IN AUGURAL DISSERTATION
ON
Acute Gastritis.

SUBMITTED TO THE
PRESIDENT, BOARD OF TRUSTEES, AND MEDICAL FACULTY
OF THE
UNIVERSITY OF NASHVILLE,
FOR THE DEGREE OF

DOCTOR OF MEDICINE.

BY

A. H. Lapsley.

of
Nashville, Tennessee.

1853

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Dedication

To the able & talented Professor of the Practice of Medicine, in the University of Nashville, W. H. Bowling M.D., this Thesis is most respectfully & affectionately dedicated. By The Author.

Nozell Alexander Lapsby

January 6th, 1853
Acute Gastritis

In looking over the numerous
diseases of which we have a History, I
have observed many, that are invested with
a peculiar interest, because of their great
prevalence, in the great Valley of the Mis-
sissippi, but which, from having been so
frequently the subjects of Medical Theo-
ries, have become so trite, that I have
seen proper to throw them all aside &
select the above. It is true, that it is not
of as much practical importance to the
Physician, as some others as Pneumonia,
Typhoid Fever, Dysentery &c. still it is of
very great interest to the Medical Man
both in a Medical and Medico-Legal
point of view. I am fully aware that it is
quite as difficult, as any other that
might have been selected, and though I
cannot expect to advance any new views upon a subject, already fully elucidated by Heads far abler, wiser than mine, still, I hope that my Essay may prove of some interest, if not upon the ground of merit, at least as the first effusion of a youthful Medical Mind. Without any further preliminary remarks, I shall at once enter upon the discussion of the subject.

Acute Gastritis is the acute inflammation of the Mucous Membrane of the Stomach. Acute Gastritis very seldom occurs as an independent disease, which is a remarkable fact, inasmuch as no organ of the whole system is more exposed to the usual causes of inflammation. It is the receptacle for all manner of nutritious, indigestible, & acidic Articles taken either as
food or physic. Yet a kind and overruling Providence has so provided, that these irritating substances, which, if applied directly to any other mucous membrane, would produce the most violent inflammation, when taken into the stomach in general only produce sufficient irritation to cause their immediate rejection. Yet notwithstanding the difficulty, with which the stomach is affected seriously, by the direct application of these irritants, no organ in the system is more readily affected through the medium of sympathy. Let disease, with all its terrors, invade the system and almost the first note of alarm comes from the stomach, which ever stands like a faithful sentinel upon the watch to guard the system against the very
approach of danger, and give it time to
tvert the threatened stroke. The object of
this wise provision of danger is evident to
all: for if the stomach were not so readily
affected by sympathy, articles, whose ten-
dency would be injurious, would be ad-
mitted through it, into the system, and
thus a disease would be formed or in-
creased if already formed. But as the
Stomach, through its sympathy, with
the whole system, so readily receives dis-
 eased action when going on, articles, whose
tendency would be injurious, when taken
into the stomach are rejected, and those
tending to counteract diseased action, are
admitted into the circulation, thus the
disease is removed.

Anatomical Character. The lesions
in this disease are very important, especially in a medical point of view. Therefore the anatomical characters as presented by a Post Mortem are to be carefully studied. The first sign of any importance, that presents itself to our view, is the contraction of the stomach to rather less than half its size. Upon opening the stomach, we see the mucous membrane considerably thickened and covered with a viscid, mucus covering the mu-
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lines of inflammation, radiating off like the spokes of a Wheel. In the fundus the color is generally the deepest. Edematosus is sometimes observed usually in small patches. The mucous follicles very frequently give evidence of increased emotion development, by small rounded prominences. The disclosed portion of the Membrane, is very much softened & thickened, so soft as to be very easily torn up. This may be regarded as almost a Pathognomonic sign of Acute Gastritis. As this softening & fragility of the parts can only be produced by its decomposition & the cause of this must be acute inflammation or Poison as this is a Membrane most difficult of decomposition after death, when the stomach had, previous to this been in a Healthy State. We have mainly to rely upon this symptom to diagnose a case.
of previously existing Acute Gastritis, as none of the others are sufficiently certain, clearly to indicate it. Redness was at one time regarded as a pathognomonic sign of this disease; but accurate investigation has clearly proven that redness may be produced by other conditions of the organ than an inflammatory one. It has also been proven that stomachs previously in a healthy state have appeared much reddened after death.

Cause. As was stated at the outset, the stomach is not as amenable to the usual causes of inflammation as the other organs of the system, and therefore Acute Gastritis does not occur often as an isolated disease. The principal cause of this disease are, the swallowing of active vegetable and mineral poisons. There exists also in some persons a strong predisposition to this disease, so strong in fact, that a moderate
use of physic stimulants or even an excess of food may produce it. Several cases of the Gastritis sometimes result from the translation of inflammation from some other organ to the stomach. But the strongest predisposition to this disease consists in the convalescence from some acute disease as cholera. In this terrible disease we are compelled to see some of the most active articles of the Materia Medica in very large doses, to counteract the fatal tendency of the disease, with but little or no regard to the welfare of the stomach. These medicines very often act mechanically or chemical by produce the most violent inflammation or leave the stomach in such a condition that the slightest indiscretion in diet will produce it. But this disease is more commonly an attendant upon other
disease, and is frequently produced during the existence of Bilious and Yellow Fevers. But the fact as to whether it occurs as an idiopathic disease or as an attendant upon other diseases makes but little difference as to the treatment as the prominent indication is to subdue the inflammation in the Stomach as this is at least one of the principal sources of danger.

Symptoms. The symptoms of acute gastroitis are divided into General & Local. The general or Constitutional symptoms are as follows: The tongue is generally covered with a white, furry coat with its tip edges of a fiery shining red color, having no papillae projecting through the coating. Sometimes the tongue is red, smooth, dry, or totally devoid of any coating, throughout the continuance of the disease. The Bowels are
costive unless the intestines partake of the disease, in which case they are looser than in health. The pulse is quick, small, tettered. The Respiration is short, hurried and accompanied with a hard, hacking cough. The Patient is apt to lie upon his back, and is very restless. His countenance is generally expressive of great anxiety and mental distress. These are all the prominent Constitutional Signs of Acute Gastritis, but they are also common, to a greater or less extent, to all inflammatory diseases. We have therefore to diagnose the disease to rely mainly upon the Local signs, which are as follows: There is always in severe cases of Acute Gastritis, very intense burning pain in the Epigastric Region accompanied by nausea and vomiting; the pain is always considerably increased on pressure.
sure, and upon taking a deep inspiration
the act of vomiting renders the pain almost
excruciating. The matter vomited up is
first the food (if there be any in the stom-
ach) bloody bile & mucus. The thirst in
this disease is very naturally intense, the
patient continually calling for cooling
drinks, which, if taken in considerable
quantities is immediately rejected. After
the exhibition of these symptoms, should
the disease take a favorable turn, the
skin becomes smooth & moist, the pain
diminishes, the vomiting ceases entirely,
the tongue begins to clean off & become
moist, and the general relaxation of the
system evidences that the crisis is past
and by proper attention to diet the pa-
tient will recover.
But if the disease advances unfavourably the tongue if before coated becomes of a bright scarlet red cloud it is dryish and smooth and towards the close it begins to be covered with a thin whitish exudation as is also the inside of the cheek. The skin becomes pale and cool the pulse becomes smaller and more thread like vomiting ceases from the mere weakness of the patient and is followed by a mere regurgitation of the substance in the stomach sometimes a black matter resembling coffee grounds is thrown off the stomach. The patient becomes more and more restless and emaciated rapidly and death speedily follows preceded by all the symptom of extreme prostration. Should the pain cease suddenly without any perceptible
cause, we may fear that Mortification has supervened, in which case immediate death is sure to follow. Should the pain become suddenly diffused, we may be assured that the coats of the stomach have been perforated, and that its contents have escaped into the cavity of the Peritoneum, in which case also we may expect immediate dissolution. When an active corrosive poison has been taken into the stomach, decomposition of its mucous membrane quickly takes place, followed by a cold clammy skin, great prostration, & death.

In the milder cases of Gastritis, the symptoms enumerated above, as characterizing the cardiac stage of the disease are experienced though
in a much milder form.

Diagnosis. The symptoms that mark a severe case of Acute Gastritis are so clear that it cannot be mistaken for any other disease. From Peritonitis it is distinguished by a greater diffusion of the pain, by the greater tension of the abdominal varieties, and by a greater general depression in Peritonitis than in Acute Gastritis. From cholera morbosa it is distinguished by the presence of fever which is always absent in these affections.

Treatment

Whether Acute Gastritis be the result of the action of poison, or of the ordinary causes of inflammation, or is merely an accompaniment of some other disease, matter very little as to the
treatment the prominent indication being to subdue the inflammation in the stomach as that is a very prolific source of danger. If the disease be the result of the action of a poison the stomach must be evacuated immediately either by the stomach pump or some prompt emetic. Then administer some antidote to neutralize any portion of the poison that may remain in the stomach. An active purgative is then to be administered to expel from the bowels any of the poison that may have escaped into them. This being done we must enter upon the treatment of the inflammation superinduced by the action of the poison. The treatment will be substantially the same whatever the case and may be divided into General and Local.

1. General or Constitutional Treatment

If the system is not already too much debilita-
ted by the cause producing the disease, the patient
should be bled freely. We must not be guided
exclusively by the state of the pulse, when we
wish to bleed, for, very frequently, when the
pulse is small and corded, it rises under the
operation; in such cases we continue the bleed-
ing as long as the pulse rises and grows more full
and clear when it begins to flag. Bleeding is
always safe when the pulse rises and grows stagg-
er under its influence. Purgatives would
seem to be indicated here, if they without
doubt would be very useful if they could
be administered, but unfortunately
the stomach is so irritable that their ad-
ministration would be locally injurious.
Still after bleeding we may administer a
dose of laudanum, which, if not rejected
will operate favorably by unloading
the Portal circulation and relieving the congestion of the stomach. Opium is also recommended to relieve pain. When these medicines are inadmissible per os, they may be safely administered as injection. An enema of a teaspoonful of Sanguinaria combined with a small quantity of warm water, acts very kindly in relieving the pain. Throughout the progress of the disease, stimulating medicaments should be used to excite action in the inferior extremities, when they are suffering. When gangrene is threatened, the Oil of Sappo-

Time in small, frequently repeated doses is the sheet anchor of our Hope; it has been tried and frequently found successful when all other remedies have failed. The patient should not drink
largely of any kind of fluid, for fear of irritating the stomach. Still he may be allowed small quantities of very cold water or allow small quantities. Lumps of ice to dissolve slowly in his mouth, or swallow it undissolved, this will not only prove very grateful to the patient, but also decidedly beneficial in subduing the inflammation. Very particular attention should be paid to the diet. Nothing should be given in the earlier stages of the disease except a little Rice Water, Brine, or Light of Gum Arabic or something of that kind, but as the disease advances, the patient grows weaker, more stimulat- ing articles as Chicken Water Beef Soup may be administered. During convalescence the most particular attention must
be paid as to the diet as the slightest indisposition may cause a fatal relapse.

Local Treatment. The Local Treatment of this disease is all important. Whether blood has been taken from the arm or not, leeches must be applied over the whole Epiigastric Region, at times, throughout the whole continuance of the active stage of the disease, and upon their removal warm fomentations or Poultices must be applied over the whole Epiigastric Region. Cold applications have been recommended but they do not act as beneficially as the warm. In the advanced stages, blisters act very beneficially. Advantage may be taken of the raw surface thus obtained, to apply remedies that cannot be taken internally as pleursy...
and Mercury to relieve Cancer & Pain
and to produce a diarrheal impression
upon the system.

This treatment, it will
be readily perceived, apply only to
simple uncomplicated Acute Gastritis.
As a matter of course, when com-
plicated, the treatment must be varied
according to the complication.

I have therefore
endeavored to write out my ideas of
Acute Gastritis, in the best manner
I could. These ideas were mostly if not
wholly obtained from a careful perusal
of Prof. Woods excellent treatise upon
the Practice of Medicine. I have in
several places been compelled to adopt
his Phæology, from inability to
to find a better.

I should have been happy to have embodied the views of our able Professor upon Acute Gastritis, but having been absent, from indisposition, when he lectured upon that subject, I am consequently unable to do so.

Morrell A. Safford
January 1st 1858