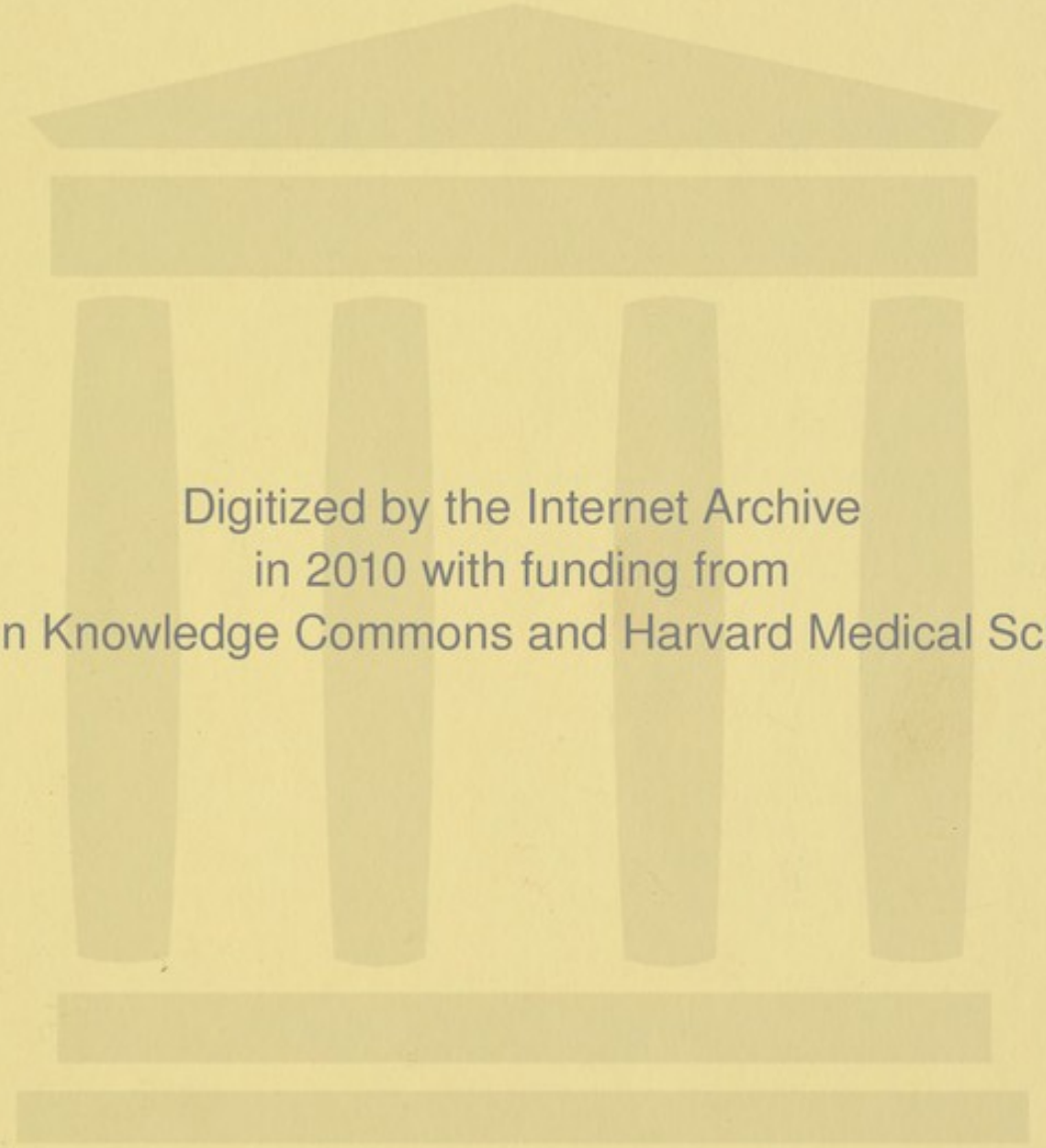
Cholera and its homoeopathic treatment : with an account of its success in Europe, and America, and remarks upon its symptoms, preventive means, early management, &c;, &c.; / by Daniel Holt.



CHOLERA,

AND ITS

HOMŒOPATHIC TREATMENT,

WITH AN ACCOUNT OF ITS SUCCESS IN EUROPE, AND AMERICA, AND REMARKS UPON ITS SYMPTOMS, PREVENTIVE MEANS,—EARLY MANAGEMENT, &c. &c.

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HOMŒOPATHIC TREATMENT OF CHOLERA.

WITHIN the last few weeks, the public journals, (especially from the Western States, where Cholera has been epidemic,) have contained many articles upon the Homœopathic treatment of this fearful and fatal disease, the general tenor of which is, that the success of this mode of treatment is far superior to any and every mode heretofore known to the profession, strengthening the confidence of those who have heretofore depended upon it in the hour of danger, and essentially changing the views of those who from ignorance of its principles, or of its success, have not reposed confidence in it. General newspaper statements though in the main correct, are not supposed to be sufficiently accurate to settle the opinions of the public. A closer practical observation is necessary on a subject of such vital importance to the community. Under these circumstances, by the solicitation of a large and highly respectable portion of our citizens, I have consented to throw out a few observations on the success of the Homœopathic mode of *prevention* and cure of Cholera, derived mostly from the numerous standard Homœopathic works of the most eminent medical men, and statistical tables of Hospital Reports in Europe, both in the present epidemic, and that of 1831–2. It is unnecessary at this day to inform the public that the

Homœopathic practice (technically so called) is entirely within the profession.

Nearly 100 members of the Massachusetts Medical Society, about 1200 medical men in this country, and from 4000 to 5000 in Europe, have investigated its principles, and adopted the practice. It is embraced and taught in many of the leading universities in Europe. Hospitals and Dispensaries have been opened on an extensive scale. There have been already published nearly twenty elaborate treatises on the Homœopathic treatment of this disease. Medical testimony is entirely in favor of this mode of treatment — there being rarely an exception to its adoption, where it has been thoroughly investigated; and many medical men who have not studied it critically, recommend it as successful. On the contrary, those who oppose it are certainly incapable of forming a correct practical judgment of its merits, but must necessarily prejudge the case, or form their opinion from statistics, or the testimony of others.

When Cholera appeared in Europe, in 1831, the Homœopathic mode of treatment was brought to the closest test, not only in the private practice of some of the most eminent medical men, but several Governments ordered the most accurate trials, in order to compare its success with the best treatment before known. The result was, that on the average but about 10 per cent. of cases proved fatal; whereas from 40 to 50 per cent. was about the ordinary fatality. The consequence was, that governments before hostile, now aided the new practice. The reigning sovereigns in many cases selected their private physicians, and the army was supplied with the new practice. About 30 Hospitals were opened, where the treatment is still pursued; and a late work on the subject mentions the names of 26 Professors in the Universities who now adhere to

it, as the most approved and suceessful practice. I have before me several authentic articles, where trial was made by different authorities, a few of which will suffice.

It appears, that in France, the proportion of deaths under the ordinary (Allopathic) treatment, was 49 per cent. Under the Homœopathic, 7 1-2 per cent. In Vienna, under Allopathic treatment, 31 per cent.; Homœopathic, 8 per cent. At Bordeaux, Allopathic 67 per cent., Homœopathic 17 per cent. An elaborate paper on the treatment of Cholera in Glasgow, during the last year, by Dr. Beilby, states that 1 in 9 died where the disease was fully developed. It is well known, that the general fatality where the Cholera has prevailed has been about 50 per cent. Allowance, however, should be made for many cases where there is *no* treatment, or what is worse than none. Under any judicious treatment, no doubt it will be much less fatal. From reports of the epidemic in this country thus far, it is probable the fatality will be comparatively small. These statistics, favorable as they are to the Homœopathic treatment of this disease, are, we believe, nearly what would be anticipated by those who have been accustomed to observe the result of the practice in the epidemics of the last two years, in New England, especially of Fevers, Dysentery, Scarlet Fever, &c.

GENERAL DIRECTIONS.

Although the advance of medical science may in a measure disarm the pestilence of its terrors, still much may be done by every individual for his own safety and that of the community. Cholera is one of those general epidemics which at times affect the community, but the laws of which are not entirely within our control. It is not generally believed to be strictly contagious, but when it prevails in a place there is a sort of epidemic influence

affecting the whole community. Hence the necessity of a general regulation of the diet and regimen. While there are numerous exciting causes which tend to develope the disease in any person who may be more susceptible to its influence, Cholera has in general a great affinity for filth of every kind, and I trust our authorities will use efficient means to purify the city; even should we fortunately escape this pestilence it will be well, as it is at this time the approach of the season of more than ordinary sickness.

PREVENTIVE MEANS.

1. It is generally true that Cholera has proved most prevalent and fatal in those places where the comforts of life are least regarded. Hence those who are destitute of these blessings should be specially cared for. Free ventilation and a pure air, especially in upper rooms, or sleeping rooms, should be used; a uniform temperature, avoiding damp weather, and the chills of evening, or too much exposure to night air. Very full and crowded assemblies should be avoided. Cleanliness of the house, and frequent bathing or sponging the body with cool or tepid water, is important; but too long exposure to cold, or a sudden change, is dangerous. The ordinary course of diet should be generally continued; plain food, known to agree with the individual. Meals should be regular, and nothing heavy eaten at night. A mixture of animal and vegetable food suits most. Indigestible substances, such as acids, pickles, raw vegetables, cabbage, cucumbers, sallads, all unripe fruits, nuts; also, shell fish, hard, smoked, or pickled meats, rich pastry, and preserves. Cold lemonade, ice creams, stimulating condiments, such as spices, ginger, and aromatics in general, are injurious. Well cooked meats, with ordinary vegetables, (especially the farinaceous,) are

the best articles of general diet. Strong tea and coffee are not so good as simpler drinks. Drinks should be used in moderation, and neither too cold or hot. Every thing known to disturb the action of the digestive organs, should be avoided. Those accustomed to much stimulus, such as wine or spirits, tobacco, &c. should *diminish* their quantity gradually, and avoid cold or ice water when the body is hot. Great changes in the system are dangerous. Ordinary exercise may be allowed, but avoid excessive fatigue; get good rest at night. Avoid taking cold; dress rather warm, especially at night, or on a sudden change of the atmosphere; keep dry, especially the feet; the head cool. Avoid excitement of a depressing character, especially mental, such as passions, grief, anxiety, envy; while hope, confidence, joy, and cheerfulness, act beneficially.

MEDICINAL SUBSTANCES.

Cathartic medicine, or any thing which tends to disturb the action of the stomach and bowels, should be avoided; also, all quack medicines designed especially for the *cure* of *Cholera*, or rather *made* to SELL, generally produce more Cholera than they cure. Every thing of the kind should be avoided.

SYMPTOMS.

First Stage. Cholera, like most diseases, varies much in different cases, both as to its severity and consequent danger. In most cases, especially those of a milder character, there is a train of premonitory symptoms, resembling bowel complaints, which should soon receive attention. This stage may continue from thirty minutes to hours, and even a few days. There is a general uneasiness, the patient feels exhausted; there is a sad, anxious expression of the countenance, an aversion to exercise, food and drink,

with a disagreeable sensation, pressure and tension of the stomach and bowels, sometimes accompanied with slight nausea, but without any real pain. The pulse is now nearly natural; the skin cool and dry, or moist in some parts; sometimes there is a pressure of the chest, and laborious breathing; the head is free from pain, but is dull, heavy, and sometimes attended with giddiness. The sleep is disturbed, restless, frequently interrupted by starting.

Second Stage. If the foregoing symptoms are not checked, in the course of a few hours — or where these are absent — commences the stage of DEVELOPEMENT, characterised by sudden vomiting, preceded by slight nausea, the stomach is soon emptied — whatever there is thrown up with a sudden, involuntary effort. Very soon it is followed by diarrhœa — at first partially liquid, accompanied with a commotion of the bowels, and in some cases with slight cholic pains, which are usually not very severe. The vomiting and diarrhœa are soon renewed, and the evacuations become more fluid, and soon quite watery. They are very frequent, and attended with excessive prostration. As the evacuations continue, they become watery and clear, are inodorous and albuminous, with a total suspension of the biliary secretion. These become painless, accompanied with a sinking sensation. There is much general restlessness; added to this there is a drawing sensation in the muscles of the extremities, soon amounting to spasms; the surface of the body becomes cold, the pulse small, the face and lips pale or of a bluish tinge, the breath becomes cold, and the patient passes into the

Third Stage, or as it is sometimes called, *collapse* — when the whole aspect is of a much graver character, the pulse becomes imperceptible, the surface and extremities cold, with a cold sweat. The whole body becomes flaccid, sunken, and assumes a shrivelled appearance; the voice

becomes feeble, hoarse, hollow, and without resonance; there is a great thirst, and a burning sensation at the pit of the stomach, a suspension of the urinary function, and in general the patient sinks in death. Most cases do not progress in this regular manner, but vary much according to the intensity of the disease and the constitution of the patient. In the earlier stage and milder form, the more favorable is the prognosis.

PROPHYLACTICS.

This is now a very important question in medicine — that is — whether a disease may be prevented, or modified in its action, by a remedial agent. Let us look at the subject. Vaccination, in most cases, either entirely prevents or greatly modifies small pox. The vaccine matter in this case exerts a modifying or protecting influence against a disease *similar* in its nature to itself, on the principle that two diseased actions of a similar nature cannot exist at the same time. Vaccination is a Homœopathic operation. Again, Aconite and Belladonna have gained much reputation in the prevention or modification of scarlet fever, and Pulsatilla in measles. These are important remedies in the diseases mentioned, and I have never known a patient die of either disease, where they were used. So, also, Veratrum and Cuprum are used in Cholera. In Vienna, lately, Dr. Marenzeller gave it to 50,000 people, with very satisfactory results; and during the epidemic of last year, in Riga, there was a general rush for the Veratrum, and few if any who took it died. On this point I hardly feel competent to advise the public. But, should Cholera become epidemic, I should administer to myself and family, the remedies, once in two or three days, during its continuance. I have done so when exposed to scarlet fever; and, as the trouble and expense would be very

trifling, I think it worthy of consideration. If there was no susceptibility to the disease, there would be none to the remedy; so we should be safe.

DOMESTIC TREATMENT OF CHOLERA.

In regard to the general means of prevention, the diet and regimen, and the nature and phenomena of the disease, there is no essential difference in the two schools of medicine; but as regards the medical treatment there is an essential difference. For the benefit of those of our citizens who depend upon the Homœopathic practice, it is thought proper to suggest some means to be used in the early stage, or before medical advice could be obtained. Avoid all random medicines and measures, to "*break up* the *disease*," lest they *break down the patient.* If attacked with the premonitory diarrhœa, there is no *immediate* danger; yet it should not be neglected. Rest and medical advice should be obtained. It is then easily controlled by three or four remedies, according to circumstances. If the first symptoms should be more grave, without diarrhœa or vomiting, but with languor, anxiety, sunken eyes, livid or pale countenance, coldness of the extremities and face, or dizziness and burning sensation in the stomach, weak or hoarse voice, *Camphor* is the remedy. The patient should take the bed, and be kept warm, with, if necessary, hot bricks or hot water to the feet, and two or three drops of the ordinary spirits of camphor given in water or on sugar, every five or ten minutes. If unable to swallow, a cloth wet with camphor should be applied to the nose for a time. Should this be followed by warmth and perspiration, and a diminution of the symptoms, it is favorable. If not, or if there should be vomiting, diarrhœa and spasms, Veratrum or some other remedy might be indicated. Medical

advice should not be delayed, in either case. Camphor should not be given in large quantities, as there is, when it is the proper remedy, a great susceptibility to it, compared to a state of health; and further, it would counteract the effects of other remedies which might be necessary to follow. External applications, such as mustard, vinegar, pepper, ginger, etc. should be carefully avoided, as they would destroy the effect of the appropriate remedy, and would avail but little upon the disease. Absence of heat and of strength is not the prime difficulty. It is a disturbance of the *vital powers* which must be corrected; then, by proper means being used, heat and strength will quickly return. The appropriate Hemœopathic dose will do more to restore the warmth and tone of the system than all the external and internal stimulating and irritating substances that can be used. I have seen spasmodic Cholera, (not epidemic) with all the characteristic symptoms—complete prostration, sinking, burning sickness of stomach, frequent vomiting and purging of a thin watery fluid, death-like expression, cold, deathly feeling of the hands, face and skin, pulse scarcely perceptible—which had continued for twelve hours increasing, and death was soon expected. This case had resisted to the utmost, frictions, heat, pepper, mustard, and hot water: the patient was relieved in thirty minutes, from the Homœopathic remedy; (Veratrum) the first dose stopped the vomiting in a few minutes, the pulse began to rise, warmth to return, and convalescence was speedy. The external and internal stimulants are like the application of great power and strength to aid a man bound hand and foot, to move, or to extricate himself—but great force is necessary, and *that fails.* The Homœopathic dose *cuts the cord,* and the man walks away.

The question may be asked, why we do not give more

medicine? Because we give enough. But, would it have any sensible effect if given on the ordinary principle, or to a person in health? Certainly not. But, when given Homœopathically, in a diseased state, there is great susceptibility to the medicine. The action of the medicine is spent in restoring, neutralising, or if you please, counteracting the disease, or the unnatural action of the vital powers; and is not expected, nor is it necessary, to bring the sound parts under the sensible influence of its action. It takes off, as it were, the *disease*, while it leaves the patient.

IN CONCLUSION,

I would say especially to those who depend on Homœopathic treatment, that should Cholera appear, I think our citizens will not have great cause for alarm. I am confident, from information the most reliable, the disease, as a general rule yields to means now before the public. Should we fortunately escape this disease, these suggestions may not be in vain.