AN INAUGURAL DISSERTATION

ON

Typhoid Fever.

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Syphoid fever.

This disease, which I consider very fatal, has been ravaging almost every inhabited portion of the Globe for a century. It has always succeeded in baffling the skill of the medical world. Since the days of Louis Physician, have given a great deal of attention to this disease, still it seems to be less understood than many other diseases. Whole volumes have been written exclusively upon Syphoid fever for the purpose of making known some means by which it might be made to go the system. But little success has crowned those who have yet investigated and written extensively.
upon this fear. Still it seems that much of the history of this malady remains in obscurity. But notwithstanding we have remedies that will stay the progress of this most fatal malady if correctly administered.

Yet numbers are being consigned to an untimely grave because our country is overrun with quacks and unqualified practitioners; who administer medicine, and kill their patients, when if nature had been left free to act their patients would have survived.

Yet the young physician in the middle of the "Nineteenth-century" in some vicinities in Tennessee, who has
stored his mind with medical knowledge, and who would treat this disease scientifically must stand back, and give the field to the quack, and "boasting Thomp-sonian" who are not qualified to send their patients to Jorden in this disease.

Symptoms.
The patient is seized slowly with languor, and complains of general uneasiness, numbness of the limbs, depression of spirits, amazing depression, and loss of muscular strength, weariness, and soreness; respiration is commonly laborious, and interrupted with deep sighing. The temporal arteries often throb violently; pain in the head, and back; the tongue
if examined is found to be thicker, rounder, red at the tip, and edges, it is coated slightly with a thin whitish fur; the skin is heated, the face flushed, the pulse quicker, smaller, and harder, often fluttering and unequal; the appetite is impaired more or less. These symptoms will continue for 6 or 8 days gradually increasing often with a daily remission; during this period slight rigors alternates with hot sensations; though chilliness is sometimes not felt, in the beginning. The intellect is very obtuse, the patient converses reluctantly, moves slowly about his room is not ill enough to confine him-self to his bed, but too feeble to labor, and thus he passes from day to day till the disease
is completely formed. Chills and
fevers cease, the patient is confined to
his bed. The disease being fairly
formed, the patient has the pheno-
mena of fever, great general weakness, thirst,
no appetite, hot, and dry skin; though
not as much so as in other fevers;
frequent pulsadulness of expression;
Headache is seldom absent, and often
annoys the patient very much; pains
in the limbs, and back; soreness of the
muscles, hemorrhage from the nose or
bowels. The tongue becomes dry, and
brownish, is protruded with much
difficulty and is seen to tremble in
the effort. Diarrhea is very common in
the first week; soreness and pain is
felt in the right iliac region produced
by inflammation of the glands of Pyer.
Unfavourable Symptoms.

The nervous symptoms become more decided, sub-sustentendineum makes its appearance. Stupor supervenes.

Vehement becomes dull, and painfull. Partial or complete delirium, and then the patient will speak of the business, work, avocation, or occupation that he was following at the time of his attack. He will think himself away from home, and will request you to let him go home, and will often try to get up from his bed, will often involuntarily slip down in the bed. The eye if examined has a terrific appearance, and you cannot get the patient's attention.
The will often have from 3 to 15 new-cider discharges in 24 hours. A gurgling sound is heard in the flue region. A few red spots are sometimes discovered upon the abdomen and neck. He will mutter delusions half-formed sentences. He may have involuntary fecal evacuations, retention of urine. The pulse becomes very frequent and fluttering or feeble and slow. One or both of the parotid glands become very much tumefied near the close of life. Circulation becomes languid. Extremities get cold and clammy, and life's last flickering rays are consumed by the few leaden moments of time. While the patient in articulomortis often has convulsions.
Symptoms of a favourable termination. The pulse are not so frequent, they are fuller, and rounder; the skin is not so hot, and it will relax; the tongue is a little moist, and begins to clean itself slowly, at the tip and edges; the delirium, and stupor gradually abate, and things around him are more attractive; and he will manifest some interest for himself, and he has some desire for food. Should his tongue remain clean, and moist I would expect my patient to improve slowly. But should the tongue get dry, clammy, and coat again and again I should apprehend danger, and convalescence would be slow; he might have debilitating night sweats, and feeble appetite. Slight causes would
Disturb the bowels. Abscesses often break out near the parotid glands, and boils appear in other regions of the body. The duration of this disease is very uncertain. Symptoms which are almost sure and mononucleosis local. Symptoms generally come on from the third to the seventh day. Diarrhea comes before with or soon after the fever in most cases. Sub-suture Tendinitis is often prominent; the mind becomes wandering up and down. Making from sleep, and it will continue to get more profound. Until complete delirium supervenes, the patient will speak in a low voice, or mutter.

Anatomical lesions

The cause that produces this disease
affects the glands of Beyer so as to produce irritation, inflammation, and ulceration; sometimes perforation is the result. The heart is often found softened. Causes. I know nothing of the cause, I think it is poison that gets in to the circulation, and locates itself in Beyer's glands. It is thought by some to be contagious; and in proof of this they give cases of individuals bringing it into healthy neighborhoods, and spreading the complaint. But again it is found in isolated vicinities, and cases. The age most subject to this fatal malady every informed mind knows physician nor not. The young man who is in the bloom of youth is the subject of its choice. I have thought even a
Among young men it was partial, selecting the young man who was trying to store his mind with useful knowledge, and who was the most profound. Some constitutions are more predisposed to it than others, and all are more subject to it from the age of five to twenty-five than after that time. Exciting causes are mental disturbance, change of locality, hard, and fatiguing labor in the sun exposure to wet and cold.

Treatment.

Ventilation is very essential in the beginning, and throughout the disease. Change the patient's clothing often, and sponge the head and other parts frequently when hot. Give a mild cathartic in the
beginning of the sulphate of magnesia or castor oil. If there is pain, and diarrhea give 10 or 15 drops of laudanum at the same time. In mild cases do but little; far often in trying to assist nature in this disease with much medicine the patient is sent to the grave, when if nature, had been left free to act it would have thrown off the disease and affected a cure. Give the patient cold water, and ice in small quantities often if desired. If the bowels are running give laudanum, sugar of lead, and starch injections; if not contrary indicated by inflammation. Should the patient have much heat, and pain in the head
shave the scalp, and apply a blister to the nape of the neck.

Recipe.
Pure oil of Tarmetine 2.3
Novocaine, Gum Arabic 3/23
compound spirits lavender 2.3
Mix well, and give a teaspoonful hourly.

Recipe
Citric acid 10 drops
Aqua 2.3
Carbonate of potash 3/23
Dose teaspoonful hourly.

In ordinary cases of Dysphoid fever this treatment will do. But in obstinate cases certain local affections require special remedies. For pain in the abdomen, emollient
cataplasms, blisters, or must poultices, upon the abdomen day after day are very good. For sub-sultus, restlessness, wakefulness, or general uneasiness, give sweet spirits of nitre, or opiates may be used if not contraindicated.

If the tongue continues dry, and blackish, and the skin feels as though it had been parched, and the abdomen remains undiminished, I would increase the oil of turpentine in emulsion of gum arabic, or sugar; and if it disturbed the stomach or bowels, I would add a little laudanum. Pyphoid fever is a very
debilitating disease especially in its advanced stages; so much so that tonics and stimulants are very essential. Wine whey is the best stimulant. Should the strength become reduced very much I would give carbonate of ammonia, wine, or brandy. If the extremities were to get cold I would apply Cayenne pepper in hot brandy, or hot oil of Turpentine, and blisters to the inside of the thighs till they reddened the skin. In obstinate, and continued delirium shave the head, and apply a blister over the scalp. After the patient
passes the critical point, and begins to convalesce should he be attacked with exhausting night sweats, which is often the case in this fever. He will need tonics and the best is sulphate of quinine. Simple bitters, and mineral acids are very good.

Diet in convalescence.

It should be mild, and easily digested. At first rice water, weak gruel, toast, boiled butter milk, and nutmeg. If any irritability of the stomach should exist give a little lime water. After a few days give mutton soup, and rice.