

## **Cursory remarks on the present epidemick [of cholera] / [James Kendrick].**

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# CURSORY REMARKS

ON THE

## PRESENT PESTILENTIAL EPIDEMICK.

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“VITA brevis, ars longa, tempus præceps, experimentum periculosum, judicium difficile.”

HIPPOCRATES.

“Est, enim hæc ars, conjecturalis, neque respondet ei plerumque non solum conjectura, sed etiam experientia.—Rarius, sed aliquando, morbus quoque ipse novus est, quem non incidere, manifesté falsum est.”

CELSUS.

“Few follow Things themselves, more follow the Names of Things; but most follow their leaders.”

BACON.

“A Physician may likewise collect the indications of cure from the smallest circumstances of the distemper as certainly as he does the distinguishing signs from them. And for this reason I have often thought, that if I had a just history of any disease, I should never be at a loss to apply a suitable remedy to it: its different phenomena, or symptoms, manifestly shewing the way to be followed, and *being carefully compared together*, would lead, as it were by the hand, to those obvious indications that are gathered *from a thorough insight into nature*, and not from the errors of the imagination.”

SYDENHAM.

“ J’ai souvent désiré qu’un médecin distingué, ou plutôt qu’une société de médecins, entreprît un ouvrage dans lequel, passant en revue toutes les branches de la médecine, ils exposeroient avec franchise ce qu’il y a d’inconnu, ce qu’il y a de faux, ce qu’il y a de douteux, ce qu’il y a de certain. Cet ouvrage ne seroit pas brillant, mais il seroit solide. Chaque élève auroit, presque dès l’entrée de sa carrière, un point de mire vers lequel il dirigerait toutes ses recherches ; il ne lui faudroit pas de longues années pour revenir sur les matières qu’il a étudiées, pour deraciner de son esprit une foule d’idées erronées qu’on lui débitoit avec la même assurance, et souvent même avec plus d’art, que les vérités les mieux démontrées.”

CRUVEILHIER.

The foregoing passages being familiar to every one, cannot be suspected of being introduced for the sake of display. They are quoted simply for the purpose of justifying the remarks which follow. These remarks were originally intended solely for the perusal of a few friends. Their brevity will, I trust, be a sufficient proof that they were not intended for the public eye. If they should produce any local good effect, I shall be more than satisfied.

In Theology, in Politicks, in Medicine, and in many other Sciences, the mischief which has attended the misuse of Names, and the appropriation of *one* Name to *two* Things essentially different in their character, cannot have escaped the observation of any reflecting mind. In no Science whatever has this been more the case than in that of Medicine ; and in no instance has it been more strongly exemplified than in what relates to that pestilence which “ is now stalking abroad.” The *term* Cholera has probably slain its thousands, perhaps its millions, and will continue to do so, so long as the great bulk of mankind attend to *Names* rather than to *Things*. Should it be said that the epithet

*spasmodic* remedies the Evil, I reply, 1st, That *genuine Cholera* is seldom unattended with spasm; 2nd, That it has happened in more than one case of the present Epidemick, that spasms have either been absent, or so slight as to be unnoticed; and, 3rd, That antispasmodic remedies are of no avail in removing the Disease. So long then as the *term Cholera* continues to be applied to the present Epidemick, so long it is pretty certain will a great majority of practitioners treat it as such, and so long will its fatality be appalling. It has been well said, that "the Sporadic Cholera, which is occasionally met with during the hot months, both in this and in other countries, is evidently as totally different from the Indian Cholera as east is from west. The one is a symptomatic affection, followed by a mere momentary excitement, arising in part from a severe local irritation in the gastric organs; the other is a most malignant disease, produced by the existence of a specific and virulent poison in the system, which contaminates every drop of the blood, and excites diseased action in every solid of the body. Such being the fact, it is evident that remedies which are successful in the one, are not only inert, but even actually injurious in the other." \* In truth the latter appears to be a highly malignant Fever, of a Typhoid character, running its course in a rapid manner, and generally, *contrary to what takes place in most Fevers*, proving fatal during the cold stage. As Fever, therefore, it must necessarily be treated. By what name it ought to be called is not perhaps easy to determine, but until a more appropriate one can be found, seeing that the blueness of the skin is one of its most characteristic marks, I would recommend the title of Blue Fever, *Febris cærulea*. The term *Plague* having been notoriously applied to various diseases

\* See Stevens on the Blood, p. 451.

which have caused extensive mortality, (who considers the Plague of Athens, and the Plague of London, as one and the same disease?) the term blue, or Jessore Plague may be an appropriate name for the vulgar.— That the term Cholera should have been applied to the disease while in India, is not matter of surprize; its typhoid character not having been developed until its appearance in Europe; but *that* being now, as I conceive, fully proved, it is surely high time to affix to it such a Title as shall effectually prevent the fatal mischief arising from following a mode of treatment which, though effectual in *real* Cholera, is destructive in that which has been hitherto so miscalled.

For the treatment of the present Epidemick, many methods have been proposed and adopted. Two, and two only, appear to be worthy of attention, the Saline\*

\* For the saline treatment, see Dr. Stevens "on the Blood," Page 458 to Page 466. I know of no *modern* work which has afforded me, in the perusal, so much pleasure as this of Doctor Stevens. The following Extract from a letter, written by one of the first medical Philosophers of the present day, to Mr. Grundy, the resident Surgeon of our Cholera Hospital, contains an honourable testimony of one "high minded Man," to the discovery of another.

"The saline mode of treatment appears the best hitherto proposed. Of course diarrhœa should be checked in the ordinary way. Laudanum, Mist. Cretæ. with a little Brandy or aromatic oils, or both, answer well in general, for this purpose. But when real cholera has begun, when collapse precedes, is present, or has yielded to the consecutive fever, I believe it best to give Muriate of Soda, Oxymuriate of Potass, and Carbonate of Soda, by mouth and rectum. I would give Enemas every few hours containing 3 or 4 drams of the Oxymuriate of Potass, and as much of the other two salts. By the mouth I would give half a Dram of Potass. Carb. one quarter of an hour, and half a Dram of Soda muriat. and ten or fifteen grains of the Oxymuriate the other quarter of an hour, alternately. The addition of a drop or two of Hydrocyanic acid, if the vomiting is urgent, (every hour) has never done harm, but frequently good. Opium and Brandy I believe pernicious in *established* cholera. I would rather give the Saline Solutions iced, if the patients like it. Pray write again, when you please, and believe me your's truly.

P. S. Smaller doses may sometimes be more proper, but, in general the thing is underdone. Saline venous injections act uncertainly, and for a short time."

and the Mercurial. The evidence in favour of each is satisfactory. It will depend therefore on the peculiar views of the Practitioner on which of the two he will rely. Both are, in my mind, based on scientific principles; but I consider the former as least likely to do mischief to the Constitution; and, as having the best evidence in its favour, I have followed it. It is not improbable that in the most malignant Cases, a combination of the two plans will effect more than either plan singly. My experience in one instance induces me to incline to that opinion. In this Case, collapse came on instantaneously. In addition to the saline mode of treatment, the Epidermis being raised by Liquor Ammoniaë two grains of Oxymuriate of Mercury mixed with a little compound Powder of Tragacanth, and half a grain of Acetate of Morphia were applied to the naked surface; a mercurial effect was produced in about 10 hours, and from that period, every unfavourable symptom began to give way.

The degree of violence with which individuals are attacked by the Disease is such as to have led me to divide them into six Classes, viz.

First.—Those in whom the premonitory symptoms shew themselves during several hours, or even for two or three days.

Second.—Those in whom a premonitory stage of a longer or shorter period has shewn itself, but, being unattended to, has been followed by the blue stage, in a marked, but not very violent degree.

Third.—Those Cases in which the mildness of the Disease has been such, or the restorative Powers of the frame so great, as to allow of a natural cure. Of this description several have been recorded by persons fully entitled to belief.

Fourth.—Those in which collapse has suddenly come on, but not to such a degree as to destroy life in less than 12 hours.

Fifth.—Those in which Collapse, without any premonitory symptoms, has come on with intense violence, and in which Life is liable to be destroyed in from four to ten hours.

Sixth.—The very aged and infirm, in whom the Symptoms of Collapse shew themselves with even a moderate degree of intensity.

The First are, I believe, generally speaking, easily manageable.

The Second by the saline mode of treatment.

The Fourth by the saline mode of treatment, coupled with a rapid mercurialization of the system.

The two last, it is almost needless to say, set every known mode of medical treatment at defiance.

Too much cannot be said as to the importance of accurately distinguishing the present Epidemick from other Diseases; the mischiefs arising from such mistakes being incalculable. I would recommend to all such as are disposed to consider it as identical with Cholera, to study the brief but graphical description of Cholera given by Celsus, eighteen hundred years ago; and which, as being a picture drawn from Nature, must necessarily be defaced by diminution or addition. Let the Picture drawn by him be examined, and then compared with that of the present Epidemick. “*Primo æque facienda mentio est cholerae; quia commune id stomachi atque intestinorum vitium videri potest. Nam simul et dejectio et vomitus est: præterque hæc, inflatio est, intestina torquentur, bilis supra infraque erumpit, primum aquæ similis, deinde ut in ea recens caro lota esse videatur, interdum alba, nonnunquam nigra, vel varia. Ergo eo nomine morbum hunc χολέραν Græci nominarunt. Præter ea vero quæ supra comprehensa sunt, sæpe etiam crura manusque contrahuntur; urget sitis, anima deficit, quibus concurrentibus, non mirum est, si subito quis moritur. Neque tamen ulli morbo*

*minori momento succurritur.*” The individual who could mistake this Picture for that which is now daily presented to us, must either be blind, or possess a most extraordinary obliquity of Vision. Yet such was Cholera in the days of Celsus, such it is in the present day, and such will it remain to the end of Time.—In order to place the matter in a true light, I shall point out a few examples which will shew its importance.—William Chorley, jun. was seized about one o’Clock, A. M. on the fourth of July, with Sickness, Purging, and great prostration of strength; but the Pulse was full, the Skin warm, the evacuations, both from the Stomach and Bowels, bilious. He had warm and loaded tongue, and complained of Head-ache, when I saw him, for the first time at 5 o’Clock, A. M. He was then residing in the very centre of the most infected part of lower Bank Street. He was bled, the blood drawn was of a healthy description; he took a dose of Calomel and a purgative, drank Soda water, and soon recovered.—On the 16th of the same month, his Mother, a weak and infirm woman, long a Martyr to Asthma, was seized with the prevailing Epidemick, and died in twelve hours. On the 18th William Chorley, senr. Husband of Alice Chorley, and Father of William Chorley, jun. was attacked by unequivocal symptoms of Cholera, was treated accordingly, and soon recovered.—On the 20th William Chorley, jun. was attacked in a similar manner, was so treated, and soon recovered.—The two following Cases will perhaps place the matter in a still stronger light. James Graves, aged 59, and John Temperton, aged 50, two male nurses in the Cholera Hospital, were in the same hour, on the 8th of July, both seized with Sickness, and severe Diarrhæa, attended with prostration of strength to such an extent as to compel them to go to bed. The haggard looks of one (James Graves) was such as to induce a Gentleman who called at the Hospital, to pronounce it an



unequivocal case of Cholera. Yet, strange as it may appear, it was proved by the speedy success of the treatment adopted, (a mode totally at variance with that used in cases of the present Epidemick,) that the whole had arisen from the parties having taken a little too much stale Porter, induced so to do by being overheated by their exertions in the performance of their Duties. Numerous proofs of the same nature might be brought forward, The above have been selected as being the most striking of any which I have witnessed. Were proof wanting of the dire effects which have arisen from mistaking Cholera for that which is so miscalled, it might easily be furnished.

A few, and only a few, words on the contagious nature of the Disease. For myself, I must own, that a bare inspection of the Map which points out its progress is sufficient. In addition, I have been able to trace distinctly the mode of its introduction, and its subsequent propagation in this place.\* Two strong facts likewise, which have occurred since its arrival here, shew, as plainly as appears necessary, that the Disease may be propagated by individuals who are themselves not under its influence. The relation of these facts necessarily calls to mind the history of the Black Assize at Oxford. Joseph Longshaw, aged 28, a resident of lower Bank-Street, was seized with the prevailing Epidemick, and died after a few hours' illness. His widow, and three children, all of whom remain in good health to the present time, removed, immediately after the Funeral, to the house of a near relative at Lymm, and communicated the Disease, to their two relatives, Peter aged 50, and Hannah Long-

\* A brief account of the rise and progress of the Epidemick, in War-rington, is intended to be drawn up by Mr. Glazebrook, the Secretary to the Board of Health. To this Gentleman every document, in my possession, will be submitted.

shaw aged 48; both of whom died of the Disease, in a short time. No third case has, hitherto (Aug. 25th) occurred in the Parish of Lymm.—Betty Thomason, wife of John Thomason, senr. aged 80, and mother of John Thomason, junr. aged 24, both living in lower Bank-Street, a woman of intemperate, and dirty habits, and who has not, at any time experienced any symptom of the Disease, after being closely engaged in nursing her husband, and son, was in near contact with Miss Kerr, for a considerable time, in the open air on the evening of June 26th. On the following morning Miss Kerr was seized with Diarrhœa, which continued through the day; Collapse came on suddenly at 10 o'clock in the evening. She died at 10 o'clock the following morning.

On the subject of prevention I am not aware that any thing important can be added to what has been said repeatedly already. It is much to be regretted that we, at present, know little or nothing as to any antidote, to the morbid Poison which is the cause of the Disease. We are utterly ignorant of the chemical composition of this or any other morbid Poison. How then, except by accident, are we likely to adapt a corrective? Have we not hitherto been disposed to consider putrefaction and contagion as synonymous terms? What sure reason have we for thinking so? Have we any better reason than their often existing together? Would it not be worth while to try the effect of Alkali, Ammonia\* for instance, as a corrective of the Poison! On the non importance of Cholerine, &c. the evidence of the French commission, lately issued, appears decisive.

\* For this suggestion. I am mainly indebted to my friend, J. A. Borron, Esq. For the idea that the contagious poison is probably of an acid nature, to Dr. Stevens.

A brief statement of the mode in which the saline treatment has been practised in this place, may perhaps be acceptable.

A Desert, and sometimes a Table-spoonful, of powdered Mustard, mixed with half a Pint of Water, was first given as an Emetic, the good effects of which were generally, *perhaps always*, in proportion to the length of time it was retained on the Stomach. In a very few instances it has been necessary to repeat the dose.

At the same time, a large Cataplasm composed of powdered Mustard and Water, unmixed with Linseed Meal, was applied to the Epigastric region, and suffered to remain on the part so long as it could be borne by the patient.

As soon as the Emetic had ceased to act, the Saline Powders of Dr. Stevens, as first described in the Medical Gazette for April 21st 1832, were given every hour.—In severe Cases, the dose of the Chlorate of Potass was doubled, and in some malignant Cases, given every half hour until re-action took place. Afterwards the dose was diminished, and the intervals of administration increased, but it was continued until re-action had fully taken place, *and the functions of the Liver and KIDNEYS restored*. During the time of using the Saline Powders no beverage was allowed, except Toast-Water, Barley-Water, Tea, and *very weak* Brandy and Water.

Clysters were thrown up, as warm as could be borne, composed of half an Ounce of Muriate of Soda, dissolved in a Pint of Water. In the more severe cases, three Drams of the Chlorate of Potass was substituted for the Muriate of Soda, and with good effect. Friction was regularly employed, and warmth promoted externally, by Blankets, and Stone-ware Bottles, filled with hot Water, applied to the Soles of the Feet,

the Sides, and underneath the Axillæ. Where the Cramps were severe, Mustard Cataplasms were applied to the Calves of the Legs; Opium was never given, and Calomel only during the consecutive Fever. Under the Saline mode of treatment, consecutive Fever occurs but seldom, *and when it does occur*, is generally manageable. Bleeding has but seldom been resorted to. By myself only once, *and from what I know of its effects in the hands of others*, I should say that, *except in a very few instances, it is better omitted.*

I have already adverted to the Mercurialization of the system as an additional means of treating the more malignant cases. Dr. Holme of Manchester, whose friendship, and good opinion, I trust I estimate as I ought, has suggested as the most expeditious mode of raising the Epidermis, to take a Tin vessel, with a flat bottom, of the size of the intended vesication, to fill it with boiling Water, and to place it on the Skin, with a moistened piece of woollen Cloth interposed, until the object is attained; or to take a flat metal plate heated to a proper temperature, and apply it in like manner. He informs me likewise that a strong Mercurial Ointment, applied to the naked Cutis, has been known fully to mercurialize the system in six hours; a fact of great importance to be known. *I have sufficient proof that, according to the plan adopted by myself, the necessary effect cannot be produced in less than ten hours.*

It is no more than an act of justice, in concluding these remarks, to acknowledge my obligations to Mr. Sharpe, Mr. Steel, Mr. Kirkland, Mr. Robson, and Mr. Grundy, for the assistance they have afforded me in carrying into effect the saline mode of treatment. To the last named person, who has filled the Office of resident Surgeon to our Cholera Hospital, I give my voluntary testimony to the Humanity, Attention, and Skill, with which he has filled his important Office.

Of Mr. Robson's conduct, I cannot speak too highly. When the Enemy was yet at a distance, and too many of his brethren slumbering, or sneering, behind

“The safe high walls of Ignorance,”

he was preparing his Armour. That Armour he put on, before the Enemy appeared at the Gates. He has hitherto, through evil report, and good report, fought the battle manfully, and hitherto has escaped without a wound. He has been instrumental in saving the lives of many, and richly merits a Civic Crown and the approbation of a good Conscience, as his Reward.

“*Post acta Coronam.*”

