

AN
INAUGURAL DISSERTATION

ON

Acute Dysentery

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Of the Physician.

"Man was created little lower than the Angels, in the likeness of his Creator; eminently qualified and suited to act a noble part, in the great drama, upon the grand theatre designed of high heaven for the display of human greatness and felicity. So our time honored profession as actors upon that grand theatre; as a means through a well directed providence, is entrusted the paramount, duty of staying the ravages of disease, and lessening the fearful train of suffering, pain misery and mortality, together with the lopes and crosses which go hand in hand with disease and death. Upon the ability and competency

of the Physician or Surgeon, to act in his sphere as such, in many diseases and operations, rest the life and destiny of his patient. The complicated & malignant forms of Dysentery which have during the last few years carried off hundreds and thousands of friends and relatives, from our midst to that home from whence no traveler returns. What more can we say to him, upon whom all eyes are directed, whilst languishing with the pangs of disease and death. In this dissertation we ~~only~~ purpose giving a statement of facts so far only as our limited experience will bear us out & testify. In C Tennessee the disease throughout the surrounding; and in my own vicinity, has presented almost every gradation, from a very slight affection, unattended by febrile symptoms and causing the patient, but little pain or uneasiness, up to one in severity, malignity and mortality, approaching Asiatic Cholera. The premonitory stage is generally attended with soreness, and aching of the bones,

a dull heavy headache, with general weariness, and lassitude, attended by dull and sometimes acute transient pains, in the bowels, and Diarrhea and sometimes anorexia. In other cases, the disease comes on without such premonitory symptoms. The patient being attacked first with rigors, acute and lancinating pain in the abdomen, head and back with great febrile excitement, and frequent painful and bloody stools and tenderness over the abdomen upon pressure; sometimes nausea and vomiting a hot and dry skin, pulse full, such are the different degrees of violence of the initiatory stage, we do not think that it is confined to the mucous membrane of the rectum and colon; but that it is often combined or associated with Enteritis, Duodenitis, and even Gastritis, and that the muscular and peritoneal coats, are also involved in the inflammation, and giving in addition to the above named symptoms Tympanitis. This seldom occurs

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We believe in severe febrile cases it often becomes complicated and combined with Gastritis Duodenitis enteritis, and forming a combined and associated affection; and presenting the most acute sufferings, attended with the most excruciating pain & soreness over the whole abdominal region, distressing nausea and obstinate and persistent vomiting, with severe tormina, and almost incessant action of the bowels, with high febrile excitement, really there is deranged functional action of every organ in the body, these severe paroxysms are not infrequently attended with cramps of the bowels and extremities. The discharge from the bowels are seldom of a fecal character most generally they are little else than a gray white or green, morbid mucous secretion thickly interspersed with blood, sometimes a dark thick bloody mucous somewhat

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similar in appearance to the scrapings of raw flesh; and in many patients blood has been discharged from the bowels in large quantities, even to such an amount as would be almost incredible to those who never witnessed such phenomena. The number of calls to stool, to evacuate the bowels is very different, whilst in mild cases the calls to stool are not very frequent, though generally accompanied with pain. In the more severe and malignant forms, the calls to stool are more frequent and urgent; often almost incessant accompanied with severe tormina attended with heavy burning tenesmus, and weight in the rectum. The tenesmus becomes a very distressing symptom; causing the patient to desire to be at stool continually without lessening his suffering; he sometimes will

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desire to remain at stool for hours at a time,
The discharges are composed of morbid
accumulations; and secretions of the
bowels and other viscera; these acrid dis-
charges we will neither term acid or Al-
kaline; but morbid; they are constantly
forming and accumulating, and thus
acid feces passing over the tender and inflamed
viscera cause constant stoniness, and burning
weight; the morbid fecal discharges are attended
with a peculiar disagreeable odour, sometimes
the bowels act involuntarily in low and ema-
ciated patients, attended by irrepressible bear-
ing down mising, and in some cases produces
prolapsus Ani; particularly with children.

In the greater portion of severe cases, they generally
complain of great inward heat, and great
thirst; and not unfrequently the irritation
extends to the urinary organs, which cause

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the patient, severe suffering, and very frequently it is attended with retention of urine, which has to be relieved with the catheter: in such cases the urine is generally high colored. In plethoric patients attended with high febrile excitement and inflammatory symptoms, the pulse is generally full and accelerated during the first stage. In others we find a hard quick corded pulse. In Anaemic patients where the disease is of a Typhoid character, the pulse is very much accelerated irregular weak, and threadlike. In simple cases unassociated with other disease the tongue is but little coated except far back, my vicinity being a miasmatic District, I have very frequently met with it combined with Intermittent or Remittent fever and other biliary derangements, then the tongue presents the phenomena peculiar to the associated affection. When associated with gastric and hepatic disease we not unfrequently find

a red, smooth tongue, or the tip and edges very red & raw whilst the central parts are coated with a yellowish fur. The great violence with which patients are often attacked, produces such a shock upon the whole economy, that the patient sinks powerless, in the stern grasp of his pale conqueror, and no human arm can stay its progress. We sometimes meet, with cases associated with congestion of the brain, in such cases the symptoms become malignant, and complicated; and the patient in ^{severe} cases will fall into a state of stupor, lethargy, Delirium and somnolence, and though often aroused from such a state by frequent calls to stool, they very soon fall into a like condition again, soon to be aroused in like manner. These symptoms are oftener associated with Bilious Dysentery than any other form, the tongue, skin & conjunctiva all present the yellowish bilious tinge, great febrile symptoms, and oppression of the epigastric region

and nausea and vomiting, the emesis is generally of a yellow greenish bilious appearance. This is a very malignant & dangerous form of the disease. There is, also another grade or form of which I will speak (though unacquainted with it) this form of the disease is, always associated with depressing sedative agents and causes; which acting upon the vitals of the system, such as an infected atmosphere; poisonous noxious effluvia arising from the filth of persons, that are crowded together in great numbers, as in Camps, Ships, besieged fortresses, prisons Cities, or any foul place where the atmosphere becomes infected with a deleterious effluvia or Idiomiasmatic infection a vitious poisonous emanation arising from the decomposition of filthy matter arising from human bodies, in filthy illventilated places; when the disease is produced from so powerful a seditive poison acting upon the whole vital economy, the

Blood undoubtedly must be seriously diseased, and
 under such unfavorable circumstances, we would expect
 the disease to appear in a very malignant form
 and no doubt but ~~if~~ under such circumstances it
 is often associated with Typhus fever, and if
 not combined with Typhus fever, we might
 truly term it grave Typhoid Dysentery.

Coleritis attacks indiscriminately persons of
 all ages, sexes, and colors, and though it may
 appear that some are more subject to attacks
 of it, no doubt but it is owing to be^{ing} more exposed
 to the pre disposing & exciting causes, We believe
 that it often occurs sporadically as the result of
 ordinary causes, but that it often occurs Epidem-
 ically we have no sort of doubt, for we have
 witnessed such epidemics during the last few
 years, The pre disposing cause of the disease
 must no doubt frequently be a peculiar epidemic
 influence, This combined with various exciting

causes acting on the system increase its susceptibility and thus the disease is generated by the conjoined influence of both the predisposing and exciting causes: Whilst it would have remained quiescent under the power and influence of either cause alone, neither cause being adequate of itself to develop the disease, whilst if both the epidemic and the exciting causes act at the same time conjointly they generate it, but at other times either cause alone is sufficiently powerful to excite it into action, all causes that are calculated to impair the physical energies, lessen the health or relax the tone and vigor of the various organs, or functions of the body; such as long continued and depressing heat which lessens and enfeebles the digestive powers, and augments the excitability of the mucous membrane of the alimentary

canal, deranges the hepatic functions, The sudden arrest of the various glandular secretions; by exposing the body to great exertions heat and perspiration during the day, then being exposed to cold, or to the damp night-air unprotected, Indigestible or irritating diets, fruits, and all like and similar causes,

It is sometimes contended that it is a contagious affection, the medical opinion is now almost unanimously decided against such opinion

It is certainly true that persons who are a great deal with, and waiting upon those who have it, will be more likely to take it than if they had not been amongst it; *Cauteris paribus*:

This we do not believe is owing to any contagiousness, but merely because they are exposed to a more powerful and concentrated predisposing influence; and also being exposed to incessant fatigue both night and day and the

loss of refreshing rest and sleep the health
 becomes enfeebled, and the energies of the
 system relax; all this conjointly are likely
 to produce the disease under consideration
 independently of contagion. We believe that
 the economy of the system is such that, no
 organ can be implicated in disease without
 exercising a powerful influence in bring-
 ing disease upon others; If one part
 becomes organically or functionally in fault,
 other organs which are dependent for their
 normal action, upon a like action or func-
 tion in the first, so disease in one organ
 gives to a second a contaminated secretion
 to act upon; which must have a deleterious
 effect, on their functions, and thus one organ of
 set of organs after another becomes, more;
 and more diseased, by acting upon, and in
 turn being acted upon, by a morbid stimulus,

and so will disease be received and transmitted ad infinitum until every organ in train be impeded by links inseparably and sympathetically throughout the whole organization of the wonderful mechanism of the human system; so a normal and healthy function of each part or set of organs is dependent on a like organization and action of every other part in the body. It is very rational to conclude that in protracted cases of this disease, there are great changes effected in the blood, but as to the peculiar nature of such change we have yet to learn; thus are kept in active play by a morbid sanguis supplying nutritious material to be inservient in repairing the emaciated system congenial to the laws ^{of} the economy of our nature

Treatments

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To treat acute Dysentery or flux successfully we must consider well the nature of the Pathology of the disease, and the remedial agents suited to the disease, we should have a clear, Idea of the affection we have to treat, and vary our prescriptions accordingly, so as to suit the various associated complications, and different stages; grades of violence, age, Sex anemic or plethoric condition of system; unless there is a correct diagnosis suited to each individual case, Stage, Sex, and the peculiarities of the patient. The combined affections carefully noted whatever they may be, with every prominent feature noted; and treatment suited accordingly we need not expect to be successful in practice. The present circumstances will not admit of my giving more than a synoptical sketch of the plan of treatment adopted. C¹¹

During the first stage, in plethoric patients
 with high febrile and inflammatory symptoms
 with full and accelerated pulse, I use the
 lancet: It is a powerful sedative and anti-
 phlogistic remedy, it lessens the quantity
 of fibrin in the blood, and reduces the inflam-
 matory symptoms, and lessens the tendency
 to congestion of the brain and also of the
 abdominal viscera, Cathartics should act
 very mildly on the bowels, Harsh drastic
 purgatives would probably aggravate the
 complaints, Where the Hepatic functions
 are involved, The Blue pill or Calomel and
 creta, will be indicated, during the last year
 in all other cases I have generally seen
 Calomel aggravate the disease; Its anti-phlo-
 gistic remedial virtues, seem to be more limited
 in inflammatory disease of the mucous membranes
 than in those of the serous, Oil of Ricini acts

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very kindly as a cathartic, and should be followed by large doses of Doveri and Elixir panegoric. Opiates hold the first and highest rank amongst the remedial agents for this disease. Their action seems peculiarly suited to the complaint. They relax and relieve the spasmodic contractions, diminish the morbid sensibility of the irritable bowels, facilitate the action of other remedial agents they also act as a diaphoretic, quiet and calm the nervous system, & determine the circulation to the surface. Opium, Specac and Creta, mixed in large doses, and given sufficiently often to keep the patient nauseated freely, given in this way we get a happy influence from so powerful a drug. The drinks should be Gum Arabic & Slippery elm waters, The effervescing draught and cold water. The diet should not be indigestible or salty stimulant

diets, they should be such as are easily digestible
 and nourishing to the patient. Local remedies
 large soft anodyne poultices to cover the whole
 surface of the abdomen. The frequent bathing
 of the same parts with Sp^{ts} turpentine, and
 in obstinate cases we generally derive advantage
 from large Blisters drawn over the same region
 so as to produce counter irritation. Small Blisters
 merely aggravate the patient & disease. frequent
 enemata of mucilage Sassafras & acetate of
 Lead, and in cases where the stomach will
 tolerate the acetate of lead & opium it is a very
 good mixture. The various vegetable Astringents
 are frequently employed with opiates, and
 with apparent advantage. In patients attended
 with low Typhoid symptoms in addition to the reme-
 dies proper, to relieve the bowels, it is necessary
 to keep up the strength by tonics and stimulents
 In such cases Spirits Turpentine and Balsam

Copaira in small doses generally act favorably.
 The spirit of Turpentine with Laudanum & Castor
 oil in large doses given in the primary stage
 frequently quiet all the symptoms. The prescrip-
 tion should be varied to suit each case and
 its complicated diversities. The apartment ^{person} of
 for the patient should ^{be} neat & clean and kept
 freely ventilated with pure air. great precau-
 tion should be used to prevent relapse during
 convalescence.

