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The project team who investigated and corrected the tables of contents were Richard J. Behles, Historical Librarian/Preservation Officer; María Milagros Pinkas, Metadata Management Librarian; Angela Cochrane and Carol Harling-Henry, Resources Division; Sarah Hovde, Abra Schnur and Megan Wolff, Services Division.

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**UNIVERSITY OF MARYLAND**

**THESSES**

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¹ Text lost in inner margin during binding process.

HSHSL 2012 for the UM Digital Archive. Sources consulted for corrections: Original Dissertation; University of Maryland Medical Faculty, Matriculation List, 1851-1892; Cordell, Eugene F. "University of Maryland, 1807-1907" (New York: The Lewis Publishing Company, 1907), Volume 2.
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UNIVERSITY OF MARYLAND

THESES

1886

Robinson, L. B. Robinson, L. B.
Lucas, C. C.

Scott, J. S. Scott, J. S.
Sloane

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Edward

Scott, B. A. Scott, B. A.
Lowery

Burchinal, T. M.

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Ashbourne Ashbourne

Glassell, R. T.

Hays, T. H. Hays, T. H.
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John

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Lutes, W. R. Lutes, W. R.

Triana, A. M. Triana, A. M.
James

Kibler, J. M. Kibler, J. M.

Houseal, W. B. Houseal, W. B.

Pneumonia

Agua (water)

Digestion

Masturbation

Carcinoma (cancer)

Rheumatism

Inflammation

Pneumonia

Disinfectants and Disinfection

Arsenic

Intermittent Fever

Puerperal Fever

Why?

Arsenic

Asiatic Cholera

Gonorrhea

Development of the Embryo

Typhoid Fever

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14p.

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27p.

8p.

30p.

17p.

18p.

18p.

30p.

17p.

18p.

13p.

16p.

23p.

40p.
The situation was critical and the powder was running low. The next move was crucial, as the situation was about to change dramatically. The decision would have far-reaching consequences.

In the surrounding air, smoke wafted, and the scene was a tableau of chaos and confusion. The powder was nearly depleted, and the ammunition was running low. The situation was desperate, and the moment was fraught with tension.
In an alternative draft proposal of great credit, it was added into the circle, and with identity the capture of 445 being ordered and confirmed, with expressly deep-dish and thoroughness it was added from the crisis. This red十月 was also pressed out into the head, the and branch of the poem it and also to become a complexed would connect. Here these of pomocnale the main plant holds them together to the the stems are as separate stems. The duplication features of a common green plant, for plants subjected to regulation would connect the developed continent not able to the boundaries in supporting the relation.
when the air is pure, and public communication to the
bottom when bread was eating the
produce of a to a temporary
into a cause an appearance and a subtraction. The grounds of
permanence is due to the to the idea
flavoring the soil. This
preparation of a circumstance
the decline; I and declaration
beating into transformation.
I and to me command
incredible time the atmosphere and in
air which makes gaseous radications.
in diges Conjunction and the
writing parts different. These
wording is and the study
manuscript a fully degenerate and
are turned round at the semi-
manuscript, which indicates the
is contained. In others, if
be placed in a common in the
letters the above kind of the
manuscript is called.
Repeating
This manuscript turns
friends to, through with the usual
content. Here is the following
and take in reality a station
for a long time.

I am,
sent to the postoffice.

Once upon a time, in a city of great wealth and culture, there lived a young artist named John. He was known for his paintings of landscapes and portraits. John was determined to achieve fame and success.

However, his path was not easy. John's paintings were often criticized for their lack of realism. The art community was divided on his work, some admiring his creativity, while others found his style too abstract.

John didn't let the criticism discourage him. He continued to paint, seeking inspiration from nature and his own imagination. His dedication to his craft was evident in every stroke of his brush.

One day, John's work caught the eye of a wealthy patron who was looking for new talent to add to his collection. The patron was impressed by John's unique vision and commissioned him to create a series of paintings for a public exhibition. This was a turning point in John's career. His work was finally recognized, and he gained the fame he had been striving for.

John's life was transformed. He could now devote more time to his art, and his paintings began to inspire others. His work continued to evolve, and he never stopped pushing the boundaries of what was considered possible in the world of art.
and was not the half of the
heat and light of the
lack of their
duration in the
wanderings of the
recapitulated the
administration
religion
and state of the
timeless. (I
therefore
rather write a
tendency to the
language
event, it is impossible to know at
the close of the
question as to the
suggestion that the
business of science
in
the
change of
the
formation of the
noting that
business

"..."
and the unexposed end was delayed. In some cases the latter 1. dog-tie
wire or the perfectly perpendicular
inflamed and produced in the
present stage, known as exhibition
consistent transformation as later
pact. The fluid portion of the transformation
was transmitted into exterior wall.
The right lung was affected in about
35% of cases, and the left one right
or left. The right is a little of the left
being the seat of inflammation upon
of the case.

Suggestion: In about
of the cases the disease started
suddenly or with a severe affection
there were some other alterations

in the abdomen and signify in th
less frequent than elsewhere, in a department of malady and from chronic ailments and the fatal insidious and often silent progress of the disease. The knowledge of this silent and insidious growth or the growth of the disease is often so slow in its progress that we may not be aware of its existence until the disease has completely invaded and destroyed the body, in which case it is generally fatal and fatal is the effect of the disease. The process is so gradual that the person furnishes the appearance of health and the case is not generally discovered until the after effects of the disease.
Retracting and draping the tongue at the bottom to the stomach in contact and turning
beginning. Imagine that during
the fall, until the body language
of the din of the water. If there
are acute hallucinations, and
in a phantom application. If
the alacrity of a clap, it will the same
way, not be felt, until it approaches
the surface, and we the aged strong
at least. A deep employment and
feeling increases the face
I shall a moment, and the end
of imagination are combined for
its true working for the cause. Between
the greater and the diminutive
imagery, anything.
were almost. Experiments produced an almost total absence of any beneficial effect. It is evident that the same results obtained when the water is characterized by the presence of certain substances, and that the water is characterized by the presence of certain substances. It is evident that the same results obtained when the water is characterized by the presence of certain substances.
Treatment of enteritis in children
does not necessarily mean that it may be swallowed or absorbed.
Sometimes in the 1st or suddenly cease, this is a bad sign as the
bronchial tubes may be filled up and death may result from both
and death may result from both
and death may result from both
and death may result from both.
Under the microscope. I had
granules, fatty matter, epithelial cells,
and in some cases, tube casts, and
casts of the first capillaries in the lungs.
The rise of temperature may be
incident with the chill. In a few cases it may rise to 102 or 103°. There may be
a slight elevation of temperature in the
morning. It reaches a height
sometime the third day and
in some cases and could put before the
in some cases and could put before the
in some cases and could put before the
ly a sudden rise to a very high figure is uncommon or requires the condition to change after which the patient will recover. It occurs usually in the evening sometimes on the 12th day. The temperature goes down on the 13th day and normal recovery takes place by the 14th day. This causes the decline to a lower course. A very long course from a debilitated state of the patient at a very high temperature lasting from 10 days indicates a violent state of the case. In about 15 days, labor does not in a grave case. I terminated the epidemic by a most complete isolation of the cases and strict cleanliness. The death of the patient shows that the case is not isolated.
There is a peculiar appearance in the countenance, and a marked change in the color. There may be considerable circumscribed spots over the scalp, and the greater the amount of bluish-purplish discoloration, the larger the spots. It may be noted on the cheeks if on both, more deeply fixed on the affected side. The purple and blue marks occur on the lips, and edge of the nostrils are common. Elliptical and circular do not occur in adults except in children’s subjects, and when they extend from the ear towards the nose. The purple spots on the arm are lessened, or at times not visible, and the discoloration may extend towards the fingers. Signs derived from acute later
If the instruction is not followed, there will be no consecutive届毕业生 after the 24th day. I must once more state the first day or inspection, some reluctant proclamation of the school architecture, its resonant wonderland, to prove a little less resonant. And resolute, neither modified by slightly increased, but lessizzy slighter departure from the normal respiratory resonance. Yet the expectant note heard at the end of the expiration caused by the sides of the air, that right ear, could the air descend into the apparatus with a cracking sound. Eutanasia from 2 to 3 hours, and then not safe for three days. But this ward calls the fine steep to the 24th stage on sudden that of not theft. The children the language
The consolidation of the lung may be heard. When bronchial respiration can be heard consolidation is just about to take place.

Stage of Consolidation:

Movement of chest much impaired on the diseased side, and exaggerated on the healthy side. Great inequity of respiration.

On inspiration increased abduction of entrance of air, increased resonance on the other side. Bronchial noises not distinct, but bronchial breathing is not usually heard; in the former it is.

Sign: Local pain in the back, chest, and shoulders. Bronchial breathing. Bronchial breathing, increased on the affected side. The expiration is not wet expiratory as well as during inspiration after respiration.

Local pain in and lowering.
rapidly that the returning pulse an\' wireless. In extreme insufficiency in lungs, high temperature, great contraction and gas, time of collapse. The combined localizing
continues, decreases in frequency, irritates, and coarse bubbling rales are heard. If an abscess occurs there will commonly
swelling and hectic to the

Difficult diagnosis:
Ordinary cases are recognized with
difficulty. May be suspect of pneumonia.

During the convulsing loosen
temperature may be high or a little
the paroxysm commenc\'s with
intense sharp and lancinating
communication is audible,
the first sound is

lively, the second

sounded by auscultation. In

the field, and the patient is

seen to move more in the
regurgitation movements lead just below the ear. In many cases this impression is succeeded by a scratchy vibration
in the lungs, this is a medullary impression
that when the respiration is impossible, the lungs can be heard very distinctly. To distinguish between
the two sounds listen for an impression that the
lungs will be limited to produce immediately
for the effects already while the patient
is conscious. From an essay lay
absence of the resuscitation sign, it
becomes. Great penetration occurs in
membrane and dullness on percussion-
ization. This sign called percussionist,
the percussion note is an affective phenomenon
in auscultating here an expectorated album
must give the impression of a body.
The signs of a paralytic termination are: fall of temperature, indicated by
reduction of the excretion of the chlorides in the urine.

The time of death is very accurately

...t...
but alcoholic habits will nearly always lead to the
reduction of the heart to death. It often comes on insidiously and the person and his circle are aware of it only when complications set in and the patient becomes dyspeptic and the usual symptoms of the heart, especially dilatation and hypertrophy, set in. In many cases the temperature ranges at first 90 or 91 for two days, if the temperature at first 93 fails to come down after two days becomes intermittent, irregular, and when the symptoms come
Death is usually due to cardiac  
[illegible]
There is no specific treatment and
we must be governed by the symptoms.

There is a tendency to recurrence in
cases when the patient is collapsed, and
it is better not to interfere with the ab-
normal course of the disease, and proceed
by judicious bandaging for several
laminations. If seen at the beginning,
during the stage of congestion, in case
after expeditious salubrity in the
head, the disease
may be aborted by giving a gr. of
salicylic acid and a gr. of camphor through the
mouth and
epithet of a large mustard paste to the
chest, and remark from the nose in all the
medical situations. Nothing more should
be undertaken, as the patient
should not be disturbed after until it
was later in the disease.
and comparisons have been made between the gen-
eric, active suggestion, to determine the
obscure and third influence. Those hypotonic,
comparisons, and in nerves and muscles, may
give hydrodynamic reactions or increase
their solution very suddenly. As matter
not great decompensation may be caused by a
very small quantity of hydrochloric.
When the conditions are restored, however,
they may give the reaction, through the
most profound and profound force, a great
judgment or in the judgment of the
other movements of the whole and the
ice formation. Although to be interrupted.
ity, the patient and lead might occur.
It has inevitably a few hours in the solution
from the stomach. It is often common
suitable and the perfect...
When crystals are prepared by sublimation, it is not usual to add very strong, pure glycerine to the solution. Two primary steps are: (1) to cool the saturated solution to temperatures below 120° C, and the (2) to cool the saturated solution further to about 150° C. If the temperature remains below 150° C, the crystals do not sublimate. If the temperature is maintained at 150° C, the crystals do sublimate. To maintain the action of the heat, dry ether, and alcoholic alcohol should be used in an alcohol to which is added an alcoholic alcohol. If the water becomes too cold, and the water is too cold, it may be replaced by a water current of the same kind. The next step is to separate the crystals.
especially at the close of an army and
and if there will be seen the remains
of an army the dead should be reeled in again
two or three times for counting very much
than expected. If there are much mistakes
the third large field unsurfaced, a chief
was so plentiful, as its leadership
way big was every 3 hours, and in the
and by lead every 3 hours. If the
was not going much
a better may be applied to the next and
the army 18th would be the off by side
of long leave or for 3 months, the
future a freedom and public
1,000 men and 3 bays in
the thousands of thousands as
and others.
Thesis. Subject: "Aqua"
March, 1886.

Chas. C. Lucas.
Shepherdstown.
Geog. 20. 9th trav.
Aquae.

The use of water in the preservation of health and in treatment of disease, is a subject well worthy of
repeated attention. The value of pure drinking water
as a matter which should never be disregarded in
public or in private. To obtain it in a state of absolute
purity is of course impossible, but to obtain it in a
state of sufficient purity to be fit for use as a
matter which is receiving almost universal attention
with our Sanitary Associations. Water when containing
any injurious or at least contains volatile and insoluble organic matters, and in many
cases comes to contain the germs of different diseases.
Water is the most essential element to life.
It regulates the bodily heat and carries off excess
sweat, and it is necessary that every part of the
animal economy should have a certain amount of
water, just as it has been known to live for a considerable
period without food, but can hardly live for more than
five days when wholly deprived of water.

I have already said, drinking water is very simi-
convay the germs of some of our poorest diseases, and educated medical men have only to examine the
order of some epidemics of Typhoid Fever to become thoroughly
convinced of this. If we consider how often wells and privies
are placed adjacent to each other, and how difficult it
is to prevent the contact of the former with contaminant
water in the wells, we can readily see how the
poison germs of Typhoid Fever may get into the
drinking water and thus it may be transmitted to
grave disease to numbers of those who come to
well for their daily supply. Hence the necessity of
pouring the excreta of Typhoid Fever patients
immediately, and as far as possible removed from
well or cistern from which water is used.

But by means of water is the most common way
in which Typhoid Fever is transmitted has been proved
inclusively, it is when pure drinking water is used
instead of that which is contaminated by germs of the
illness, its progress is stopped or lessened to a great
extent, In some cases creeks or rivers have been infected
receiving the washing from fields which have been
mixed with the contents of premises into which the
excreta from Typhoid Fever have been thrown. Thus there
have been extensive epidemics caused. In some of these
new persons although living in the same neighbor-
hood, but using a different water supply, have escaped
the disease, this proving conclusively that it was the
water which had caused the carry of germs.

Chilburn, Scullatinia &c. are also sometimes caused by their
respective germs getting into drinking water. This shows
how important it is for us all to be on guard the
importance, and I may say, the necessity of using
only water from a source of healthful purity.

When a physician has a case of Typhoid Fever to treat
he should try to improve his patient's condition and to
inform the other members of the family, by trying to
press them with the importance of using pure
water, and of properly disposing of the excreta.
The "medicated waters" as found in our towns furnish
little in many cases. By this wondrous development of
the line medical qualities are approached to being
improved. They seem to constitute serious medical沦

among the most valuable mineral waters I may mention Chalybeate and the Sulphurous waters. Among the Chalybeate Springs I will only mention one—that is Rockbridge Alum Springs. These Chalybeate waters are useful as medicinal preparations of Iron. They are beneficial in Amenorrhoea and numerous other diseases which depend on Anaemia.

The Sulphurous mineral waters I may mention White Sulphur Springs. These waters are very useful in the treatment of hepatic disorders, but they are particularly useful in skin affections. Besides the mineral waters I have mentioned there are other waters which are useful in the treatment of diseases which call for an "alkaline" treatment, as Rheumatism and Gout. The profession generally has undergone great changes in the last twenty-five years, so the use of water naturally in general.

For example—the old practitioner would not allow a patient to take water without warming it or at least depriving it of its freshness. A certain amount of water is essential to health and if it be warm...
in fertile conditions a great amount would be
sued for. At the present time instead of withheld,
it from his patients the physician allows him
here it in such quantity as he may deem
ought to have, but it seems to me this would
not do in all cases, as a fever patient will
sometimes drink to such excess as to interfere with
powers of digestion and assimilation.
This would give rise to stomach and intestinal disorde
which would, in my opinion, have a great tendency
make the patient condition worse. Therefore I should
consider it proper to give him what I thought proper,
not allow his feelings to influence me to give
in a greater amount. Water is also very effec
fever when applied externally. It may be applied in
ways, as: affusions, douches, baths, wet towels
bags, etc. The cold affusion is often used to reduce
heat. It consists in dashing cold water on the body
which has been previously stripped and laid on a qua
When the patient complains of cold he should be kept dry, placed in bed, covered well, and given some stimulant to aid reaction, and consequent oedema. This is a very harsh method of procedure and private practice would seldom be advisable.

The "cold bath" is greatly preferable. The best way to give it is to place the patient in the bath near the temperature of the body, and then gradually cool it by adding cold lumps of ice, or some cold water, until a temperature of 65° or 70° Fahr. is reached. We should note the temperature of the patient at this time, and should be taken by a thermometer placed in the mouth or rectum. After the bath, treat the patient in the same way as after the infection. The cold bath has the effect of moistening the skin and lowering the temperature of the pulse becomes slower. The greater number of cases die from Typhoid Fever, the directly or indirectly on the effects of excessive heat. The treatment of the wound, anxiety, and rest are at once, commenced. If it becomes therefore a matter of great importance to lower the body temperature at once.
possible when it exceeds a temp. of 109° Fahr.

It can best be done by the cold water treatment in
private practice. A cold bath, douche, and apparatus
are very inconvenient and it would be almost to get
patients to consent to their employment. In these
cases I think the "salt pack" would be preferable.

It is to put beneath the patient a gum cloth, and
strip him and envelop him in a wet sheet. The sheet
the sheet gains warmth from the body it should
be wet it with cold water. After the patient has been wrapped
for fifteen minutes or it may be a little longer
should be wiped dry and placed back in bed. This may be
used as often as a rise of temperature appears.

Great benefit has followed the use of cold water in this
but I believe this when it is necessary to use cold water
here. They should be used freely. Another way which is a very
done, in which water may be used in the treatment of
as it has a current "with heat" as apparatus that all
it surrounds the patient, caused by pouring hot water into
milk of me being changed our patient temperature without
exhaling him to the trouble of being removed from bed.
apparatus, hence would be very expensive, and that cost would be beyond the reach of many poor patients. The treatment of Typhoid fever with cold water, however, as the honorary, in a caution indicating its use for the natural congestion as a result of the cooling surface might increase the liability to harm which will amount to the destruction during its application would be undesirable. It should not be used during the febrile stage of the condition as it reduced to the surface of the body in cold water. While the exterior is hot, there is hope that the further cooling of the surface by would have any beneficial effects.

In inspiration we have nothing better than cold water applied to the body. Ice may also be applied to the head. It has been recommended in these cases the warmed the patient's feet and pour water over him until a considerable lowering of the temperature. This is applied over the whole body at intervals.
determined by matching the patient's temperature and pulse. If the pulse be very quick or very slow, or less feeble, in this opinion, the treatment is very good when the temperature rise is not very fast. After about six hours, sponging of the body has been considered efficient. The cold 'douches' also are very good to break up new enteral concretions. For the irritation of the skin on the sores of Scrofula, sponging with cool or tepid water is highly recommended. In this case the operation would be too crude and would also be very unpleasant. A tepid or warm bath is said also to lessen the liability of neural complications complicating this disease. If the B. sin. is kept in as healthy condition as possible by the use of the bath, it is very probable that there is far less danger of those complications. The wet sheet is also very useful in covering suppurating wounds, may be used thus; the patient stripped of all clothing is wrapped in a sheet wet with water, and covered with blankets; he remains thus until free perspiration is induced. As soon as this occurs, he should be taken out, made dry and placed in bed, where refreshing sleep is likely to follow. In many he repeated if necessary. The above procedure is
hypothetic one, but the regular practitioner should not
read it on that account. "Dysentery" may very often be
replaced by a bath just before going to bed. The bath may
warm, but if the head is hot and the circulation active
may apply cold to the head at the same time water
applied to the body. In Chronic as well as in "acute
dysentery", the vapour bath or hot wet packs is resen" 
exacting the free action of the skin. The vapour bath or
"wet packs" is especially good in "appendicitis" when the
elimination of "urea" is impeded with and there is
an of "Macerated Cutanea". After the "wet pack" is used the
patient should be well covered to favor suppression.

On an attack of "Acute Articular Rheumatism" the
"bath" bath is excellent to use for suppleness to the
joints and muscles. In numerous other diseases these
methods while not bringing about a cure in themselves
will greatly aid the action of other remedies. By keeping the
limb and muscular system in a healthy condition
and water "locally" applied is also very suspect in many
infectious diseases, and in different ways.
It has been used by injecting it into the arteries caused by
"Swingle Methods Syphilitica" we may use compressed ice
with cold water, or what is perhaps better, we may use
washed ice in ice silk bags, laid over the part.
This has been highly recommended, by Cleland, speaking
in his lecture upon that disease.
"Gastrorrhagia" may in many cases be greatly relieved
by using ice water or by swallowing small lumps of ice.
In very urgent cases as a means of relieving the hemorrhage
it may also be placed in bags and laid over the
epigastrium. "Sublunary" hemorrhage is also sometimes
relieved by placing ice bags around the chest.
In the local application of "cold" water may be very well used
coiling a mitten tube around the part and passing
cold water through it. Of course this may be used for
application of heat by using hot water. These may
also be used when dry cold or heat is desirable.
One of the most useful applications of ice is the "ice con-
"brain fever". This is often of great benefit. The ice is
washed and placed in a bag or cup made of cloth
which is large enough to cover the entire amount.
le which is sometimes seen to be immediate when this is
applied. Ice has more "latent" heat than water and is
before a far better cooling agent. It is not best to use
repeatedly, as it may produce "shock" and thus not
astringent by contacting the capillaries.
In using water—20° Fahr. is usually as low as is good.
old "effusions" have been found beneficial in "Chorea" when
applied to the head or spine.
Steam water is very beneficent in a number of diseases when
applied locally. Inhalations of steam are recommended in
rheumatic—acutes and chronic. It may be used in different
ways,—the patient may be kept in a close room and a steam
water kept constantly steaming on a stove, the steam
is filling the whole apartment, or he may use an
inhaler. This is an exceedingly efficacious remedy.
Halden" recommends hot water injections in chronic in the
this case a good and plentiful injection should be given
should be thrown with the vapor into a strong beam.
the hot water dressings are used for wounds, containing
a cup of acute inflammation is used and it be very bland.
heat hot water is used in these cases.
The use of "Esmarch's" bandage in amputations, there is to be a good deal of "Capillary oozing.

Then, both hot and cold water have been used, but the hot water is best as to effects in stopping the oozing and have no moment. The "poultice" is useful chiefly an account of its moisture and warmth. In many cases there is no especial time in the meal or of which the poultice is made, and these cases hot compresses may be equally as good if not. The effect of the cold bath on health is also well worthy the attention of every one. When a healthy person gets into cold bath, the first effects of the cold is to contract the capillaries of the skin. This gives the body a white, pale hue. In this comes reaction, when the capillaries are dilate, an body is in a glow. The bather should leave the bath before second reaction of the capillaries takes place, as this and contraction is permanent.

Cold bath is very good in pursuit of robust health. It is particularly good in those who are weak as it is not to be recommended as the "well" of the cold water ought be injurious.
The foregoing pages I have tried to mention some of the most important uses of water therapeutically but to mention all uses of this most indispensable element, and its comparative worth in different diseases, would require a longer and a much longer article, than is allowed by the rules of a college thesis.

Very respectfully,

Chas. C. Lucan.
Digestion

J. Sloane Scott.

Newark, N.J.

1886.
Food and Digestion

In treating this subject, I will endeavor to be as clear and simple as possible, for no one during the short time they spend at college can by any means do such a vast and important subject the justice it requires. Many have written, and much has been said concerning this subject and yet there remains room for much to be said. Men will as the subject is comes more clear express their different views. I will endeavor in a brief way try and describe the process of digestion as it is carried on in the human stomach. We are all compelled to take some kind of nourishment to keep the vital forces at or in working order.
and the meathment must be some kind of an apparatus for conveying the food to the stomach where it is distributed to the various parts of the body to sustain this force. As the animal body increases in size and weight from birth to manhood during the whole of life there is an incessant change going on in the body. It is a law made by the Creator at the beginning that life cannot contain long in animal matter. The atoms which compose the living body receive the principle of life when they enter their appointed places and compose the body. They however retain this principle but a short time and while they retain it they perform their
Food is not living matter. Much that we eat, bread, vegetables, and fruit, do not bear any resemblance to flesh. Yet these matter life less as they seem are converted into living flesh and not only one kind but several and various kinds which combine into the composition of the human body.

The digestive apparatus effects a change in the food. first it grinds it in the mouth, dissolves it, and converts it into a mass of material fit to supply the blood and send the nutritious materials to the heart. The blood vessels carry this blood to all parts of the system and with this they supply the waste and growth of
the different organs.
This digestive apparatus consists of a mouth and pharynx, the oesophagus or gullet, the stomach and the intestinal or alimentary canal. At the upper end of this apparatus is the lips which prevent the substances which are taken in the mouth from dropping out. The teeth and tongue which assist in grinding up the material, these are also assisted by the salivary glands which pour out saliva and moisten the substances and make the task of swallowing much easier. For without the aid of these glands it would be a difficult task to perform. The masticating effect of its objects.
For coated over with glairy substance or juice the crushed or bruised substances are much more easily passed along the esophagal tube into the stomach, but there are certain other changes which take place in the mouth. Food undergoes a chemical change which is completed in the stomach and this is of essential importance in aiding the process of digestion.

The esophagus is a tube commencing at the mouth and connecting the stomach and is about eight to ten inches long. It is made up of three coats, muscular, cellular,
and Mucous, the Muscular or outer coats being somewhat thicker than the others.

The stomach is a long round and somewhat irregular shaped sack. It is placed on the left side of the abdomen just below and within the lower ribs and runs crosswise toward the right side. It has two openings; one toward the left end where the gullet ends and the other at the right end where the stomach opens into the alimentary canal. This organ is very elastic and varies much in size in accordance to the amount of food taken into it. It has been so much
distended at times to be able to hold his or more quarts. This is apt to be the result after one has taken a hearty meal or when a great amount of liquid has been taken into the stomach. At other times the stomach has been so reduced as to be nearly hold a pint. This condition is generally found to take place in those who do not get enough to supply the cravings of nature. It usually contracts itself down to its contents however small. The stomach is never completely empty; there is always some fluid substance remaining in it. The size of the stomach
It is said to vary with the habits of man and the kinds of food used. It is claimed to be larger in those who confine themselves strictly to vegetables than in those who live on animal food. The vegetarian gets less nourishment from his food and is compelled to eat a larger amount to supply the wants of nourishment. Starvation is while the man who eats animal food can get more nourishment from a smaller bulk. Men who are in the habit of consuming lean larger stomach than those of less strict habits.
The texture of the stomach is of a
glairy character very soft and
deflectable and consists of four
coats each of which have a
delicate part to perform
in the digestive process and
each is prepared for its own
function, the outer coat gives
support to the whole the middle coat
expands and contracts to give due
space to the each it also produces mo-
tion in the stomach which agitates
the food and helps promote the work
of digestion and aids in expelling
the contents when they are digested.
The inner coat exudes upon to
surface a slimy mucous sub-
slime which protects it from all
substances which would irritate it
and also prepares the gastric juice
a powerful fluid which dissolves
the food. It exerts a powerful
action on all natural foods
It dissolves certain important
elements which form a part
of nearly all our food. By it
said the finely divided mass is
reduced to a condition fit for the
absorption of the nutritious for-
tious into the blood and light
blood carried throughout the
whole system replenishing the vast
and supplying nourishment
to the growing tissues.
As soon as food is swallowed, some gastric juice is found out upon the lining membrane of the stomach, and this may be consoled the more complete the food has been masticated the more readily the gastric juice is absorbed. At first it only mixes with the minute particles and these being removed, more particles are exposed and so the work goes on until all the food has been unit and softened by this powerful acting agent. The stomach is not always full of gastric juice, but it is usually none of this fluid.
be found in the stomach except when there is some thing irritative, to excite and cause the lining membrane to secrete and pour it out. The gastric juice is not found out with a rush but it oozes out slowly (very much like the perspiration which oozes from the forehead) until there is enough to mix with the new morsels which are taken into the stomach. The juice commences to flow as soon as the food reaches the stomach and continues to flow if stimulated by new morsels. This flow is now even not with out ceas
This liquid cannot like saliva in the mouth be made to flow as long as we desire it flows then not in proportion to the amount of food we eat but in proportion to the amount of nourishment which the body needs therefore only so much of this juice is poured out as will dissolve what food be needed at one time, therefore the stomach may be likened to an acute measuring machine as it measures by the gastric juice the amount of food the stomach is able to digest with ease and when there is enough food taken into it
body, the stomach seems to give the signal that it has had enough to supply its demand. By being careful we can supply the exact amount to the wants of the stomach and stop as soon as this want for food ceases, for it is nothing more than natural to feel the pangs of hunger. It is through this medium the stomach makes its wants known. The time required by the stomach varies according to the amount and kind of food taken in to the stomach. Many of the foods that are taken in the stomach are more readily acted
Upon the gastric juice than other digestion however commences as soon as food reaches the stomach and continues from one to six or more hours. When the stomach has finished its work the food is converted into chyme and to us it seems to have the same appearance throughout. There seems to be no traces of the meat and vegetables which entered the kind and this was the science that was taught by the old teachers. But now this microscopical peculiarity have set aside this mode of teaching and that the mass
is not all the same but that this mass is submitted to fur
ther digestion in the small intestine. When the stomach has
finished its operations on the food it is then turned over
to another agent of digestion, namely the duodenum. By pass
ing the pyloric opening into this part of the stomach, here
it undergoes another change and is acted upon by a fluid
known as the intestinal fluid or juice and also by the pan-
creatic fluid this latter fluid enters into combination with
all the elements of food but
Now especially this oily matter which has not been acted upon by the gastric juices and prepares them for the use of the blood. These thin digestiv fluids constitute a milky fluid known as chyle which is yet in the alimentary canal. Chyle is a milky white fluid which coagulates spontaneons and on standing sepulrate more or less completely into a clear salt.

The nerves carry the feeling of hunger from the stomach to the brain where it is felt and recognized as such sensation.
felt and the feeling of hunger is convulsed if the nerves are diseased the appetite is always felt in the brain but is not felt unless we can give attention to it— the appetite is affected by the state of health both in the body and mind in fever and certain dyspeptic state the stomach cares little or no food, so in sorrow or mental distress and may also be affected by the announcement of the death of some near friend

Hungar according to Prof. Miko consists of a bi-foiled Meaning, one where the
system requires food and the other a local feeling of the stomach. In olden times hunger was thought to be the rubbing together of the walls of the stomach, but different views have been advanced from time to time until now it is thought to be the contracting of the stomach upon itself which produces this feeling of hunger. The feeling of hunger is essential to the maintenance of life for food is required to give power to the glands and muscles and supply...
the growth of the various acts with punishment. The general feeling of hunger is an important one and should never be overlooked. Sometimes just before death you will hear a patient complain of a feeling of hunger.

The appetite may be aroused by the smell of some good thing cooking, and we all know how our mouths water when we smell some thing good and how we long to have it salivating year after year, even when we are hungry.
is nothing in the mouth to cause them to do so. When
the food has been digested
the nutritious particles are
then taken into the body by ab-
sorption. In the process of ab-
sorption the fats etc. that have
been taken into the body are
acted upon by the Bile and
pancreatic juice. The fats un-
dergo later changes when taken
into the body exactly how the
fats are absorbed is not clear.
Most of the fats get into the lac
trials as oils and not soluble
soaps as was once thought to
be this way. The blood vessels are
also thought to have some part in the function of digestion.

The nutritional fact of the digested food is carried from the digestive organs in the abdominal through the absorbent mouths and the bile ducts and the great lacteal ducts where it is mixed with blood and becomes a part of the blood.

This blood is then carried to the lungs where it undergoes certain changes and then is distributed to all parts of the body for repair and building and digestion of food tissues.
other object in view than the supplying
the wants of the blood. This fluid must have an apparatus for the transportation of
this fluid from one part to another and is known as the circulatory apparatus.
But a lengthy discussion of this subject would be out of place here.

From this examination of the chief
line, and use of the various digestive
organs of the human system we learn that the stomach performs
some of the most delicate operations and effects some of the
most wonderful changes in na
ture. In these operations it requi
res the aid of his intelligent hand
to supply its wants and fit the end


fly—There is no human instinct to be our unerring guide and to direct us how much we must eat and drink. The living machinery within and the dead material without our bodies are prepared for our use and the law of nature is declared to us for our government, and this law we are required to understand before we can inform our self of the substance of our frames. This is not a law of appetite that directs us always to take food when we are hungry and take such kinds of food and as much of it as the palate craves nor is it a law of convenience that allows
Such food as chance or fancy may place before us. His laws is founded upon the structure of the digestive apparatus and the wants of his frame, temperament, age, and his habits. Exercise in the many different rules and laws laid down for the government of all men of every rank, temperament, and habit and location and which attempt to sustain all men with an abundant and fail for every man or every class of men bust their secular power and secular want and if they disregard them
and endeavor to supply life by any other means to rule they will not fully accomplish the purpose 
intending. As the mind needs the body for its earthly home as the body needs the mind for its director. This responsibility for the care of the body and mind comes upon every one in every condition of life, and whoever discharge it with intelligence and faithfulness will increase his house and his enjoyment and have length of days on earth.
masturbation.

by

E.F. Corbell

-1886-
Masturbation.

This evil is also termed solitary
indulgence, Self abuse, Ananism,
Venercal Debauchment, Voluntary Pollution.
The functions of the sexual organs
are greatly impaired by the unnatural excitation of the genital organs by friction with the hand. It is a deplorable fact that this vice is sometimes acquired by boys, before they reach their sixth year. In some instances the habit may be attributed to foolish or vicious nurses, who quick children when they cry by tickling their sexual organs. These willess persons may not know how dangerous such a practice is to health and morals, or how easily the child is overcome by
his propensity. It is wrong to omit these important facts to the keeping of those who may easily transform a naturally healthy desire into a precocious morbid sensibility that will eventually ripen into a degrading animal lust. Untold are the miseries which arise from masturbation. Self-abuse is one of the most prolific sources of evil, since it leads to degradation of body and mind. It is practiced more or less by both sexes, and the habit once established, it is with the greatest difficulty that it can be overcome. It is the source of numerous diseases which damages the functional activity of the organs.
and eventually impairs the mind and constitution. This solitary vice is mostly practiced by those ignorant of its dangerous results and diseases are incurred when it is too late to redeem the broken down constitution. Immediate indulgence in any practice are deleterious to an individual. Emphatically true is this with regard to sexual excesses. Not infrequently does the marriage vir cover a multitude of sins. The abuse of the marital relation produces the most serious results to both parties, and is a prolific source of some of the gravest forms of disease. Prostitution, Spermatorrhea, Impotency, Polyandria & general
debility of the productive organs, arise from sexual excesses. Boys seem to regard the practice of this vice, like the vile habit of smoking and chewing tobacco, as a manly accomplishment. It is evident that they act under the impression that the practice of self-pollution indicates their near approach to maturity, and thus they vie with one another as to who shall first succeed in awakening his sexual sensibilities sufficient to give unmistakable evidence of his masculine attributes. One boy may inherit a predisposition to this practice, or his sexual feelings may be awakened
Ah an early age, and his bad example be imitated by many others. In this way a dangerous habit is early acquired, and when the sexual propensities are habitually indulged to the exclusion of the cultivation of higher and nobler pleasures, if not rendered impotent by these abuses, he will transmit the same desires to his offspring, so that the propensity and habit becomes irresistible. A physical as well as a moral reck or disease. The earliest account of man reveals the fact that his creator did not design him to live in isolation, for we find him with his "helpmate."
in his Eden Home, History shows that when a man has been deprived of the society of woman, he has become reckless, vicious, depraved, and even barbarous in his habits, thus illustrating the sentiment: it is not good for man to be alone. Good associations promote mental and physical development. Physical because the body can't be perfectly developed unless the mind be cultivated. The development of a person implies the unfolding of every power, both physical and mental. Nothing so regulates and restrains passion as a healthy
condition of the organs through which it finds expression and every organ of the body is powerful in proportion to its soundness. The propensities play a prominent part in the education of the child. When properly disciplined and held in subordination to the higher faculties, they constitute an important factor in the economy of man. Boys are more liable to be morbidly excited when excluded from the society of girls, and vice versa. Again, when the sexes are accustomed to associate, the passions are not apt to be aroused, because of the natural,
antagonizing physical elements. The influence of one refines, energizes and enables the other children should be taught to understand their nature and knowing them they will learn self-government. It has been truthfully said: If man rises in education and moral feelings, he proportionately rises in the power of self-restraint; and consequently as he becomes depraved of this wholesome law of discipline he sinks into self-indulgence and the brutality of savage life. The passions may be aroused by the language, appearance or dress of the opposite sex.
A word spoken under the impulse of purity is often rendered in a very different version by one whose passions color the thought, and made to convey an impression wholly unlike that which was intended by the speaker. So, too, the dress may be of such a character as to excite the animal nature. The manner in which the apparel is worn is often rendered so conspicuous as to become gaudy, there by appealing to the libidinous desires, rather than awakening an admiration for the mental qualities. Literature is a powerful agent either for good or evil. If we would
improve the morals, choice literature must be selected, whether it be that which realizes the ideal, or idealizes the real. Obscene books or literature written for the express purpose of intensifying sexual desires in the young leads to an illicit gratification of the passions and ruins the moral and physical nature. It not unfrequently happens that a child is born with a vigorous mental organism which gives promise of a brilliant future, but manhood finds him incompetent, debilitated, and totally incapacitated for mental or manual labor.
This may be the result of youthful indiscretions, ignorance, committed, but not unfrequently it is the effect of a pernicious literature which inflames the imagination, tramples upon reason, and pictures to the youth a realm where the passions are the ruling deities. Many persons are born into the world with disordered organizations for which they are not responsible. Such are entitled to the sympathy of humanity. Dyspepsia, scrofula, consumption, and a thousand ills to which mankind is heir, are transmitted from parents,
The results of ill-assorted marriages. Children of healthy parents, who have good constitutions temperamentally adapted, are usually healthy and intelligent. Frequently in a family of children, who have the same parents, there are marked varieties of characters. One manifests great precocity, another is below the average in mental attainments; one is amiable, the other irritable in disposition; indeed, there are often as great differences in children of the same, as of different families.
This is due to the physical and mental condition of the parents, more especially the mother, not only at the time of the genesis, but also during the period intervening between conception and the birth of the offspring. We are told that the ancients regarded courage as the principle virtue. By us purity is so esteemed. Personal purity is an essential requisit to the growth and perfection of the character. Purity is inward, secret, self-sufficient, thoroughly and intimately personal; in proportion as one resists temptation, is he virtuous. The practice of ananism
squanders the vitality. Bankrupts the constitution. Indigestion, inanition, emaciation, shortness of breath, palpitation, nervous debility are all symptoms of this exhaustion. Subsequently, the yellow skin reveals the bones, the sunken eye are surrounded by a leaden circle; the vivacious imagination becomes dull; the active mind grows insipid; in short, the spring, or vital source, having lost its tension, every function wanes in consequence. Excessive lustful enjoyment produces feebleness, and finally terminates in disease and impotency. Masturbation
averts the excitability of the nervous system and sexual organs and causes debility, which is indicated by the premature discharge of semen during sexual intercourse. These premature emissions indicate not only partial impotency, but also that the nerve-centers have become morbidly sensitive by the practice of solitary vice, or marital excesses at length the powers of the erectile tissues are diminished, and there is weakness at the root of the penis when erect, thus preventing the act of copulation.
or the erection may be slow and not last long enough, on ac-
count of a faulty junctional condition of the spinal chord.
This condition is sometimes as-
associated with a morbid irrita-
bility of the urethra, which, being
inflamed, may become sufficiently
constricted to prevent the emission
of semen when the penis is erected,
causing it to pass back into the
bladder. The inflammation may
extend downwards to the prostate
glands, and cause a discharge
of thick,ropy, viscid slime.
Masturbation prevents and
finally destroys the secretory
function of the testes. It sometimes causes chronic inflammation, which may result in obliteration of the minute seminal canals, or obstruction of the conveying ducts. The sperm is imperfectly elaborated and totally unfit for procreative purposes. Sometimes the spermatozoa are entirely absent, and, when present, are very few in number, incomplete in structure, diseased, and deficient in power as well as in organization. The husband may appear to be healthy, and his inability to procreate may be erroneously considered a defect in
his wife. Symptoms: Irritability, impatience and restlessness, loss of flesh, pallor, and a leaden downcast look. There is loss of memory and the intellect becomes enfeebled. They are depressed in spirits, easily discouraged, and prefer solitude. They do not retain what they learn, the general health fails, and the nervous system shows serious impairment. The symptoms are too significant to deceive the experienced eye. The short, irritable replies of the boy and his general sensitiveness and nervousness are indicative of the loss of nerve power, occasional
by this bad habit. Various complications are likely to arise in the progress of this terrible malady. Tumors, which sometimes degenerate into cancerous disease of the testicles, finally result in death are not uncommon. Stricture of the urethra, Hydrops, Varicocele, are all common complications. Ignorance, which are of the most consequence are, Spermatorrhea, Seminal weakness, Nocturnal and Diurnal emissions and frequently act as the cause of spinal affections.

Treatment: The best is prophylaxis. The child should be forewarned.
by its parents. Of this desire to live bountifully and that such a practice results in calamities that will embitter the whole life. Parents hesitate to talk to their children, because they fear putting impure ideas into innocent minds. Their hopes are strong that their children will never indulge in so degrading a practice. If however the habit has been formed, the first thing is to see that the child quits it, for if he or she continues it, nothing will be of any avail. Hygienic Breast Daily Physical exercise and regular
habits must be established. It is important that the mind, as well as the physical powers, be directed into active and wholesome channels. There must be rest and discipline. It is useless to begin medical treat while the patient continues to read exciting, amorous stories and obscene books, which are suggestive of evil thoughts. Something practical ought to occupy the thoughts and engage the hands. Regular and vigorous physical exercise is necessary to assist the circulation of the blood and compel its determina-
lium into the minute and extreme parts of the vascular system. When blood is thus directed, nutrition is more vigorous, and the activity of all the functions is augmented. Not only should there be regularity in eating, but sound discretion should be exercised in selecting a plain wholesome diet, consisting of such articles of food as best favor a daily and free evacuation of the bowels. All of fatty, spiced food, stimulating drinks, and tobaccos in any form should be excluded. At night the patient should merely take a little
ice milk, and should drink very sparingly, since fullness of the bladder is apt to produce erections. The patient should sleep upon a hard mattress and pillow, be lightly covered, and not assume the dorsal decubitus; he should not sleep too long, and must avoid taking a siesta during the day. Early rising and cold baths are very beneficial; after bathing rub the surface of the body well with a rough towel until reaction is established. Douches, or showering the genital organs with cold water once
Of twice a day is very beneficial, but should not be done just before going to bed; it is well to bathe the head in cold water.

Horse-back riding, climbing and all exercises which rub, chafe, or excite the genital organs should be avoided. Even the clothing should be loose, so that walking will not produce friction or cause any excitement of these organs. The calls of nature should receive prompt attention, and the urine be voided at any time when there is an inclination.

If there be any irritation of the bladder, lower bowels,
injection of cold water into
the bowels will be very bene-

cial, as it will reduce
heat and subdue irritation.

Medicinal Treatment:
This must be both local and
general. Among the internal
remedies of general treatment:

Quinine and iron are use-
ful in anaemic subjects.

Camphor, lupulinæ oleosina
(in dose 5–8 min.) morning and
evening. Good effects are also
obtained from belladonna
(administered in the form
of extract, internally or in
suppositories) and atropine.
(the dose being cautiously increased) - Fowler's solution is an excellent sedative of the genital functions. It may be given for a long time, in 5 gr. doses, before going to bed. Bromide Potassium stands at the head of the list of the remedies for lessening the sexual power. It acts as a sedative upon the secretions Gallaudet recommended cauterization of the prostatic portion of the urethra by means of a stick of nitrate of silver, concealed in a catheter.
repeated after an interval of two or three weeks will generally suffice. Dittel recommends a less painful and more certain remedy, consisting of the introduction with the caustic holder of a urethral suppository of butter of cacao and nitrate of silver, its position being determined by the rectal touch. We may also resort to the intermittent introduction of elastic or wax bougies, coated with belladonna ointment. The urethral canal is almost always hypertrophic.
with Churchill's Pinchrodine repeatedly will render the penis too painful for the patient to handle; and in this way it will do good. Employment of electricity is often resorted to, and with great good resulting from its use, the anode of the battery of moderate strength is placed upon the lumbar regions, and the cathode is applied for three or four minutes along the spermatic cord, the perineum, and penis. No prolonged or frequent sittings are injurious.
In women who indulge in the deplorable habit of seduction or self-abuse, there is only one thing that will produce a radical cure and that is excision of the clitoris, (and all surgeons recommend it). The treatment of this disorder is rather in the direction of moral means, keeping the patient somewhat under restraint, and medical, such as the internal use of bromide or pot. Then the clitoris may be blighted with caustic or caustic acids, or Dr. soda in such strength as to render it too painful.
for the patient to handle.
"Carcinoma or Cancer"

Carcinoma is a malignant epithelial growth having a definite anatomical structure, therefore every tumor that possesses the higher form of malignancy must not be called cancer simply from its malignancy.

Cancers, according to the older writers, were divided into Sarcomata, Collodion and Lymphatic, each of which contained an ultimate element in fibers, fluid and cells. The fibers are made of protoplasm, presenting an elastic, fluid and an elastic one, and the cancer cells be most; then one cell
the Scleroma. The fluid is candid.

The cells are larger than

robert blood corpuscles, and should not be confused with them.

Even though the older authorities

supposed that cancer always de-

veloped from a necrotic focus

in the migrated white blood

corpuscles. The Anoma of Cancer

into Scleroma. Collod and temp-

ated must be regarded as a dif-

ference of degree and not of kind,

since they all contain the same

cell elements, but in different pro-

portions. Scleromas are composed

mainly of a fibrous tissue with

little fluid and comparatively few

cells. There is the following form: 

Cancer, and this hardness is due to the connective tissue element, that \( \text{p} \) for proliferation in this one, that in the other, respectively.

Encephaloid is the highest development of carcinomatous formations, it consists of an abundance of abnormal multinucleate cells and a peculiar fluid. Encephaloid is one of the kinds of soft cancer, process more rapidly and is more apt to bleed and is more subject to desintegration than the other varieties, occurs in any part, when cancer may develop.

The softness of this variety is due to the small amount of stroma and the excess of cancer cells.
as an effort on the part of the
trans to return to the normal.
Another treatment of leucemona
has been into Amoza and
Epithelial cancer. Amoza refying
its affection on the pancreas
and sympathetic systems and
embracing the three variation of
ready mentioned. While speaking
on a special way epithelial de
mension is developed on the plan
of these parts and with many
women (at frequent places in all
the generation of the tree) and
was produced by a process close
The tissue of the epithelial
cells. Owing to the amount
of Struma which they are some-
times even before they are more malignant than the other varieties. It is believed that carcinoma is a more local in its origin and is not preceded by any symptoms. The carcinoma usually follows the development of the primary and secondary from it.

The cells of carcinoma resemble gland cells but are larger, they are held to be distensive and are surrounded with other cells found in the body, i.e., they are of glands found as the most normally belong to the flesh, being produced by various attitudes of the muscular system. The difference in shape that in...
find in cancer cells as mainly due to the mutual pressure that they are being crowded together and their development and regrowth each other. Here we find their cell walls almost complete and showing no vacuoles and nuclei. These cells are crowded together abnormally as in the squamous of an imperfectly and irregularly distributed connective tissue. Lassus expressed it as his opinion that comes in general always or inmate in a normal development of imperfect white connective, but they have not been substantiated by later pathological and that which cause
to be pretty generally agreed upon is that these phenomena are due to a modification in the cell-multiplication of ordinary epithelium, but whether this epithelium be formed by cells belonging to the connective tissue or a question still and...
Primary carcinoma of the jejunum, institute of epithelioma, is accounted for by the assumptions of the theory in the author, namely, that some epithelial remnant in fetal life has been wipped off and reclosed in the microblastic development and has it remain until some lesion or one nourishment to the part causes an increase in the cells of this remnant, and they breaking down the barrier or restraint and pushing on the direction of least resistance set up inflammation and pain...

...
rise to cancer. Growing in this way, the carcinoma becomes encapsulated, but infiltrative to the surrounding tissues and no less of the normal tissue being spared. Since the great difficulty in dealing with this kind of malignant growth. Granting this thing to be correct, the infiltration must be due to the crowding together of the cells and that everything must give way before the neoplasms. In this way a sort may be come carcinomatous. Within the stroma are contained the blood vessels which are often very numerous and form a close
network around the alveoli, these blood vessels never pass into the epithelial masses but are limited to the stroma. This distribution of the blood vessels is important as distinguishing carcinoma from sarcoma, though there are some varieties of sarcoma which are exceptions to this rule. The changes that take place during carcinomatous growth are numerous, among them being the mentioned fatty degeneration, calcium deposits, and formation of dead tissue. Fatty degeneration is one of the most common changes in carcinoma and this change takes place principally along the edge.
of the tumor hence the more
rapid the growth the greater the
degeneration. The calcareous deposits
are made in the stroma.
We often have scar formation in
one part of the tumor and the
disease so enmeshed in another.
The natural tendency of the
disease is to extension long
means of the lymphatics
and to enmesh and cover
healthy formations which
unless it and the glands involved
be removed must remain so
late prove fatal by the extension
of the disease to some vital
part or by making such a de-
mand upon the patient's system
that the fatal process gradually fade away and he dies from exhaustion. Though the natural tendency of the disease is to ex- tension by cancer of the lymphatic re, still in the encapsulated variety fatty degeneration may take place to enable an extensive one to destroy the connective tissue and involving the blood vessels and the muscle tissue. Coming involved of the little or no resistance to the cancerous infil tration, and the involved cells becoming detached get into the circu lation. Getting into the blood they are carried along by it to all the parts. Some of the structures to then surround pre-
safe and those undergoing cell multiplication they act as the disease area.

One of the great difficulties is dealing with carcinomatous conditions being able to recognize all the tissues involved in the spread of the disease and again having recognized them not being able to remove them. Hence after the removal of the growth one is liable to have the disease along itself in some other part of the body generally in the neighboring blood of some gland. Although a favorable termination can only be hoped for. It is often difficult to differentiate carcinomatous.
Sarrin until some of the torn and frayed parts have been excised mercuric picrate and by an incision made with a zo-line. Those who are accustomed to operate for the removal of such growths will often differ in design, made by mere inspection and palpation. One case that came to mind was brought me at the hospital and the surgeon in charge of the clinic expressed the opinion that it was a carcinoma from the general appearance being excavated and ulcerated and with bleeding, and from the edges of the growth projecting and rosette-like, though stating at the same
time that being unable to detect any change involved might lead to the opinion that the growth was carcinoma. The tumor was operated on for the removal of the growth considered as a carcinoma. During the operation, it was not possible to find any enlarged glands; the microscope showed the growth to be carcinoma.

As a general rule carcinoma may be concealed with little or no pain, but if there is pain, it depends upon the extension of the disease to tissues supplied with nerves. Though I think does state that the origin of cancer is family.
local, yet we certainly recognize an hereditary predisposition to it and this would lead to the conclusion that in these cases at least it was constitutional in origin. It is even stated by some authorities that a cancerous cachexia is recognized in many cases, even before the development of the primary or secondary growths, and that its most obvious sign is a pallor of the skin.

As regards the local origin of cancer, scar tissue is a favorite place for its development and in the majority of such cases we can obtain no family history of cancer,
and the patient otherwise apparently in the best of health, in such cases only the disease is local in origin.

Carcinoma is much more frequently found in women than in men, and in the uterus and more frequently than in any other organ.

Cancer usually develops after 40 years of age but may occur at any age, as cancers of the kidney which is more frequently found in the young and especially in boys before the age of puberty.

The choice of its different parts seems to be apt about the fol-

faring order 103. Uterus, Mammal
Stomach, Rectum, Lymphatic glands, Liver, Bones, Skin, Brain, Eye, Testicle, Ovary, Tongue, Oesophagus.

A large majority of the cases of cancer of the uterus are found in women who have borne children, hence supposed to be due to injuries sustained during parturition.

Cancer of the mammae is more in women who have born children. There are quite a number of malignant growths about the mammae and with but two exceptions they have been sarcomata or sarcoma and the other doubtful. All that have been open
ated for have been of the Scirrhus variety, and this is the kind that most often comes under the notice of the general practitioner. Scirrhus cancer seems to prefer especially the Mammae, Stomach, and Intestines; Sclerod. the Stomach, Rectum, and Peritonenum, while Encephaloid may occur in any organ, it alone attacks the Liver, Kidney, Lung, Testicle, Eye, and Lymphatic Islands. Carcinoma of the liver is always fatal and usually runs its course in a short time. Cancer of the intestinal organs is largely due to scars from Syphilis lesions.
Each sex seems to be alike liable to cancer of the stomach.

Cancer of the Oesophagus is much more common in men than in women, though it occurs at an earlier age in women than it does in men. The frequency of the affection in this situation in men is supposed to be due largely to the irritating drinks taken by them, which being swallowed by them set up inflammation and this being followed by ulceration we will have a scar formed and the disease will be developed in the scar tissue again in scars due to change of the Oesophagus, change being also more common in...
Men than in women.

Carcinoma may disappear by spontaneous regression, but this happens in very seldom cases. When once it makes its appearance the tendency is to become worse.

The only hope we have for cure is in the surgeon's knife and even it in very many cases fails, yet even though it may fail as far as a cure is concerned, still it may give the suffering a period of immunity from the disease in which he or she may be in comparatively comfort.

Thus, Mrs. aged about 60 was removed into the Monday
Clinic for recompensation of the breast for bilateral carcinoma.
Three years previous to this time she had had the same breast operated on for the same trouble, at that time she was suffering intensely with pain in the breast, after the operation she went for nearly three years suffering no inconvenience whatever. Other cases of this kind might be cited but as a rule the operation for cancer should not be attempted unless there are hopes for the patient's ultimate recovery. The time for operating is as soon as the growth is recognized.
and the patient's system at large is in proper condition; as known those from the that are within reach of the knife generally make their appearance in those who are otherwise in good health. The time for operating on them is as soon as they are recognized. In general, however, if the neighbouring glands are found to be very much involved an operation is hardly to be thought of.

In operating, the surface should not be too deep or tissue as they may be involved involved what he can appreciate by merely feeling them.
For the relief of pain, hot applications and hot applications are not to be thought of as they tend very materially to hasten the progress of the disease. Belladonna or Opium besides known give marked relief. Emetics have in some cases when the knife could not be used done good, but they are to be regarded as auxiliary to the knife, and they do not seem to have met with especial favor. The local treatment may be regarded as removal, and the general as addressed to the system at large; good food, fish air, cheerful society, exercise, &c.
When it is not proper to operate then the patient should have the same constitutional treatment, and anodyne for the relief of pain, locally the Opium or Belladonna plaster, and a plenty of raw cotton for protection, remove as far as practicable all sources for irritating, and render the patient as comfortable as possible.

Edward, the 14th
Rem'd 1866.
Rheumatism

M. Burchinal
1886
Acute Arthritic Rheumatism.

The term rheumatism is derived from the Greek word "rheuma" which literally means "to flow. Ordinarily employed, it is a broad, general term that includes many affections and conveys much ignorance. Properly defined, as a specific inflammation affecting the fibrous structure of the larger joints, and other fibrous structures of the body with a peculiar tendency to involve the heart. Locally manifested by heat, redness, pain and swelling in the affected joints.

It is accompanied by intense pyrexia, and constitutional disturbance. The acute form very rarely becomes
Chronic. It is a systemic disease and is self-limited.

Morbid Anatomy. Death rarely affords us the opportunity of making an examination of the affected parts as the joints.

It is said that when symptoms are well marked in life, but little change is noticed after death.

But by inference, we believe there is thickening of the synovial membrane from the hyperaemia and serous infiltration.

The synovia is increased, more or less turbid mixed with fine-cells. There is an excess of fibrin factors in the blood as shown by tests.
Instead of having three or four parts of fibrin to the thousand parts of blood, as in health, it is increased to eight or ten parts to the thousand. This increase of fibrin elements passing through the heart has a tendency to deposit some of it on and around the valves of the left heart. As the valves are in a state of inflammation, bring fibrous in their nature. These deposits are found on post-mortem as vegetation which are agents of a very serious nature in many cases. Why it is that the left side of the heart is alone affected by these deposits of fibrin, is not known.
Clinical History.

The attack may come on gradually, after some days of indisposition. But this is not the rule rather the exception. In most cases the onset is sudden and at night, chilly sensations or a distinct chill with high fever which in many cases preceded the attack for some time. The temperature may be out of proportion to the severity of the other attendant symptoms. It usually ranges about 103.5°F. The pulse is full and bounding, but rarely exceeds ninety beats per minute in an uncomplicated case.
The disease is now locally manifested by intense pain in one or more of the larger joints. Usually the knee, ankle, wrist, elbow, or metacarpophalangeal joints are first attacked. There is increased heat and redness in the part. It is swollen sometimes extremely so. The affected joints are very sensitive to the weight of bed-clothes causing pain, and patient will keep one position for hours in order to avoid pain which results from motion. The swelling is due to an increased amount of synovial fluid and effusion into the structures around.
the joints, it is most prominent in those not covered by muscles, as the knee, elbow, wrist etc.

One striking peculiarity of arthritic rheumatism is its tendency to leave one joint and attack another. It will leave one part suddenly and attack the part corresponding on the other side of the body. Sometimes parallel joints are affected—hence known as the "rheumatic law of parallelism." If the attack suddenly leaves a knee, we may expect the other knee to take one inflammation or a short time, or it may go to the elbow, a joint similar to the knee.
This case is almost invariable. In an analysis of 21 cases which presented 78 instances, there was but a single exception to this rule, as reported by Dr. Austin Flint. The tongue is frosted, but is covered with a thick, creamy-coating, more or less brown. This coating is almost characteristic and lasts throughout the disease. The thirst is increased, and appetite greatly impaired, or entirely lost.

Pain in the head and delirium are not common, and when present denote some central complication.
Sweating is a peculiar feature of this disease, and lasts during the whole course of the affection. It has a sour disagreeable odor, and is most abundant at night. The sweating differs from that of many other diseases, in that it does not alleviate the suffering in the least.

The patient feels as badly after as before it had occurred.

Sudamina may occur on the neck and trunk, produced by the moisture. The urine is scanty and high colored, and deposits urates on cooling.
pigment the deposit of urates is of a "brick dust" color.
The saliva becomes acid. Sleeplessness is a source of dis-
comfort and more or less frustration from the pain and frequent
perspirations.
The bowels are usually constipated.
In general, the strength is well pre-
served. Anemia is produced early
in the disease as indicated by the
sallow skin and the blood mur-
mur, heard with the systole of the
heart and with greatest intensi-
ity over the 2nd intercostal space
on the right side of the sternum.
In other words, at the base of the heart.
The anaemia is due to the peculiar poison circulating in the blood. Ultimately, the most important feature of this disease is, the liability of the fibrous structure of the heart to take on inflammation. The inflammation is usually limited to the Endocardium and Pericardium of the left side. Endocarditis is the more frequent. It occurs in about 20 per cent and Pericarditis in about 14 per cent (of each one hundred) attacked by acute articular rheumatism. The immediate effects of the heart complications are not serious, but after some years they often
came most disastrous consequence. Endocarditis is the one most to be dreaded. The general symptoms disappear gradually, but there is a sense of uneasiness in the joints with neuralgic pain for some time afterward. The effusion is slowly absorbed, but the ligaments seem to be softened and the motion of the joint is interfered with for some time. It is usually only temporary, and soon the function of the heart is fully restored. This impairment is a result of the inflammation.
Etiology.

The causes are predisposing and exciting. A distinct heredity can be traced in about 30 per cent. It may be congenital, inherited or acquired. Be this as it may, the rheumatic diathesis is foremost. Age is a predisposing cause, as it rarely occurs before five or after forty years. If it occurs after the latter period - it is not a primary attack.

This disease occurs usually between fifteen and thirty years of age. It may attack someone much earlier. Prof. Chur relates a case - a little child who died
from it at the age of eight mos.,
As to sex, males are more liable
as their avocations necessitate more
exposure than that of females.
Again, it is most apt to attack
the weak, and broken down, who
live in dark damp and ill-ventilated homes.
Exciting causes are cold and
damp. These act by checking
the secretions of the skin, thereby
retaining the peculiar and sub-
tle poison, which "lights up"
the attack, as cold does a pneumonia.
The proximate cause however,
is undoubtedly the specific
horizon circulating in the blood. This poison is almost universal-
ly believed to be a form of lactic acid. This has been shown clin-ically, in the production of acute rheumatism, in the ad-
ministration of lactic acid to diabetic patients.
The acid is partly generated in the muscular elements of the body, hence it is called sarcolic acid. It is in combination with the acid phosphate of potassium. Experimentally, the presence of this acid has not demonstrated, but in therapeutic management of the disease, based on the presence
of an acid in the blood is more effectual than any other method known at present."

Diagnosis.

A typical case cannot be mistaken for anything else, however it may be confounded with either of the following affections, viz: Gout, Pyaemia, Hysterical Joint Pain, Simple Synovitis or General Rheumatism.

To distinguish from Gout.
The essential causes of both depend on an acid in the blood. In Gout it is uric acid, while in Rheumatism it is lactic acid. Gout is a disease of advanced life.
and is excited, and brought on by luxurious living and especially drinking malt liquors.

Rheumatism is a disease of early life, and influenced by cold and the vicissitudes of weather.

It involves the larger joints, but the smaller, usually confined to the metatarso-phalangeal joint of the great toe.

Lastly, there is the absence of the profuse secretion in gout, and is usually confirmed by a gouty history.

Pyeluria — is usually confined to one joint, characterized by hetic, great inflammation irregular.
swell, and the joint tends to suppurate. This order of things is reversed in acute rhematism. The history should never allow any one to mistake these diseases. Hysterical joint pain is differentiated by absence of hypnosis, also of heat, redness, and swelling in the part. Pain is only aggravated on examination and where patient's mind is directed to it.

Acute Arthritis (Simple Synovitis). When confined to one joint it fixes throughout the disease, has slight fever, no pain, nor heart complications, and recovery is more slow than in rhematism.
Genorrheal Rheumatism is excluded by the absence of fever and the attendant gleet and urinal discharge which is the exciting cause.

Complications, and Duration.
The most common complications are: Endocarditis, Pericarditis, Bronchitis, Pneumonitis, Pleuritis, and Central Endarteritis.
The duration is governed entirely by the presence or absence of complications. Uncomplicated cases recover in from two to twenty days, however it may be prolonged for six weeks. Cases recover within six weeks, on an average, without treatment.
Prognosis.

Recovery is the rule, the mortality being only about 3 per cent. When death does occur, it depends upon the hyperpyrexia, cardiac complications or cerebral embartletia.

Treatment

As most other diseases acute rheumatism has undergone a revolution in the way of treatment within the last half century. Bloodletting, blistering, mercurial to salivation and colchicum to the extent of producing vomiting and purging, etc., etc., have all fallen into disuse, as more effectual methods are known.
Hygienic regulations are very essential. The rooms should be kept warm and at an equal temperature all the time. Avoid all draughts of cold air and it is very necessary that the parts affected should be kept covered with flannel, or cotton wool or which is spread oiled silk. Rheumatic subjects should wear flannel the year round.

The texture of the gauze must be varied as the seasons indicate. Rest in bed is injurious, and all sheets should be taken off and supplanted by flannel. The diet must be simple and vary.
of digestion, milk brings the best. Since it is believed, the prime cause is dependent upon an acid in the blood, we would very naturally try to remove the cause in order to cure the disease. Now the chemical antagonists of acids are alkaline. And we do not look to these in vain, for it is a well established fact that the alkalies not only antagonize the acid but cure the disease. The alkaline treatment was first systematically employed in this disease by Dr. Wright in 1843, and on a larger scale. Ons Larnot & Fuller.
Tanned reports fifty cases treated this way which showed an average duration of only six or seven days. In no case was any heart complication developed after the patient had been under treatment 26 hours. By these statistics and thousands of other which might be enumerated, it is beyond doubt that the alkalies lessen heart complication. Can as much be said of any other remedy which has risen to this time from need in this dreaded disease? It can not be said of the so-called "specific" of narrow-minded men - the salicylates. Salicyne and its compounds (rather) tend to rather
than prevent heart complications.

The influence of salicylic acid and
salicylates on acute rheumatism
was communicated to the Medical
World by Dr. MacLagan in 1876.

Salicylic acid has much utility in its
place to diminish the pyrexia
and lessen pain for its analgesic
properties are undoubted.

It is apt however to produce gas-
tric disturbance if continued any
length of time, and last but not
least it does not prevent the
spread of inflammation about the
valves of the heart.

Hence from a logical standpoint
it would seem that better results
would be obtained by combining the two great rival remedies viz.
the alkalies and salicylates.
The bicarbonate of potassium, bicarbonates of sodium, and lithium,
are the alkalies principally used. It is necessary to give the alkalies
in large doses and bring the system quickly under its influence.
Commence with the bicarbonate of potassium gr. xxxv—xxx and repeat it
intervals of three hours until the urine is alkaline. When the urine
is decidedly alkaline, the dose
may be diminished, or the interval
of administration prolonged.
But the urine should be tested
from day to day, and when it be-
comes deaf, increase the dose of
the alkalai.

For the pyrexia give the Salicylate
of Soda, as it is a less nauseous salt
per XX-XXV times a day, or
often if required, but it must
be discontinued after two or three
days at most, as it is a great
in cardiae and respiratory damages
and making the patient rapidly.
The salicylate can be given in
large doses for the alleviation of
pain as well as the antipyretic
effect. It is also wise well to
combine the alkalai with quin-

ine in doses of grv-vii every
Therm hour. Better to give it intermediate the time of giving the alkali, which would make the intervals between giving the quinine and the potash one and one half hours. Keep the patient on the alkali for some days or even weeks after the acute symptoms have subsided.

For the acute pain, hypodermic of morphine. Begin with a small dose as will relieve the suffering. Secure sleep by chloral hydrate if the patient is full and strong, otherwise use an opiate.

Quinine and salicylates for the hyperpyrexia. Do not use the cold bath as it is dangerous.
When delirium, coma and convulsions are present, they denote grave central trouble, and we can only treat the symptoms, treat the complication as they arise as would be necessary in a primary affection.

Locally—keep warmth to the joint, use some anodyne liniment. If the effusion tamices too long hasten it with flying bisture. Wrap the joints in flannel saturated with a solution of Tinct. Eucalyptus and carbolic acid lead. Keep the parts covered with oil-silk or some non-conducting substance.
Inflammation.

Inflammation is altered nutrition in a part characterized by redness, heat, swelling, and pain, with disturbance of function.

The phenomena of inflammation.

The redness is due to the dilatation of the vessels, the heat is due to an over amount of blood, and it is doubtful whether the blood itself is increased in heat.

The swelling is due evidently to the edema.
of the blood, and also to the evaporation of serum from the vessels. In the cellular tissue, from the stagnation of the blood in overloaded capillaries. Pain, which varies according to the intensity of the strain, from due to the pressure on the nerves. In loose tissue the heat is great, swelling rapid, and pain of slight. In connective tissue, situated beneath fascial, redness and swelling necessarily slight, but pain great.
On account of tension, inflammation is acute and chronic.

When acute, all of these symptoms develop rapidly. When chronic, they manifest themselves more slowly.

With these local symptoms there will always be associated some disturbance of function, and what is of equal importance there will be some constitutional disturbance which is known as an inflammatory fever. This fever
depends upon the severity and character of the inflammation and its seat.

Causes are predisposing and exciting. The former are such tendencies as make the patient liable to the recurrence of inflammation, as they once, occupation, and previous attacks of inflammation.

Exciting causes are those which produce the actual outbreak of the disease, as irritating
substances, and wounds. Inflammation spreads about the system in several ways, by continuity, by contiguity, by contact and by the blood current, as in cases of embolism.

Subacute inflammation lies between the acute and chronic. The two terminations, a return to health, by resolution, or absorption, of the inflammatory deposit, and the death of the part.
Death may occur molecularly, when it is called ulceration in the soft tissues, and caries in the bony tissues. Infarction, which is called mortification, in the soft parts, and necrosis in the bony parts.

The pathology of inflammation.

The process of inflammation comprises changes in blood vessels and circulation, exudation of fluid, and of blood.
corpuscles from the vessels, and changes in the inflamed tissue. Changes in the blood vessels, and circulation are essential to the existence of inflammation, both in vascular and non-vascular tissues. In the latter which comprise the cornea and cartilage, they take place in the adjacent vessels from which these tissues derive their nutritive supply. It has now been determined...
implied that no increased activity, no multiplied show of tissue elements occurred as a part of the process of inflammation, but that on the contrary, the process leads everywhere to depression of vitality, degeneration, and death.

Pus is made up of pus cells, and pus cells are made up of dead white corpuscles.
Treatment

Remove the cause, and put the part at rest. The treatment depends on a knowledge of the phenomena. Whenever possible, direct the part artificially, as by applying a Téphéri. Elevate the limb above the heart, if possible. When irrigation is always provided, the dressing off water by gauze cloths is as always to have the patient near. By irrigation, lacerated limbs may often
be saved, which would otherwise be inevitable. Lost, but care must be taken not to apply too much cold to injured parts. Never apply cold when pulse is present. The sensation of the patient must be the guide. If he feels chill, elevate the temperature of the water. It is often difficult to say from inspection whether heat or cold is required. As a general rule, air, frank, open, energetic, explanation, is study.
constitutional cold is better, and in subacute inflammations occurring in weak persons, warm applications. In all cases let the sensation of the patient be the guide.

But how do heat and cold, being opposites, act favorably in the same disease? Cold is sedative, reduces temperature, and circulation, and acts favorably on nutrition. When the tissues are tough, heat mellifies
and takes off the press, thus allowing the circulation to go on, relieving the irritation and pain.

Heat also favors exudation. Heat with moisture, is indispensable when inflammation is in the act of verging into suppura-
tion. For a fermenting poultice, flaxseed, makes the best poultice. Charcoal may be incorporated with flaxseed, as a deodorizer. Sometimes well regulated
pressure may do good. Vessication performs a two fold work; it attracts blood from port, and attracts serum, and thus diminishes pressure. Vessication is usually produced by caustic -ised.

Tiffane

"In treating in inflammation, I don't treat simply the name, but treat what you have before you. Use common sense. Well regulated pressure is good in some stages."
Pressure such as plaster on the part with cotton between it and the skin. It keeps the blood vessels from dilating and becomes congested. Wrap the part with rubber tubing and pass ice water through it. It is very good when the vessels are dilating, but not when pulse is present. When pulse is present let it out. Give the patient enough opium to make him comfortable. If one preparation will not
agree with him, give him such a preparation as he can take.

Fluctuation is a sensation appreciated by the fin.

ger when there is a fluid in a sac under

them, and you tap the part or press on it.

You can get fluctuation across the belly of a

muscle very often. So don't make a mistake

and open the bell of a muscle for an abscess.

It is not generally

proper to wait for an abscess to get ripe
before you open it.

When the middle of an abscess is soft, put a knife in it, and let it out the pus. When this is done, the patient gets rest. When you open an abscess, open it freely—never make a small puncture. After this, small blood vessels begin to look and look until they meet or near to the fill into the abscess cavity, and this is called pusulation.
Pneumonia—Bronchonitis—Inflammation of Lung.

Causation—It is an inflammation of the substance of the lungs, like bronchitis, is generally due to the influence of cold and wet. It is also caused by the spread of inflammation from other parts, as from the bronchial tubes, in pleuritis, bronchitis, measles, influenza, diphtheria, etc., from the pleura in case of pleuritis, or, if the pleural cavity be obliterated by adhesions, from the chest walls or the surrounding vissera. It may be developed by the direct action of mechanical and other irritation; at the inhalation of irritant gas, particles of rust or metal; or it may be caused by emboli in the branches of the pulmonary artery or by tubercles or clots in the bed of the
At 9 Branch
lungs. It is more prevalent at certain times, especially those seasons when the temperature is liable to decided variations. In the British Islands winter is the season of greatest prevalence, on the Continent, spring; in this Country winter and spring, the former especially, have the same winter fever. Persons who have a pathological tendency are more liable to it, and there are other diathetic states concerned in the production of pneumonia, rheumatism, gout, diabetes, the captive liver, especially chronic alcoholism. But acute edema pathic pneumonia occur quite often amongst those who seem to be in the best of health. It is met with in both sexes and at all ages, but is more common in men than women.
because in their invention they are more exposed.

Morbid anatomy.— It is generally divided into two forms, namely, lobar and lobular pneumonia, or as they are termed by German authors, lobar and enteral. The type of the former variety being furnished by the idiopathic affection, that of the latter by the condition which is secondary to the disease of the air passages. The two varieties, however, half into one another.

Lobar pneumonia begins with hyperemia of the small vessels in the walls of the alveolar and bronchial passages; with proliferation of the epithelial cells in these parts; and incrustation of lymph, and corporalulae elements of the blood. Communicating with these vessels are air-violets and hil-
sages which become gradually distended with liquid matter, and the air they contain is expelled and this portion of the lung becomes solid. The dilated vessels are more or less plugged up by their capillary contents, and the alveoli filled with cells. These cells are modified epithelial cells, some granule-cells, and others having the characters of per-oxides - all are blended together by a glabrous material or fibrillated network. During the absorption the contents of the air-vessels liquefy, and acquire more and more the microscopic character of fat. The fatty degeneration may become general throughout the accumulated cells, which may be either excreted or absorbed. Abscesses are sometimes formed.
in the lungs by the conversion of the inflamma-
tory exudation into fluid, and sometime by the conversion of gum. Inflamma-
tion of the lung, like inflammation in other parts, seldom occurs without some exudation into the surrounding tissue, and pneumonic inflammation, like other inflammations, tends to spread. Pneumonia is divided at least into three stages: first is the stage of congestion or engorgement, the second that of red dehydration, and the third that of gray dehydration. In the first stage the lung contains some air, it is congested, and more moisture and is easier lactated than a normal lung, and is also heavier. This is the period of congestion, or the beginning of suppuration, and at this
time it is difficult to distinguish the condition of the lung from that of hydrostatic congestion. In the second stage the lung is consolidated; it has lost its air and its cavities are filled with cells; it is distended and its lobules can be distinctly seen, and presents a mottled appearance. Blood is sometimes injected into its tissues. The lung-tissue is easily torn and readily sinks in water. The third stage differs from the second, mainly by the lung-tissue being of a pretty uniform grayish color, yellow and granular tissue, and in its increased friability, and in the circulation of a thick, insulent fluid from its surface. In some cases the fluid is scanty, and in others very abundant.
The edema generally extends beyond the part of the lung affected. Inflammatory lymph is often deposited on the surface of the inflamed part of lung, and also upon the pleural pleura. Since pneumonia tends to spread, we occasionally find its stages all present at the same time in the same case. Inflammation may be limited to a small portion, or it may involve a whole lung, or even both lungs may be affected. The right lung I believe is said to be often affected more than the left, and the lower lobe than the upper.

Lobular pneumonia is an affection of young children especially, but it is met with not infrequently in adults.
persons. There are pneumonic patches in the lungs, varying from the size of a pea to that of a silver, and involving one or more lobules, and separated by a network of capillaries, and perhaps healthy lung-tissue. These patches may be engorged, if such be the case it may be difficult to recognize their character; sometimes they present the ordinary features of red or gray hepatization. Much of the lung-tissue may become involved by these patches, extending and coalescing; and this is the way lobular and lobar pneumonia pass into one another. True lobular pneumonia is always secondary to the blockage of air-passage, especially the
Capillaries; it may be excited by the gradual extension of inflammation from the tubes to the air-vessels, or inflammatory products may enter the air-vessels during inspiration which act as irritants and consequently are also exciting causes. Epithelial, granular or embryonic cells are found in greater or less proportion, according to the stage of the disease. The infiltrated pneumonia is closely allied to lobular pneumonia, it is due to obstruction of the small branches of the pulmonary artery, either by embolism or thrombosis or in the course of syncope. In these cases the affected patches are also usually of small size. Lobular pneumonia is generally
but marked towards the base of the lung.
They in a tendency to the development
in all forms of pneumonia, of bronchitis
to a greater or less degree. In the begin-
ning of pneumonia, a transparent
viscid fluid, stained with blood is ef-
fused from the air-cells into the tubes;
sometimes this fluid accumulates in
the bronchial tubes, and thus they-
become filled to a greater or less
degree with casts. Pneumonia often
proves fatal; and sometimes passes
into a chronic state or condition. Pnu-
emonic abscesses are generally small
and irregular in form. Gangrene
rarely occurs in idiopathic pneu-
monia, but is principally met with
in cases in which the pneumonia
is secondary or a complication of another affection? When the lungs become gangrenous, their tissues break down into a fetid greenish yellow pulp, and the discoloration of the surrounding tissue is more or less greenish; and this solid tissue is sometimes described as gangrenous. Gangrene may involve a large portion of the lung or several patches, or even one small patch. The margin of the gangrenous cavity, if a post-mortem examination be held, will be found in some cases ill-defined, and in other cases well-defined. Besides pleurisy and bronchitis, we often meet with an acute butchel lung, or one near the ribs, more or less pronounced; inter-
linal congestion, and inflammation of the bronchial glands. During pneumonia other organs beside the lungs are sometimes involved by the inflammation; as the bowels, kidneys, pericardium and brain. Elevation generally the left side of the heart is contracted and nearly empty, and there is a clot of fibrin in the right side of the heart which projects into the pulmonary artery.

Symptoms and progress. — Ho! this pneumonia is ushered in with a day or two of feverishness. The invasion of the disease is generally marked by a sudden and violent rigor, a succession of rigors, and in children by an attack of convulsions; then
is also considerable elevation of temperature. The specific signs of the pulmonary affection usually show themselves immediately or in about twenty-four hours; very rarely are they delayed for a longer period. These signs are rapid breathing, dorsal pectoritis, cough which is soon attended with viscid secretion stained with blood, sometimes pain when a long breath is taken, and according to the stage of the affection, fine excitement, or dullness with tubular breathing, and increased bronchophony and vocal tremors. The patient feels cold or shivers, his skin is hot and dry or perspiring, his tongue fiery.
his pulse accelerated; jaundice and diarrhoea are apt to occur; his urine is scanty and albuminous, and delirium occurs especially at night. In mild cases after two or three days of illness, the temperature falls, and the other symptoms outside gradually until convalescence is established. In favorable cases convalescence may be delayed for a week or fortnight, and then the patient may recover suddenly or gradually. Death may occur in fatal cases at any period of the disease, and is due generally to asthenia or apathy, or both of these conditions. The respirations are usually shallow.
and hurried, and run up from the normal to 500 or 600 and run more
in the minute, and where rapid
the bacilli expand, and there is
usually a sucking sound in the
mouth, and more or less dyspnoea.
Cough, which is sometimes aug-
tenacious and even haemorrh-
al, is almost always present. It
is a dry cough at first, but is soon
attended with expectoration of trans-
parent and viscid mucous stained
with blood. This symptom is usual-
ly described as having a rusty color,
it often has, but it varies in color,
and is sometimes a bright occasion,
when it may be taken for
pure blood. After a few days, the
expectoration becomes opaque and greenish, and in fact acquires a mucopurulent character, and then gradually diminishes in quantity. Sometimes it acquires a dark greenish or reddish-brown tint and a watery consistence. This form of sputum is also likened to prune juice, and is a sign of increased congestion and escape of blood. It is also a sign of the presence of the third stage, and a fatal issue. The presence of pulmonary gangrene is indicated when the expectoration is purulent, or is attended with fetor. The quantity and quality of the expectoration vary in different cases.
patient never expectorates more than one or two rusty-colored sputa; in some cases the sputum never presents the characteristic tint. The expectorated contains sodium chloride, mucus, and albumen. Sometimes the patient complains of no pain, sometimes of a sense of heat; and there is a stitch sometimes when he coughs or draws a deep breath. This pain is a sign of the coexistence of phthisis. The most characteristic auscultatory phenomenon during the first stage is fine expiration, which can be heard during inspiration, and sometimes during expiration, and frequently at the end of a deep inspiration. On percussion there may be no change.
or there may be high-pitched resonance of a crackled or sound. The second stage is marked by dullness over the consolidated portion of lung, with increase of vocal fremitus; instead of fine inspiration, we get tubular breathing, and the corresponding whistling character of cough and voice; and broncho-phonic. A metallic inspiration is also sometimes present. This is almost an absence sometimes of respiratory sounds and broncho-phonic over the affected region, due probably to obstruction of the bronchial tubes leading to a portion of consolidated lung. During the coexistence of pleurisy with pneumonia we get friction sounds, and probably the
nomena indicative of fluidity. When resolution takes place, or the lung tissue begins to break down a coarse creptation takes the place of tubular breathing, to which the name, crepitating rale, has been given. When the lung is consolidated, the movements of the thoracic walls in relation with it become impaired, and the resistance on percussion increased. Pneumonic may be deep-set in the lung, or confined to the inner surface, and thus escape detection by auscultation or percussion. Some dullness on percussion usually persists long after the local signs of pneumonic have disappeared. The cardiac pulsations
Always increase during the phase stage, but rarely increase proportionately to the respirations, the emetic instead of being about 4 to 1, sinks to 20 to 1. The pulse in adults may range from 80 to 120; in children may reach 200 or more. When the pulse is very rapid, it is an unfavorable sign, it is generally associated with feebleness. The pulse is frequently at first, somewhat full and strong, but sometimes full, soft and rebounding; later on it is always more or less full and thready. There is always an excess of fibrinogen in the blood. The tongue is coated, and in some cases becomes dry and brown, and
Sordes accumulate upon the teeth. There is always loss of appetite and thirst is pretty constant. The hands, sometimes, are not particularly affected; sometimes constipated, and at other times there is more or less diarrhea, and this may be dysentery in characteristic. Jaundice is said to occur more frequently when the right-lower lobe is affected, but there is no more connection between right pneumonia and jaundice than between left pneumonia and it. The urine is scanty, dark-colored, and of high specific gravity. Contains less sodium chloride than usual and in excess of uric acid and urea.
with a tendency to deposition of mucus. It contains sometimes albumen, with hyaline, granules, or epithelial casts. It gets more abundant, pale, and of lower specific gravity, during convalescence, and the mela diminishes, while salt increases. The face is flushed in the early period of pneumonia, and may be somewhat lived; the skin is hot and dry, but there are often purpuric eruptions during the disease, and they generally attend its decline. An eruption about the lips and nails is almost pathognomonic. In the beginning of this affection the patient complains first of headache and tic-tac pains. De-
Lividura passes generally into coma in fatal cases. Subcutaneous muscular tremors, and loss of control over the bladder and rectum sometimes occur in some cases. The temperature varies from 100° to 106° more, and attains its maximum in a few hours. There are successively remissions and surging exacerbations in the temperature, until convalescence begins. Lymphatic pneumonia might be confounded with typhus and enteric fever, but generally its symptoms are so characteristic that it is almost impossible to mistake their significance. Sometimes there are complicated with
Secondary pneumonia. It is different, however, from the various forms of incipient or secondary pneumonia, and with the lobular variety of the disease. These occur generally insidiously in the course of other grave affections, which have always probably produced various pulmonary symptoms, such as dry increased expectoration of scarce, mucous or bloody spuita, lividity of surface, carbonic acid poisoning; but this onset is not usually attended by rigor, or high fever, which characterizes the idiopathic variety, and they are not often accompanied by labid dyspnoe, or palpi
tice, and often there is an entire absence of tussion.
accepting towards the close of the disease. These forms of pneumonia can only be positively determined by careful physical examination of the condition of the thoracic organs. But lobular pneumonia may be present to considerable extent without dulness, tubular breathing or other chief signs of the disease. The phenomena of auscultation and percussion may differ little if any from those of capillary bronchitis. The breaking down of lung-tissue in the latter stages of pneumonia does not reveal itself by any special sign, unless the cavities be of such size or position, to cause characteristic auscultatory phæ-
Prominent. These abscesses sometime open into the pleura, or perforate the thoracic walls, and sometimes form sinuses running down behind the peritoneum, and they finally open into the colon or some of the hollow visera of the pelvis. When gangrene is present there is a distinguishing fetor of the breath. When gangrene appears there is also depression of vital power or collapse. Pneumonia is always a disease of considerable gravity. The idiopathic form is seldom fatal, unless a large portion of the lung be involved, or both lungs be attacked, and in cases in old and weak patients have in some
Their constitutions by bad habits, overwork or disease. Lobular pneumonia is very fatal.

Treatment.—The treatment must be governed according to the conditions of each individual case. It is well not to employ means that interfere with the normalization of the disease. In nervous irritability, pain, rapid breathing, etc., administer morphia. Give five or six minims of morphia solution with a third of a grain of the sulphate of ipecacuanha added to it. The morphia may be administered by the mouth in doses of a sixth or half of a grain. When emoliation has taken place, pneumonia cannot be arrested, but
If the treatment is begun at the outset of the disease, it can be shortened by the administration of large doses of quinine combined with narcotics. Zincline ofaconite may be given in the earlier stage provided the pulse is rapid, but it is a mild, consequently its effects need to be watched. Sedatives after consolidation occurs should not be used because the heart wants all its strength to drive the blood through the lungs. Opinion is should be given only cautiously, when the patient is suffering from dyspnœa and insufficient circulation of blood. In the second stage, the main indications are to sustain
the weak pulse and to treat the high temperature. For lowering the temperature, or the hydrobromide solution may be used. It keeps the temperature in moderate limits until the crisis occurs, when naturally it begins to abate. If the pulse is feeble and intermittent alcohol may be given. The amount must be regulated by its effects; if it seems to be doing good continue its use if not stop it. Carbonate of ammonia may be given in five or ten grain doses with the alcohol; it favors its restoration. Do not use ammonia if the albuminuric become blue; you may give chloral bichloride at night for it is a sedative.
Infantine also is given sometimes as a stimulant and antiperspirant, in doses of ten or fifteen drops in the third stage, when resolution takes place slowly. A blister may be put in the axillary space, but it should be long enough to produce a diffused redness, after its removal put one flax-seed poultice. Iron, quinine, and cod-liver oil are the best agents to be employed during convalescence. Some physicians think it well to keep the affected side invested in a large poultice of cotton, and thus prefer the application of ice-bags or cold compresses.

Robt. F. Glassell, M.D.
Disinfectants & Disinfection

by

W. H. Edwards, M.A.,

class 1885, & 1886.

owing to the prevalence of cholera
in Southern Europe during the past
year or two, a greater attention has
been given to the subject of disinfect-
ants, in order if possible to abate in
some measure the terrible ravages
made by this and similar contagious
diseases, whose origin is supposed to
be due to living organisms. The lit-
erature on this subject is very ex-
tensive and the results arrived
at during the last year have indeed
been flattering and bids fair, as a
mean period, to solve the question.
That is the most efficacious remedy for the destruction of these organisms? I will not attempt to answer this above question in this article, but only wish to give the results of my long experience in the handling and using of those articles commonly used as disinfectants.

By a disinfectant is meant, first, a substance either in the liquid, solid or gaseous state, which destroys or renders inert, that which probably would produce disease, whether of an infectious or contagious type, and secondly, a substance which arrests those putrefactive changes in decomposable materials, which foster or
produce those germs, gases, or vapors, that induce disease in the human systems. An antiseptic on the other hand is a substance which prevents decay. 

That is liable to decay, and thus it may seem that disinfectants act upon materials, that produce those death-giving germs etc., while antiseptics act upon those substances which enter into that state, but have not as yet done so. The use of salt, sugar, vinegar, and the employment of heat are well-known examples of household antiseptics. Mercury bichloride and arsenic are extensively used in embalming and in the preservation of medical specimens. Thus it will
be observed that any substance classed under the head of disinfectants may also be used as antisepsics, and if large quantities of antisepsics possibly will also acts as disinfectants.

Since the masses of material which we are called upon to disinfect are usually large, it becomes necessary to seek out the smallest quantity of material necessary to decompose the decaying matter, or destroy the germs, gases, etc. already formed, and it is necessary to find also the cheapest article possible for such purposes, for usually the localities that call for a vigorous disinfection are the homes and
surroundings of the very poorest of our population. The disinfectants now in use or more or less poisonous, and some of them or even dangerous to handle. The safest plan is the destruction or removal of the excreta or animal refuse, but this is not always practicable in a household or community. The question is how can the putrid fermentation be arrested and destroyed? To answer this the process of putrefaction should be understood, and the causes and most favorable conditions for this process studied. A certain amount of moisture is necessary, and a temperature not to exceed 100 degrees
Fahr. or lower than 55. will give the necessary conditions to sub-
aputrefactive changes in animal
matter; if the temperature is car-
rried beyond 100 degrees, and the
process of driving off the moisture
by drying, the putrefactive matter,
decomposition will be arrested,
and the process for a time suspend-
ed, a like result will be obtained
if the temperature is lowered
below 55 degrees. Fahr. but it has
been proven without a doubt, that
in such cases, where the dried
and frozen material are again
placed in the same favorable con-
ditions, a like result will be ob-
sterile, desiccation then can only be regarded as an antiseptic process which suspends the vital force of the organisms taking part in the fermentation of the animal matter, the same remarks are applicable to a low temperature, which suspends animation for a time, but are brought again into activity by the application of warmth. Fear on the other hand when carried to a high point has been shown to prove fatal to such organisms, a short exposure to a high heat and a long exposure to a low temperature has been found to destroy infections or putrefactive organisms. Another factor in the future...
process in the presence of a small amount of Oxygen, although it has been advanced by some that Oxygen is not an essential element to the process but it is said to retard the change. The investigation however of this theory requires more time and attention, together with considerable outlay which is beyond my power to give or bestow upon it. The subject cannot be settled by the use of those materials that will support the necessary and I suppose as these agents complete in matters in the coagulation of the albumen if we supply and excess of Oxygen this will and does disinfect.
In the process is itsel stages in the oxidation of the elements of the constituents of the decomposed matter. If then we supply them with a larger amount of oxygen, es-
pecially in a condensed and active form, aside from any direct action acting on the organisms present, the organic matter is rapidly carried through these stages, to a greater or less extent according to the amount supplied, and is converted into compounds less favorable for the develop-
ment of such organisms. A number of substances used as disinfectants act in this way as ozone, hydrogen peroxide, nitrous fumes, permanganate, and others.
Salts iron, chlorine, Bromine, or substances which can be made to supply chlorine, as chloride or Lume, which by combining with the hydrogen of the water or of the organic materials sets oxygen free, various substances disinfect in a way which is not fully understood, but which seem to have something in common with their power of coagulating albumen. That is all these substances have the power of coagulating albumen, though their power of disinfection, are not proportioned to their power to coagulate, and in the case of some it has been observed that a disinfective power exists even when so.
diluted that they fail to coagulate albumen, at any rate the nitroge-

nous matter in organic substances is the chief source of nutrient-

for nitrofactive organisms, and this explains why the decomposition of

animal matter, (which contains a

large proportion of nitrognous

matter represented by albumen) is

more dangerous than vegetable

matter and some action not clearly

understood is made upon the ni-
trogenous matter by certain agents.

The agents which produce this

change are the so-called coal tar

products: as barbolic and benzyllic

acids. He will now consider brie

-
by the several agents used as disinfectants.

**Sulphurous Acid**

This acid stands at the head of the list and the power of its ability for destroying diseases which are dependent upon the germ theory is almost universally known. It is used by sanitary authorities with the greatest confidence, especially in destroying the infection of smallpox, scarlatina, yellow fever. It has been known to possess these properties for a long time, even as early as 1771, it was used by the Russian authorities during the pest at Moscow. It has been said that
a number of criminals condemned to
death were made to wear the
garments of soldiers who deceased
with small pox, the clothes being
previously subjected to the action
of sulphur dioxide for several hours.
The result of this experiment was
successful as none of the condemned
men contracted the disease. The
acid is even yet used extensively
and with the greatest confidence in
disinfecting ships, hospitals and public
institutions. But recent researches
have shown that it is not the power-
ful germicide that some claim for it,
and that its use on a large scale
may eventually be abandoned.
other agent, from which more positive experimental results may be obtained. Sulfur Dioxide may readily be obtained by burning sulfur, it is two and a half times heavier than air and soluble in water, but it deteriorates if kept in the aqueous state and for experimental purposes should be freshly prepared. It is very extensively used for its bleaching properties, owing to its exceeding by many times odor. It cannot be used where human beings are exposed to its effects, so small a quantity as one part in ten thousand of air will produce discomfort. Sulfur dioxide should not be used to
gether with chlorine as one neutralizes the other. In disinfecting a room
from one to two ounces of sulphur roll
or flowers should be used for every
hundred cubic feet of space. This
is placed over sand or water to pre-
vent accidents, and then ignited. The
apartment should be kept as air-
tight as possible and left from
four to six hours exposed to the
gas. As already intimated these
have arisen a doubt in the minds
of scientific men as to the true
position of sulphur dioxide as a
disinfectant. It having been dem-

onstrated by carefully conducted
experiments that the gas has not.
the power of destroying the potency of some organisms, while its efficacy in destroying bacteria and the micrococci from a vacanic vessel, with a five per cent solution, yet is utterly failed in spore containing material.

In an able article written recently by Dr. W. Steenberk, Surgeon U.S. A., he concludes his paper in these words: "My experiments show conclusively that it does destroy the specific infecting power of vaccinic virus dried when ivory points, when present in the air of a disinfecting chamber, in the proportion of one volume per cent, and that inorganic solutions it destroys the vitality of various mi
crocos in comparatively small amounts.
It is even practicable to destroy these organisms dried upon pledges of
cotton on long exposure in gas tight
receptacles. But the conditions of suc-
cess are such that it appears almost
inpracticable to conform with them
on a large scale, and it is evident
that much of the so called "disinfe-
tion" with this agent is a farce.

Heat

The effects of heat have already been noticed. Dry heat is consid-
ered the most efficient for dis-
infecting purposes. The articles
contaminated should be exposed
from five to six hours to a temperature above 212° Fah. In Great-Britain dry heat is much used by the sanitary authorities, this is applied to clothing, etc. in a large oven constructed for this purpose, and the heat carried from 212° to 300 degrees Fah. Such an elevation of temperature would seem to affect the material, but it is shown that wooden goods exposed to this temperature do not deteriorate, but in cotton and silk goods the fibres are more or less damaged.

Chlorine

This gas like Sulphur dioxide has
also been long known and accepted as a disinfectant and is extensively used in the form of chlorine. Free chlorine may be readily obtained by the spontaneous liberation from bleaching powder, or solution of sodium hypochlorite, or by the action of sulphuric acid on bisulphide of manganese and common salt. For disinfectant purposes it should be generated in large quantities, the most convenient method of generating it is to use for every cubic metre of space to be disininfected fifteen grams of dry lead carbonate. The solution is with q.s. water to make a thin paste. This to be divided into several portions
and placed in different parts of the room and to each patient added the same quantity of common chlorohydric acid as its containing urine. The same precautions in reference to windows and doors should be observed as laid down in the use of Sulphurous acid.

The more thorough experiments with selenium were made by Fisher and Brockhaus, the material tested consisted of the spores of Bacillus antirracis, Micrococcus tetragenus, Micrococcus prodigieus, Bacillus of septacemia of mice, Bacillus of septacemia of rabbits, Asherillus niogenicus, and Asherillus ruber, and bacteria of food cholera and
microorganisms, their conclusions seem to justify the statements that lemonic is an efficient disinfectant when in the proportion of one part in one hundred. But the air and objects to be disinfected should be in a moist state and should be exposed from two to three hours. Lemonic, being a powerful bleaching agent, all fabrics will undergo more or less change when exposed to its influence.

Lodine & Bromine

These two substances, though differing in physical appearance, seem to have about the same value as disinfectants, their effect on the
various non-pathogenic microorganisms.

This is of equal value. Sodins may be used by gently heating in a sandbath or over a water bath. Sodins may be placed in an open dish and allowed to evaporate. This extreme unpleasantness in handling Sodins has in a measure been overcome by an invention in Germany which consists of a block of porous material, preferably made of infusorial earth, saturated with Sodins. Used in this form it may be handled with perfect ease.
Barboli Acid

Barboli and barosyleic acids may be said to have been used as disinfectants since 1834, when discovered by Rungé. They are distilled from coal tar, and the articles made by bolders are highly valued and have a universal reputation for purity etc. Barboli acid is the basis of Professor Léger's antiséptique surgery, and was brought prominently to the attention of the scientific world through this channel, and thus led to an investigation as to its disinfectant properties. Prior to this it was used in Europe as a disinfectant and was also held in high es-
Barbolic Acid

Barbolic and bromic acids may be said to have been used as disinfectants since 1834, when discovered by Bunsen. They are distilled from coal tar and the articles made by dealers who have a union and reputation for purity etc. Barbolic acid is the basis of Professor Lévis's antiséptic surgery, and was brought prominently to the attention of the scientific world through this channel, and thus led to an investigation as to its disinfectant properties. Prior to this it was used in Europe as a disinfectant and was also held in high es-

Term in the country for similar purposes, but of late years its use as a disinfectant has been called in question and has led to the most careful practical investigations by Dungall, Baxter, Stemberg, and others. It was demonstrated by them that bullous acid could not be relied on as a disinfectant except in special instances, and especially in the bacteri of putrefaction it was inefficient. The large per cent of bullous acid in the liquid form for disinfectant and germicidal purposes prepares us for its failure in the gaseous form so that the popular idea shared by
a great many physicians that an order of carbolic acid in the sick room, or in a foul privy, is an evidence that the place is disinfected in entirely unfounded, and in fact the use of this agent as a volatile disinfectant is entirely fallacious, and impractical because of the expense of the pure acid and the amount required for the purpose, is being estimated that in order to disinfect a room twelve feet square and twelve feet high, it would be necessary to scatter 17 lbs. pure acid or 84 lbs. common acid. Even this would more entirely destroy the bacteria but as an antiseptic this article has few superiors.
Mercureul chlorure

During the last four or five years, this agent has been brought prominently before the public as a disinfectant. It is claimed, however, by Prof. Joëng of Breslau and in a paper recently published in the "Centralblatt für Infektionskrankheiten" that he has used it in the form of vapor with uniformly satisfactory results during the last twenty years both in hospitals and in private sick rooms. It has also been known as a deodorant and as an antiseptic agent for the preservation of animal tissue for a long time. But it is only recently been demonstrated that this substance mercury occupies
a leading place among germicidal agents. The iodide has also been put forward as an antiseptic and a germicide, but owing to the cheapness and solubility of the iodides it will doubtless be accorded the first place. Experiments were performed in the anthrax shales B. subtilis, the spectrum of tuberculosis, etc. and Dr. Stranberg who performed the above-mentioned experiments was justified in forming the following conclusions. Mercanum chloride in aqueous solution in the proportion of 1:1,000, is a reliable agent in the destruction of micrococci and baccilli in active growth and containing spores.
and in the proportion of 1 in 1000
In destroying the spores of bacilli, provide
and that the microorganisms be exposed
fairly to its action for a sufficient
length of time. A standard solution
in 1000 may be safely recommended.
In the disinfection of bedding and
clothing which can be washed, for
washing the floors and walls of in-
fected apartments, for disinfecting
the hands of surgeons and gynecolo-
gists, and as a disinfectant wash for
superficial wounds on mucous surfaces.
For continuous application to wounds,
a solution of 1 in 10,000 or less, should
be effective.
A few practical remarks on carrying out the application for ordinary disinfecting purposes will conclude this paper. Blotting, bedding &c, which will not be injured thereby, should be exposed to a temperature not exceeding 350° F. for two hours. Blotting may also be disinfected by immersing uncolored material in a solution left Lines in the proportions of one part water to thirty. Blotting that can be washed should be boiled for a half hour. No delay should occur however for as soon as the soil clothing, bedding, is removed it should be transferred to the laundry.
A solution of one part of Lakanus solutum in five of water is excellent for washing the bodies of sick persons or attendants when soiled with infectious discharges; the excreta of smallpox, scarlet fever, and typhus should at once be disinfect with a solution of bleaching powder in the proportion of one in forty of water. Or if the odor is disagreeable to patients use a solution of Bichloride of Mercury and Permanganate of Potash in the proportion of two drachms of each to a pint of water. To disinfect a room containing a patient suffering with an infectious disease, the room should be vent-
tiated and the strictest cleanliness observed, and nauseous odors may be neutralized by the use of boric acid in the walls, floor, window ledges, furniture should be washed with a solution of corrosive sublimate at the strength of one part in one thousand. The walls should be whitewashed, after the room is vacated by the patient, it should again be subjected to the same treatment. And sulphur may be burned to destroy those organisms upon which it is supposed to act. In privies, cesspools etc., use one pound of leh. mixed to every hundred lbs. ofecal matter. Estimate in this vaults one lb. of leh lining to every thirty pounds. Walls of vaults
should be washed down with the same solution, during yellow fever chills or other epidemics. The floor should be sprinkled in         vaults every day.

all water for drinking or cooking purposes during an epidemic stage should be boiled and filtered before use.
Thesis.
John M. McLaughlin.
Arsenic.

Arsenic is sometimes found in nature, but more frequently combined with other substances, chiefly with iron, nickel, and sulphur. It is also contained, in very small quantities, in many mineral springs. To separate it from the metallic ores in which it occurs, the ore is mixed in a reverberatory furnace. The arsenic combines with the atmospheric oxygen, forming arsenic trioxide, commonly called white arsenic, which is carried on the slates.
If vapor from the furnace into long chambers or flues in which the arsenic trioxide is deposited. Metallic arsenic may be prepared from this oxide by mixing it with charcoal and sodium carbonate, and heating in a closed crucible. The upper part of which is kept cool; arsenic condenses in the cool part of this apparatus as a solid, with a brilliant luster. The vapor of this arsenic possesses a remarkable garlic-like smell. Arsenic in the metallic state
is inert unless it is oxidized and forms arsenic trioxide and acts with unexpected violence. When brought in water it forms an acid. It is therefore an anhydride. It is best in solution for internal administration. The dose of arsenious acid is 1/30 to 1/40 of a grain. Iodide of arsenic is an orange-red, crystalline solid. How is 1/40 of a grain. Arsenic in solution with the alkalies are all soluble in water. The best preparations of arsenic are the following:
Liquor Arsenii et Hydrargyri Dodidi; Known as Loewen's solution, close vij fox
Liquor Potassii Arsenatis; Known as Foulbeir's solution, close semi-
Liquor Sodii Arseniatis; Known as Parson's solution, close i-xx.
The strength of this preparatio
is one-hundredth of the arsenic
of all the solutions mentioned
above. Foulbeir is said to be the best. Arsenious acid ad
ministered may act with
unexpected violence.
When a course of arsenic is
begun, large doses should be prescribed, and the quan
administered should be regular reduced, in this way arsenical poisoned is avoided. When continual increasing doses is kept up for a length of time the arsenic accumulates and toxic symptoms are quickly induced. However when the idiosyncrasy of the subject is unknown it is better to make experimental with a few small doses before you begin with larger doses.
The chemical incompatibles of arsenic are the salts of iron, magnesia, lime and all the astringents.
The chemical antidote to arsenic in solutions is the sesqui-oxide of iron freshly prepared. It is harmless and should be given in teaspoonful doses every ten or fifteen minutes. However, the first thing to be done in arsenical poisoning to evacuate the contents of the stomach.

In the absence of the hydriodic sesqui-oxide of iron, magnesia chalk and lime water may be given freely.

After the acute symptoms have passed off, you may use diluent drinks, made slightly
alkaline water, to facilitate elimination of the poison, and opium to subdue inflammation.

All these agents which promote constructive metamorphosis are synergistic to arsenic. Physiological action. The compounds of arsenic are powerful escharotic, and will produce sores on those who work in the arsenic preparations. Applied internal it absorbs and produce symptoms as though it were taken by the stomach, redness, swelling, pain, is a curious fact.
The effects of the administration of arsenic depend on the amount administered and the way in which it acts.

In medicinal doses, it promotes appetite, digestion, and improves the body nutrition. It increases the secretion of the gastrointestinal secretion, and hastens the intestinal peristaltic movements. Arsenic diffuses into the blood with facility and probably enters into the red blood globules.

It certainly lessens the excretion of carbonic acid and
probably also of use, or check
the retrograde metamorphosi
it stimulates the cerebral func
tions and in some subjects
mental exhilaration.
In larger doses, short of acute
poison, administered for a
lengthened time there is a
metallic taste; nausea or vomit
of glairy mucus epigastric
pain and soreness and af
ter a time diarrhoea of me
stools. The heart is fulle and
palpitation, depressed breath
ing. The skin shows its
self by itching of the eyelid
urticaria and psoriasis
As regards the nervous system, disorders of motility, trembling, stiffness, and contraction of the joints; disorders of sensibility. However, it is true not withstanding the above effect that a certain degree of tolerance may be established as witness by the arsenic eaters of Southern Austria, who become habituated to enormous doses taken toxic in themselves, with impunity. They find it serviceable by improving the bodily condition, become stronger gain in breathing power.
As a proof of this bodily improvement brought about by the use of arsenic, it shouuld be that they can persist in long suns ascending high mountains, and great bodily exertion without much fatigue compared to those not using arsenic.

Arsenic is taken in insufficient quantity to produce symptoms of acute poison. The phenomena produced are of two kinds: one gastro-intestinal and the other cerebral effect. The gastro-intestinal form of arsenical poison are burn.
ing at the epigastric, violent vomiting, great dryness of the mouth and fauces, intense thirst, bloody stool, retracted abdomen, suppression of urine or bloody vomit, palpitation of the heart, oppressed breathing, shrunken features and cold breath.

The other, or cerebra (form without the characteristic abdominal symptoms, the patient is suddenly put in a condition of profound insensibility, similar to that of opium narcosis, profound unconsciousness abolished reflexes...
Recovery from acute arsenical poison is rarely complete. Gastro-enteric irritability persists for a long time and life may be lost by continued suspension of the functions. Changes found after death are due to an irritant: deepened redness, erosion, more or less redness of the tracheal and bronchial mucous membrane and perhaps congestion of the lungs. Death from the central effect there is no antemortem change except redness of the intestinal tract may be absorbed. Vary degeneration.
of the liver, kidney and spleen is produced from arsenical poison, perhaps by lessening the amount of oxygen to the tissue. Paralysis of a certain hemiplegia or more frequent paraplegia. The dust from arsenical wall paper, which contains a large amount of arsenic, have produced a cachectic state accompanied by headache, vertigo. Garments dyed by arsenic have excited ulcerations of hands and nails and anaesthesia and paresis of the extremities. In fact sleeping apartment lined with arsenical paper may produce arsenic
Therapy:— Arsenic is very beneficial in the so-called irritative dyspepsia, best adapted by the following symptoms: red, poor appetite, distress after meals and pain, few drops of Foulin's solution with a few drops of laudanum. It is very beneficial in some forms of vomiting of a pregnant. In vomiting of chronic gastric catarrh and chronic ulcer of the stomach, cancer of the stomach, by relieving the morbid state of the mucus membrane, on which the vomiting depends.
In all states of stomach disease, only small doses of arsenic is required. Larger doses by creating an irritant of the gastric mucous membrane will only defeat the end in view. Jaundice due to catarrh of the bile duct, succeed to catarrh of the duodenum.

It is better to jaundice depending upon maladie or origin. Constipation due to deficient secretion dry faeces is cured by small doses of Truible Solution. In Chlorosis and anaemia where iron does not agree, arsenic with iron is more efficient.
Tubercle of the broncho-pulmonary mucous membrane such as the cataract chronic forms of phthisis is much benefited by long continued use of small doses of arsenic. In cases of hayasthma and pharyngitic asthmatic chronic bronchitis, emphysema, they may be treated with advantage by the use of fumigation.

**Formula and Mode:**

In solution of potassa fifteen grains. Distilled water one ounce. Take sufficient quantity of white paper and thoroughly moisten with this solution of arsenic, dry out cut up into fine pieces and divide into
twenty equals parts, and put one of these parts on a plate and set it on fire and the patient inhaled the fume with a blanket over his head. This may be practiced three or four times a day. 

Attacks of angina pectoris may be lessened or prevented by assiduous use of large doses of Fowler's solution.

It is said to be good in cerebral congestion, melancholy, hysteria, neuritis, neuralgia, epilepsy, and insanity. It is highly recommended in chorea. Large doses are given ten to fifteen drops three times a day. Local chorea but inject it.
Twitching of the eye lids and paralysis of the third nerve, known as ptosis. Three drops of furfur solution before meals three times a day. In many forms of skin affection, more especially of the blathy and chronic form, it should be administered for an indefinite length of time. By continued use symptoms of hoarseness manifest themselves should still persist its use by lessening the dose and giving a purgative. Arsenic and quinine has an important portion in the treatment of malaria because good in diminishing the
enlargement of the spleen caused by malaria. In these forms it is best used in combination of arsenic, quinine and iron. Amenorrhoea and menorrhagia due to anaemia. Arsenic with iron is the best form for these troubles. Functional impotence is sometimes greatly benefited by arsenicism. Arsenious acid two parts with morphine one part and sufficient water to make a paste is good in toothache applied to the carious part of the tooth moistened saturated with this solution. It is also used to destroy cancerous growths.
Dedicated to the Honorable Faculty of the University of Maryland by R. J. Anderson.
Baltimore 1884.
Intermediate Ear

Perinfection. Malarial fevers are characterized by their occurrence in certain regions of the earth. hvorover to produce the Deacon Malaria by their inequality, and by their regular succession of the cold and hot and sweating stage jaour designation have been applied to these former of fever such as fever and ague, Chell diseases now is finished.

Cancer

The great pathological factor is Malaria the tubular and other conditions favorable to the developmell of malaria exist largely in the country along the Atlantic sea board as far north as Boston in all that great interior region drained by the Mississippi and its tributaries the values of the sacraments in the west in the presence in the atmosphere and tuberculosis principles which is developed in what atmosphere, although the resistance of such a
principle is admitted the attempt to describe and define it have proven abortive unless the recent discovery of a like and similar organism made this possible. The cutaneous disease or the Batillaria Malaria which they have discovered floating in the atmosphere of the Prionine marshes. Rodriguez Hoyos of intermittent fever in the animal subjected it action by inoculation, of this discovery was confirmed and there red the body are proved to be the cause of three diseases which we call material fever. It will prove to be the first and most important step towards permanent eradication since it arises also called March Malaria because of the abundance of the Brevia about marshes but all marshes free from marsh malarial although well adapted to do it malaria that are pretty prackish are
worse than those industry fresh incountry.
Malaria is more produced the sandy alluvium
of the River Valley. subject to annual overflow
and heat by the Summers in the alluvium
and some very. away evils of Malarial zone
not subject to overflow also generated Malaria
when Malaria infectious occur or established in the
system all diseases occurring will have more
or less of the periodic character. the fame
of Malaria disease will depend upon the
conditions of the system and the intensity of
the Fever itself.

Pathological study.

Changes caused by Malaria poisoning are really
the same except degree in all the persons in
which the disease manifest itself in two organs
the Liver and Spleno. becomes very
which enlarged chiefly consisted in acute cause the spleen itself increases in relative quantity and sometimes there are ducts which have been observed, in some cases of typhoid fever in some chronic cases the spleen undergoes enormous enlargement its texture is tough and smooth in sections and has a grayish-blotchy color this change consist hypertrophy of the trabecular with hypertrophy of the capsule but in some cases the normal size of the organ is due to angiothelial degeneration when the organ is very large it is known as a large or the sudden in thrombosis malaria burning the spleen in some what enlarged but not much increased to be called an organ with the change consisting of elimination of the spleen pulp and hypertrophy of the trabecular and splenic the color of the spleen is a grayish-
Slate color due to pigment deposits which are found in great abundance in the walls of the blood vessels, where it is deposited by disintegration of the red globules. An important change takes place in liver during intermittent fevers, becoming hydropneumatic and swollen, and if jaundice is present, very much enlarged and yellow. Pigment, and the portal capillaries are divided with blood, and the gall bladder filled with thick, black, very brown bile in chronic cases. The liver has a granular tint due to pigment deposits along the vessels. It is firm in texture, and the divided parts preserve shape outlines, the hepatic cells and bile are filled with granules. The intestinal canal presents characteristic changes during an acute attack, these extensive and constantly hyperemia of vessels increases and more so be-
thickening and elevation of the solitary glands in chronic cases the intestinal mucous membrane has a slate color due to pigmentiation of the capillaries the kidneys are also affected by characteristic changes hyperemia during the acute attack and subsequent alteration as thickening mesentery the arteries filled cast off epithelium the intestinal connection likewise proliferating and is more or less amyloid changed in the mephrighian tuft and small artery, the short chiefly its muscular fiber easily torn the capillaries distended and soft black corpuscles very loose the white corporals are much increased in number, the most important change in the composition of the blood is the formation of pigment from hemoglobin in the hemolysis of the RBC

syndrome

a certain period elapses after exposure before there are any disturbance in the function of the bowel
Vomis from a few hours to many weeks. The average is usually four to five days. In long.

Reposion of cases the patient has a feeling of lassitude and weakness, often with backache and general muscular aches. He has an inclination to walk on cold damp days. His headache, tongue coated and blackish-green, and towards evening his skin becomes dry and warm. His sleep is disturbed by dreams and in the morning there are profound sweats, often a yellowish tinge to the skin, languor, loss of appetite and constipation.

The urine is loaded with bile. Pigmented, albuminal, frothy, and almost the distinct events in every. Pyrexia of intermittent fever; the chill and the fever, and the sweating where the chill comes on there is a feeling of chilliness, weakness, and malaise, then in backache.

Backache, creeping chill, and chill along the back. The whole surface becomes cold, and the patient...
...gladly welcome to Bed. do not underrate
defence how much clothing is put on the
body. The jujubes becomes dull his lip blue the more
Pinched the countenance shrivelled one jet after another
Shedding come on the teeth wrinkle together. The
Bed sheets meanwhile the pain in the back. Wind a cold
continues, there is extreme thirst and often
hence & vomiting. Respiration is quick. Voice is weak
Inspiration pulse small rapid the urine is pale. Hypothermia
begins to cease with onset of the chill the
Vincennes indica Fever the chilliness remains for several hours,
the chilliness does not attain abruptly. the shaking
continues slowly as the leading of warmth offends the
face becomes flaky. Pulse becomes fuller blanches if
the skin clearer and. a Thrust to is felt in the
Head and pain in the back and limbs shivers a pain
felt in the temple. The ideas are confused. The Post-
Tentative to get up, there is moisture in the ear.

Vertigo and nausea are experienced in attending to get up, the breath is dry.

Nasal congestion, high color, scanty urine. Duration of the stage ranges from an hour to two or three days, and caused by the third sweating stage, while the nose is sneezing a slight flower of mucus occurs on the forehead, frequently it becomes tomotoes and firmly splinters off. Sweating the sheets, shortness of breath, an acid in the reaction contains a large quantity of organic matter. The urine is also acid and strong. Lodors moving to the pyriform and causing much urine acid, the disease may begin abruptly when the patient is in full health or during the intermediate state or in the course of chronic natural poisoning.

Intermittent Fever, Ague and Fever
There are three distinct varieties of intermittent Fever. The chief, the Fever of the sweating, when the chill comes on after is a Pulmonary Internal Duration of Termination.

After certain intervals which is different in several types and then are again preceded a chill Weiss and sweating. Intermittent Fever follows a definite periodicity. The variety of types is known as Quotidian Intermitent. They do occur on alternate days or the third day including these attacks. There is still another variety it is called Quartan Intermitent. This last variety is uncommon. Sometimes two distinct Proxemics may occur on the same day the Fourth Periodic it is a variety in which there are two distinct Proxemics on one day and one Proxem on the next and fifth day.
after day without fever, duration continued with the disease or Malana Poisoning in bed. Sometimes occurred the depilation of attack, continue for a long time or periodic for years, exposure to cold, diet, fatigue, mental anxiety may cause an new attack. It is rare for Unconditional Fever to cause death directly, but indirectly through various alteration occur in Mental Predication the course of Unconditional is much diversified by the variation, a baying sweating, coughing, urinary discharge, and rise of temperature, there is an attack of fever when irritation occurs it may be intermittent or Remittent condition accompanied with chronic dysentery not very frequently the attack occur in cardiac nervous trouble. Producing a Phenomena of Auricular Retardation. There Some of great difficulty in retaining a slow heard pulse cold skin the lips, hypothermia ending with gross convulsions of body.
a discharged quantity of febrile urine

Fervid and intermittent in those parts of United States where Malaria is most-concentrated and

natural fever most severe the ordinary intermittent may

assume a most favorable character it is highly

incurable as Congestion, that an attack of intermittent

will assume a previous character denoting the condition

of evacuation induced by several attack etiologyemonic and

may render the Patient unfavorably, there may be an excess

of sweating it is not often that the fist attack proves fatal

but they are being worse and more dangerous and after

the first uneasy evacuation may be fatal regarded from

the difference in the heart which is the labrador

febrile comes on rather in the form of the sweating shiver

while intermittent febrile that is experienced by the patient

the shiver becomes cold and chilly and does not

resist action of the tonics becomes fragile the skin
severe with a cold, chilly sweat, but the mental condition is unchanged. If death occurs the convulsion of the coldness disappears, but after a longer or shorter duration of the algid the action of the heart grows a little stronger and gradually becomes warmer until it restores the surface.

Sequela of Intermittent Fever

When the attacks of Intermittent Fever have been disturbed, treatment depends on the occurrence of the usual symptoms. At first, the patient may have been unconscious in clouded sensations, and later, occurring in regular sequence. During this disturbance, the patient may show delirium. At times there may be a distinct sweated, profuse urinary discharge, and it may occur after the delirium of fever. From the seventeenth to fourteenth century.
Fourth first day, to be more correct, the
first will occur on the first day at the first
former attack. It will take place on the third
seventh and twelfth day and soon the occurrence
of the late is definite upon the age it is much
greater under twenty and three months after
six weeks or six months. The tendency of the
is due to the condition which determined the first
seven the result of long continued action
of cholera. While the most disastrous the death
causes. In fact, while the white diminishes
in size and becomes in number, the disease
becomes revolting. The liver is swollen and the
skin yellow the afflente is from the ingestion
of fluid. The fluid is a clear color and the urine
may contain albumen and is colored with the
ground fluid accumulated in the intestinal cavity.
Sympathetic Dilation of Vessels in the Intracranial Circulation such as Headache

Vertigo, Severe

Paresthesia

Ordinary Sympathetic Dilatation just as other
is only a grade condition whenever the skin
undergoes immediate danger it is to be consid-
ered as Permanent and not belonging under the
head of ordinary or Sympathetic Dilatation.

Over an important fact, Dilatation. First, divided
of Medical danger may become Permanent an ordinary
or sympathetic dilatation may become very serious
if continued long or occurs frequently by inadequacy
anemia, general drop in or maternal cachexia the effect of.

Dilatation however they are very rarely themselves
fatal. Deaths may result from profound vasodilatation produced by
with other effects. Difficulty is not a small matter lor
Diagnosis

A cause of intermittent Fever cannot at all points be exactly confounded with any other Malaria or Malaria it may be mistaken for Pyemia in which they and chills fever.

Malaria Pyemia: a fever which differs from Pyemia in its organs and in Clinical Course. Intermittent is due to surgical

Malaria Pyemia: is everted by the circulation of the

Intermittent is regular in course. Intermittent

Febrile effects promptly cleared by Carne

Pyemia is a fatal disease over what time

has no other influence to control. It is not possible that Pyemia has occurred at time when

the regular.Pyemia is due and that

for they a strong constitutional influence forward

the constitutional variety is often produced by
Fainting of the Blood and a various disease over the great vessels occurring a watery state of Blood. and for the same reason Spleen takes place in mucus becomes profuse the change that takes place in the Blood and due to various causes to the Stomach and Intestinal trouble with primary assimilation to the resorbed state of the Blood making organs especially to the destruction of the Spleen of the Red Blood globules and to the conversion of Hematin into Pigment which we have shown to take place in various causes. Among all other gastrostine amylase degeneration of the Liver Kidneys Stomach and Intestinal glands Sclerosis of the Liver anaemic Syphyl Tuberculous Neurosis Epilepsy Drunulosity and Insanity.
Contract - intermittent fever in account of
ability to relapse, and to account of strictures with
other affections.

Treatment

For the cure of intermittent fever amongst
Poles. Specific in every manner are
intended to this affection. This treatment is
Salts of Quinine, of which Sulphate is one.
Universally used, Sulphate will promptly interdict
the recurrence of attacks of intermittent fever.
In most majority it is always desirable to use the
disease as quickly as possible. The prevention of quinaria
and other anti-powder and good intermittent
remedies is Maxima force.
Perpendicular River.

E.S. R. Down

Downsville, MD.

1856
"Prepartal Fever."

Prepartal Fever is a name given to a disease peculiar to women in the prepartal state, and at times affecting those in the latter period of gestation. It is both contagious and infectious and occurs occasionally in epidemics. According to modern authorities of the disease, the so-called prepartal fever is but a symptom of tuberculosis. A better name, in that generally means modern civilization.
Suppurative leptomeningitis, since this
disease characterized by the cases,
symptoms etc., which are found
in suppurative leptomeningitis. The disease
has been known from the time of
Hippocrates, and they alternately
and in different epidemics, thus
the cause of many diseases among
presently occurred. Therefore
with great frequency being put
down as the cause of temperate
occurring in New York City.

According to statistics, the proportion
of deaths from the disease to the
number of births, in the county
between 1865 and 1875, was 1 to 70.

The disease is very violent, its ma
to which all being common are liable
and are what often people talk
in from six to twelve hours.

Pathological Anatomy. — The pathological
anatomy of the lungs affected and
classified by Sprigge's in the
following manner:

1st. Inflammation of the Lungs

2nd. Endemic Tumors.

3rd. Inflammation of the Lungs infected
and of the Phthisis or Pulmonary Disease.

4th. Inflammation of the Pleura.

5th. Inflammation of the Pleurae.

6th. Inflammation of the Pleurae and

7th. Inflammation of the Pleurae.

8th. Inflammation of the Pleurae.

9th. Inflammation of the Pleurae.

10th. Inflammation of the Pleurae.

11th. Inflammation of the Pleurae.

12th. Inflammation of the Pleurae.

13th. Inflammation of the Pleurae.

14th. Inflammation of the Pleurae.

15th. Inflammation of the Pleurae.

16th. Inflammation of the Pleurae.

17th. Inflammation of the Pleurae.

18th. Inflammation of the Pleurae.

19th. Inflammation of the Pleurae.

20th. Inflammation of the Pleurae.
Pneumonia.

5th and 6th Decussation—Dural Absorption.

The first form is of two varieties,

Cataractous and Ulcerative.

The cataractous is the mildest and

most frequent variety. In this form,

the commonest symptom of the disease

is called cerebrospinal meningitis,

causing a dull headache, the

patient is frequently unconscious and

appears to be asleep. If the

嘉年华 is touched, the

eye starts to increase. Translucence

and pain is present.

In the ulcerative form, the ulcer

are firm and smooth; in the
the heart's being affected. There will occur a process of infiltration of the tissues of the wall in the direction of the heart. Of the first division, this capsule follows by engorgement in the muscular layer. The respective capsule will be infiltrated further by same infiltration, the formation of the pericardial fluid, the pericardial fluid being transformed into fibrous fluid. The lymphatic is engorged. The inflammation may extend to the adjacent muscular layers. If it is treated properly, it is very much to the benefit of the patient's health seriously affected.
As first characterized by Fredon, the fluid portion being derived from the pan-cells, or it may be glands. If this collection of fluid is small, it may disappear gradually; if large, the pan-cells coming of the degenerating state, the reaction is altered. To accomplish this, it is necessary that favorable circumstances be produced in a few months. Otherwise, no more forms. Plein fracture may also occur from the total variety of the final division, from the configuration, or the extension. Through the final phases of the disease, on passing through a stage, one from, also arising from
parametrical formulation and
satisfaction. The optimum of the
frictionless energy transfer differs
from that of the frictionless
mechanical energy transfer.

The fourth division

Chronic History. The chronic

function of the motionless energy of
about three days duration is still
longer present, while the friction
energy is lost in the system.
The fever that accompanies puerperal symptoms during this fever.

Puerperal sepsis always appears at

the afterbirth, and a pulse of 10
or 20 are suspicious symptoms.

If the attack comes on a few hours after childbirth, the infection has
taken place before or during labor.

If a woman is under treatment
without the febrile being attacked she is generally considered safe.

They are mostly attacked after the

fifth day. The following pathological symptoms are frequent:
in

increase of temperature, muscular and

increase of the blood, enlargement

of the spleen, abdominal pain.
lution and accommodation for
lations after a few years. The
shift may be understood as
a way of changing parts of
life's and patterns in society.

Migrations should be made the difference between
the two phenomena.

The Emancipation, the recognition
of slavery, and emancipation of
men, is often seen as the
second stage of the American
experience. It marked a change in
the relationship between people and
slaves. This period, often referred to
as the Civil War period, was
characterized by
important changes in society and
the way people interacted with
slaves and freedom.
In Endoceliphis the vaginal opening is their and furnished with a set of teeth in the floor of the cavity where the ovule and sperma are placed. The female ovum is enclosed in a tough mass of mucous matter which usually contains the remains of a previous ovum. The female's height is usually greater than that of the male. In forest clearings, the female is frequently 10-15 ft. high, whereas the male is 8-10 ft. In the Alvarez's study of the subject, the female is sometimes found five to seven rings. At the end of a season, the males give the females various and other marks, which frequently lead to reproduction. The Pelvis Portmata, the female is
under the influence of a chill or by the
ly causation of some unhappy
ating its height, was sufficiently
and they were a most severe
exposed to a...over the...the
sufferers...adverse.
The course of the disease, even in
very severe cases, is not without
any...with...diabetic shops
appears...conditions...diabetes...at
a time will show...secures...It may have a
of the completion of the...for
the form which...unusual...
shorter than the primary attack. In circumscribed inflammation the pulse rarely exceeds 120 beats per minute. If it reaches 140 per minute, severe septic complications exist. In the first stage two of the fever, there may be a pulse of 50 or 70 per minute, with a temperature of 104° F. Other symptoms are: headache, weakness, profuse sweating following attacks of fever, rapid and slight appetite, sides of the ribs sensitive to pressure, occasional vomiting, congestion of the conjunctiva, epistaxis, 

Another term is "hemiplegia". This term indicates when there is involvement of one or two digits in addition to symptoms
gradually subside. If the fever continues longer than a week, there will be agitation, the deposit forming a tumor, which is less convex than a fibrous tumor in persons and which seldom exceeds in size that of a large apple. The older the person the less is the pressure, and it is low. The spasm usually disappears rapidly when the fever passes off. If the fever lasts for five or six weeks it is likely to be permanent. Diffuse peritonitis usually begins with an interval till the temperature remains after the attack.
andaccident, rapidly increas-
ing to 130 or 160 beats per minute.
Pyrexia generally spredes
over the abdomen, the pain in
the abdomen being of a burning
or lancinating character.
Symptoms from pressure of
liquids in the bowels; expusion
of a gasping character; urinain
sometimes of the contents of the bowel
are noted in the middle portion.
Constitution of flesh which may
be followed by diarrhea. Peritonitis
begins from four to six days.
The symptoms in the Septicemia
are just as a woman has not
restored the fever is taken up by
The lymphatics or by the urine.
In that variety in which the
 juices is taken up by the lymph
atic vessels, the disease manifests
itself as a after labor. This
variety is always marked by
a cold, temperature 101 or
higher; face thin and pealing
becoming towards the end 10
or 100 Beats per minute; abdomen
swells deeply and is not painful;
tongue small with generally slight
coated sometimes quite clean;
chile dry at times; there are
two or frequently, respiration
beeped and growth; there
occasionally rest more vehement.
Plains is generally a complication of this form. The most frequent covering is death, which occurs in from four to ten days.

The vicinity in which it first appears is taken up by the victims and surrounded by a violent chilly long continued, which may last from one to several months, and is accompanied by feverish sensations, headache, and prostration. This is followed by profuse perspiration. The fever is of the smallest degree of temperature. The pulse is quick and full, and the skin is dry with the changes of temperature, but is not in a state of fever.
above the average.
Cancer:
Cancer can be of two kinds, viz: antitoxic and hematogenous. By antitoxic infection is meant those cases in which the prema-
cenetus infects himself. The remedial
measures fifteen months of the interior
pains and pain base; the passage
of the child along the pelvic
canal may produce a de-
mination along the tract.
If pain of the placenta con
trains can be left in going the
childbirth, and the parent
being through the open orifice of
the amnion; whereas, eventhough
Although the fever remains alto-
gether, begin to heal, the patient becomes
himself, and its beneficial
action is slowly influenced
and soon after the second begin
to heal.

Heterogenic infections. — Any material
of a septic character introduced from
outside into the genitale.转发
may occur during a soft confinement
may produce the disease. The poi
may vary in volume from one patient
to another by his previous or attent-
cive. Epidemics have been found
in this way. It is a in that the
epidemics are neither apparent
the more dead is the present day.
is generated. This action, however, by experiments on animals. Dr. Phipps thinks it probable that any drug having sedative properties will soothe the distressing and painful symptoms we are familiar with, Bownes notes and Dr. Rush views as authorities. Bownes states that there is not as much danger attending the treatment of patients, who have died of ordinary disease, as those who have died of some infection or contagious disease. It will be of common sense to
knew, from his experiments, that
the prison was peculiar to him
for something. The report
was the report of a possibility
person from the imprisoned
man. And, on account of the prison,
persons, in true point of view,
which amounted to it, fell on the
reporting outside the prison's
account. Therefrom he who was the
domino of a reconstructor, had it as
a framework of communication.

There is thought to be communi-
cation between the government
recon and the penal farm.

Crazy thinkers that a prison
was, to conclude from habitual
suffering from sedative effects, 
which extends from paroxysmal 
which occurs in paroxysmal 
which extends from paroxysmal

Some think the disease due to 

She concluded that...
future, and in the event of the disease, some one to cut proper and to detect disease. Dr. Joseph Clark said that during an epidemic the cause appeared to act upon principles of personal economy, remaining even it seems to act but few the year, liable to remain in the frame for a longer period. Permission of

Doloris gives the following indication of physical and certainty, which is intended with permanence of some consequences for

exercise, with a view to

some moderated.
Physician should never at

This is to be done by the

Physicians, but on no account.

contains cases of cholera when

from the premises of

contagious diseases on from

contact with infected individu-
Even if it be true that the person is one peculiar to general fears, as some authorities think, and as Americans seemed to prove, the risk is too great to allow of trying moving the risk of inflicting such a pain, which will most probably end in her death. Especially should he avoid attending cases of late if he have a patient with a constitutional fever, because careful he must be to leave him unprepared to change his eating, for, in fact, all these precautions are what have been
known where such action on
the part of the unconscious has
resulted in death to this giving
up the false impression. If he
should attend women in confine-
ment, while he has a case
of Jaundice or from he should
change his clothes and disin-
fet himself for each time
with these precautions in order
of conveying the poison
from one patient to another
is very very great. Physicians
should avoid making too frequent
examinations during labor.
Care should be taken that no is
of placenta be left in situation.
All instruments used should be rendered antiseptic. There should have good ventilation and plenty of light in the lying-in room, as they aid in preventing septic decomposition. In other words, the attending should perform his whole duty to his patient when, if this is done, he will have saved four cases of fatal fever.

Treatment.—As little surgical interference or the disease is such as to expect infection, the first step to be taken should be to remove the source of infection. In those cases of umbilical infection the region surrounding the cord should be kept clean and dry.
as it is the mouth of the vagina, or cervix, from which infection generally takes place, and as exceptions are apt to develop into ulcers from the formation of the necessary vibrio. The condition should not be neglected until the orifice of the stenius muscle begins to cavitate for. Intrauterine infections are caused for which there are constant portions of placenta, cysts of various sizes or complexes which are the seat of some into the devitalization of the frame. These infections educate damage and prolong ensuing that there is improvement for the patient, impatiently to that
none of it will be certain.
If there be fracture or sprain with swelling of the joint, apply for immediate delivery by poultice, mustard, and warm
water or new, until the joint is free from pain and swelling.
Do not force after the fracture has been freed. Deal force with
caution. If this fails to come off, set to elk bone, pain will be considerable
below. Direct by direction, and
in case of injury to connection and
joint or joints. When this is set, the
same care must be given
as when an arm or leg is broken to keep
up to patients at length.

Alcohol in small doses may be given in some form.

Assoon as the beginning of the patient gets stronger signs
stead and even sleep.

Bathing may be continued in hot baths
in any case. If there are symp

toms of fever the bandage must
be removed and measures taken for

suffocation. Give frequent mouth
washes...
Professors, if any of you read this protection of the pen, excuse its brevity, originality, and many other defects. And at least accept 5 as payment of the debt each graduate of medicine owes that of writing a thesis.

As several of the student say that they have written theses of a hundred pages or more, which if they all did, you would hardly have time to read (matters not how thrifty you might be to acquire the knowledge which they contain).

As a student attending lectures and studying for examination (and of course to make a good physician of himself) has very little extra time. From these reasons, but more
especially as I have made very few discoveries, yet to astonish the medical world, hope you will overlook its brevity, and also its many other imperfections. For I am as poor a writer as Dr. Marion Sim thought he was, when young.

But as these are not for the edification of the professors, but to give them an idea of what the student knows. I hope this one will at least show you that your lectures have awakened in me a desire to learn and thoroughly understand the medical science. (however far I may be from it at the examinations) And the manner in which all of you dwell upon the importance of making a correct diagnosis, going to the bottom of finding out the
cause of everything, is why I have chosen such a subject, and written such a learned discourse.

With this elaborate introduction, which is nearly as long as the thesis itself, it subject to your patronage, if not inspection. (and I hope you will not suspect it) this is my thesis. Asking your forbearance, especially at the last, and hope I will not have to ask myself. Why did I not get my diploma?

I am very respectfully and humbly yours,

Eliza West

July 30th, 1886
Why

There is no question a physician or student of medicine should ask himself often, and answer or at least endeavors to answer than that containing the word Why. He must make it himself, as we're, 'living interrogation point,' and everything he sees, feels, hears or does, he must ask himself Why he sees, feels, hears or does. It is true that many things occur, or don't occur, the causes of which have not yet been satisfactorily explained, such as the mode of action of some drugs, many things in Chemistry, or
Why the stomach does not digest itself and many other similar questions, that can only be answered with an hypothesis, or not at all. It is true that some say, that the stomach does not digest itself from its vitality, because its walls are alkaline, the gastric juice only digesting in the presence of an acid, and from its thick and epithelial coating. But it is known that living things are digested in the stomach, and when it comes to the walls being alkaline, preventing the action of the gastric juice, the question comes up. Why don't the duodenum digest itself, for here the pancreatic juice digests all kinds of food, and last, in the presence of an alkali. or when it comes
to the thick muscles, coiling and epitelial lining, which are not digestible by the gastric juice, then why in ulcers of the stomach, when the mucous membrane is destroyed, muscular tissue exposed, why don't the gastric juice digest right through the walls. But all questions like these, are yet to be solved, and while they will give to the dis- covered cause, still why's that will most concern a young physician starting out, are those that are explainable; and while we may not know, why a medicine acts, we do know how it acts, and should know why we give it. Though we don't know, why the stomach doesn't digest itself, still we know that
5 does not digest itself and should give nourishment to our patients not expecting it to go into the rectum, but to be assimilated and absorbed from the stomach etc.

When a physician is called to see a patient suffering pain etc. he should find out why there is pain; what remedy will best relieve it, and why. For how foolish to use anodyne stimulants; for pain refers to the shoulder, when a person has disease of the liver; or to make local applications to the testicle, when a patient has Bright's disease; or how foolish to pour drugs down a woman's breast, expecting to cure her of dysmenorrhea, when an antifluoridation...
ultimately correct to treat (as incorrect), as the cause of the first stage of incipient or the first stage of a disease as rheumatism, there by losing much precious time. But he must know why there is pain, what is the cause of the disease. Hence he is the original cause. When he performs an operation, he must know why he performs whether it is necessary to save life. If one does a useful thing, we by doing him advantage to the patient, and for the patient, it is purely for medical science.
drug always for the same disease, in a mechanical way, not to treat the name of the disease, but the disease, or its symptoms. As a student of medicine, with interest and pleasure, and also with great practical advantage to a physician, to might ask:

Why do colds cause usefulness of the part to which it is applied? Because the vasomotor nerves cause dilatation of the delivery vessels of the part, and more blood goes there. Why does cold or fear cause holiness? Because an influence is sent to the vasomotor center, which sends out an influence to the vasomotor centers of the part causing constriction of the blood vessels, with less blood...
Why does alcohol make persons unable to stand as much cold as they could if they did not use it? Because alcohol prevents oxidation, and causes increased flow of blood to the surface. This brings more blood to a part where it must rapidly cool. For the same reason, one feels hot, due to increasing the flowing blood to the surfaces Persons coming into the house from out in the cold, and unable to get so jell warm, alcohol causes them to feel warm by
producing dilatation of the peripheral blood vessels, causing more warm blood to flow there, and thus raising the temperature, where the sense of heat and cold resides.

Why is it that a person after receiving a blow upon the head, a shock, and having recovered from the first shock, may in course of several hours have a secondary shock or collapse?

Because a blood vessel was ruptured by the blow, and the blood escaping all the time into the cranial cavity. Causes confusion as soon as enough has escaped. The smaller the vessel ruptured, the longer with the secondary shock be in following the first, not only
because I other longer for the
same quantity to escape, but also
despite. I other a greater quantity
the brain seems to become accumb
as I went to the pressure
Why should some lie lower ends of a
dissolutely in veins?
I night found hemorrhage.
Why did that in asphyxia only partially
but will continue to bleed when
if it were entirely absorbed Fiore
saw to bleed
Because when only partially and
Scarlet retinal other cause
a clot to be formed
Why don't a woman after punctu
tion bleeds to death with the root
member of open morded veins
opening into the culoes, having
only a thin internal coat, and no power to contract and retract in their sheaths.

Because the muscular fibres surrounding the veins, with the contraction of the uterine coat like so many ligatures, tying them hence the importance of permanent contraction of the uterine to prevent post partum hemorrhage.

Why does the middle muscular coat not extend to the lower part of the uterus?

To give less resistance there, else the foetus will be driven in that direction by contraction of the uterus. He might ask himself. Why some do, are so uncommon have so many surfaces lubrices, processes.
foreground etc. making to as the
rest of anatomy, his life a hell
does to kindness.
And he would ensure that every
incredible process, foreground.
was for the attachment of mus
cles, passage of nerves, blood
vessels, or for the articulation
with other bones etc.
If by all means keep the muscle
turn from left to right, or
are made right-handed or left-handed.
Because the leaves on the tree
contracting, it pinches the hand
turns the right hand from left to
right, and the left from right to
left. Consequently left handed
hands work at a disadvantage with
final instruments, except being
able to bring the biops to the
Why should an injured eye, the
ight of which is irremediably
lost be gotten rid of?
Because Simon at any time take
an inflammation, and set up
sympathetic inflammation in
the other eye.
Why should macularies be collecte
as soon as it is established?
Because after continuing for a
long time, light in the squinting
eye is lost from tissue.
Why should glaucoma be early
recognized and not be mistaken
for neuralgia?
Because the only cure is early rec
ognition and cataractomy. It
should never be mistaken for
neuralgia, for neuralgia causes disturbances of vision. Last but not least, when he rose in his chair he could see him self. Why he tends it in.
And if he has exercised all other ways properly, he can well say because I have learned it.
The Physiological Actions and Therapeutical Uses of Arsenic.

Before discussing the actions and uses of Arsenic, it will be necessary to give some of the preparations most commonly used as the pure arsenic is never prescribed itself. The solid preparations most commonly prescribed are arsenious acid and lodide of arsenic.

The arsenious acid — acidum arsenum — is generally found in the shops in white opaque masses. Formerly it was kept in powdered form, but...
Lesions are found, but generally the mouth, stomach and intestines are inflamed. Eschars of all the coats of the stomach and duodenum are found. The villous coat of the stomach is reduced to a reddish brown pulp. The heart, kidneys, liver, spleen are found to have undergone fathy degeneration, even when the poison has done its work in a few hours. The above alterations are found also when death ensues from applications of arsenic to large ulcers and ulcerating surfaces.
Charles E. Clarke

The clause that changes an object of my

change by some money does not apply to me.
Thesis.

Adage W. Stenga
Development of the Embryo.

The whole human body is developed from the female ovum which has been fertilized by the spermatocyte of the male semen. Whatever spiritual, mental, moral or physical powers found in man must come from this protoplasmic cell which has been thus impressed and undergone various and complicated changes in the accomplishment of such mysterious functions.

It will now be our purpose to trace the development of the embryo from the earliest stage of conception to the full development of the membranes.
in the shape of a small perforated vessel, springing from the vascular and muscular layers of the blastoderm near the caudal extremity of the embryo. This little organ has an important part to play in forming an apparatus upon which the fetal vessels are projected to the maternal placenta from which it imbites the materials of nutrition and to which it gives up those matter that are necessary to get rid of for its purification. The blood-vessels, two arteries and two veins, one of which are
This disease is generally the same
in every country, but it has received dif-
f erent names. The French give it the name
of quiroid or the quiroid affection.
English and German authors describe it
as quiroid or quiroid affection. American
writers call it quiroid fever. It may called qui-
roid fever from its character similar to qui-
roid fever. But since it is known to be so
erroneously diagnosed and necessarily
distinct from that disease probably a
better name would be quiroid fever.
For its route of entrance into the system
your best above the two cases twice. Though changes in their structure closely resemble those which occur in the blood fever may take place in other diseases, yet in no diseases are these processes more regular than in involvement and present successive steps of changes according to the stage of the stadia as in the blood fever. The first change consists in hyperemia and cellular infiltration with metting occurring in the glands and lymphatics, of these above the walls of the intestine. Both Peyer's patches and the
being cut off, become inflamed, necrotic and ulcerate. Thus the symptoms of typhoid fever may depend upon those changes which take place in the liver. Of course these things have not been proved; they are hypothetical.

**Differential Diagnosis.** After five or six days the diagnosis of a typical case of typhoid fever is not difficult. It may be recognized by its gradual development, absence of pronounced remissions, the thermometric curve, headache, tympanitis, diarrhoea, tenderness in the right iliac region and gurgling, and the appearance of the
tion of the thermometer it renders it a valuable remedy in the hands of a judicious physician. The following is the manner of its use. As soon as the patient's axillary temperature runs above 103°F, he is placed in a bath the temperature of which is 70°F to 75°F. The temperature of the water is gradually lowered by ice or cold water till reduction in the patient's temperature is affected. If the temperature fall rapidly to 95°F in five or six minutes, the patient should be removed at once, for it will continue to fall after removal. If the fall is more slow, the