AN INAUGURAL DISSERTATION
ON
Epidemic Dysentery
SUBMITTED TO THE
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BY
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of
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To
The Medical Faculty of
Missouri Medical College
The University of Nashville
This Essay
is respectfully inscribed as a
token of the high esteem
which I entertain for
their talents and
abilities as teachers
by the author
Epidemic Dysentery

symptoms for several days. No doubt depending on some other cause as the Malarial diathesis. As has been so ably set forth by Professor Bowing in his lectures before the club while discussing the subject of Dysentery and its varieties.

There are three varieties common in this country. I mean the Western country well marked cases of which may be seen for the same neighbourhood or even in the same family at the same time or following each other in close succession or in
Epidemic Dysentery

The source of the epidemic I shall first attempt to describe. Simple Dysentery and these attacks to the more severe and dangerous forms and combinations of it.

Simple Dysentery is usually ushered in with griping pains in the abdomen irregular in their recurrence and severity as well as position but usually in the lower part of the abdomen is attended with an accuses presence of mucus streaked with blood often giving a short respite from pain after which there is a recurrence of a sense of weight and pain.
Epidemic Dysentery

with more, deep burning and a desire to evacuate the bowels again without the ability to discharge anything more than a small quantity of mucus and blood frequently matter are seldom discharged except in very small quantities until influenced by cathartics. At other times small tufts of fecal matter coated with mucus or a substance resembling an oily coating technically called scibila and when discharged in considerable quantity afford decided relief for a time if not permanent.

In the simple form of the disease there is seldom much
Epidemic Diphtheria

Sore throat reaction early in the disease except in certain puerile conditions of the system arising out of intemperance and other excesses. However, are occasionally met with cases where there is considerable disturbance of the whole economy. The inflammatory symptoms arising high, in fact we may have regular gaudations of the simple variety from the slightest affection requiring but little if any treatment, up to cases of neglect or improperly managed might prove fatal in a short time from the intensity of inflammation. Fortunately such cases are rare. The great majority of them
Epidemic Dysentery

requires but little else than a
mild and efficient cathartic
so as to evacuate the bowels
completely. Various remedies have
been proposed for this purpose by
physicians, among which may name
Castor Oil, coffee, calomel, and
arsenic, alone or variously
combined. After which an aqueous
should be administered,
which will generally relieve the
patient without further trouble.

But when engendered on the
malarial diathesis, the symptoms
assume a far graver aspect:
In this form of the disease
are frequently seen the
marked cases of Intermittent
fever.
Epidemic Dysentery

existing for several days antecedent to the dysenteric symptoms, and at other times they seem to be ushered in simultaneously with all marked symptoms characteristic of each peculiar disease. The intermittent or inconstant character will stamp on the febrile and dysenteric phenomena, which is unnecessary to recapitulate in this place further than to illustrate some of the most prominent characteristics of the disease. In this form of Dysentery, the gastric and hepatic symptoms are generally prominent such as oppression in the region of the Epigastrium.
Epidemic Dysentery

manure and vomiting

of yellowish matter tongue coated with a whitish dirty, dirty coat or yellow and occasionally the skin, conjunctiva assume various tinges of yellow at times very strongly resembling jaundice the pain scant and high contoured. The bladder

and urethra in males and the vagina in females symptomizes in various degrees I have seen it so distressing in one or two instances as to require local enfluenza before the patient could gain a moment to relieve the difficult micturition seldom arising any interference except a little—moisture.
Epidemic Dysentery

Soreness over the abdomen corresponding to the course of the colon which in many instances may be traced throughout its course. The calls to stool are often and urgent. Seldom less than fifteen or twenty or over one hundred in the twenty-four hours as the writer has experienced in his own person some eighteen or twenty months since the pains appe
ing to concentrate themselves in the lower part of the rectum with a sensation of burning almost inexpressible and especially when discharges of atypical bile occurred.
Epidemic Dysentery

which was not infrequent under the action of mercurials alternating with an occasional
pelvic evacuation offering relief for a time. It is at this point the disease usually abates and
in the use of Cathartics anodyne
and Tannine. But on the
contrary if the disease goes on the colonic discharges becom-
also more frequent and offensive
the 5th, 6th and 7th days
increase and the nervous sys-
tem yields to the severity of
the disease. The pulse becomes
feble and the skin cool
and clammy. The features somewhat livid and without a
change pretty soon the patient
dies.
Epidemic Dysentery

present and on the tops of the highest mountains. It is epidemic dysenteric enteritis sometimes on a typhoid diathesis, as I have frequently noticed in the same neighbourhood will make cases of typhoid fever uncomplicated with dysenteric symptoms while others presented all as a set of phenomena so characteristic of each as to leave scarcely a doubt of the nature of the case with which we had to deal.

In the typhoid type of dysenteric a slight diarrhoea precedes all the local manifestations and the disease is generally more slow in its formation.
Epidemic Dysentery

in the earlier stage the diarrhea
most infrequently lasting for
several days tongue coated with
a dirty white coat and around
the margin and at the tip
pulse slightly accelerated and
somewhat feeble. The skin
dry in some cases while
in others there is moisture
about the face and neck.

The dysenteric symptoms are
seldom as urgent as in the
other forms of the disease
infrequently we witness evacu-
ations of nearly pure, acco-
mixed with soft fecal matter
and in others bloody serum
resembling the washings of
flesh, while the characteris-
tic...
Epidemic Dysentery

Typhoid tongue gradually becomes coated with a thick, dry coating, brownish or black in appearance, partially clean of leaving a red, dry shining or glistening appearance with deep cracks, which occasionally bleed on the slightest movement. Relief may increase delirium sets in and we have a set of phenomena that are frequently met with in typhoid fever complicated or influenced by any other diseases. In the first appearance of the disease in a neighborhood, the symptoms and course of the disease was much more rapid gradually lessening.
Epidemic Dysentery

some of its malignancy in a few weeks or months at furthest, more readily yielding to remedial cures. While occasionally we met with a few cases in the material region which proved frightfully malignant and such cases seem from the best reasoning and analogy to have two dea ths, at work at one and the same time, for in the same family we met with cases of the simplest type, the Typhoid type, and the convulserd type, the severe variety seemed to slip if neglected or to a contum lary type, convulserd type.
Epidemic Dysentery
and the symptoms in to the
contused form and in the latter associations of circumstances medicine seemed of little or no value. The most
powerful doses of Opium had but little influence the disease marching steadily on
from bad to worse. The discharge from the anus and feces and possibly fetid towards dry and
brown sordes on the teeth
and lips his cough subcutaneous
Tenderness involuntary discharge and death.
In the diagnosis of dysentery in its different forms seems
to me to present but little difficulty to any one who
Epidemic Dysentery

has paid that degree of attention to the standard works on this disease as has his able Professor of Theory and practice lecture on the subject in his peculiar and forcible manner. As to the pathology of dysentery I have not a word to say as I have not had the chance of investigating it, any post-mortem examinations.

Treatment of the typhoid form of this disease I am aware that many and serious errors are committed almost continually and that too by our oldest and most experienced practitioners, for they will persist in the use of calomel
Epidemic Dysentery

right as writing and urging the young practitioners the necessity of procuring black bile as they call it of the necessity of evacuating the alimentary tube so one can have the least doubt and should be done by small doses of Castor Oil and Turpentine repeated until the process several operations after which I have been in the habit of administering an anodyne dose of Dover's Powder at bedtime and if necessary a cluster of bran and cascara to as to quiet the bowels if possible for
Epidemic Dysentery

Several hours profess to the abdomen, followed by blister if the practice seem insufficient the tendency toward diarrhea are po-ting should always be borne in mind and guard so against as far as practicable by the use of stimulants, and in the advanced stage of a protracted case we must attend to his diet so as not to let him die for the want of a little succor but never bring a case of typhoid dysentery ever bearing in mind the analogy and kinship relations.
of simple typhoid fever
and typhus dysentery and
as to the indications of
treatment in the two. I
can see but little differ-
ence and shoule I think
be conducted on the same
principles generally for
which we have the highest
authority All of which
is most respectfully sub-
mitted.