AN INAUGURAL DISSERTATION,

ON

Milk Sickness.

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BY

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Milich Sicknes

This peculiar and dreadful endemic disease, which prevails in some of the middle and western states, made its appearance in the extreme western part of North Carolina about the year 1830. From that time, up to the present, the disease has been rapidly increasing. The localities in which this disease generally prevails are broken, much diversified with hills, mountains, and valleys.

Symptoms. There are two forms of this disease, the acute and chronic. They are however the same disease, produced by the same cause, and differing only in degree. In the chronic form of this disease, the individual is languid, unable to make much of
enervation, impaired appetite, torpid bowels, palpitation of the heart, precocious and stiffness of the limbs, trembling mau- 
sor, and syncope. If any considerable exertion is made. The pulse varies considerab le in the disease, though generally slower than natural. The individual may linger along in this form of the disease (Chronic,) for weeks or months, but unless removed by the sanative bow e rs of water or some other remedial means the disease will assume the acute form. Acute form: The individual is suddenly seized with extreme nausea, protracted vomiting, syncope, and great exhaustion. The temperature of the body and extremities are now greatly reduced, the thin, cold and clammy, great distress and anu
ity are depicted when the countenance of the individual. The breath acquires a peculiar fetor, the tongue generally swollen and prated with yellow or dark flux. A complete reverted action of the stomach returns, and at every effort of vomiting, a fluid is ejected of a green or dark colour. The eyes have a greenish colour, pupils dilated, dimness of vision, intolerance of light, and giddiness. The bowels are always obstru- 
ently constituted, and when the discharge is obtained, they are very dark, and so offensive, that it is almost impossible for anyone to remain in room with the patient. The pulse is slow and easily compressed. Delirium and terminal symptoms are present in this stage.
but most commonly confined to children. The peculiar fever of the soreth is present throughout the whole course of the disease. As the disease advances, the patient complains of acute gastric, epigastric, and intense sense of heat or burning in the stomach, esophagus, and fauces, causing him to call out every few minutes, loudly for cold water to allay the burning sensation. The pulse now increases in frequency but is still easily compressed. The extremities and body are bathed in a cold and clammy sweat, the eyes are half closed, vomiting so often that every article of diet, drink, or medicine is immediately ejected. During the intervals of vomiting, the patient lies on his back, tossing his
nts, of the infected localities have suf-
gered greatly from its poisonous influ-
ence; however, they did not suffer as
much from it, when it first visited
the country, as they do at the present
time. When it first visited the Coun-
try, it was supposed by some to be a
kind of malarial Fever, while others
considered it to be a species of congestive
Fever. At the present day, it is
considered, by some, to be a species
of typhoid Fever. Observations has
proved to me, that it is neither ma-
larial, congestive, nor typhoid Fever,
but that it is a peculiar disease all
caused by some unknown poison
taken in the system.

Wherever this disease prevails in
The human species, the lower animals that feed upon vegetation, are liable to a peculiar and fatal disease, called 'Trembles,' and that, in the human species, the origin of the disease is in some specific poison, obtained universally from the milk, butter, cheese, and flesh of animals that feed in those infected localities, producing the disease (Trembles).

What is the local cause or specific virus, that invades these localities, producing the disease, we know but little. There are no two who have attempted to investigate this subject agree.

I believe that all agree that the disease, in the human species, is caused by eating the milk, butter, and flesh of...
of animals affected with the poison.

There are various notions about the

direct cause of this fatal disease.

Some attributed the injection of the
cattle to their having eaten of some

species of tubers, or a peculiar fungus,
as the mushroom or something of that

kind. Others contend, that it is caused

by the water that the cattle, but

this is not true, from the fact, that it

appears, in localities, where there is

no water, and moreover water, in which

the poisoned flesh was boiled, remains

entirely unaffected, while the meat

still retains its poisonous properties.

This proves clearly to everyone, that

the poison is not soluble in water.
From my own observations, I think that it is of a mineral origin, existing in the soil. Accounts conflict, as each observer judges from the prominent features of his own locality, which may differ in some respect from that of another. The disease makes its appearance in certain kinds of soil and cultivation does not destroy the noisome cause, whatever it is, affects the cattle grazing at night, and in the morning while the dew is on, during the day, there is no danger of the cattle being affected with the virus. These animals that have been gradually accustomed to the range or pasture of affected districts suffer as much as others unaccustomed to it.
Ovies exposed to the poison during lactation generally escape, while their offspring die.

While grazing and browsing animals only are affected by the original disease, their flesh will reproduce it in all animals. Carnivorous animals never have the disease, only after grazing upon the carcases of herbivorous animals that have died of the complaint. Those persons that have been affected, once by the disease, are more liable to be affected again than others. If an individual has the disease once, he never will get it; finally over it, he may be able to do common labour, but if he overheat himself, he will feel it sensibly.
The disease does not prevail in the winter and spring. I never have seen a case sooner in the year than the twentieth of June. It prevails mostly in the fall, September, October, and November.

Mortality. Prognosis. The mortality is obviously stated, some say three out of every six, or one-half. Others give it one in six or seven. I have been practicing, in the infected localities, for years, and have treated a great many cases of milk sickness, with good success. I never have lost a case of milk sickness in all my practice, and I have more or less cases each fall.
By the anatomical character I know nothing as I never have had an opportunity to make a post-mortem examination. When the disease is overcome by remedial agent, the heart begin to return to its natural pulsation. The irritability of the stomach subsides gradually, and the vermiform movements of the intestines can be perceived. The skin and extremities take on their natural heat.

Treatment. The prominent indications in the treatment of childish nys, are to remove constipation, to allay gastric irritation, and to counteract debility and exhaustion. Bloodletting and emetics do harm in this disease. Consequently, they should never be used.
Constipation must be removed by active cathartics and stimulating injections. Stimulants must be given freely, as soon as the constipation is removed, and before, if the patient is bad.

Peach Brandy and Carbonate of ammonia are the best stimulants for the disease. I generally take a pint of peach brandy and one grain of Carbonate of ammonia, 1/2 a gill of brandy, and half a gill of water, warm it, and sweeten it with honey, and make the patient drink it all in twelve or twenty-four hours as the case may require. The bottle must be shaken always before taken. Three grains of blue mass should be given every night or two. The bowels must be acted on, every day by castor oil. Large blisters should be applied only in the disease (upon the stomach).