AN INAUGURAL DISSERTATION
ON
Acute Rheumatism

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Acute Rheumatism

A spirit of emulation with an honest desire to arrive at a certain point of honorable distinction in doing my duty, coupled with the knowledge of the fact that my critics are men, not puppets, striving to calculate the author, prompt me to make an attempt to do that which I'm conscious of my own inability. Of the many and various abnormal conditions under which we find mankind, few there be productive of more real suffering, and upon which account brought more directly under the care of the Physicians, should elicit his warmest sympathy, he being from the nature of his calling oft-times liable to be affected.
Acute Rheumatism which has been
until within the last few years,
and still is by some looked upon
as one of those maladies that have
a sluggish course to run, and that
this need less the interference of the
Physician, but this idea is at the
present stage of scientific Medicine
too erroneous to be discarded; theref
ere I shall proceed. This disease
partakes of a grade of inflammatory
action peculiar, or specific in tendency,
scarcely equalled in activity by that
of any other disease, producing a
state of acute fibril excitement
accompanied by a local inflammation
of some of the Tissues, especially
the fibrous & serous of the joints, and
those of larger size taking precedence,
attended as they are with all the ordinary symptoms of inflammation, redness, heat, swelling, pain &c. Many are in doubt as to whether the local inflammation is the cause of the fever or its attendant; this is a very important point. For much of the pathology, and treatment will depend upon its elucidation, not immediately in connexion with the disease as it exists in the stage of which I write, for the same remedial measures, such as bleeding, purgation &c., are necessarily employed. Taking either view of the subject, but this, when the disease has assumed that grade called crisis, that there is no reason shall have their full sway, without which the
Treatment must be decided on and successful. I said that Rheumatism attacked the parts forming the large articulations, viz. the hip, knee, ankle, shoulder, elbow, and wrist. This is true, but we frequently meet with others the muscles often in those of the back; one of the and greatest peculiarities of this disease is its tendency to migrate or metastatise, that is to shift from one joint to another or from one portion of the body to another. Sometimes it leaves a joint and locate itself in some internal organ in which case death sometime results almost instantly. This peculiarity gives to Rheumatism much interest and from
This cause, it should be watched with
the greatest vigilance. One of the worst
sequences that a part is liable to,
especially the joints after being afflicted
with Rheumatic inflammation, is,
the swelling and stiffness, this is owing
to the organizing of the fibrin which
has been deposited in the earliest stage
of the disease, but which by time
and the assistance of proper measures
may be finally absorbed, so the joint
resume their natural size & form.
Now varieties of Acute Rheumatic
are described. Do with fibrin or diffused
and synovial. In the former there
is great vascular excitement, the
pulse rises to an hundred 20 twenty
and sometimes even higher, it is full
and strong, tongue thickly coated.
with a white fur; urine scanty and high coloured, opposite a brick dust sediment after standing; proposed sweats of an acid character, turning blue red; the odour is peculiar and can be recognised on entering the apartment in which the patient is confined; this is one of the best diagnostic symptoms of Acute Rheumatism and will rarely be over looked; in this variety, the fibrous the joints are very much swollen and painful, the odour disposed in thickness according to some writers, it is undoubtedly the case in mild forms of the disease; but I have seen it diffused over the whole person and that of such intensity as to resemble the red sweet of erysipelas, and on pressing the finger over the part appa
The redness would follow it as in the a before mentioned disease. The patient labouring under this variety lies perfectly still in bed, seemingly unable to move hand or foot on account of the severe pain produced by the slightest exertion to alter his position; in some instances he is unable to turn himself in bed; a little later in the course of the disease the affected part becomes soft, to an pressure, there is evidently produced by effusion into the cellular tissue adjacent. In the supraventricular variety there is but little pain in the beginning, the swelling increasing very gradually; while in the other variety it was rapid from the beginning; in this, there is also effusion, but instead
of the cellular tissue being the seat, the effusion occupies the synovial sack, the parts feel elastic, tense and fluctuating; there is but little fever at any time, tongue, but slightly coated, pulse almost natural, secretions but little altered; but a still more characteristic difference between these two varieties is, that the synovial never changes its position, and is, from this fact, not considered dangerous. These being some of the most marked signs of differences between these two varieties of acute rhematism; I shall come now to speak of the causes. They are divided by all writers into exciting and predisposing of the former (or exciting) I believe it is considered by all who have writ
on this subject; that cold is the most prevalent: cold applied to the body which has been previously heated; sleeping on damp grounds, wearing wet clothes for a length of time, currents of cold damp air passing over the body while sleeping are also very frequent causes of this disease. While these are some of the most common exciting causes and most liable to produce it, and does in many persons, we know they will not in others; hence persons are said to be predisposed, or by others to have a hereditary tendency. Of this last suggestion I know but little; but from my limited knowledge, and inclined to believe there is but little if any truth in the ascription;
for the affection has as yet but little to support it. It is said by writers to be produced by exposure to cold, in those of bad constitutions, and that it occurs in the male oftener than in the female, even of the same family. Now if it is hereditary, why does it not occur in females and among those of the higher grades of society as often as in the males of the same conditions of life? The answer, the books is this: that they have not been exposed to the same exciting causes. To wit, cold, wet, bad air, insufficient clothing, unwholesome food, &c. It would be useless for one to mention other reasons why I do not consider this disease hereditary, as I'm sure all who
read this, think as I do on the subject.

Of the causes called predisposing I can
more fully understand, for when
we recollect that when several
individuals are exposed to the same
causes and at the same time, some
will be from that cause, affected
with Rheumatism, some with Phrensy,
others with Cataract, others with
Rheumatism; while not infrequently
persons may escape altogether without
no disease. Now when a person thus
attacked, he is said to be predisposed,
to that particular disease. A previous
attack of Rheumatism is one of the
strongest predisposing cause, and
persons of a worned out constitution
are also frequently affected. The predis-
position is governed to a considerable
extent by age. Those from the age of fourteen to forty are most likely to leave the disease, while persons under

or that age are more exempt. When it does make its appearance in old age, it is generally in those who have been affected within the dates mentioned above. Writers on this subject say that there is a predisposition to rheumatism in some persons, and when well marked, is alone sufficient to develop the disease without any exciting cause whatever. Persons are said to have this diathesis who have large joints, a relaxed muscular system. Whether this condition be peculiar to rheumatism or not, it is one uncertain but persons of this diathesis are likely to have rheumatism.
or any other inflammatory disease. The diagnosis of acute Rheumatism is not difficult to make out. The disease with which it is most likely to be confused, is gout, and with a proper degree of judgment it will easily be difficult to distinguish the two maladies. In gout, rarely more one joint is affected, and for the most part the smaller, and has but little disposition to drift, but remains in the joint first affected. While Rheumatic inflammation attacks the larger joints and has a great tendency to metastasis. You frequently see it, in one place to stay and on your visit to see your patient to-morrow, only find the disease affecting a remote part from the first.
The pain in Rheumatism is increased by motion, whereas in gout it is not, rest mitigates the suffering in the former, but does not in the latter. Gout occurs in those of the higher walks of life, those that are blessed with nutritious food, while Rheumatism most frequently attacks those in opposite circumstances, and are much exposed to the vicissitudes of weather. Gout may attack persons of all ages. Rheumatism (not) from fountain to party. These and may more that might be easily adduced are sufficient to make the diagnosis easy so I shall now proceed with the prognosis which depends very much upon the character and severity of the accompanying inflammation, as well
as the treatment employed for its cure.

These should always be some anxiety as to the treatment of acute Rheuma
tic fever when the fever runs very high
that great tendency which this disease
is liable to assume, should always be
kept in full view by the physician.

While the disease confines itself to one
or more of the joints, but little
danger is to be apprehended, but
when metastasis is very common,
sometimes affecting the membranes
of the brain, or some other internal
organ, as the heart, in which case
some organic lesion may be produced,
cutting short the life of the patient, or
producing hypertrophy by disease of
the valves, this in succession produce
dropsy, and so on until if the patient
escape the primary disease, he falls a victim to some of its sequencers; but the heart and its membranes are not always affected by translation; the disease sometimes originate in the tissues, in the form of carditis (purulent carditis). This very natural, as we find the same kind of tissue intermingling into the composition of the heart membranes as we find in the joints; and I'm of the opinion that this only owing to the life exposed condition of those membranes. That we find the disease so rarely originate in them. This is proven by the great aptitude they exhibit in taking it on, when it exists in another part of the system. So liable is this organ or some of its appendages to become
affected by Rhenmation, some writers contend that one half who are affected with the disease suffer from some affection of the heart. If Acute Rheumatism is subjected to an active and proper course of treatment from the beginning, the chances of the patient to escape this much dreaded result are much increased, but unless neglected or improperly treated the chances are three to one that some internal organ will be affected by inflammation; but in some cases, where the Constitution is good, and the disease but slight, the inflammation may subsist without much injury being done in any way, and the patient is soon up and about his business. Now that
I have described most of the leading symptoms of acute Rheumatism; its diagnosis and prognosis. Now nothing is left one to state but the indications to be fulfilled in the exhibition of remedial measures. Thus, the indications are simple and plain—But the means to be made use of are many and different as is the case in the treatment of nearly all other diseases. One will advocate a certain set of remedial means, and another on other. The indications being to diminish fever, subside inflammation, allay pain. As the treatment is very briefly I well understand all, I think, unnecessary to mention. Besides I have written as much as any time will allow.

Chiles. [illegible]

Dec 21st 1857