

AN
INAUGURAL DISSERTATION

ON
Dysentery
of

Warren & Simpson. Counties. Ky. (1857)

SUBMITTED TO THE
PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY
OF THE

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BY

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OF

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Within the last few years, Dysentery has prevailed extensively in our large districts of country, in the Middle and Southern States, and has very properly engaged a large share of Medical attention.

Although abler pens than mine have written largely about it, I feel justified in continuing the examination of the subject, from the fact, that there yet, exists the greatest variety of Opinions, as to its origin, nature, and treatment. During the months of June, July, August, and September, (1854) My Preceptors have been actively engaged in combating this formidable disease, and I have had daily opportunities of examining it in relation to its origin, nature, and treatment, and though my opinion may not differ

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from those of the Core of the profes-
-ion. They will form many of the
Journal Contributors of the present
day. - and, if, I give reliable facts,
that may strengthen a proper confi-
-dence as I conceive in the one,
and, lessen that too fatally reposed.
Sometimes in the other, I, shall, be
Compensated for my trouble -

I shall only speak of what, I
believe, to be the Cause, and treatment
of that Character of Dysentery, that
I have examined in this, and, the
adjoining County, where it has most
extensively prevailed - In order
more readily to appreciate the argu-
-ents, I shall, offer, in, Support of
the view I shall give, of its,
Origin and Cause, - It will be -

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Necessary to premise a few remarks upon the topography of the Country season Climate &c. - Warner & Simpson. Counties. constitute a part of that large Tract of Country in the Green River known, once, by the general name of Barrens, but, now covered with a low growth of Blackjack, Hickory and Post Oak. - The surface of the Country generally level, interspersed with districts of considerable extent denominated Flats, which receive during the wet seasons, the surplus water which falls and retain it during many weeks of dry weather, but dry up gradually until, finally the surface of the most watery districts are entirely dry, - as, during last summer and fall. - The soil of these Barrens, is a rich regulated loam -

underlain with an almost impermeable
red Clay, into which the Oxide of
Iron enters largely. The result of which
is, that large and small ponds are formed
in almost every sink, or low place,
requiring to be drained to prevent their
spread. These numerous Ponds which
are of such Convenience to The Farmer
for watering his stock, dry up, generally
during a dry season and expose their
filthy beds to the sun, and become
a source of Malignant Typh, of which
every intelligent Observer is aware, and
so much dreaded, are they, of late
years, that, the Farmers submit to the
greatest inconvenience rather than have
them near his House, when he can avoid
it. During the Spring and the first
half of June the Country was drenched

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With rain, every surface reservoir was full to overflowing, and the most luxuriant crop of vegetation known for many years existed in an almost mature state by the middle of July-

The warm season set in early beginning with May, and continuing without intermission to the middle of September. From the 15th of June to the last of September there was but one rain that wet the ground over an inch deep, with a temperature during the entire time, such as not even the oldest inhabitant ever experienced, ranging from 90 to 100 the greater part of the time-

From these facts I think the intelligent medical mind cannot resist the conclusion that malarial disease in some shape or other must have prevailed over

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This district of country, this summer,
and the facts in the premises will,
I think vindicate the correctness of the
conclusion.—

On the 18th of June, (after the rains)
the weather being very wet and warm,
the Cholera made its appearance in
Bowling Green, and prevailed during
some ten or fifteen days, affecting a
considerable portion of the population
lightly, and a small portion fatally.—
As the Cholera subsided, Dysentery and
other lighter and affections followed,
and continued with considerable force
until the waters were thoroughly dried
from the earth, in, and about Town.
When the Town gradually became as-
healthy as usual, it required no great
length of time for the Malarial

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Causes to subside. within and about Town,
much pains having been taken for
many years to remove all cause of disease,
by Macadamising, Paving &c-

The result was as the Malarial Theorist
might expect, within twenty five ~~days~~
thirty days after the drouth set in,
the Town and vicinity were thoroughly
dry, and disease altogether subsided.

The disease made its appearance in those
parts of the Country and neighbouring
counties, heretofore described as either
low and marshy or staided over with
Ponds, and prevailed with great
violence during the latter part of June,
July and August and the first
half of September. When, the Country
having become almost perfectly dry
The disease gradually subsided until

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The country was comparatively healthy—
The decline of the disease began, the
first of September during the most
intense heat of the season, and had
almost entirely subsided by the 20th.
The weather ~~still~~ being warm and
dry, showing clearly that it was
a disease of Malarial origin, subject
to the laws that control that ~~class~~
class of affections—

If I am asked why Dysentery, and
not some other form of Malarial
affection, was the result; in this case,
I could answer it by reference to the
fact, that diseases, universally
admitted to be Miasmatic, are very
various under different circumstances,
probably owing to some not very well
understood cause, or to some difference.

In the force, or strength, of the Malarial poisons. The various forms of Bilious fevers are ~~not~~ more alike than Dysentery and any one of them, For besides the discharge of blood, there is a close family likeness between them all, showing the identity of their cause, — It is not more at variance with the general characteristics of Malarial disease, that the Bowels should be the seat of its effect, as in Dysentery, than that the nervous and vascular systems should be in the production of a que and Fever.

A great variety of Theories, or Opinions, exist in relation to the Cause and Nature of Dysentery, which have very naturally led to a great variety, of Modes of Treatments, — One author ascribes it to

Animalcules, which being inhaled into the Lungs find their way to the Rectum and Colon, This is a theory upon a mere supposition, without any reasonable or demonstrable facts to sustain it, and would be unworthy of notice but for the fact that, a practice has been adopted to suit it in some sections of the country, which, if not positively injurious, must be utterly inefficent in grave cases, which indeed has been proved during the present epidemic, — It is to be regretted, that, a disease that prevails over so great a portion of the Earth and destroys so many thousands of our race annually should not be better enough understood by the Profession generally to have a settled Theory

and mode of treatment, Thousands
 are annually sacrificed to false Theories
 and false practice in part too, by
 Physicians. who understand and treat
 other diseases well - The apparent
 Topical nature of the disease and the
 success now and then, in mild cases,
 of simple domestic remedies, as astringents,
 and anodynes, have lead, at times,
 The regular Physician to the use of
 empirical means - The present Epid-
 -emic has been the death of the
 reputation of many Quack remedies
 by failing to be relieved by their
 Agency; while a proper treatment
 regulated by those principles deducible
 from the nature of the Cause and
 Pathology have been eminently succe-
 -ssful - I have said that the

Cause of Dysentery is identical, or similar in its essential properties and effects, with that to which we ascribe the Bilious fevers of this, and other warm Latitudes, and the inference I derive from this Theory, is, that, Dysentery should be treated in the main, upon the principles of other Malarial fevers. — In a critical Comparison of the pathological phenomena of Dysentery, and other forms of Malarial fevers we see such a general resemblance, as to leave but little doubt as to their identity in nature and cause. — In the present fatal Epidemic, the first indication of disease in the graver cases were general lassitude, indisposition to active exercise, heavy, dull, aching of Head, back and

limbs, slightly coated tongue, and quick pulse, with the temperature of the skin more or less increased, these symptoms existed in greater or less force, sometimes for twelve at other times twenty four hours: before the flux discharges commenced, generally but not, always there was soreness or tenderness, rather acute pains in the bowels. In the beginning of the attack there was more or less hepatic congestion, and derangement, with a slight yellow tinge of the conjunctiva— As the mucous and bloody discharges increased, the pains in the bowels increased, with all the other general febrile symptoms. The pulse full quick and strong, skin hot, whether moist or dry. perspiration easily induced and generally

occurring, sometimes during each twenty
 four hours at this, the second period
 of the disease, the inflammation of the
 bowels became the leading or prominent
 symptom, - discharges, that had been
 mostly mucous now changed almost
 entirely to blood, often of a dark and
 grumous appearance, with constant
 inclination to go to stool, attended
 with the most excruciating pains -
 As the disease extended upon the
 bowels the pulse often having been
 very full and strong began grad-
 -ually, to give way to become weak
 and quick, the skin that had been
 hot, whether dry or moist, now became
 cooler especially at the extremities with
 cold perspiration, with a little increase
 of these, death closed the scene -

No stimulation could long postpone the event for, the reason that gangrene of the bowels had taken place or that extent of inflammation ~~and~~ congestion which was inconsistent with any living function. - In many cases the phenomena of congestive bilious fever were prominent for some days without any indication of Dysentery; but in nearly every case of the kind, in the Flue districts, Dysenteric symptoms were ~~sure~~ to make their appearance, sometimes, after the violence of the febrile symptoms had so much abated that further medicine was thought unnecessary. even, after the patient was convalescent with good appetite, The Dysenteric symptoms, would set in with considerable violence confining the patient often many days longer.

It was remarked, in nearly every instance that in those cases, of Dysentery, ushered in by a violent Congestive Chill, that there was no return of any distinct Chill, whether Quinine was given or not. The force of the disease seeming to be expended upon the bowels.

The tendency this season has been to disease of the bowels the reason why, I leave others to determine. Here is a disease described as it appeared in this section and the points of resemblance to Malarial fevers are so numerous and striking as to establish in my mind at least, their common origin and the propriety of a common treatment, with such modifications as will adapt it to the one, single peculiarity, the inflammation of the

bowels. The success of the practice of my Preceptors in this disease, during four months, which, I had daily opportunities of witnessing gives me the greatest Confidence in its superiority over the mixed practices of so many of the profession. Their treatment consisted in, the first stage or first manifestations of disease, An. freely opening the bowels with a mercurial and fallap cathartic. which was repeated until free bilious secretions were established. - after this, Castor Oil or Rochelle salts, were used to regulate the actions upon the bowels, - just as soon as the pulse would bear it, which was generally in twenty four or thirty six hours. The Laxative was freely used and repeated as often as the fever

returned, it was their rule to keep the
 fever down without fail. as the
 safety of the lowels depended upon
 subduing the inflammation that
 progreeses so rapidly in the disease,
 before free bleeding to avoid congestion.
 from it, the liver was gotten in action.
 then, depletion could be carried to the
 proper extent by the lancet. safely.
 as it can be in congestive fevers, after
 the system is under the influence
 of Pusine - I think I know of some
 fatal cases from the too free use
 of the lancet. in the hands of some
 practitioners. - when the liver was in
 a torpid condition - congestion was
 increased and fatal results followed
 as a consequence. This will not happen
 in flux where the liver is under

The influence of Calomel- If there is a doubt about the condition of the liver, the bleedings should be left at a time, and be repeated at intervals to suit this view of the case.

The bowels were not harassed by purgatives, but were kept freely open and ~~never~~ suffered to be locked up for any great length of time by anodynes, it being essential that proper actions from the bowels should be kept up to counteract the inflammatory action that was going on there.- After the free use of the lancet purgatives cease to give pain by their actions.- Operations from the upper bowels, as the phrase was, always gave relief and were generally easy- Cold Elm. or Starch

injections were freely given, both with the view to assist the action of medicine and to cool and allay inflammation of the lower bowels. cups, or leeches were applied over the abdomen in the direction of the colon. Sometimes anodynes were added to ease and procure sleep - but never when they could be avoided, if there existed fever or inflammatory symptoms, when these had subsided they came in to answer a good purpose. The temptation to give anodynes is very great from the urgent demands of the patient for ease, and my own opinion is, that many lives have been lost by the use of this seductive remedy, which often lures to destroy. I know that

There is a great deal of importance attached to Opium, as a remedy in high inflammatory diseases. - And - undoubtedly is, a valuable remedy in many diseases of that character. But in the present epidemic, I am satisfied that I have seen fatal results follow a big dose of Opium. - So rapid was the progress the disease made that, the patient would be past all hope of recovery before the influence of the anodyne was off. We would not object to it in the more mild cases, but, believe it to be a valuable auxiliary - But I repeat, where the disease assumes so malignant a character, as the one I have been endeavouring to describe. The administration of it requires the utmost caution.

until the violence of the inflammation has been reduced. Ten hours of ease procured by a prompt anodyne, as the term was, has proved fatal by allowing the inflammation to make progress, while under the delusion that ease was safely.

The diverse opinions among men of eminence in regard to the efficacy of Mercurials, the Linctus & Opium, make it a matter of difficulty, often for the young Physician to adopt a particular practice in Dysentery, with any great degree of Confidence, that it is the best. In advocating the Mercurial mode of treating this disease, I know that I differ from some of the most distinguished Medical men in the profession. — They say

The Calomel practice is mischievous and often destructive and that, and that Calomel combined with Opium, gives the mineral an additional power for mischief. "But Mercury combined with cathartics often cut the disease short."

There is such a paradox in this recommending and condemning of Calomel that it is difficult to decide whether they are in earnest either way - Calomel alone or with a little Opium will not do but combined with Aloes, Scammony and the like, it is admirably suited to an inflamed bowel, especially if followed with Opium enough to stupify the brain. How long they permit the bowels to be locked up with this anodyne they do not tell us, but, there is one thing - we do know

that 5 or 6 grs of Opium will so
 Constipate the bowels that a large amount
 of Cathartic medicine is necessary to
 Overcome it within the next twenty-
~~four~~ hours after such an anodyne.
 That this contradictory practice should
 be attended with good results is
 what we are not authorised to expect
 and does not, or ought not to astonish
 any one that good medicines lose
 reputation in such bad associations.

When Dysentery prevails without
 any symptoms of Hepatic derangement.
 I am satisfied that the non Mercurial
 practice is better adapted to the treat-
 -ment of the disease. - But on the
 contrary when it is complicated with
 unmistakable evidence of derangement
 of the liver, Calomel, I think is

decidedly indicated. May it is indispensable to the proper treatment, in such complications. - Where the disease has assumed a low Typhoid Character we would not think of dosing a patient with Calomel, or of curing him with the lancet and purgatives. but would treat it as Typhoid fever for it can only be distinguished from genuine typhoid fever, before death, by the history of the case, As to Dysentery, or any of the forms of Intermittent fever running into Typhoid. I do not believe, and the post Mortem examinations bear me out in this assertion -

We should be able to make these distinctions. Not confine ourselves to any one class of Remedies