of the body  
 changed it is very unfavourable - when  
 the evacuations differ from those in health, or  
 when they are composed of but one kind of matter  
 as of blood, bile & without any mucous, they are  
 unfavourable, except on the mucous membrane when  
 they should be pure mucous, also when there is an  
 appetite for animal food, unless the disease is  
 mild, abstinence of spirit for drink if long contin-  
 ued, as the organs on them discharged animal func-  
 tions if not affected to a great degree - when the  
 pulse is on small, feeble & frequent, when the  
 colour is inconstant - disposition in the stages, &

when the cold stage is prolonged & the hot does not follow, when complicated with some local affection or hemorrhage & inflammation, danger is proportion to the importance of the organ affected, worse about the head & in the abdomen - Likewise in proportion to the violence of vomiting & kind of affection. - Every thing that manifests great action in any of the vital organs -

#### Diagnosis & Treatment of Pleura -

Many suppose that by administering remedies to arrest <sup>the</sup> disease you thereby interrupt the salutary administration - The practice of giving medicine every hour or half hour is improper but a proper quantity at an early period is proper - Respecting Treatment look first to the proximate cause - The remote cause may be removed & not the disease, in order to remove the disease the exciting cause must be removed -

Doct. 35<sup>th</sup> Treatment of a simple continued fever. After a fever has commenced at an early period it may be arrested. - It is therefore not a specific disease. It is not always in an early period that we can arrest the disease -

it may be checked - The period in which a fever may be checked is often only four days. Any means of a violent nature may succeed in removing grinding fever, but it is not safe or sure. Evacuations have generally been employed for this purpose - 1<sup>st</sup> Bloodletting

This is the most general & the simple fever it is not generally useful - But this fever should be distinguished from that in which inflammation is combined, in this case it may be explained had proven too - 2<sup>d</sup> Evacuation

This as an evacuation is useful, as the internal organs are relieved by opening the extreme vessels.

It is however not to be relied on with certainty. as it does not always remove fever - In some cases relief is obtained, in others it is not - It favours the ancient theory, by supposing that it throws off the concentrated & superabundant matter - Sweating is used as a secondary remedy when the hot stage does not follow the cold - The best method of promoting sweating is by combining moisture with heat -

by placing the patient in a horizontal bed with no more clothing than what is natural - When there is dryness of skin & heat by removing the temperatures by administering medicines which cause &

little short of producing nausea. Internal use  
must be slightly aromatic, rather than  
viscous liquid - opium may also be combined  
with nauseating medicines. 3<sup>rd</sup> Vomiting

By this evacuation you promote secretion - As  
an evacuation it is not so powerful, nor so easily  
managed as bloodletting - It is not a natural  
or evacuation in health like purging; but this  
does not militate against its use, as it may be  
natural in disease and in infants - It is better  
that offensive <sup>stomach</sup> matter be thrown from the stomach, than  
that it should be carried through the whole system.  
Some contend that the stomach is the seat of the vital  
force vomiting is necessary; but this is not ortho-  
dox - Its principal efficacy probably arises from the  
presence of irritation - The stomach being an organ  
susceptible of strong impressions, & acts upon the  
whole body by sympathy & produces a change through  
the whole body - Hence it is that such powerful  
effects are produced from this organ. Subjects  
differ with regard to the ease of producing vomiting  
owing to a peculiar idiosyncrasy - Produced even  
when there is a great load or disorder in the stomach

It is sometimes necessary to evacuate the intestines  
 first, the skin also is to be attended to - Physicians  
 differ with regard to effects produced by emetics  
 & other medicines - This you should enquire into  
 before you discharge your medicine - Or else, read  
 some more on this subject than others - 1<sup>st</sup>  
 Portwine of Antimony & 2<sup>nd</sup> species - the effects  
 are limited to the stomach - Antimony is the  
 most powerful of the emetics, & affects the whole  
 system, therefore the most severe in its operation, &  
 gives the greatest distress - some however will be  
 longer down than others - Species affects the sto-  
 mach only - Hence when the disease is violent  
 & the patient strong Antimony may be used -  
 but when the disease is mild & patient feeble  
 Species will be preferred - but in general they  
 should be combined, Physicians differ, with  
 regard to the effect, whether it ought to be mild or  
 powerful. But my opinion is that a powerful  
 emetic is the most salutary - The patient should  
 be informed of the necessity of using this power-  
 ful remedy - One emetic is not always sufficient  
 It is therefore necessary to repeat it on the second or third

day, sometimes on the same - This is caution in  
using, in delicate habits in administering <sup>powerful</sup> ~~drugs~~  
It is not always necessary to give large doses as in  
Antimony gr ii or iij sometimes only i. gr -  
Opium from gr 40 to 60. -

Rect. 35<sup>th</sup> - Purging - More powerful  
an evacuation than vomiting - employed  
for the discharging of fecal matter from  
the bowels - As a general rule the contents  
of the bowels should always be evacuated -  
This not always so easily effected as is imag-  
ined, as the nurse is frequently deceived with  
regard to the matter discharged, leaving the  
natural feces retained in the rectum - This  
necessary <sup>to see or</sup> to be performed by an experienced nurse, the  
quality or appearance of the matter discharged. This is  
a necessary evacuation through the whole course of the disease  
Now may sometimes omit the fever by purging, but it is  
superior to vomiting for this purpose, yet it is a powerful ex-  
citatory - Give the cathartic before the vomiting & then you get  
their due effect - Employ the sub. muc. calomel alone  
but then or not sufficient alone, they may be followed by  
several salts - Then or not loosen given acid property -

Thus, bloodletting, persweating, vomiting & purging are the  
only sure evacuations we can use—

Another mode of arresting fever, is by external  
applications— This by cold water, or other liquors.

These may be used at a later period of the disease—  
they may <sup>now check</sup> ~~arrest~~ the, but not arrest the disease—

We should therefore attempt to bring on a crisis—

In after the second week, we cannot stop the fever—

After the early period the evacuations should be used—

The remedies should now be used, that promote crisis,  
called alteratives, by changing the action of the exten-

sives— These are preparations of Quicksilver, Antimony,

& Opium— When these produce a violent action, a

little opium may be combined— If Antimony begin

to the amount of  $\frac{grs}{ij}$  it produces nausea,  $\frac{ss}$  vomiting—

Should therefore begin with  $\frac{ss}$  & increase it by de-

grees, by which means you can administer it often,

& in greater quantity, without producing vomiting—

If it produce purging, opium may be given— After

taking it a few days, it produces a Lensor, which is not

named, in this case the disease is worsen— You

may then diminish the quantity & frequency also—

After an intermission of 2 hours begin again gradually—

200  
Opium may be given to show that cannot bear  
Antimony - 3<sup>rd</sup> Quinine, if it produce a sore  
ness of the mouth, it indicates its good effects -  
It is not so easily managed as the other articles  
It is also very uncertain in its effects - When admin-  
istered, 100-2grs of Calomel may be given in 24-  
hours - Excepting these, there are no medicines that  
produce any marked effect, all long others are  
used - The opotone, & other tonics in general are  
of no effect in shortening the disease -

2<sup>nd</sup> Of Intermitents simple - It is obvious that  
something should be done during the intermission -  
It has been discovered that the opotone, will cure  
the disease - Some caution is however, necessary in using  
this remedy - The stomach and bowels should first be well  
purged; then give the opotone, - It produces the best effect  
when used after a violent fever, but gives less as you  
continue its use till it is finally lost - Quantity, not less than  
ʒi - Time, commence as soon as the fever <sup>has</sup> ceased,  
and continue till the hour for the next fever to com-  
e - The dose should be long, at first & less at each  
succeeding dose - Should be continued some time after the  
fever has ceased - Guard against the exciting cause, of <sup>preventing relapse</sup>



Lect 34<sup>th</sup> The expectation is preferable to any other  
medicine in this Fever; but this sometimes fails -

From a difference in the quality of the bark - The  
red bark is generally considered the best - The yellow  
was at a time thought preferable to the red - The  
bark often fails, from its being of an inferior quality -

The situation &c. of the Patient must be attended to -  
There are substitutes, which are frequently used for the  
bark; as 1<sup>st</sup> the vegetable tonic & astringents - 2<sup>d</sup>  
the Opium, but the practice of using it is not recom-  
mended - 3<sup>d</sup> Charcoal has been used in the same man-  
ner as the bark, and succeeded - 4<sup>th</sup> Minerals of  
Iron & copper, preparations of Arsenic, also have been used  
with in their effects, on occasions next to the bark -

It being generally used after the bark, we are not  
surprised in ascribing the whole of the effect to the  
Arsenic, consequently cannot say that its powers are equal  
or superior to the bark - It is not dangerous if proper  
care be taken in giving it - The preparation is the powder  
Mineral solution, or Arseniate of potash - The effect  
is best obtained by first giving it twice a day afterwards  
three times - Very small doses should be given at a time  
Begin in adults with 4 drops & increase to 8 or 10  
grains, is produced - then suspend until the remission is gone

After he finds the number of drops that will procure  
nausea, let the number be diminished  $\frac{1}{2}$  grs. It  
sometimes affects the eyes - It should be given in  
 $\frac{1}{2}$  or  $\frac{2}{3}$  water, which should be pure without any  
soluble substance - In this way the paroxysms will  
disappear, but the medicine should be continued  
or 4 days after the paroxysms have ceased - The bark  
does not act altogether as a tonic, or than on others  
in tonic effects power, which do not procure the effect  
The arsenic does not act as a tonic, and cures the disease  
External Remedies - Plunging into cold water has  
near the fear - When act upon the imagination -  
Tinct. of Opium, camphor and bark applied to cold  
skin, have been used with success - When the stomach  
will not admit the internal use of these medicines, the  
external application may be used by rubbing in Tinct.  
of Opium or bark once in 2 hours from  $\frac{1}{2}$  to  $\frac{2}{3}$  at  
a time - In the employment of the arsenic, not so  
great regard is to be had to the crisis, as in the use of  
the bark - The stomach should be in a proper state  
when the paroxysms are imperfect, the cause of the imper-  
fection should be removed, which is generally in the stom-  
ach & bowels. In this way they will become more perfect -

Diet and Regimen, in both intermittents and continuas  
 Always take those substances into the stomach which  
 can assist of digestion - Vegetables rather than Animals  
 When nothing can be digested give those substances that  
 will pass easiest through the canal without irritation.  
 They should be vegetables as they ~~are~~ are not so irrita-  
 ting as animal, if undigested - They should be given  
 in a liquid form, as in this form they pass the canal ea-  
 sily if undigested - Therefore we give vegetables in a  
 liquid form - fruits also which are grateful to the patient  
 Those substances that affect the whole system, or stim-  
 ulate not on the vascular system and skin, should not  
 be used, except in a convalescent state -

The Rules as to diet vary as the disease advances  
 Attention should be had to his appetite, when that returns,  
 the probability is that his stomach will digest whatever  
 the appetite craves - Food should not be given, when there are  
 foreign substances in the stomach, unless because the patient  
 has been sick 3 weeks - Cordials in the early stage of the  
 of the disease should not be given; but after it has passed  
 its acme, they may be given in small quantities - When  
 the time the patient begins to be convalescent, the mildest  
 cordials may be used in small quantities - As of cyder,

of sporadic or 2 or 3 times till he becomes weary of this  
When some other cordial, or a little foreign wine -

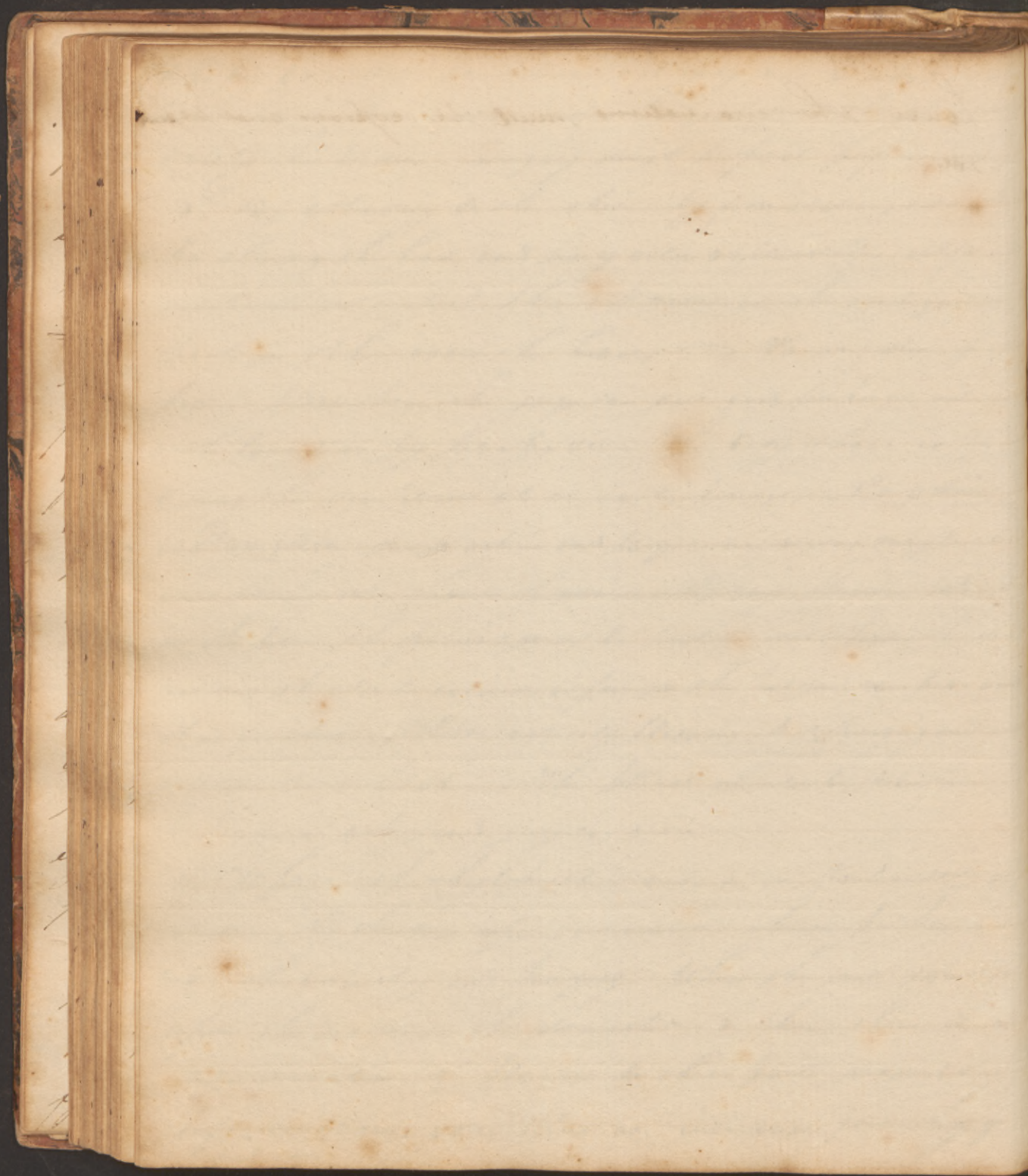
In Intermittents, food should be taken 4 hours before  
the paroxysm takes place, and at the usual time, as the  
stomach will then best digest the food. - If the inter-  
missions are perfect, take such food as will afford  
the most nourishment. - The cordials will enable the  
stomach to bear the work better, and give him firm-  
ness &c -

Lect. 38.<sup>th</sup> Regimen. When the patient becomes  
so unwell as to be under the necessity of lying down,  
he should lay aside his bodily clothing - His bed  
clothing should be adapted to his feelings, provided  
he has judgement to direct, which is not always the  
case. If he becomes uneasy, you conclude it will  
prove to great a quantity of cloths, therefore you must  
remove them as your judgement shall direct -

The air should be kept pure, and the room well ven-  
tilated, especially if small - Much company should  
not be admitted, as it has a tendency to render the air im-  
pure - The temperature of the room should be kept  
low, when the patient that would render it comfortable to  
a person in health, in order to make it comfortable to  
him in bed - In the cold season when temperature may be

at 50 or 60° of Fahrenheit — Even in a convalescent  
state, he should be kept from company, as much as possible,  
and also from all conversation of importance, or which would  
excite interest —

Treatment — When active measures are forbidden  
either by the late period of the disease, or by any partic-  
ularities of the case — then when acute the patient should  
be supported by food of the mildest kind and consist of  
gruel — Tequila one of this class — therefore should be  
administered — Cordials of such a kind as are congenial  
to the patient — When no active measures are necessary,  
You should give medicine of a mild and safe nature  
merely for the satisfaction of the patient — which has some  
sensible efficacy — As febrifuges with cooling end or  
emetics — Third, here for the treatment must be  
modified in the execution of plans. — When there is a de-  
termined inflammation to any particular part — Demulcent should  
be employed, by which it may be removed & relief obtained  
1<sup>st</sup> When the animal system is particularly affected  
When there is a violent congestion in any important organ  
General evacuations — 1<sup>st</sup> by bleeding from a large vessel  
until the patient is relieved, or six to from <sup>parts</sup> 10 to 20  $\frac{1}{2}$   
The force of treatment should be regulated according to  
the force of the disease —









When song the wondrous hidden power  
They saw with vast attention heard  
While gorges cease to flow  
Down then at once might I had seen  
The gentle mystery what miracle  
I may be happy too  
Down now how angel like me when  
No let distant lower who unknown  
No distant was distant  
Thought as she where of nature  
At a fly to meet I might know  
And was she joyful when

