

Wait, Richard. Information relative to
the Pestilence in Worcester County (Mass)
Called the Malignant or Spotted Fever,
in Communication from Dr Richard Wait
of New London (Conn) to Dr Kuller
dated Mar 22, 1810. PP 391-402,
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MEDICAL AND PHILOSOPHICAL
INTELLIGENCE.

INFORMATION relative to the DISTEMPER in Worcester County, (Mass.) called the MALIGNANT or SPOTTED FEVER: In communications from Dr. RICHARD WAIT, of New-London, (Conn.) to Dr. MILLER, dated March 22, 1810.

SIR,

I INCLOSE you a valuable document, and hope to see it embodied in that great national work, the Medical Repository. Originally appearing in a village gazette, it may have a limited circulation; and productions of merit, when committed to the light ephemeral sheet of news, hardly survive the revolutions of a year.

That singular and fatal disease, denominated *Spotted Fever*, is making its appearance in every part of our country, and it seems as if the prediction of an American poet, when describing the precursors of the final judgment day, was about to be verified:

In every blast the *Spotted Plague* be driven,
While angry *Meteors* shoot across the heaven.

From a Worcester, (Mass.) paper of the 14th instant, I transcribe the following:—"The remote causes of this disorder are said to be improper or putrid diet, *corrupted grain*, a too free use of those salts which dissolve the blood, putrid miasmata, &c. It has always raged in the winter, after seasons which are unfavorable to the productions of the earth. The corn was, in many places, killed by the frost last year, and of course it cannot be so wholesome as when it arrives to maturity. We have lately heard of several animals having been killed by eating *mouldy corn*; it is also destructive to human beings. European writers have given accounts of very fatal consequences which have resulted from blasted, spurred, or otherwise damaged rye."

I remember having read in the newspapers an account of a number of horses dying in Newark, (N. J.) a year or two ago, in consequence of eating mouldy corn.

MASSACHUSETTS MEDICAL SOCIETY.

At a meeting of the Counsellors of the Massachusetts Medical Society, on the 7th of February, 1810.

VOTED—That a committee be appointed to collect information respecting the history and treatment of a malignant disease, commonly called SPOTTED FEVER; which is now prevailing in the county of Worcester, and has prevailed, within five years past, in Hartford, Connecticut, and Providence, Rhode-Island, and report at the next meeting of the Society, or Counsellors.

DR. FISKE, } Committee.
DR. PAINE, }

From the Records,

JOHN C. WARREN, *Rec. Sec.*

N. B. Any communication upon the above subject to the committee, or to Dr. THOMAS WELCH, *Corresponding Secretary of the Medical Society*, at Boston, will be thankfully received.

March 1, 1810.

Letter from the Rev. FESTUS FOSTER to the Editor of the Worcester Spy.

PETERSHAM, March 6, 1810.

SIR,

I hasten to give you a sketch of the *Spotted Fever* in this place. It made its first appearance about the beginning of January last, but the instances were few and distant from each other, until last week. Although it had proved fatal in most instances, seven only had died, belonging to this town, previous to the 25th of February. Since that time, the disorder has come upon us like a flood of mighty waters. We have buried eight persons within the last eight days. About twelve or fifteen new cases appeared on Thursday last; many of them very suddenly and violent. This was the most melancholy and alarming day ever witnessed in this place. Seven or eight physicians were continually engaged in the neighborhood north of the meeting-house, and I believe not one half hour passed in the forenoon without presenting a new case. Pale fear and extreme anxiety were visible in every countenance. The faculty themselves felt their situation in being called to encounter an enemy with which they were little acquainted, and before which

their late brother in this place had so suddenly fallen.— They, however, manifested great skill and presence of mind, and, fortunately for us, adopted and strenuously pursued, that mode of treating this disease, which, they since learn, has best succeeded in other parts of the country. By these means, most of the patients whom they seasonably visited, are, by the blessing of a merciful God, yet alive, and hopefully on the recovery. The number of cases which now require medical assistance in this town, is about twenty, most of which are nigh the centre. I know of no case which is considered desperate. It is with pleasure I inform you, that we *hope*, though we dare not *believe*, that means have been, or soon will be discovered, to prevent the mortal effects of this malignant and alarming disease. The faculty have been so incessantly occupied, and so anxiously watching the success of their experiments, that they have not found leisure to make any communications to the public. So soon as their experiments shall be matured, they will, we presume, publish the characteristics of the disease, and the most effectual method of cure. It seems to be very generally agreed, that there ought to be no evacuations, but by external applications produce free perspiration, and internally apply the most powerful stimulants.

From the same to the same.

PETERSHAM, March 9, 1810.

SIR,

AT the request of a number of persons in this town, the gentlemen who have attended as physicians in the epidemic now prevalent among us, have made a general account of the symptoms and treatment of that most formidable disease. The success which has attended their practice, clearly evinces the general principles which they have embraced, to be correct. Should the disease continue to prevail, a further investigation may, probably, much improve their general system. The internal application of powerful stimulants was adopted, not from any previous knowledge that they had been tried and found successful, but because other means which had been employed proved ineffectual. We have been happy since to learn, that the method here pursued has been found the best remedy to this disease in Connecticut, and distant parts of this state. Believing that if the epidemic should appear in other parts

of the country, a knowledge of the method here pursued, and the consequent success, might be satisfactory, and possibly of the highest advantage to a distressed and afflicted people, you are requested to give publicity to the "Account" which I herewith transmit to you.

Some Account of the Symptoms and Treatment of a singular and fatal Disease, commonly called the Spotted Fever, which has made its appearance, and now rages in Petersham, in the county of Worcester, and some other adjacent towns, particularly the town of Dana.

The following are some of its characteristic marks, as it has fallen under our observation. It begins with shifting pains in different parts of the body, most frequently in some of the limbs, often in some of the larger joints, as the knee, the hip, or the shoulder, shifting from place to place, and frequently to the head or stomach, and often from the one to the other of these last-mentioned parts, with a sense of universal uneasiness or restlessness.

These symptoms are accompanied with cold shiverings, and other marks of fever, which are soon followed by a remarkable and general prostration of strength, and a depraved action of the sensitive organs. In some violent cases the sight is much impaired, and even totally, though temporarily, lost.

The eyes appear sometimes dead or glassy; but at other times, especially during the progress of the disease, they appear red or suffused. The pupil is frequently more or less dilated; but sometimes contracted to almost a point; and sometimes these states alternate with each other. The tongue has been invariably covered with a whitish coat, and moist.

The pulse is generally a little increased in frequency, remarkably intermittent, and between the intermissions unequal both in strength and quickness; but in some few mild cases it is very little altered.

There is generally great distress at the stomach, with nausea, and for the most part some vomiting.

Respiration is in all cases much disordered; but the labour seems to arise rather from the difficulty of inflating, than from any infarction of the lungs, as there is no cough.

Petechiæ, or livid blotches, or a red fiery eruption, some-

times in clusters, and sometimes in large and distinct pustules, in most cases, appear on the surface of some parts of the body, and sometimes they are general. These pustules most commonly break, discharge a little thin watery fluid, and then dry up; but sometimes they maturate, forming ulcers, which may not heal till after recovering. But neither the spots nor the eruptions are inseparably connected with this disease. But when the eruptions do appear, they are attended with much itching.

Consciousness, especially in adult males, sometimes remains to the last unimpaired. But in females violent hysterical symptoms, with high delirium, have, within a few hours from the attack, supervened. And in young children a stupor sometimes comes on soon after the vomiting, which announces the approach of the disease, and continues till death.

In regard to the prognostics in this disease, our observation enables us to state, that from those cases attended with petechiæ, few recover; whilst those accompanied by an early eruption, more generally and more safely get through the disease.

The duration of the disease is to us uncertain. Some have died within twelve hours, others within twenty-four, from the time of the attack; while a large proportion of others have had the violence of it broken within forty-eight hours, when it run into the form of a mild typhus of uncertain duration.

In the treatment of this most formidable, and too often fatal, disease, the experience we have already had, warrants us in stating, that while its rapid progress, especially in its most violent forms, deprives us of all hopes of success, from the use of mild alterative medicines; so its peculiar nature, forcibly interdicts the employment of all drastic remedies, which may produce any great degree of depletion of the system; and thereby sink the patient irrecoverably. An injection of milk and molasses, with a teaspoonful of common salt dissolved in it, has induced strong spasms. An emetic of spruce with a grain of tartrate of antimony, operating only once upwards, and once downwards; likewise a dose of sulphate of soda, producing only two moderate operations downwards, have each of them, in hale young men, reduced the pulse from an hundred, down to forty-eight strokes in a minute. From these facts, it is easy to conceive how cautious we should be in the use

of emetics and cathartics in this very singular disease. If, however, at the beginning of the disease, there be a troublesome puking, a few grains of Ipecac. or warm water, may be drank to clear the stomach, and check that symptom; but an opiate should immediately follow the operation.

The only safe and efficacious mode of treatment, which has occurred to us, consists in the bold and liberal use of the diffusible stimuli, proportioned to the violence of the disease, together with the employment of the several means of powerfully determining to the surface, and in keeping up that determination in proportion to the exigency of the case, till relief shall have been obtained; and at the same time exciting the action of the brain, by blisters applied to the temples and nape of the neck, and by ether and other stimulants, applied to the head.

The diffusible stimuli employed by us, have consisted chiefly of brandy, opium, ether, volatile spirit, and camphor, and in some hysterical cases the pure oil of amber: and the means of determining to the surface, have been the employment of warm bath, followed by the assiduous application of stupes wrung out of a solution of salt in hot vinegar or water, and applied to the extremities and stomach, and kept warm by hot stones or bricks, or billets of wood, taken out of boiling water, and placed round the patient; together with a free use of an infusion of snake-root and saffron, or pennyroyal, with such of the above mentioned diffusible stimuli, as appear best adapted to the case, and frequently supped warm. By these means, a gentle and universal sweating is induced, and should be continued until the disorder gives way.

To what extent the most powerful of these diffusible stimuli may be safely and necessarily employed, the following facts will shew. A young woman, aged about 20 years, who recovered from the disorder, being very violently attacked, and a high delirium with great distress supervening, took more than a quart of brandy, and not less than twenty grains of good turkey opium, aided by the above means of determining to the surface, in less than twelve hours, and before any material mitigation of her disorder could be obtained, and what is truly wonderful, without the least appearance of intoxication. Indeed, we have been obliged frequently to exhibit ten grains of opium for a dose in some of the most violent cases, attended

with strong spasms, and have never known it to produce stupor in a single instance.

In one instance only have we employed the lancet. A man about twenty-eight years of age, having been violently attacked, and attended by strong spasms; on the third day, his spasms having been subdued, was exercised with extreme difficulty of breathing, and great oppression at the breast, and exhibiting at the same a strangulated countenance, which symptoms appearing to arise from a surcharge of the vessels of the lungs, owing to their inaction, rather than their inflammation; sixteen ounces of blood were taken away, merely to restore the equilibrium. This had the happiest effect in relieving those distressing symptoms. But these symptoms returning on the fourth day, the operation was repeated, and with the same salutary effects. The blood did not exhibit the usual marks of an inflammatory diathesis, but on standing, remained destitute of the inflammatory buff, and its coagululum was of a loose texture and tender.

Out of twenty-five cases, which have been subjected to the above mode of treatment, only three have as yet proved fatal, and those were patients under four years of age. The others are in a hopeful way of recovery.

Great alarm has been excited on account of the supposed infectious nature of this disease. But for the consolation of the people we can say, that from the most careful observation we have been able to make, we cannot discover a single instance, in which it clearly appears, that the disease has been communicated from one to another by contagion.

And as we are of the opinion, that none CAN be affected by this disease but those in whom a CERTAIN CHANGE in the state of the body, commonly called the state of PREDISPOSITION, has been affected by the influence of a certain morbid quality in the atmosphere, which state of predisposition disposes the moving powers, upon the application of any exciting morbid cause, to produce those specific morbid affections which characterize this particular disease; and as we are furthermore of the opinion, that the only rational means of checking the progress of this, or any other epidemic, consists in removing the state of predisposition; and as the strong impression made on the system by the application of cold water suddenly applied to the surface, appears to be one of the most probable means of destroying this state of predisposition, by dis severing the chain

connecting those morbid affections; we cannot but strongly recommend the adoption of the practice of the cold bath, either by plunging, showering, or affusion, which may be employed three successive mornings, (the weather being fair) then omitting it three, and thus proceeding to the third time, as a most probable mean of arresting the progress of this malignant disease, and of preventing its extending its ravages.

ABRAHAM HASKELL,
MASON SPOONER,
JACOB HOLMES.

Petersham, March 9, 1810.

THE "SPOTTED FEVER."

[The following Circular has been addressed to Medical and other gentlemen, near the places where this epidemic has lately prevailed: But, as there may be others who may be able to afford information on the subject, to whom it has not been sent, we readily comply with the desire of the committee of the Counsellors of the Massachusetts Medical Society, to insert it in the Chronicle; with the request that gentlemen, either of the profession, or others, who may have it in their power, will attend to the questions, and transmit their replies to Dr. Thomas Welsh, Corresponding Secretary of the Massachusetts Medical Society, without paying postage—and we are authorized to say, that the committee are happy in being able to state, from the communications they have already received, that the disease is, at this time, far from being a mortal one; and that it is considered by their correspondents, as being under the controul of medicine as much as ordinary diseases.]

BOSTON, March 30, 1810.

SIR,

In consequence of the alarming extension of the very fatal disease, which is commonly called the *Spotted Fever*, the Counsellors of the Massachusetts Medical Society, have considered it their duty to investigate with peculiar care, every thing relative to the causes, history, and modes of treatment of that disease. They have, therefore, at their

meeting on the 27th inst. appointed the subscribers a *committee* to correspond with, and collect materials from the fellows of the Society, and other gentlemen of character, in whose vicinity the disease has prevailed.

As one comprehended in this description, we take the liberty to address you; and, in behalf of the Massachusetts Medical Society, we beg leave to request you to answer all or any of the subjoined queries. We beg leave, at the same time, to request, that if in any instance your replies are not founded on your own personal observation, but on information from others, you would do us the favour to notice from what sources such information has been derived.

It is the wish of the Counsellors that we should make a report to them on this subject, so interesting to every member of the community, as soon as the circumstances can possibly admit. We shall therefore be peculiarly obliged to you, if you will seize the first moment of your leisure to prepare your answer. We are aware, that your important engagements at this time, must render a compliance with our request very inconvenient to you; and, did we not consider ourselves as acting in behalf of the whole community, we should not feel at liberty to make our call upon you so urgent. Should you be able at present to give very concise answers to a part only of the queries proposed, at a future day you might add whatever else shall have been furnished by subsequent experience and inquiry.

It will be most convenient both to yourselves and to us, if you will refer to the number of each question, without recapitulating it, and reply to each distinctly, in the order in which they are placed.

1. At what time, and at what place, did the first case of this disease occur under your observation?
2. What are the symptoms of this disease, the order of their occurrence, and the most usual duration of each?
3. Have you noticed any precursory symptoms by which the approach of the disease can with tolerable certainty be ascertained?
4. Is the disease to be distinguished only by attending to the combination and course of the symptoms, or by any one or more peculiar symptoms?
5. Have any persons previous to the attack of this disease been subjected to any extraordinary fatigue, or exposure to irregularities or peculiarities of diet, or to any other circumstances which can be considered as exciting causes; and if

any, in what proportion of cases have such circumstances been noticed?

6. Have you noticed any circumstances which lead you to consider the disease contagious or infectious: or have you noticed circumstances which lead to the opposite opinion?

7. Are persons of any particular class or profession, age, sex, or temperament, peculiarly subject to this disease; or have persons of any particular description been peculiarly exempt from its attacks?

8. Have any particular evacuations, or other symptoms, marked the crisis of this disease; and has it, in any cases under your observation, been followed by affections of the joints or glands, by erysipelas or any other local affection; and what has been the termination of such cases?

9. Are there any symptoms in the early stages, or in the course of the disease, on which a prognosis of the event may be founded; and with what degree of assurance may such prognosis be formed?

10. Are relapses frequent; and do the symptoms differ from those of the original attack, either in kind or degree?

11. Do those who survive the disease recover speedily; or is there noticed any remarkable change in their state of health?

12. What mode of treatment have you tried or seen tried; and what has been the success of each mode?

13. What have been the external appearances on examination of the body after death; and at what distance of time after death have your examinations been made?

14. What have been the internal appearances ascertained after death by dissection, and at what period?

15. Have you, at any former period, seen the same disease, or any nearly resembling it?

16. Have there been any unusual diseases, or any unusual mortality among brute animals in your neighborhood?

17. Are there any other points on which you can give information, which appears to you to be material at the present moment?

In reference to the second and fourth queries, we beg to call your attention particularly to the following objects:—1. Symptoms denoting local affection of the brain, such as delirium, or any peculiar affection of the mind, spasms and convulsions, remarkable insensibility, deafness, unusual dilatation or contraction of the pupils, paralysis of any part of

the body, &c. &c.—2. Symptoms denoting affection of the stomach, or any of the abdominal viscera, such as increased tenderness, fulness or tension of the abdomen or any region of it; vomiting or purging, the nature of the matters discharged either from the stomach or the bowels, &c. &c. In reference also to the 14th query, we wish to learn especially the appearances in the head and stomach.

It is unnecessary to suggest to you as being likewise objects of attention under the second query, the state of the skin as to temperature, dryness or moisture, and as to spots of different descriptions which may be remarked on it; the countenance, and especially the eyes; the respiration; the pulse, whether dissimilar in different parts of the body; the urine, &c. Nor can it be necessary to state the importance of noting the stages, or periods of the disease at which any observations are made, or any remedies are tried. We may, however, remark, that as violent diseases have sometimes grown more mild in the latter part of an epidemic season than in the beginning, it will be useful to note at what part of the season your various remedies have been employed.

There are some other questions which might be added to those above, particularly respecting the soil and other circumstances of the districts in which your observations have been made; respecting the state of weather before and during the prevalence of the present epidemic; the diseases which have prevailed during the year past, the direction in which the disease now prevailing has been extended, whether this has or has not corresponded with the prevailing course of the winds, or with the ordinary lines of intercourse; respecting any thing peculiar in the grain raised last year, &c. But probably your time is now too much occupied to attend fully to questions on these subjects; and with your permission we may perhaps address you respecting them at a future time.

Shall we, in addition to other requests, beg you to inform us, if possible, once a week, or as often as you can, what may be the progress of this lamentable disease, within the circle of your observation. Your letters may be addressed and sent to DR. THOMAS WELSH, in Boston, whenever a direct conveyance by mail or otherwise can be procured; in other cases they will reach us less directly, but very safely, if inclosed to DR. OLIVER FISK, at Worcester.

With the most sincere sympathy for the sufferings to which you, and your neighborhood are exposed; and with great respect, we are, Sir, your obedient servants.

THOMAS WELSH,
 JAMES JACKSON, } *Committee.*
 JOHN C. WARREN, }

STODDARD'S Sketches of Louisiana and Florida.

MAJOR AMOS STODDARD, of the United States' Artillerists, who has been stationed several years on the Mississippi and Red River, is about publishing *Sketches, Historical and Descriptive, of Louisiana*. This work will contain about five hundred pages, and embrace a concise history of Louisiana, from its first discovery to the cession; the boundaries and extent of it—some account of the Floridas—a description of what is called the Delta, including the City of New-Orleans—of the country between the Delta and the Arkansas—of the territory about Red River and to the westward of it—of Upper Louisiana, or all that tract, particularly the settled parts of it, to the north of the Arkansas, and also some sketches of the interior regions—an account of the population, climate, diseases, soil, productions, natural growth, &c. &c. of the country—the nature of the Spanish government and laws, and the mode of administering justice—of the lands and land titles—of trade, commerce, and manufactures—of learning and religion, and the manners and customs of the creole inhabitants—of the extraordinary appearances of salt, mines, and minerals—of the antiquities—of the aborigines in general, and of the probability of one or more Welsh tribes in America—a description of the large rivers, and some observations on the state of slavery in that country.

History of New Netherland.

AMONG the early historians of the country, called, at the time of its settlement, *New Netherland*, and since comprehending parts of New-York, New-Jersey, and Pennsylvania, ADRIAN VAN DER DONK, has acquired a large share

