AN INAUGURAL DISSERTATION
ON

Scriba

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

BY

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OF

Jennifer

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The medical student feels a degree of interest and enjoyment, in eluting upon which to wallow an hour, because my subject has undergone the testing of science, but yet, it is no small comfort to feel that its beacon lights stand out prominently to ward him off the shoals of breakers, and rather than complain, how deeply deserving our gratitude are those who have shed their light before us, if our little spark is not the first to sail in regions unknown, its sails on the wide spread, and it makes an antrograde course, but more onward, confident of what is before, and the more surely sails into ports laden with fruits if not so sown, richer and more abundant.

Ortus is a very common
form of dropy and authors differ as to
the relative frequency of this as compared
with other forms of it. The patient first
discovers lightening and he then perceives an
enlargement at the lower portion of the
abdomen, it being lowest, the water
may naturally accumulate first at this
part, as the water increases, the enlargement
becomes uniform. It is probable that this
watery accumulation exists much more
frequently than is supposed. I think it
likely that in many cases of ascites
of the lower extremities following as a
result of debility induced by fever
and other causes, that we have seen
or lost water in abdomen, so small
an amount, however, that we can
not detect it, pursued by ordinary means
Pernicious is an important means
which comes to our aid in making out our diagnosis in this disease should then be water present in the belly, then will be dulness of sound under percussion instead of the normal osone which is described as being a hollow sound.

The differences in the normal and abnormal sounds are something like the difference in the sound of a sip and unsip mouth. The sound will be much modified, by the presence or absence of the bowel under the foot. The bowels being light accord as far as their attachments will let them endeavouring to get upon the top of the fluid. Consequently we will have greater dulness as we depast from the presence of the bowel, greatest blow and more normal as we advance.
near the thorax. Pregnanec has been taken
for the disease, and vice versa, hence con-
must therefore be taken in making
out our case. The patient should be
placed upon the back and if it be
water in the abdominal cavity then
will be greater flattening of the belly
in front, by the water tending to the
sides and bulging them out posterior
and laterally. In pregnancy if the patient
be this placed, the belly will retain one
of its wanted roundness, or the obliquity
of the gravid uterus to one or the other
side would be materially seen. I do
not think a tympanitic belly could
disturb us, though it is mentioned by
authors as being one of the conditions
that might. The tympanitic sound I
think would be unmistakable.
I suppose the liability to take the statement of the patient in this case, as in the other, would be more likely to get us into error, the statement of the patient should be received with some caution. Should the two cases exist to get the diagnosis will be more difficult, the only history of the case, the use of the stethoscope and percussion in connection with the symptoms generally, carefully considered, would close up the diagnosis.

I met with an old negro fellow some years since who had been poisoned by flour and had some edema of the lower extremities with a slightly distended abdomen. I thought at first he had uric acid, but on examining him as to his urine and he stated he had urinated several times in two or three days, but he thought not enough.
I asked him how long lines he commuted, his reply was the same day since I concluded that was rapid, for after I introduced a catheter and drew away an incredible quantity of water I have no doubt he had urinated but it could serve only as the overflowing of the bladder. Much the most frequent cause of the disease is an obstruction to the normal circulation of the blood through the great portal circulation the liver is long in may by pressure upon the great descending Cava or more frequently the organ pressed by disease, thus obstructing the circulations through the minute ramifications of the vessels and causing a drawing up of the blood from behind and continually
supplied by the arteries from behind.
The water cuts its way through the
fibrous or fat it can. The doctrine of the
inhabitants does not explain all the phenomena
attesting this disease. It seems to one
that the doctrine of congestion, irritation
or inflammation in conjunction with
the agency of the inhabitants being the
main cause is not excepted of
impregnable proof. That an impregnated
ear can not and does not have
intake fluid to any great extent is
well known, and it is are established
that the abscesses on more an active
as when pasted from inflammation.
Hence we promote abscession by
first and doing inflammations. And
analogy would seem to prove that
the abscesses are as much in capacity.
or culpable of the abscesses and (vice versa). This is likely explained last by both being obstructed or closed up by swelling and compression as a consequence. The tender cephalic indication of purulent inflammation is perhaps secondary, but yet important to be removed before the water can be removed away by the abscesses. In part, the vein likely perform an important part. Acute is frequently caused especially where it depends upon some that an organic and inviolate. It is reported as being caused some time from the same, after uncontrolled efforts on the part of the physician. Where dependent upon disordered liver, either from chronic or acute inflammation it is often relieved by addressing means to that organ. Should it depend...
to produce
when any gland cause such as thus arises
independent of any local injury of the
cause it is currently, I shall not deny
anything of this kind, and yet it is
distinct in its origin and treatment as to
be him out of place.

The most valuable medicine in this form
of injury or perhaps the cathartics, especially
the hydrochloric kind, as a means of re-
moving promptly the fluids, but in consider-
ung of the liver being such the most
frequent cause of the disease, colonel
as a final relief of the arrangement of
that organ perhaps ranks higher in the
scale of medicinal agents than any
other. Small doses of Colonel, and doses
powder at night, followed next mor-
ing by pulverized Simmonds 900 Colonel
Easter 9-16, at a dose repeated three hours
or two, according to circumstances, will generally answer the purpose. This remedy should be repeated as long as the patient will bear it, provided the necessity exists for its repetition. After the water has been removed, give of castor oil in the morning, at dinner, and at night, alternating with the first remedy. Say you give the first dose one day, and then give the into the next. Should the patient not bear to much purgation, we must be governed accordingly and only more often administer remedies. We may combine with this small dose of calomel in fact calomel cannot hardly be out of place as an ingredient in any of the mixtures in such situations, especially where there is the hepatic enlargement mentioned above.
Quill is a very ancient, and a very valuable remedy especially when con-
jointed with Colonel P. S. iron phosphorus
go. 1. Colonel go. and nitrates of Roche
go. 10, give at a dose and repeat every
two hours until there is produced
expectoration. The treatment looks
very much like it will succeed and
if so known to our worthy professor
of Practice. Elaterium as a Hydroague
is very highly appreciated as a remedy
for coughing off water. Mercuri
should not be corrected too soon;
ever beyond a slight effusion of
the gums. They should be pursued
in some time for a long time,
approximately for several months.

Frictions with Olioine antimonii daily
or twice a day over the region of the
liver. Should there be cancer, tubercles or cirrhosis of this organ all our remedies will prove ineffectual, but owing to the uncertainty as to the precise condition of the organ it is best to try immediate treatment. It may be amenable to this remedy.

Should there be inflammation,&c., &c., listen to the abdomen. A large blister is sometimes of much value. Care being taken not to apply it in cases of extreme debility, especially where there is an accumulation of the belly or abdomen, I have seen very striking effects from bandaging the leg when the extremities, and why not to the extremities in cases. Well regulated compresses by giving sufficient and our coming the locality of the parts.
I should think would help much in taking up the water.

Fortunately

we have a long catalogue of medicines for this disease. Digitalis is, or doubt, a good remedy, sometimes promoting a powerful diuresis and thus relieving the disease. Doctor Withering is of the opinion that it is better adapted to patients of fuller constitution. Slate, with low fiber, and sedative limbs filling and improving rather than to the vigorous and strong. In whatever form it be employed, its effects should be carefully watched and the appearance of a decided improvement of any kind should be a signal for a cessation of the remedy, or temporary suspension.
In a disease differing in its beginning and character, our treatment must be varied. Then are some general indications, however, which we should keep in view, that is to content as far as we can the particular pathological condition upon which it may depend. The strength of the patient should be supported under treat that against the protracting effects of the injury as of the disease. Diarrhea, perhaps an indication of weakness, or an account of debilitation, the patient's body becomes agraretic. Cream of Tartar is an old and common diuretic, with which many a case has been cured without the aid of any thing else. It should be given in such manner as
to act fully upon the kidneys, which is best done by small doses repeated after
large doses such as an ounce or two
run out upon the bowels, therefore
but little is taken up and come to
the kidneys. A round the quantity purge
the patient, remedies such as laudanum
should be given to check its action
and turn it to the kidneys.
A number of other salts, entitled
are employed, among the number an
extracts of potash, this is more likely to
produce gastric irritation and is now
more generally given as an adjuvant
to other remedies, the urine should
be taken as a source of
salts. The best remedy besides opium
and morphine contained gives so
to increase profuse perspiration, and
and continued for a length of time, in
fact all our courage hence to be preserved
in for the disease is generally slow
in its beginning, slow in its progress,
and the cure is slow. Paracelsus is
the last resort is a cure of all
and mightily so. It should be used
when slow, pronounced, arises from
excessive accumulation and expulsion
is distended. It has been, and perhaps
now has its advocates as a means of
cure. I can not conceive how it
could cure a case, and if whatever
is uttered it would within itself
a course of decline. One can must
not he had not to avoid suddenly the
water, as it sometimes acts as so
much threatened with drawn from
this nature and the skin.