

## **Reply of William A. M'Dowell to Dr. Yandell's rejoinder, in a controversy relative to cure of consumption.**

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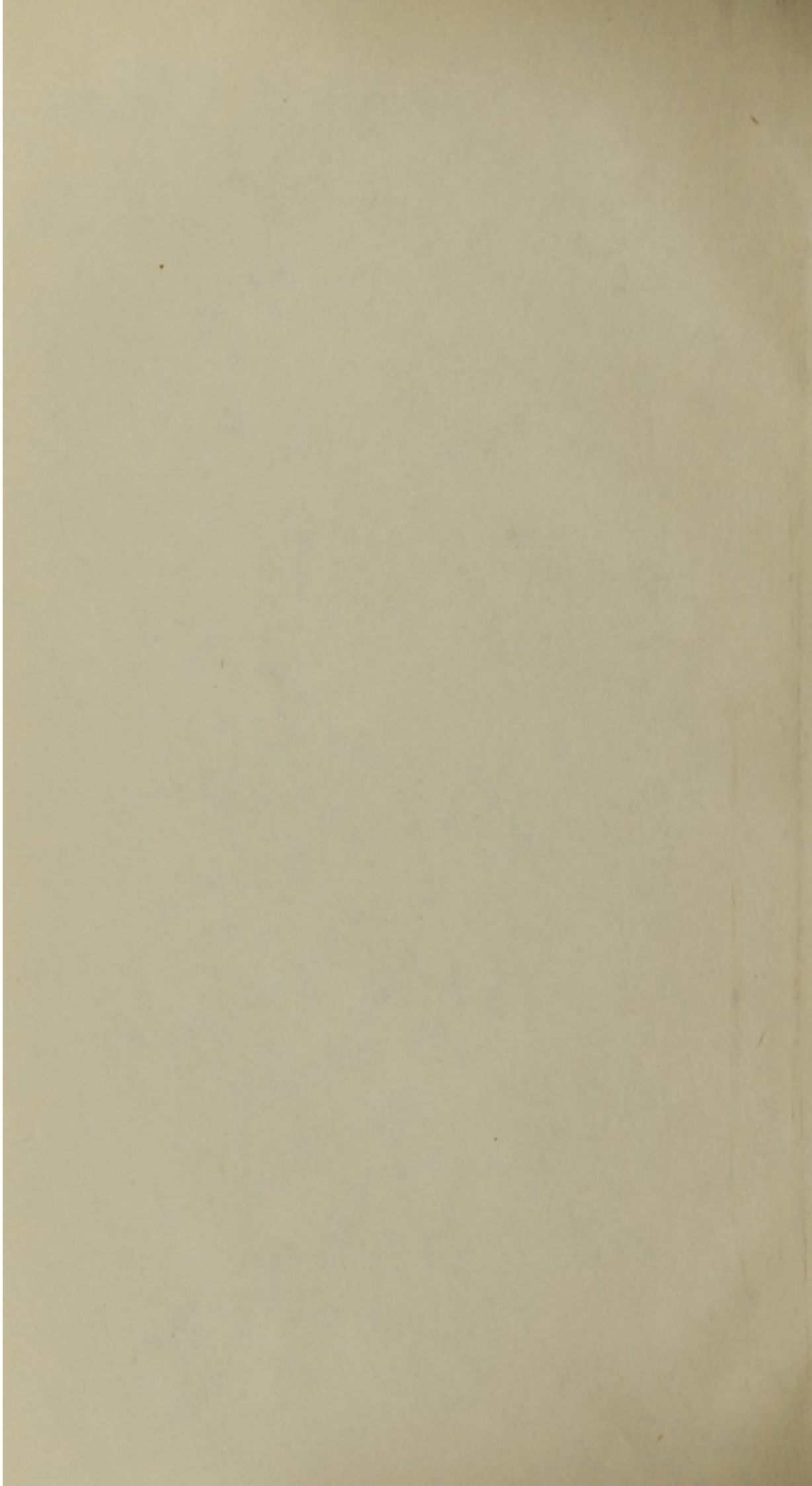
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M'DOWELL (W<sup>m</sup> A.)

J. W. W. Gerhard

REPLY

OF

WILLIAM A. M'DOWELL

TO

DR. YANDELL'S REJOINDER,

IN A CONTROVERSY RELATIVE TO

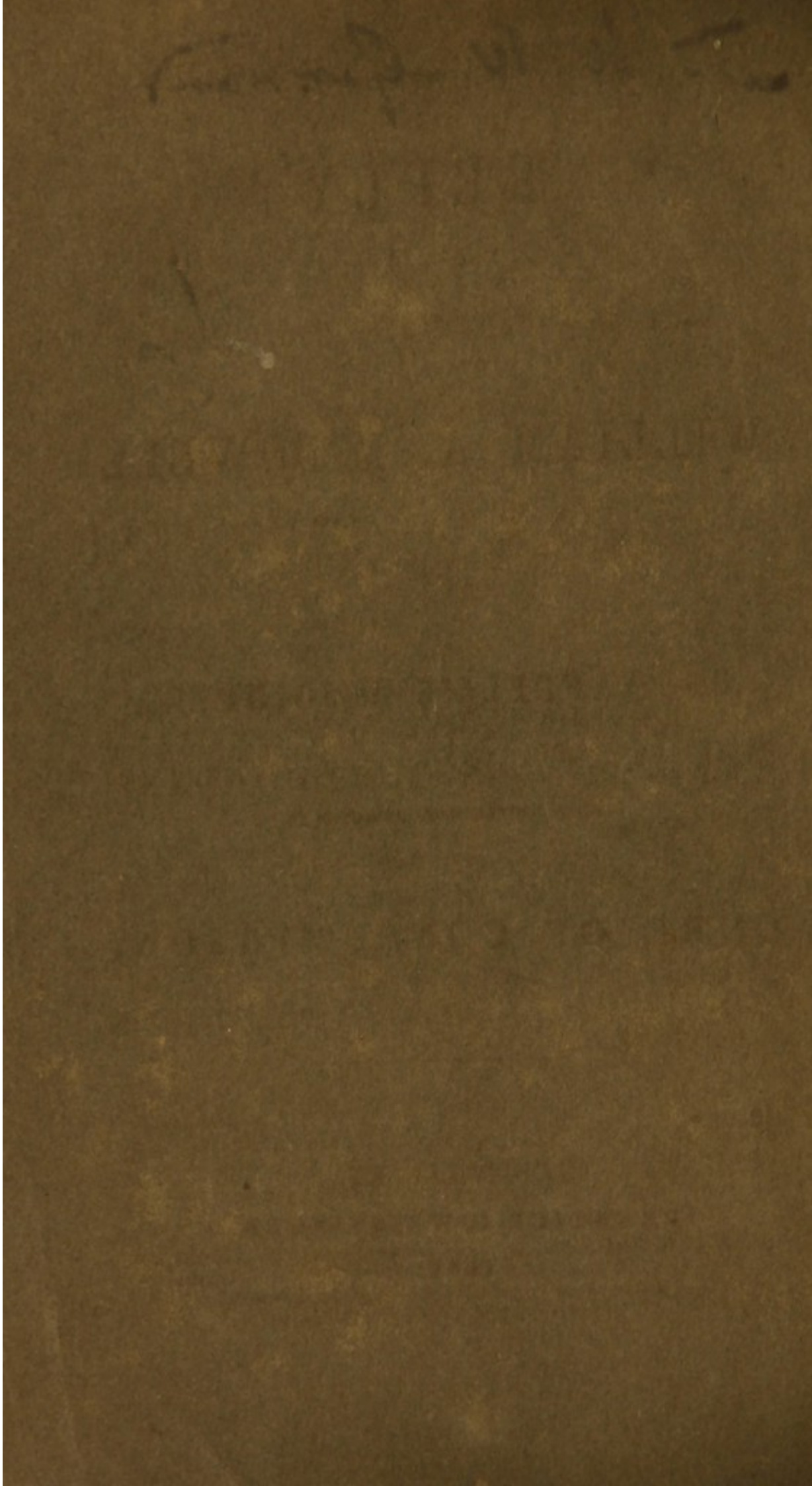
CURE OF CONSUMPTION.

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LOUISVILLE, KY.

PRENTICE & WEISSINGER.

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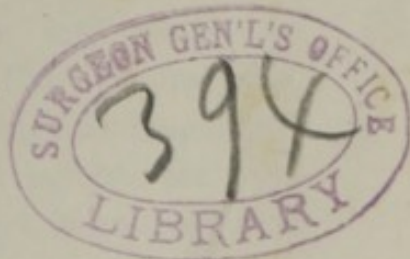
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## WM. A. M'DOWELL'S REPLY,

TO

DR. YANDELL'S REJOINDER.

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In the October number of the *Western Journal of Medicine and Surgery*, Professor Yandell serves up to his readers a second notice of "Dr. McDowell, and his pretensions to cure consumption," which I am sorry to say is neither better adapted to impart valuable information nor less disfigured by false statements than his first. But for these falsehoods—derogatory at once to my character as a man, and to my skill as a physician, which he has travelled out of his character of reviewer to interpolate—no notice whatever would have been taken by me of either of his articles. In my exposure of his covert insinuation, that I had practised a fraud on him, with intent to impose upon the public, with regard to "a list of the names of 84 cases," I, in my answer, nailed the insidious falsehood to the counter, I thought, with a peculiarly delicate regard for his feelings; yet, in this, his second assault, he marvels that I deemed this knavery of his, "worthy even of several notes of admiration." This, changes admiration into wonder!—whether the man is more knave or fool!! Can it be possible, that he actually is ignorant of the import of his own language?\* If so, I retract my charge that he reviewed my treatise without reading it, and readily admit he may have thoroughly read without comprehending it.

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\* Relative to his editorial notice of the above list of 84 cases, he says: "From its phraseology readers have been led to suppose that the editors of this Journal had in their possession decisive testimony to the efficacy of Dr. M'Dowell's mode of treating consumption."



In refuting misstatements in this his second notice, I shall endeavor to speak more plainly, and in terms better adapted to his comprehension. Yet, not even on this, nor on any account can I descend to the indelicacy of calling the gentleman a liar, but my duty will compel me to prove him one.

“Dr. M'Dowell,” says he, “claims to cure consumption in all its stages. A few years since he professed to have effected a radical cure in a young lady of this city. Some time subsequently the lady died of another disease, and Dr. M'D. carried her lungs to a club of medical gentlemen in the city, to demonstrate the case. They were carefully dissected before the club, but not a vestige of Tubercular disease could be detected—not the slightest trace of ulcer cicatrised. The club remembered that cicatrices had been found in the lungs many years after the healing of an ulcer, and the president asked Dr. M'D. how he accounted for their absence in his case? “*Cured so completely*” was his answer, “*that no cicatrix remained.*” A very intelligent member replied, that he could as easily believe that “*a pig's stump tail would grow out again,*” and our readers will agree with him, that one event is just about as probable as the other.”

“Another case, and equally illustrative of Dr. M'D.'s skill in diagnosis. A lady, far gone in consumption, became his patient, after a number of physicians had pronounced her case hopeless. He assured her husband, a short time before she died, that he had succeeded in *removing the tubercles* from her lungs—not a tubercle was to be disclosed by the *post mortem* examination; this was his prediction. What were the facts, as witnessed by several of the most eminent physicians in the city. One lobe of the lungs was occupied by a *tuberculous mass that would have filled a man's two hands*, was but little else than a mass of tuberculous matter; and the opposite lobe contained two or three tubercles as large as a walnut! Of course, Dr. M'D. looked astonished.”

The above cases Dr. Y. informs me are those of the late Miss. Howe and Mrs. Willard.

In the last of those two cases all the allegations relative to my conduct and predictions are false, inexcusably false. By walking to Prof. Willard's, but a few squares from his own residence the gentleman could have obtained all the facts. He preferred to draw upon his imagination for them. So far from flattering the husband with such predictions; the digestive organs of my patient were known to him to have been so deranged for many weeks before her death, that it was but seldom any curative treatment could be prosecuted. In the time, I frequently availed myself of the Prof's eminent chemical abilities in furtherance of my work on consumption, which I was then preparing; and in the progress of which, he made repeated diagnostic analyses of Mrs W.'s sputa; and was to the end, as well aware of its tuberculous character as I was.

LOUISVILLE, October 3, 1844.

At the request of Dr. McDowell, I take occasion to say, that although I flattered myself at times with hopes of Mrs. Willard's recovery until within a few weeks of her death, yet I never had any doubt of the tuberculous character of her expectorations. Dr. M'Dowell had always represented her lungs as tuberculous; and her expectorations which I frequently examined during the summer, gave as clear indications as the distinctive characters admit, of the presence of pus and sometimes of softened, but hardly decomposed tubercle, in which characteristics the doctor and myself were entirely agreed.

The result of post mortem examination altered my views only in respect to the extent to which the right lobe of the lungs were affected. As the ulcerated portion upon that side was completely *filled* with the puss and softened tubercle *no pectriiloquism could be detected* on that side by auscultation. This, I think, was the declaration of *both* Dr. M'Dowell and Dr. Gross, who also examined her chest. On this account, I expressed the hope to some friends that the right lobes of her lungs were comparatively little, if at all affected. I hoped dur-

ing the summer, some months before her death, that the tuberculous expectorations might come from the left lobe in which Dr. M'Dowell had long before declared the existence of a tuberculous cavity, but in which there had been symptoms of healing early in the spring.

F. AUGUSTUS WILLARD.

There are also errors in the Prof's sketch of the first case. A plain tale will put these down; as such, I subjoin the entire case of Miss H., abbreviated from my note book.

CASE.—Oct. 27th, 1839: Visited Miss M. Howe. Her consumptive symptoms were first manifested in 1833; on account of which, she was advised to remove South. She accordingly in 1834, moved from Connecticut, the place of her nativity, to Cincinnati; where she remained until 1836; in which time, she had several severe spells, which she describes to have been characterised by hectic fever, and copious expectoration; between these, she had long intervals of amelioration, but gradually became more emaciated and weaker. In October, 1836, she removed to Louisville. In the spring of '37, was worse than in any preceding spell; these spells gradually became more intense, and the intervals shorter, until the date of my visit. I had been preceded in attendance, first by Dr. Galt, and then by Dr. Baum,\* who had successively abandoned her case.

I found her extremely emaciated, her form and aspect manifesting all the characteristics of the consumptive constitution; countenance pale and waxy, extremities dropsical, pain in the upper left side extending through to the shoulder-blade, with hectic fever, copious tubercular expectoration—which on several occasions contained solid tubercles from the size of a wheat grain to that of a pea—night sweats, and colliquative

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\* Neither of those gentlemen, the one the most accomplished and experienced physician in Louisville, the other the most celebrated practitioner in Kentucky, entertained any doubt that her disease was consumption, and they both informed me within the past week, that they ever since have been and still are of the same opinion.

diarrhœa; she had not menstruated for four months. Physical signs presented dull resonance on percussion from the region of the upper left lobe. Imperfect pectoriloquy, and rough and cavernous respiration from the same part, natural elsewhere over the chest. There existed manifest depression of the ribs over the diseased part. She was brought to bear tonic treatment in the course of the first week of my attendance, which she continued to bear with slight interruptions, together with increased nutritive character of diet, until perfectly restored. Menstruation recurred in January 1840. Before the end of February, every symptom and sign of consumption had disappeared, except exceedingly feeble respiration in the portion of lung which had been the seat of the disease. In June she had become as fleshy as at any preceding period of her life, and presented the appearance and the indications of health, which continued without any notable interruption—the feeble respiration above referred to and shortness of breath on taking exercise which was ascribed to the deficiency or crippled condition of this part of the lungs excepted—until autumn of 1842; when she was attacked with bilious remittent fever. This yielded to ordinary treatment, but was succeeded by two relapses, and those by painful enlargement of the liver, attended with irregular biliary secretion. Attacks of this kind, with short intervals of relief, recurred until the 20th of December, when they terminated in her death.

Examination after death was made with the assistance of Dr. Powell and Professor Willard. The only notable external observation, was the extreme emaciation, and the even fullness of the upper left breast, which had been remarked to be decidedly sunk whilst she was consumptive. On examination of the lungs, we found the upper left lobe adhering by slight membranous bands to the costal pleura, the rest free, and of natural appearance. No tuberculous matter was detected in any part of their structure, nor any other part of the body.

The only deviation observed in the lungs from the natural

condition, consisted in the more solid structure, and a deeper color of the upper left lobe. This part contained but few air vessicles, and was permeated by greatly less than the natural proportion of bronchial tubes. Its structure presented both to the eye and to the touch, more resemblance of kidney than of lung. Evidently sound; yet differing in appearance, fully as much from healthy lung, as a scar on the surface does from the natural skin about it. But containing no tubercle nor any other foreign matter whatever. The cause of death was found in the liver, which was much enlarged, and contained a very large quantity of friable calcular; a condition for which, I believe, we are without remedy.

This, which presented indubitable evidence of pre-existing disease, together with evidences of the most perfect cure of record, is the only post-mortem examination I ever had an opportunity of making of a case I had cured.

At the request of Dr. M'Dowell to state my recollection of the post-mortem appearances revealed in the case of Miss Howe, I may remark with him that no tuberculous matter was detected in any part of the lungs, nor any other part of the body, and that the only deviation observed in the lungs from their natural condition consisted in a more solid structure and a deeper colour of the upper left lobe, which was also less vesicular and consequently less permeated than usual and natural to healthy lungs, presenting an appearance somewhat akin to hepatization.\* I did not at the time regard this modification of structure as tuberculous degeneration.

LLEWELLYN POWELL.

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\* With regard to this comparison of Dr. Powell's to hepatization, I submit that the patient in her whole illness never presented a single indication of pneumonia; nor, indeed, of any other disorder of the lungs—either then or at any intervening time, from the cure of her consumption to her death, of greater consequence than the mild form of a common cold. And, moreover, the question of hepatization was raised at the post-mortem, and the distinctive indications of this condition were not developed. Dr. P. is incredulous of the curability of consumption, or was—and it must be manifest he must either find, or imagine some other cause for this change of structure, or become a proselyte.

My impressions in respect to the post-mortem examination of Miss Howe, though, of course, less distinct than those in the case of Mrs. Willard, as far as they now exist, are coincident with the statement of the same submitted to me by Dr. M'Dowell. I recollect distinctly the darker color and denser structure of the upper left lobe, and at one spot a slight depression of the surface, as if from the contraction of the parenchymatous substance beneath; but I do not remember that I devoted my attention particularly to the appearance of the bronchial tubes.

#### F. AUGUSTUS WILLARD.

When I commenced my attendance on Miss H., I encountered no inconsiderable degree of good-natured ridicule on account of my sanguine temperament, which permitted me to anticipate the possibility of her recovery. A few months after, when her cough and pulmonary symptoms had disappeared; my triumph was met with the damper, that such intervals had occurred heretofore, and that the disease would now as then surely return. After the enjoyment of about two years of uninterrupted health, surmises got abroad that she never had the disease. In this, my brethren of the profession, and their friends, prior to her death spell, had come generally to acquiesce. As she debilitated and emaciated under the effects of her last protracted illness, the impression changed again and became rife that she was dying of the consumption, of which she never had been cured. Intelligence of this coming to the ears of my patient, who was fully aware that her present disease was neither of the same character nor locality with the former, induced her to make the dying request of her friends, that I should be admitted the privilege of a post-mortem examination. To this, I invited a number of the most skeptical of my professional friends, including most of the members of the medical club above alluded to. Only one attended; with the aid of whom, and of Prof. Willard, the examination was conducted as above related.

Believing the incredulity of my friends, as to curability, to be honest, I determined that their indolence should not debar them the opportunity to become satisfied. I preserved the lungs in spirits until club night, and took them with me to the meeting. I returned with my views and opinions of men and things materially modified. My arrival with my specimen was anticipated. Seven members present. My reception I considered less cordial than usual. My treatment and catechising, though not precisely as stated above, was of that character, being decidedly uncourteous. The manner of my friend who was so smart upon me with his "pig's stump tail," who was, upon the whole, the most courteous of the number, may be taken as a specimen. He, in this simile, I have no doubt, expressed the honest convictions of his judgment. The uncompromising incredulity of this gentleman, who is reckoned one of the best auscultators in the city, has outlived severer tests than this. The first case of consumption I treated after my arrival in Louisville, in June, 1838, was that of a young lady, who had been for a considerable length of time under his care. He, together with another physician of eminence, who had been recently in attendance, considered and pronounced the disease a confirmed consumption in an incurable stage; I dissented from the latter clause. We treated her jointly for twelve months, when she was dismissed cured, and is at the present time in the enjoyment of good health, never since having had an indication of the disease. In less than twelve months after the cure was established, this gentleman brought himself to the conclusion that his diagnosis had been erroneous; this being possible, cure of consumption, being impossible. Occurrences precisely similar took place in five other cases, which we treated jointly within the two succeeding years.

I will here take occasion, in order that inordinate professional skepticism may not unreasonably influence the intelligent public, to give a brief detail of a few more cases cured, in phraseology more than usually adapted to the apprehension of the common reader. The selection is chiefly restricted to

cases in so advanced a stage that the symptoms unequivocally indicated the character of the disease, independently of the physical signs, and that were also adjudged to be genuine cases of regular fixed consumption, by other respectable physicians, corroborative of my own judgment. The treatment in these cases, was pretty much the same in all of them, varied but little except on account of the accession of complicating disorders, and essentially the same with that which is recommended and unreservedly detailed in my treatise on consumption, to which I refer the reader; in place of giving an elaborate detail of it in repetition in each case.

CASE II.—August 14, 1824. Visited Mrs. —, aged 23, of Fincastle, Virginia; she had been affected with troublesome cough, frequently attended with pains in the chest—for which little else than expectorants and a strengthening plaster had been prescribed. She had gradually emaciated for a period exceeding twelve months. At the time of my visit she had bloody tuberculous expectoration, which had been preceded, a few days, and was still accompanied, with hectic fever and copious night sweats; fauces pale; tongue clean, and of fiery red color; tonsils enlarged, pale, and studded with lumps of white curdy matter; stomach dyspeptic; menstruation had been absent the last four months, and had been scant and irregular several periods previous to discontinuance; pulse frequent and hard.

By *bleeding*,\* blistering, emetics, expectorants, light fluid diet, &c., the irritable and inflammatory tendency was sufficiently reduced in three weeks to admit the use of mild tonics, and more nutritious diet; which was borne well, and was gradually increased, until on the 23d of October, she was put upon full doses of chalybeates, and allowed diet chiefly of animal food; and free use of toddy, porter, wine, &c., health gradually improved through the winter; although the cough continued, and was several times accompanied with bloody

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\* I am satisfied now that this was unsuited to the case and injurious.



and curdy expectoration; twice with slight hectic fever, without night sweats, pain of the chest, frequently so considerable as to require treatment, which consisted in emetics, blistering, dry-cupping, eruptive embrocations, &c., once in the time *bloodletting* was resorted to. Early in May, 1825, she was taken, when on a visit in the country, with a spell little less violent than that to which I was first called, which was treated pretty much in the same manner. On the 21st May full tonic stimulant and nutrient treatment was resumed. In June cough had disappeared, and all bodily appearances were those of good health. Menstruation made its first appearance in July, and was never afterwards interrupted; but for nearly two years, continued to be painful and irregular. In the course of the years 1825-'26 she had frequent recurrences of cough, and occasionally accompanied with bloody and tubercular expectoration. During this period tonic treatment was prosecuted at an average of about one-fifth of the whole time. From the commencement of the year 1827, to the present time, she has never experienced any symptom of consumption. In 1828 this lady's weight exceeded 170 pounds.—From which it never materially varied up to 1838, the time of my removal thence to Louisville, Ky. Within that period she had frequent spells of determination of blood to the head, tending to apoplexy, often requiring free depletion. When I commenced treatment of her case in 1824, her weight was short of 90 pounds. Since my removal from Virginia, she has suffered a dangerous apoplectic stroke; since her recovery from which, she suffers from neuralgia, and has become reduced to about her healthy weight prior to the consumption, 130 to 140 pounds.

Later accounts, received within the last month, represent her health to be completely reinstated.

October, 1844.

CASE III.—In December, 1825, I was called in attendance on Nancy Countee, aged 40, a consumptive servant, who had been purchased for a trifle by Mr. R. Kyle, of Fincastle, Virginia, at the solicitation of his man-servant, hus-

band to Nancy, under the impression that I could cure her. Nancy had suffered with cough, which was occasionally accompanied with bloody and tuberculous expectoration, about two years; had not menstruated for about twelve months; had sometime previous to her sale, been given out as hopelessly consumptive, by her mistress' family physician—a gentleman eminent in his profession. I found her in an extreme degree of emaciation, and laboring under the symptoms which characterize regular fixed consumption, in the extreme last stage of the disease. Presenting in addition to the ordinary pulmonary and abdominal symptoms, dropsical extremities, and obstinate colliquative diarrhœa.

Under my treatment she was restored to excellent health within a period of twelve months, which she has continued to enjoy with but little interruption ever since; has not in the time experienced a symptom of any pulmonary disease of greater importance than a common catarrh.

When on a visit to Virginia, in December, 1843, I found her complaining of symptoms characteristic of gout.

CASE IV.—In 1833, Adeline Countee, aged 17, niece and daughter-in-law to the above patient Nancy, had become much emaciated under a protracted cough, with purulent expectoration, which had lately been frequently accompanied with blood, and in some of its recurrences to an alarming degree. Her attending physician, a practitioner of skill and judgment, having pronounced the disease to be consumption, and the case incurable, she was, at her aunt's solicitation, transferred to my care. The characteristic symptoms which she presented of consumption in the second stage, rendered it perfectly clear that my predecessors diagnosis was correct. But fortunately his prognosis turned out otherwise. I effected a perfect cure of the case in the period of about eight months, and the woman has continued to enjoy excellent health ever since.

CASE V.—Mrs. Wm. Mitchell, aged 42, of Lynchburg, Virginia, at which place her case had been treated by Dr. G.

Cabel and others, came to her sisters near Fincastle, in November, 1824, and committed her case to my care. She had been for about twelve months affected with cough, and free expectoration, occasionally mixed with blood, which gradually increased up to the commencement of my attendance. I found her extremely emaciated, with hectic fever and copious night sweats, extremities dropsical, tongue clean and red, bowels colliquative, expectoration very copious and putrid, containing flaky matter, and was often so offensive that her sister could not remain in the room. These symptoms left no room for hesitation, in coinciding in opinion with her physicians at Lynchburg—comprising the ablest in the city—that her disease was consumption, in the extreme of the last stage.

This condition continued, with occasional abatements at intervals, when the dropsy would temporarily disappear, the expectoration abate, stomach and bowels get in better state, then return again to the former aggravated condition, until May, 1825. Allowing in the time but little opportunity, and short intervals for resort to any curative treatment. In May there appeared a general and permanent abatement in all the symptoms. The dropsy disappeared and returned no more, the bowels became regular, and the appetite tolerable, the hectic fever and sweats moderated, and at length disappeared. For a period of twenty-five days she now bore tonics, first in moderate, afterwards in pretty full doses, and used nutritious and appropriate diet. During the latter part of the time, porter and wine were relished, and advantageously used. In this short period there was manifest improvement in color, strength, and weight. Treatment was at length arrested by another period of hectic, sweats, bloody and tubercular expectoration, &c.; the symptoms after this became less aggravated, and spells were of shorter duration than formerly, the intervals longer, and the relief more perfect; admitting full chalybeate treatment, and diet of animal food. During two entire years, these exacerbations continued to recur, but their duration became shorter; the convalescent interval progres-

sively longer, until at length all symptoms of the disease disappeared, and restoration of health was complete, which she continued to enjoy in an ordinary degree, until 1841, when she died, I am informed, of pneumonia.

CASE VI.—Visited Mrs. Nace, of Bottetout county, Virginia, aged 33, on 22d December, 1830. She had been harassed for about nine months with cough and pains of the breast and side, expectoration had been scant up to the time of my visit, which was required on account of the occurrence of copious hæmorrhage from the lungs. After this the expectoration became copious, and mixed with curdy matter. She had been treated thus far pretty much in the usual way by her family physician. The expectoration of blood had ceased before my arrival, the remaining indications in the case were the tubercular expectoration, hectic fever, weak irritable stomach, and more than an ordinary degree of pain in the chest. Two emetics administered on alternate days, and the moderate use of a sudorific decoction of thoroughwort and dandelion, together with the application of blisters to the chest, so far ameliorated this condition, that on visiting her again on the 26th, I found her in condition to bear tonic and nutrient treatment, under which she gradually improved. The subsequent treatment was conducted, with my occasional advice, by her family physician. She continued to have recurrence of the above described symptoms, but at longer intervals, and progressively becoming less harassing, through four successive years. Since 1835 she has experienced no indication of pulmonary disease.

Up to December, 1833, I was without knowledge of the physical signs of diseases of the chest, I have therefore reported, prior to this time, none but cases in the diagnosis of which, I was sustained by other attending physicians; and that also presented symptoms indubitably characteristic of consumption.

The character of the following cases, was tested by the presence of the physical signs, as well as symptoms of the disease. But in the selection of these too, I have preferred

cases, in the diagnosis of which I was sustained by other physicians.

CASE VII.—February 5th, 1835; visited James Thomson aged 13, of Bottetourt county, Virginia. He had for several weeks experienced pain in the joint of the right hip, which caused a considerable degree of lameness. On examination, the hip of this side appeared more prominent and thinner than the other; on further examination, I discovered tubercles in the neck. A dry cough which had troubled him for three months, led to the physical examination of the chest. The dull, flat sound on percussion, and the rough uneven respiration, and the resonance of the voice from the part gave evidence of the existence of tubercles in the upper right lobe of his lungs.

The treatment prescribed, consisted mainly in a succession of blisters to the hip, alternated with pustular eruption of the part by antimonial ointment, and the internal administration of chalybeates, with an exceedingly limited diet: to consist almost exclusively of well salted animal food. This was gradually increased until in the course of about six months, a satisfactory allowance was permitted. In this case treatment was continued throughout the year, with occasional intervals of rest; the periods of treatment amounting to at least half the time. Sometime before the expiration of this period, every symptom and sign of disease had disappeared, and the florid countenance, animated eyes, firm and elastic flesh, and the rounded proportions of the body and limbs, gave evidence of robust and substantial health, which he has ever since continued to enjoy.

This I conceive to have been a case of simultaneous development of tubercles in the lungs, in the neck, and in the hip—this last being the disease technically termed *morbus coxalis*.

CASE VIII.—Mr. Wm. Acton, of Fincastle, Virginia, aged 18, of full habit, inclined to be fat, delicate, rosy complexion, light hair, blue eyes, thin smooth skin, and flat chest, was taken on the 6th of May, 1836, with excessive expectoration

of blood, which was accompanied, and had been preceded, by severe pain in the upper part of the left breast. From the same part there was dull resonance on percussion, and crepitating respiratory rattle. Breathing was laborious, countenance flushed and anxious, pulse full, hard and frequent. He had been troubled with cough with moderate expectoration for the last three or four months, which had come on so gradually that the cause was not recollected. Under the impression that the disease was pneumonia, he was set erect and bled to syncope. A large blister was applied on the pained part, and an antimonial solution in doses as large as the stomach would bear, was administered every two hours. Vinegar whey exclusively for diet. The blood on coagulation presented an exceedingly buffy surface, a proportion of serum somewhat in excess of the healthy proportion, and abounding in albumen, being very viscid.

7th. Bloody expectoration has ceased; treatment continued.

8th. Bloodletting repeated; blood on coagulation more buffy than before, and more abounding in serum, but less viscid; antimonials continued.

On the 10th, pain had entirely subsided; pulse feeble and frequent; the fever had subsided into a decided hectic, attended with free night sweats; expectoration excessive, glary and full of curdy particles, exhibiting the decidedly tubercular, instead of the pneumonic sputa.

On examination of the chest now, the sounds elicited by percussion were the same as before, but the respiratory sound was harsh, unequal, and cavernous. Antimony was now discontinued, and decoction of dandelion and tincture of blood-root prescribed, and more nourishing diet allowed. The expectoration above described, continued with little abatement until the 23d, and was three successive times in the period streaked with blood, during a period of from twelve to twenty-four hours; the hectic paroxysms the while diminishing in intensity, the expectoration continuing, and the respiration

becoming daily more cavernous; the voice, towards the last, decidedly pectoriloquous, leaving no doubt whatever of the character of the disease—Acute “Galloping Consumption.”

He was at this time put upon the use of the chalybeate pills, and moderate allowance of animal food; which was gradually increased. Both were well borne, and upon these the strength increased and the expectoration diminished. In four weeks from this time, he had no symptom remaining of consumption, but slight cough and moderate expectoration of mornings; but the signs, the rough and cavernous respiration, and the pectoriloquy remained. He had after this, returns of hæmoptysis and tuberculous expectoration in June, in August, and in February of the following year, through which time tonic and stimulant treatment was prescribed; after which his health became permanently good.

When in Virginia, in December, 1843, I took occasion to examine his chest; and there remained no sign whatever that disease had ever existed.\*

CASE IX.—Miss ———, of Roanoke county, Virginia, aged 19, who had been, for a period of about fifteen months, troubled with pain of the breast, cough, and expectoration, which latterly had become copious, came to her aunts near Fincastle, for the purpose of placing herself under my care. I visited her September 10th, 1837, found her extremely emaciated, and very feeble; cough troublesome; expectoration tubercular; bowels irregular; hectic fever of daily occurrence, and there was perpetual pain of the chest. She had not menstruated for seven months. On examination of the chest the ribs of the left side were found decidedly depressed; from this part percussion elicited a dull sound; respiration was rough, cavernous, often cooing; voice pectoriloquous; and with all she was affected with a distressing degree of dyspepsia.

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\* This case was treated jointly by Dr. Turner and myself.

I prescribed a decoction of dandelion, bloodroot, and savin leaves, which was continued twenty days; with repeated applications of small blisters to the spine, and over the pained parts; diet of vinegar whey and weak animal broths. In this time the pain and fever were entirely relieved; the cough and expectoration considerably diminished.

On the 30th, chalybeates were used, the dose gradually increased, and well borne; a more and more nourishing diet was now allowed, until a pretty full allowance of well-salted animal food, was borne without inconvenience. On this, together with dancing, jumping the rope, riding on horseback, &c., she rapidly improved. Menstruation appeared on the 29th of October. By the last of November she presented all the appearances of perfectly restored health. No symptom or sign remaining of consumption, a slight degree of cavernous rattle excepted. Early in December she returned home, with prescription and letter of advice, with the aid of which, prophylactic treatment was attended to by her family physician. This lady never suffered a back set from the commencement of treatment to the perfection of the cure.

I had an opportunity, in December, 1843, of seeing her in the enjoyment of excellent health.

The preceding cases, it may be perceived, were treated in several particulars not entirely in accordance with the injunctions in my Treatise. But although neither treated with equal skill nor diagnosticated with as much precision as more recent ones, they are, nevertheless, of peculiar interest on account of the time that has elapsed since the cures were accomplished, without a recurrence of the disease. In no case that I have cured, with a single exception, has such recurrence occurred.

CASE X.—July 2d, 1838, visited W. W.—, aged 35, of Louisville, Kentucky, in consultation with Dr. Knight, his attending physician; found him emaciated to the utmost extreme, with incessant pain of the chest; aggravated cough; copious tuberculous expectoration; hectic fever, with accession of two paroxysms daily; wasting sweats; colliquative



diarrhœa, and dropsical extremities. Percussion elicited flat resonance over the whole surface of the chest; respiration rough, whistling and unequal in both lobes of the left side; rough and carnous, with imperfect pectoriloquy, from upper right lobe; strong crepitus rattle in the lower lobe. He had been troubled with dry cough for such a length of time as to be unable to date its commencement—thinks it exceeded three years, but gave him no trouble until December, 1837, when he was taken with spitting of blood, to which other symptoms successively followed; the case gradually becoming worse and worse until Dr. K., who had not long since been called in, found him in the situation above described

The indications here were of crude tubercles throughout the lobes of the left side; tuberculous and ulcerous excavations in the upper right lobe, and pneumonic inflammation of the lower.

We had no hesitation in agreeing that this was a case of consumption in the extreme of the last stage, and hopeless of cure. To palliate was all we conceived to be in the power of our art.

I stated to Dr. K.,\* my usual treatment of consumption; and apprised him that I had found this curative mode upon the whole to be also the best palliative course; as thereby we gradually, but permanently lessened the intensity of the disease, until by this very progressive process, we reduced it sometimes until completely removed. I therefore proposed as soon as we could sufficiently allay the irritable and inflammatory complications, that tonic and stimulant treatment should be instituted. To this he readily assented. Probably more induced thereto, by the conviction that the case could not be worsted, than by force of my arguments. In the course of a fortnight, this man was in a condition to use chalybeate tonics; to which succeeded progressively nutritious diet, meat diet, and stimulating condiments, under which he gradually improved; the progress of which, was less than ordina-

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\* This was within a month after my settlement in Louisville.

rily interrupted by complications. In September, he had so far recovered as to resume attention to his ordinary business. In November he had become as fleshy as when in health; with healthful complexion and physical signs, indicating entire absence of tubercles from the lungs. I now urgently advised him to pass the ensuing winter in the South, on account of the weak and crippled condition of his lungs, with which he at length complied—without taking leave of his friends. In a letter to a friend, in the spring of 1842, he desired that I should be apprised, he had settled in Louisiana, was in enjoyment of good health, profitably employed, and in hopes of soon being able to remunerate me for my services. Not since heard from.

CASE XI.—While in attendance on a surgical case, at the plantation of Mrs T., near Louisville, jointly with Dr. Powell; our attention was directed to the condition of her negro man Manser, who had been consumptive about two years, and had latterly been considered incurable by her family physician. The diagnosis of consumption in the last stage was clearly manifested both by the physical signs and the characteristic symptoms of the disease. The ribs of the upper part of the right side were depressed in an unusual degree, from the collar bone to the fifth rib. As I suggested the *possibility* of cure in this case, Dr. P. submitted it to my exclusive management. I prescribed for him July 23d, 1839. He was dismissed cured, May 1840; and has ever since enjoyed excellent health. In a letter from Mr. Edwards—Mrs. T.'s son-in-law, with respect to the present state of Manser's health, he states "he is considered completely cured, and is thought to be as good a laboring hand as is on her (Mrs. T's) farm."

CASE XII.—Mrs. H., wife of Mr. E. L. Hoffman, merchant of Louisville, who at that time resided in Shelby county, Ky., was brought to Louisville, and committed to my care on the 13th of November, 1840. She had labored under symptoms of consumption for twelve months past, gradually getting worse under the treatment of her family physician;—a gen-

tleman of high standing in the profession, Mr. H———, proposed a consultation. This, he observed, was useless, as the disease was “a decided consumption in an advanced stage, that could not be cured by all the physicians in the world”\* A consulting physician, however, was procured, who concurred in this opinion: notwithstanding which, Mr. H. determined to bring her to me, by the recommendation of his neighbour Mr. L. Shirley, a member of whose family I cured of what he considered a worse case of the disease. On examination, I found the above diagnosis unquestionable. The symptoms being decidedly characteristic. The signs, detecting the existence of tubercles and tuberculous caverns in the upper lobes of both sides; but sparse and not occupying a very extensive space. Which induced me to consider her chance of recovery a fair one.

In April, 1842, this lady was dismissed cured. “Since which time,” says Mr. H., “she has enjoyed better health than she has for the past 11 years, and has needed no physician.”

CASE XIII.—Miss P.; aged 12, grand-daughter of the late Judge Parker, of Boston, was advised by her family physician to travel South, on account of pulmonary disease. She accordingly came to her aunt, a resident of this city, by whom I was called in attendance.

Examined September 27th, 1839; tuberculous conformation and aspect; being of remarkably thin, delicate proportions, ribs of upper left side much depressed, dull resonance from percussion, and rough cavernous respiration from this part. No pain, but little cough, expectoration, tuberculous, slight hectic paroxysms, digestive organs in good condition. Prescribed chalybeates at once, with regular, small allowance of animal food at each meal, seasoned by the patient at will, and to be slowly increased, until it constituted her chief sustenance. Treatment was continued with striking benefit—the dieting all the time; the chalybeates with intervals, about one-

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\* Quotations from a letter of Mr H's to me on the subject.

fourth of the time, until autumn, 1841. When patient returned to Boston, with advice to continue the treatment some time longer; under the impression that the condition of the blood, or in other words, the constitutional tendency was not sufficiently changed; which, I presume, was stopped prior to, or on occasion of the event that obtained me the honor of the following note, from my fair patient's aunt:

DR. M'DOWELL,

*Sir*: Perhaps it will be gratifying to you to learn, that my niece, who was considered consumptive, by eminent physicians at the East, after having been two years under your care, has been so much benefitted, that Dr. Bigelow has pronounced her lungs sound, since her return to Boston. We attribute the improvement of her health, solely to your treatment, for which, accept our grateful thanks.

Yours, respectfully,

March, 15, 1843.

Recent information apprises me of Miss P.'s continued good health; October 12th, 1844.

CASE XIV.—September 27th, 1840. Visited Mrs. A. H. of Worcester county, Massachusetts, niece to his excellency, ex-Governor Davis, of Massachusetts,\* at her brother-in-law's in this city. Mrs. H. had been advised to travel by her family physician on account of pulmonary disease. She had declined during her journey, and on her arrival at Louisville, was extremely reduced in strength and flesh. Her symptoms were difficult breathing, irritable, and sometimes painful sensations in the breast, dry cough, and diarrhœa, with loathing of food. The cough had been of considerable duration, and had at times been attended with free expectoration, fever, and sweats.

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\* The family connexion is referred to in this and the preceding case, as affording the distant readers the best evidence attainable, of the capacity of patients or their friends, to select a family physician competent to determine the diagnosis of a disease.

Percussion, elicits dull resonance from both upper lobes. Auscultation detects slight roughness and unequal respiration on the left, more rough and cavernous on the right; evincing consumption in the second stage. After a few days preparatory treatment, she was put upon chalybeates and nutritious diet, to be gradually increased daily; under which she improved rapidly. In the following month, she returned to Massachusetts with prescription and letter of advice, under the guidance of which, she was restored to health, as related to me in the subjoined letter from her brother-in-law.

OCTOBER 10, 1844.

DR. M'DOWELL:

*Sir:* In answer to your enquiry, with regard to Mrs. —, a relative of my family, I will state she was understood in the opinion of her family physician, and others at home, to be declining in consumption, and was advised to travel for her health. She started from home, in autumn of 1840, and after her arrival medical advise was absolutely necessary. You visited and attended her some weeks, until she recovered so as to be able to return home—when she was furnished with a prescription and letter of advice, by you, which I am informed, were followed by her family physician at the East, under which, she recovered in a few months, and has enjoyed very good health ever since.

Yours,

S. SISSON.

CASE XV.—May 23, 1841: Visited A. S. Laughery, merchant of Louisville, aged, 28, at New Albany, Indiana, in consultation with Dr. Downing; found him laboring under well marked symptoms and signs of consumption, in second stage. Nearly all of his family, a large one, had died of the disease. He was prescribed for, and left in care of Dr. D. On examination in the following autumn, I could discover no remaining symptom or sign of the disease. On account of the weakened condition

of the lungs, that I supposed to be incident to their recent diseased condition. I advised him to pass the ensuing winter in Cuba. He extended the trip to Rio de Janeiro; whence he returned fleshy, and in robust health, which he has ever since enjoyed.

CASE XVI.—Dec. 17, 1841. Prescribed for Mrs. H., wife to B. H. Hall, M.D. and D.D., late of this city, now of Woodford county, who presented the characteristic symptoms and signs of consumption. Which Dr. H., informed me she had labored under for some years, and was hereditary in her family. He entertained no hope of her cure, but to gratify her, desired my examination and prescription. Under which she was restored in three months, and has enjoyed good health ever since.

CASE XVIII.—January 26, 1841. Visited Margaret, aged 17—servant to Garnet Duncan, Esq., who was examined and treated, for consumption, by Dr. Powell and myself, jointly. Dismissed cured, July 22d, 1841. For her present condition, the reader is referred to the subjoined note from Mr. D.

LOUISVILLE, OCTOBER 12, 1842.

DR. M'DOWELL:

*Dear Sir:* In reply to inquiry about the present state of Margaret's health, I am happy to inform you that she has been able to discharge her duties, and has not required any medical aid since she was discharged by you, as cured of consumption something more than three years ago. She appears delicate, and has not been exposed to very hard work. I cannot undertake to pronounce that she *had consumption*, and that *you cured it*—but she certainly was attended by Dr. Powell and yourself for that disease, and was believed by my family to have it—and she certainly was much improved by the treatment, and has ever since been, and is now, able to discharge her duties.

With respect,

GARNETT DUNCAN.

CASE XIX.—June 17, 1843. Prescribed for Cornelius Randal, aged, 35. Mr. R. had for many years been subject to asthmatic spells. For two years past, spells of difficult breathing had been much more aggravated and frequent than formerly; and through the last twelve months, were often attended with free night sweats, diarrhœa, and increased cough, and expectoration. He had been treated in the time, by several physicians; some of whom treated him for asthma, some for bronchitis. He derived little and merely temporary benefit from any of it; his disease continuing to grow worse.

I found him affected with hectic fever, colliquative diarrhœa and sweats, and exceedingly emaciated in person. Analysis proved his expectoration to be decidedly tuberculous. Resonance on percussion over the chest was irregular. Respiration rough, uneven, and cavernous in upper left lobe, with imperfect pectoriloquy—respiration bronchial on the right.

I instituted treatment for consumption; dismissed him cured, October 16, 1843.

Mr. R., has since, had two asthmatic spells; one following an influenza, he was attacked with last winter, the other occurred in the past summer; cause, unknown, and so slight in degree as to require no treatment. With these exceptions, his health has been uninterruptedly good.

CASE XX.—Mrs. C., wife of J. P. Curtis, broker, was visited September 8th, 1840. This lady had been for two years or more preceding my visit, under treatment of her family physician; continuing to decline; she despaired of recovery. On understanding he considered her consumptive; and determined without submitting to farther treatment, to let the disease have its course. From this frame of mind, she was dissuaded by the late Miss H., who prevailed on her to consult me. I found her presenting all the constitutional indications of the tubercular diathesis; extremely attenuated, of exsanguine appearance, and affected with colliquative diarrhœa, night sweats, and harrassing cough, with well marked tubercular expectoration. Auscultation detected indications of sparse tubercles, and cavernous rattle in the upper

lobes of her lungs of both sides; of which percussion manifested no distinct indication. The deposition and disorganization detected by the signs, was so disproportioned to the symptoms in the case, that I could not but be struck with the impression that this could not be the exclusive seat of the disorder; even with all allowance that could be made for the extreme delicacy of the constitution. On farther examination—the attenuation was such that clusters of tubercles of considerable size were detected and easily defined in the abdomen. A full detail of this case, would be interesting to the medical enquirer, but would be unsuited to the present essay. Here it may suffice to say, that the treatment of various inflammatory, pectoral, and abdominal, complications; constituted in exceeding proportion, the most difficult part of the treatment. During the first eighteen months, my notes indicate more than eight-ninths of the time to have been devoted to treatment of such complications.\* These were after this, much less troublesome. Symptoms and signs of tubercles in the lungs had disappeared in March, 1842. Indications of abdominal tubercles continued some time longer. She was dismissed cured, Aug. 1842, and has since continued in as good health as her extreme delicacy of constitution could be expected to admit; as good as she had formerly been accustomed to. There has never since been any manifestation of tubercular disease; although she, in the winter of '43, passed through the ordeal of hooping-cough; which was protracted through the winter, and the greater part of the spring; to the great alarm of the family, and of myself. Since which time, she has suffered no disease that required the aid of a medical attendant.

CASE XXI.—The following is the case of Mr. Wm. Levi-son, of Jeffersonville, Indiana, who (April 25th, 1839) was attended jointly by Drs. Field, Powell, and myself. I extract it from the *Israelite*, a theological periodical edited by Dr. N.

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\* On occurrence of these, tonic, or in other words curative treatment, is arrested during their continuance.



Field; in which he did me the honor to notice my Essay on Consumption, in No. —, bearing date March 27, 1843.

“In support of this opinion,” says he, [his opinion of my treatise on consumption,] “we take the liberty of stating a case which came under our observation a few years ago, in which we had an opportunity of testing the verity of his pretensions.

“The patient was greatly reduced with tuberculous consumption, which had advanced to the ulcerative stage. Every symptom was unfavorable; the upper portion of the left lobe of the lungs was imperious from a mass of tubercles; some had softened. The expectoration of pus was copious, dark and fœtid, with night sweats and emaciation. Of the recovery of the patient, or even a procrastination of the fatal issue, we entertained no hope. In this stage of the disease Dr. M'Dowell was called in, who unhesitatingly pronounced the disease curable. We regarded his prognosis as the result of either a mistaken judgment of its pathology, or an ardent and heated imagination. But to our surprise the patient recovered under his treatment, which was perseveringly pursued until the ulcers healed, expectoration ceased, and the tubercles not softened were absorbed. The gentleman is still living, and for some months after his recovery enjoyed tolerably good health, though not as we conceive, relieved of the predisposition to tuberculous formations. That fact however is no argument against the curability of the disease.

“The position assumed by the author of the treatise under consideration, is, that consumption can be *cured*, and not that the susceptibility to a new attack can be destroyed. All diseases, with a few exceptions, leave behind them a constitutional liability to a second invasion, upon the application of exciting causes. Cure and prevention are different things, so are predisposition and disease, as much so as cause and effect. Hence the logic which would disprove the curability of consumption, from the fact that the subject of it is con

stantly liable to a re-formation of tubercles, would equally weigh against the curability of nearly all the maladies to which flesh is heir."

This gentleman is still (October, 1844,) in the enjoyment of tolerable health, without any perceptible indication of tubercular disease.

Since the date of the above notice, Dr. Field has himself treated on the same principles, and cured several interesting cases of consumption.

The selection of the above cases it may be perceived, as before stated, has been restricted pretty much to such cases as were attested to be genuine cases of consumption: both by the concurrent opinions of other physicians, and also by presentation of the established symptoms and signs of the disease. Admonished of the necessity of this, by knowledge of the fact, that incurability of consumption is so grounded an impression, that the very fact of the cure of a case, however characteristic and strongly marked it may have been, is in the minds of many medical, as well as unmedical men, taken to be conclusive evidence of mistake in the diagnosis of the disease. Thus as it were assuming the position, that no evidence is conclusive of the existence of consumption, short of the death of the patient. To satisfy these of curability, is of course impossible. My evidences are dedicated to the more rational.

I trust my friends whom I had not the opportunity to consult, will pardon the liberty I have taken, to use their names\* in the foregoing cases. This indeed I feel assured they will do, on perceiving how I have been hawked at, and by *what*.

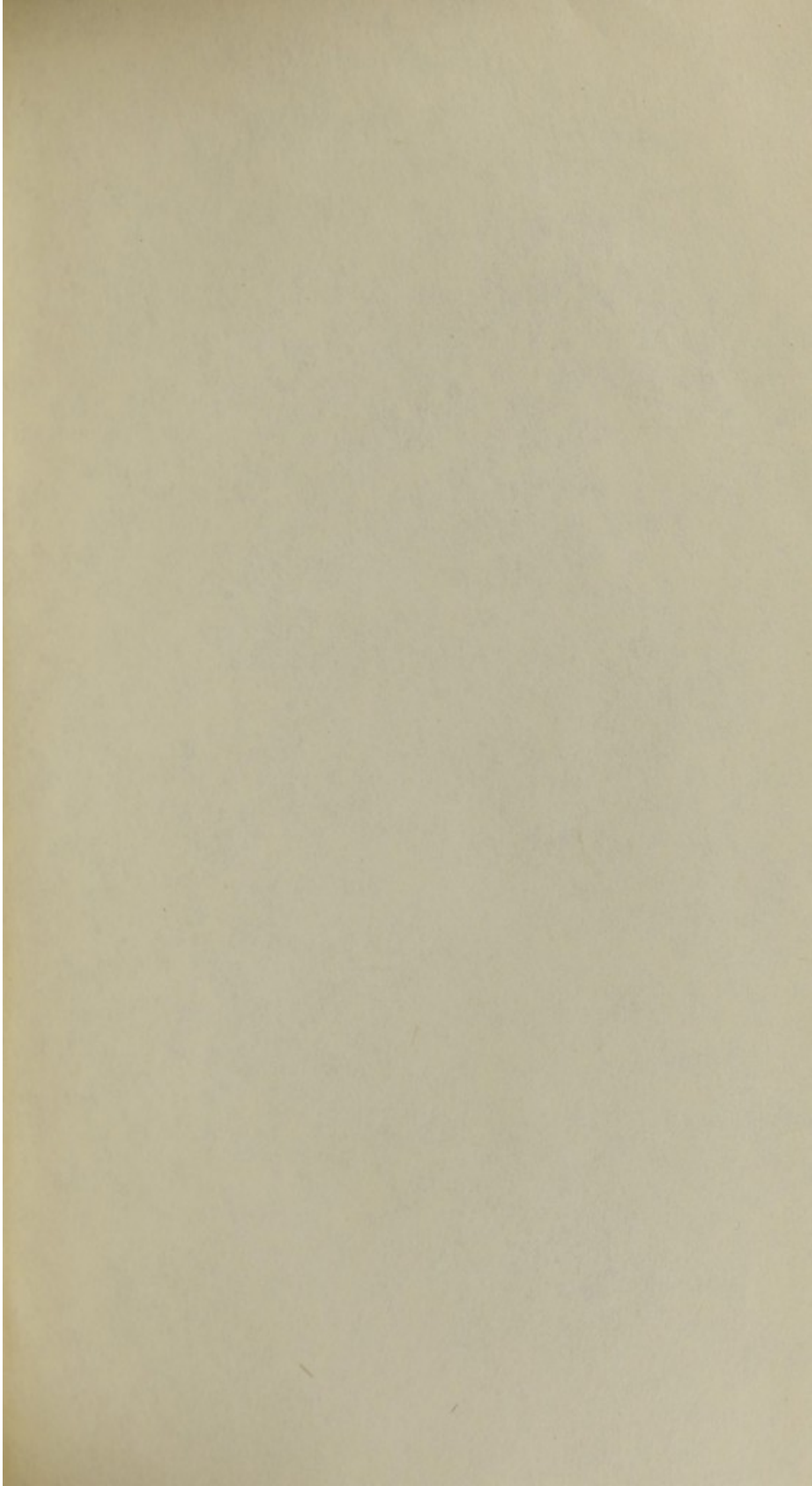
A few words now to Professor Yandell—private.

Should you, sir, condescend to deign me any farther notice, be pleased to adhere scrupulously to the truth, even at the expense of some trouble in conning and sifting your al-

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\* Persons whose residence is not stated are citizens of Louisville.

legations. The publication of your falsehoods, costs you nothing. I being denied equal facility, am at heavy expense to follow them up with my refutations. Now, sir, I shall go to no farther expense in printing, and if you publish any more of those villainous falsehoods—such, if unrefuted, would prove derogatory either to my moral character, or to my professional standing—to save expense in paper, I may be tempted to indite my answer on your parchment.



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