

Nosologia methodica : series classium, et generum, et specierum, et varietatum morborum exhibens / auctore Joanne B. Davidge.

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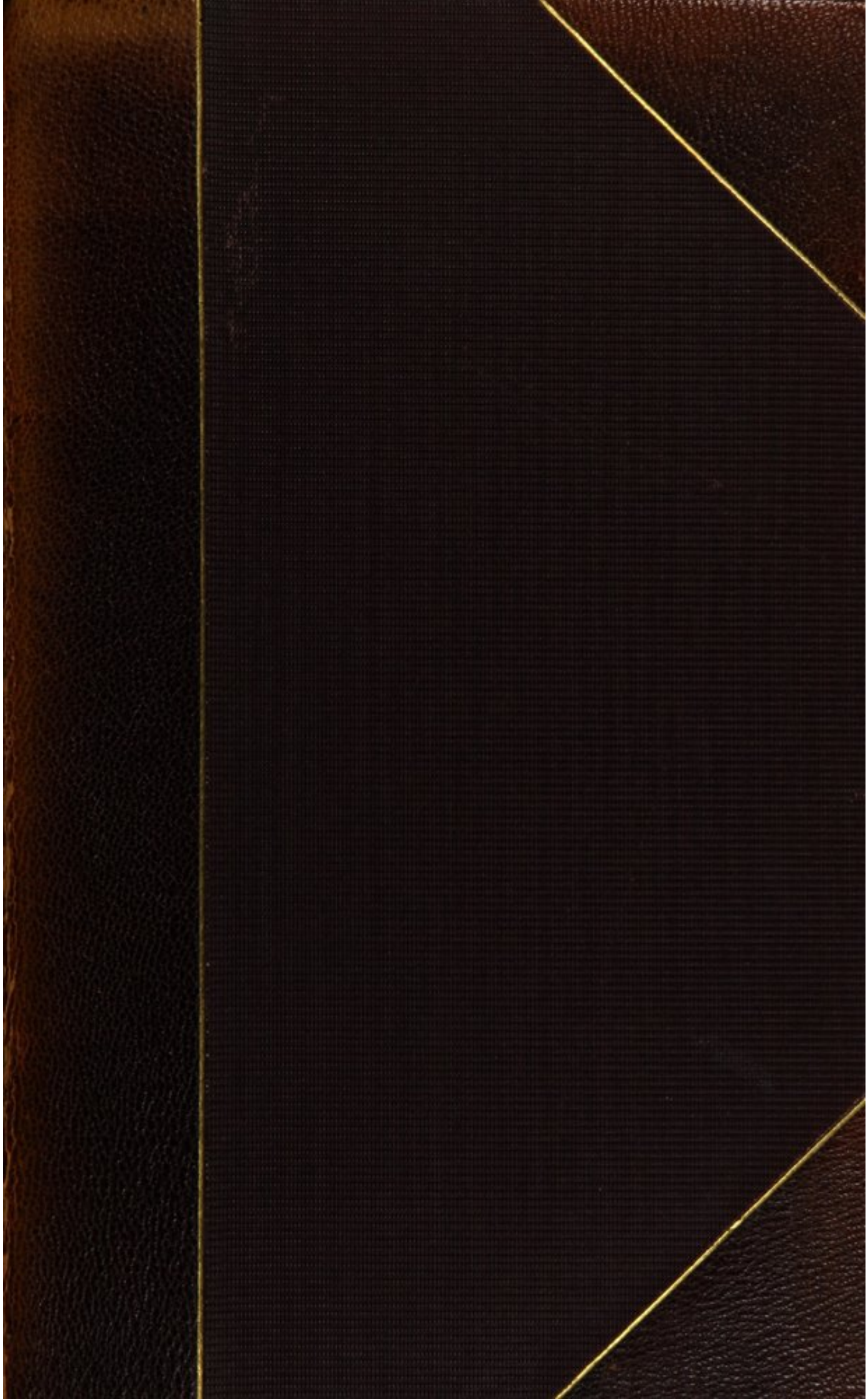
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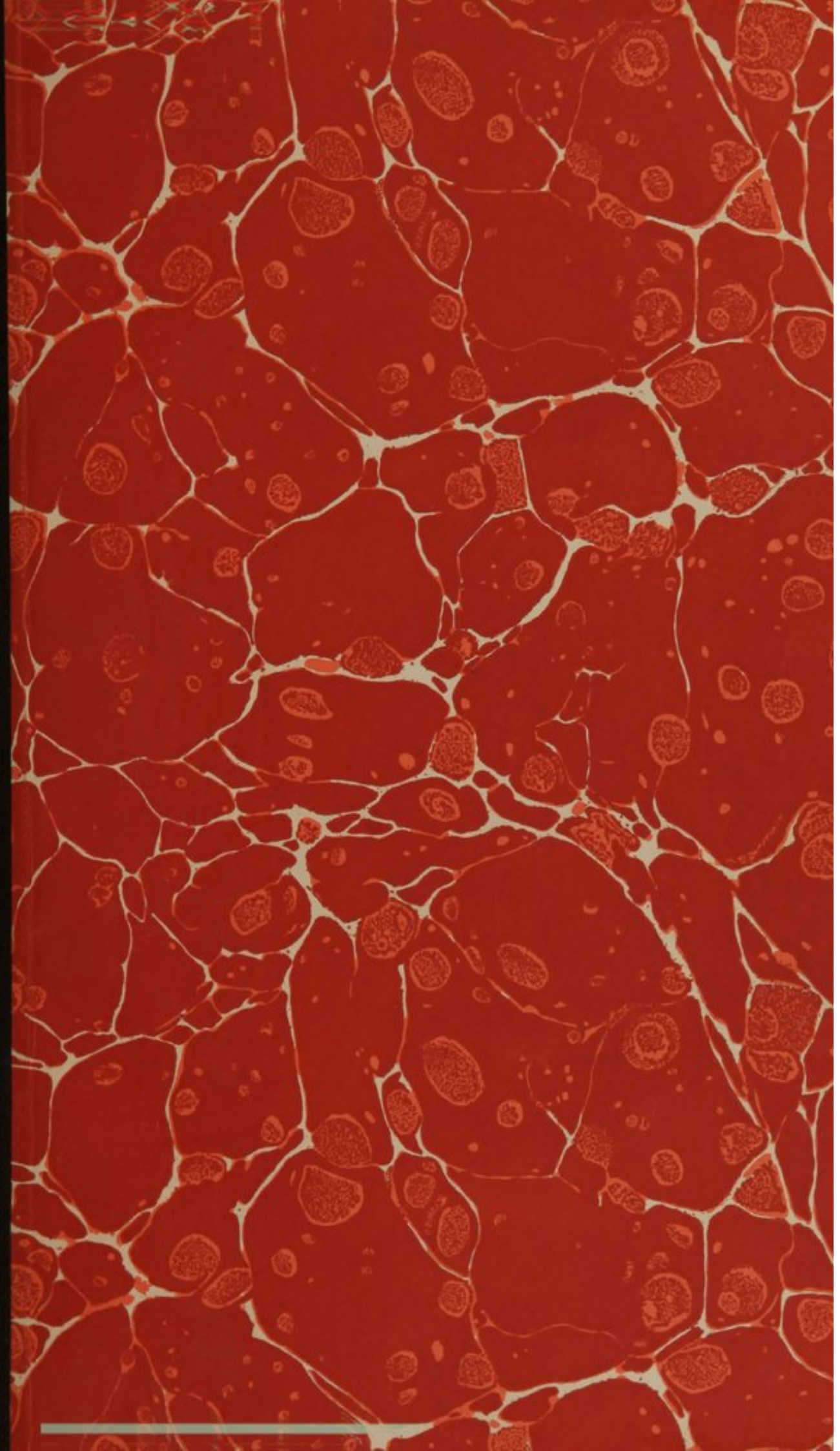
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NOSOLOGIA METHODICA:

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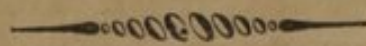
AUCTORE

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PROFESSORE INSTITUTORUM SEU PRINCIPIORUM
MEDICINÆ IN COLLEGIO TERRE MARIE.

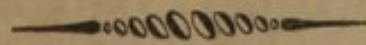
Surgeon General

8073



"Probe memores, sapientiam esse primam stultitia caruisse."

Gregorius.




Baltimorensi:

EXCUDITUR BENJAMIN EDES.

1812.

DISTRICT OF MARYLAND, ss.

 *BE it Remembered*, that on this tenth day of November, in the thirty-seventh year of the Independence of the United States of America, John B. Davidge of the said district hath deposited in this office, the title of a book, the right whereof he claims as author in the words and figures following, to wit:

“*Nosologia Methodica: series classium et generum, et specierum, et varietatum morborum exhibens. Auctore Joanne B. Davidge, A. M. M. D. professore institutorum seu principiorum medicinæ in collegio Terræ Mariæ.*”

“*Probe memores, sapientiam esse primam stultitia caruisse.*” *Gregorius.*

In conformity to the act of the Congress of the United States, entitled, “an act for the encouragement of learning, by securing the copies of maps, charts, and books to the authors and proprietors of such copies, during the times therein mentioned;” and also to the act entitled, “an act supplementary to the act entitled, “an act for the encouragement of learning, by securing the copies of maps, charts, and books, to the authors and proprietors of such copies during the times therein mentioned,” and extending the benefits thereof to the arts of designing, engraving, and etching historical and other prints.

PHILIP MOORE,
Clerk of the district of Maryland.

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PREFACE.

When about to give to the publick new principles of nosology, or old principles in a new form, it may be expected that we should give some reason for our undertaking; especially as the world is already in possession of the works of several celebrated nosologists. It may be presumed that, if they have not attained some degree of perfection, our efforts will be fruitless; and if they have met with success, our labours will be superfluous and nugatory.

It must be admitted in the science of physick, as well as in other sciences, that time and the labours of various and numerous intellects are not wholly in vain; and that year after year some little improvement may be made, so that we are kept in a state of, at least, slow progression. Not only so, but, it must be conceded, that the first views on most subjects are not so perfect, nor indeed can be expected to be, as those which may result from much, close, and particular observation and reflection, even upon the presumption that all other things are equally propitious.

Of the writings of the earlier authors, **Linnaeus**, **Vogel**, **Sagar**, and **Sauvage**, on nosological science, some are too unphilosophical to be understood, and others too imperfect to be useful. Of the nosology of **M·Bride** we have seen but a small portion, and that, we confess, has not raised our opinion of the talents

or learning of the writer. And even Cullen himself is unable to maintain his claims against the rigorous demands of critical analysis. We cannot perceive any advantages that possibly can result from his numerous orders and his sections: they are too artificial. And his genera are multiplied beyond all toleration; they are unnatural, unscientific, and derive no support whatever from any rational view of his subject. There is a prolixness in his general detail, and a complexedness and involution in the various parts that require an address and a dexterity of investigation totally inconsistent with the patience and capacity of ordinary minds. Hence many object to the Nosology of Dr. Cullen, because they do not comprehend it, and more because they have not patience to read through, or dexterity to unravel the intricacy of its parts. At best, Cullen is filled with serious errors, and in many places he is extremely unclassick.

But we should be careful not to consider the errors and mistakes of the *writers* on Nosology as imperfections in the *science*. If every system of science or morals is to be answerable for the follies of those who attempt to write on them, what would be the fate of the noble and sacred system of Christianity? The faults are not in the system, but in the commentators.

We shall avail ourselves of the opinions of Cullen, so far as they accord with our own views; in a particular manner shall we use his characters. Those are in the general unexceptionable.

We wish it to be distinctly understood that what we now offer has no higher claim than a Syllabus, intended chiefly for the use of the pupils of our own College, purporting at our leisure to give something

more in the form and character of a finished system. We do not say this in order to evade any discussion, honourable and fair, on the utility or principles of Nomenclature. Truth and the promotion of the medical science being our object, we are willing at any time to receive instruction on any point.

The difficulty to fix and preserve a definite idea, in a living vernacular tongue induces us to retain the Latin. Whenever it is wished to repeat a character in a language of daily use, if we cannot readily and with precision recollect the words we want, nothing is more customary than to use such as bear a near affinity, in meaning, to them. And thus, by adopting words between which and those we want there is but a slight perhaps scarcely perceptible, shade of difference, we gradually and insensibly depart from the original, and ultimately lose both the words and the ideas. Not only so, but we are persuaded that there is a greater facility in committing to memory and recovering to use, characters in a dead than in a living language.

Moreover, foreigners, not critically acquainted with the English language, may be at a loss to comprehend the exact limit and full extent of an idea in that tongue, but who would have no difficulty in attaching to it the proper sense and meaning, if conveyed in the Latin, with which they may have been early and intimately conversant. In America, a country peopled by individuals of almost all nations, it appears to be of the greatest importance that we do not wholly abandon a language taught in every civilized country, and read by every scholar.

Superadded to what we have advanced by way of apology for our present undertaking, we will subjoin,

that as teachers of medicine we are called on, in the most imperious and irresistible manner, to arrest, so far as it may fall in our way, the progress of an error, dangerous in the extreme. An opinion of late has been inculcated with indefatigable industry, that science and classical learning are by no means necessary constituents of a preparation to discharge the important duties of a Physician. In language the most unreserved, and sentiments the most unqualified, all attempts at general and nosological learning are discouraged, and ignorance, unaided by the first principles of science, is invited and solicited to come forward and try its awkward hand in bold experiment on human feeling and on human life.

A science, the most noble and useful, the most important and extensive, is committed to minds untutored and unenlightened; hands the most unadroit and inexperienced are called on to exercise an art the most intricate and dear to humanity! That science; that art; which, in other countries, and at other times, afforded employment to elevated intelligence and cautious experience, is now turned over to youth without prudence, and age without learning!

INTRODUCTION.

PATHOLOGY.

“**T**HE remote causes of diseases *all* unite in producing but *one* effect, that is, *irritation* and *morbid excitement*, and of course are *incapable* of division. The proximate cause of disease is an *unit*.” *Rush's Introductory Lecture*, p. 151.

All analytical disquisitions on the *modus operandi* of causes producing disease in the animal body, are illusory, and perhaps will continue to be unproductive of conviction or satisfaction, at least, until the principles of life shall be more fully ascertained. Causes probably act upon the living, the nervous system, not unlike external objects do, through the intermediation of the senses, on the intellectual powers. The latter by acting on our senses give *occasion* to perception, to thought, and lead on to induction or judgment; the former act on the living system, and give *occasion* to those primary changes, accompanied by disturbed sensation, or inordinate action in, or interruption of the function of an organ or organs, which we style disease.

This original or primary change in, or departure from the healthy condition of the body, must forever be in kind according to the nature of the operating cause; and

equally with the causes susceptible of division. Thus, that disease which we term small-pox; or that which we term intermitent fever; or that which we term lues venerea, is referrible for its peculiar phenomena, to the nature of the particular remote cause acting on the animal system. The virus of the small-pox will never, under any circumstance whatever, produce the phenomena of the lues venerea; nor vice versa.

That every disease is an *irritation*, or *morbid excitement*, is a position, so plain and so true, that it neither admits of refutation nor illustration. It is one of those self-evident propositions which defies argument, and is unsusceptible of proof; it is an obvious medical axiom. But that every *irritation* is the *same in kind*, and of course incapable of division, needs some proof; more we apprehend than has yet been laid before the publick.

The immediate and necessary consequences of the assumption of the learned Professor, that morbid excitement is simple and *incapable of division*, and that the proximate cause of disease is an *unit*, are that all the morbid appearances or pathological changes, which present themselves to our view, can be nothing more than varied forms or modifications of the same generick disease.

It would be equally defensible and logical, and by no means remote in analogy, to argue, that because the principle of animation or state of being enlivened, or the principle of vegetation or power of producing plants, is simple and incapable of division; therefore, all animal or vegetable productions, are nothing more than varied forms or modifications of one genus of animals or vegetables. If we are permitted to indulge in that species of abstract induction or metaphysical sophistry, we would

analogically arrive at the conclusions in zoology or botanology, that the professor would in pathology.

What zoologist would, upon the fact that the horse and cow are sustained in life by the same principle of animation, deductively arrive at the conclusion that these two animals are only varied forms or modifications of the same genus? And yet, upon the strictest analogy, he would only follow the rule of philosophising laid down by Dr. Rush; who states disease to be an *irritation* or *morbid excitement*, and immediately proceeds to the conclusion, that, of consequence, every disease must be the same, and all morbid affections necessarily incapable of division.

The zoologist, arguing from the difference of external figure and internal structure, determines the horse and cow to be of distinct genera or kinds. And, in our opinion, there is no exception to be taken to the ground of his reasoning, or to his conclusion. The botanist, proceeding on similar principles, has no difficulty in concluding the oak and the pine to be distinct in kind.— And we expect to prove that one disease may be, and really is, generically different from another, although the learned gentleman has, according to our opinion, rather boldly asserted, that the remote causes of diseases *all* unite in producing but *one* effect.

It is generally granted, and we believe there is no insecurity in the conclusion, that in the animal or vegetable kingdoms, each genus, which under no temperament of constitution, or operation of climate, can be produced by any other, is distinct and separate from every other genus. And with an equal parity of reason, *that* disease which, under no variety of constitution or dissimilitude of climate, can be produced by any other,

may, in common sense and sound philosophy, be determined to be distinct from all other diseases. This is so plain, that we apprehend it may stand as an axiom, against which there can be no reasonable objection, and on which we will put at issue our discussion.

The intermittent or remittent fever, varieties of disease from the same remote cause, and of the same genus may attack the human body at any period of life, and may be removed by the unaided efforts of the constitution, or by these efforts artificially aided; or they may, from their inherent violence, or the inability of the body to resist, prove fatal. This genus of disease can make its attacks once, or oftener through life; it leaves no taint in the parent body, transmissive either to near or remote offspring; it is derived, so far as ætiological researches afford evidence, from an insalubrious atmosphere, and is not contagious. We do not at present speak of the distinctive symptoms of this genus of disease; a consideration of them being postponed until we shall arrive at a more advanced stage of our discourse. We are now disposed to limit ourselves to the obvious facts of its operations on the human system.

The gout seldom attacks until the body has arrived at its acme or majority; does not appear to be owing, in its remote cause, to any insalubrious condition of the atmosphere, as it takes place under every variety of healthful and unhealthful modification of the air. Having once subdued the animal economy to its laws, no efforts of the constitution, or endeavours of art, can ever after, through life, relieve the body from its influence. Nor is its influence limited to the parent body; it descends to the child, and may continue to inqurate the body of the descendants for generations.

There are not, between the horse and cow, any circumstances which can more certainly mark them to be of separate genera, than there are between the remittent fever and the gout, to designate them as generically distinct diseases. But we proceed.

The small-pox, inscrutable in its origin, assails the human body at any, and every stage of life; runs its course in fifteen or twenty days; can be propagated by effluvia, from the diseased to the healthy; leaves no taint that can be transmitted from parent to child; nor does it but once attack the same body. Laying aside the particular sensible expressions of the gout and the small-pox, while operating on the constitution, they appear to our understanding, to be as specifically distinct from each other, as the sheep and the hog, or the oak and the pine.

From the insertion of the variolus virus into a body that has not antecedently passed under its action, whether the body at the time of the insertion be healthful, or labour under a remittent fever, or gout, a genuine legitimate small-pox will be produced, capable of reproducing itself. Or if the virus of the small-pox be inserted into a wound, made in a person under the measles, it will take effect locally, but will not evolve itself and come fully into operation throughout the whole system, until the action of the measles shall have spent itself; then will the small-pox virus unfold its nature and full character, *unmixed* and *unaltered* by any combination with the measles.

Here the germina of the measles and small-pox come as much as possible into union; yet the variolus virus obtained from a pustule in a person who had just undergone the morbillous action will produce the genuine small-pox.

If the ass-genus copulate on the horse, the production will be a mule, or hybrid animal, and unfertile. This obtains also with other animals; hence it appears, without any strained induction, that diseases, under certain circumstances, may be more *uniform* and *fixed* in their laws, and blend less their characters than some animals or vegetables.

The lues venerea attacks at any period of life; but unlike the small-pox and measles, and several other diseases, it does not run its course in a limited time, leaving the body unsusceptible of any future return. If it be not opposed by art, the patient's life will inevitably be lost, and that with an unerring uniformity.

Will gentlemen who have made up their minds in full accordance with all the consequences of the new philosophy of simplicity and unity, argue that there is no essential radical difference between the *irritation* of the gout, and the *morbid excitement* of the small-pox; between the *irritation* of the vaccine disease and the *morbid excitement* of the lues venerea? Will they insist that "their remote causes *all* unite in producing but *one* effect," or that the proximate cause of the gout, the small-pox, the vaccine, and the lues venerea is but an *unit* and the same?

This putative unity of disease reminds us very strongly of the ancient alchymy, which maintained that there is but one true metal; that all metallic bodies were only so many modifications of this one genuine metal; and that they were all reducible by chemical process to this one true metal, gold. The analogy between the present medical philosophy and that of the alchemists is not remote, and we apprehend, when the new doctrines of pathology shall be examined with a like degree of mi-

nuteness and care, as were the alchymical doctrines, they will share a similar fate. Their premises were, without doubt, as well laid, and their inductive reasoning as good, and equally plausible.

“ Pathology has for its objects, the remote, exciting, and proximate causes of diseases.” *Rush's Introductory Lecture*, p. 14.

Pathology has no more to do with the remote, exciting, or proximate cause, than the doctrine of plants has. Such a construction of the term is not to be justified either by etymology or general use. All enquiry into remote and exciting causes, falls altogether within the range of ætiology, and belongs to it alone.

Innovations in the technical language of science, particularly when such changes tend to corrupt the language, are followed, and that of necessity, by confusion of the most serious kind, not of words, but of ideas. It is equally necessary that the terms of a science should be defined, as that its principles should be fixed. Our *ideas* can only be made public, or communicated, by *words* or signs, and if these be loose and undefined, there is an end to all exchange of sentiment and reasoning.

Pathology is the philosophy of the manner in which one morbid change in the human body, succeeds to, and is produced by another. It treats of the manner in which causes affect the animal economy, but cannot extend to a disquisition on the nature or origin of causes. Pathology explains, for instance, how and from what series of causation, pain, increased heat, redness, tumefaction, arise in an inflamed part; and also the pulsation of the neighbouring arterial trunks. If we travel into the nature or origin of the causes, either remote or

exciting, we unquestionably forsake the limits of pathology, and get within the province of ætiology.

There are numerous instances of nations having been exempt from one or more particular diseases. The Greeks and Romans were, for centuries, free from the Small Pox. But no sooner was this disease incidentally introduced among them, than it spread with great rapidity, attended by inconceivable fatality, over their whole communities. If disease be an *unit*, in what way is this highly interesting fact to be explained? It will scarcely be contended, that, for centuries, no person, among the Greeks and Romans, was in that peculiar condition of habit, which was susceptible of the action of the Small Pox.

Among the many millions who lived in Greece and Rome; we have a right to suppose that there must have been every variety of constitution, and temperament. Yet it is a fact not to be controverted, that the Small Pox never did appear in those countries until ages after they had been peopled. But no sooner was this disease introduced, from without than thousands of the inhabitants fell victims to its ravages.

Now if Small Pox be nothing but a *form*, or *grade* of disease, how did it happen that not a solitary instance of it occurred either among the Greeks or Romans? And by what peculiar means was it that both nations were suddenly and extensively attacked by it? It is not to be imagined that there was an instantaneous revolution in the physical constitutions of the people of each nation. And yet without this stretch of imagination the medical unitarian is reduced to some difficulty.

Upon the ground that disease is an unit, we are to suppose one of two things. Either there was no constitution of that peculiar complexion, and character, which was obnoxious to the operation of the Small Pox; or there was a sudden revolution in the physical habits of the people. To suppose the former, were to proceed farther on the begged question than any rational philosopher would be disposed to go: and to admit the latter, would be to suppose a point merely because it was absurd, and in the face of all evidence. We believe that no mind, except placed without the limits of all reason, can be prepared for the admission of either of these propositions. Yet it is only on the admission of one or the other, that the unity of disease can be defended.

The arguments immediately deducible from the above fact, most unanswerably establish the plurality of disease, and defy all the subtle ingenuity of the most plausible sophistry.

The fact admits of but one solution. The seminia, or remote cause of the Small Pox, are, and must be, in their nature, distinct from the seminia of every disease which prevailed among the Greeks or Romans, and of consequence, the Small Pox could not have origin among these people until introduced from without, by means of its seminia brought among them.

What has been advanced concerning Small Pox, may be advocated respecting Measles, Chicken Pox, &c.

Again, if a farmer were asked, upon his sowing wheat in any district of country, or variety of soil

whatever, whether from the wheat sown he would not reap a crop of oats, he would not be a little surprised. He might conceive the question to embrace no small degree of mental imbecility, as regarded the person who propounded it, or of gross insult as it respected himself. And would undoubtedly answer that the result could not be a thing of contingency or accident; that his own personal observation—the experience of his neighbours—and the history of the grain, since it was known, all bear him out in the opinion that, from wheat, no grain but wheat could grow, let the climate or soil be what it may.

Upon analogous principles were it propounded to a philosopher of the new school, whether from the virus of a rabid animal, inserted into a wound made in a healthy person, the **Hydrophobia** would *certainly* and *unerringly* be produced, he would answer that the result must be a thing of casualty or accident. The *laws* of disease in his estimation not being *fixed*, it would depend upon a concurrence of circumstances. “It might be a **Mumps**, a **Small Pox**, a **Yellow Fever**, or even regular **Mania**, according to *time*, to *climate* and a *great variety of circumstances*.”

But were the same proposed to a Nosologist, a man of the old school, of reason and science, he, like the farmer, taking the experience and unbiassed observation of ages for his guide, and steadily confiding in the *fixed, immutable laws* of disease, would find no difficulty in solving the question. He would say, that as neither *time*, nor *climate*, nor *any variety of circumstances*, has as yet made any essential alteration in the laws of the **Hydrophobia**, as respects its

operation on animal bodies, it amounts to a certainty, or that kind of probability, which rational men are not permitted to doubt, that an affection, correspondent in nature and phenomena to the **Hydrophobia**, could alone be propagated from the virus of a rabid animal.

But some gentlemen, of high intellect too, have persuaded themselves, “*that all remote causes unite in producing but one effect, that is irritation or morbid excitement, and that the proximate cause of all diseases is an unit.*” In other words that the excitement of the **Hydrophobia**, and the excitement of the **Vaccine Disease** are the same in kind, and that their proximate causes are an unit. Or, in plainer English, that the **Hydrophobia** is only a modification of the **Vaccine Disease**!

It has been urged with some warmth, and, indeed, with no little degree of confidence, that the febrile state of disease is, at least, simple, and indivisible. And so plausible is the manner, in which this fascinating idea has been introduced to the publick consideration, that, even men of science and intelligence, on the first view, admitted it.

We believe it may be laid down as a fact, that the **Measles**, **Chicken Pox**, **Mumps**, **Hooping Cough**, &c. can be propagated during their state of fever. This, perhaps, will not be contradicted. If it should be, we shall ask for a defence of the ground upon which it is questioned.

For the present then, we assume that the fact is so, and we shall proceed to give our ideas of the manner in which it takes place. The only intermediate body,

by which a healthy person can be affected by a patient labouring under the febrile state of one of the above diseases, is the effluvia issuing from the lungs and general superficies of the person diseased. The effluvia eliminated, must, in their nature, depend on the peculiarity of action of the vessels whence they issue; and this peculiarity of vascular action can be ascribable to nothing less than to the cause which produces and keeps up the peculiar excitement. Hence it incontestably follows, that if the Hooping cough be generically distinct from the Chicken Pox, or the Mumps from the Measles, the effluvia producing them respectively must also be generically distinct; and if the effluvia causing those diseases be in their nature different, the peculiarities of action in the vessels producing them must in like manner be different. Thus, if we be correct in our premises, and we perceive no fault, our conclusion, that the febrile state in the Chicken Pox is generically distinct from that of the Hooping-cough; and so of the Mumps and Measles, we conceive to be unexceptionable. For the fever in each disease is this peculiarity of action in the arteries, superinduced and supported by the peculiarity of the original, remote cause acting on the living system. If the arteries, large as well as small, can be said to be the throne and seat of any disease or form of disease, assuredly they may be said to be the throne and seat of fever.

In answer to what we have advanced, it may be said that the effluvia, although in themselves dependent on the action of the capillary arteries of the surface, may only serve as a vehicle to any poison that

shall be mixed with the blood, and shall escape through the arteries as through exhaling tubes, and as a vehicle may convey this poison to surrounding bodies.

Until it can be fully established and demonstrated that the poison of the Small Pox, or Measles is received into the blood, is mixed with it, and escapes through the arteries of the surface, as through strainers unaltered, we shall hold ourselves at liberty to question such hypothesis. If the poison of the Hydrophobia, Small Pox, or Chicken Pox be mixed with the blood, would not the blood of a person labouring under one or either of those diseases produce infection applied under certain circumstances? We have no unequivocal evidence even in the Venereal Disease that the blood will communicate the infection. The humoral pathology will do but little credit to the science that undertakes the defence of its pretensions. As to ourselves, we have no exalted opinion of the justness of its claims.

NOSOLOGY.

“Nosology presupposes the characters of diseases to be as fixed as the characters of animals and plants; but this is far from being the case. Animals and plants are exactly the same in all their properties, that they were six thousand years ago; but who can say the same thing of any one disease? They are *all* changed by time, and still more by climate, and a great variety of accidental circumstances.” *Rush.*

Nosology has for its object the nature and pathognomonic symptoms of disease. It is simply the science of pathognomonics, or that series of diagnostic symptoms, which is inseparable from, and uniformly indicative of a disease, and by which that disease is to be known from every other. And we are prepared to *say*, and entertain hopes of sustaining our assertion, that the pathognomonic symptoms in diseases, are as unequivocal and fixed, as the distinctive characters in animals or plants; and further, that no generic disease, in any of its distinctive diagnostic properties, has ever, by time, by climate, or any other accidental circumstances, been changed.

The better to avoid misapprehension, unfairness, or illusion, we take our characters from Cullen's Nosology; yet we are not to be understood as taking upon ourselves the defence of all his opinions and peculiarities.

The diagnostic series of symptoms of the intermittent fever, or that by which it is distinguished, is

“Febres, miasmata paludum ortæ, paroxysmis pluribus, apyrexia, saltem remissione evidente interposita, cum exacerbatione notabili, et plerumque cum horrore redeuntibus, constantes: paroxysmo quovis die unico tantum.” *Cullen.*

PNEUMONIA.

“Pyrexia, dolor in quadam thoracis parte; respiratio difficilis; tussis.” *Cullen.*

PODAGRA.

“ Morbus hereditarius, oriens sine causa externa evidente, sed præeunte plerumque ventriculi affectione insolita; pyrexia; dolor ad articulum, et plerumque pedis pollicis, certe pedum et manuum juncturis, potissimum infestus; per intervalla revertens, et sæpe cum ventriculi, vel aliarum internarum partium, affectionibus alternans.” *Cullen.*

VARIOLA.

“ Synocha contagiosa cum vomitu, et, ex epigastrio presso dolore. Tertio die incipit, et quinto finitur eruptio papularum, phlegmonodearum, quæ, spatio octo dierum, in suppurationem, et in crustas demum abeunt, sæpe cicatrices depressas, sive foveolas in cute relinquentes.” *Cullen.*

Now permit us to appeal to professional men of reading, of observation, of candour, to determine whether there be in any written authority, ancient or modern, or in their own personal experience, any series of facts, from which they could inductively conclude, that the above diseases, or either of them, have been radically or fundamentally changed; that any diagnostic has been added to, or taken from those diseases by *time* or by *climate*, or by *accidental circumstances*.

We do not mean that all persons shall have all the symptoms with uniform precision. It would as rationally be expected that the horns and colour of every cow would afford an uniform sameness.

But it may be suggested, that, not unfrequently, inflammation and the intermittent unite in the same habit at the same time. Of this interesting fact we are not unapprized. But by what means do we ascertain this union? Is it not by the nosological characters alone that the practitioner regulates his measures? by the nosological signs that he recognizes the very existence of the thing? He does not surely know it by intuition. No inflammation can arise in any part of the body without showing the nosological characters proper to it, viz. redness, increase of heat, tumefaction, and pain. And if it be in any of the important organs, it is discoverable by the appropriate signs of an inflammation of that organ, and by these signs only.

But with all the heterogeneousness of character, and blending of symptoms in disease, nosology can never be under greater difficulties, or in greater uncertainties, than zoology and botanology in their mules and hybrids.

Upon no other ground could Sydenham bottom the opinion that the history given by the Arabians of the small-pox was superior to any other, or that it was at all correct, than on the exact correspondence between that disease as described by the Arabians, and as it appeared under his own observation in London. If "*time, and still more climate,*" could effect changes in this disease, it should have suffered some alteration in the long tract of ages which have elapsed since the days of Rhazes and Avicenna; seeing it has not been kept to one region only, but has been diffused through all nations and spread over all countries.

Has *time*, too, laid its hand on the lues venerea; or has *climate* written on it those changes to which, according to Dr. Rush, all diseases must pay homage?

The vaccine disease is, at this moment, rapidly diffusing itself through every region of the civilized world; and, as far as we are authorised to form our conclusions, retains all its distinctive characters when in its genuine state.

Professor Rush, we find, does not limit his pen to one or two diseases, if indeed one or two could be found to give him countenance; but he unhesitatingly avers, that "they are *all* changed by time, and still more by climate, and a great variety of accidental circumstances."

Of this general and sweeping proposition we should have a much more respectable opinion, were it corroborated by any specification of facts; or had any one generic disease been pointed out which had been obviously and acknowledgedly changed by either of the circumstances referred to. In short, upon what expectations or hopes is it that a Professor teaches medicine, if an inflammation, an apoplexy, a yellow fever, or vaccine disease, be not marked the following, by the same symptoms it was the preceding year; or if it be not recognized under the same form in North as in South America? What is taught in Philadelphia cannot be true in either the eastern or western extremity of our country, if there be this constant flux and reflux in the nosological characters of disease.

If the yellow fever does not appear under the same general form as is described by Rush himself; or the the apoplexy, or measles, or pleurisy, as described by

Cullen, in every part of the world where the disease itself appears, we should be gratified in knowing by what badges it may be discovered, or how recognised. We do insist, that if diseases be so mutable in their diagnostics, medicine cannot be a science; it is a mere art, and a very crude one too, of conjecture. Nothing short of long experience and an examination into the seats of diseases, can either ascertain the morbid conditions of the body, or the signs of these conditions, by which alone they can be judged of. Every new disease must be accompanied by new and unknown symptoms, and of consequence the physician's learning can be of no possible service. Nay, the experience of every year becomes useless, as with the new year flows in a new tide of diseases, and he has to commence anew.

“ But the morbid state of the system often assumes in the course of a few days *all* the symptoms of a dozen different genera of diseases. Thus a malignant fever frequently invades every part of the body, and is at once or in succession an epitome of the *whole* class of pyrexiaë in Dr. Cullen's Synopsis.” *Rush's Introductory Lecture.*

The whole of this paragraph is written with that seriousness and gravity which is well calculated to secure the easy confidence of the careless reader; and he would feel himself persuaded that it is at least probable, if not exactly true. But the whole is altogether erroneous, and indefensible throughout. Has the morbid state of the system ever been such as to assume the symptoms of the chicken-pox, measles, and small-pox, much less a dozen different genera in the

course of a few days? What malignant fever is it, that is at once, or in succession, an epitome of the whole class of Dr. Cullen's Pyrexiaë? Is it the yellow fever, or plague, that is at once or in succession, an intermittent, a pleurisy, a chicken pox, a measles, a hooping-cough? &c.

We thought it had been conceded, long since, by common observation, and common sense, that no two general diseases of the class of Pyrexiaë could be present in the body at the same moment. Indeed, we had admitted the belief that it would be equally rational to maintain that two atoms of matter could occupy the same space at the same instant, or that the human mind could contemplate the past and the future simultaneously, as that any two of those general diseases alluded to could co-exist. Or is it meant that the symptoms of a dozen different genera of diseases could be present, and yet the diseases themselves not be in operation?

But we are informed also, that "a malignant fever frequently pervades every part of the body." Fever, every fever we suppose, is a convulsive action of the arterial system; every part therefore, provided with arteries, and no living part can be without them, must be affected, or if the writer pleases, pervaded not only by every malignant but by every other fever. A pen of far inferior note might have been employed in promulgating this well known fact without being entitled to much credit.

"Nosology has led physicians to prescribe exclusively for the names of diseases, without a due regard to

the condition of the system." *Rush's Introductory Lecture*, p. 153.

There must be some misconception in the circumstances of this objection. That physicians could have been led by nosology to prescribe exclusively for the names of diseases, without a due regard to the state of the system, is what we do not believe. It is too absurd. There are but two grounds upon which a physician can prescribe for a patient. The one is, he receives a report either directly or indirectly from the patient, purporting that he labours under some specific disease, a pleurisy, a small-pox, a syphilis, and on that report he prescribes.

In this case, it cannot ingenuously be said, that he prescribes either exclusively or at all for the name of the disease. He most assuredly prescribes for the *condition* of the system of which the name is significant, supposing the reporter has considered the symptoms, and inferred the condition, to which he has given a specific name.

The other, is that where the physician takes the distinctive characters immediately from the patient himself, and arguing from effects to causes, concludes synthetically on the condition of the system, to which he may give an appropriate epithet, and prescribe accordingly. In neither of those instances can it be surmised, that the physician prescribes exclusively for the name of the disease, or that he has any regard to it.

In the first case he prescribes imprudently and at random, because he permits an unqualified person to judge for him. The name, in both cases, is a mere

incidental thing, and added solely on account of the facility of communicating the fact, as it relates to the morbid state of the body. The reporter, whether the sufferer himself, or a friend, when he communicates the name of the disease, intends to convey also the condition of the system; when he gives the sign, he also communicates the thing signified.

“Nosology unnecessarily multiplies the articles of the materia medica, by employing as many medicines as there are *forms* of diseases.” *Rush's Introductory Lecture*, p. 153.

In this charge is conveyed a reproach against nosology for instructing physicians to prescribe for the *forms* of diseases, and that nosology thereby unnecessarily multiplied the articles of the materia medica.

The patient himself has no knowledge of being diseased, but through his feelings, and those feelings he communicates to the physician. What are the feelings communicated to the physician, but assemblages of distinctive sensible symptoms, or *forms* of diseases? And if the physician is not to prescribe from a consideration of those assemblages of symptoms, or *forms* of diseases, arguing from them the nature of the disease, we should be gratified in being informed upon what rational ground he is to prescribe at all. We believe but few physicians affect to ascertain intuitively the conditions of the systems of their patients. To prescribe for a disease from a due consideration of its *forms*, or distinctive marks, we conceive to be one of the soundest lessons of nosology, and one of the wisest dictates of an enlightened medical education. But how does this multiply necessarily or unnecessarily, the articles of the materia medica?

The science of disease is a grand whole, and like every other science, is made up of parts. The first act of nosology, is to separate these parts, and arrange them into order and system, according to their approximations in character. From this we gain important advantages; our minds are not distracted or overwhelmed by a confused multitude of heterogeneous, incoherent, mutually repulsive materials. But we have the advantage of entering on each part separately, and, when the intricacies and contexture of the first shall have been examined, we engage in a second, under the same auspicious circumstances. Thus are the facilities to apprehension and memory, exceedingly multiplied and increased. It is by piling one examined fact upon another, that the fine edifice of a complete professional education is to be raised.

By this particularity of knowledge, we acquire a dexterity and skill in tracing out morbid conditions from pathognomonic signs, not only more readily, but much more certainly than we could, were we to attempt the whole in chaotic mass. To attempt the whole, without order or rule, is like a learner wasting his time, and exhausting his powers, in efforts to read, before he has acquired his alphabet, or mastered the elementary constituents of language: or indeed, like a sailor, cast out to sea, without compass or quadrant; he may possibly get into harbour, but more probably his ship will be wrecked.

The following objection to nosology, stands first in Professor Rush's list, but we have postponed it to the last, in order that it may make the better impression on the reader's mind; it being in our estimation,

the most singular specimen of logic that has ever come under our notice.

“ It (nosology) precludes all the advantages which are to be derived from attacking diseases, in their *forming state*, at which time they are *devoid* of their *nosological characters*, and are most easily and certainly prevented or cured. *Rush's Introductory Lecture*, p. 153.

That a disease can exist in its “ *forming state*,” or any of its stages, without the nosological characters appropriate to that stage, we can as readily conceive, but not more so, as that matter can exist without properties of extension, figure, or divisibility; or that mind can be present in the body, without its attributes of perception, thought, or memory, and that we can have knowledge of the existence of matter, or of mind, thus circumstanced.

If there be no *nosological characters*, or diagnostic symptoms, during this state of diseases; that is, no disturbed sensations of which the patient is conscious or sensible or which are palpable to the senses of the physician, by what means does the physician know that there is a forming state of diseases? It appears from the express words of the professor, that the physician is not only to know diseases to be forming, but is also to prevent or cure them. The physician is successfully to interfere with the forming state of diseases, when there is no character, no evidence, no symptom of disease! For the Professor says, “*they are devoid of their nosological characters in their forming state!*”

CORRIGENDA.

- Page 36 line 13 for *Practitis* read *Proctitis*.
— 56 line 3 for *ubique* read *ibique*.
— 56 line 22 for *partum* read *pastum*.
— 68 line 20 for *Arcites* read *Ascites*.

SERIES
CLASSIUM MORBORUM.

CLASSIS I. Pyrexiaë.

CLASSIS II. Neurosis.

CLASSIS III. Cachexiaë.

CLASSIS IV. Vitia.

A SERIES
OF
CLASSES OF DISEASES.

CLASS I. Feverous Diseases.

CLASS II. Nervous Diseases.

CLASS III. Diseases of Depraved Habit.

CLASS IV. Organick Diseases.

CLASSIS I. PYREXIAE.

Character. Prægressis languore, lassitudine, et aliis debilitatis signis; vel horrore; pulsus frequens, calor major; cutis arida; lingua sordida; plures functiones læsæ; viribus præsertim artuum imminutis.

GENUS I. FEBRIS REMITTENS.

Febris, miasmate paludum orta, paroxysmis pluribus, intermissione, saltem remissione evidente interposita, cum exacerbatione notabili, et plerumque cum horrore redeuntibus, constans: paroxysmo quovis die unico tantum.*

* There is not, in our conception, any disease, strictly and in fact intermittent. For although the Quotidian, Tertian, or Quartan, in their obvious and sensible signs may intermit, yet, so long as they continue to recur at fixed periods, they must operate by established and determinate laws, and should, so far as relates to the diseases in their essential properties, be considered as unbroken and continuous.

The powers of the body are subjected to the dominion of the disease, which, according to the relation between its force and the resistance of the body, will be remittent or intermittent, or irregular and mixed.

We are not to argue from an interruption of the palpable symptoms of a disease that it is broken and discontinuous. An illustration of this remark we have afforded by the gout and epilepsy. No person can be said to be free of the gout or epilepsy so long as the paroxysms, proper to the one or the

CL. I. FEVEROUS DISEASES.

Character. Languidness, lassitude, and other signs of debility, or a cold fit, having preceded; the pulse becomes frequent; the temperature is increased; skin dry; tongue foul; many of the functions are impaired; in an especial manner the power of the limbs is diminished.

REMITTENT FEVER.

Fever arising from marsh effluvia, and continued by repeated paroxysms, returning with intermission, at least evident remission, interposed between each preceding and following paroxysm; remarkable exacerbation, and generally with a palpable sense of coldness; one paroxysm or exacerbation each day.

other, continue to return periodically; or so long as the person labouring under either of them can transmit to his offspring any taint or seeds of the disease.

That the periodical recurrences of the paroxysms in the gout, the epilepsy, or intermittent, depend on any diurnal, hebdomidal, or monthly revolution in the human body, we cannot be induced to believe; we speak of revolutions natural and proper to the body. If such periodical recurrences were referrible to the natural revolutions of the human system, it would inevitably follow, as those paroxysms are essential parts of the disease, that the laws themselves of the animal economy are morbid. For whatever depends on the revolutions of the body must come within the laws of its economy, and if morbid paroxysms arise out of the revolutions, the laws themselves must of necessity be morbid; which were an incongruity too gross to be tolerated.

Sp. I. REMITTENS BILIOSA VULGARIS.

Febris, cum exacerbationibus notabilibus, et plerumque cum horrore redeuntibus, constans; remissione quovis die evidente interposita; et aliquando cum flavidine cutis, et secretionem aucta bilis.

Sp. II. FEBRIS FLAVA.

Febris epidemica et autumnalis, cum exacerbationibus, plerumque cum horrore redeuntibus, constans; remissione quovis die evidente interposita; aliquando cum flavidine cutis; anxietate maxima; nausea; vomituque nigricante; hæmorrhagiis; et, in paucis exemplis, petechiis, seu carbunculis.

Sp. III. QUOTIDIANA.

Paroxysmi similes intervallo viginti quatuor circiter horarum: intermissione interposita; paroxysmis matutinis.

The recurrence of the paroxysms in all diseases must, in our estimation, result from the laws peculiar to each disease, modified more or less by the susceptibility of the body to be acted on, or in other words, its capability to resist.

From what has been said above, we are justified in the conclusion, that the apparent and ostensible differences between what is termed remittent and intermittent, are merely contingent and casual; that the vast varieties of morbid affections produced by marsh effluvia, or exhalations from putrid vegetables or water, are in kind the same; and, finally, that this generick disease may properly be styled remittent.

Sp. I. COMMON BILIOUS REMITTENT.

Fever continued by obvious exacerbations, and returning generally with a sense of coldness; a remission each day, and sometimes with yellowness of skin, and an increased biliary secretion.

YELLOW FEVER.

Fever epidemick, occurring for the most part in the autumn, continued by exacerbations, which generally recur with a sense of coldness; an obvious remission each day; sometimes with yellowness of the skin; great restlessness; sickness at stomach, and blackish vomit; hæmorrhages; and, in a few cases, spots like flea-bites, or gangrenous sores, similar to what take place in the plague.

QUOTIDIAN.

A fever with correspondent paroxysms returning at the interval of twenty-four hours; an evident intermission interposed; the fits in the morning.

V. Quotidiana legitima, eadem hora matutina rediens.

Quotidiana legitima, indiciis alienis stipata.

Mort. ————— cephalalgica.

Sauv. ————— anginosa.

Sauv. ————— catarrhalis.

Boarh. ————— asthmatica.

Sauv. ————— peripneumonica.

Greg. ————— gastrica.

Macb. ————— hepatica.

Etmull. ————— splenetica.

Mort. ————— nephralgica.

Sauv. ————— ischiadica.

Sauv. ————— stranguosa.

Mort. ————— hysterica.

Sauv. ————— epileptica.

Sauv. ————— arthritica.

Sauv. ————— miliaris.

Sauv. ————— syphilitica.

Etmull. ————— scorbutica.

Pring. ————— verminosa.

Sag. • ————— tetanoides.

Cul. ————— efflorescentia cutis stipata.

Sauv. ————— hemiplegica.

Mort. ————— dysenteria.

Sauv. ————— syncopalis.

Barth. ————— epidemica.

Rev. ————— maligna pestilens.

Macb. ————— biliosa.

V. Regular quotidian, returning at the same hour.

- *attended by symptoms not proper to it.*
- *with an affection of the head.*
- *with an inflammatory affection of the throat.*
- *with catarrh.*
- *with asthmatick affection.*
- *with inflammation of the lungs.*
- *with inflammation of the stomach.*
- *with inflammation of the liver.*
- *with an affection of the spleen.*
- *with an affection of the kidney.*
- *with the sciatick or rheumatism of the hip.*
- *with an affection of the bladder.*
- *with an affection of the womb.*
- *conjoined with epilepsy.*
- *in a gouty habit.*
- *with a miliary eruption on the skin.*
- *combined with syphilis.*
- *in a scorbutick habit.*
- *accompanied by worms.*
- *attended by tetanick symptoms.*
- *with efflorescence in the skin.*
- *attended by hemiplegy.*
- *attended by dysenterick symptoms.*
- *attended by syncope or faintness.*
- *general or epidemick.*
- *malignant and accompanied by symptoms unusually severe.*
- *with yellowness of skin and eyes and an unusual secretion of bile.*

Sp. III. TERTIANA.

Paroxysmi similes, intervallo quadraginta octo horarum; intermissione interposita; accessionibus meridianis.

V. Tertianæ vera

Cleg. ——— duplex.

Cleg. ——— duplicata.

Cleg. ——— triplex.

Cleg. semitertiana

Cleg. tertiana indiciis alienis stipata. Vide quotid.

Sp. IV. QUARTANA.

Paroxysmi similes intervallo septuaginta duarum circiter horarum; intermissione interposita; accessionibus pomeridianis.

V. Quartana legitima.

Sauv. ——— duplicata.

Sauv. ——— triplicata.

Sauv. ——— duplex.

Sauv. ——— triplex.

ERRATICÆ

Sauv. Erratica quintana.

Sauv. ——— septana.

TERTIAN.

Fever with correspondent paroxysms returning at the interval of forty eight hours; an evident intermission; the paroxysms at mid day.

V. as above

- *when the paroxysms return daily, but are unequal.*
- *when the paroxysms recur every second day, two being on the same day.*
- *when the paroxysms recur every day with two on every second day.*
- *with the paroxysms between the odd and even greater than between the even and odd.*
- *attended by symptoms not proper to it. V. Quo.*

QUARTAN.

Fever with similar paroxysms returning at the interval of seventy-two hours; evident intermission interposed: the paroxysms in the afternoon.

V. as above

- *with two paroxysms on every fourth day; none on the intermediate.*
- *three paroxysms on every fourth day; none on the intermediate.*
- *of the four days the third only is free of fever paroxysms every day; but similar on the fourth only.*

IRREGULAR.

- *recurring on the fifth day.*
- *recurring on the seventh day.*

Sauv. ————— *octana.*

Sauv. ————— *nonana.*

Sauv. ————— *decimana.*

Etmull. ————— *vaga.*

————— *quartana indicibus alienis stipata.*

Vide Quotid.

G. II. SYNOCHA.

Calor plurimum auctus; pulsus frequens, validus, et durus; cutis arida; lingua sordida et subalbida; urina rubra; sensorii functiones parum turbatae.

V. Synocha vera.

————— *efflorescentia cutis stipata.*

————— *vesiculosa; vel pemphigus.*

G. III. TYPHUS.

Morbus contagiosus; calor parum auctus; pulsus parvus, debilis, plerumque frequens; lingua sordida et subfusca; urina parum mutata; sensorii functiones plurimum turbatae; vires multum imminutae; aliquando cum eruptionibus.

Sp. TYPHUS SIMPLEX.

Typhus, vel febris lenta et nervosa, sine eruptionibus.

Sp. II. FEBRIS PETECHIALIS.

Typhus, vel febris lenta et nervosa, cum petechiis.

Sp. III. PESTIS.

Typhus, vel febris pestilens, cum eruptionibus bubonum et anthracum.

- *recurring on the eighth day.*
- *recurring on the ninth day.*
- *recurring on the tenth day.*
- *recurring on no fixed day.*
- *attended by incidental symptoms. Vide Quotidian.*

INFLAMMATORY FEVER.

Temperature very much increased; pulse frequent; strong, and hard; skin dry; tongue foul, and whitish; urine high coloured; functions of the common sensory but little disturbed.

As above.

- *attended by an efflorescence of the skin.*
- *attended by numerous broad, flat vesicles.*

CONTAGIOUS FEVER.

Disease contagious; temperature but little increased; pulse small, weak, and generally frequent; tongue foul and brownish; urine but little changed; the functions of the brain very much disturbed; the powers of the body much reduced; sometimes with eruption.

SIMPLE CONTAGIOUS FEVER.

Typhus, or slow, nervous fever, without eruption.

SPOTTED FEVER.

Typhus, or slow, nervous fever, with spots on the skin like flea-bites.

PLAGUE.

Typhus, or pestilential fever, with an eruption of buboes and carbuncles.

G. IV.

PHLEGMASIA.

et febre
Febris synocha; inflammatio; dolor ad locum spec-
 tans; simul læsa partis internæ vel externæ functione;
 sanguis missus et jam concretus, superficiem coriace-
 am albam ostendens.

*The characters of Synocha
 and Phlegmasia should have been con-
 densed into, and have constituted one
 generic disease under the title Synocha*

WSD

SYNOCHA,

With local inflammation.

Fever; local pain and inflammation; the function of some internal or external part being injured; blood when drawn and coagulated exhibiting a surface whitish and sizy.*

* Phlegmasia is simple and incapable of generick division. What shades soever of difference it may exhibit, when seated in different organs, must be considered as incidental and attributable to the peculiarity or connexions of the organ affected. Hence we are induced to disapprove of the divisions of phrenitis, and gastritis, into various genera by the justly celebrated Cullen. And also of the separation into external and internal generick inflammation, by the learned Dr. M'Bride.

The errors of such writers as Cullen and M'Bride, Sauvage, Voegeus, and Linnæus, have led medical men, who do not find it convenient to distinguish between the real mistakes of the writer, and the supposed imperfections of the science, to reject Nosology altogether, as a thing unuseful and wholly factitious—the mere creature of the imagination.

We have placed the phlegmon or bile with all its modifications, as species and varieties of phlegmasia, from a conviction, that the local inflammation in a genuine phlegmasia is in its nature and phenomena in no respect different from a simple inflammation. And that any simple inflammation may, and daily does, become a phlegmasia merely by an aggravation of its circumstances. We cannot agree with Dr. Wilson and others in dividing phlegmasia and simple inflammation into distinct orders or genera.

Sp. PHLEGMONA.

Tumor circumscriptus; rubor vividus, cum dolore, et calore aucto; sensu sæpe pulsatili.

V. Gutta rosacea. Tuberculum quasi confluens, cum superficie rubicunda aspera maculosaque.

Hordoleum. Phlegmona palpebræ.

Mastodynia. Phlegmona mammæ.

Paronychia. Inflammatio dolorifica in summitate digitorum.

Ambustio. Inflammatio ab corporibus ex igne candentibus, vel liquoribus ferventibus.

Pernio. Inflammatio a frigore.

Anthrax. Phyma apice gangrænosum, et in base inflammatum.

Phimosis. Tumor inflammatus præputii glandem incarcerans.

Paraphymosis. Præputium retro glandem adductum ita inflammatum uti eam tegere non possit.

Hernia humoralis. Inflammatio testium ex gonorrhœa orta.

Bubo. Tumor phlegmonoideus in glandulis inguinalibus.

Parotis. Tumor phlegmonoideus parotidæ glandulæ.

Sequelæ. APOSTEMA.

Post inflammationem, remittentibus dolore et pulsatione; tumor albescens, mollis, fluctuans, pruriens; cum centro fere sphacelato.

Sp. **PHLEGMON.**

Tumour circumscribed, of vivid redness, accompanied by pain, and increased heat; generally with augmented pulsation *in the neighbouring arterial trunks.*

V. *A pimple, in a degree confluent, with a surface red, rough, and spotted.*

Phlegmon of the eye-lid.

Phlegmon of one or both of the breasts.

Phlegmon of the finger; a whitlow.

Inflammation from the application of heated bodies.

Inflammation from diminished temperature.

Inflammation, gangrenous at its apex, and of a lively red colour at its base.

Inflammation of the prepuce, preventing it from being drawn back.

Inflammation of the prepuce, strangling the nut of the penis by the tightness of its stricture.

Inflammation of the testes arising from gonorrhœa.

Inflammation of one or more glands of the groin.

Inflammation of the parotid gland.

Consequences. **ABSCCESS.**

The process of inflammation being terminated, and the pain and pulsation relaxed, the tumor becomes whitish, and fluctuating, having, in the general, a core, or sphacelated centre.

Sp. VI. ERYSIPELAS.

Synocha; erythema cum colore rubicundo, pressu, evanescente, aliquam corporis partem, sæpe faciei, occupante, ambitu inæquali serpente; et tumore vix evidente, in cuticulæ vesiculas vel phlyctænas fere abeunte; dolore urente.

Sp. VII. VIBEX.

Febricula; lineæ coccineæ, quales e flagellis relinquuntur quam plurimum prurientes, et exurentes, frigore applicato, evanescentes.

GANGRÆNA.

Post inflammationem, pars livens, mollis, parum sensibilis, sæpe cum vesiculis ichorosis.

SPHACELUS.

Post gangrænam, pars nigricans, flaccida, facile lacerabilis sine sensu et calore, et cum foetore carnis putridæ; vitio serpente.

Sp. II. PHRENITIS.

Synocha vehemens; dolor capitis; rubor faciei et oculorum, lucis et soni intolerantia; pervigilium; delirium.

SAINT ANTHONY'S FIRE.

Inflammatory fever; local inflammation with great heat and redness; redness disappearing on pressure; unequal in its circumference; disposed to spread; tumour scarcely evident; generally terminating in vesicles, accompanied by burning pain.

THE WHELK.

Body feverish; crimson lines, wheals or welks, consimilar to those left by the whip severely applied to the skin; insufferably itchy and burning; quickly retreating, on the approach to low temperature.

GANGRENE.

The process of inflammation being ended; the part becomes livid, soft, low in its sensibility; not unfrequently ichorous vesicles appear.

MORTIFICATION.

After the gangrene, the part becomes blackish, flaccid, easy to be divided, without sensation or heat; emits the fetidness of putrid flesh; the disease spreads.

INFLAMMATION OF THE BRAIN.

Violent inflammatory fever; pain of the head; redness of the face and eyes; impatience of light and sound; watchfulness; incoherence of ideas.

Sp. III. OPHTHALMITIS.

Synocha; rubor et dolor oculi; lucis intolerantia; plerumque cum lacrymatione.

V. Ophthalmia membranarum.

Ophthalmia syphilitica vel ex gonorrhœa.

Sp. IV. OTITIS.

Synocha; tumor et dolor et rubor auris; soni intolerantia.

Sp. V. ODONTITIS VEL ODONTALGIA.

Synocha mitior; dolor maxillarum ex inflammatione vel carie dentium.

Sp. VIII. CATARRHUS.

Synocha mitior; dolor faciei; gravior; sternutatio; raucitas; muci ex glandulis membranæ narium et cellularum faciei et faucium, excretio aucta, saltem hujus excretionis molimina; tussis.

V. Catarrhus a frigore.

Catarrhus epidemicus.

Sp. IX. CYNANCHE.

Synocha; rubor et dolor faucium; deglutitio, et aliquando respiratio difficilis, cum angustiae in faucibus sensu.

INFLAMMATION OF THE EYE.

Inflammatory fever; redness and pain of the eye; impatience of light; generally an exuberant flow of tears.

Inflammation of the coats of the eye.

Inflammation of the eye from syphilitick virus or the matter of gonorrhœa.

INFLAMMATION OF THE EAR.

Inflammatory fever; swelling, pain, and redness of the ear; impatience of sound.

**INFLAMMATION ABOUT THE TOOTH,
OR TOOTHACH.**

Light inflammatory fever; pain of the face or tooth from inflammation or rottenness of tooth.

CATARRH, OR COLD.

Light inflammatory fever; pain of the face; weight over the eyes; sneezing; hoarseness; an increased discharge of mucus from the glands of the membrane of the nostrils, cells of the face, and upper part of the throat; at least efforts to discharge it; cough.

Catarrh from cold.

Epidemick Catarrh, or Influenza.

QUINSY.

Inflammatory fever; redness and pain of the throat; deglutition difficult; breathing sometimes impeded, with a sense of confinement.

V. Cynanche tonsillaris. Inflammatio membranam faucium mucosam, et præcipue tonsillas tumore et dolore afficiens; febris inflammatoria; deglutitio difficilis.

Cynanche trachealis. Inflammatio membranam laringis et glottidis mucosam dolore afficiens; cum respiratione difficili; inspiratione strepente, voce rauca, tussi clangosa, tumore fere nullo in faucibus apparente, deglutitione parum difficili; febre inflammatoria; pulsu aliquando parvo, plerumque duro et compresso.

Cynanche pharyngia. Inflammatio in imis faucibus; deglutitio maxime difficilis, dolentissima; respiratio satis commoda; febris inflammatoria.

Sp. VIII. PNEUMONIA.

Synocha; dolor in quadam thoracis parte; respiratio difficilis; tussis.

V. Pleuritis. Pneumonia pulsu duro; dolore plerumque lateris pungente sub inspiratione præsertim aucto; decubitu in latus molesto; tussi dolentissima, initio sicca, postea humida.

Peripneumonia. Pulsu non semper duro, aliquando molli; dolore thoracis obtuso; respiratione perpetuo difficili, sæpe non nisi trunco corporis erecto exercenda; facie tumida et coloris purpurei; tussi plerumque humida, sæpe cruenta.

Quinsy. Inflammation of the mucous membrane of the fauces and tonsils, with swelling, and pain; inflammatory fever; deglutition difficult.

Croup. Inflammation of the mucous membrane of the windpipe, and glottis, with pain; respiration difficult, and rattling; voice hoarse; cough clangous; generally no apparent tumour in the throat; deglutition but little affected; fever inflammatory; pulse sometimes small, in the general hard and concentrated.

Quinsy. Inflammation of the back part of the fauces, and gullet; deglutition very difficult and painful; respiration free; fever inflammatory.

THORACICK INFLAMMATION.

Fever inflammatory; pain in some part of the breast; respiration difficult; cough.

Pleurisy. Thoracick inflammation with hard pulse; acute pain of the side; increased particularly on respiration, or lying on the side; cough very painful; at first dry, afterwards successful in throwing up phlegm.

Peripneumony. Pulse not always hard, sometimes soft; pain of the breast obtuse, breathing always difficult, often not to be effected except in an erect posture; cheeks somewhat swollen, and of a purplish colour; cough generally humid, often bloody.

Sequelæ.

VOMICA.

Post pneumoniam resolutione quadam non terminatam; dyspnoea et tussis perstantes, cum decubitu in latus sanum difficili et febre hectica. (a)

EMPHYEMA.

Post pneumoniam suppuratione terminatam, sæpe post vomicam remissio doloris, dum perstant dyspnoea, tussis, decubitus difficilis, et febris hectica, sæpe cum sensu liquoris in pectore fluctuantis, et signis hydrothoracis. (b)

Sp. XII.

PERITONITIS.

Synocha; dolor abdominis, corpore erecto, vel pressura, acutus.

Consequences. **ABSCESS.**

The thoracick inflammation not being terminated by resolution; the difficulty of breathing and cough continue, attended by an inconvenience in lying on the healthy side, and with hectick fever. (*a*)

COLLECTION OF PURULENT MATTER.

The thoracick inflammation having terminated by suppuration; the pain remits; while the difficulty of breathing, cough, inconvenience in lying on the side, and hectick fever continue, with a sense of fluctuation in the thorax, and symptoms of dropsy of the breast. (*b*)

(*a*) A hectick fever is one that returns every day with mid-day, sometimes evening, exacerbations, morning remissions, seldom intermissions, and generally is accompanied by night-sweats; the urine deposits a branny, or brick-dust like sediment. It is always symptomatick or secondary, and never idiopathick or original; hence we do not give it a place among regular fevers. In the general, it is the consequence of organick disease; dropsy, or great weakness and irritability of body.

(*b*) A Vomica is strictly an abscess of the lungs; an Empyema, from phlegmonick inflammation, a collection of purulent matter in the thoracick cavity, between the pleura costalis and pleura pulmonalis.

Sp. IX. GASTRITIS.

Synocha; anxietas; in epigastrio ardor et dolor; ingestis quibuslibet auctus; vomendi cupiditas, et ingesta protinus rejecta; singultus sæpe; pulsus parvus sed durus.

V. Gastritis phlegmonodea. Dolore pressura aucto; synocha vehementi.

Gastritis erythematica. Dolore et synocha lenioribus; rubore erysipelatoso in faucibus apparente; lingua subrubra.

Sp. X. CARDITIS.

Synocha; dolor in regione cordis; anxietas; aliquando palpitatio.

Sp. XI. ENTERITIS.

Synocha; dolor abdominis pungens, pressura, plurimum auctus; circa umbilicum torquens; sæpe vomitus, et aliquando alvus astricta.

V. Enteritis phlegmonodea. Dolore acuto, et synocha vehementi; et alvo astricta.

V. Enteritis erythematica. Dolore, et synocha, lenioribus, cum diarrhœa.

Sp. XII. PERITONITIS.

Synocha; dolor abdominis, corpore erecto, vel pressura, auctus.

INFLAMMATION OF THE STOMACH.

Inflammatory fever; restlessness; burning and pain at the pit of the stomach, increased upon any thing being swallowed; disposition to vomit; a rejection of whatever may be taken into the stomach; often hic-cough; pulse small, but hard.

Phlegmonick inflammation. Acute pain, increased on pressure; violent fever.

Erythematick inflammation. Pain and fever light; an erysipelalous inflammation appearing in the fauces; tongue reddish.

INFLAMMATION OF THE HEART.

Fever inflammatory; pain in the region of the heart; restlessness; sometimes palpitation.

INFLAMMATION OF THE BOWELS.

Fever inflammatory; acute pain of the abdomen, very much increased on pressure; a sense of twisting about the navel; often vomiting; sometimes costiveness.

Phlegmonick inflammation of the intestines. Acute pain; high fever; bound bowels.

Erythematick inflammation. Pain and fever light; diarrhœa.

INFLAMMATION OF THE INVESTING MEMBRANE OF THE BELLY.

Fever inflammatory; pain of the belly increased on the erection of the body, or pressure,

V. Peritonitis propria. In peritonæo strictius dicto, sive in peritonæo abdomen intus succingente.

Peritonitis omentalis. In peritonæo per omentum extenso.

Peritonitis mesenterica. In peritonæo per mesenterium extenso.

Sp. XIII. HEPATITIS.

Synocha; hypochondrii dextri tensio, et dolor sæpe pungens pleuriticus instar, sæpius obtusus; dolor ad claviculam et summum humeri dextri; decubitus in latus sinistrum difficilis; dyspnœa; tussis sicca.

V. Hepatitis acuta. Signis in caractere dictis dignoscenda.

Hepatitis vetusta. Dignoscenda, sensu quodam plenitudinis et gravitatis in hypochondrio dextro; doloribus plus minusve pungentibus in eadem parte subinde perceptis; dolore quodam, pressura, in hypochondrio dextro, vel decubitu in latus sinistrum, percepto; febre leviori seu hectica, cum indicis dictis subinde infestante; plerumque nausea.

Sp. XIV. SPLENITIS.

Synocha; hypochondrii sinistri tensio, et dolor pressu auctus; sæpe tumor.

Inflammation. In the peritonæum strictly so called, or the membrane which lines the muscles of the belly.

Omental inflammation. Inflammation of the caul.

Mesenterick inflammation. Inflammation of the mesentery.

INFLAMMATION OF THE LIVER.

Fever inflammatory; tension of the right hypochondrium; pain, frequently acute, and consimilar to that of pleurisy, and extending up to the shoulder-blade and top of the shoulder; difficult reclining on the left side; shortness of breathing; dry cough.

Acute hepatick inflammation. Recognized by the symptoms above related.

Chronick hepatick inflammation. Some sense of fullness and weight in the right hypochondrium; more or less pain in the same part, discovered on lying down, or on pressure; light fever, rather in the form of hectic now and then with the symptoms more immediately indicative of acute hepatick inflammation; nausea.

INFLAMMATION OF THE SPLEEN.

Inflammatory fever; tension of the left side, and pain increased on pressure; often with obvious swelling.

Sp. XV. **NEPHRITIS.**

Synocha; dolor in regione renis, sæpe ureteris iter sequens; mingendi frequens cupiditas; vomitus, aliquando cum stupore vel titillatione cruris; testiculi ejusdem lateris retractio aut dolor.

Sp. XVI. **CYSTITIS.**

Synocha; hypogastrii tumor et dolor, pressu, auctus; urinam reddendi cupiditas frequens et dolorifica, vel ischuria; tenesmus.

Sp. XVII. **HYSTERITIS.**

Synocha; hypogastrii tensio, et dolor; os uteri tactu dolens.

Sp. XVIII. **PRACTITIS.**

Synocha; tumor et dolor et inflammatio podicis.

Sp. XIX. **RHEUMATISMUS.**

Morbus ab mutatione cœli evidente ortus; synocha; dolor circa articulos, musculorum tractum sequens, genua et reliquos majores potius quam pedum vel manuum articulos, infestans.

INFLAMMATION OF THE KIDNEY.

Inflammatory fever; pain in the region of the kidneys, often along the course of the ureter; frequent desire to pass urine; vomition; sometimes with stupor, or a sense of something creeping along the thigh and leg; a retraction or pain of the testicle of the same side.

**INFLAMMATION OF THE URINARY
BLADDER.**

Fever inflammatory; tumour and pain, increased on pressure, of the region of the bladder; frequent and painful desire of passing urine, or ischury; fruitless effort to empty the bowels.

INFLAMMATION OF THE WOMB.

Fever inflammatory; tension and pain in the region of the womb; the *touch* painful.

INFLAMMATION OF THE ANUS.

Fever inflammatory; tumefaction; inflammation; and pain of the fundament.

RHEUMATISM.

Disease obviously from the vicissitudes of the weather; fever inflammatory; pain about the joints; following the tracts of the muscles, in an especial manner infesting the knees and larger joints, yet not sparing the smaller of the feet and hands.

V. Rheumatismus acutus. Indiciis supra dictis dignoscendus.

Rheumatismus vetustus. Post rheumatismum, nisum violentum, vel subluxationem; dolores artuum vel musculorum, sub motu præsertim, aucti, plus minusve fugaces, calore lecti vel alio externo levati; artus debiles, rigidi, facile et sæpe sponte frigiscentes; febris nulla vel levior; tumor aliquando.

Lumbago. Dolor rheumaticus lumborum.

Ischias. Dolor regionis ischiadicæ, nervi magni femoris, et cruris tractum, sequens.

Sp. XX. PHLEGMASIA ALBA DOLENS.

Synocha; Feminis totius et cruris, cum cute concolor, intumescencia dolentissima, nec hydropica nec erysipelatosâ mulieribus, fœtum enixis, superveniens; cum glandulis suræ tumefactis, cruris dolentis.

Gen. V.

ARTHRITIS.

Morbus hæreditarius, oriens sine causa externa evidente, sed præeunte plerumque ventriculi affectione insolita; febris; dolor ad articulum, et plerumque pedis pollicis, certe pedum et manuum juncturas, potissimum infestans; per intervalla revertens, et sæpe cum ventriculi, vel aliarum internarum partium, affectionibus, alternans.

Acute rheumatism. To be known by signs above noticed.

Chronick rheumatism. After the acute rheumatism, or violent strains, or luxation, pains, more or less vagrant, of the joints and muscles, especially on motion, take place; they are relieved by the warmth of the bed or external heat otherwise applied; the joints are weak, stiff; spontaneously becoming cold; little, or no fever; sometimes tumefaction of the diseased parts.

Lumbago. Rheumatick pain of the loins.

Sciatick. Rheumatick pain of the hip and along the course of the great nerve of the limb.

WHITE INFLAMMATION.

Fever inflammatory; a most painful swelling, without discolouration, chiefly of the inner part of the thigh and whole leg, neither hydropick nor erysipelatos, occurring in lying-in women; with a tumefaction of the glands of the calf of the leg of the affected side.

GOUT.

Disease hereditary; arising without external evident cause; generally preceded by an unusual affection of the stomach; fever; pain; at the joints of the feet and hands, for the most part, at the joint of the great toe: returns periodically, and frequently alternates with affections of the stomach or some other internal part.

Sp. I. ARTHRITIS REGULARIS.

Inflammatiō artuum satis vehemens, per aliquot dies perstans; et paulatim cum tumore, pruritu, et desquamatiōe partis, recedens; synocha.

Sp. II. ARTHRITIS ATONICA.

Atonia ventriculi vel alius partis internæ, et vel sine expectata aut solita artuum inflammatione, vel cum doloribus artuum lenibus tantum et fugacibus, et, cum dyspepsia vel aliis atoniæ indiciis, subito sæpe alternans.

Sp. III. ARTHRITIS RETROGRADA.

Inflammatiō artuum subito recedens, et ventriculi vel alius partis internæ atonia, mox insecuta.

Gen. VI. VARIOLA.

Synocha contagiosa; cum vomitu sæpe, et, ex epigastrio presso, dolore; tertio die incipit, et quinto finitur eruptio papularum phlegmonodearum, quæ, spatio octo dierum, in suppurationem, et in crustas demum abeunt, sæpe cicatrices depressas, sive faveolas in cute relinquentes; semel de decursu vitæ aliquem afficiens.

REGULAR GOUT.

Considerable inflammation of one or more joints, continuing for some days; and gradually receding, leaving some degree of tumour, itching, and desquamation of the part; fever.

ATONICK GOUT.

Weakness of stomach, or other internal part; without the usual or expected inflammation of the joints; or with pains, light and unsettled, suddenly alternating with dyspepsy, or other symptoms of debility.

RETROCEDENT GOUT.

Inflammation of the joints suddenly receding, and in a short time being succeeded by debility of stomach, or atony of some internal part.

SMALL POX.

A contagious synocha; often with vomiting at the beginning, and pain at the pit of the stomach upon pressure; on the third day, an eruption of phlegmonick pustules commence, and on the fifth, terminate; in the space of eight days they mature into suppuration, and ultimately end in crusts or scabs, leaving cicatrices or pits in the skin; the disease affects the same person but once during life.

Sp. I. VARIOLA DISCRETA.

Pustulis paucis, discretis, circumscriptione circularibus, turgidis; febre, eruptione facta, protinus cessante.

Sp. II. VARIOLA CONFLUENS.

Pustulis numerosis, confluentibus, circumscriptione irregularibus, flaccidis, parum elevatis; febre, post eruptionem, perstante.

Gen. VII. VACCINA.

Morbus inoculatione contagiosus, ex vacca derivatus; pars corporis viro contacta, die quarto vel quinto, inflammare incipit; et inflammatio, septimo vel octavo, febre comitante, in vesiculam, et, apice in faveolam depresso, demum in crustam abiit, cicatricem in cute relinquens; corpore, post morbum vaccinum, variolæ haud obnoxio perstante.

Gen. VIII. VARICELLA.

Synocha contagiosa, papulæ post brevem febriculam erumpentes, in pustulas variolæ similes, sed vix in suppurationem euntes; post paucos dies in squamulas, nulla cicatrice fere relictæ, desinentes; semel de decursu vitæ aliquem afficiens.

DISTINCT SMALL POX.

Pustules few in number, distinct; circumscribed and full; fever, on the eruption being completed, ceasing.

CONFLUENT SMALL POX.

Pustules confluent and numerous, irregular in their bases, flaccid and depressed; the fever, after the completion of the eruption, continuing.

KINE POX.

A disease originally derived from the cow, and contagious by inoculation; the part of the body tainted with the virus, on the fourth or fifth day, begins to inflame; the inflammation on the seventh or eighth day rises into a vesicle, with a depressed apex, and ultimately terminates in a scab, leaving a cicatrix in the skin; the body, after the vaccine disease, remains unsusceptible of the small pox.

CHICKEN POX.

Fever inflammatory and contagious; pustules, after a short fevery state, break out, similar to those of the small pox; they seldom mature into suppuration; after a few days they terminate in scabs, for the most part leaving no cicatrix; attacks but once in life.

Gen. IX. RUBEOLA.

Synocha contagiosa; cum sternutatione, epiphora, et tussi sicca, rauca; quarto die, vel paulo serius, erumpunt papulæ exiguæ, confertæ, vix eminentes, et post tres dies in squamulas furfurosas minimas abeuntes; semel in decursu vitæ aliquem afficiens.

Gen. X. URTICARIA.

Synocha contagiosa mitior; die secundo vel tertio rubores maculosi; urticarum puncturas referentes, interdiu fere evanescentes, vespere cum febre redeuntes, et post paucos dies in squamulas minutissimas penitus abeuntes.

Gen. XI. SCARLATINA.

Synocha contagiosa; quarto morbi die, facies aliquantum tumida; et simul in cute passim rubor floridus, cum maculis amplis, tandem coalescentibus; post tres vel saltem paucos dies in squamulas furfurosas abiens; sæpe dein superveniente anasarca.

S. I. SCARLATINA SIMPLEX.

Nulla comitante cynanche.

Sp. II. SCARLATINA CYNANCHICA.

Cum cynanche ulcerosa.

MEASLES.

Contagious synocha; sneezing; exuberant flow of tears; cough dry; hoarseness; on the fourth day, or a little later, small aggregated pustules break out, scarcely rising above the surface, after a few days ending in light branny scales; attacks but once in life.

NETTLE RASH, OR FRENCH MEASLES.

Mild contagious synocha; speckled redness resembling the wounds from the nettle, appears, somewhat evanescent in the day, but brightens in the evening with the return of the fever; after a few days it terminates in very small scales.

SCARLET FEVER.

Contagious synocha; on the fourth day the face is somewhat swollen; at the same time, large florid blotches appear generally in the skin, eventually coalescing; after a few days they terminate in branny scales, often afterwards anasarca supervenes.

SIMPLE SCARLET FEVER.

Without an affection of the throat.

ANGINOUS SCARLET FEVER.

With an ulcerous sore throat.

Gen. XII. ANGINA MALIGNA.

Typhus; tonsillas et membranam faucium mucosam, tumore rubore, et crustis mucosis coloris albescentis; vel cineritii, serpentibus, et ulcera tegentibus afficiens; fere cum eruptionibus in cute.

Gen. DYSENTERIA.

Synocha contagiosa; dejectiones frequentes, mucosæ, vel sanguinolentæ; retentis plerumque fæcibus alvinis; tormina; tenesmus.

Gen. XIV. HÆMORRHAGIA.

Synocha cum profusione sanguinis absque vi externa; sanguis missus ut in plegmasiis apparet.

Sp. I. EPISTAXIS.

Capitis dolor vel gravitas; faciei rubor; profusio sanguinea e naribus.

Sp. II. HÆMOPTYSIS.

Genarum rubor; molestiæ aut doloris, et aliquando caloris, in pectore sensus; dyspnœo; titillatio faucium; tussis, aut exscretio, sanguinem floridum, sæpe spumosum, rejiciens.

Sp. III. HÆMATEMESIS.

Epigastrii calor, et dolore pressu auctus; sanguinis, stomacho profusio.

MALIGNANT SORE THROAT.

Low, contagious fever; the tonsils and mucous membrane of the fauces are affected with tumour, redness, and mucous, spreading crusts, of a whitish or cineritious colour, generally with eruptions on the skin.

DYSENTERIA.

Contagious synocha; dejections, frequent, mucous, and bloody; the natural feces are retained in the general; gripes; fruitless efforts to empty the bowels.

HEMORRHAGE.

An inflammatory fever; loss of blood without external violence; blood when poured out, appears as in phlegmasia.

BLEEDING FROM THE NOSE.

Pain and weight of the head; redness of the face; discharge of blood from the nostrils.

SPITTING OF BLOOD.

Redness of cheeks; sense of uneasiness, pain, and sometimes, of heat in the breast; shortness of respiration; tickling in the throat; cough, or hawk, throwing out either pure blood, or blood mixed with mucous in a frothy form.

VOMITING OF BLOOD.

Heat at the pit of the stomach, and pain, augmented on pressure; discharge of blood from the stomach.

Sp. IV. **HÆMORRHOIS.**

Capitis gravitas vel dolor; vertigo; lumborum et ani dolor; circa anum tubercula livida dolentia, e quibus plerumque profluit sanguis; qui, aliquando etiam, nullo tumore apparente, ex ano stillat.

Sp. V. **MENORRHAGIA.**

Dorsi, lumborum, ventris, parturientium instar, dolores; sanguinis e vagina fluxus.

Sp. **CYSTERRHAGIA.**

Lumborum et hypogastrii dolores; ex vesica urinaria sanguinis profusio.

Gen. XV. **PERTUSSIS.**

Synocha contagiosa; tussis convulsiva, strangulans, cum inspiratione sonora, vel stridula iterata; sæpe vomitus; semel in decursu vitæ aliquem afficiens.

Gen. XVI. **ANGINA PAROTIDEA.**

Synocha contagiosa; tumor externus parotidum et maxillarum glandularum magnus; respiratio et deglutitio parum læsæ; in decursu vitæ semel aliquem afficiens; aliquando, tumore subsidente, testiculus vel mamma intumescit.

PILES.

Weight and pain of the head; vertigo; pain of the loins and anus; tubercles about the fundament, livid and painful, from which there is a discharge of blood, which sometimes flows from the anus, without any tumour being discoverable.

UTERINE HEMORRHAGE.

Pains of the back, belly, and loins, similar to those of childbirth; a discharge of blood from the vagina.

HEMORRHAGE FROM THE URINARY BLADDER.

Pains of the loins; and region of the bladder; discharge of blood from the urinary bladder.

HOOPING COUGH.

Contagious synocha; cough convulsive and strangling, reiterated with sonorous or shrill inspiration; frequently vomiting; attacks but once during life.

MUMPS.

Contagious synocha; considerable tumefaction of the parotid and submaxillary glands; respiration and deglutition little affected; attacks but once during life; upon the subsidence of the tumour, not unfrequently, one of the testicles, or breasts, swells.

CLAS. II. NEUROSES.

Sensus et motus voluntarii, vel involuntarii læsi, sine febre idiopathica, et sine morbo, ad locum spectante apparente.

Gen. I. APOPLEXIA.

Motus voluntarii fere omnes subito imminuti, cum sopore plus minus profundo, et respiratione stertente: superstite motu cordis et arteriarum.

Gen. II. PARALYSIS.

Resolutio nervorum.

Sp. I. HEMIPLEGIA.

Paralysis alterius lateris.

Sp. II. PARAPLEGIA.

Paralysis dimidii corporis transversim sumpti.

Sp. III. PARALYSIS PARTIALIS.

Resolutio quorundam nervorum tantum.

Gen. III. SYNCOPE.

Resolutio musculorum, ex motu cordis subito imminuto, vel aliquamdiu quiescente.

NERVOUS DISEASES.

Sensation, and voluntary, or involuntary motion injured, without original fever, or obvious local affection.

APOPLEXY.

All voluntary motion suddenly lessened, with stupor, more or less profound, and snoring; the action of the heart and arteries continuing.

PALSY.

Disability, or palsy of the nerves.

HEMIPLEGY.

Palsy of one side of the body.

PARAPLEGY.

Palsy of one half of the body, taken transversely.

PARTIAL PALSY.

Palsy of certain nerves only.

FAINTING.

Disability or relaxation of the muscles, from a sudden diminished action of the heart, or its total cessation for a time.

Gen. IV. TETANUS.

Plurium musculorum rigiditas spastica; præsertim diaphragmatis, et maxillæ inferioris, et dorsi, fere ab vi externa.

Gen. V. CHOREA.

Impuberes utriusque sexus, ut plurimum intra decimum et decimum quartum ætatis annum adorientes, motus convulsivi ex parte voluntarii, plerumque alterius lateris, in brachiorum et manuum et pedum motu, histrionum gesticulationes referentes, in gressu, pedem alterum sæpius trahentes quam attollentes.

Gen. VI. EPILEPSIA.

Morbus vetustus, aliquando hæreditarius; cum accessionibus convulsivis periodicis, intervallo unius, vel plurium mensium, recurrentibus; cum sopore accessum sequente.

Sp. I. EPILEPSIA CEREBRALIS.

Sine præmonitu subito adoriens.

Sp. II. EPILEPSIA SYMPTOMATICA.

Prægressa sensatione auræ cujusdam, a parte corporis quadam, versus caput assurgentis.

LOCK-JAW.

A spasmodick rigidity of all, or many of the muscles, especially those of the diaphragm and lower jaw, and back, generally from external injury.

ST. VITUS'S DANCE.

Convulsive jerks, in part voluntary, in the motion of the arms, hands and feet, similar to the gesticulations of a stage-player; they may be of either side; they attack both sexes, chiefly between ten and fourteen years of age; in walking, the foot of the side affected, is rather dragged than properly moved.

FALLING SICKNESS.

Disease chronick, sometimes hereditary; with convulsive paroxysms returning periodically at the interval of one or several months; stupor succeeds to each paroxysm.

CEREBRAL EPILEPSY.

Attacking suddenly, without premonition.

SYMPTOMATICK EPILEPSY.

A peculiar sensation of wind, or something creeping, and ascending from a certain part of the body towards the head, precedes the attack.

Gen. VII. ECLAMPSIA.

Prægressis doloribus acutis capitis, seu vertigine, aliquando spectris, oculis apparentibus; convulsiones, vel contractiones clonicæ musculorum, accessus epilepticos simulantes, uterum gerentibus, vel parturientibus, subito ingruentes; et cum sopore, et respiratione stertente, desinentes.

Gen. VIII. RAPHANIA.

Articulorum contractio spastica, cum agitatione convulsiva, et dolore violentissimo periodico.

Gen. IX. PALPITATIO,

Motus cordis vehemens; abnormis, fere constans; sine alio morbo evidente.

Gen. X. ASTHMA.

Spirandi difficultas, per intervalla subiens; cum angustiae in pectore sensu, et respiratione cum sibilo strepente, tussis sub initio accessus difficilis, vel nulla, versus finem libera; cum sputo mucoso sæpe copioso.

Gen. XI. ANGINA PECTORIS.

Accessus spasmodici abnormes pectoris, cum dolore et angustiae sensu, tussi, expectoratione mucosa vel cruenta, quinquagenarium, aliquando juniorem, ambulantiem vel dormientem fere corripientes; ad medium brachii sinistri et digitos minimos quatenus tendentes, sed e quiescente et non dormiente subito discedentes; temporibus incertis, decem vel viginti annos recurrentes.

LYING-IN FITS.

Violent convulsions, resembling epileptick paroxysms, preceded by severe pains of the head or giddiness, sometimes by the appearance of images or visible forms, and terminated by stupor or snoring; suddenly attacking pregnant or child-bed women.

RAPHANIA.

(Proper to Sweden and Germany.)

Spasmodick contraction of the joints, with convulsive agitation; and most violent periodical pain.

PALPITATION.

Violent, irregular action of the heart, generally constant, without any other obvious disease.

ASTHMA.

A difficulty of breathing, coming on at intervals, with a sense of narrowness in the breast; breathing rattling and hissing; at the commencement of the paroxysm the cough is difficult or suppressed, towards the end free, with copious mucous expectoration.

QUINSY OF THE BREAST.

Irregular spasmodick accessions of pain, with a sense of confinement of the breast, cough, mucous or bloody expectoration, attacking generally persons about fifty, sometimes younger, while walking or sleeping; but suddenly going off on the sufferer becoming quiet, if not sleeping; the pains extend to the middle of the left arm, and even to the little fingers; the paroxysms recur, at uncertain intervals, for ten or twenty years.

Gen. XII. HYSTERIA.

Ventris murmura; sensus globi in abdomine se volventis ad ventriculum. et fauces ascendentis, ubique strangulantis; sæpe convulsiones; urinæ limpidæ copia profusa; animus, nec sponte, varius et mutabilis.

Gen. XIII. HYDROPHOBIA.

Potionis cujuslibet, utpote convulsionem pharyngis dolentem cientis, fastidium et horror; semper e saliva animalis rabidi.

Gen. XIV. COLICA.

Dolor abdominis, præcipue circa umbilicum torquens; vomitus; alvus astricta.

Sp. I. COLICA SPASMODICA.

Cum retractione umbilici, et spasmis musculorum abdominalium, intestinorumque.

Sp. II. COLICA FLATULENTA.

Cum spasmis musculorum abdominalium, et intestinorum, et ructibus.

Sp. III. COLICA PICTORUM.

Præunte ponderis vel molestiæ, in abdomine, præcipue circa umbilicum sensu; accidente dolore colica, primum leviore, non continuo, et præcipue post partum acuto; tandem graviore et fere perpetuo; cum dolore brachiorum, et dorsi, in paralysin demum, abeunte.

HYSTERICKS.

Noise of the belly; sense of a globe ascending from the abdomen to the stomach, and up to the throat, and there producing a strangling sensation; stupor; convulsions; copious discharge of limpid urine: the mind involuntarily various and changeable.

CANINE MADNESS.

An aversion from, and dread of, any fluid, in consequence of its producing painful convulsions of the pharynx or throat; arising from the saliva or spittle of a rabid animal.

COLICK.

Pain of the belly; especially with a twisting about the navel; vomiting; bound bowels.

SPASMODICK COLICK.

With a retraction of the navel, and spasms of the muscles of the belly and intestines.

FLATULENT COLICK.

With spasms of the belly and intestines; belching, or discharge of wind by the mouth.

**PAINTER'S COLICK, OR DRY BELLY
ACHE.**

To a sense of weight or uneasiness in the belly, especially about the navel, succeeds colick pain, at first light and interrupted, increased particularly after eating; at length severe and constant, with pain of the arms and back, not unfrequently terminating in palsy of these parts.

Gen. XV.

MANIA.

Mentis judicantis facultates læsæ, sed aliquando vis imaginandi, auctæ, quo homines rerum relationes, vel non percipiunt, vel non reminiscuntur; morbus hereditarius.

Sp. I.

MANIA CONGENITA

Ab ortu constans.

Sp. II.

MANIA ACCIDENTALIS.

A vitio corporis evidente in hominibus sanæ mentis superveniente.

Sp. III.

MELANCHOLIA.

Insania partialis sine dyspepsia; cum hallucinatione de statu corporis sui a levibus causis periculoso; vel de statu rerum suarum tristi metuendo; vel cum amore vehementi, sine satyriasi vel nymphomania; vel cum superstitioso futurorum metu; cum aversatione motus et omnium vitæ officiorum; vel cum inquietudine, et status cujusvis impatientia; vel cum tædio vitæ.

Sp. IV.

AMENTIA.

Mentis judicantis imbecillitas.

MADNESS.

The faculty, or power of judgment, injured, while that of the imagination is, for the most part, increased; in consequence of which men neither perceive, nor recollect the relation of things; disease hereditary.

CONNATE MADNESS.

Continuing from birth.

INCIDENTAL MADNESS.

Proceeding obviously from corporeal disease, supervening in men of sound intellect.

MELANCHOLY.

Madness as regards particular objects; digestion good; attended by an incorrect judgment of the state of his own body as affected by light causes; or an apprehension of misfortune in pecuniary affairs; or inordinate love, unaccompanied by salacity in man, or lechery in woman; or superstitious anticipations of futurity; with a disinclination to all motion and the duties of life; or with inquietude and impatience of every condition; or even with weariness of life itself.

IDIOTISM.

A natural imbecility of mind.

Sp. V. HYPOCHONDRIASIS.

Dyspepsia cum languore, mœstitia, et metu, ex causis non æquis; in temperamento melancholico.

HYPOCHONDRIACK DISEASE.

Depraved digestion, with languidness, sadness, and alarm, for causes not adequate to such effects in otherwise healthful habits; constitution melancholy.

CL. III. CACHEXIÆ.

Totius vel partis corporis habitus depravatus; sine febre primaria vel neurosi.

Gen. I. TABES.

Marcor; asthenia; febris hectica; fere ex ulcere externo, vel vomica, inflammationem phlegmonodeam, sequente.

Gen. II. SCROFULA.

Morbus hæreditarius; plurium glandularum conglobatarum tumores vel ulcera.

Sp. I. PHTHISIS.

Scrofula pulmonaria; cum corporis emaciatione; tussi; febre hectica; et plerumque expectoratione purulenta; aliquando hæmoptœ; dyspnœa vel orthopnœa; rubore genarum; molestiæ aut doloris, et aliquando caloris, in pectore, sensu; unguibus aduncis; sudoribus marcescentibus.

Sp. II. SCROFULA VULGARIS.

Colli glandularum tumores; labium superius turgidulum; facies florida; cutis levis; tumidum abdomen.

DISEASES OF DEPRAVED HABIT.

A depraved state of a part, or of the whole body; without primary fever, or nervous affection.

EMACIATION.

Sluggishness; extreme debility; hectic fever, generally consequent on an internal or external ulcer, or abscess succeeding to phlegmonick inflammation.

KING'S EVIL.

Disease hereditary; tumours or ulcers of many of the conglobate glands.

CONSUMPTION.

Scrofula of the lungs; wasting of the body; cough; hectic fever; generally purulent expectoration; sometimes spitting of blood; breathing more or less difficult; redness of the cheeks; a sense of pain or uneasiness, sometimes of heat in the breast; nails adunque or hooked; wasting sweats.

COMMON SCROFULA.

Tumours of the glands of the neck; pouting, swelled, upper lip; face florid; skin delicate; belly tumid.

Sp. III. RACHITIS.

Caput magnum anterius maxime tumens; genicula tumida; costæ depressæ; abdomen tumidum, cætera tabescentia.

Gen. III. SYPHILIS.

Morbus contagiosus, post concubitum impurum; genitalium tonsillarum ulcera et cutis, præsertim ad marginem capillitii; papulæ corymbosæ, in crustas et in ulcera crustosa abeuntes; osteocopi; exostoses.

Gen. IV. SCORBUTUS.

In regione frigida, post victum putrescentum, salitum, ex animalibus confectum; deficiente simul materia vegetabili recente; asthenia; stomacace; in cute maculæ discolores, plerumque livescentes, præsertim ad pilorum radices.

Gen. V. DYSPEPSIA.

Anorexia; nausea; vomitus; inflatio; ructus; ruminatio; cardialgia; gastrodynia; pyrosis; pauciora saltem, vel plura horum simul concurrentia plerumque cum alvo astricta, et sine alio, vel ventriculi ipsius, vel aliarum partium, morbo.

Gen. VI. CHLOROSIS.

Dyspepsia, vel rei non esculentæ desiderium; cutis pallor vel decoloratio; asthenia; palpitatio; menstruorum retentio.

RICKETS.

Head large, particularly the forehead; joints swollen; ribs depressed; belly tumid; the rest of the body emaciated.

POX.

Disease contagious; after an impure cohabitation; ulcers of the genitals, tonsils, and skin, especially at the root of the hair; pimples in clusters, or ring-worm like, ending in crusts or ulcers; pains of the bones; swellings of the bones.

SCURVY.

In cold climates; after a poor and salted animal diet, without fresh vegetables; extreme weakness; fetidness and hæmorrhage of the mouth; spots of various colours in the skin, generally bluish, especially at the roots of the hair.

DEPRAVED DIGESTION

Want of appetite; loathing of food; vomition; flatulence; belching; regurgitation; heartburn; pain of the stomach; water brash; some or most of these symptoms generally concur, with costiveness, and without any other disease of the stomach itself, or other parts.

GREEN SICKNESS, WHITE FEVER, OR VIRGIN'S DISEASE.

Depraved digestion; or an appetite for articles not esculent; paleness and discoloration of skin; extreme weakness, palpitation; retention of the menses.

Gen. VII. ICTERUS.

Flavido cutis et oculorum; ex concretionibus biliosis, vel pathemate mentis, vel morbis hepatis, vel graviditate; fæces albidæ; intestinæ tardæ; urina obscure rubra, immissa colore luteo tingens.

Gen. VIII. ELEPHANTIASIS.

Morbus contagiosus; cutis crassa, rugosa, aspera, unctuosa, pilis destituta; in extremis artubus anæsthesia; facies tuberibus deformis; vox rauca et nasalis; crus maxime tumidum, et cruri elephantino subsimile.

Gen. IX. LEPRO.

Cutis, escharis albis, furfurosis, rimosis, aspera; aliquando subtus humida, pruriginosa.

Gen. X. TRICOMA.

Morbus contagiosus, capilli solito crassiores, in cirrhos et funiculos inextricabiles implicati.

Gen. XI. HYDROPS.

Corporis totius vel partis ejus intumescencia mollis inelastica.

JAUNDICE.

Yellowness of skin and eyes; arising from biliary concretions, or mental affections, or hepatick diseases, or pregnancy; fæces white; bowels slow; urine obscurely red, tinging whatever may be put into it of a yellowish colour.

GREAT ARABIAN LEPROSY.

Disease contagious; skin cracked, rugose, rough, unctuous, and despoiled of its hair; insensibility of the extremities; face deformed with diseased bumps; voice hoarse and nasal; leg much swollen, having some similitude to that of an elephant.

COMMON LEPROSY.

Skin rough, with white, branny, cleft scales; sometimes with moisture underneath, attended by an itchy sensation.

PLAITED HAIR.

Disease contagious; hair larger than usual, and twisted into inextricable tufts and ropes. (*Said to be proper to Poland.*)

DROPSY.

A soft tumour, not elastick, of a part, or of the whole of the body.

Sp. I. **ANASARCA.**

Intumescencia corporis vel artuum, a sero, in tissu cellulari, retento.

Sp. II. **HYDROCEPHALUS.**

In infantibus recens natis, capitis intumescencia molli, inelastica, hiantibus cranii suturis; in juventute vel ætate adulta, primum lassitudine; febre; et dolore capitis; dein pulsu tardiore; pupillæ, initio, contractione, versus finem, dilatatione; oculorum distortionem, somnolentia, afficiens; alvo astricta.

Sp. III. **HYDRORACHITIS, VULGO SPINA BIFIDA.**

Tumor supra vertebra cervicis, dorsi, vel lumborum, mollis, exiguus; hiantibus vertebra: in infantibus recens natis.

Sp. IV. **HYDROTHORAX.**

Dyspnœa; faciei pallor; pedum œdema; urina parca; decubitus difficilis; subita et spontanea ex somno, cum palpitatione, excitatio; febricula; sitis maxima.

Sp. V. **ARCITES.**

Abdominis intumescencia tensa, vix elastica, sed fluctuosa; urina parca; febricula; sitis maxima.

**DROPSY OF THE CELLULAR SUB-
STANCE.**

A swelling of the body or limbs, from a watery fluid in the cellular substance.

DROPSY OF THE BRAIN.

In new-born infants, a soft swelling of the head, not elastick, with opening of the sutures: in youth or aduiltage; lassitude; fever; and pain of the head, at the commencement; afterwards the pulse becomes slower; pupils, though at first preternaturally contracted, dilated; with a squinting or distortion of one or both eyes; stupor; slowness of bowels.

DROPSY OF THE SPINAL MARROW.

Soft, small tumour on the vertebræ of the neck, or back, or loins, with an opening of the vertebræ; in new born infants.

DROPSY OF THE THORAX.

Difficult breathing; paleness of face; anasaruous swelling of the feet; paucity of urine; recumbency difficult; sudden and spontaneous startings from sleep; light fever; great thirst.

DROPSY OF THE BELLY.

Tense swelling of the belly, not elastick, but fluctuating; paucity of urine; light fever; considerable thirst.

Sp. VI. HYDROCELE.

Tumor scroti non dolens, paulatim crescens, mollis, fluctuans, aliquando pellucidus.

Sp. VII. HYDROMETRA.

Hypogastrii tumor, in mulieribus partus non genitibus, paulatim crescens, ex hydatidibus conflatus, uteri gravidi figuram referens, fluctuans.

Gen. XII. PHYSCONIA.

Tumor quandam abdominis partem potissimum occupans, paulatim crescens, nec sonora, nec fluctuans, nec in carcinoma abiens.

Sp. I. PHYSCONIA HEPATICA.

Tumor hypochondrium dextrum occupans.

Sp. II. PHYSCONIA SPLENICA.

Tumor hypochondrium sinistrum occupans.

Sp. III. PHYSCONIA UTERINA.

Tumor hypogastrium occupans.

DROPSY OF THE SCROTUM.

Tumour of the scrotum, not painful, gradually enlarging, soft, fluctuating, and sometimes transparent.

DROPSY OF THE WOMB.

In women not pregnant, a tumour of the hypogastrium, gradually enlarging, composed of watery vesicles, simulating the figure of the pregnant womb; fluctuating.

A CHRONICK INDURATED INTERNAL TUMEFACATION.

A tumour occupying some part of the region of the belly, gradually enlarging, not sonorous nor fluctuating; never terminating in cancer.

HEPATICK PHYSCONIA.

An indolent tumour occupying the right hypochondrium.

FEVER-CAKE.

An indolent tumour occupying the left hypochondrium.

UTERINE PHYSCONIA.

An indolent tumour of the hypogastrium.

Sp. IV. **PHYSCONIA AB OVARIO.**

Tumor dextrum vel sinistrum ile occupans.

Sp. V. **PHYSCONIA OMENTALIS.**

Tumor abdominis partem mediam occupans.

Sp. I. **CALIGO LENTIS, ALGOA.**Sp. II. **CALIGO PUPILLÆ.**Sp. III. **CALIGO COXARUM.**Sp. IV. **CALIGO HUMORUM.**Sp. V. **CALIGO PALPEBRARUM.**

OVARIAL PHYSCONIA.

An indolent tumour occupying the one or the other flank.

PHYSCONIA OF THE CAUL.

An indolent tumour occupying the centre of the belly, or traversing the belly.

CL. IV. VITIA.

Partis non totius corporis affectio; sine febre.

Gen. I. CALIGO.

Visus imminutus, vel prorsus abolitus, ob repagulam opacum inter objecta et retinam, oculo ipso, vel palpebris inhærens.

Sp. I. CALIGO LENTIS, VULGO CATARACTA.

Ob maculum opacam, lentis.

Sp. II. CALIGO PUPILLÆ.

Ob ostructam pupillam.

Sp. III. CALIGO CORNEÆ.

Ob corneam opacam.

Sp. IV. CALIGO HUMORUM.

Ob vitium vel defectum humorum.

Sp. V. CALIGO PALPEBRARUM.

Ob vitium palpebris inhærens.

ORGANICK DISEASES.

A morbid affection of a part, not of the whole body;
without fever.

BLINDNESS, MORE OR LESS COM- PLETE.

Vision diminished, or entirely destroyed, from an
opacity between the object and the retina, inherent
in the eye itself, or the lids of the eye.

CATARACT.

From an opacity of the lens.

BLINDNESS.

From obstructed pupil.

BLINDNESS.

From a film on the cornea.

BLINDNESS.

From a disease, or failing in the humours of the eye.

BLINDNESS.

From a disease of the lids of the eye.

Gen. II. AMAUROSIS, VEL GUTTA SERENA.

Visus imminutus, vel prorsus abolitus, sine vitio oculi evidente; plerumque cum pupilla dilatata et immobili.

Sp. I. AMAUROSIS COMPRESSIONIS.

Post causas, et cum indiciis congestionis in cerebro.

Sp. II. AMAUROSIS ATONICA.

Post causas, et cum indiciis debilitatis, vel a veneno ingesto.

Gen. III. STRABISMUS.

Oculorum axes optici non eodem vergentes.

Sp. I. STRABISMUS HABITUALIS.

A consuetudine prava oculo tantum uno utendi, vel ab debilitate vel mobilitate majore unius oculi.

Sp. II. STRABISMUS CONGENITUS.

Ob figuram defectam partium oculorum.

Gen. III. DYSOPIA.

Visus depravatus, ita ut non nisi, certa luce vel ad certam distantiam, vel in certa positura, objecta clare videantur.

**BLINDNESS WITHOUT OBVIOUS
CAUSE.**

Vision diminished, or totally destroyed, without any observable defect in the eye; generally the pupil is dilated and fixed.

BLINDNESS FROM COMPRESSION.

After causes, and with symptoms of infarction in the brain.

BLINDNESS FROM PALSY.

After causes, and with symptoms of debility, or poison taken into the stomach.

SQUINTING.

The axes of vision not converging to the same point.

SQUINTING.

From a bad habit of using one eye only, or from debility or a greater mobility in the one eye than the other.

CONGENITE SQUINTING.

From a defective configuration of the parts of the eye.

DEPRAVED SIGHT.

Vision so faulty that, except objects be placed in certain light, at a given distance, or in particular position, they cannot be distinctly seen.

Sp. I. DYSOPIA TENEBRARUM.

In qua non nisi in magna luce objecta videntur.

Sp. II. DYSOPIA LUMINIS.

In qua non nisi in obscura luce objecta videntur.

Sp. III. DYSOPIA LONGINQUITATIS.

In qua longe distantia non videntur.

Sp. IV. DYSOPIA PROXIMORUM.

In qua proxima non videntur.

Sp. V. DYSOPIA LATERALIS.

In qua non nisi oblique posita videntur.

Gen. IV. DYSECŒA, VEL SURDITAS.

Auditus imminutus vel abolitus.

Sp. I. DYSECŒA ORGANICA.

Ob vitium in organis sonos ad internam aurem transmittentibus.

Sp. II. DYSECŒA ATONICA.

Sine organorum sonos transmittentium vitio evidente.

DEPRAVED VISION.

Wherein objects, except they be placed in great light, are not seen.

DEPRAVED VISION.

Wherein objects, except they be placed rather in obscurity, are not seen.

DEPRAVED VISION.

Wherein objects placed at a considerable distance are not seen.

DEPRAVED VISION.

Wherein near objects are not seen.

DEPRAVED VISION.

Wherein objects, except placed in oblique relation to the eye, are not seen.

DEAFNESS.

Diminished or destroyed hearing.

ORGANICK DEAFNESS.

Deafness from organick defect.

DEAFNESS FROM ATONY.

Without any obvious defect in the ear.

Gen. V. ANOSMIA.

Olfactus imminutus vel abolitus.

Sp. I. ANOSMIA ORGANICA,

Ob vitium in membrana nares internas investiente.

Sp. II. ANOSMIA ATONICA.

Sine vitio membranæ narium evidente.

Gen. VI. AGHEUSTIA.

Gustus imminutus vel abolitus.

Sp. I. AGHEUSTIA ORGANICA.

Ob vitium in membrana linguæ a nervis sapida arcens.

Sp. II. AGHEUSTIA ATONICA.

Sine vitio linguæ evidente.

Gen. VII. ANÆSTHESIA.

Tactus imminutus vel abolitus.

Gen. VIII. APHONIA.

Vocis plena suppressio, citra coma aut syncopen.

Sp. I. APHONIA GUTTURALIS.

A tumefactis faucibus.

OLFACTORY DISABILITY.

The sense of smelling diminished, or destroyed.

DEPRAVED SMELLING.

From a fault in the membrane lining the nostrils.

DEPRAVED SMELLING.

Without any obvious disease of the smelling organ.

DEPRAVED TASTE.

The sense of taste diminished or destroyed.

ORGANICK DEPRAVITY OF TASTE.

From an obvious defect in the gustatory organ.

DEPRAVED TASTE FROM ATONY.

Without any evident disease of the tasting organ.

DEPRAVED SENSATION.

The sense of touch diminished or destroyed.

LOSS OF VOICE.

Full suppression of voice, without stupor or fainting.

LOSS OF VOICE.

From tumefied fauces.

Sp. II. APHONIA TRACHEALIS.

A compressa trachea.

Sp. III. APHONIA LINGUALIS.

Ex lingua ablata vel vitiata.

Sp. IV. APHONIA SURDORUM.

Ex surditate congenita.

Gen. IX. PARAPHONIA.

Vocis sonus depravatus.

Sp. I. PARAPHONIA RAUCA.

Ob siccitatem vel tumorem faucium flaccidum vel obstructas nares, vox fit rauca et scabra.

Sp. II. PARAPHONIA PALATINA.

In qua, ob deficientem vel divisam uvulam plerumque cum labio leporino, vox fit rauca, obscura, et ingrata.

Gen. X. PSELLISMUS.

Verba articulandi vitium; in quo sermonis verba, præsertim prima, non facile proferuntur, et non nisi prima syllaba sæpius repetita.

LOSS OF VOICE.

From a compressed wind-pipe.

LOSS OF VOICE.

From the tongue being diseased or removed.

LOSS OF VOICE.

From connate deafness.

DEPRAVED VOICE.

Depraved sound of voice.

HOARSE VOICE.

From dryness or flaccidity of the fauces, or obstructed nostrils, the voice becomes hoarse and rough.

PALATAL DEPRAVITY OF VOICE.

In which from a deficient or divided palate, for the most part with a hare-lip, the voice becomes hoarse, indistinct and unpleasant.

**DEPRAVED PRONUNCIATION; OR
STUTTER.**

Defect in articulation, in which the words, especially the first, are not uttered but with difficulty, and not at all except the first syllable be reiterated.

Gen. XI. DYSPHAGIA.

Molestia deglutionem impediens, sine respirationis læsione vel inflammatione.

Gen. XII. OBSTIPITAS.

Artus unius vel plurium rigiditas diuturna, ex contractione musculorum, vel anchylosi.

Sp. I. OBSTIPITAS CERVICIS.

Ex contractione musculorum cervicis.

Sp. II. OBSTIPITAS ARTICULARIS.

Ex contractione musculorum motibus articuli inservientium, vel anchylosi ossium, ut supra.

Gen. XIII. ANEURISMA.

Tumor mollis, pulsans; supra arteriam et ex arteria ortus.

Gen. XIV. VARIX.

Tumor mollis, non pulsans, supra venam et ex vena ortus.

Gen. XV. ECCHYMOMA.

Tumor diffusus, parum eminens, liviscens, ex plaga ortus.

INJURED DEGLUTITION.

Uneasiness in the act of swallowing, without affected respiration or inflammation.

STIFFNESS.

A chronic rigidity of one or more joints, from an abbreviation of the muscles, or a union of the bones constituting the joint or joints.

WRY-NECK.

From a contraction of the muscles of the neck.

STIFF-JOINT.

As above.

ANEURISM.

A soft, pulsating tumour, over, and arising from, an artery.

VARIX.

A soft tumour, not pulsating, over, and arising, from a vein.

EFFUSION.

A diffused tumour, slightly prominent, bluish, arising from a blow or wound.

Gen. XVI. CARCINOMA.

Tumor scirrhoideus dolens, in ulcus mali moris abiens.

Gen. XVII. SARCOMA.

Extuberatio mollis, non dolens, cutis.

Gen. XVIII. POLYPUS.

Tumor e vasis conflatus, mollis, in naribus, vel faucibus, vel vagina, non fere dolens,

Gen. XIX. LUPIA.

Extuberatio subter cutem mobilis, mollis, elasticus, non dolens.

Gen. XX. GANGLION.

Extuberatio dura, mobilis, tendini insidens.

Gen. XXI. ARTHROCAE.

Articulorum, genu vel coxæ vel vertebrarum potissimum, tumor parum primo eminens, cute concolor, dolentissimus, et mobilitatem imminuens.

Gen. XXII. EXOSTOSIS.

Tumor durus ossi insidens.

Gen. XXIII. CLAVUS.

Cuticulæ crassitudo dura, lamellata.

CANCER.

A scirrhus tumour, terminating in an ill-conditioned ulcer.

FLESHY TUMOUR.

A soft, not painful, tumour of the skin.

POLYPUS.

A tumour, vascular, and soft, but seldom painful, in the nostrils, fauces, or vagina.

WEN.

A tumour under the skin, soft, moveable, elastick; not painful.

GANGLION.

A hard moveable tumour on a tendon.

WHITE SWELLING.

A tumour, generally of the knee, hip, or vertebræ, at first slightly prominent, very painful, affecting the motion of the joint; skin not discoloured.

SWELLING OF THE BONE.

A hard tumour, on, and arising from, the bone.

A CORN.

Hard, lamellated thickness of the cuticle.

Gen. XXIV. VERRUCA.

Extuberatio dura, scabra, conica.

Gen. XXV. NÆVUS.

Macula congenita, quæ vulgo vehementi cupiditati tribuitur.

Gen. XXVI. PTERYGIUM.

Excrescentia carnea, alam expansam referens, et versus corneam se extendens.

Gen. XXVII. BRONCHOCELE.

Tumor glandulæ thyroideæ.

Gen. XXVIII. LITHIASIS.

Culculus in organis ad secernendam et reddendam urinam inservientibus.

Gen. XXIX. HERNIA.

Partis mollis ectopia, cute et aliis integumentis adhuc tecta.

Gen. XXX. PROCIDENTIA.

Partis mollis ectopia nuda.

Gen. XXXI. LUXATIO.

Os ex sua, in juncturis, sede dimotum.

A WART.

A hard, rough, conical tumour.

MOLE; OR MOTHER'S MARK.

A connate mark, vulgarly attributed to vehement longing.

EYE-WING.

A fleshy excrescence resembling a wing expanded, extending itself towards the cornea of the eye.

THE DERBYSHIRE-NECK; OR GOITRE.

A swelling of the thyroid gland.

THE GRAVEL, OR STONE.

A calculus in the kidney, or urinary bladder.

A RUPTURE.

A soft part protruded, but continued to be covered by the skin, and common integuments.

A PROTRUSION.

A soft part protruded, naked and exposed.

A DISLOCATION.

A bone removed out of its relation to another bone in a joint.

Gen. XXXII. PLAGA.

Continuitatis solutio recens, partis mollis, a vi externa.

Gen. XXXIII. ULCUS.

Partis mollis solutio purulenta vel ichorosa.

Gen. XXXIV. HERPES.

Phlyctænæ vel ulcuscula plurima, aggregata, serpentina, dysepuleta.

Gen. XXXV. PSORA.

Pustulæ vel ulcuscula pruriginosa, contagiosa; manus male inficientia.

Gen. XXXVI. FRACTURA.

Ossis partes a cohæsione, in fragmenta, vi, solutæ.

Gen. XXXVII. CARIES.

Ossis exulceratio,

Gen. XXXIX. ALVI FLUXUS.

Humoris cujusvis vomitus vel dejectio; vel utraque concurrentia.

A WOUND.

A recent solution of continuity, in a soft part, from external violence.

AN ULCER.

A solution, in a soft part, with purulent or ichorous discharge.

A TETTER.

Numerous little vesicles or small ulcers aggregated, spreading little by little; difficult of cure.

THE ITCH.

Small itchy pustules or ulcers, contagious, chiefly affecting the hand.

A FRACTURE.

A solution of continuity, in a bone, by violence.

ROTTENNESS.

Ulceration, or rottenness in a bone.

INTESTINAL DISCHARGE.

A vomiting or purging of any fluid, or both concurring.

Sp. I. CHOLERA.

Humoris biliosi vel porracei vomitus, et simul ejusdem dejectio frequens; anxietas; tormina; surarum spasmata; in infantibus febris.

Sp. II. DIARRHŒA.

Humoris biliosi, vel aquosi, vel porracei, dejectio frequens; anxietas; tormina.

Gen. XL. DIABETES.

Urinæ, copia immodica, profusio, vetusta; plerumque cum odore, colore, et sapore melleo; corporis tabe.

Gen. XLI. ENEURESIS.

Urinæ e vesica fluxus involuntarius, non dolens; post morbos spincterem vesicæ lædentes; vel ex irritatione vesicæ.

Gen. XLII. GONORRHŒA.

Post concubitum impurum, humoris puriformis, cum inflammatione et dolore, et dysuria, ex urethra fluxus; contagiosus.

Sp. I. GONORRHŒA ACUTA.

Ut supra.

CHOLERA.

A simultaneous and frequent vomiting and purging of a bilious or porraceous fluid; restlessness; gripes; spasms of the calves of the legs; in children fever.

LAX.

Frequent dejections of bilious, or waterish, or greenish matter; restlessness; gripes.

DIABETES.

An immoderately profuse, and chronick discharge of urine; generally with odour, colour, honey like sapidness; wasting of the general body.

INCONTINENCE OF URINE.

An involuntary discharge of urine, not painful; after diseases producing palsy of the spincter muscle of the bladder; or from irritation of the bladder itself.

CLAP.

After an impure cohabitation; a purulent effusion from the urethra, with inflammation, pain, and dysury; disease contagious.

ACUTE CLAP.

As above.

Sp. II. GONORRHŒA VETUSTA.

Post gonorrhœam acutam, humoris mucosi, sine inflammatione, vel dolore, vel dysuria, ex urethra fluxus; non contagiosus.

Gen. XLIII. ABORTUS.

Fœtus immaturi enixus.

Gen. XLIV. STERILITAS.

Impotentia in mari, vel fœmina ad gignendam prolem.

Gen. XLV. AMENORRHŒA.

Menses, tempore quo fluere solent, vel solito parcius, vel non omnino fluentes, citra graviditatem.

Sp. I. AMENORRHŒA EMANSIONIS.

In puberibus, quibus post fluxus tempus solitum, menses non jam prodierunt, et cum simul variæ affectiones morbidæ adsint.

Sp. II. AMENORRHŒA SUPPRESSIONIS.

In adultis, quibus menses, quæ jam fluere solebant suppressæ sunt.

Sp. III. AMENORRHŒA DIFFICILIS.

In qua menses parcius, et cum dolore, fluunt.

Gen. XLVI. OBSTIPATIO.

Dejectio fœcum nulla, vel solito rarior.

GLEET.

After an acute clap, a mucous discharge from the urethra, without inflammation, or pain, or dysury; not contagious.

ABORTION OR MISCARRIAGE.

The birth of an immature child.

BARRENNESS.

Inability in man, or woman, of reproduction.

DEFECT OF THE MENSES.

The menses either do not flow at all, at their usual periods, or in too small quantities for the purposes of the economy of the female body.

RETENTION OF THE MENSES.

In ripe virgins, a total deficiency of the menstrual flux, with various morbid symptoms.

SUPPRESSED MENSTRUATION.

A total suppression of the menses in those who have once had them regularly.

DIFFICULT MENSTRUATION.

A paucity of the menstrual flux, accompanied by pain.

CONSTIPATION.

Either no discharge of feces, or so seldom as to be inconsistent with health.

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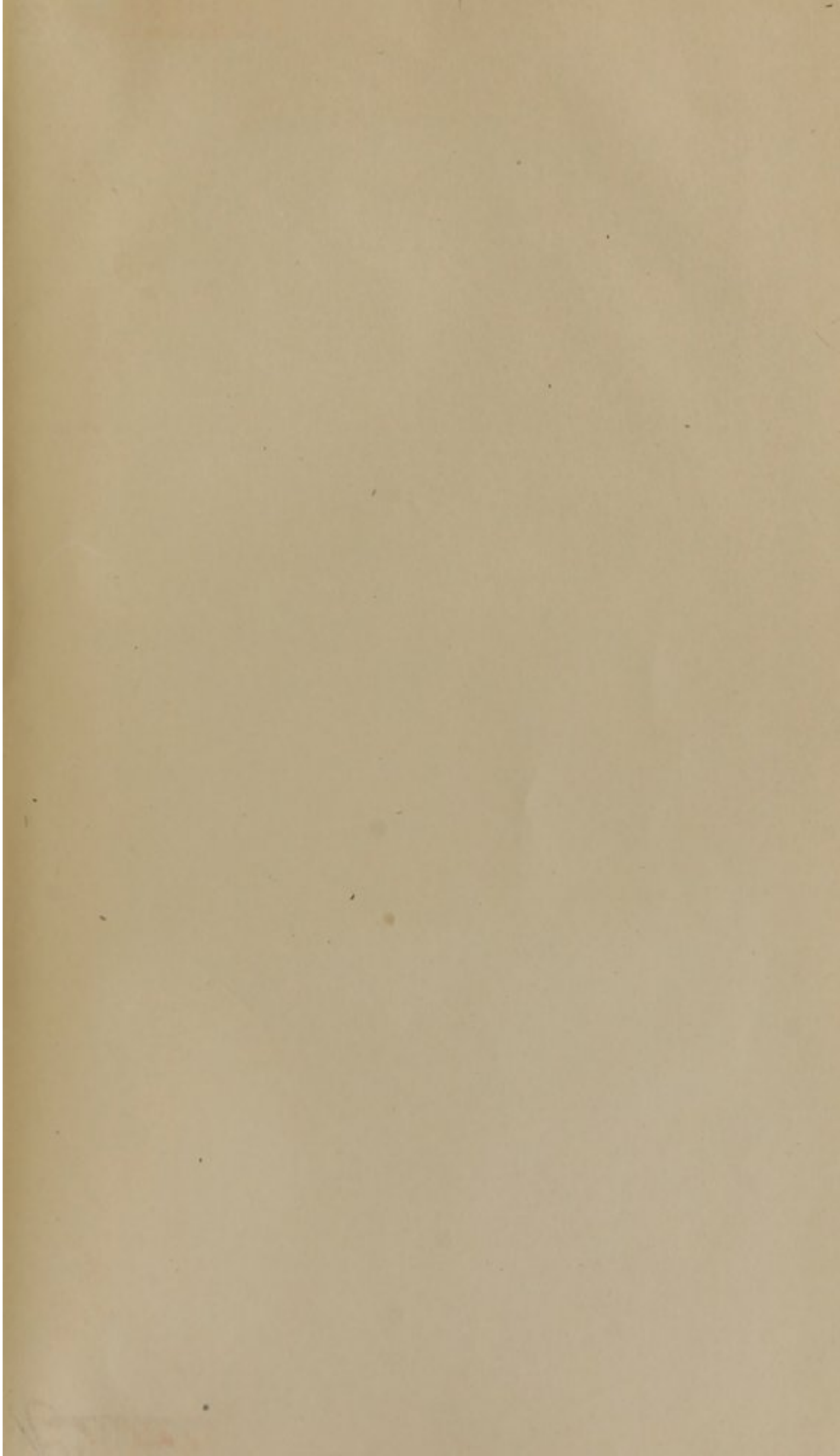
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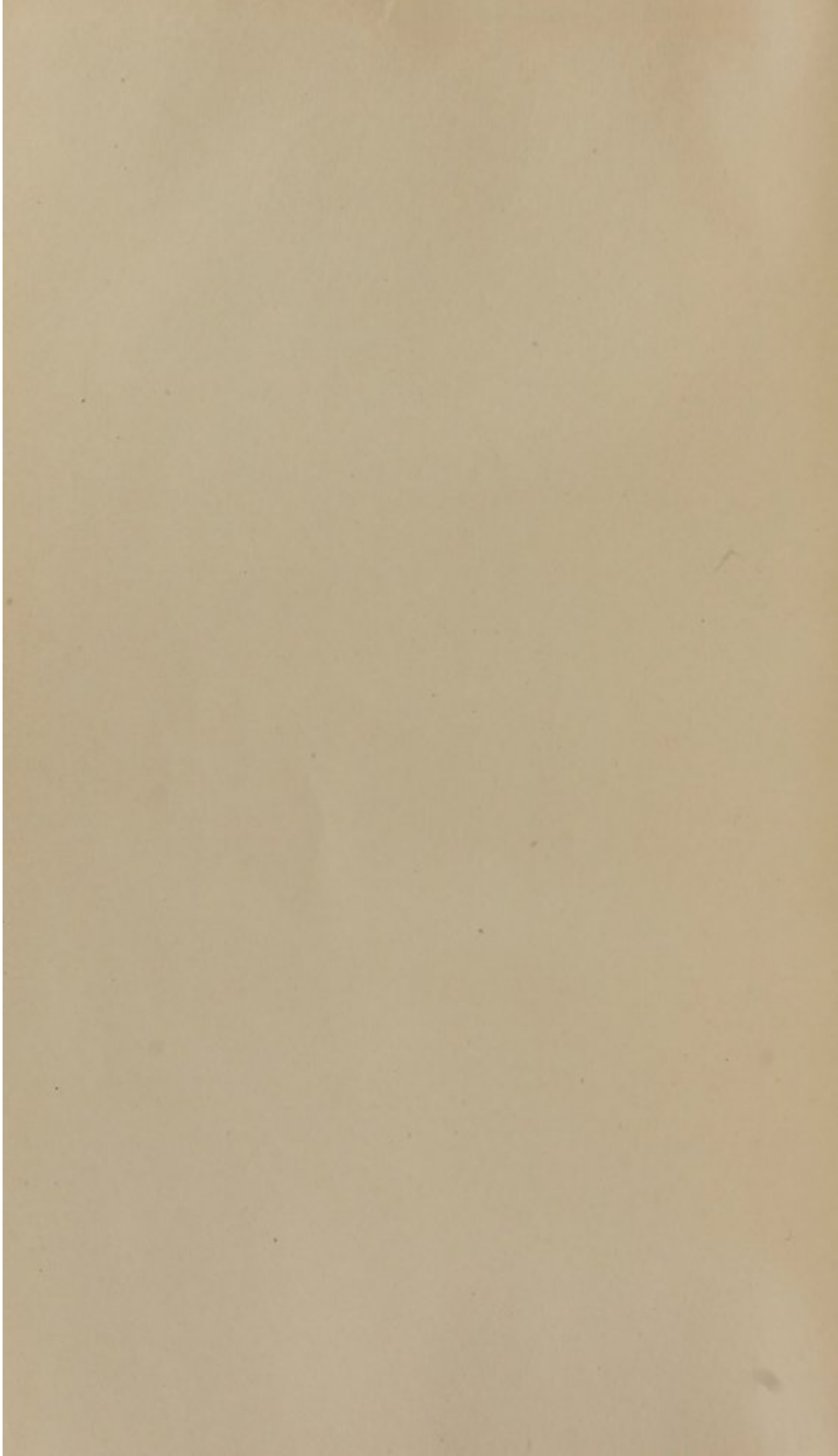
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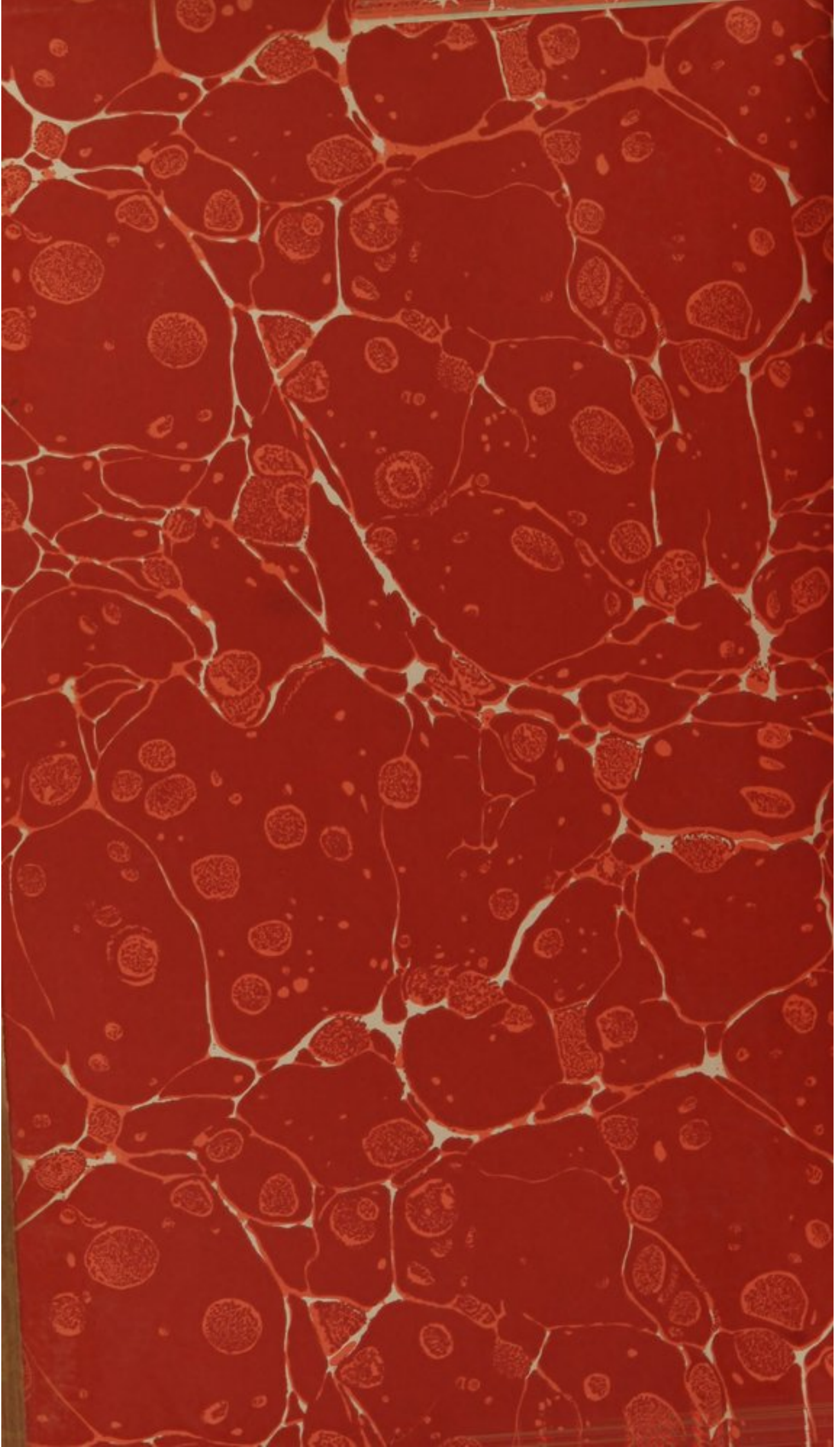
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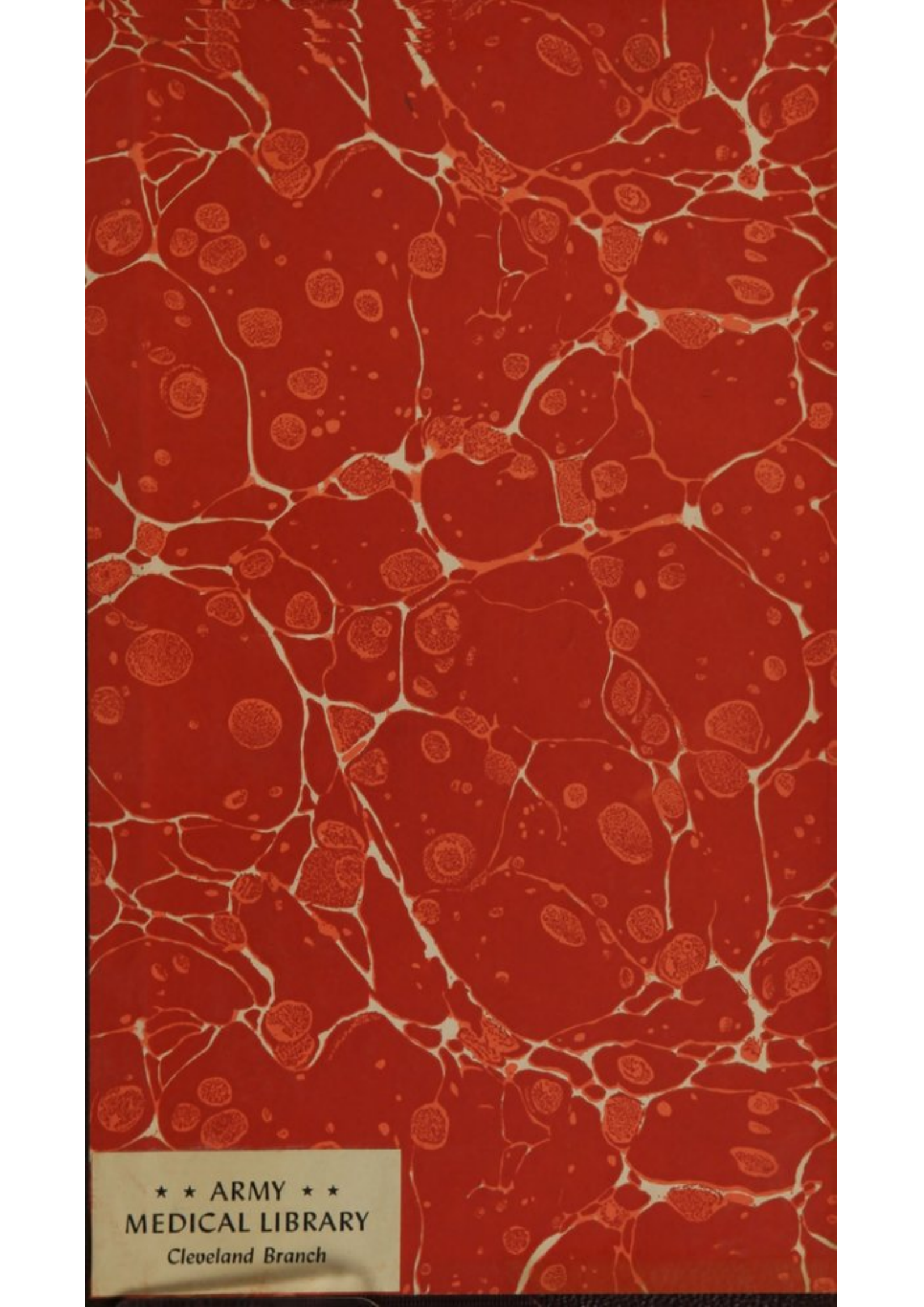
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