AN INaugural DISserTATION ON
SYPHOICE.

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

BY

J. M. J. FIELD.

OF

Vanderbilt.

185

W. T. BERRY & CO.
BOOKSELLERS AND STATIONERS,
NASHVILLE, TENN.
SYPHOTIC FEVER

SYPHOTIC fever, a common endemic disease, both in the United States & Europe, has many appellations & nomenclatures. Such as: SYPHOTIC CONTINUED from Common CONTINUED NERVOUS fever, abdominal, SYPHOTIC ENTERIC, ENTROPECTORIC, follicular SYPHOTIC VITIBR SYPHOTIC GRAVIER. Which nomenclatures are uncertain & perplexing. SYPHOTIC is not a suitable name or nomenclature for the word SYPHOTIC is derived from SYPHONS SYPHON or like typhus. But the term has been either of the diseases will immediately recognize a material difference. That is, there a description of the latter typhoid being a disease of the bowels & SYPHOTIC being a disease of the blood supposed to
originate in dark, deep & closed holes.
More frequent there than any other place or in crowded hospitals in the bowels of ships.
And all such places and especially those
improve atmosphere excited to a great extent. And on the other hand Typhoid fever has been known to exist & prevail
to an alarming extent. Were it not that it would hardly look reasonable to sup
pose any impurity of atmosphere or any
known cause could be conceived to exist. But
I know that filth will aggravate the disease
Dysentery's from actinic particles & enteric
influence. In fact we have no better appropriate
name. And as many have expatriated largely
upon the one best suited I shall have
it for other to call by whatever ever
they think best with the privilege of doing the
Sume myself, Symptoms &c. &c. It is generally ushered in with a chill, slight headache or dull heavy Headache. But before the disease has fairly set in, the patient will complain of acidity, Shortness of breath, & partial loss of appetite. Bowels disposed to run off, giving a good deal of trouble; experiences a good deal of weakness. Some of his kinds or rather an aching is different to things about his person, as does at other times a little frequent posterior his bowels frequently moved to due excess by the use of some slight laxative. The disease now having fairly set in, all the Symptoms of fever, ordinarily, are present, such as heat, Angers of the skin, frequency of pulse, thirst, faintness, check the Symptoms are somewhat pre-
Lin pulse, from thirty to one hundred, in a minute and of considerable strength and fulness of the amounting from one hundred to two hundred and twenty. The flushing of the face is most apparent near the teeth or line than any other fever and when absent the countenance presents a sadness or melancholy expression. Not infrequently bleeding at the nose is a good diagnostic test. The headache is seldom absent if but a short time the tongue has a short white fur with the papillae projecting, frequently thin there is an intermission or cessation. The exacerbation succeeding with preparation, but this is much less frequent than in the cases of ordinary intermittent. Short symptoms continue for several days increasing up
Variation. The pulse became more frequent & less strong. The tongue is covered with a thicker coat, having a tendency to annoy. She has acquired a heat and anxiety which is often described as being acute & frequent. Transient pains are felt & especially upon pressure, over the right iliac region a cough frequently occurs with a dry & sometimes mucous expectoration. The urine is slightly changed, sometime being high colored, frequently having to use catheter and when asked whether just urinated and when he did, came away dribbling. Other symptoms now superadded. The tongue before rather moist now becomes of a ashish & a thinning appearance, the bowels being disturbed.
When pressed a loud Sympathy, then up to this time if the Synepstrem have not excited the tongue will become dry and dark the tongue having a dark spot just. 

When the tongue curds, the gums the tongue assumes a shining red appearance not infrequently chooped then up to this time the pulse become exceedingly quick and fickle the surface reversibly hot and Sudaniean appear upon the lower portion of the chest an abdomen, also the rose columnar spots a good diagnostic. Among the examination by some authors the patient frequently lying upon his back shoes down in the bed, unable to retain his position propping at the bed clothes imagining himself able to walk, or will often make an attempt at walking.
fattful till the bed side. Completely exhausted & willing to stay wherever he is placed. When the disease is about to terminate unfavourably, the pulse will become quick, feeble, involuntary discharges from the bowels, the extremities becomes cold & clammy. When a favourable termination is about to take place the tongue becomes moist and begins to clean from the cages to tip, the pulse becomes less frequent—The appetite returning or not—So much anguish for food and exhibits solicitude for himself. Generally the disease is uncertain sometimes terminating fatally within six days, again lasting for weeks and months Dr. Bordley mentions a case. I have heard of lasting two years. Not unfrequently you will come across a case having all the appearance of Convalescence, and if—
Takes suddenly with pain in the bowels, especially the last stool, great terrors caused by perforation of the intestines setting up inflammation of the peritoneum and death ensues immediately. But such cases almost always prove fatal for I have seen several cases that recovered but taking many months.

**Anatomical Character**

As I have but little observation & experience in this particular but little can be expected. I have seen several cases sick to have died of fever and the whole intestinal canal seemed to be involved not only the glands of Pyes & Rumes but the muscles of the brain having the appearance of Phlegmasia according to Lords the heart are of two kinds the soft & hard.
the former being soft to the touch the
latter hard & having a shining appear-
ance, leaving the same appearance
as jetrium or resembling it very much
the hard grain being a solution. The eye-
always the mucous is not so much affected
as some other parts. The colour is always
minimal to a considerable extent. The liver
system kidney heart best affected any
much. The blood blue auric has indiscri-
bable or distinct or sign except Coagulating.
Sometimes it is other not at all.

Cause

Nothing for certain has been brought
forward to prove the preceding
cause it has been found in healthy co-
nutives as well as in unhealthy persons.
The mountain top as well as in the
valley. Among the rich as well as among
the poor among the mill jets as the back
and under all circumstances but
still having a greater partiality for one,
there another some saying one thing a
precipitating cause whilst others say
another. But I think all these things
such as hard daily colored exposure to heat
and cold daily exposure to exposure. Crooked
hospital evacuation all having a tendency
some bodies the disease some constitution
naturally more susceptible to disease than
others. And occurring most frequent in
young persons there are just cases one
record of a person over fifty years of
age. But I remember a case of an old
gentleman who was said to have typhoid,
from at least I have sought to dispute.
The diagnosis of his physician, Dr. Wool, says he has never seen a case, in both his private and public practice, to have originated by Contagion. In my mind there is a good deal of dissatisfaction concerning the meaning of Contagion. Many say that it means federal. Some others the meaning while other some that such is necessary to communicate. The word Contagion has a mean of wholly come together to make to touch. I am firmly of the belief that it is Contagious tides certain circumstances. I have had the pleasure of seeing it told in myself that it myself and another man confined in armour for Sir Wilt. While one of us had an attack the other did not. Then I can point out cases where persons were confined in the room but a week & all the symptoms of scar...
present themselves but I would not be able to convince some of the Contagion or that Contagion should I write for months they would take it as no evidence at all as I have said I am at a loss to say what is the predominating Cause.

It is frequently complicated with Kittins fever than any other fever by young Practitioners being at ease to step forward and pronounce this or that. I believe there is no such a mistake in this Country.

I will leave this dispute point behind.
to decide. But still you may decide tolerably correctly concerning Affections from the mode of attack being generally slow. Certain while that of intermittent and intermittent make rapid strides having complete remission or no remission while there is no complete remission and if any not perceptible it has been mistaken for one of the Exanthematic cases when there is any of these prevailing. But my place would be to take into Consideration which was prevailing most numerous & when I made a diagnosis I could not in any thing else under no Circumstances.

Proposia

Generally not very fatal considering the number of Cases Complicated with Pneumonia Bronchitis &c Scrofula &c
Statistics go to prove that the disease prevails with more violence one year than another proving to fatal to a greater extent. Those lamenting fatal most usually come in contact with the above named diseases and where the brain was implicated, proving fatal to great extent.

In the first stage or commencement of the symptoms abstaining from solid food, rest, confining himsely or herself to his room, being well clothed seems to recommend little or no treatment. But I think if the disease be taken in to hand at this time you will frequently have the pleasure of seeing it checked in its course, if not completely check the symptoms will be ameliorated.
The treatment should not commence with a purgative as is customary in all other fevers. The poultice should be applied. Bleeding has been recommen-
ded by some. When there seems to be a languidous determination to the brain. But I am of the opinion that young practitioners should hold the lance-in.
Syphoid disease not saying the would not be justifiable. But be Cautioned let 
them rest sacrificed with local blood, setting for instance Sucking Capping.
Whether bleeding does any more good than the
true abstraction of blood, I would without hesitation say they do good in some other way.
But I am ignorant as to what it is.

We should commence the treatment with a laxative or mild Cathartic as Magnesia Carbon.
oil. When there is not too much irritation I would use a few drops of hisopine.

Say from five to ten drops, I should

husband the strength of the patient

for it seems to have a great tendency
to make more than any thing else.

showing

the impropriety of too great blood letting

after the bowels have been evacuated so as
to give house of any irritating the

reflux

acuphents to 

brate the febrine symptoms
given in the form of neutral mixture,
or the effervescent mixture being the

same

thing except one is giving whilst in

a state of effervesence. I mean mine

sometimes making a good addition. Our

next object is to try the manouevril

plan of treatment given in small doses

Hyalagene. Our Cure being among

our
Precede & best means or let Calomel be given in combination with some astringent or astringent to prevent too free action upon the bowels. Astringent being given to prevent nausea. Tenures to the State of the bowels should always be attended to with regularity of the operations be certain means should be taken to get at least one good operation daily by injection or some mild laxative taken care they are not operation on too fully.

Blister should not be applied except in the early stages. Being inclined to slough in the latter the local treatment should consist of cold applications to the head, ice pounded in a bladder, a cloth mung out of cold water laid upon the forehead, sponges also dished applied to the temples, swelps over the abdomen, or more
formulations of wheal-brand face in warm water, or wash in wheal-brand may be substituted. The net, often becoming troublesome. If the patient will complain of its height, but the net is the best. But if there is no sign of diminution of symptoms, blister will be found serviceable. If the symptoms do not yield. By this time in my complete Saliven
wood recommends inspiration when the tongue is dry & commences bulging off, in flaky
from the middle. But I have seen it
throughout the disease, that as there is other period of the disease,
it may be used to an advantage &
with the most-acrid strength, gently give
in an emulsion of Agaica & sago, prior to the
dropped to the headspoonful.
When the extremities Cola & Colaqueate
Swate and phos waters urine acid (Stips
fromen) I have also had the pleasure
of being Powell Bowling prescription used.
Wate arguwi but not am Bournin with
Green Substitute instead of the Opi
Which名誉 proved highly Successful
as I learned afterwards that nothing else
was given and a very little place.
Cleanness Should be observed diet light
Boiled thickened broth or boiled milk
arrow root when the patient is in the last
Stages of the disease has been Makan
& Nothing seems to be the matter more than
Makine u should make an attempt to
give him strength by using Tumult 9 arrow
root why Brandy with eggs also pursue
has been used with decided advantage not any
at this particular period but under many other circumstances that is useless for me to repeat. Applying with the little cumin beaded Cold water to the face & hands & bottom of the feet may be well & quickly dry or they may be bathed in warm water & salt after the feet are disposed to become cold. Warm hocks or bottles of warm water should be kept constantly to them mustard & calsicum you ought not to pay any of the remainder to just keep them warm. I have been at the treatment of the disease bleed & succeeds that is apply Plumb. according to his direction.