

**The history of the yellow fever, with the most successful method of treatment / by Joseph Mackrill, M.D. several years resident of the West-Indies.**

### **Contributors**

Mackrill, Joseph, 1762-1820.

Hayes, John, 1757-1822

Potter, Nathaniel, 1770-1843

National Library of Medicine (U.S.)

### **Publication/Creation**

Baltimore : Printed by John Hayes, in Public-Alley, MDCCXCVI [1796]

### **Persistent URL**

<https://wellcomecollection.org/works/bt8p47cq>

### **License and attribution**

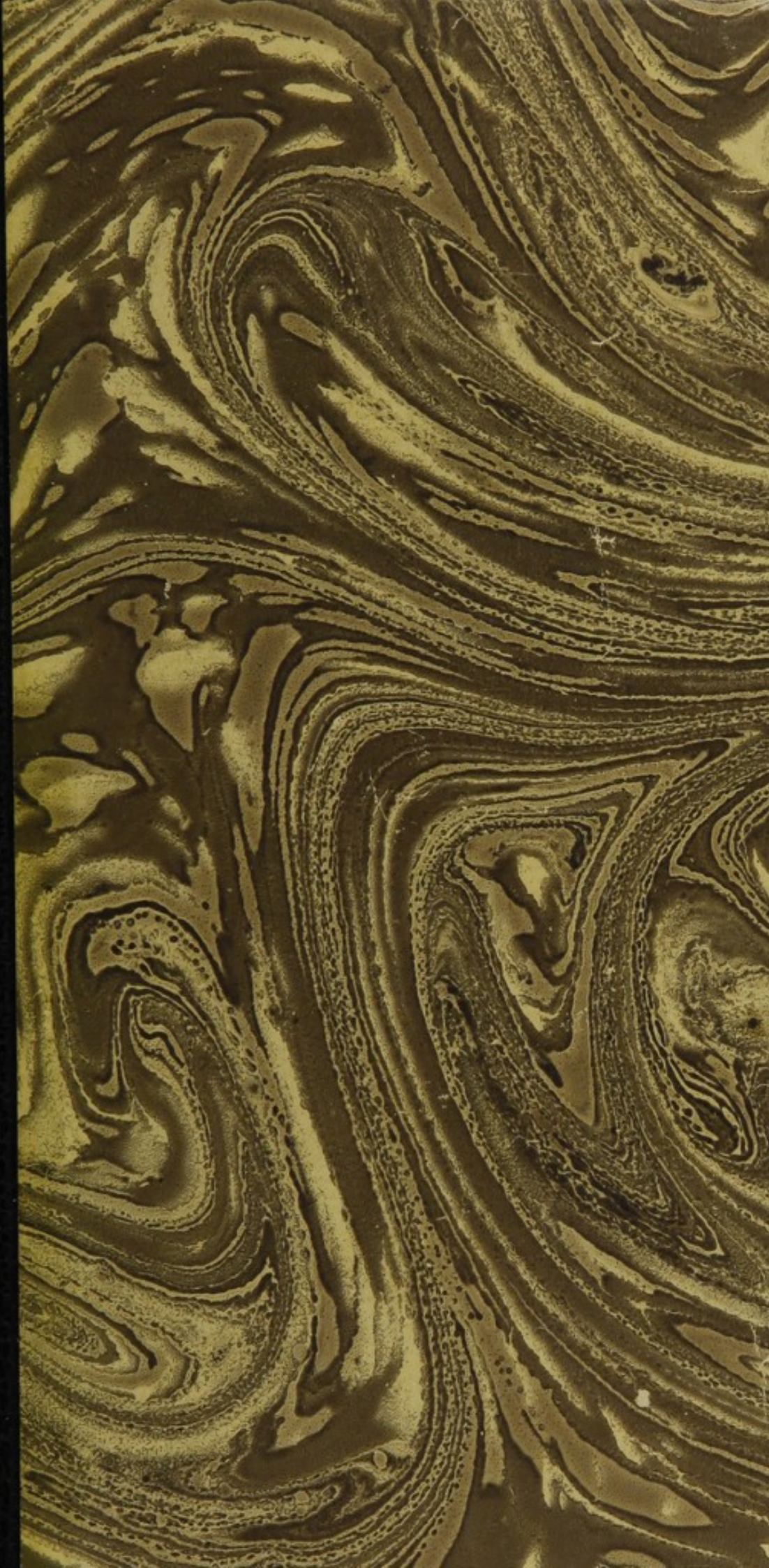
This material has been provided by This material has been provided by the National Library of Medicine (U.S.), through the Medical Heritage Library. The original may be consulted at the National Library of Medicine (U.S.) where the originals may be consulted.

This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.

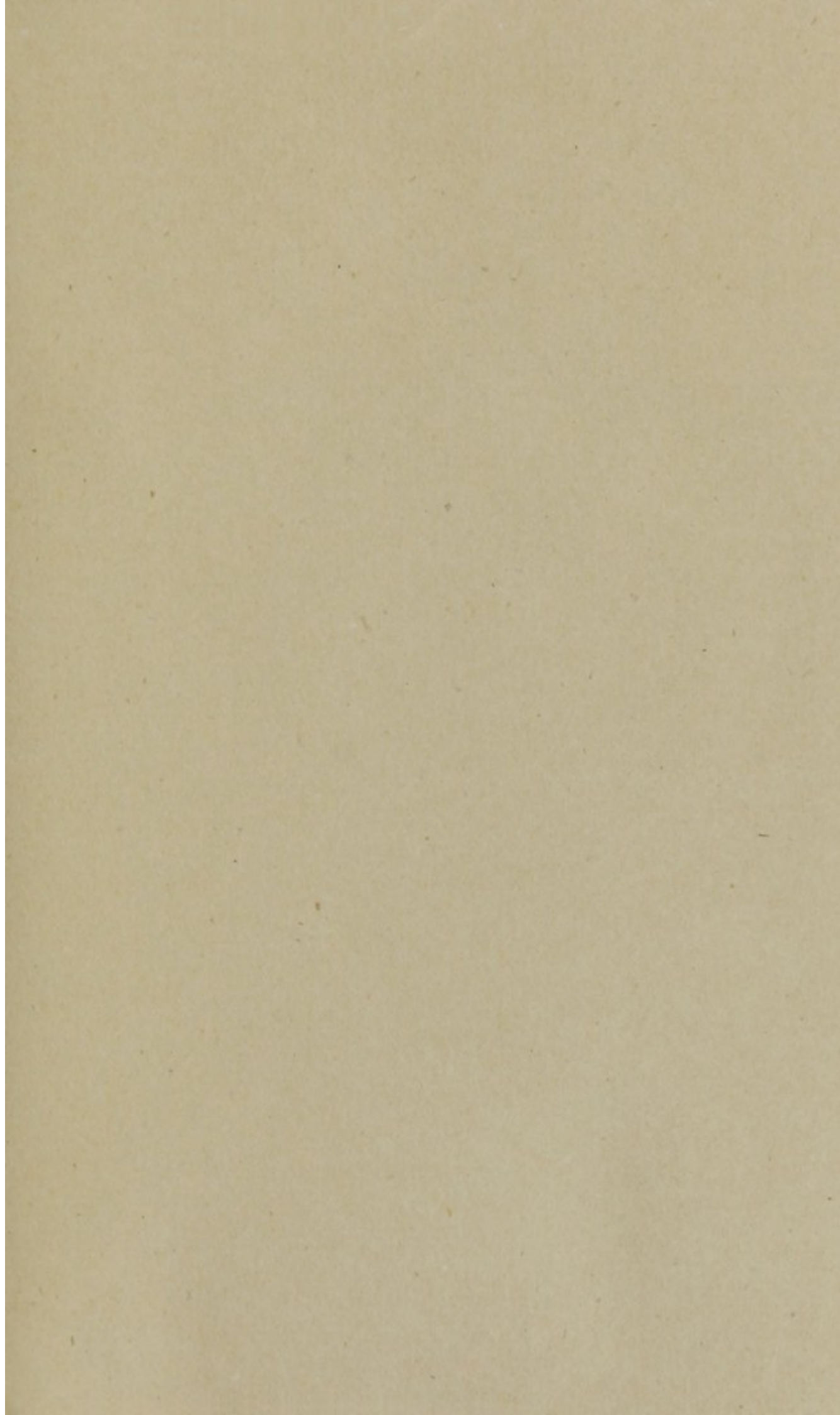
**wellcome  
collection**

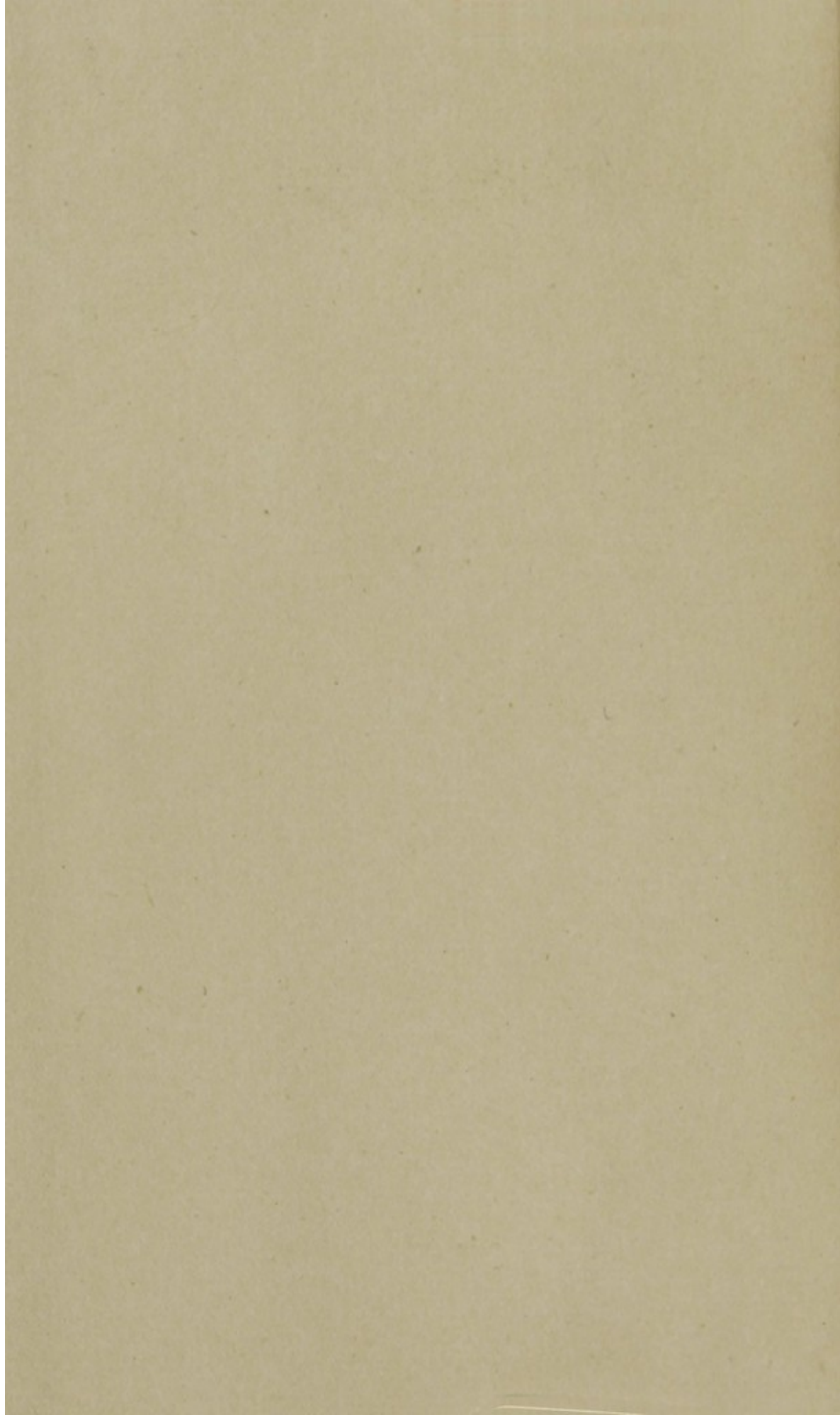
Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>



NATIONAL LIBRARY OF MEDICINE

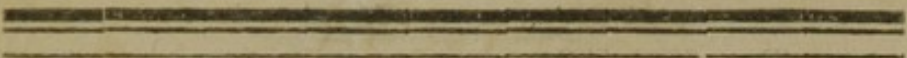
Bethesda, Maryland



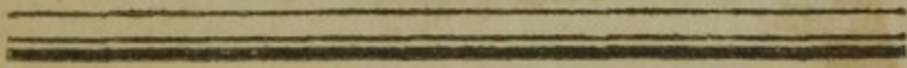


1

*[Redacted handwritten text]*



THE  
HISTORY  
OF THE  
YELLOW FEVER, &c.



THE

HISTORY

OF

THE

25

THE  
H I S T O R Y  
OF THE  
*YELLOW FEVER,*  
WITH THE  
MOST SUCCESSFUL METHOD  
OF  
T R E A T M E N T.

---

By JOSEPH MACKRILL, M. D.  
SEVERAL YEARS RESIDENT OF THE WEST-INDIES.

---

---

---

*“ Quæque ipse miserrima vidi et quorum pars magna fui.”*  
—VIRG.

---

---

BALTIMORE:

PRINTED BY JOHN HAYES, IN PUBLIC-ALLEY.

---

M DCC XCVI.



---

Published according to Act of  
Congress.

---

# DEDICATION.

TO THE CITIZENS OF BALTIMORE AND  
FELL'S-POINT.

GENTLEMEN,

*HAVING* lately escaped from the destructive ravages of war in the West-Indies, I cannot but feel a lively sense of the many blessings I enjoy, as an inhabitant of the republic of peace. Under this impression, I sit down with a heart full of gratitude, to offer my best endeavours, to exhibit in its true colours, a disease which has lately consigned many valuable citizens of the United States, to an early grave, and to point out the most efficacious means of combating this cruel usurper—The disease is the *YELLOW FEVER*. Having lived several years in the West-Indies, as a Practitioner of Medicine, upon a pretty extensive scale, I have had abundant opportunities of making myself well acquainted with it. The fruit of my experience, I humbly offer as a testimony of my best wishes for your welfare and prosperity.

J. MACKRILL,

GARRISON-FOREST, July 18, 1796.

---

---

THE  
H I S T O R Y  
OF THE  
*YELLOW FEVER, &c.*

---

---

I MUST beg the excuse of my brethren of the faculty, in not having dressed my language in the technical garb, usual upon these occasions, having carefully avoided hard words, that my subject might be perused with ease, by intelligent persons of all descriptions; considering it of consequence, that a treatise on a public malady, should be written in the vulgar tongue.

I beg leave to request the attention of my reader, in the most particular manner, to the few following observations, as they may serve to  
clear

clear away an error which has uniformly created much mischief in the treatment of the Yellow Fever.

However my opinion may differ from that of many of my most respectable brethren, I have at least one consolation, that a conformity to it, if it even were erroneous, would be attended with no ill consequences.

The disease in question is, perhaps, with accustomed propriety, termed YELLOW FEVER; but that it is the common Yellow Fever of the West-Indies, I take upon me to deny. Convalescents from the Yellow Fever, for many years past, have been constantly in the habit of visiting the shores of the United States, for the change of air; but I never could learn that it was ever deemed dangerous to take such passengers on board of vessels, the crews of such vessels did not catch the disease, nor was quarantine ever thought of when such vessels arrived—Nay, the very cloaths of such convalescents, which are known always to secrete a vast portion of contagious matter, would have been abundantly sufficient to communicate the disease; but

no instance of this can be traced—It is necessary that the reader should understand, that I allude to the situation of things previous to the year 1793.

Confounding this disease with the West-India Yellow Fever, has been the rock against which, to my own knowledge, the lives of thousands have been lost. In the year 1793, when this fever raged with such unheard of violence in Philadelphia, Dr. *Stevens*, a Physician of most distinguished eminence in the West-Indies, happened to be in the city. Viewing the disease as the common Yellow Fever of the West-Indies, with great propriety, he administered the remedies he had always found efficacious in such cases, such as the bark, wine, &c. These medicines were, however, found to produce the most mischievous effects; but no man can pretend to say, that such applications as bark and wine, are improper in the West-India Yellow Fever, since they are known to almost every indifferent person in that country, as his sheet anchor; neither can any man say it was an anomalous appearance, which the disease put on in consequence of a difference in climate, &c. since the self-same disease,

ease,

eafe, which prevailed in Philadelphia, in the year 1793, prevailed at the fame time in the West-Indies, and required the self-fame treatment. The fact is, that in the summer months, the West-Indies and the United States, are pretty much upon a par as to climate ; but all contagious difeases, which have a putrid tendency, will ever rage, with ten fold violence, amongst a people whose constitutions have juft before been wound up to a high pitch of health by cold weather : Thus I have uniformly observed in the West-Indies, that many of the fun-dried constitutions of the Creoles, would seem to run no risque of taking the difeafe, at the fame time, that every stranger, whether American or European, no fooner fat his foot on shore, but he was almost as instantaneously attacked with the difeafe, more particularly if his countenance discovered any thing like the effence of roast beef.

During two years in which I attended in the capacity of Phyfician to the military hospital of Trinidad, the years 1788 and 1789, cafes of the Yellow Fever were very common, and no patient had the smallest chance of recovery without a plentiful use of bark and wine; but no  
difeafe

disease like this in question, ever made its appearance in that island till the year 1793, when great numbers were hurried to the grave by it; nor does the memory of man furnish an example of general mortality in the West-Indies, by any means to be compared to that of 1793, occasioned altogether by this cruel disease. It continues still to rage, but is happily brought so much within the reach of medicine, that few, comparatively speaking, die of it.

Having denied that this fever is an original production of the West-Indies, I shall proceed in the next place, to give the reader what I conceive to be the true history of the disease.

Early in the summer of the year 1793, being accidentally called to Grenada, to visit a sick brother, I had an opportunity of seeing the disease for the first time; a large slave ship belonging to Simmon and Hankey, of London, had just before arrived from Africa, on board of which, a few days after her arrival, a most alarming species of Yellow Fever made its appearance—every white man on board died of the disease. It was soon communicated to the  
inhabitants,

inhabitants, and great numbers fell victims to its rapacity, particularly those who had lately arrived from Europe, hardly one of whom survived it. It seems that the contagion had remained inert during the passage of the ship from Africa; but no sooner did she arrive than it burst forth with all its horrors, for here it found, in a great measure, its own proper *nidus*, its own nutritious *pabulum*, in the close heated atmosphere so frequently prevailing in Grenada.

From this island it was quickly disseminated throughout every part of the West-Indies, and was then, for the first time, brought into the United States; in short, the whole western world was arrested by this cruel tyrant, in as short a time as it could be carried from one place to another. Wherever it met with a sickly unwholesome atmosphere, it prevailed with incredible acrimony; but where an island, from its particular situation, was more healthful, its influence was not so violent. I attended three persons on board the vessel which carried me from Grenada to St. Eustatius, all of whom died, and I had nearly fallen a victim to it myself. I had occasion to remark, that although



many persons died of the disease in St. Eustatius, they were, in general, those who brought it with them from some other island. I observed but few instances of its communication with the inhabitants, except with those who had lately arrived from Europe or America, scarcely one of whom escaped. That its influence was not so powerful in 'Statia may be easily accounted for: The island is little more than a dry rock, and is most commonly visited by brisk winds, which pervade every hole and corner of it, in consequence of which there is not, I believe in the world, a more healthful spot; witness the number of its old native inhabitants. The disease put on so much the appearance of the common Yellow Fever, that the physicians in the West-Indies, were naturally induced to treat it as such; but a total want of success obliged some of them to alter their plan, and although some few physicians were endowed with a portion of that intuitive knowledge, which so eminently distinguished Dr. *Russ*, in his treatment of this disease, by far the greatest number persevered in the old system, and destroyed all before them.

I have read Dr. *Russ*'s Treatise on the Yellow  
low

low Fever, with much satisfaction: A noble vein of philanthropy pervades the whole work, and the readiness of his powerful and salutary applications, at a moment's warning, discovers an almost instinctive knowledge of medicine. The successful mode of treating this disease in the West-Indies, is very similar to that of Dr. *Russ*, though differing in some essential particulars, which I shall presently have occasion to take notice of.

Whoever in the West-Indies, was subjected to the mode of treatment hereafter to be laid down, provided the disease was recent, seldom died, and with a little extraordinary care and attention, I found that the disease was much more easily managed than the common Yellow Fever.

Thus have I attempted to fix the head quarters of this most tremendous scourge; with what success the unprejudiced reader must determine; but let him call to his recollection, that before the year 1793, no such disease as this in question was known, either in the West-Indies or America; that it made its appearance in both countries nearly at the same time; that

since that year it has every summer been imported to some part or other of the United States, and raged with much violence, whether the summer was wet or dry; and lastly, that the people are now thoroughly convinced of the necessity of avoiding communication with those infected with the disease.

If then it should be agreed with me in opinion, that the late Yellow Fever was originally imported from that pregnant source of all contagious diseases, Africa, no worse consequences can arise from such a coincidence, than, that in believing the disease to be imported, every precaution respecting quarantines, will be most rigorously enforced, and in believing that a stinking confined air, becomes a nursery for contagious diseases, of all descriptions, every exertion will be made in the different towns to remedy so great an evil.

It is now become of the utmost consequence, that the legislature of each state, should think very seriously of the business of quarantines. Independent of the disease in question, there is another motive for keeping the strictest look out,  
which,

which, till lately, did not exist. Our affectionate parent, whose attention to the prosperity of his ungrateful children, is unremitting, has, in spite of opposition from the factious and disaffected, procured for them the blessings of peace, and a friendly intercourse with all the nations of the earth. But we should, perhaps, rather view our alliance with the Turks, as a necessary evil; at all events, we should take every possible precaution, that our commerce with them does not bring us acquainted with that most dreaded of all evils, the plague. Our towns are not only the precise latitudes in which the plague is wont to rage, but there are so many local circumstances to give it every possible support, that, were it once to get a footing, so very subtle and insinuating is the contagion, that it would probably be very difficult to exterminate it. These local circumstances, it should, at all events, be the constant care of the police to remove as much as is in its power. The mud-holes, and pools of stagnant water, in confined situations, should be filled up; for whoever breathes the air of such noisome places, runs the risk, at best, of inhaling some troublesome disease. The streets in the warm season, might  
at

at a most trifling expence, be kept constantly watered, and regularly appointed scavengers should be constantly employed in removing dung-heaps and rubbish of every kind, from our streets, lanes, alleys and houses.

Quarantines should be conducted so as to give as little obstruction to commerce as possible. As soon as the vessel comes to an anchor, off the hospital, or place appointed, the most important object is to put ashore, as soon as possible, every kind of bedding, and every rag of cloaths, wherever it can be found. Dirty linen, of all things, is the most likely to secrete contagion. The sick should be immediately landed, that they may breathe a purer air, and the healthy should have as little communication with them as possible. The sick should be refreshed with clean linen, immediately, and their bedding and such cloaths as cannot be washed, should be burned; the hold of the vessel should be exposed, as much as possible, to the free admission of fresh air, and every cabin and corner well scrubbed with hot vinegar.

Nothing can be more necessary than that the  
healthy

healthy part of the crew should conduct themselves with great caution; they should avoid excesses of every kind, particularly drinking, and never expose themselves to the night air; their bowels should be rendered rather more soluble than ordinary, during the first forty-eight hours after landing. The commander of such vessel should be careful not to work any man who may appear indisposed, if ever so triflingly. I would recommend the perusal of *Mead* on Quarantines, where every particular direction is laid down with great accuracy.

It certainly is a great error to suppose, that negroes are not so liable to catch this disease as whites. This observation, so far as it relates to negroes living in Africa, may hold good. A disease which makes so much havock in this variable climate, probably does not affect the inhabitants of its own climate, in a more severe degree, than our own bilious autumnal fevers affect our inhabitants; but negroes born in America, and breathing the same atmosphere as the whites, their organization being allowed on all sides to be the same as that of the whites, must of necessity, be equally liable to receive contagious diseases. I

I now proceed to enter upon the most important part of my subject, viz. the method of treatment.

I am well aware, that a weak credulity on facts, has injured every science, but none so materially as medicine; that a heated imagination soon begets ideas, which it asserts with much zeal and authenticity, but which cool and mature reflection oftentimes stamps with incredulity. I shall, therefore, in this pursuit, proceed with the most cautious circumspection; I shall offer no speculations in theory, nor chimerical nostrums in practice; but confine myself, altogether, in laying down that particular method of treatment, which after many trials, I observed to be the most successful.

In all diseases, the intentions of nature should be watched with the most minute accuracy. The great Dr. *Sydenham* observes, that a physician is the servant of nature; but he is, probably, agreeable to the more modern opinion, with somewhat more propriety termed the consultant of nature. If, for instance, in the course of a dangerous fever, nature is preparing to  
form

form an imposthume, it is the duty of the physician to assist her in such intention, as the most certain means of relieving his patient; but it may happen that nature has fixed upon a wrong object, some vital organ she may have destined for the seat of this imposthume; under such circumstances, it is surely the duty of the physician, at all events, to divert her intention, to give his patient even a probable chance of recovery; thus is the physician styled the consultant of nature, rather than her servant, to follow in all cases, the track she points out. This observation, viewed in either light, cannot be too strongly impressed upon the mind of every medical man. If in the course of a fever, nature attempts relief by perspiration, the physician will best succeed by promoting that secretion.

In the first attack of the Yellow Fever, or by way of distinction, I think there would be no impropriety in calling it the *African Fever*, we find the pulse either tense and quick, or slow, with a degree of hardness, not altogether unlike that deceitful pulse usual in inflammations of the stomach. The physician acting either as the servant or consultant of nature, is atten-



tive to her operations; if the pulse are tense and quick, he will observe the countenance flushed, and the eyes turgid with blood; if nature is left to herself under these circumstances, hemorrhagy is generally induced; loss of blood is then the indication she plainly points out; if, on the other hand, the pulse, in the first attack, are slow and oppressed, the physician has yet a good rule for his guide. I never felt this slow, oppressed pulse, in the *African Fever*, unaccompanied with a degree of hardness, and I believe it is one of the very few philosophical rules in the practice of medicine, that wherever you find a hardness of the pulse, let other circumstances be what they may, bleeding is necessary. So great frequently is the engorgement of the blood vessels, in the commencement of this fever, that I have frequently been inclined to think the blood had a strong disposition to coagulate; under this idea I always avoided opium, the mischievous effect of which, in this disease, is perhaps to increase this disposition; neither has the blood that florid inflammatory appearance at the first operation, which you will find at the second; the vessels after the first drawing, becoming in some measure

liberated,

liberated, the blood has more room to circulate; and we consequently find the pulse much raised, and all inflammatory appearances apparently aggravated. The first bleeding, if the pulse are tense and quick, should be from a large orifice, and from eight to twenty ounces, according to the age and strength of the patient. If the pulse are as has been before described, slow, &c. they will generally rise upon the first discharge of blood, and let the quantity, in this case, be regulated according to the then existing state of the pulse. My own experience warrants me to affirm, that this last state of the pulse, provided it was observed at the commencement of the fever, requires a more liberal use of the lancet, and is always attended with more danger than when the pulse are tense and quick.

The physician should, if possible, see his patient at least in four hours after the first bleeding. The pulse are now his best guide; does he find them yet tense and quick, or yet slow, with a degree of hardness, let him repeat the operation, and continue to repeat it at least every four hours for the first twenty-four hours, unless the pulse should become soft and moderate,

and the violent pain of the head should be much abated. The pain of the head, in this disease, is very uncommon, and appears to me to be very similar to that which so remarkably characterizes the true puerperal fever.

Immediately after the first bleeding, the patient should take a purgative medicine, composed of equal parts of fresh Jalap, finely powdered, and Cream of Tartar, thirty grains of each, in general cases, varying the quantity as the judgment may direct.

By attending to this method of bleeding, in the first instance, that obstinate constriction of the bowels, which is certainly the consequence of inflammation, will not take place, and the necessity for using violent drastic purges, will in a great measure be obviated. The purging plan in America, has generally been adopted previous to bleeding. Experience obliges me to differ from it; the sanguiferous system is the seat of the disease, and should be relieved as expeditiously as possible. Indeed, nature calls for it in the most peremptory tone. If I had an opportunity of attending my patient, at the commencement

mencement of the fever, I generally had the satisfaction of seeing him out of danger in twenty-four hours. The most agreeable drink, I usually found to be dulcified spirits of vitriol in water. The patient should have every advantage of cool air, and let it be remembered, that so long as the skin continues hot and without moisture, there is not the least danger of exposing it to a cool draught of air; on the contrary, it surprisngly refreshes the body, and affords the most comfortable relief; but as soon as perspiration takes place, air should be applied with more caution.

If the fever has existed two or three days before medical assistance is called for, the treatment will differ greatly, and its success is become very doubtful. You will now find the opportunity for large bleeding lost; but let the physician carefully examine the pulse, and if he yet finds any hardness in it, he may venture a general bleeding. If the general inflammatory symptoms have subsided, he will, notwithstanding, find great congestion of blood in the head, and every topical mode of relieving the vessels of the head, should be had recourse to; the tem-  
poral

poral arteries should be immediately opened, and leeches applied to the hind part of the head. If the fever has been allowed to proceed as far as this second stage, it becomes more fixed, and takes greater hold of the constitution, and the patient, if he does recover, frequently continues a valetudinarian for a length of time; in this particular stage of the disease, I was always anxious to apply, as expeditiously as possible, a seton in the nape of the neck; it often happened, I confess, that my patient died before the seton could digest; but there were many lingering cases which appeared to owe their successful termination to this application. The bowels must be opened, and here lies the greatest difficulty; the stomach is now inflamed, and extremely irritable; a large blister should be immediately applied to its region, and let twenty grains of strained opium, finely powdered, be mixed with the flies, which will most effectually prevent that painful attendant on blisters, the stranguary, and this may serve as a rule in all other cases, where this symptom is dreaded. Glysters composed of strong soap-suds and table salt, should be applied frequently, with a pewter syringe; if a bladder is used in this operation,  
the

the glyster will have no effect. Let the following purge be given as early as possible: Take of Calomel, ten grains; Jalap, thirty grains; Salt of Tartar, ten grains; mix it in any thing agreeable, and repeat it every four hours till it operates.

It will frequently happen, that the physician is not called in till the fever has made yet farther advances: I am sorry to say, that in this situation, little is to be expected; however, some instances of recovery I have been witness to; local bleeding from the nose or temporal artery, be the quantity ever so small, will afford relief; blisters in this stage, without opium, should be applied to the region of the stomach and nape of the neck; the purge above-mentioned, should be used, and if a passage can be obtained, there is yet some chance, and let the bark be used in the following form: Take of the best pale bark, one ounce; soluble Tartar, half an ounce; Huxham's tincture, one ounce; water, half a pint; let this mixture be given by spoonfuls, as much as the stomach will bear. Glysters composed of a strong decoction of bark and Castile soap, will be found very useful. If in the course of the  
fever

fever any intermission takes place, it is always favorable; if the bark passes freely through the bowels, when first applied, success may be expected, and this effect may be moderated at pleasure, by the addition of three or four drops of laudanum.

Emetics of all kinds, should be carefully avoided, and every preparation of antimony. The *nausea* induced by antimony, when intended only to promote perspiration, in all fevers which have a putrid tendency, I have found very frequently fatal, always dangerous; I have also had frequent occasions to observe in this fever, that nitre was extremely mischievous.

I would earnestly recommend to all those who are obliged to live in the neighbourhood of this disease, temperance, soberness, and chastity; to avoid, as much as possible, a draught of air in a confined situation, during all the hours in which the sun is absent; the bowels should, at all events, be regularly opened once in twenty-four hours, and for this purpose, if there should be occasion for medicine, I would universally recommend good common magnesia. All purges

ges which in any degree ruffle the stomach or bowels, should be avoided, when taken as preventives.

The loss of a little blood, in such as are of a full plethoric habit, will be proper; but to those of a contrary temperament, prejudicial.

The West-Indies have of late years, been uncommonly fatal to the young men of America; I would recommend to all persons on their arrival in the West-Indies, to avoid, as much as possible, the too common custom in that country, of drinking a great deal of wine; on the contrary, to live as temperately as possible, and always to be aware of the poison contained in a calipatch of turtle; they should always be provided with a quantity of good common magnesia—I mention common magnesia, because I am sure it is infinitely preferable to the calcined; the bowels should be gently purged with this medicine for the first few days, one large table spoonful, night and morning, in a little water, will be sufficient. This simple medicine will be sufficient for all the purposes of guarding against sickness, and is, in my opinion, infinitely preferable



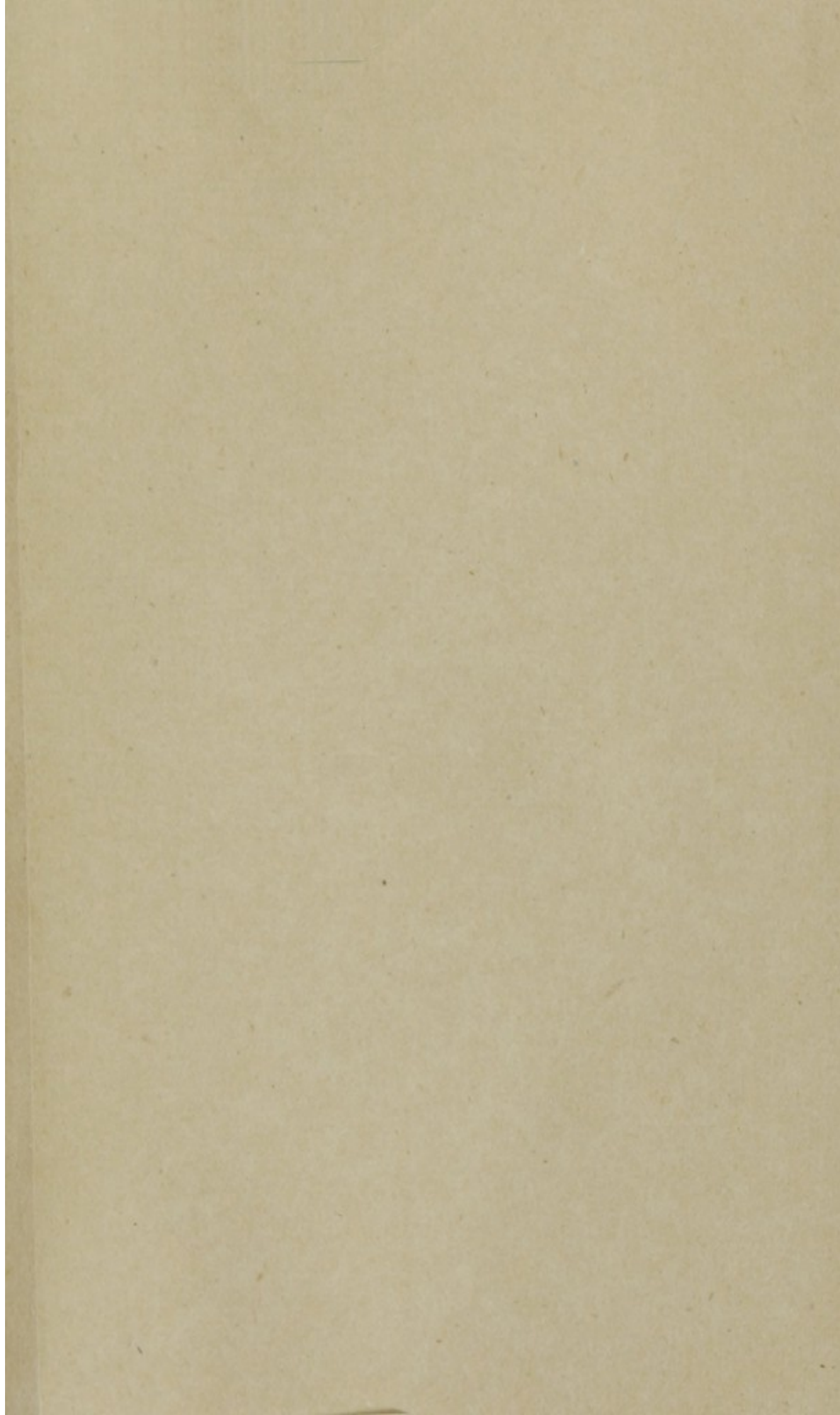
preferable to all other medical contrivances; Cream of Tartar beverage, is almost universally recommended. I have uniformly observed, that Cream of Tartar answered a very good purpose, if used only now and then; but if used for a continuance, it induced frequently, weakness of the stomach or bowels.

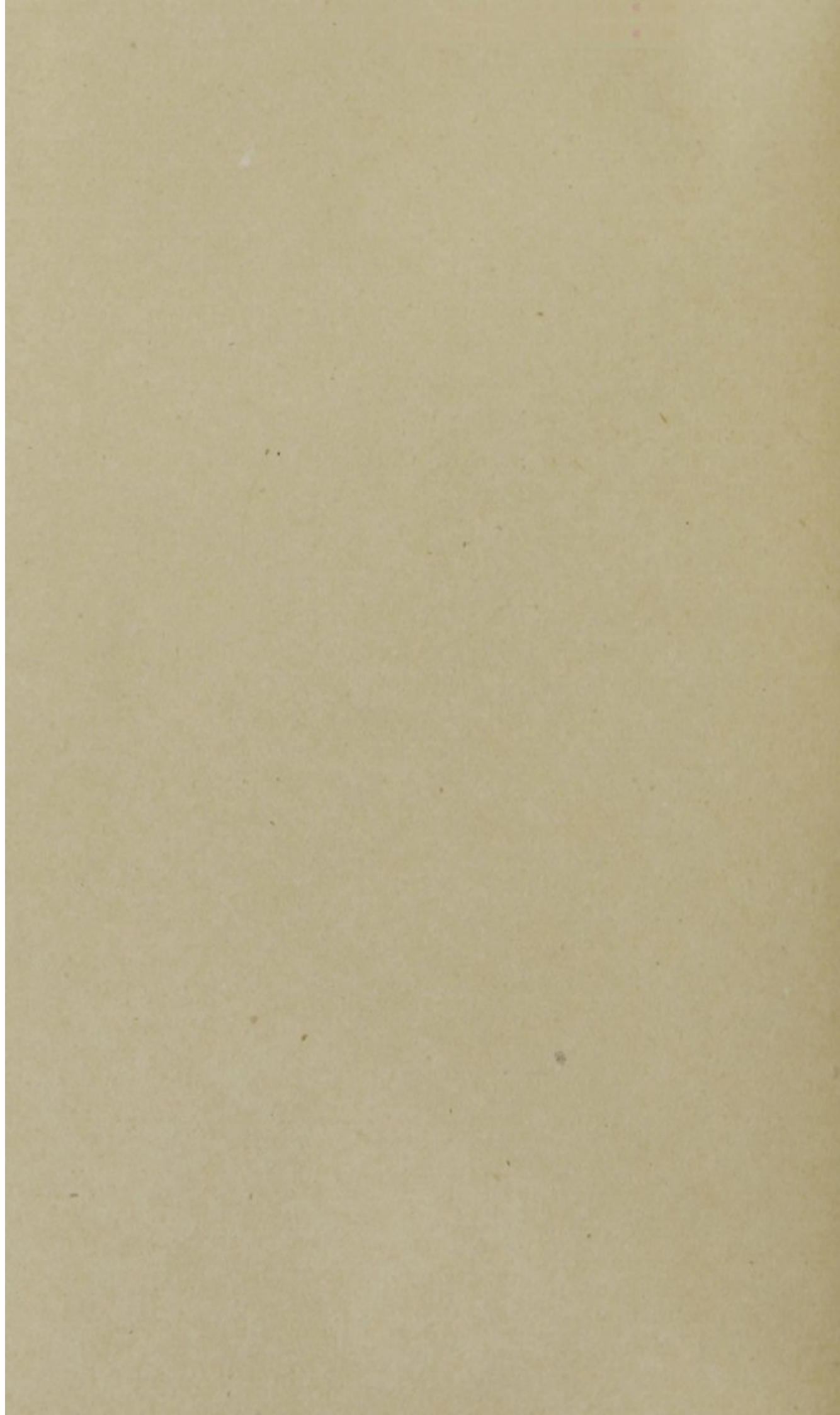
I have nothing farther to add, from my own experience, in the treatment of this disease; what respects diet, and a variety of essential *minutiae*, have been much more ably handled than I am capable of, in Dr. *Russ*'s excellent treatise on the Yellow Fever, which needs not my recommendation.

In the course of this little work, I have advanced nothing but what has fallen under my own observation, considering it the duty of every man to come forward, if his avocations in life, have furnished him with any opportunities of contributing, if in ever so trifling a degree, to the alleviation of a public calamity.

---

F I N I S.





Book taken apart, leaves deacidified with magnesium bicarbonate. All leaves supported with lens tissue. Resewed on linen cords with new all-rag end paper signatures, unbleached linen hinges & hand sewed headbands. Rebound in quarter Russell's oasis moreoce with hand marbled paper sides & vellum corners. Leather treated with potassium lactate & neat's foot oil & lanolin. June 1977.

Carolyn Horton & Assoc.  
430 West 22 Street  
New York, N.Y. 10011

Med. Hist

WZ

270

M159h

1796

c. 2

