

Heads of lectures on the theory and practice of medicine / by Andrew Duncan.

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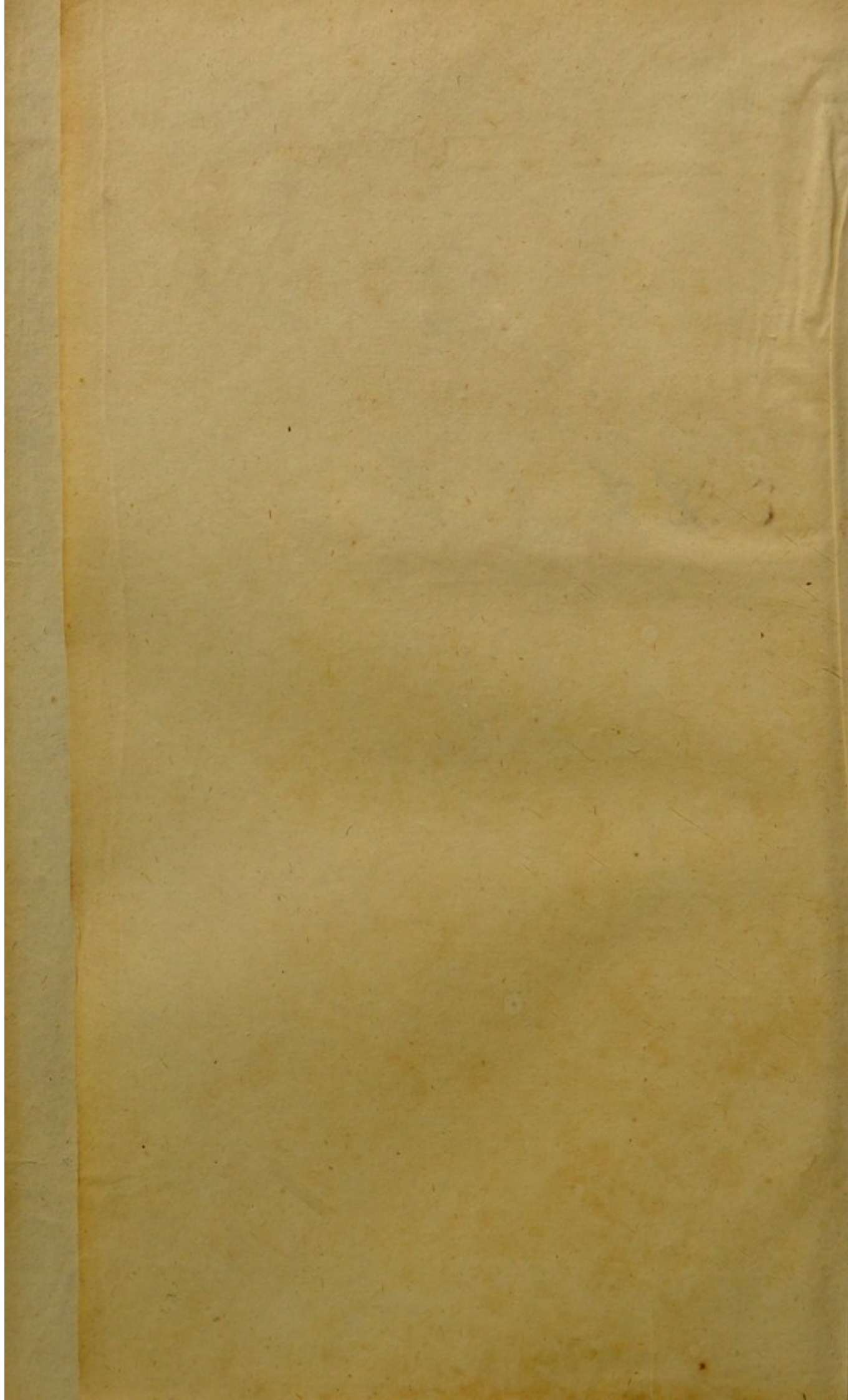
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H E A D S

OF

L E C T U R E S

ON THE

THEORY AND PRACTICE

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OF

M E D I C I N E.

By ANDREW DUNCAN, M. D. F. R. & A. S. Ed.

PHYSICIAN TO HIS ROYAL HIGHNESS THE PRINCE OF WALES, FOR SCOTLAND;
FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, EDINBURGH;
AND MEMBER OF THE ROYAL SOCIETIES OF MEDICINE,
OF PARIS, COPENHAGEN, EDINBURGH, &c.

THE FOURTH EDITION, CORRECTED AND ENLARGED.

Neque mearum virium fiducia rem tantam aggressus sum. Sed quod proximum fuit, ex aliorum copia inopiam meam sublevavi; et quod ingenio defuit diligentia saltem ac sedulitate id compensare sum adnixus.

RUDDIMAN.

EDINBURGH:

PRINTED FOR WATSON, ELDER AND COMPANY,
PARLIAMENT SQUARE.

1790.

H E A D S

OF

L I T T U R E S

N 13

THEORY AND PRACTICE

M I D I C I N E

BY JAMES DUNCAN M.D. &c.

EDITION THE SECOND

LONDON

PRINTED BY RICHARD CLAY AND COMPANY, BUNGAY, SUFFOLK.

NO. 11
CORNHILL
LONDON

MED. CHIR. SOC.
ABERDEEN.

THESE PAGES

FORMERLY DEDICATED TO THE LATE

SIR JOHN PRINGLE, Bart.

AS A PUBLIC ACKNOWLEDGEMENT

OF SINGULAR FAVOURS,

ARE NOW INSCRIBED

TO THE MEMORY OF THAT ILLUSTRIOUS MAN,

AS A TESTIMONY OF RESPECT FOR HIS CHARACTER,

BY HIS SINCERE ADMIRER,

ANDREW DUNCAN.

Virtutem enim illius viri semper amavi, quæ non est extincta.

Cicero.

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BOOKS

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P R E F A C E.

IN the following pages the reader is presented with a brief view of those subjects which are treated at considerable length in my Lectures on the Theory and Practice of Medicine. These general heads are now presented to the public in a fourth edition; and, I hope, not without correction as well as enlargement.

From this syllabus it will appear, that, on some occasions, I have ventured to suggest new opinions and uncommon practices. I hope, however, no reader will consider it as presumption, that I have taken the liberty of thinking for myself, without being fettered in the trammels of any teacher; or that I have endeavoured to add, to the improve-

ments made by others, the result of cautious observation in the course of extensive practice.

But a very slight view of this work will satisfy every intelligent reader, that novelty is by no means the object at which I principally aim. I aspire not at rivalling those founders of systems who claim the merit of establishing medical practice on certain and easy principles. Influenced by a firm persuasion of the difficulty as well as the importance of medicine, I am satisfied with the more humble pursuit of having persisted with patient industry in collecting what I reckoned to be true and useful from the most authentic sources, and in endeavouring to refute those mistakes which I thought might be productive of hurtful consequences.

The ends which I have principally in view are, that those who attend my lectures may be taught by what marks diseases are to be known, and by what remedies they are to be removed or alleviated. How far the subjects which are here pointed out as
the

the basis of remarks merit the consideration of the medical student, must be determined by the judicious reader. How far the remarks which shall be offered are correspondent to the importance of each particular subject, must be decided by the attentive hearer. To their judgment I shall submit with respectful silence.

EDINBURGH,
November 1. 1788. }

W. H. F. A. C. H.
The first of these is the fact that the
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W. H. F. A. C. H.
1875

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HEADS

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L E C T U R E S
O N T H E
T H E O R Y A N D P R A C T I C E
O F
M E D I C I N E.

I N T R O D U C T I O N .

MEDICINE is an art on which mankind have in all ages bestowed very considerable attention. Much has been done both among rude and polished nations for the improvement of its various branches. The communication of the knowledge thus acquired, to those who are afterwards to be engaged in the exercise of that art, is an object of the utmost importance. This has been attempted in many different ways ; but

no one has been found more conveniently fitted for the purpose than that of lecture. In this manner, at least, an extensive knowledge of facts and of principles may be more easily acquired than in any other. From such an acquisition, the advantages afterwards to be derived, by being the witness of actual practice, may be very much increased. Hence has arisen the establishment of medical schools by public and private professors, at universities and other places, where opportunities for the cultivation of the various branches of medicine could be obtained.

That medical lectures may be conducted with advantage to the hearer, nothing perhaps is more essential than the having a distinct view both of the general plan of the course, and of the particular doctrines which are to be the subjects of discussion. For this purpose, a text-book, if not essentially necessary, is at least very advantageous to the hearer. With this intention the following sheets are published. They contain the heads of lectures which I have delivered at Edinburgh for twelve successive winters. They
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are again, after repeated consideration, subjected to the public, with additions and corrections. If they shall have the effect of rendering the chain of reasoning which I employ more perspicuous to those who honour me with their attendance; if they shall assist their memory, or aid their judgment, when they afterwards reflect on what they have heard; my intentions will be in a great measure answered. But, from the heads alone, the nature and design of this course, as well as the advantages which may be derived from it by students of different ranks, cannot be fully understood. To the heads themselves, therefore, it may not be improper to premise a few introductory observations on these subjects.

Of the necessity and importance of a proper medical education before entering on the practice of the profession, it is unnecessary to make any observations. Even the youngest student cannot be ignorant, that when he shall engage in actual practice, the most important concerns of mankind are to be entrusted to his care; and, in proportion to the attention which he has employed in the

study of his profession, the effects resulting from his practice may be of the most opposite nature. By neglecting proper opportunities of improvement, his dearest connections, or most valuable friends, may fall the victims of his ignorance. On the other hand, if, by care and skill in the study of his profession, he can restore health to those afflicted with disease, he bestows the greatest blessing which this world can afford, and may with justice expect to be rewarded and honoured by the living and grateful monuments of his abilities.

It is not from having spent in thoughtless dissipation a certain number of years at schools of medicine; it is not from having repeatedly paid fees to the most eminent teachers, nor from the charm of academical honours, that diseases can be cured. This is to be accomplished only by real medical knowledge; which cannot be acquired without diligent, nay unwearied, exertion. He therefore who entertains the hope of practising medicine, either with advantage to others or honour to himself, will strain every nerve in the study of his profession. But the feelings

INTRODUCTION.

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feelings of a humane heart, consulting its own tranquillity and the good of others, must enforce this doctrine by arguments more persuasive and convincing than words are capable of conveying. The student who possesses such a disposition, will ardently embrace every opportunity of improvement which his situation or circumstances put it in his power to obtain, and will neglect no means of deriving from these all the instruction which they are capable of affording.

It may indeed be imagined, that, from carefully attending an eminent teacher on each particular branch, the diligent student may obtain every advantage which can be derived from lectures. It may therefore be concluded, that, at the seat of an university, where the different branches of medicine are taught by public professors, a field for other medical lectures is precluded: Yet any one who seriously considers the nature and present state of medicine, must soon be satisfied, that, even in such a situation, there is still ample foundation for the labours of other teachers.

When we consider the length of time for which medicine has been cultivated, and the unwearied assiduity which has been exerted in the cultivation of it, there is some ground for concluding, that, long ere now, it should have arrived at a state of perfection. But even the most superficial attention to facts will lead to a very opposite conclusion. In many particulars of the utmost consequence, it is still involved in obscurity and doubt. Many important principles indeed are as far established as the nature of the subject will allow. But it can neither with justice be supposed that any teacher is fully acquainted with these, or that he can fully communicate them in a stated course of lectures. Even where lectures are strictly confined to a particular branch; yet such is the extent of the subject, that imperfections and deficiencies are unavoidable. He who pretends that the cure of all diseases may be effected on a few simple principles, is either to be pitied for his ignorance, or ought to be branded with infamy for want of integrity: and he cannot be considered as raised even one step above the ignorant empiric, who, consulting only
his

his own pecuniary interest, without regarding the lives of others, pretends to cure all diseases by the same remedy. The patient will not be more disappointed in the one case than the student in the other: And he who expects to be taught all that is true or useful respecting a particular branch of medicine from the lectures of any one professor, can have no other foundation for his opinion than ignorance of the extensive nature of the medical art.

But if the extent of different branches of medicine requires views of the same subject from different teachers, this is rendered still more necessary from the state of doubt and uncertainty which still subsists with regard to many important points in every branch of the profession. He who carefully examines the doctrines of the most illustrious authors, and compares the opinions of the most eminent teachers, will soon be satisfied, that, in many of the most important particulars, they hold very different sentiments. The history of medicine affords incontestable evidence, that, from the earliest periods of the art, there has been a constant

succession of theories, and of practices connected with these. In the present age, while free enquiry is cultivated and encouraged in every department of philosophy, it cannot seem strange, that experiment and reasoning should have given rise to many new opinions respecting different particulars in the animal œconomy.

Amidst this diversity of sentiment, those whose object is the attainment of truth, should hear and examine as many different opinions as the plan of their education will allow. By such diligent and careful examination, they have the best chance of avoiding error: by this alone can they appropriate to themselves what they hear from others; and by this will they be enabled to carry from medical schools a set of principles which may be the foundation of future practice, not as the mere tenets of a professor, implicitly adopted without proper examination, but as the result of their own judgment, after due consideration.

But if, to learn what has already been discovered, and to arrive at truth amidst doubts and difficulties, it be necessary to attend

attend to the lessons of different teachers on the same subject; this is no less requisite as a means of paving the way to future discoveries. Where the mind is not open to conviction, an effectual bar is put to all farther improvement. While it is fettered in the trammels of authority, no progress can be expected. To a liberal spirit of inquiry, every important discovery respecting the just principles of the medical art is to be attributed. By the continuance of this, farther improvement may still be expected. There is, however, no means by which liberal and candid inquiry will be more promoted and encouraged, than by hearing and examining different opinions; and, in a field of great uncertainty, even from slight suggestions useful inventions may originate. Where the doctrines delivered by different teachers are in a great measure the same, a difference apparently insignificant may yet lead the hearer to very opposite reflections; nay, from hypotheses, in themselves contradictory or absurd, something useful may still be derived. Hence, were there no other argument for attending

attending different teachers on the same branches of medicine, the tendency which it has to encourage liberal inquiry, and to pave the way to future discoveries, should alone be a sufficient inducement to it.

But when to this we add the arguments which have been drawn both from the nature and extent of the subject, it may reasonably be concluded, that those who are anxiously bent on acquiring real knowledge, will not fail to avail themselves of such opportunities. For the proper exercise of the medical art, acquaintance with numerous facts is indispensably requisite. This, it is true, must be more the fruit of careful observation of diseases themselves, than either of diligent reading or attentive hearing at medical schools. But if any one enters upon practice whose mind is not previously stored with a proper selection of facts, he will find himself in a most disagreeable situation. Too much pains, therefore, cannot be bestowed in attempting to obtain such a selection; and in a subject so extensive as medicine, the omissions of every system must be by no means inconsiderable.

By

By attendance on different teachers, those omissions will not only be in some degree supplied; but, from difference of arrangement, and from some particulars being fully insisted upon by one, some by another, a more thorough knowledge of all will be obtained. Thus even the most superficial view may be an useful supplement to the most extended. He who embraces such opportunities cannot afterwards have reason to repent either the expence or labour which he bestows, even although his expectations should not be fully answered: On the contrary, any man of feeling and humanity, who enters upon practice, will soon be satisfied that he has yet much knowledge to acquire; and if he has neglected any opportunity from which information could have been derived, he cannot fail to reflect upon it with regret.

From the observations which have now been offered, the advantages to be derived from private lectures, even at the seat of an university, where the different branches of the art are taught by eminent professors, must be obvious. From such considerations

I was first induced to begin those lectures for which the present work is intended as a text-book. And while the nature, extent, and uncertainty, of the medical art, afford ample field for the exercise of genius and industry from different teachers, with regard to any branch of it, the propriety of the present undertaking will, I trust, be still farther evident from considering the nature and plan of these lectures, as well as the different ranks of students for whom they are particularly calculated.

In these lectures, both theory and practice are conjoined; and it is my endeavour to deliver, as far as I am able, although upon a confined scale, what may be termed a complete system of the scientific part of medicine. From this conjunction, the cure of diseases will be taught upon the same principles that the laws of the animal-œconomy are explained. The advantages of such a plan are too obvious to require any explanation. Accordingly, at almost every celebrated medical school, it becomes an object of attention that the students should not be confined to hear merely the theory
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of one professor and the practice of another: for, if each think for himself, it is next to impossible that they can agree in every particular; and although both be men of eminence and abilities, their doctrines may yet be very different. Thus the student is necessarily deprived of a connected system, the different parts of which mutually illustrate each other.

Not many years ago, it was represented, by the professors of the first eminence, as a peculiar advantage of the University of Edinburgh, that, from the alternation which then took place between the theoretical and practical chair, the students had an opportunity of hearing the same professor on both these subjects, while at the same time they had it in their power to hear different teachers on each of them*. Without inquiring into the reasons for which this mode of teaching, at one time so much admired, was relinquished, it is sufficient to observe, that

* Theory and Practice were then taught alternately by Dr Cullen, who was at that time the Theoretical Professor; and the late Dr Gregory, who then held the Practical chair.

the present undertaking will, in some degree at least, be productive of these advantages: and indeed, at schools of medicine in general, theory and practice are more frequently conjoined in the hands of the same teacher than taught by separate ones; for it is thus that a connected view can most readily be had of the essential principles of the healing art.

To accomplish this, as far as my abilities will allow, I have endeavoured to arrange the subjects to be treated of in such an order as is best suited for avoiding repetition, and for affording mutual illustration. This, however, as well as the particular topics which are to be the subject of consideration, will fully appear from consulting the heads themselves. I may only observe, that I have aimed rather at selecting the most important topics, than at entering into a minute detail; and it has been my endeavour to avoid extending so far on particular subjects as to render it necessary to pass over others in a cursory manner. I flatter myself, that by holding these objects in view in the illustration, that proportional
degree

degree of attention may be bestowed on each which its importance merits.

If, however, from the nature and plan of this undertaking, there be reason to conclude, that it may not be unworthy of attention from students in general, it may farther be observed, that there are students in particular circumstances who may expect to derive from it peculiar advantages.

While to every one different views of doctrines that are intricate and doubtful must be of consequence, there are some for whom concise views are particularly proper. The several branches of medicine have an intimate and necessary connection with each other. Although an acquaintance with some must be premised to the study of others; yet, for properly understanding any one of them, a certain degree of knowledge in all is requisite. Hence those who are but beginning the study of medicine may derive much advantage from a concise view of the different branches of it, before they enter on the consideration of them on a more extended plan. To those, therefore, who mean to conduct their studies on the most liberal footing,
such

such lectures as the present may serve as an useful introduction both to the theoretical and practical parts of the art. That the practice of medicine, indeed, may be studied with due advantage, many preliminary branches are requisite: yet to this branch, even at the earliest period of medical studies, it is particularly necessary that some attention be paid. This is the ultimate object to which all the others are to be directed. It is necessary, therefore, that a taste for practical inquiries should be cultivated and improved at the commencement of medical education. If this be neglected, the mind, captivated by other speculations, cannot be turned without more difficulty to objects of the greatest importance. Hence, then, such a course as the present may with propriety be recommended to those who intend to spend several years in the study of medicine, even as part of their employment during a first session. And if it have the effect of throwing that light on the other branches of medicine which their mutual connection renders necessary, or of inspiring a relish for practical inquiries; these are advantages

vantages which, to students in such a situation, are by no means inconsiderable.

It is not, however, in the power of every one who dedicates his life to the healing art, to spend a number of years in the precincts of an university. There are many who, although very desirous, and even fully resolved, to prosecute the study of medicine with the utmost attention, can remain for the space only of a single winter attending medical classes. From the time, therefore, which is requisite for other studies, particularly for the anatomy, students in this situation cannot attend long extended courses both of the theory and practice. Hence, where an opportunity is not afforded of hearing them in conjunction, the attention which ought to be paid to these branches is necessarily postponed to other studies. These are referred as the subject of employment during leisure hours, after engaging in the actual exercise of the profession. In the prosecution of such studies, industry and genius, aided by the works of the most eminent medical writers, may do a great deal: yet when an opportunity is afforded to students of

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attending

attending both theory and practice on a more limited scale, they may at least obtain from thence a basis for future inquiries. By the observations delivered in such a course, although minute investigation cannot be expected; yet their after-studies may be facilitated, and they may retire from the schools of medicine with more extended views than would otherwise be the case. Hence, to students in this situation, also, the present undertaking may be productive of very considerable advantages.

Thus, then, it appears, that these lectures may serve useful purposes both to those who have an opportunity for a very complete course at medical schools, and to those who are necessitated to take a very limited one.

But, besides this, to students of medicine of all denominations, and in every situation, they may afford different views and additional observations on subjects which, from their ambiguity and extensive nature, require the most serious attention. Those even who have spent several years in the study of medicine, on a careful perusal of these heads of lectures, will, I am persuaded, be at no loss
to

to discover many topics pointed out as subjects of discussion, with regard to which they would be desirous of hearing farther observations. Perhaps, to such students, some farther advantage than the mere gratification of curiosity, may accrue from hearing the proofs and illustrations which shall be offered, of opinions in theory and suggestions in practice, which are peculiar to me, and in a great measure new to them.

To these heads of lectures, after pointing out the different subjects of consideration, both with respect to theory and practice, I have subjoined also a general view of the business of the *Collegium Casuale*; and it may not be improper to say a few words respecting the nature of that institution. The *Collegium Casuale* at Edinburgh is conducted on a plan almost precisely similar to that followed in an institution of the same name at Leyden; and from that institution the appellation here employed is borrowed. The view which is annexed renders any explanation of the plan almost entirely unnecessary. The two great objects which are aimed at are, the exhibiting to the student rational

and attentive practice, and the illustrating the grounds of that practice by a proper explanation.

As the subjects of practice, the numerous patients who apply for aid at the Public Dispensary afford an ample field for selecting cases which, in their nature, are either singular or important. Thus an opportunity is afforded of illustrating experimentally, and by example, those doctrines and precepts which the mere lecturer on practice can enforce only by reasoning.

But if much benefit may be derived from being the witnesses of this practice, from observing the appearance and progress of diseases, from marking the operation and effects of remedies, still more may reasonably be expected from the observations with which this practice is accompanied. These observations will consist chiefly of two kinds. When the treatment of any case is begun, they will consist of remarks on the name and nature of the affection, with an account of the intended plan of cure: and, after it is terminated, they will consist of such practical observations, and useful conclusions, as
may

may be drawn from the facts presenting themselves during the course of it. By the first, then, the student will be initiated in that exercise of judgment which must engage his attention as soon as he undertakes the treatment of any case; and he will be enabled to derive instruction, not only from the knowledge and skill, but likewise from the doubts and errors, of his teacher. By the last, he will not only become familiarly acquainted with the influence which remedies are ordinarily capable of exerting; but will acquire a valuable stock of useful practical facts which might otherwise escape his notice, even when occurring in cases which fall under his own observations. That the advantages, therefore, resulting from actual practice, will by this means be very much extended and increased, cannot admit of doubt.

With regard to the business of this institution, it may farther be observed, that it admits of an almost infinite variety. In other courses, although additions and improvements be made, yet the greater part will consist of repetition of what has been delivered in former years. But when par-

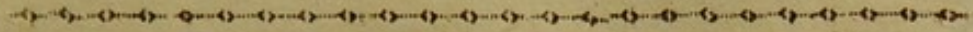
ticular cases become the subject of lecture, repetition is next to an impossibility, without gross and flagrant error. Hence, while the illustrations offered in case-lectures increase the advantages to be derived from being the witness of actual practice, even by the youngest student, the endless variety which they exhibit should render them a constant object of attention, even with those who are farthest advanced: nay, from every such course, the faithful teacher, as well as the industrious student, cannot fail to derive instruction of the greatest importance.

I have thus, then, endeavoured to give some view of the nature and design of the lectures for which these heads are intended as a text. If such an undertaking were conducted with all the advantages of which it is capable, there can be little doubt that very considerable benefit must accrue from it to students of different ranks. But the proper execution of this task is not to be accomplished without the greatest abilities conjoined to the most indefatigable industry. The improvement of the student must be proportioned

portioned to the talents of the teacher. I cannot therefore expect that my labours will be productive of equal advantage with those of any other teacher on the same plan, whose happier natural endowments have been improved by longer cultivation, by more extensive experience, and who is capable of bestowing an equal or greater degree of attention on the duties of a lecturer: yet I may at the same time venture to assert, that the industry which I have formerly exerted has been by no means inconsiderable. No one is ignorant, that unwearyed assiduity, even with very moderate abilities, is able to accomplish undertakings in their nature arduous; and if I have formerly executed this task with any degree of satisfaction to my hearers, I may reasonably hope that I shall hereafter be able to attain this end to a still higher degree.

During twelve winter-sessions I have delivered these lectures at Edinburgh, and the success which I have had has much exceeded my most sanguine expectations. From the judgment of a numerous and attentive audience, succeeding students will derive

the most satisfactory information as to the real import of my labours. While, however, I am persuaded that many of them, overlooking unavoidable errors and necessary omissions, will with candid indulgence give a decision as favourable as is consistent with truth, I can yet alone expect future success from future exertions. From this, therefore, joined to other considerations, it may naturally be concluded, that while I continue in the character of a teacher of medicine, while I am favoured with the countenance of students, and while I enjoy the blessing of health, my utmost endeavours shall never be wanting for the instruction of those who honour me with their attendance.



PART I.

OF THE

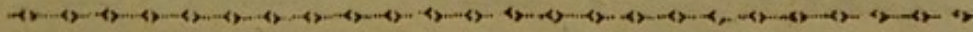
HUMAN SYSTEM

IN A

STATE OF HEALTH;

OR, THE

PHILOSOPHY OF MEDICINE.



PART I

OF THE

HUMAN SYSTEM

IN A

STATE OF HEALTH

OR THE

PHILOSOPHY OF MEDICINE

THEORY OF

*Concerning the Nature and Properties of the
different Parts of which the Human Body
is composed.*

I. Of the FLUIDS.

1. *Of the Chyle.*

OBSERVATIONS on the nature of the chyle—Account of the matters from which it is formed—Obvious appearance—Resemblance to milk in the mammalia—Colour in birds—Taste—Specific gravity—Spontaneous separation—Coagulation—Accescent tendency—Natural contents—Different opinions respecting these—Evidence of its containing sugar—Changes of its appearance in the lacteals, from mixture with extraneous substances—blue—yellow—red—Different qualities without any change of colour

colour—Evidence that every substance soluble in water may be taken up by the lacteals—Arguments for denying this in the case of iron, even in a saline state—Objections to these arguments—Inquiry respecting the time when the chyle is most abundant in the lacteals—The changes which it undergoes in the thoracic duct—The changes to which it is subjected in the blood-vessels—Time at which it disappears.

1. *Morbid Affections of the Chyle.*

A. From its quantity.

a. Superabundance.

b. Deficiency.

aa. From want of proper aliment.

bb. From want of proper assimilation.

cc. From a diseased state of the lacteal vessels.

B. From its quality.

a. Depending on changes of the natural contents.

a. Of the watery part.

b. Of the sugar or saline part.

c. Of the coagulable part.

d. Of

- d.* Of the butyraceous part.
- b.* Depending on the introduction of foreign matters.
 - a.* Of matters introduced with the ingesta.
 - b.* Of matters formed in the alimentary canal.

2. *Of the Blood.*

OBSERVATIONS on the different constituent parts of the blood—Examination of the constituent parts from spontaneous separation—Halitus — Crassamentum — Serum.

Sensible qualities of the halitus—Difference in different animals—The changes it undergoes in disease—Its noxious power in some instances—Qualities on condensation—Effects of chemical trials—Change on the specific gravity of the blood from its escape—Observations on the supposition that its activity depends on phlogiston.

Parts entering the composition of the crassamentum — Red particles—Coagulable lymph or gluten—Parts entering the composition

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Observations on the formation of the red particles—Examination of the opinion of Mr Hewson, which supposes them to be formed by the lymphatic system—Arguments by which that opinion is supported—Objections to these arguments—Objections to the doctrine in general.

Observations on the cause of the red colour of the globules—Conclusions on this subject from the experiments of Drs M'Lurg, Stevens, and Hamilton—Varieties in the colour from dilution—from the state of the animal—from coagulation—from circumstances preventing spontaneous separation—from circumstances promoting separation—from the access of air.

Obfer-

Observations on the size of the red particles—Calculations of different authors—Varieties in different animals.

Properties of the red particles—Elasticity—Inflammability—Effects of acids—of alkalis—of neutrals—of water—the manner in which the red particles break—their solubility.

COAGULABLE LYMPH OR GLUTEN—Inquiry whether the gluten of the crassamentum be different from that of the serum—Properties by itself—taste—smell—consistence—colour. Relation to other matters—The effects produced upon it by the action of heat—of vitriolic acid—of muriatic acid—of caustic alkali—of metallic salts—of alcohol—The analogy which it has to the albumen ovi—to cheese.

SEROSITY—Particulars in which it corresponds with water—changes produced upon it by the action of heat—of acids—of alcohol—of boiling—Disputes as to the nature of the saline matter which it contains—View of the arguments brought to prove that it is an ammoniacal salt—View of the arguments brought

brought to prove that it is principally a fossil alkali.

Examination of the constituent parts of the blood by chemical analysis—Water—Spirit—Volatile salt—Oil—Residuum—Contents of the residuum—fixed salt—acid—earth—iron—air—Other principles.

MISCELLANEOUS particulars respecting the blood.

Of the coagulation of the blood—Time at which it takes place—Circumstances in which it happens—Causes supposed to induce it—cold—rest—air—Varieties in the disposition to coagulate—Causes inducing these varieties—Different opinions respecting the influence of the action of the vessels as affecting coagulation—Doctrine of Mr Hewson—of Mr Hey—of Dr Hamilton—of Dr Broughton.

Of the heat of the blood—Connection with animal-heat in general—Varieties in different animals—Division of animals from that circumstance—Changes produced on it by disease—Constancy in different temperatures of the atmosphere.

Of the life of the blood—Antiquity of the opinion—Hypothesis of Mr Hunter—Arguments

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Of the quantity of the blood—Varieties in different animals of the same species—Proportion which it has been supposed to bear to the solids—Objections to the principles on which these calculations have in general been made—Grounds on which a probable conjecture may be formed.

Of the differences between the arterial and venous blood—Proof of a difference in colour—Causes to which it has been ascribed—nitre—air—escape of colouring matter—Opinions of various authors with regard to a difference in density and weight between the arterial and venous blood—Changes taking place in the blood during inflammatory diseases—Causes to which it has been ascribed—Hypothesis of Mr Hewson—Objections brought against his opinion—Hypothesis of Mr Hey—of Dr Hamilton—Experiments of Dr Broughton—Conclusion from all these.

3. Pathology of the Blood.

A. Morbid affections from its quantity.

a. Plethora.

- a.* Depending on the increase of the quantity of the blood.
- b.* Depending on the capacity of the vessels.
- c.* Depending on the volume of the blood.
- d.* Depending on the proportion of blood in the arterial system.
- e.* Depending on the proportion of blood in the venous system.
- f.* Depending on the proportion of blood in particular parts independently of the general state of the system.

b. Inanition.

- a.* Depending on a deficiency of blood.
- b.* Depending on an increase of the capacity of vessels.
- c.* Depending on a diminution of the proportion of blood in the arterial system.

d. Depending

- d.* Depending on a diminution of the proportion of blood in the venous system.
 - e.* Depending on a diminution of the proportion of blood at particular parts.
- B. From its quality.
- a. Depending on changes of the natural contents.
 - a.* Of the red globules.
 - b.* Of the serosity.
 - c.* Of the saline matters.
 - d.* Of the coagulable part.
 - b. Depending on foreign matters.
 - a.* On matters introduced with the aliment.
 - b.* On matters introduced by the lymphatic system.
 - c.* On matters generated in the blood itself.

4. *Of the Milk.*

GENERAL appearance of the milk—
 Fluids from different parts of the animal-body resembling it—Its spontaneous separation

paration—Its constituent parts—Cream, or butyraceous part—Coagulable part, or cheese—Serum, or whey.

Of the butyraceous part—Its general properties—The analogy which it has to the red globules of the blood—Varieties in the proportion which it bears to the other parts of the milk—in different species of animals—in different individuals of the same species—in the same individual at different times—Causes of these varieties—from the general laws of the system—from peculiarity of constitution—from the aliment which is taken—from the distance from the time of delivery—from the particular time of the discharge—Varieties in the qualities of the butyraceous part of the milk—in taste—in colour.

Of the coagulable part—The analogy which it has to the gluten of the blood—Substances capable of producing the coagulation of it, or runnets—Influence of the stomachs of animals—Extent of this power in the stomachs of animals never fed on milk—Vegetable runnets—Circumstances in which vegetable and animal runnets differ
—Varieties

—Varieties in the temperature of the milk required for their action—Controversies concerning the principle on which runnets act—Inquiry how far their effects depend upon acidity—Effects from the addition of alkali as altering the strength of runnet—Effects from acid—from alcohol—from neutral salts.

Of the serum of milk — The analogy which it has to the serum of the blood—Its constituent parts—Water—Saline matter resembling sugar—Varieties in the proportion of sugar entering the milk—in different animals—in the same animal at different times—The universality of this saline matter in all milk—Inquiry how far it depends on the aliment which is used—Account of the late observations of Dr Lichtenstein concerning the different kinds of sugar of milk.

Matters accidentally entering the milk—from the aliment—from the system itself—The effects of a full meal upon the milk—The peculiarities of the human milk—Conclusion respecting the general analogy between milk and blood.

5. *Of the Mucus.*

EXTENT of this fluid over the animal system—The different purposes for which it is intended—Contents of the mucus—Water—Coagulable matter—Properties of the mucus—its viscosity—its specific gravity—Effects from drying the mucus—from the addition of cold water—of boiling water—of neutral salts—of acids—of alkalies—of ardent spirit—of metallic salts—Changes produced on the mucus from exposure to air—from putridity—from burning—Chemical analysis of the mucus—Changes induced on it by disease.

6. *Of the Saliva.*

ACCOUNT of the organs by which it is secreted—Observations on the quantity of this secretion in the human species—The universality of it over the animal-creation—Its proportion, in point of quantity, to the nature of the food—Its general properties—Its component parts—Water—Saline matter—Coagulable

—Coagulable matter—Effects from the exposure of saliva to air—from quick evaporation—from the addition of oils—of metallic substances—of alkalies—of acids—of alcohol—of corrosive sublimate—Effects from the action of the air-pump—Chemical analysis of saliva—Effects of burning the residuum.

7. *Of the Succus Gastricus.*

OF the organs by which the succus gastricus is secreted—Difficulty of obtaining it in a condition fit for experiment—The analogy which it has to the saliva—Circumstances in which they differ from each other—The arguments which are brought to prove that it possesses an alkalescent tendency—Examination of the opinion which supposes a powerful solvent to be secreted in the stomach—View of the arguments brought to prove the existence of such a fluid by Mr Hunter—by Dr Monro—by Dr Stevens—by the Abbe Spallanzani.

8. *Of the Pancreatic Juice.*

OF the organs by which it is secreted—
 The analogy which it has to the saliva
 —Its contents—Different opinions respecting
 its chemical qualities—Extent to which it is
 secreted—Disputes with regard to its use—
 View of the arguments brought to prove that
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 sition that it serves for dissolving and ma-
 cerating the food.

9. *Of the Bile.*

OBSERVATIONS on the organ by which
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 ference between the hepatic and cystic bile—
 Sensible qualities of the bile—Consistence—
 Changes taking place in it at different periods
 of life—Specific gravity—Supposition of glo-
 bules—Effects of mixture with water—with
 oil—with alcohol—with neutral salts—with
 alkalies—with acids—Influence of the ni-
 trous acid as affecting the colour of the bile
 —Change produced by the vapour arising
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again condensed—Effects produced upon bile by heat—Contents as discovered by chemical analysis—air—water—spirit—oil—volatile salt—Conclusions concerning the nature of the bile—Observations on its constituent parts—Water—Saline matter—Coagulable matter—Colouring matter—Objections to the supposition that the coagulable part is of a resinous nature—Arguments for proving that it is similar to the gluten of the blood—Means by which it may be separated from the other parts of the bile—Experiments for ascertaining its nature—Colouring matter of the bile—Common opinion entertained with regard to it—View of the arguments brought to prove that the colour of the bile depends upon iron—Objections to this supposition—Evidence that the colouring matter of the bile is the same with that from which it derives its taste—Arguments for supposing that both the colour and taste of the bile depend upon phlogiston.

The analogy between the bile and the blood—Reasons for believing that the colour of the milk, the blood, and the bile, depend upon the same principle—Explanation

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10. *Of the Synovia.*

ACCOUNT of different opinions concerning the organs by which the synovia is secreted—Its sensible qualities—Inquiry how far it is coagulable—Effects said to be produced upon it by acids and heat—Its analogy to mucus—The extent to which it is secreted.

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OBSERVATIONS on the organs by which the perspirable matter is separated—The circumstances under which it is visible—Its nature—Its constituent parts in ordinary cases—Water—Saline matter—Accidental impregnations—from fœtid odorous matters—from different qualities of the aliment—Examination of the opinion that it
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is impregnated by the electric fluid—Observations respecting the mephitic air entering its composition—Quantity of perspirable matter discharged—Variety in different climates—Inquiry into the causes of this variety—The analogy between perspirable matter and the halitus from other parts—Circumstances in which they differ—Particulars in which perspirable matter differs from sweat.

12. *Of the Urine.*

OF the organs by which the urine is secreted—Its sensible qualities—The changes which these undergo, even in a state of health—from the period of life—from the temperature in which the body is kept—from the influence of passions of the mind—from the state of the ingesta—Urine of the drink—Urine of the chyle—Urine of the blood—General remarks on its sensible qualities—on its colour—smell—taste—gravity—heat—consistence—The spontaneous separation of urine—Varieties which occur
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with respect to the matter which is separated from the more watery part—Contents of the sediment—The condition of the more watery part after this deposition—The separation of earth from urine—Examination of the urine in the way of mixture—Its contents as discovered by chemical analysis—water—native salt—spirit—volatile salt—oil—volatile acid—phosphorus—charcoal—earth—Purposes for which the discharge of urine seems to be intended.

13. *Of the Tears.*

USUAL state of the discharge of tears—Organs by which they are secreted—Their nature—Their sensible qualities—Varieties in point of quantity—Inquiry into the cause of an augmented flow from grief—Use of the natural secretion.

14. *Of the Nervous Fluid.*

OBSERVATIONS on Dr Monro's account of the structure and extent of the nerves—Inquiry respecting the existence of

a nervous fluid—Account of the doctrine which supposes that the nerves perform their functions by acting as solids—Objections to that hypothesis — Arguments brought to prove that the nerves are conductors of a fluid—Doubts respecting the conclusions from these arguments—Inquiry whether the nervous fluid be secreted or not—An account of the opinion which supposes that the nervous fluid is not secreted by the brain, and conveyed by the nerves, but merely attached to them—Arguments in favour of the opinion that the nervous fluid is secreted by the brain—Examination of the opinion which supposes that the nervous fluid is the phlogiston of the blood—Objections to that supposition—Inquiry whether the nervous fluid be conveyed in tubes, or propagated along the nerves as solids—Inquiry whether the phenomena of sense and motion are to be explained from undulation or a flow of fluid — Inquiry whether any other fluid be conveyed by the nerves than that which is subservient to sense and motion—Examination of the opinion which supposes that the nerves convey coagulable

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15. *Of the Semen.*

THE organs by which semen is secreted—The state in which it is commonly subjected to examination—The appearance of it in a pure state—The changes which it undergoes from mixture—Account of the opinion that the vesiculæ feminales contain only a fluid secreted by themselves—Arguments brought in proof of this doctrine—from the variety in the structure of the vesiculæ feminales—from the appearance of the fluid they contain in the dead body—from the state of their contents after castration.

The specific gravity of semen—its peculiarities in smell—The effects of exposure to air—of mixture with water—of the application of heat—of mixture with acids—with fixed alkali—with aromatic oils—with alcohol—Chemical analysis of the semen—

Micro-

Microscopical observations respecting it—
Discovery of animalcules in the semen—
Account of their appearance—Principal con-
troversies respecting them—Inquiry whe-
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to be considered as the first stage of the em-
byro—whether they can ever be derived
from any other part than the testicles—
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what part of the blood they are formed—
Different liquors entering the composition
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which of these generation depends—Differ-
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SOURCES from whence the lymph is de-
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Accidental impregnations—effects of these
impregnations on the system—Changes in
the appearance of lymph in the lymphatics
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THE analogy which the different animal-fluids have to each other—The most general constituents of all of them—water—coagulable matter—saline matter—oily matter—Properties of the fluids depending upon water and coagulable matter—Properties of the fluids depending upon saline and oily matters—General division of the more active properties of the fluids into saline and phlogistic—Qualities depending upon a saline impregnation—Qualities depending upon the principle of inflammability—Characteristics of the saline qualities—Characteristics of the phlogistic qualities.

3. *Morbid Affections of the Secretions.*

A. From their quantity.

a. Depending on augmentation.

aa. Arising from peculiar determination to the secreting organ.

bb. Arising from increased action of the vessels in the secreting organ.

cc. Arising from augmented action of the excretory.

b. Depending on diminution.

aa. Arising from the state of circulation at the secreting organ.

bb. Arising from the condition of the vessels of the secreting organ.

cc. Arising from the action of the excretory.

B. From their quality.

a. Depending on changes of the natural contents.

a. Of their phlogistic qualities.

aa. Arising from the state of the pabulum supplied for secretion.

bb. Arising from the peculiar action of the secreting vessels.

D

cc. Arising

- cc.* Arising from stagnation and absorption.
- dd.* Arising from excessive dilution.
- b.* Of their saline qualities.
 - aa.* Arising from the state of the pabulum.
 - bb.* Arising from the state of the secreting vessels
 - cc.* Arising from the state of absorption.
- c.* Of their mucaginous qualities.
 - aa.* Arising from preternatural diminution of coverings.
 - bb.* Arising from preternatural augmentation of coverings.
- d.* Of the qualities depending on water.
 - aa.* Arising from superabundance.
 - bb.* Arising from deficiency.
- b.* Depending on the introduction of foreign matters.
 - a.* From the pabulum.
 - b.* From the condition of the secreting vessels.

*Concerning the Nature and Properties of the
different Parts of the Human Body.*

B. Of the SOLIDS.

I. *General Observations on the Solids.*

PROPERTIES in common to all the animal-solids — Apparent diversity of the solids — The general analogy which subsists among them — View of the animal-solid considered as a matter *fui generis* — Marks by which substances of the animal kingdom are chiefly distinguished from the vegetable — Constituent parts of the solids — Conjectures respecting the nature of the gluten which enters their composition — Observations on its similiarity to the gluten

which has lately been obtained from wheat, potatoes, and similar substances—Resemblance of this matter to the coagulable part of milk—Conjecture concerning the extent of a gluten vegeto-animal—Other constituents of the solids obtained by chemical analysis—earth—salts—air—oil—iron—Intimate mixture of the different parts of the solids—Effects from the application of different fluids to the solids—Evidence from thence of the similarity between the coagulable matter of the fluids and of the solids.

2. *Of the Muscular Fibre.*

OBSERVATIONS on the power of contraction peculiar to muscular fibres—Sensible qualities of the muscular fibre—colour—weight—smell—taste—cohesion—figure—elasticity—flexibility—Examination of the opinion which supposes that muscular fibres are a continuation of nerves—Objections to that opinion—from disproportion in point of size—from difference in appearance

appearance—from difference in strength and elasticity—from qualities peculiar to each—from dissection—conclusion respecting the nature of muscular fibres.

3. *Of the Cellular Membrane.*

ACCOUNT of the opinions at first entertained respecting the cellular membrane—its extent over the system—its qualities—colour—texture—cohesion—the communication of its cells—Dispute respecting its sensibility—Arguments for supposing it to be the produce of the gluten of the blood—from the appearance of condensed halitus—from the appearance of the vesicles of hydatides—from the appearance of the exudation covering inflamed membranes—Use of the cellular membrane.

4. *Of the Vessels.*

ARTERIES—Their figure and course—Strength—Changes which gradually take place in the proportion which the

strength of the arteries bears to that of the veins—Proportion which the strength of the arteries bears to their stiffness—Elasticity of the arteries—Flexibility—Division into ramifications—Number of the divisions according to different authors—Most simple view of the subject—Trunks—Branches—Capillaries—Observations on the proportion which the diameters of the branches taken together bear to the trunks—Different calculations on that subject—Angles at which the branches come off from the trunks—Anastomosis of arteries—Terminations—into veins—into secretory extremities—into exhalent extremities—Different kinds of exhalents—exhalents of coloured liquids—of colourless liquids—of vapour—Objections to the opinion that arteries ever terminate in lymphatics—Proof of the sensibility of arteries—View of an opinion proposed by Dr Beddome, that a set of nerves are peculiarly appropriated to the vascular system—arguments brought in support of this opinion—Doubts respecting it.

VEINS—The analogy of the veins to the arteries—Comparison of the strength of the
veins

veins with that of the arteries—Proportion between the strength of the vena cava and aorta—Proportion between the diameters of the veins and arteries—Valves of the veins—Beginnings of veins—View of the controversy whether they ever arise from cavities.

LYMPHATICS—Account of the discovery of the lymphatics—General appearance—Strength—Valves—Course—Origin—Termination—Lymphatic glands—Examination of the opinion which supposes that the lymphatics and blood-vessels anastomose in these glands—Examination of Mr Hewson's opinion respecting the use and structure of the lymphatic glands—Use of the lymphatic system in general—Extent of their action—Extent over the human body—Extent over animal-bodies in general.

5. *Of the Fat.*

THE condition of the fat in the human system—its situation—the manner in which it is deposited—its general properties

ties—chemical analysis—conjecture respecting the composition of it—Varieties in the quantity of fat—causes of these varieties—Causes producing the loss of fat after it has been deposited—Uses of the fat—Dispute whether on reabsorption it ever serves for the nutrition of the system—Account of the experiments of Dr Stark in proof of its nutritious power—Arguments urged by Mr Hewson in support of the nutritious quality of absorbed fat—Doubts respecting that opinion.

6. *Of the Bones.*

THE appearance of the bones in their earliest stages—The gradual changes which they undergo—The formation of bones—View of the supposition that bone is formed by the ossification of arteries—Observations on this subject by Mr Cruickshank—Different opinions respecting the growth of bones—Examination of the opinion which supposes the circulation of an osseous matter—Examination of the opinion
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nion which supposes the gradual ossification of successive layers of the periosteum—Examination of the opinion which supposes that the growth of bones depends on the deposition of earth on their external surface, and the absorption of it from the internal surface—Observations on the structure of the bones—Component parts—Chemical analysis—General conclusions respecting the gluten of the bones, and the universality of the same matter over the human system.

Of the PATHOLOGY of the SOLIDS.

General Views of the Diseases of the
SIMPLE SOLID.

I.

Morbi partium solidarum simplicissimi ex institutionibus Pathologiæ, Auctore H. D. GAUBIO.

I. Debilitas.

A. Salva cohæsione.

a. Laxum, Flaccidum, in partibus mollibus.

b. Iners, in partibus natura elasticis.

c. Flexile in ossibus.

B. Diffoluta cohæsione.

a. Tenerum, Gracile, in mollibus partibus.

b. Tabidum, itidem, in mollibus.

c. Fissile in partibus natura tenacioribus.

d. Fragile in ossibus.

II. Rigi-

II. Rigiditas.

A. Firmitas insuperabilis.

a. Tenax, in partibus mollibus.

b. Durum, in mollibus quoque.

c. Fragile, Vitreum, in ossibus.

B. Fragilitas flecti nescia.

a. Tenax, in partibus mollibus.

b. Durum, in mollibus quoque.

c. Fragile, Vitreum, in ossibus.

II.

A Table of the Diseases of the Simple Solids,
by Dr CULLEN.

The Diseases of the Simple Solids are,

I. Those of the naturally soft parts.

1. Mobility of the parts too great. *Debile*
Gaub. 157. 159.

A. With respect to the force of cohesion.

a. Debility with flexibility.

Debile tenerum gracile Gaub. 161. 1.

Debile tabidum Gaub. 161. 2.

A. from an overplus of water,

from original stamina,

from weak aliment,

from want of aliment,

from

from weak concoction,
 from increased excretion,
 from imperfect application.

B. from weak cohesion of the concreting matter.

from heat,
 from vitiated nutritious fluid,
 from matter externally applied,
 water, mucilage, oil, &c.

C. from extension near to rupture.

D. from extension of cellular texture,
 from erosion of cellular texture,
 from cutting through some layers
 of a compound membrane,
 from taking away external compression.

E. Emptiness of vessels.

b. Debility with fragility.

Debile fissile Gaub. 161. 3.

from want of humidity,
 from cold,
 from changes in the concreting
 matter.

B. With respect to flexibility, cohesion remaining.

a. Laxity with elasticity.

Debile

Debile laxum flaccidum Gaub. 160. 1.

from all the causes of I. 1. A. a.

except c,

from want of tension,

b. Laxity without elasticity or flaccidity.

Debile iners Gaub. 160. 2.

from an overplus of water,

from long rest in an extended state,

from a certain over-stretching.

2. Mobility of the parts too little, or rigidity.

Rigidum Gaub. 164.

A. Rigidity diminishing flexibility.

Rigidum tenax Gaub. 165. 1.

a. From an overplus of concreting matter,

from original stamina,

from much or very nourishing aliment,

from vigorous concoction,

from vigorous application.

b. From increased cohesion of the concreting matter,

from cold,

from external application of coagulants, astringents, &c.

c. From

- c. From considerable extension.
- d. From long rest in a contracted state.
- e. From the condensation of cellular texture.
- f. From a new growth of cellular texture.
- g. From the shortening of cellular texture.
- h. From a new growth of cellular texture joining parts naturally separate.
- i. From full vessels.
- k. From vessels becoming solid.

B. Rigidity destroying flexibility.

Rigidum durum Gaub. 165. 2.

- from ossification,
- from petrification.

II. Those of the naturally hard parts.

1. Flexibility.

Debile flexile Gaub. 160. 3.

A. From deficiency of hardening matter.

B. From the softening and washing out of hardened matter.

2. Fragility.

A. Spon-

A. Spongyous.

*Debile fragile spongiosum Gaub. 160. 4.**a.* From erosion of gluten and oil.*b.* From putrefaction of the same.

B. Vitreous.

*Rigidum fragile vitreum Gaub. 165. 3.**a.* From the too great drying by age.*b.* From the deficiency of oil.

III.

*General Heads of the Observations to be offered
on the Diseases of the Simple Solids.*

A. Diseased states depending upon the composition of the solids.

a. Firmness increased.

diminished.

b. Cohesion increased.

diminished.

c. Flexibility increased.

diminished.

d. Elasticity increased.

diminished.

B. Diseased states depending upon the figure of the solids.

a. Alterations in the shape of natural parts.*b.* The growth of præternatural parts.

Con-

Concerning the principal Functions of the different parts of the Human Body.

Of the FUNCTIONS in GENERAL.

GENERAL observations on the animated system—Distinction between the sentient and vital principles—View of the powers of living animals depending on the sentient principle—View of those depending on the vital principle—Powers depending on their combined influence—Sensation—Causes exciting sensations—Distinction of sensations—Circumstances by which changes are effected in sensations independently of their causes—From differences in the state of the sentient principle—excitement—collapse—From differences

ferences in the state of the nervous fluid—mobility—torpor—Action—General causes of action—volition—stimulus—General division of actions in living animals—voluntary actions—actions with propensity—involuntary actions—actions without consciousness.

Of PARTICULAR FUNCTIONS.

I. Of Digestion.

THE sense in which digestion is to be considered—Different opinions respecting the general principle on which this function may be explained—Antecedent circumstances to the process of digestion—The appetite for aliment of a fluid nature—Causes inducing it—Different opinions respecting the causes of hunger—Substances used as food—Steps in the process of digesting these substances.

Solution—Circumstances tending to solution to which the aliment is subjected before it enters the stomach—Circumstances to

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which it is subjected after it enters the stomach—Triture—the action of different menstrua—View of the opinion which supposes that a peculiar menstruum is separated by a particular part of the stomach—Arguments corroborating this opinion—Observations on this subject by Mr Hunter—by Dr Monro—by Dr Stevens—by the Abbe Spallanzani—Influence of fermentation—in dissolving solid food—in correcting putridity—General conclusion.

Chylification, or assimilation.—Question whether all the matters nourishing the system assume the form of chyle—Examination of the opinion which supposes that chyle is formed from the conjunction of an acid evolved from the vegetable part of the aliment, with putrescent or oily matters present in the stomach—Objections to that opinion—Dispute whether chyle is to be considered as a new product, or as a mixture of parts before existing in the aliment—Arguments in favour of the latter of these opinions—Causes by which an intimate combination may be supposed to be effected.

Morbid Affections of the Function of Digestion.

- I. Defective solution of the aliment.
1. From the state of action exerted by the stomach.
 2. From the state of the menstruum acting upon the aliment.
 - a. As not being supplied in sufficient proportion.
 - b. As being defective in solvent power.
 - c. As undergoing changes counteracting this power.
- II. Improper assimilation of the aliment.
1. From the degree of heat in the stomach.
 2. From the action of the stomach itself.
 3. From different matters acting as assimilating ferments in the stomach.

2. Of Circulation.

HISTORY of the discovery of the circulation—Course of the blood—Powers by which it is moved.

The action of the heart—Causes producing this action—Calculations respecting the

force with which the heart acts—Reasons why this action is without volition or consciousness.

The action of the arteries—View of the controversy whether the arteries act from a muscular power, or from simple elasticity—Examination of the evidence brought respecting the existence of a muscular coat in the arteries—Examination of the evidence respecting the irritability of arteries—Comparison of the power of the heart with the causes retarding the motion of the blood—Consideration how far a proof of the ordinary action of the arteries can be drawn from diseased states.

The vibratory or oscillatory motion of the capillary vessels—Arguments in proof of such a motion—from the insufficiency of other causes for moving the blood through these vessels— from phenomena demonstrating such a motion—Question how far such an action is to be considered as peculiar to the small vessels.

The *vis à tergo*, or the impulse given by one portion of the blood to another—The extent of this action.

Pressure

Pressure from the action of muscles—The means by which this is rendered a cause of progressive motion—The extent to which it operates.

Varieties taking place with respect to the course of circulation—The course of the blood in the fœtus.

Morbid Affections of Circulation.

- I. Those affections which respect the state of motion in the blood.
 1. Preternatural increase of the celerity of the blood.
 - a. From the stimulus exciting the motion of the heart being augmented.
 - b. From the irritability of the heart being augmented.
 2. Preternatural diminution of the celerity of the blood.
 - a. From the stimulus acting on the heart being diminished.
 - b. From the want of due irritability in that organ.

3. Preternatural increase of the momentum of the blood.
 - a.* From a peculiar irritability in the organs producing the motion of the blood.
 - b.* From a determined quantity of blood in motion.
 - c.* From a certain degree of tonic power in the moving organs.
 4. Preternatural diminution of the momentum of the blood.
 - a.* From the want of due irritability.
 - b.* From the want of a proper quantity of blood.
 - c.* From the want of necessary tonic power.
 5. Irregularity in the motion of the blood.
 - a.* From circumstances producing an irregular supply of blood at the heart.
 - b.* From circumstances affecting the condition of irritability in the vascular system.
- II. Those respecting the distribution of the blood.
1. Increased determination to any particular part.

a. From

- a. From causes increasing the irritability of the vessels in the part.
 - b. From causes augmenting the flow of blood in these vessels.
- 2. Preternatural diminution of the flow of blood to particular parts.
 - a. From causes diminishing the irritability or tonic power of the vessels leading to the part.
 - b. From accidents diminishing the flow of blood to the vessels leading into the part.

3. *Of Nutrition.*

THE sense in which the term nutrition is here to be adopted—View of the controversy whether the nutritious fluid be conveyed by the blood-vessels, or by the nerves.

Examination of the arguments brought to support the hypothesis that the nutritious fluid is conveyed by the nerves—Arguments in support of this opinion, drawn from the primary existence of the nervous

system—from changes which the solids undergo when communication by the nerves is intercepted—from the size of the head in infancy—from the quantity of blood carried to the brain—from the method of nutrition in the vegetable kingdom—Answers to these arguments—Objections to the hypothesis—from the qualities of the only fluid that can be supposed to be conveyed by the nerves—from the diminution of nutrition while the nervous functions remain entire—from the growth and nourishment of parts of the system not furnished with nerves.

Examination of the opinion which supposes that the nutritious fluid is conveyed by the blood-vessels — Arguments in support of the probability of this opinion—from analogy—from the fitness of the fluid which they convey for the purposes of nutrition—from the universality of the sanguiferous system—from the gradual evolution of the different solids—from the effects arising from the interruption of blood-vessels—from the nutrition of organs by
the

the inosculation of blood-vessels, although they be unconnected by any other means.

The application of nutritious matter—Growth—from elongation of vessels—from extension of fibres—from accretion of cellular texture—from deposition of earth, fat, or other matter—Reparation of waste—Circumstances counteracting nutrition, or causes of the decrementum corporis.

Morbid Affections of the Function of Nutrition.

- I. The preternatural diminution of nutrition.
 - a. From the want of a due quantity of nutritious matter.
 - b. From the want of necessary qualities in the nutritious matter.
 - c. From an improper application of the nutritious matter.
- II. The preternatural increase of nutrition.
 - a. From an unusual supply of nutritious matter.
 - b. From a strong disposition to coagulation in the nutritious fluid.
 - c. From

c. From accidents promoting the application of the nutritious fluid to the staminal solids.

III. Imperfect nutrition.

a. From peculiarities in the nature of the nutritious matter.

b. From peculiarities in the mode of application.

4. *Of Secretion.*

ACCOUNT of the different organs by which the function of secretion is performed—glands—vessels—pores—Controversy whether follicles exist in glands or not—Examination of different hypotheses respecting secretion—The supposition that secreted fluids are pre-existent in the blood, and that glands act as filters—The supposition that secretion depends upon a peculiar fermentation—The supposition that it depends on a peculiar action of the vessels—The supposition that it depends on absorption from follicles.

General view of the different causes which may be supposed to operate in secretion—

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Circumstances which may have effect previous to the action of the secreting organ—Circumstances operating in the secreting organ itself—Circumstances which may have effect posterior to the action of the secreting organ—fermentation—absorption—mixture—General use of secretion.

Morbid Affections of Secretion.

1. From increase.
2. From diminution.
3. From depravation.

Causes of Morbid Affections of Secretion.

1. The state of the pabulum furnished for secretion.
2. The state of action of the secreting vessels.

5. Of Absorption.

THE vessels by which absorption is performed—Question whether the veins ever act as absorbents—View of the arguments brought in proof of absorption by
veins

veins—from what is observed to happen with respect to the mesenteric veins—from what happens with respect to the veins of the penis—from oedematous swellings being produced by ligatures on veins—from the supposition that absorbents are wanting in many parts of the body, and in some animals—Objections to the hypothesis that the veins ever act as absorbents—General conclusion.

Arguments proving that the valvular lymphatics are entirely a set of absorbent vessels—from the analogy of the lacteals—from the progress of virus in the system, whether venereal, cancerous, or the like—from the similarity between the contents of the lymphatics and those of the cavities from which they arise.

Causes producing the motion of fluids in the absorbent system—The means by which fluids enter absorbents—The necessity of the continuance of life for their admission—Different opinions respecting the manner in which the mouths of the lymphatics may be supposed to be affected by life—The supposition of ampullæ or bags—The supposition of the erection of villi similar to the papillæ
of

of the tongue—General conclusion—The means by which fluids are moved in the lymphatics after having entered them.

Morbid Affections of Absorption.

- I. Preternatural increase of absorption.
 - a. From causes forwarding the admission of fluids into the mouths of the lymphatics.
 - b. From causes forwarding the motion of fluids through the lymphatics.
- II. Preternatural diminution of absorption.
 - a. From a diminution of the action of the lymphatic vessels.
 - b. From causes obstructing the passage of fluids through the lymphatics.

6. *Of Excretion.*

R E M A R K S on excretion in general—
 Causes most generally producing excretion—Muscular action of the excretory—
 The action of the vessels of the secreting organ

gan—Accidental causes of excretion—Remarks on the excretion of the fœces and urine in particular.

Morbid Affections of Excretion.

I. Preternatural increase of excretion.

a. From unusual stimuli applied to the excreting organ.

b. From an augmentation of the sensibility of the excreting organ.

aa. Arising from increased mobility of the nervous power.

bb. Arising from a diminution of the natural coverings of parts.

II. Preternatural diminution of excretion.

a. From the want of a due stimulus to the excreting organ.

b. From uncommon insensibility of that organ.

III. Depravation of excretion.

a. From a peculiar state of insensibility in the excretories.

b. From preternatural stimuli being applied to excretories.

7. Of Respiration.

DIFFERENT conditions in the function of respiration—Respiration as a voluntary action—as an action with propensity—as an involuntary action—as an action without consciousness.

Actions by which the enlargement and diminution of the cavity of the thorax are produced—Circumstances commonly considered as giving rise to the enlargement of the thorax—the contraction of the diaphragm—the elevation of the ribs—the rarefaction of the air after its admission into the cavity of the thorax—Circumstances commonly considered as producing a diminution of the cavity of the thorax—relaxation of the muscles producing enlargement—the elasticity of the mediastinum—the contraction of the abdominal muscles—the elasticity of the cartilages and ligaments of the ribs—the contraction of muscles attached by one extremity to the ribs, and by the other to parts below—the weight of the ribs—the elasticity
of

of the lungs—the contraction of the muscular fibres of the bronchiæ—Remarks on the opinion which supposes an expanfile power of the lungs.

A view of different theories of respiration—Examination of the opinion which accounts for the alternate actions of respiration, from obstruction to circulation—from the compression of the phrenic nerves—from an uneasy sensation at the end of expiration—Different accounts of the cause of the first inspiration by those who have adopted this last hypothesis—Inquiry how far this hypothesis explains all the different states of respiration—Reasons for believing that in the ordinary state of respiration the power of the mind has no influence—Arguments showing that in this state respiration is exactly similar to other spontaneous actions.

Explanation of ordinary respiration from an alternate contraction and relaxation of the diaphragm independently of the influence of the will—Arguments showing that the diaphragm may be considered as being in a situation analogous to the heart—Cause of the first contraction of the diaphragm in
the

the new-born infant—cause of the first relaxation—cause of subsequent contractions and relaxations—Principles upon which respiration may at pleasure be subjected to the influence of the will, although in its ordinary state it may be considered as an action without sensation or consciousness—Account of some objections which have been urged against this hypothesis—Answers to these objections.

Observations on the use of respiration—View of different opinions respecting the use for which it is intended—to promote circulation through the lungs—to introduce air into the blood—to introduce nitre into the blood—to promote the intimate mixture of different parts of the blood—to condense the blood—to cool the blood—to generate heat—to draw something useful from the air—to allow the escape of a particular matter from the lungs—Arguments in proof of this supposition—from the qualities of the air expired—from the change which the blood undergoes in point of colour by passing through the lungs—Answers to objections which have been brought against this opi-

nion respecting the use of respiration—from the foetus in utero existing without respiration—from the want of respiration in fishes—Farther proof of the hypothesis from this last circumstance—and from the connection which universally subsists between the degree of respiration necessary for life and the colour of the blood in different animals.

Morbid Affections of Respiration.

- I. Those respecting the repetition of action.
 - a. Respiration preternaturally quickened.
 - b. Respiration preternaturally slow.
- II. Those respecting the sensation excited.
 - a. Painful respiration.
 - b. Difficult respiration.
- III. Those respecting the manner in which respiration is performed.
 - a. Respiration with uncommon noise.
 - b. Respiration with less noise than in the natural state.

CAUSES of difficult RESPIRATION, from Dr
GAUBIUS'S PATHOLOGY, as arranged by
Dr CULLEN.

Respiratio fit difficilis,

I. Ob conditionem aëris,

1. Nimis rari,
2. Nimis calidi,
3. Nimis denfi.

II. Ob angustiam viarum per quas aër tranfit
in pulmones.

1. Faucium,
2. Glottidis,
3. Tracheæ,

III. Ob conditionem pulmonis minus apti
ad admittendum vel expellendum aërem,
propter.

1. Vitium in potentiis motricibus, affectis,

A. Spasmo vel constrictione, ab

a. Aëre nimis frigido,

b. Aëre inquinato,

c. Causis variis internis quæ agunt
mediate vel immediate.

B. Rigiditate ab offectis bronchiis.

C. Paralyfi.

F 2

D. Actione

- D. Actione propter dolorem inhibita.
2. Capacitatem pulmonum imminutam.
- A. Obstructionem vel obstipationem.
- a.* Humoribus, mucos, sero, sanguine, pure, in bronchiis effusis.
- b.* Humoribus, præsertim mucos, vel calculo folliculis membranæ mucosæ infarctis.
- c.* Humoribus intra vasa congestis.
- A. Plethora.
- B. Inflammatione.
- c. Scirrhus.
- B. Compressionem externam.
- a.* Tumore pulmonibus innato.
- b.* Tumore partium vicinarum intra thoracem.
- c.* Obesitate partium intra thoracem.
- d.* Humoribus in thoracem effusis.
- e.* Cavitate thoracis imminuta.
- aa.* Ab ipsius mala formatione.
- bb.* Ab aucta mole abdominis.
- A. Ob aquam vel aërem ibi accumulatum.
- B. Ob viscus quoddam mole auctum.

HEADS of the Observations to be offered on
the Causes of Morbid Respiration.

- I. Causes depending on the condition of the
air.
 - a.* Density.
 - b.* Rarefaction.
 - c.* Heat.
 - d.* Coldness.
 - e.* Mephitic impregnations.
- II. Causes depending on the state of the pas-
sages or cavities into which the air enters.
 - a.* Contraction of passages.
 - b.* Rigidity of cavities.
 - c.* Compression of cavities.
 - d.* Cavities being filled with other matters.
- III. Causes depending on the state of the
organs enlarging or diminishing those
cavities.
 - a.* Spasmodic affections.
 - b.* Paralytic affections.
 - c.* Inflammatory affections.

8. *Of Animal Heat.*

A SHORT state of the principal facts respecting animal heat—Universality of the power of generating heat over the animal creation—Range of heat in different species of animals—Stability in the same species—Heat of the human species—its stability in different temperatures of the atmosphere—Connection between the degree of heat peculiar to different animals, and the colour of the blood—Varieties in heat occurring from disease—Connection which these varieties, when occurring over the system in general, have with the state of circulation and respiration—Exceptions to this general rule—Morbid varieties in the heat of particular parts—Connection of these with the state of circulation at the part.

View of different theories respecting the cause of animal heat—Examination of the opinion which supposes that animal heat is to be accounted for from mixture—from putrefaction—from friction—from respiration—from the nervous energy—An attempt to refute all these opinions.

Account

Account of the theory of heat in general, and of animal heat in particular, lately proposed by Dr Crawford—Arguments tending to prove, that his experiments do not afford satisfactory evidence of this hypothesis — Doubts with respect to some of the experiments from which the principal conclusions are drawn—Observations tending to show that the general hypothesis is liable to many objections—Phænomena of animal heat which seem to be incompatible with this theory.

View of a conjecture that animal heat may arise from the evolution of the phlogiston of the blood in consequence of the action of blood-vessels—Explanation of some particulars which may occur as objections to this hypothesis—Attempt to prove the hypothesis, by endeavouring to show, that the blood does contain phlogiston—that this phlogiston is evolved, extricated, or brought into a state of motion, by the action of the blood-vessels—that very universally the evolution of phlogiston generates heat—that the evolution of phlogiston which takes place from the blood of the human system, may be considered as

sufficient for producing all the heat which the body possesses—that this opinion affords an explanation for all the more remarkable phænomena respecting animal heat—for the general connection of heat with the motion of the blood—for the exceptions which occur to this general rule—for the equality of heat over the whole system—for the exceptions to this rule in morbid cases—for the stability of heat in the same animal, while in health, although exposed to great diversity of temperature—for the connection of heat with respiration—for the connection of animal heat with the colour of the blood in different animals.

Observations on the use of animal heat—its influence in the preservation of the fluids of the system in a proper condition—its influence on the solids—its influence on the living principle.

Morbid Affections of Animal Heat.

I. Preternatural increase of the heat of the body.

a. From

- a. From increased action of the blood-vessels.
 - b. From the increase of phlogistic qualities in the blood.
 - c. From a diminution of those excretions which preserve the stability of the fluids.
- II. Preternatural diminution of the heat of the body.
- a. From diminished action of the blood-vessels.
 - b. From the diminution of the phlogistic qualities of the blood.
 - c. From an increase of those excretions which preserve the stability of the fluids.

9. *Of Muscular Motion.*

OBSERVATIONS on the phænomena of muscular motion—Manifest changes which muscles undergo in action—in length—in thickness—in bulk—in hardness—in colour—Causes inducing the action of muscles—stimuli—volition—Circumstances in
 muscles

muscles with which their action is connected — peculiar configuration — contractile power — free communication with the sensorium—Different theories of muscular action—Account of the hypothesis which supposes muscular action to proceed from the immediate influence of the mind—from the figure of muscular fibres—from fermentation in muscles—from blood rushing into muscles—from the nervous fluid.

Use of muscular action—Primary use—Secondary consequences—in giving figure to parts—in giving texture—in exciting the motion of fluids in the body—in preserving the general health of the system—in giving greater facility in motion to the moving fibres.

Morbid Affections of voluntary Motion.

- I. Those in which the influence of the will is counteracted.
1. Spasmodical affections.
 2. Convulsive affections.
 - a. From uncommon stimuli.

b From

b From peculiar sensibility.

II. Those in which the influence of the will is impaired or lost.

a From causes impeding the course, or altering the condition, of the nervous power.

b. From accidents giving uncommon rigidity to the moving fibres.

10. *Of the External Senses.*

REMARKS on the external senses in general—Observations respecting the variety in the external senses—Inquiry how far it may be accounted for from a difference in the nerves themselves—from a difference in the state of the extremities of the nerves—from the modification of impressions by the apparatus at their extremities—Observations on particular senses—Sense of touching—organs employed in touching—the external objects from which these organs are fitted to receive impressions—the use of this sense to the system—Sense of tasting—organs employed—objects from which these organs are fitted

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ted to receive impressions—use of tasting—
 Sense of smelling—organs employed—external
 objects from which these organs are fitted
 to receive impressions—use of smelling—
 Sense of hearing—organs employed—external
 objects from which these organs are fitted
 to receive impressions—use of hearing—
 Sense of seeing—organs employed—external
 objects from which these organs are fitted to
 receive impressions—use of vision.

Morbid Affections of the External Senses.

- I. Preternatural deficiency of perception.
 - a. From torpor in the nervous energy.
 - b. From compression or injuries to the
 nerves in their course.
 - c. From circumstances in the organs fitted
 to modify impressions by which the ac-
 tion of external causes is impaired or
 prevented.
- II. Preternatural increase of perception.
 - a. From a high degree of mobility in the
 nervous energy.
 - b. From unusual tension in the extremities
 of

of the nerves distributed to the organs of sense.

c. From the want of the usual coverings at these extremities.

III. Depraved perception.

a. From peculiarities in the condition of the sentient extremities of nerves.

b. From unusual stimuli afforded by the body itself.

II. *Of the Internal Senses.*

REMARKS on the functions to be considered under the general title of external senses—Observations on the general agency of the mind over the body—Inquiry respecting the seat of connection between the mental and corporeal parts of the system—Inquiry how far a particular configuration of the brain is necessary for this connection—Conjecture respecting the causes on which the diversity in the mental faculties depends—Conjecture respecting the causes of the differences which occur in the mental faculties of the same individual at different times—Obfer-

—Observations with regard to particular internal senses—judgment—memory—volition.

Morbid Affections of the internal Senses.

- I. Those depending on imperfect exertion of the mental faculties.
- II. Those depending on erroneous exertion.
 - a. From increased impetus of the circulation at the brain.
 - b. From diminished impetus there.
 - c. From compression of the brain.
 - d. From irritation of the brain.

12. *Of Sleep.*

ACCOUNT of the phænomena of sleep—
 Inquiry respecting its nature—Examination of the opinion which supposes sleep to depend on the exhaustion of the nervous fluid—Examination of the opinion which supposes sleep to depend upon compression of the brain—Objections to these hypotheses—Inquiry how far sleep may not be referred to a law of the mind, by which, during its
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connection with the body, it has a constitutional disposition to alternate states of activity and rest—Conjecture respecting the manner in which those circumstances act which either produce sleep or protract watchfulness—Observations respecting the animals which remain in a torpid state during the winter season—Circumstances in which this torpor differs from natural sleep—Conjecture as to the difference of the causes on which they depend—Inquiry how far torpor from cold may be ascribed to a change induced on the state of the nervous fluid.

13. *Of Death.*

GENERAL observations on the nature of death—Observations on different causes of death—injuries to the brain—lesion of vital functions—affections of nerves—age—Marks indicating death—cessation of the vital functions—insensibility and coldness—stiffness—putrefaction—General observations on other marks, as collapse of the eye, and the like—General conclusion respecting the characteristics of death.

14. *Of*

14. *Of the Peculiarities of the Male.*

OBSERVATIONS on the secretion of semen by the testicles—The state of the semen as it is discharged — Account of the opinion which supposes that the semen never enters the vesiculæ feminales — View of the arguments brought to prove that it does not enter them—from the variety of the structure of the vesiculæ feminales in different animals—from the appearance of the fluid which they are found to contain when they are examined after death—from the vesiculæ feminales having been found full many years after the testicles have been removed—Observations on the use of the semen in generation—effects which it produces in the system by which it is secreted—Observations on the influence which it has on the passions of the mind — on the state of the muscular fibres in general—on the state of the voice—on the growth of the beard in men—on the stature and fatness of the body in different animals.

Remarks

Remarks on the erection of the penis—Circumstances on which it immediately depends—View of different theories on which it has been accounted for—Question whether it proceeds from obstruction to the return of the blood from the cells of the penis, or from an increased flow of the blood into these cells—Examination of the opinion which supposes that it proceeds from the action of nervous filaments surrounding the veins of the penis—from an action of the vena ipsius penis—from an increased action of the small vessels of the penis—Remarks on some circumstances which have been supposed to assist the erection of the penis—full state of the bladder—action of the levatores ani muscles—the stimulus of the semen—the distension of the vesiculæ feminales.

15. *Of the Peculiarities of the Female.*

OBSERVATIONS on the menstrual flux—
An account of the phenomena commonly attending menstruation—A view of
G different

different theories on which the menstrual discharge has been attempted to be accounted for.

A view of the arguments brought in favour of the supposition that the menses depend on general plethora — Conclusions drawn from the position and structure of the uterus — from the necessity of a constant disposition to plethora in female habits — from a state analogous to the menses being induced in men by habitual blood-lettings — from the increase and acceleration of the menstrual discharge by high and plentiful feeding, sedentary life, the amputation of a limb, or similar circumstances — from the diminution of the menses by activity, spare diet, and the like — Answers to the different arguments drawn from these facts — Objections to the hypothesis — from the appearance of the menses with females when they are not in a plethoric state, and when there is even manifest proof of a high degree of inanition — from the frequent existence of a plethoric state in females without any menstruation, when there is no reason to suspect any cause producing obstruction

struction—from plethora not being removed by menstruation when that discharge occurs with such a state of the system.

Examination of the opinion which supposes menstruation to depend on partial plethora—Proof that the vessels of the uterus, at different times, contain very different quantities of blood—Evidence of the existence of partial plethora in the vessels of the uterus previous to menstruation—from symptoms preceding the discharge—from dissections near the menstrual period—Inquiry how far the existence of partial plethora is sufficient to explain all the phenomena of menstruation—Reasons for believing that it is not a cause fully adequate to the effect—from the regularity of the discharge in point of time—from the relief afforded by vicarious evacuations happening at the menstrual period, when the menses are obstructed.

Examination of the opinion which supposes, that on partial plethora there occurs a hæmorrhagic effort, regulated by the laws of the nervous system—Objections to this hypothesis — from circumstances attending

those evacuations which supply the place of the menses — from different causes which obstruct menstruation — from the suspension of the menses during pregnancy and nursing.

Some account of a conjecture which supposes, that, with partial plethora, there occurs, at the time of menstruation, a peculiar action of the uterus itself, somewhat similar to that which happens in the impregnated state, occasioning delivery at the end of a determined period—Arguments in favour of this supposition—from the analogy of the impregnated uterus—from the regularity of the menstrual discharge—from the relief in cases of obstructed menses when evacuations of blood occur naturally—from the explanation which this hypothesis affords for many of the most intricate phænomena of menstruation—for the first appearance of the menses—for the periodical return of that discharge—for the limitation of it to a certain age—for the obstruction of it during pregnancy and nursing.

Remarks

Remarks on the use of menstruation in the female œconomy—The influence which it has in generation—Objections to the supposition that it is intended for the nutrition of the fœtus—Account of a conjecture that the menstrual discharge may serve to give a condition to the vessels of the uterus necessary for impregnation—Arguments in favour of this opinion—from the effects which hæmorrhagy has on other parts—from the method in which women commonly reckon their pregnancy—from the existence of a state analogous to the menses in many other animals previous to conception.

Morbid Affections of Menstruation.

I. Obstruction of the menstrual discharge.

- a. From the want of proper accumulation in the uterus.
- b. From the want of due periodical contraction.
- c. From preternatural opposition to the passage of blood into the cavity of the uterus.

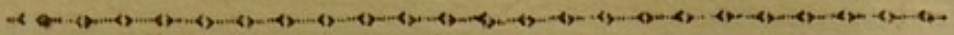
II. Preternatural increase of the menstrual discharge.

- a. From uncommon determination to the uterus.
- b. From increased action of that viscus.
- c. From the want of due resistance to the impetus of blood at the uterus.

16. *Of Generation.*

VIEW of the different stages to which this function may be referred—Coition—Question whether the semen of the male be thrown into the uterus of the female — Question respecting the existence of ova in the ovaria of females — Conception—View of different opinions on this subject — Account of the supposition of the mixture of male and female semen —of the mixture of the male semen with the menstrual blood—of a peculiar sensation excited by the stimulus of the male semen on the os tincæ—of the introduction of an animalcule from the male semen into an ovum from the female—of the conjunction of organic particles from the male
and

and female semen—Observations on the experiments and hypothesis of the Count de Buffon on this subject—Pregnancy—Observations on the growth of the fœtus—on the nutrition of the fœtus—on parts lodged in the uterus connected with the fœtus—on the changes which the uterus itself undergoes in pregnancy—Delivery—remarks on the signs of approaching delivery—account of the actions by which delivery is effected—conjectures respecting the causes inducing these actions.



PART II.

OF THE

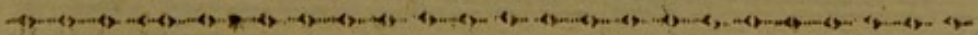
HUMAN SYSTEM

IN A

STATE OF DISEASE;

OR, THE

PRACTICE OF MEDICINE.



PART II
OF THE
HUMAN SYSTEM
IN A
STATE OF DISEASE,
OR THE
PRACTICE OF MEDICINE

A View of the Method to be followed in treating each Disease.

I. The HISTORY.

- a. The symptoms in the order in which they commonly appear.
- b. The marks principally characterizing the disease and distinguishing it from other affections.
- c. The remote causes tending to induce the disease.
- d. The natural terminations of the disease.
- e. Circumstances indicating future events.
- f. Most common appearances on the dissection of those dying of the disease.
- g. Remarks on the principal authors who have written on the disease.

II. The

II. The THEORY.

- a. Explanation of the action of remote causes.
- b. Investigation of the proximate cause.
- c. Account of some of the principal symptoms.

III. The PRACTICE..

- a. The means to be used for obviating or preventing the disease.
- b. The general plan of cure.
- c. Observations on particular remedies which have been employed, or may be employed, for removing the affection.
- d. Observations on the means of relieving it where the removal is either unattainable or inexpedient.

N. B. *As the above plan is followed in lecturing on every disease, it is unnecessary to repeat it in the Heads of Lectures for each. In these, therefore, such particulars only are taken notice of, as seem to be of the greatest importance, and require to be mentioned in addition to the general plan.*

P R A C T I C E
O F
M E D I C I N E.

ORDER I. HUMORALIA,
Or Effusions of Fluids into Cavities.

GENUS I. *Anasarca.*

OBSERVATIONS on the sense in which the term Anasarca has been adopted by different nosologists—Account of the common progress of symptoms in anasarca—Remarks on the symptoms by which anasarca may be most readily distinguished—colourless swelling in the inferior extremities—thirst—scarcity of urine—difficulty of breathing.

Means

Means of distinguishing anasarca from other effusions of watery fluids—from effusions of blood—of air—from preternatural collections of fat.

Principal Objects to be aimed at in the Cure of Anasarca.

- I. The evacuation of the water already effused.
 1. By natural outlets.
 2. By artificial outlets.
- II. The prevention of fresh accumulation.
 1. By supporting due action of the absorbents.
 2. By keeping up a proper discharge from the serous excretions.
 3. By instituting artificial outlets of serosity.
 4. By removing a leucophlegmatic diathesis.

Directions respecting regimen in anasarca—Inquiry whether spare or liberal diet is to be enjoined in the incipient state of the disease—Question, How far abstinence from fluids is proper, and in what circumstances it is to be enjoined or avoided?—Observations respecting cloathing.

Ob-

Observations on particular remedies —
 Those acting chiefly as promoting absorption
 —Friction with dry cloths—with stimulating
 powders—with oily substances—Com-
 pression—Different modes of exercise—walk-
 ing—sailing—riding—Exercise with patients
 confined to the house—Emetics.

Remarks on those remedies more particu-
 larly evacuating water from the cellular
 membrane —Cathartics — elaterium — gam-
 boge—calomel—jalap—cream of tartar—
 combinations of cream of tartar with acrid
 purgatives—with aromatics—Diuretics—Kali
 acetatum—oleum tartari per deliquium —
 dulcified spirit of nitre—garlic—squills—
 colchicum—cantharides—Digitalis—Nicoti-
 ana—lactuca virosa—cyder—mesembryan—
 themum crystallinum—taraxacum—Diapho-
 retics—warm bathing—sudorific powder—
 solution of emetic tartar.

Evacuants by artificial outlets—blistering
 plasters—punctures—incisions—issues—ap-
 plication of cabbage leaves.

Remedies which have their chief effect as
 removing a leucophlegmatic diathesis—gene-
 rous diet—cordial and restorative drinks—

ad-

administration of exercise as a means of removing leucophlegmatic diathesis—Peruvian bark—chalybeates.

G. 2. *Hydrocephalus.*

DIVISION of hydrocephalus into different species—hydrocephalus of the integuments—hydrocephalus of the cranium—hydrocephalus of the ventricles of the brain—Division of hydrocephalus into chronic and acute—History of this last species—Symptoms peculiar to its three different stages—Circumstances distinguishing hydrocephalus from fever—from symptoms induced by worms.

Observations on the theory of hydrocephalus — View of different principles on which the symptoms have been explained—Account of the hypothesis of Dr Quin—Arguments brought in support of it—Objections to these arguments—Inquiry respecting the means of preventing this affection—Means proposed for the evacuation of the water after effusion has taken place—Artificial

cial outlets—Evacuation by natural outlets from the system in general—cathartics—diuretics—emetics—Evacuation from the neighbourhood of the part in which the affection is seated—blisters—errhines—Inquiry how far there is reason to hope for a cure among the means increasing the action of the lymphatic system—Question, Whether electricity may be tried in this disease in the way of insulation? Observations on the effects of cordials in this affection—of opiates—Account of the proposal of mercurial medicines to such an extent as to induce salivation—Remarks on the controversy respecting their use.

G. 3. *Hydrothorax.*

OBSERVATIONS on the frequency of this affection where it is not suspected—Difficulty of distinguishing it—Remarks on some of the symptoms on which the diagnosis is chiefly rested—fluctuation in the thorax—sense of tension on the diaphragm, with difficult respiration—the starting from

H

found

found sleep with inexpressible uneasiness at the breast succeeded by palpitation—symptoms of dropsy in other parts of the body.

Observations on the means to be used with the view of preventing hydrothorax—Uncertainty of measures with this intention.

Indications in the cure of hydrothorax—Observations on particular remedies—Paracentesis of the thorax—Incisions in the legs—Blisters to different parts of the chest—Issues—Emetics frequently repeated—Digitalis purpurea—Cathartics—Diuretics—Mercurial preparations inducing salivation—Diet—Exercise—Tonics.

G. 4. *Ascites.*

ACCOUNT of the ordinary progress of the symptoms in ascites—Observations on the symptoms giving suspicion of the disease at the earliest stages—paleness of the countenance—scarcity of urine—sense of weight in the belly—Observations on the symptoms distinguishing the disease after it has

has made farther progress—obvious swelling of the abdomen—fluctuation—Observations on the symptoms distinguishing ascites from tympanites—from swelling of the abdomen in pregnancy—from swelling depending on an enlargement of the viscera—Distinction between true and encysted ascites.

Remarks on the circumstances on which the general treatment of ascites must proceed — Observations on particular remedies Paracentesis—Emetics—the preparations of antimony — squills — Cathartics — elaterium — guaiacum—black hellebore—in the form of the pilulæ tonicæ—in the form of tincture—scammony—Cathartics of a less drastic kind—compound powder of jalap—Duretics—squills—colchicum autumnale—vegetable alkali—ashes of tobacco—infusion of fox-glove—Sudorifics—warm bathing—Dover's powder—friction of the abdomen—Electricity—Means of recruiting the system from the consequences either of the disease or of the remedies.

G. 5. *Emphysema.*

OBSERVATIONS on the symptoms essential to this affection—Distinction between partial and general emphysema—Marks by which this affection is chiefly to be distinguished—the noise on pressure—influence of pressure with respect to change of figure—influence of change of posture—manner of progress from particular parts over the rest of the system.

General principles on which the cure is to be attempted.

- I. The removal of air from the cells or cavities in which it is lodged.
 1. By the destruction of its elasticity.
 2. By the expulsion of it, in its elastic state.
- II. The prevention of farther introduction of air into cavities or cells.
 1. By the removal of causes extricating air from the solids or fluids of the animal body.
 2. By preventing the introduction of atmospheric air into the cellular membrane.

a. From

- a. From obstructing its ingrefs.
- b. From giving immediate opportunity for its egress.

Observations on the particular remedies which have been employed in emphysema—
Internal remedies—External applications—
Stimulants — Astringents — Scarification —
Pressure—Friction—Electricity—Paracentesis of the thorax:

G. 6. *Tympanites.*

ORIGIN of the name of Tympanites—
Difference among authors with regard to the progress of symptoms—Remarks on the symptoms chiefly characterizing this affection—Peculiar elasticity of the swelling—Sound emitted on percussion—Effect of discharge of wind.

Observations on the means which may be used for the prevention of this affection.

- I. The avoiding causes giving rise to the extrication of air.
 - 1. From the system itself.
 - 2. From matters introduced into it.

II. The prevention of the extrication of air in consequence of preserving proper tone of the alimentary canal.

1. By means preserving the tone of the system in general.
2. By means preserving the tone of the alimentary canal in particular.
 - a. From avoiding causes serving to weaken its tone.
 - b. From the use of such regimen and medicines as serve to support it.

Observations on the means of removing the affection, after it has taken place.

I. The expulsion of air already extricated and confined in different cavities.

1. By removing obstructions to natural outlets.
2. By forming artificial outlets.
3. By inducing such actions as will tend to the expulsion of air.
 - a. Actions from the system itself.
 - b. Actions from external means.

II. The prevention of farther accumulation of air.

1. By the removal of causes producing extrication.

2. By

2. By increasing those powers of the system which have a tendency to prevent extrication.

Observations on some of the principal remedies used in this affection—Cathartics—Carminatives—Antispasmodics—Blisters—Fomentations—Cold applications—Puncture—Chinese needles—Bandages—Electricity.

ORDER II. EPISCHESES,
Or obstructed Discharges.

G. 7. *Obstipatio.*

DISTINCTION between obstipatio when occurring as a symptom of other affections, and when occurring as an idiopathic disease—Progress of this affection in the latter of those cases—Circumstances by which it is to be distinguished from other complaints.

General intentions of cure in obstipatio.

- I. The expulsion of fœculent matter morbidly retained in the intestinal canal.
- II. The prevention of future morbid retention.

Means by which the first of these ends is to be accomplished—By an increase of the force of those actions which tend to the expulsion

pulsion of fœculent matter—By the removal of resistances to such efforts.

Means by which the second intention may be answered—By securing proper action of the intestinal canal—By furnishing matter readily passing through the intestines.

Observations on different remedies employed against this affection—Those taken by the mouth—Those used in the way of injection—Those applied externally—Cathartics—of the saline tribe—Glauber's salt—cream of tartar—soda phosphorata—Those particularly stimulating the rectum—aloes—scammony—colocynth—calomel—Those of a lubricating nature—oleum Ricini—Injections into the rectum—with saline impregnations—with oily matters—with stimulating or aromatic substances—with smoke of tobacco—femicupium—warm bath—application of cold—Regimen best suited for preventing the return of this affection—Means of supporting a regular discharge.

G. 8. *Ifchuria.*

OBSERVATIONS on the different species into which the genus of ifchuria has been divided—Affections referable to the head of ifchuria renalis—those referable to the ifchuria vesicalis—Varieties in these species from the causes on which they depend—as arising from spasmodic affections—from a paralytic state—from extraneous obstructions—Symptoms generally occurring in all the species of ifchuria—Peculiarities of each different species—Symptoms chiefly serving to distinguish the varieties from each other.

Observations on the measures which may be employed for the prevention of ifchuria—General plan of cure—Varieties in the indications from differences in the immediate cause occasioning the obstruction—Remarks respecting the use of particular remedies indicated in certain circumstances of the disease—blood-letting—gentle laxatives—emollient injections—Remarks on the employment of the remedies most generally applicable

ble—warm bath—femicupium—pediluvium—topical bleeding—opiates—diuretics—stimulating applications externally applied to the region of the pubes—emetics—hard exercise.

Observations on the abstraction of the urine by the catheter—by puncture—at the perinæum—at the pubis—Remarks with regard to the removal of calculi in the urethra by incision—On the dilatation of the urethra by bougies—Electricity—Camphor.

G. 9. *Icterus.*

ACCOUNT of the ordinary progress of the symptoms in jaundice—Marks distinguishing jaundice from other affections—from diseases where yellowness occurs from other causes than the presence of bile in the blood—from diseases in which yellowness takes place from the presence of bile in the blood, but where it is not wanting in the alimentary canal.

Inquiry respecting the channels by which the bile in jaundice enters the blood—View
of

of the arguments and experiments brought to prove that it is taken up by the lymphatic absorbent vessels—Objections to these arguments, and to the conclusions drawn from the experiments—An attempt to invalidate this opinion by arguments drawn from different sources—from the general purpose which the lymphatic absorbents seem intended to serve in the animal œconomy—from the change which their action produces on every secreted fluid in the body—from the change which their action produces on the bile in a state of health—from the condition of the contents of the gall-bladder when the cystic duct alone has been obstructed—from the state of the lymphatics coming from the liver, and neighbouring parts, in those dying of jaundice.

Observations on the hypothesis which supposes that the bile enters the blood by regurgitation through blood-vessels—Answers to the objections which have been made to this supposition—Circumstances in which yellow vision occurs as a symptom in
jaundice

jaundice — Account of the general principle on which it is to be explained.

General plan of cure in jaundice—Means of alleviating the most urgent symptoms before the obstruction can be removed—by supplying the want of bile in the alimentary canal—by affording exit for bilious matter from the general mass of blood—by obviating the effects of distension, and of obstruction to circulation in the system of the liver.

General principles on which the removal of obstruction to the passage of bile through the biliary ducts may be attempted—Variety in the indications from the different causes by which such obstruction may be occasioned—Indications of cure when it proceeds from spasm—when it proceeds from fordes in the alimentary canal or viscid bile—when it proceeds from calculus—when it proceeds from scirrhus.

Observations on different remedies employed in jaundice—Remarks on the use of emetics—period of the disease at which they are most proper—circumstances indicating the propriety of repeating them—
circumstances

circumstances in which they are hazardous—Cathartics—administration of them with a view to the radical cure of the disease—administration of them with the view of obviating symptoms—Observations on the use of soap-pills—soft black soap—Antispasmodics—Aromatic bitters—Diuretics—Sudorifics—Exercise—Medicines proposed as solvents of biliary calculi—lemon juice—Observations on the proposal for removing biliary calculi by operation.

G. 10, *Amenorrhœa.*

OBSERVATIONS with regard to symptoms necessary for constituting amenorrhœa—Differences in the progress of the affection from the different circumstances in which it occurs—Common progress of the symptoms where the discharge does not appear at the usual age—Progress where it is obstructed after having before taken place in a regular manner—Account of the symptoms commonly attending amenorrhœa—View of some dangerous affections which,
on

on particular occasions, arise from it —
Distinction between the want of menses
occurring as an idiopathic disease, and as a
symptom of other affections—circumstances
distinguishing amenorrhœa from pregnancy.

Observations on the general principles on
which amenorrhœa is to be prevented—
Means of effecting this by the preservation
of the general health of the system—by
the preservation of a proper condition of
the uterus—by avoiding accidents immedi-
ately tending to induce the obstruction.

General intentions of cure in amenorr-
hœa—necessity of accommodating these to
the cause of obstruction — Principles on
which the restoration of the discharge
may, in different circumstances, be effected.

1. By promoting free circulation in the
neighbourhood of the uterus, when it
is morbidly obstructed there.
2. By promoting the accumulation of
blood in the vessels of the uterus them-
selves when it is deficient.
3. By the removal of morbid obstruction
to the passage of blood into the cavity
of the uterus or vagina.

4. By

4. By increasing the tonic power of the system when it is morbidly deficient.
5. By increasing the tonic power of the uterus in particular.
6. By the removal of spasmodic stricture affecting the uterine vessels.

Observations on different practices used for restoring the menstrual discharge—Remarks with regard to the perforation of the hymen when it is entire—On the operation necessary where there is a preternatural conformation of the vagina—On the use of the pediluvium as promoting menstruation—Circumstances of amenorrhœa in which opiates are necessary—Remarks on the use of stimulating antispasmodics—Cathartics—Medicines supposed to operate as specific emenagogues—sabinæ—marrubium—helleborus niger—rubia—cantharides.

Observations on the application of ligatures about the thighs—chalibeates—Peruvian bark—cold bathing—mercurial preparations—electricity.

G. II. *Dyslochia.*

OBSERVATIONS on the natural course of the lochial discharge—Varieties to which it is subjected without constituting a disease—Symptoms usually occurring from sudden suppression—circumstances by which a judgment is to be formed whether it occurs as a primary disease, or as a symptom of other affections.

Means by which the occurrence of dyslochia is to be prevented — Circumstances which render the system less liable to be affected by the occasional causes of this disease — Observations on the exciting causes which are chiefly to be guarded against.

General intentions of cure in dyslochia.

1. The restoration of the discharge.
2. The obviating the consequences of suppression of the discharge.

Cautions respecting the employment of measures with the first of these intentions—Varieties in the practice with regard to obviating symptoms.

Observations on the use of particular remedies in this affection—blood-letting—cool regimen—diaphoretics—antispasmodics—fomentation of the region of the uterus—emollient glysters—opiates—emmenagogue medicines—castor—saffron—dry cupping to the thighs—flores martiales—infusion of the flores arnicæ—regulation of the compression of the abdomen.

ORDER

O R D E R III. PROFLUVIA,

Or increased Discharges.

G. 12. *Catarrhus.*

OBSERVATIONS on the divisions of catarrh—Division into catarrh from cold and catarrh from contagion—Division into acute and chronic catarrh—Account of the symptoms characterising the acute or febrile state of catarrh — Account of the symptoms characterising the chronic state of catarrh.

Circumstances distinguishing catarrh from chincough, measles, and influenza — Diagnosis between catarrh and phthisis pulmonalis.

Observations on the action of cold applied to the surface of the body as indu-

cing catarrh—Means of preventing the occurrence of catarrh.

I. The avoiding causes which reduce the system to a debilitated or irritable state.

a. Circumstances claiming attention in diet.

b. Circumstances claiming attention in temperature.

c. The regulation of passions of the mind.

II. The employment of such means as tend to brace and strengthen the system.

a. Habitual exposure to the vicissitudes of weather.

b. Cold bathing.

c. The use of due exercise.

General plan of cure in the acute state of catarrh—Attention due to the febrile affection—to the local affection—Morbid conditions, in as far as respects a local disease, which give rise to indications — The inflammatory affection of the mucous membrane—The alteration in the state of the secretion.

General principles on which the inflammatory affection may be obviated.

I. By

1. By diminishing the general impetus of the blood.
2. By occasioning derivation from the parts affected to other neighbouring parts.
3. By counteracting irritating causes exerting their influence on the parts affected.

General principles on which the alteration in the state of the secretion may be obviated.

1. By the discharge of the mucus previously accumulated.
2. By facilitating the expectoration of mucus which may be afterwards secreted.
3. By restoring the action of the secreting vessels to their natural state.

Indications of cure in chronical catarrh—Differences between the indications which are to be prosecuted in the acute and chronic states of the affection.

Observations on some of the principal remedies employed in catarrh—Antiphlogistic regimen—Blood-letting—Diaphoretics—Demulcents—Opiates—Laxatives—Blisters

—Expectorants—Inspiration of the vapour of warm water—Emetics—Issues—Inquiry respecting the propriety of the employment of astringent medicines in certain states of chronic catarrh.

G. 13. *Diarrhœa.*

REMARKS on the definitions given of diarrhœa by different nosologists—Circumstances essential to the disease—Enumeration of the principal symptoms with which the frequent stools in diarrhœa are combined—Remarks on the symptoms by which diarrhœa is chiefly distinguished from other affections—Diseases bearing some resemblance to diarrhœa, which may be distinguished from it by the appearance of the matter discharged by stool—Observations on the diagnosis between diarrhœa and dysentery—from the influence of contagion or marsh effluvia as inducing the affection—from the condition of the matter discharged by stool—from the mode of the discharge

discharge—from the type of the concomitant fever.

Observations on the remote causes of diarrhœa—Illustration of their action from the action of purgatives — General principles on which the symptoms of diarrhœa are to be explained—the alteration taking place in the state of secretion into the intestines—The change induced in the sensibility of the intestinal canal—The evacuation taking place from the system in general.

General intentions to be aimed at in the prevention of diarrhœa.

1. The preservation of due balance of circulation.
2. The avoiding or counteracting such causes as may give irritation to the intestines.
3. The giving such tone to the intestines as may prevent the influence of irritating causes.

Observations on the general principles of cure in diarrhœa—Inquiry respecting the circumstances which render it necessary to restrain or encourage the discharge—Ob-

jects to be particularly aimed at in the cure of diarrhœa.

1. The removal of causes irritating the intestines to action, when these take place.
2. The diminution of the impetus of circulation at the intestinal canal.
3. The diminution of a disposition in the intestinal canal to augmented secretion, or increased action.

Observations on particular remedies employed in diarrhœa—Emetics—Cathartics—Blood-letting—Diaphoretics—Absorbents—Lime-water—Demulcents—Opiates—Astringents—Lignum Campechense—Simarouba—Catechu—Gum Kino.

G. 14. *Cholera.*

OBSERVATIONS on the arrangement of cholera in different nosological systems—Account of the ordinary progress of the symptoms in this affection—Remarks on the symptoms by which this disease is chiefly characterised—vomiting and looseness

ness conjoined—gripes and anxiety—cramps of the extremities—General principles on which the symptoms of cholera are to be explained—The peculiar stimulus given by bile to the alimentary canal—The evacuation from the system—The severe and long-continued action—The peculiar affection of the nervous energy.

General observations on the treatment of cholera—Intentions principally to be aimed at in the cure of this disease—The counteracting the influence of bile already lodged in the alimentary canal—The restraining increased secretion of bile—The restoring a sound condition to the intestinal canal.

Observations on particular remedies which have been used in this affection—Emetics—Cathartics—Diluents—diluents conjoined with absorbents—diluents in an acidulated state—diluents in the way of injection—Opiates—in a fluid state—in a solid form—Anti-emetics—Saline draughts in the act of effervescence—Spirit of lavender—Antispasmodics used externally—Fomentations—Semicupium—Warm-bathing—Demulcents internally

internally—Blood-letting—Cordials for obviating the effects of cholera after the severity of the disease is overcome.

G. 15. *Diabetes.*

OBSERVATIONS on the different circumstances essential to this disease—Remarks on the obvious symptoms by which it may be distinguished from other affections—The manner in which the urine is discharged—The quantity of the discharge—The appearance of the urine—The nature of the saline matter which it contains—Account of the extraction of sugar from it—The changes which the urine in diabetes undergoes from the food—The bound state of the belly which commonly attends this affection—The increase of the appetite for solid food, as well as for fluids—The anasarcaous swellings of the inferior extremities.

Controversies respecting the theory of diabetes—View of the dispute, whether it
is

is to be considered as a disease of the alimentary canal, or of the kidneys — Observations on the supposition of a retrograde motion of the lymphatic vessels as alledged by Mr Darwin.

View of the principal sources of indication for the removal of this affection—General intentions of cure.

1. The restoration of due tone to the secretory vessels of the kidney.
2. The removal of peculiar morbid sensibility from that organ.
3. The diminution of the determination of fluids to the kidney.
4. The prevention of the occurrence of superfluous water in the general mass of fluids.

Observations on particular remedies recommended in this affection—Astringents—Tonics—Exercise—Stimulants—Diaphoretics—Sudorifics—Emetics—Inspissants—Opium—External applications—Cold applied to the region of the kidneys—plasters—belts—blisters.

Observations on the means which have been recommended for the alleviation of urgent

gent symptoms—Means of counteracting the waste of the system—means of moderating thirst—means for obviating constipation.

G. 16. *Cystirrhœa.*

INQUIRY respecting the nature of the disease—Observations on the different names given it by nosological writers—Symptoms by which it is chiefly characterised—Different appearances occurring during the progress of the affection—Diagnosis between cystirrhœa and other similar affections—Observations on the symptoms by which it is to be distinguished from leucorrhœa and gonorrhœa—Mode of the discharge in cystirrhœa—Condition of the urine—Observations on the distinction between cystirrhœa and those cases in which there occurs a purulent discharge from the bladder—Distinction of cystirrhœa into idiopathic and symptomatic.

General principles on which the chief symptoms are to be explained—Explanation of the morbid change in the appearance of the urine—of the change in the state of the
dis-

discharge—of the general affection of the system.

Chief objects to be aimed at in the cure of cystirrhœa—The diminution of the sensibility of the bladder—the diminution of the stimulating quality of the urine—the removal of morbid laxity in the secretory vessels of the mucous glands of the bladder.

Observations on particular modes of cure which have been recommended in this affection—Remarks respecting the proper regulation of diet—The avoiding salted or high-seasoned food—The use of vegetable and milk diet—The avoiding spirituous liquors—The proper use of diluents.

Remarks on the use of anodyne medicines—Observations on the employment of opium in different forms—of hyoscyamus—of cicuta—The effects of diluents and demulcents—of absorbents—of astringents—uva ursi—Peruvian bark—cold bathing—Different medicines used in the way of injection into the bladder.

G. 17. *Leucorrhœa.*

OBSERVATIONS on the different sources from whence the discharge in this affection proceeds—Symptoms attending leucorrhœa when the affection proceeds from the vessels of the uterus—Remarks respecting the period of life at which it chiefly occurs, and the constitution of the system with which it is most common—Remarks on the symptoms by which it may be distinguished from gonorrhœa—Remote causes of this affection—General principles on which these act, as producing the proximate cause—from their influence by giving uncommon relaxation of the vessels of the uterus—by increasing the determination of the fluids to those parts in which the disease is situated.

General sources of indication in the treatment of leucorrhœa.

- I. The condition of the vessels by which the separation is effected.
- II. The condition of the fluid with which these vessels are supplied.

Chief

Chief indications of cure in leucorrhœa.

1. To restore due tone to the vessels of the uterus.
2. To diminish a peculiar irritability in the parts chiefly affected.
3. To restrain uncommon determination to the uterus.
4. To restore a proper condition to the mass of circulating fluids.

Observations on particular remedies employed in leucorrhœa—Astringents—from the vegetable kingdom—from the mineral kingdom—Tonics—Peruvian bark—chalybeates—preparations of copper and zinc—Tonics applied externally—cold bathing—exercise—Absorbent medicines—testaceous powders—stomachic bitters—Stimulants to the uterine vessels—cantharides—fumigations—injections.

Remedies employed for obviating particular symptoms in leucorrhœa—Blood-letting—Emetics—Cathartics—Diaphoretics—Demulcents—Remarks respecting the diet in leucorrhœa.

G. 18. *Gonorrhœa.*

OBSERVATIONS on the different species of disease included under this term—Account of the common progress of symptoms in the gonorrhœa virulenta, or venereal gonorrhœa—Circumstances by which this affection is to be distinguished from those most nearly resembling it—Inquiry respecting differences in the predisposition to this affection—Observations respecting the action of infectious matter as the cause exciting the disease—Remarks with regard to the different ways in which this matter has been supposed to reach the chief seat of the disease—Explanation of the manner in which it produces the symptoms of the disease—Examination of the opinion respecting the existence of ulcers in the urethra—View of the controversy, whether the matter of gonorrhœa and syphilis be the same or different—Arguments corroborating the supposition that each depends on a peculiar matter—from the histories of the two affections—
from

from the phænomena of each disease—from the method of cure.

Observations on different proposals for the prevention of gonorrhœa—The removal of infectious matter by solvents of mucus injected into the urethra—the removal of the infectious matter by increasing the secretion of mucus from the urethra—the removal of the infectious matter from mere lotion, without injection.

Observations on the cure of gonorrhœa when the prevention is too late—Differences necessary in the treatment of different stages of the disease—General view of the treatment in the inflammatory stage—Treatment in the atonic stage.

Observations on particular remedies employed in gonorrhœa—Cathartics—of the drastic kind—of the refrigerant kind—Blood-letting—topical blood-letting—general blood-letting—Cool regimen—Refrigerant medicines—Demulcents—Diluents—Opiates—Sedative applications used externally—Fomentations—Remedies used in the atonic state of gonorrhœa—Mercurial medicines—Astrin-

gents—Tonics—Peruvian bark—Cold bathing—Means of obviating anomalous symptoms occurring as sequelæ of the disease—Verrucæ—Strictures of the urethra—Bougies—Caustics introduced by a catheter.

O R D E R I V. C A C H E X I Æ,

O r C h r o n i c a l D e p r a v a t i o n s o f t h e G e n e r a l
H a b i t.

G. 19. *Scorbutus.*

O B S E R V A T I O N S respecting the nature of the affection to be treated of under this title—Account of the symptoms most commonly occurring in scorbutus—Remarks respecting the progress of these symptoms—Observations on the symptoms chiefly distinguishing scorbutus from other affections—Distinction between scorbutus and elephantiasis—between scorbutus and syphilis—between scorbutus and jaundice—Observations on the diagnostics of scorbutus in its incipient state.

Account of the condition of the body with which scorbutus most readily occurs—Observations on the causes which chiefly operate as inducing it—want of vegetable aliment—use of salted or putrescent aliment—sparse diet—Causes obstructing perspiration—Observations respecting the condition of the general mass of fluids in scurvy—Inquiry whether the phænomena of the disease are to be explained from a putrescent state in the fluids, or from the superabundance of saline matters.

Observations on the means of preventing scorbutus at sea—Comparison of the deaths from this affection in the voyages round the world by Lord Anson and Captain Cook—Observations on the means of prevention employed by Captain Cook—Observations on the directions lately introduced into the navy of France—General heads to which the means of prevention may be reduced—Air—cleanliness—exercise—diet—Observations on the different means of purifying the air—Directions respecting cleanliness—Cautions respecting the want of due exercise on the one hand, and of fatigue on the other—Observations

servations on the means of preventing scurvy, in as far as respects diet—food—drink—seasoning—Observations on the use of wort—on the use of four-kraut.

Observations on the cure of scorbutus after it has taken place—General principles on which the fluids may be restored to their natural state.

1. By counteracting the vitiated quality already acquired.
2. By the expulsion of vitiated matters from the system.

General principles on which the morbid condition of the solids may be obviated.

1. By restoring vigour to the moving fibres.
2. By supporting the *vis vitæ*.

Observations on particular remedies employed in scorbutus—Articles used in the prevention of this affection, which are also useful in the cure—Remarks on the use of diaphoretics—Diuretics—Cathartics—Cicuta—Tonics—Antiseptics—Bitters and aromatics—Peruvian bark—Tonics employed externally—Remedies for obviating particular symptoms.

G. 20. *Scrophula.*

OBSERVATIONS on the period of life at which the attack of scrophula is most common—Account of the manner in which it in general commences—Account of the progress of the supervening symptoms—Observations on the diagnostics of scrophula—Marks by which scrophulous tumours are to be distinguished from those of the steatomatous kind—Distinction between scrophulous tumours and the common phlegmon—Distinction between scrophula and syphilis—Symptoms from which the occurrence of scrophula may be known at its earlier stages—Symptoms characterising it at more advanced periods—Observations on the state of the habit in which it most frequently occurs—Marks of hereditary predisposition—Causes of acquired predisposition—Doubts respecting exciting causes—Observations on the action of causes inducing this affection.

Observations on the means of preventing scrophula—Affections principally claiming attention in the treatment of scrophula—The
tumours

tumours—the ulcerations—the general state of the system—Observations on particular remedies which have been directed to be employed in this affection—Blood-letting—Emetics—Cathartics—Mineral waters—Diluents—diluent or diaphoretic decoctions—Tonics—from the vegetable kingdom—Peruvian bark—Mineral tonics—chalybeates sal martis conjoined with absorbent earth—calx of zinc—external tonics—cold bathing.

Observations on particular remedies employed in scrophula not referable to any general head—Vegetable acid—burnt sponge—burnt leather—sal soda—millepedes—mercury—cicuta.

Observations on different external applications which have been recommended for scrophulous tumours and sores—ointments of different kinds—dry dressings—salt water—solution of saccharum saturni—solution of alum—poultices of cicuta—ointment employed by Mr Broughton—vitriolic æther—electricity—Observations on the controversy respecting the amputation of parts affected with scrophula.

G. 21. *Rachitis.*

OBSERVATIONS on the opinion that rachitis is a disease but of late date, and peculiar to certain countries—Account of the symptoms which indicate the commencement of this affection—Symptoms occurring in the progress of this disease—Observations on the predisposition to rachitis—Origin from a hereditary taint—from causes affecting the system of parents—from the aliment of infants—from regimen with respect to temperature—from other diseases—Inquiry respecting the action of these causes, as affecting the growth of the bones—Causes from which the softening of the bones is to be explained.

Observations on the principal morbid conditions of the solids and fluids which are to be corrected in rachitis—Remarks on particular remedies which have been recommended in this affection—Evacuants—Emetics—Cathartics—Sudorifics—Diuretics—Issues—Friction of the surface—Exercise—Vegetable astringents and tonics—Mineral tonics

tonics—flores martiales—ens veneris—cuprum ammoniacum — cold bathing—friction with skate oil.

Observations on remedies intended to obviate particular symptoms—Means of correcting distortions—by instruments and mechanical contrivances—by bodily exertion—Observations on the regimen best adapted to rachitis.

G. 22. *Syphilis.*

OBSERVATIONS with regard to the diversity of symptoms which occur in lues venerea—View of the symptoms of syphilis, as referred to general heads.

1. Those depending on the mere topical application of venereal virus.
2. Those depending on the action of the venereal virus in the lymphatic system, before it enter the circulation.
3. Those depending on the deposition of the venereal virus at particular parts, after entering the circulation.

Varieties in the course and progress of syphilis—Observations on the symptoms distinguishing

stinguishing lues venerea from other affections—Difficulty of determining, after the disease has been of long continuance, whether the remaining symptoms be venereal or not—Observations respecting the action of a peculiar contagious matter, as inducing the symptoms of this affection.

Observations on the general principles on which the peculiar poison giving syphilis, may be supposed to be eradicated from the system.

1. By evacuation.
2. By the destruction of activity.
3. By counteracting its influence.

View of the controversy on which of these principles the most effectual remedy in syphilis, *viz.* mercury, may be supposed to operate—Other objects to be aimed at in the cure of syphilis, besides eradicating the virus—The obviating particular symptoms—the removal of the sequelæ of the disease—the counteracting the effects of the remedies employed in the cure.

Observations on particular remedies employed in syphilis.

Remarks

Remarks on the different ways in which mercury may be exhibited.

1. Those forms in which it is intended to act topically.
2. Those by which it is intended to be introduced into the system.

Observations on some of the principal forms intended for topical action.

Mercurial ointment—mercurius præcipitatus ruber—corrosive sublimate—mercurial fumigation.

Observations on some of the principal forms in which mercury may be used for entering the system—By the lymphatics on the surface of the body—by the lymphatics of the rectum—by the lymphatics of the stomach and small intestines.

Observations on the circumstances in which peculiar advantage may be expected from the introduction of mercury by the lymphatics on the surface—Observations on the practice of employing mercury in the way of injection into the rectum.

General distribution of the mercurial preparations taken by the mouth—The mild mercurials—the acrid mercurials.

Obfer-

Observations on some of the chief of the mild mercurials—Mr Plenck's preparations—his solution—his pill—his syrup—Mercurial pill of the London and Edinburgh pharmacopœias.

Observations on some of the chief acrid or saline mercurial preparations—Mr Keyfer's pill—calomel—corrosive sublimate.

Observations on Velno's vegetable syrups—on the rob antifiphilitique.

Observations on other remedies besides mercury which are employed in syphilis—sarsaparilla—guaiacum—mezeoreon—Lisbon diet-drink—Lobelia syphilitica—opium—astragalus exscapi.

Observations on the means used for obviating particular symptoms, or for counteracting the effects of medicines—Means employed for obviating constipation—means for counteracting diarrhœa—means for restraining salivation—means for relieving pains—means for removing venereal warts—Observations respecting the regimen in syphilis.

G. 23. *Cancer.*

OBSERVATIONS respecting the different circumstances from whence cancer has its origin—Account of the ordinary progress of symptoms—Observations on the different names which have been given to the different stages of this affection—Remarks with regard to the causes from whence cancer arises—Principles on which they may be supposed to operate as inducing the disease—General principles on which the cure of cancer may be aimed at.

1. The total removal of diseased parts.
2. The restoring parts morbidly affected to a sound state.
 - a. By restoring a proper condition to the vessels.
 - b. By restoring to them a due state of action.

Observations on particular modes of cure employed in cancer—Remarks respecting extirpation—Cicuta—mercury—arsenic—solanum

num—mezereon—aconitum—hyofciamus—
 mineral waters—electricity—Verrucæ equi-
 næ—faturnine preparations — carrot poul-
 tices—fermenting poultices — Iffues — O-
 pium.

O R D E R V. I M P E T I G I N E S,

O r C u t a n e o u s A f f e c t i o n s.

G. 24. *Pfora.*

OBSERVATIONS respecting the supposition, that pfora is a disease peculiar to particular countries — Account of the common progress of the symptoms in this affection — Observations on the difference between the two species of this disease which have been distinguished by the appellations of sicca and humida — Remarks on the supposition that pfora is to be considered as depending on insects of a peculiar kind — General principles on which the cure of pfora may be brought about.

1. By the evacuation of the foreign infectious matter giving the disease.

2. By

2. By the destruction of the activity of that matter.

Observations on particular remedies commonly recommended in the cure of psora—Sulphur—taken internally—applied externally—means of counteracting its disagreeable smell—Vitriolic acid—taken internally in a state of proper dilution—applied externally—united with hogs lard—united with oil—Mercury—Saturnine lotions—Gum myrrh in the form of ointment—Nitre—in the form of ointment—in solution.

Observations on the use of remedies employed for obviating particular symptoms in psora—cathartics—blood-letting—sudorifics—diaphoretics.

G. 25. *Herpes.*

G. 26. *Lepra.*

GENERAL observations on the diseases comprehended under these appellations—Circumstances rendering it proper that the consideration of these two affections should

should be conjoined—Account of the variety of appearances which take place in these two affections—Remarks on the general causes on which these affections have been supposed to depend — Observations on a hypothesis which refers cutaneous affections to a debility of the superficial vessels — View of general principles on which the remote causes may be supposed to operate.

1. By inducing a morbid condition of the general mass of fluids.
2. By bringing on morbid affections of the cutaneous vessels.
3. By occasioning a depraved secretion from the sebaceous glands of the surface.
4. By occasioning a morbid affection of the bulbs of the hair.

Varieties in the indications of cure in herpes and lepra, from the diversity in the causes on which they depend.

Observations on particular remedies employed in these diseases — Cathartics—sal Glauberi—sal polychretus—purging mineral waters—Sudorifics — Dover's powder—

L

warm

warm bath—decoctum lignorum—decoctum corticis ulmi—serpentaria Virginiana—viper broth—Antimonial preparations—tartar emetic—crude antimony—Mercurial preparations—Infusion of the œnanthe crocata—Veratrum—Gallium aparine.

External applications—Saturnine lotions—Mercurial lotions—Vitriolic acid in different forms—Sulphur—Nitre—Absorbent powders—Emollient applications—Warm bath—Vapour bath.

G. 27. *Tinea.*

ACCOUNT of the different forms in which tinea begins—Description of the ordinary appearance of the affection after it has taken place—Remarks on the causes which have been assigned as inducing it—Observations with regard to the proximate cause.

General principles on which the cure is to be attempted.

1. By restoring the bulbs of the hair to their natural condition.

2. By

2. By the total removal of the diseased parts.

Remarks on some of the chief remedies recommended in this affection—Cathartics—Diaphoretics—Depurantia—Agrimonia—Veronica—Viper broth—Alterantia—Antimonial preparations—Mercurial preparations—taken internally—applied externally—Ærugo æris—Arsenic—Solution of hepar sulphuris—Vitriolic acid in the form of ointment—Lotions with caustic alkali—with oleum tartari per deliquium—Infusion of tobacco—Emollient applications—Removal of the affected parts by a pitch plaster—Issues:

ORDER VI. NEUROSES,

Or Nervous Affections.

G. 28. Apoplexia.

OBSERVATIONS on the different ways in which apoplexy makes its first attack—Account of the preceding symptoms where the attack is not instantaneous—Account of the common appearances in this affection—Remarks on the common consequences of an attack of apoplexy—Observations respecting the symptoms which chiefly distinguish this disease from others—sudden abolition of sense—state of circulation—mode of respiration.

Remarks on the circumstances giving predisposition to this affection—the period of
life

life—the season of the year—the make of the body.

General heads to which the exciting causes may be referred.

1. Causes determining the blood to the head.
2. Injuries to the skull or brain.
3. Accidents restraining discharges from the body.
4. Causes diminishing the flow of blood to the brain.
5. Affections of the sentient principle.
6. Poisonous substances of the narcotic kind.

Inquiry how far the proximate cause of apoplexy depends on an interruption of the state of connection between the sentient and corporeal parts of the system—Principles on which the remote causes operate, as producing this interruption.

1. By giving compression to the brain.
2. By inducing a peculiar state of the nervous power.

Objects chiefly to be aimed at in attempts to cure apoplexy.

1. The removal of causes interrupting the connection

connection between the sentient and corporeal parts of the system.

2. The increase of excitement, or the producing more intimate connection between these parts.

Observations on some of the principal remedies recommended by practitioners in cases of apoplexy—Blood-letting—Stimulant applications—volatile spirits—mechanical stimuli—actual cautery—Sternutatories—Injections of the emollient kind—Stimulant injections—Fomentation of the legs—blisters—sinapisms—Observations respecting the position of the body—Internal remedies—Stimulant cordials—Emetics—Proposal of the operation of the trepan.

G. 29. *Paralysis.*

OBSERVATIONS on the different senses in which the term Paralysis has been adopted—General characteristics of this disease—Affection of sense—affection of motion—Remarks on the different forms in which this disease has its origin—Account
of

of the common progress of the symptoms—
View of the different occurrences giving
rise to a favourable termination of the af-
fection.

Observations on some of the chief remote
causes—Preceding diseases—Suppression of
discharges—Injuries to nerves—Action of
heat and cold—Metallic poisons—Inquiry
respecting the general principles on which
these causes operate—Their influence as af-
fecting the condition of the fluid supporting
a communication between the sentient and
corporeal parts of the system—Their influ-
ence as affecting the condition of the chan-
nels by which that fluid is to be conveyed
—Explanation of the symptoms of the dis-
ease, on the supposition of their producing
an effect in one or other of these ways.

Observations on the object chiefly to be
aimed at in the cure of paralysis; that is,
the restoration of free communication be-
tween the brain and the affected parts.

General principles on which this is to be
attempted.

1. By the removal of a condition of the
conducting

conducting medium unfavourable to the ready communication of motion.

2. By the removal of causes morbidly affecting the channels serving for the conveyance of that medium.

Observations on some of the principal remedies which have been recommended for the cure of paralysis—Blood-letting—cathartics—diaphoretics—errhines—emetics—External stimulants—epispastics—epispastica rubefacientia—vesicantia—suppurantia—Internal stimulants—arnica montana—Tonics—Peruvian bark—steel—warm bath—vapour-bath—mercury—camphor—electricity—Observations on the different modes of exhibiting electricity in paralysis.

G. 30. *Epilepsia.*

OBSERVATIONS on the symptoms by which epilepsy is chiefly characterised—Affection of the senses—Convulsive motions—Remarks on the variety in the appearance in epileptic fits—With respect to preceding symptoms—to consequent symptoms—to the frequency and duration of fits.

Ob-

Observations on the symptoms distinguishing epilepsy from those diseases most nearly resembling it—from apoplexy—from convulsions strictly so called, hieranosos, or morbus facer—from hysteria.

Observations on the condition of body giving disposition to epilepsy—A peculiar habit derived from parents—a certain degree of debility—a certain state of plethora—a peculiar disposition to contraction in the moving fibres.

Observations on the causes immediately exciting epileptic fits—The influence of passions of the mind—Mechanical irritation at the brain—irritation at remote parts of the body communicated to the brain by the intervention of the nerves—Eruptive febrile affections.

Observations with regard to the influence of these causes as affecting the action of the brain as a secreting organ—Attempt to explain the phenomena of the disease from this altered state of action occurring with an irritable system.

Morbid conditions in epilepsy giving a foundation

• foundation for indications — the peculiar state of action in the brain—peculiar irritability in the moving fibres—Indications of cure in epilepsy.

I. The prevention of the peculiar action of the brain.

1. By the removal of irritating causes.
2. By preventing their influence from being propagated when they are applied to remote parts.
3. By counteracting the influence of irritation from inducing a different state of action in the brain.

II. The removal of a peculiar disposition to motion in the moving fibres.

1. By diminishing the mobility of the nervous energy.
2. By strengthening the tone of the moving fibres.

General view of the means of cure to be employed in epilepsy.

1. Means to be employed for anticipating or preventing the accession before the attack of the paroxysm.
2. Means to be employed during the continuance of the fit.

3. Means

3. Means to be employed for preventing the return of the fit.

Practices referable to the first head—the avoiding exciting causes—the removal of irritating causes—the scarification of the gums in teething—the extirpation of tumours irritating nerves—The use of antispasmodic medicines—Friction of the inferior extremities—Fomentation—Sudden strokes—Stimulating antispasmodics—spirit of hartshorn — æther — Sedative antispasmodics — opium—musk camphor—Ligatures round the extremities.

Practices referable to the second head—Actual cautery—Defence of the head and other parts against injuries—defence of the tongue against the teeth—defence of the body against the hands.

Practices referable to the third head—General principles to which they may be reduced.

1. Means which serve to remove irritating causes producing a morbid action of the brain.
2. Means which prevent that morbid action,

tion, when induced, from having effect upon the system.

Observations on particular modes of cure referable to the first of these heads—Blood-letting — abstinence — exercise — blisters — issues—emetics.

Observations on particular modes of cure referable to the second head—Peony—oleum animale—valerian—hyosciamus—aqua picea pilulæ piceæ—Tonics—internal tonics—viscus quernus—Peruvian bark—chalybeates—Preparations of copper—cuprum ammoniacum—pilulæ e cupro—Preparations of zinc—calx or flowers of zinc — White vitriol — Cold bathing—Conjunction of different tonics at the same time,

G. 31. *Convulsio.*

OBSERVATIONS on the similarity between convulsio or chorea and epilepsia—Difference between these affections—Symptoms characterising convulsio—Account of the ordinary appearance of the symptoms—Similarity between the causes of this disease
and

and those which induce epilepsy—Difference in the state of action in the brain which takes place in this affection from that which occurs in epilepsy—Conjecture respecting the proximate cause of this affection.

Principles on which the cure of chorea may be obtained.

1. The removal, where it can be done, of irritating causes.
2. The prevention of irritating causes, notwithstanding their having acted, from producing any considerable effect on the system.
3. The removal of that condition, either in the system in general, or in particular parts, in consequence of which their action can have effect.

Observations on particular remedies which have been recommended in convulsio—Similarity between the remedies employed in convulsio and those used in epilepsy—Caix of zinc—Electricity—Phosphorus—Aurum fulminans.

G. 32. *Tetanus.*

OBSERVATIONS respecting the climates in which tetanus chiefly occurs—Remarks with regard to the different genera of affections in nosological systems which may be comprehended under this name—Account of the different ways in which tetanic disorders commence—Description of the common appearances in tetanus—of its usual duration—of the period at which it is commonly fatal.

Observations on the causes immediately inducing this affection—External wounds—moisture—syphilis—worms—Observations with respect to the predisposition to tetanus—Inquiry with regard to the influence of warm climates as giving this predisposition—Observations respecting the conjunct influence of the predisponent and occasional causes as inducing the disease.

Remarks on the objects to be chiefly aimed at in the cure of tetanus.

1. The removal of irritation.

2. The

2. The prevention of the influence of irritation from being communicated to the brain.
3. The obviating the influence of irritation when it is communicated to the brain.
 - a. By such means as have a general tendency to diminish action.
 - b. By such means as induce a different state of action.

Remarks on particular remedies employed in tetanus—Measures for allaying inflammation at parts receiving topical injuries—fomentation—saturine applications—incisions—blood-letting—purgatives—diaphoretics—Antispasmodics—of the sedative kind—opium—warm bathing—æther—Friction with mercurial ointment—Cold bathing—Electricity—Fomentation with oil.

G. 33. *Rabies.*

OBSERVATIONS on the signification in which the term *Rabies* is here adopted—Remarks on the arrangement of canine madness

madness in different nosological systems—Observations on the cause from which it universally arises—Account of the common progress of the symptoms—Differences with regard to the time at which the disease appears after the application of the infectious matter—Observations on the renewal of pain at the part to which the infectious matter is first applied, as indicating the approach of other symptoms—Analogy in this particular between the inoculation in small-pox and in rabies—Symptoms attending the first stage of the affection—Marks of the commencement of the second stage in the disorder of the vital functions—Marks of the commencement of the third stage in the affection of the mental faculties—Different ways in which the affection terminates in death—Observations on the circumstances distinguishing this affection at the earliest stages—The knowledge that a person has received a wound by a bite, and the condition of the animal biting—Supervening dullness and lassitude—Restless nights, accompanied with distressing dreams—Hydrophobia.

Observations concerning the action of a virus sui generis as inducing the affection—Principles on which the symptoms occurring in rabies are to be explained.

Observations respecting the general principles on which a cure in rabies may be brought about.

1. By preventing the introduction of virus into the system after it has been applied in such a manner that it may be absorbed.
2. By destroying the activity of the virus after it does enter the system.

Observations on particular modes of cure recommended in rabies—Remarks on the different directions which have been given with respect to the treatment of wounded parts—Circumstances giving a presumption that absorption does not in general take place soon after the application of the infectious matter—Complete extirpation of the wounded part—Actual cautery—Washing with a strong solution of salt—washing with vinegar—washing with alkaline solutions—Supporting a discharge from the wounded part.

Observations on some of the principal remedies which have at different times been recommended as specifics against the poison of rabies—The specifics recommended by the ancients—Lichen cinereus terrestris—Sea-bathing—Cinnabar and musk—The Ormkirk medicine—Absorbents—Blood-letting—Afasætida—Camphor—Mercury.

G. 34. *Mania.*

G. 35. *Melancholia.*

OBSERVATIONS on the difference between these two diseases with respect to the symptoms—Circumstances in which they agree—Reasons for conjoining the consideration of them—Enumeration of the symptoms chiefly occurring in melancholia—Account of the symptoms which commonly take place in mania—Remarks on the power with which the system, when subjected to these diseases, is capable of enduring hunger and cold—Observations on the symptoms by which these diseases are chiefly characterised—Dif-

—Difficulty of distinguishing whether insanity be feigned or not—Marks by which this is chiefly to be done—Observations on the causes by which mania and melancholia are produced—Difficulty with respect to the principles on which a cure is to be conducted.

General heads to which the practices used in these affections may be referred.

1. Means of producing an artificial termination of the complaint.

2. Means of aiding a natural termination.

Observations on particular remedies recommended in cases of insanity—Evacuants—Blood-letting—Cathartics—Stimulant vegetable purgatives—saline purgatives—Kali Tartarifatum—Emetics—Blisters—Antispasmodics—camphor—musk—opium—warm bathing—cold bathing—mercurial medicines.

Observations on the late introduction of the Gratiola in such affections—Account of the mode of administration—of its obvious effects—Observations on the use of the Belladonna—of the Digitalis—Regulations respecting the management of diet in cases of insanity—Regulations with respect to exer-

cise—Comparative advantage of mild and severe treatment—Observations respecting the use of music in cases of melancholia.

G. 36. *Hypochondriasis.*

REMARKS with regard to the common opinion that hypochondriasis and hysteria are merely different modifications of the same disease—Account of the distinction between these two affections, as established, first by Dr Hoffman, and afterwards by succeeding writers—Division of the symptoms occurring in hypochondriasis into two classes, the mental and the corporeal affections—Account of the principal mental affections—Account of the principal corporeal affections—Observations with regard to those diseases which occur as consequences of hypochondriasis—Symptoms distinguishing hypochondriasis from those diseases most nearly resembling it—from dyspepsia—from hysteria—Observations on the temperament with which hypochondriasis occurs—Marks by which the melancholic temperament is to be di-

distinguished—Observations on the period of life at which hypochondriasis chiefly takes place—Remarks on the occasional causes—Inquiry how far the proximate cause of hypochondriasis may be supposed to consist in torpor of the system in general, and of the alimentary canal in particular.

Observations on the general principles on which the remedies employed in hypochondriasis may be supposed to operate.

1. By restoring the due mobility of the system.
2. By counteracting occasional causes.
3. By obviating urgent symptoms.

Observations on particular remedies employed in the cure of this affection—Remarks with respect to the most proper regimen—Diet—Exercise—Temperature—Warm bathing—Camphor—Fœtid gums—Aromatics—Bitters—Absorbents—Chalybeates—Mineral waters—Emetics—Cathartics—Means of obviating the mental affections.

G. 37. *Hysteria.*

OBSERVATIONS on the frequency of hysterical affections—Account of the different forms which hysteria puts on—Division of the affections comprehended under this title—Hysterical symptoms—Hysterical paroxysms—Description of the most remarkable appearances which fall under the first of these heads—Account of the common appearances in a hysterical fit.

Observations on the different remote causes of hysteria—Remarks on the age and sex at which it chiefly occurs—on the habit of body which it commonly attacks—Description of the sanguine temperament—its origin from hereditary disposition—from causes inducing either a plethoric or a peculiarly irritable state—Observations with respect to the exciting causes—Differences with regard to the exciting causes of fits and of symptoms—Influence of stimuli as inducing hysterical symptoms—external stimuli—internal stimuli—Influence of stimuli as inducing hysterical fits

—cor—

—corporeal stimuli—mental stimuli—Inquiry into the manner in which the conjoined influence of the predisposing and occasional causes gives rise to the convulsive and spasmodic affections constituting the chief symptoms of this disease.

Observations on the general principles on which the cure of hysteria is to be aimed at.

I. The removal of particular convulsive or spasmodic affections producing the various symptoms of the disease.

II. The prevention of the return of the symptoms after they have once been removed.

1. By preventing the action of exciting causes.

2. By removing peculiar mobility of the system.

General heads to which the different modes of cure most frequently employed in hysteria may be referred.

1. Means to be used on the attack of the paroxysm, and during its continuance.

2. Means to be used during the intervals between fits.

Observations on particular practices referable to the first of these heads—Antispas-

modic medicines of the sedative kind—opium—musk—camphor—The application of warm water to the surface of the body—in the way of fomentation—of pediluvium—of semicupium—of warm bathing—Antispasmodics of the stimulant kind—volatile aromatic spirits—volatile alkali—æther—fœtid gums—castor—blisters—Cold water thrown upon the face—immersing the hands in cold water—volatile spirits applied to the nose—smoke of tobacco—smoke of feathers.

Observations on particular modes of cure referable to the second head—The avoiding mental stimuli—the removal of corporeal stimuli—the removal of predisposition.

General heads to which the removal of predisposition may be referred.

1. Means of producing evacuation from the system, where a plethoric state exists.
2. Means of recruiting the vigour of the system when there takes place a state of inanition.
3. Means of bracing the system in cases of morbid laxity.

Observations on particular remedies used with these intentions—Blood-letting—Cathartics

thartics—Spare diet—Liberal and restorative diet—Cordial medicines—Tonics—exposure to a dry and cold atmosphere—regular exercise—Peruvian bark—Tonics from the mineral kingdom—chalybeates—preparations of copper and zinc—cold bathing.

G. 38. *Asthma.*

OBSERVATIONS with regard to the different genera of disease which consist principally of an affection of the function of respiration — Circumstances distinguishing asthma from the other cases of difficult breathing—A peculiar sense of stricture in the breast and trachea—The recurrence of the difficulty of breathing in fits—Account of the ordinary method in which the fits of asthma make their attack—Account of the symptoms most commonly taking place in an asthmatic fit—Termination of asthma in other diseases—in paralysis—in apoplexy—in hæmoptysis.

Observations with respect to the duration of asthmatic fits — Appearances indicating the

the termination of the fit—Alternation of the paroxysms of asthma with other diseases—with gout—with convulsive affections—Observations concerning the remote causes of asthma—Inquiry how far the proximate cause consists in a spasmodic affection—View of the controversy respecting the seat of this spasm—Explanation of the symptoms of the disease on the supposition of spasm.

General heads to which the practice in asthma may be referred.

- I. The removal of the paroxysm when present.
- II. The prevention of the recurrence of future paroxysms.

Means by which the paroxysm, when present, may be removed.

1. By counteracting and removing such circumstances as support or induce spasm.
2. By bringing about an artificial resolution of the spasm, even although the cause inducing it remain.

Means by which the return of paroxysms may be prevented.

1. By avoiding exciting causes.

2. By

2. By preventing their action on the system when they cannot be avoided.
3. By removing that condition of the system without which they would have no effect.

Observations on the principal modes of cure which have been recommended in asthma — Blood-letting — Antispasmodics — The application of warm water in different forms to the surface — Æther applied externally — Vapour of æther taken into the lungs by inspiration — Musk — Asafoetida — Opium — Blisters — Emetics — Steams of vinegar taken into the lungs by inspiration — Smoke of tobacco — Vapour of warm water — The avoiding extremes either of a hot or cold atmosphere — The avoiding an atmosphere impregnated with pungent powders or vapours — The use of spare diet with plethoric habits — The use of full diet with debilitated habits — The liberal use of coffee — of honey — Exercise — Peruvian bark — Chalybeates — Preparations of copper and zinc — Mercury.

G. 39. *Dyspepsia.*

OBSERVATIONS on the sense in which the term *Dyspepsia* is here taken for expressing a genus of disease—Account of the symptoms most generally appearing in this affection—Observations on the different ways in which *dyspepsia* has a fatal termination—Remarks on the symptoms distinguishing *dyspepsia* from other affections—Means of distinguishing it from symptoms arising from scirrhus of the stomach—from the stomach complaints occurring in hypochondriasis—Inquiry how far chronic weakness of the stomach is to be considered as the cause of idiopathic *dyspepsia*.

Observations concerning the principal objects to be aimed at in the cure of *dyspepsia*.

1. The avoiding whatever will tend to diminish the vigour of the stomach.
2. The employing such remedies as will have influence as increasing that vigour.

3. The

3. The obviating urgent symptoms, particularly those which tend to increase and support the affection.

Remarks on the practices which have been chiefly recommended with these intentions—The avoiding acedent and flatulent food—The avoiding atonic medicines—The obviating constipation—The counteracting flatulency—The destroying acid in the stomach—Astringent medicines acting immediately upon the stomach itself—from the mineral kingdom—the vitriolic acid in different forms—the acetous acid—Tar water—Stimulants to the stomach—from the mineral kingdom—from the vegetable kingdom—Aromatic vegetables—Bitters—Gentian—Colomba root—Vegetable tonics—Rhubarb—Peruvian bark—Mineral tonics—Chalybeates—Iron mineral waters—Cold water sucked through a pipe—Ice—Cold bathing—Exercise—Observations respecting the management of diet—Observations respecting the fluids to be employed for drink.

G. 40. *Colica.*

OBSERVATIONS respecting the vague sense in which the term Colica has been adopted—Signification in which it is here employed—Account of the symptoms which commonly take place in this affection—Inquiry respecting the principal morbid conditions in colica—State of the intestines with which such conditions occur—Causes immediately tending to induce it—secreted fluids—peculiar ingesta—hardened excrement—acid evolved in the alimentary canal.

Observations on the general indications of cure in colica.

1. To produce a resolution of the spasmodic affection.
2. To evacuate the contents of the intestines.
3. To remove morbid irritability in the intestinal canal.
4. To prevent or remove inflammatory affections occurring as sequelæ of the spasm.

Remarks on some of the principal remedies

dies employed in this disease—Blood-letting—Antispasmodics—Opium—Glysters—of an emollient or oily nature—of tepid water—of fluids possessing a cathartic quality—solutions of Glauber's salt—solutions of common salt—turpentine injections—infusions of aromatic vegetables—smoke of tobacco—Cathartics taken by the mouth—Glauber's salts—infusion of tamarinds—cream of tartar—oleum Ricini—powder of alum—Dashing cold water upon the belly—Mechanical dilatation of the intestines—by solid substances—by crude mercury—External application of tepid water—Blisters—Observations on the remedies directed with the view of preventing frequent returns of Colica—Peruvian bark—Cold bathing—Regimen.

G. 41. *Cephalæa.*

OBSERVATIONS on the opposite views which have been taken of cephalæa by nosological writers—Systems from which this genus is totally excluded—Systems in which

which it is subdivided into several different genera—Observations on the various forms in which the characterising symptoms of this affection appear—

Account of the different morbid appearances with which it is commonly attended.

Observations on the general principles on which the predisposition to this affection depends—State of the integuments of the head—State of the extremities of the nerves there—Observations on the causes exciting fits of cephalæa—Remarks with regard to the action of these causes—Principles on which the pain in all its different modifications is to be accounted for—Explanation of the other symptoms.

Observations on the general principles on which the treatment of cephalæa is to be conducted.

- I. The removal of the present paroxysm.
- II. The prevention of the return of a paroxysm.

Principles upon which the paroxysm, when present, is to be removed.

1. By the removal of stimulating causes.
2. By

2. By counteracting the influence of stimuli.

a. From obviating those impressions which stimuli are capable of making on the extremities of nerves.

b. From altering the condition of the sentient principle in such a manner as either to diminish or obliterate the effects of painful impressions.

Principles upon which the return of the paroxysm is to be prevented.

1. By avoiding occasional causes.

a. Mental stimuli.

b. Corporeal stimuli.

c. Accidents by which it was formerly observed to be induced.

2. By removing predisposition.

a. From diminishing morbid irritability in the sensible extremities of nerves.

b. From restoring the diseased nerves to their natural condition.

Observations on some of the principal remedies employed in this affection—Blood-letting—general—topical—Cathartics—of the refrigerant kind—Blisters—Issues—Stimulants applied externally to the head—Ward's

volatile essence—Æther—Volatile liniment—
Volatile alkali acting on the nerves of the
nose—Sedatives—Opium in a solid state—in
a liquid form—Anodyne balsam—Opium ta-
ken internally—Extract of hyosciamus—Va-
lerian in powder—Compression of the part
to which the pain is referred.

Observations on the practices used for
preventing the return of Cephalæa—Diver-
sity in the remedies used with this view—
Circumstances directing the accommodation
of these to particular cases.

G. 42. *Odontalgia.*

OBSERVATIONS on the symptoms by
which odontalgia is characterised—
Seat of the pain—Nature of the pain—Cause
giving the irritation from whence the pain
proceeds.

General principles on which the cure of
odontalgia is to be attempted.

1. The removal of irritating causes.
2. The prevention of their influence when
they cannot be removed.

a. By

- a. By an action on the medium communicating the painful impression to the sensorium.
- b. By an action on the condition of the sensorium itself.

Observations on the principal remedies employed against this affection—Means of removing the irritating cause—Means affecting the medium communicating impressions—Burning with actual cautery—Burning with caustic spirits—Sedative medicines—Means affecting the condition of the sensorium—The removal of attention—The exciting painful impressions—Narcotic medicines—Means of preventing the recurrence of toothach—Frequent washing of the teeth—with simple water—with additions, merely serving to remove impurities—common salt—tincture of myrrh—Peruvian bark.

ORDER VII. MORBI DISSIMILES,

Or Chronical Affections which have little analogy to each other, or to any of the Affociations already mentioned.

G. 43. *Symptoma à Venenis, sive Veneninosos.*

OBSERVATIONS on the manner in which poison may be defined—Distinction of poisons into two classes—Those producing their effects from an action on the alimentary canal—Those producing their effects from acting on wounds at the surface—Reasons for confining the remarks to be offered to the former of these classes.

Division of the class of poisons acting on the alimentary canal into stimulant and sedative—Examples of the stimulant poisons
—Examples

—Examples of the sedative poisons—Account of the symptoms commonly arising from the stimulant poisons—Symptoms arising from the sedative poisons—Observations on those circumstances which serve to show, that particular symptoms arise from poisons—Peculiarities in the vomiting which arises from the stimulant poisons—Observations on the convulsive and spasmodic symptoms arising from the sedative poisons—Evidence of poisons from antecedent circumstances—From the manner of attack—Observations on the evidence of poisons from consequent symptoms—Remarks on the general principles on which they produce their effects.

General principles on which the cure in cases of poisons is to be attempted—General intentions of cure.

I. The prevention of their action on the system.

1. By previously inducing a peculiar state of the stomach.
2. By the expulsion of the poisonous matter.

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3. By

3. By diminishing the activity of the poisonous matter in the stomach.

a. From diluents.

b. From fluids sheathing acrimony, or affording a covering to the stomach.

c. From matters which serve to destroy the active powers of particular poisons.

II. The removal of the effects which their action induces.

1. Effects from the stimulant poisons.

a. Local inflammation.

b. Gangrene.

2. Effects from sedative poisons.

a. Torpor.

b. Paralysis.

Observations on particular modes of cure employed for counteracting or removing the effects of poisons—Emetics—diluents—demulcents—laxatives—Articles destroying the activity of particular poisons—Alkaline salts—acids—sulphur—camphor—Antidote of the Negro Cæsar—Blood-letting—Opiates—Fomentation of the belly—Blisters.

G. 44. *Symptomata à Vermibus, sive Elminofos.*

OBSERVATIONS on the different places of the human body in which worms have been found—Account of the different kinds of worms which are chiefly found in the intestinal canal—The teretes or lumbrici—the ascarides—the tænia—the tænia lata or tape-worm—the tænia cucurbitina or gourd-worm.

Observations on the nutrition of worms in the alimentary canal—Remarks on their generation there—Inquiry respecting the reason of their occurring most frequently with peculiar constitutions—Observations on the influence of different kinds of aliment, as promoting or preventing the generation of them.

Account of the symptoms produced by worms in general, from their presence in the alimentary canal—Symptoms more especially occurring from particular kinds of worms—Observations on the symptoms which are supposed to afford the strongest evidence of the presence of worms in the alimentary ca-

nal—picking of the nose, and grinding of the teeth—change of complexion—swelling of the lip and nose—voracious or fanciful appetite—glairy stools—actual discharge of worms—General principles on which the symptoms arising from worms may be explained—consumption of the aliment intended for the support of the system—deposition of excrementitious matter furnished by the worms—injury or irritation which they occasion to the intestinal canal.

Intentions to be principally aimed at in the treatment of symptoms from worms.

I. The counteracting those effects which worms induce.

1. By allaying inordinate motions.
2. By obviating pain.

II. The prevention of their future action.

1. By killing the worms in the alimentary canal.
2. By expelling them from the body.

Observations on particular remedies for killing worms, or expelling them from the alimentary canal—Remedies employed against worms in general; but more especially against the lumbrici—Vegetable bitters
in

in general—Absinthium — Tanacetum—Semen fantonicum—Rheum—Allium—Afafœtida—Oil—Saline substances—Acids—Alkalines—Neutrals—Sulphur—Hepar sulphuris—Harrowgate water—Earthly substances, supposed to act on mechanical principles—Metallic salts—White vitriol—Green vitriol—Other chalybeates—Pulvis stanni—Mercurial preparations—mercurial decoction—calomel — corrosive sublimite — Cathartics — Hellebore — Scammony — Colocynth — Jalap—Dolichos pruriens—Geoffræa Jamaicensis—Geoffræa Surinamensis—Spigelia anthelmintica.

Observations on the remedies more especially used against the tænia—Gamboge—Sal absinthii—Fern powder.

Observations on particular remedies employed against the ascarides—Decoction of vegetable bitters—Injections of lime-water—of solutions of salts—of sulphurous mineral waters—of infusion of tobacco—smoke of tobacco.

Observations on the Dracunculus or Guinea worm—Causes from which it appears in the human body—Symptoms which it induces

duces—Observations on the method of cure by gradual extraction—Observations on the method of cure by articles which are capable of killing it.

G. 45. *Symptomata à Calculis, sive Lithiasis.*

OBSERVATIONS on the origin of calculi in the urinary passages—Inquiry respecting the component parts of urinary calculi—Circumstances producing the union of these parts in a solid state—Formation of calculi from nuclei—Sources from which nuclei may be afforded—Formation of calculi from a change in the state of the urine—Causes from which this change may arise—from the state of the secreting organ—from the state of the fluid furnished from secretion.

Account of the symptoms arising from calculus when present in the urinary passages—Diversity in the symptoms from the situation of the calculus—Division of this affection into the lithiasis renalis and vesicalis—Symptoms occurring in lithiasis renalis—Symptoms occurring in lithiasis vesicalis—

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Observations on the symptoms which are in general considered as the strongest diagnostics of calculus—Inquiry into the cause why the symptoms from calculus are sometimes severe, sometimes not, although a calculus be constantly present—General principles to which the symptoms arising from calculus are to be referred—The immediate stimulus from the calculus—Obstruction of the urinary passages—Want of secretion of urine—Sympathy between the urinary passages and other parts.

Indications of cure in lithiasis renalis.

I. The removal of the calculus.

1. By the application of force sufficient to push it through the passages.
2. By facilitating the passage from diminishing the size of the stone.
3. By facilitating the passage from relaxing and widening the canals.

II. The removing or obviating symptoms while the calculus remains.

1. By counteracting symptoms depending immediately on the affection of the kidney and ureters.

2. By

2. By counteracting symptoms depending on the influence of the kidney on other parts of the system.

Observations on particular remedies employed against calculus of the kidney—Measures to be employed during the continuance of urgent symptoms—Blood-letting—Cathartics—Demulcents—Emollient glysters—Antispasmodics—Warm bathing—Anodynes—Means of restraining vomiting—Means of obviating the suppression of urine—Measures used during the intervals from urgent symptoms—Lithontriptics—Extraction of the stone by operation—The avoiding causes giving irritation—Diuretics—Uva ursi.

Observations on the method of cure employed against calculus in the bladder—General heads to which these may be reduced—Means for the removal of the calculi—means for preventing the action of calculi—means for obviating urgent symptoms—Observations on particular remedies—Blood-letting—Cathartics—Opiates—Abstraction of urine by the catheter—Operation of lithotomy—Solvents of calculus—Mrs Steven's solvent—Soap—Lime-water taken internally—
—injected

—injected into the bladder—Caustic alkali
—Mild alkaline salt—Water impregnated
with fixed air—Tilly's solvent—Vitriolic
acid.

G. 46. *Symptomata Infantibus propria.*

OBSERVATIONS on the general nature
of the affections which are to be con-
sidered under the head of the diseases of in-
fancy.

Of the retention of the meconium confi-
dered as a disease of infants—Manner in
which the meconium is in general discharged
in a state of health—Account of the symp-
toms which are commonly induced by the
retention of it—Circumstances from which
a conjecture may be formed whether these
symptoms arise from this or any other cause
—Circumstances claiming attention before
a favourable prognosis can be given—Va-
rieties necessary in the treatment of this af-
fection resulting from the cause inducing it.

Observations on the practice in case of
fixed obstruction—Means to be employed
where

where the rectum is imperforate—Observations on the practice where the retention depends on the want of due action—Means of increasing the action for expulsion—purgative syrups—manna—irritation of the rectum by injections or suppositories.

Of the Ephelis lutea, Icterus infantum, or gum—Inquiry how far there is reason to believe that the yellowness in this affection depends on bile—Conjecture with regard to the cause on which the change of colour depends—Method of treatment.

Of the Aphtha, or fore mouth of infants—Account of the common progress of the symptoms—Remarks on the symptoms chiefly distinguishing this from other affections.

Observations on the causes to which it has been ascribed—Circumstances in the appearance of the mouth indicating a favourable termination, or the contrary—Inquiry whether the aphthous crust is to be considered as a deposition from the milk—Inquiry how far it is to be considered as an effusion or exudation from the affected parts.

Observations on the general principles on which the cure must proceed.

1. The

1. The removal of the apthous crust which has already taken place.
2. The prevention of the farther generation of it.
3. The healing of ulcerations formed below the floughs.
4. The prevention of the communication of the affection from the child to the nurse.

Observations on particular remedies employed with these intentions—Abstergents—Neutral salts—Borax—Demulcents—Astringents—Mel rosaceum—Succus Japonicus—Defence of the nipples.

Of prevailing acidity in the stomach as a disease of infancy—Account of the symptoms commonly arising from this cause—Observations on particular symptoms, which chiefly serve to show that other appearances arise from this cause—Acid eruptions—Diarrhœa—Stools of a greenish colour—Inquiry respecting the generation of acid in the stomach during infancy—General principles to which this generation may be referred—a fault in the functions of digestion

—a peculiar condition in the milk—General intentions of cure.

1. The destruction of acid present in the alimentary canal.
2. The prevention of the farther generation of acid.
3. The removal of urgent symptoms.

Observations on particular remedies employed with these intentions—Crabs eyes—Magnesia—Rhubarb—Carminatives—Aromatic cataplasms.

Of dentition considered as a disease—Remarks in the progress of dentition—Account of the most urgent symptoms which may arise from dentition—Circumstances from which a probable judgment may be formed whether particular symptoms arise from dentition or not—Circumstances on which the diversity among the symptoms arising from dentition may be explained—The condition of the parts through which the tooth has to cut—The accidental position of the nerves—The irritability of the system in general—General principles on which the cure is to be attempted.

1. By

1. By the removal of irritation.
2. By counteracting the influence of irritation.
3. By combating particular symptoms.
4. By the prevention of the return of similar affections.

Observations on particular practices used in this affection—Incision of the gums—Friction of the gums—Blood-letting—Laxatives—Absorbents—Blisters—Antispasmodics—Pediluvium—Poultices to the feet—Spirit of hartshorn—Syrup of poppies—Liquid laudanum.

G. 47. *Symptomata Mulieribus propria.*

OBSERVATIONS on the general nature of the affections to be treated of under the head of the diseases of females—Principal affections of the pregnant and puerperal state.

Symptoms most frequently distressing to females during pregnancy—Observations on abortion—Remarks on the action constituting the essential part of this affection—Ge-

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neral

neral heads to which the accidents inducing this action may be referred—those depending on circumstances which have influence on the system of the mother—those depending on circumstances which have influence on the system of the foetus—General principles to which the causes of abortion depending on the mother may be referred—the giving predisposition to the action of the uterus—the exciting that action in a more immediate manner—Observations on the particular periods of pregnancy with which predisposition to that action is connected—Observations on the condition of the habit with which predisposition is connected—Causes inducing such a state of body—General heads to which the exciting causes may be referred—mental affections—corporeal affections—General heads to which the causes of abortion depending on the foetus may be referred—accidents producing the death of the foetus in utero—accidents destroying the connection between the foetal and maternal systems—accidents producing a rupture of the membranes—Account of the
the

the symptoms from which there is reason to infer that abortion is threatened—Symptoms accompanying the expulsion of the fœtus—Symptoms consequent upon the expulsion of the fœtus—Occurrences from which abortion has principally a fatal termination—General heads to which the treatment of this affection may be referred.

I. The prevention of the expulsion of the fœtus.

1. By avoiding causes capable of producing it.

2. By counteracting their influence.

a. From allaying commotion when already excited.

b. From the removal of every stimulating cause which can either tend to increase, support, or renew inordinate action.

II. The obviating the consequences of the expulsion of the fœtus.

Observations on particular practices employed with these intentions.

Observations on the most important affections which are peculiar to the puerperal

condition—Of the fevers of puerperal women without local inflammation—Of the puerperal fever, strictly so called—Of fevers, during the puerperal state, attended with a miliary eruption—Of the chronical affections peculiar to the puerperal state.

ORDER VIII. HÆMORRHAGIÆ,

Or Evacuations of Blood.

Of Hemorrhagies in General.

OBSERVATIONS on the general analogy which subsists among all the hæmorrhagies—Differences among the pathological writers with regard to the nature of hæmorrhagies—Foundation of the distinction between active and passive hæmorrhagies—General causes of passive hæmorrhagy—General causes of active hæmorrhagy.

G. 48. *Epistaxis.*

OBSERVATIONS on the various names which have been given to Epistaxis—Account of the symptoms by which the discharge

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charge

charge of blood is preceded—Different modes in which the discharge of blood itself takes place—Account of the consequent symptoms—Distinction between idiopathic epistaxis, and that which occurs as the consequence of accidental injuries, or of other diseases—Observations on the circumstances conjoined with the discharge of blood which distinguish idiopathic epistaxis—Circumstances on which the predisposition to this affection seems to depend—quantity of the blood—condition of the vascular system—Causes inducing these conditions of the body—Circumstances which serve to show that epistaxis has a salutary tendency—Circumstances with which it is principally dangerous—advanced age—a debilitated habit—preceding diseases—Lesion of functions induced from it—loss of strength—feebleness of pulse—coldness of the extremities—deliquium animi—Observations on the proximate cause of epistaxis—Inquiry respecting the influence of the remote causes as producing a rupture of vessels—Circumstances rendering the vessels of the nose particularly liable to rupture—The condition of these vessels—The direction
in

in which they run—General principles on which the consequences resulting from epistaxis are to be explained—from the removal of a superabundant quantity of blood—from the want of the quantity which is necessary.

General heads to which the treatment in epistaxis is to be referred.

I. Treatment during the time of the discharge.

II. Treatment after the discharge is stopped, with a view of preventing the return of it.

Circumstances from which a judgment is to be formed whether the discharge should be left to its natural course, or stopped by artificial means.

1. The quantity of the discharge.
2. The appearance of the blood.
3. The constitution with which epistaxis occurs.
4. The former habit of the patient.
5. The consequences resulting from the discharge.

General principles on which the discharge may be attempted to be stopped when it is necessary to restrain it.

1. By diminishing the force propelling the blood to the ruptured vessels.
2. By increasing the resistance to the passage of blood through these vessels.

Means by which the force producing the discharge may be diminished.

1. By diminishing the general impetus of the blood.
 - a. From diminishing the quantity of the blood.
 - b. From diminishing the action of the heart and blood-vessels.
2. By diminishing the impetus of the blood at the nose in particular.
 - a. From diminishing the causes stimulating the vessels of the nose to action.
 - b. From diminishing the sensibility of these vessels.

Means by which the resistance to the passage of blood through the ruptured vessels may be augmented.

1. By the position of the vessels.
2. By mechanical compression.
3. By spasmodic constriction.

4. By

4. By coagulation of blood in the orifices of the vessels.

General principles on which the prevention of a return of the affection is to be aimed at after the hæmorrhagy is stopped.

1. By removing or avoiding causes producing such an impetus of the blood as will occasion a rupture of vessels.
2. By increasing the strength of the vessels at the nose, so as to enable them to resist the impetus.

Observations on particular modes of cure employed in epistaxis—General blood-letting—Topical blood-letting—Dry cupping—Cathartics—Cooling injections—Refrigerants—Sedatives—Pediluvium—Astringents taken internally—Mineral astringents—Vegetable astringents—Astringents applied externally—Cold applications—Cold bathing—Peruvian bark—Ligatures round the extremities—Compression of the bleeding vessel—Epispastics—Cool regimen.

G. 49. *Hæmoptysis.*

ACCOUNT of the origin and progress of the symptoms in hæmoptysis—General state of the body with which this affection is most apt to occur—Symptoms commonly preceding the bloody expectoration—Form under which the bloody expectoration commonly takes place—Different ways in which hæmoptysis has a fatal termination.

Observations on the symptoms distinguishing hæmoptysis from other affections—Symptoms which serve to show whether blood discharged by the mouth, comes from the lungs, or from any other source—Means of distinguishing between the discharge of blood from the lungs, and from the trachea—Observations on the circumstances giving predisposition to hæmoptysis—period of life—sex of the patient—make of the body—state of the mental faculties—season of the year—General heads to which the accidents more immediately exciting hæmoptysis may be

be referred—circumstances inducing plethora—obstruction to the circulation in the large vessels—circumstances accelerating circulation—accidents giving rise to violent and quick motion of the lungs—Observations on the circumstances which are supposed to render hæmoptysis more dangerous than other hæmorrhagies—soft and spongy texture of the lungs—the constant action to which they are subjected—the exposure to air—the peculiar condition of the lungs, previous to the hæmorrhage.

General heads to which the treatment of hæmoptysis may be referred.

I. The stopping the discharge of blood.

1. From the use of such measures as tend to diminish the impetus by which the blood is expelled.

a. By the removal of plethora when it exists.

b. By diminishing the general impetus of the circulation.

c. By diminishing local increased action when it takes place in the vessels of the lungs.

d. By producing a determination of
blood

blood to parts of the system remote from the lungs.

2. From the use of such measures as augment the resistance to the passage of blood through the ruptured vessels of the lungs.

II. The prevention of the return of the discharge.

1. By preventing the recurrence of a plethoric state.
2. By carefully avoiding causes increasing the momentum of the blood in general.
3. By guarding against circumstances augmenting the impetus of the blood at the lungs in particular.
4. By supporting free circulation on the surface of the body.

III. The combating the sequelæ of the affection.

1. A state of inanition.
2. Suppuration in the lungs.

Observations on particular practices employed in hæmoptysis—Blood-letting—Refrigerant cathartics—Refrigerants strictly so called—Sedatives—Emetics—Sea-voyages—Riding on horseback—Blister—Issues—Astringents

stringents—Observations on the regimen to be enjoined with patients liable to hæmoptysis—Vegetable aliment—Milk diet—Temperature of the food and drink—Diluents of a refrigerant quality—Regulation of the passions of the mind—The avoiding bodily exertion—The preserving equable temperature at the surface of the body.

G. 50. *Hæmatemesis.*

OBSERVATIONS on the circumstances which are essential to hæmatemesis—Account of the common progress of the symptoms—Varieties in the appearance and quantity of the blood as discharged by vomiting—Symptoms occurring as consequences of this discharge.

Observations on the circumstances distinguishing hæmatemesis from other affections—appearance of the blood as discharged—nausea and sickness preceding the discharge—the mode of the discharge.

Conditions of the female habit with which hæmatemesis most frequently occurs—Temperament

perament in males with which it chiefly takes place—Accidents to which it can be most distinctly traced—Circumstances increasing the impetus of blood at the stomach—Circumstances giving erosion or rupture of the blood-vessels of the stomach—Observations on the influence of these causes, as giving rise to the accumulation of extravasated blood in the stomach—General principles from which the symptoms occurring in this affection are to be explained—the accumulation of blood in the stomach—the passage of blood from the stomach into the intestines—The putrefaction to which the blood has been subjected—the loss of blood.

Observations on the general plan of treatment to be followed in hæmatemesis.

Objects to be aimed at during the continuance of the bloody vomiting.

I. The bringing about a speedy termination of the fit of vomiting.

1. By discharging the blood collected in the stomach.

2. By preventing violent efforts in vomiting.

3. By

3. By promoting a tendency to the discharge of blood by stool.

II. The prevention of the farther effusion of blood into the stomach.

1. By diminishing the impetus of the blood in those vessels which are ruptured.

2. By preventing the free passage of blood through these vessels.

Objects to be aimed at during the intervals from vomiting.

1. The removal of causes first producing the disease.

2. The removal of that disposition in the system which gives a tendency to the discharge.

3. The induction of such a state of the stomach, or other diseased viscera, as will prevent the occurrence of farther discharge from these vessels.

Observations on particular remedies employed in this affection—Practices which are either not in common to this with other hæmorrhagies, or which require different administration—Emmenagogues—Anti-
tics

tics—Evacuation from the general mass of blood—Cathartics—Purgative injections—
—Emetics—Astringents—Rhubarb—Ice water—Application of cold to different parts of the surface—Chalybeates—Low diet.

G. 51. *Menorrhagia.*

OBSERVATIONS on the essential differences which occur between menorrhagia and the other hæmorrhagies—Remarks on the nature of the affection to be treated of under this term—Account of the symptoms by which menorrhagia is in general preceded—Account of the appearance and mode of the discharge—Account of the different affections which follow as consequences of the discharge—Observations on the distinguishing symptoms of this affection—State and quantity of the discharge of blood—the pain by which it is preceded—the debility induced—the change of complexion which occurs—the concomitant febrile symptoms.

General

General principles to which the action of the remote causes may be referred—from their giving uncommon determination of blood to the uterus—from their producing increased action of that viscus—from their occasioning want of due resistance to the impetus of the blood there—Principles on which the symptoms preceding the evacuation are to be explained—Distension of the vessels of the uterus and neighbouring parts, from the blood which is to be discharged—Principles on which the symptoms following the discharge are to be explained.

Varieties in the practice from different causes—from the circumstances of the habit with which it occurs—from the concomitant affections—from the state of the discharge.

General heads to which the practice in menorrhagia may be referred.

I. The restraining the discharge when present.

1. From such practices as diminish the force occasioning the discharge of blood.

a. By diminishing or moderating the general impetus of the circulation.

b. By altering the distribution of the
P blood,

blood, so as to diminish the flow to the uterus.

c. By diminishing the morbid action of the uterus, or its vessels.

2. From such practices as augment resistance to the passage of blood through the vessels by which it is to be discharged.

a. By giving latitude for a full contraction of the uterus.

b. By producing a constriction of ruptured vessels.

c. By inducing the coagulation of blood in the open orifices of vessels.

II. The prevention of the return of a discharge.

1. By diminishing partial congestion.

2. By avoiding causes increasing either the general impetus of the blood, or the impetus at the uterus in particular.

3. By removing the tendency of the uterus to increased action.

4. By giving additional vigour to the uterine vessels.

Observations on particular remedies employed in menorrhagia, where the administration

stration is different from that in other hæmorrhagies—Regimen—The avoiding motion—the position of the body—the avoiding both mental and corporeal stimuli—the stimulus of light—of noise—of heat—temperature of the chamber—quantity of bed-clothes—temperature of the aliment, whether fluid or solid—quantity and quality of the aliment—Blood-letting—Cathartics—Refrigerants—Opiates—Emetics—Sudorifics—Astringents taken internally—Vitriolic acid—Alum—Catechu—Gum Kino—Astringents applied externally—Cold applications—Blisters—Tonics—Exercise—Coldbathing—Chalybeates—Peruvian bark.

G. 52. *Hæmorrhoids.*

OBSERVATIONS on the different senses in which the term Hæmorrhoids has been employed—Distinction of this disease into different species—Description of the common progress of the disease—in a state of tumour—in a state of hæmorrhage—in a state of suppression—Symptoms chiefly di-

stinguishing hæmorrhoids from other affections.

General view of the causes inducing hæmorrhoids—those producing a copious flow of blood to the seat of the disease—those preventing the return of venous blood from these parts—View of different opinions respecting the way in which tumour and hæmorrhage are produced—from producing a varicose state of the veins—from producing an effusion of blood, and its coagulation in the cellular membrane—General principles on which the symptoms may be explained.

General intentions of cure according to the circumstances of the affection.

I. In the state of tumour.

1. To counteract the inflammation.
2. To promote a discharge of blood.

II. In the state of evacuation.

1. To diminish the impetus of blood at the part affected.
2. To increase the resistance to the passage of blood through the ruptured vessels.

III. In a state of suppression.

1. To obviate the particular affections induced.

2. To

2. To restore the discharge.
3. To compensate the discharge by vicarious evacuations.

Means for preventing a return of the hæmorrhoids.

1. By obviating and preventing accidents serving to give a determination of blood to the rectum.
2. By avoiding and counteracting circumstances preventing the free circulation of blood through the vessels of the rectum.
3. By restoring due tone to the vessels when in a relaxed state.
4. By removing particular morbid local affections supporting the hæmorrhage.

Observations on particular remedies employed in hæmorrhoids — Blood-letting — —Leeches applied at the anus—Opening the tumours—Antiphlogistic regimen—An horizontal posture of the body—External applications—emollients—oil—steams of warm water—ointments with camphor—saturine ointment—external application of opium—Internal use of opium—gentle cathartics—Means of restraining excessive bleeding—

cold applications — astringent injections — astringents by the mouth—Operation for preventing a return of the affection by the removal of *mariscæ*.

G. 53. *Hæmaturia.*

OBSERVATIONS on the different sources from whence the blood in hæmaturia may be discharged—Account of the different forms under which this hæmorrhage appears—Symptoms with which it is commonly attended—Causes inducing hæmaturia from an immediate action on the parts from which the hæmorrhage takes place—Causes producing that effect from an action on the system in general—Observations on the occurrence of hæmaturia as a symptomatic affection—as a critical discharge.

General observations on the practice in hæmaturia—Principles upon which the discharge is to be restrained when excessive—Principles upon which a return is to be prevented—by avoiding the causes inducing it — by giving such a state of the affected vessels

vessels that they will be less readily acted upon.

Observations on particular remedies employed in hæmaturia—Blood-letting—Gentle cathartics—Refrigerants—Diluents—Demulcents—Camphor—Opium—Medicines supposed to act as vulneraries—native balsams—arnica—rubia—Astringents—alum—lac aluminosum—ferum aluminosum—vitriolic acid—chalybeates—Peruvian bark—External applications—cold water—vinegar—solution of the Plumbum acetatum.

Observations on remedies intended for obviating particular symptoms—Means of obviating severe pains—Means of counteracting the retention of urine—Observations on the regimen best adapted for preventing the return of hæmaturia.

ORDER IX. EPIDEMICÆ,

Or Contagious Febrile Affections.

G. 54. *Variola.*

OBSERVATIONS respecting the time at which the small-pox first appeared in Europe—Account of the common progress of symptoms in the natural small-pox—Different periods into which the disease may be divided—Symptoms during the period of the eruptive fever—Symptoms during the period of the eruption—Symptoms during the period of maturation—Symptoms during the period of exsiccation or desquamation.

Observations on the varieties occurring during the progress of the small-pox—Account of the most dangerous symptoms occurring during the different stages—epileptic
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tic fits—Varieties in the degree of the eruptive fever—varieties in its continuance—in the number of pustules—in the method in which the eruption takes place—in the appearance and form of the pustules—in their contents—in the swelling of the hands and face—in the salivation occurring with adults, or diarrhœa with infants—in the secondary fever—in the symptoms of putrescency which sometimes occur—in the termination of the pustules—Sequelæ of the disease in its worst state.

Remarks on the diagnostics between the small-pox and other diseases—Inquiry concerning the cause why those once subjected to the disease are not again liable to it—General principles on which this security may be supposed to be obtained—by the removal of a state essentially necessary for its action—by the induction of a condition from which its farther action may be prevented—Objections to the first supposition—Arguments supporting the latter supposition—Conjectures concerning the manner in which a condition preventing the future action of contagion may be induced—Inquiry concerning

cerning the manner in which the variolous matter acts as inducing the disease—View of the controversy concerning the hypothesis, that, by assimilation, the variolous matter is multiplied in the body—Conjectures concerning the mode of infection from accidental contagion.

Observations on the circumstances influencing the degree of severity with which the small-pox occur—The nature of the infectious matter giving the disease—The manner in which the infection is communicated to the body—The extent to which the infection is communicated—The constitution on which the variolous matter acts—The management during the progress of the disease.

Observations respecting the practice in the small-pox—Remarks on inoculation—Circumstances on which the advantages of inoculation may be supposed principally to depend—Circumstances chiefly to be attended to in the conduct of inoculation—Remarks with regard to the period of life at which this operation ought to be performed—the season of the year—the preparation which
has

has been recommended before the operation be performed—the diet to be employed previous to the operation—the choice of the matter with which the operation is to be performed—the period of the disease at which the infectious matter to be used for inoculation should be taken—the method of performing the operation—the regimen and medicines recommended from the time that the operation is performed till the commencement of the eruptive fever.

Observations on the treatment of the small-pox after the infectious matter exerts its influence on the system in general, whether communicated by intentional or accidental contagion—Remarks on the treatment necessary at different stages, either for mitigating the disease or obviating particular symptoms—Observations on the measures recommended during the eruptive stage—blood-letting—exposure to cool air—acidulated diluent drink—cathartics—emetics—mercurials—Observations on the treatment of convulsions occurring during the eruptive stage—opium—tepid bathing.

Observations on the measures recommended
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ed during the suppurative stage—Means of obviating the inflammatory diathesis—means of promoting suppuration—means of counteracting irritation—means of obtaining rest for the patient—means of counteracting symptoms of putridity.

Observations on the measures recommended during the period of desquamation—treatment of the secondary fever—Observations on the means of preventing scars or pits where the pustules are numerous.

G. 55. *Rubeola.*

OBSERVATIONS respecting the period of life and season of the year at which the measles most frequently prevail—Account of the common progress of the symptoms—Account of the most troublesome sequelæ—Observations on the principal circumstances distinguishing measles from other affections—the febrile symptoms—the catarrhal symptoms—the eruption—the prevailing epidemic.

Observations

Observations on the treatment generally recommended in measles—Remarks on different proposals for inoculating the measles—Observations on the regimen recommended during the course of the disease—Remarks on particular remedies employed in the measles for obviating urgent or dangerous symptoms—from an inflammatory affection of the breast—from cough—from looseness—Blood-letting—Emetics—Anodynes—Pediluvium—Mucilaginous and oily medicines—Refrigerant cathartics—Mild astringents—Blisters—Wine—Peruvian bark.

G. 56. *Pertussis.*

CIRCUMSTANCES in which the whooping-cough has an analogy to small-pox and measles—Account of the common progress of the disease—Varieties in the duration of the affection—Different ways in which it has a fatal termination.

Observations on the diagnostics of pertussis—Difficulty of distinguishing it at the commencement from catarrh—from rubeola—
—from

—from influenza—Symptoms distinguishing it at after-periods—the peculiarity in the fits of coughing—the vomiting—the sudden relief after the termination of the fit—the peculiar noise in inspiration during the fit of coughing—Inquiry whether contagion is to be considered as the only occasional cause of the disease—View of the controversies respecting the particular viscus in which the disease may be considered as more especially seated.

General intentions with which the remedies employed in this affection are directed.

1. For obviating urgent symptoms, and forwarding the natural termination of the disease.
2. For inducing an artificial termination.

Remarks on the particular remedies used for obviating symptoms — Blood-letting — Cathartics — Blisters — Demulcents — Squills employed as an expectorant—as an emetic— Ipecacuanha—Tartar emetic—Irritation of the fauces-- Antispasmodics--Castor--Opium.

Remarks on particular remedies recommended for inducing an artificial termination of the disease—Millepedæ—Friction of the
the

the spine with spirits—The exciting a high degree of fear—The induction of other febrile contagions—Peruvian bark—Cantharides—Cicuta—Calx of zinc—Sea-bathing—Change of air.

G. 57. *Scarlatina.*

INQUIRY whether the Scarlatina be a genus under which several species are comprehended—Inquiry how far there is any essential difference between the cynanche maligna and scarlatina anginosa—Observations on this subject by Dr Withering and Dr Johnstone—Inquiry respecting the antiquity of the disease—Inquiry whether the scarlatina occurs to any individual oftener than once during his life—Account of the common progress of the symptoms in scarlatina—Symptoms occurring in the mildest state—Symptoms occurring from a high degree of putrid tendency.

Observations on the symptoms chiefly serving to distinguish scarlatina from other diseases at its commencement—the prevalence

ence of the affection as an epidemic—great prostration of strength—affection of the eyes—a discharge of acrid mucus from the nose—a peculiar scarlet eruption.

Observations on the general plan of cure in scarlatina—the conducting the disease in such a manner as to render the progress of the symptoms short and mild—Observations on particular remedies employed in scarlatina—Blood-letting—in a general manner—topically—Emetics—Cathartics—Diaphoretics—Blisters—Gargarisms of an emollient or lubricating nature—antiseptic gargarisms—injections into the fauces—the inspiration of antiseptic fumes—Antiseptics acting on the system in general—Peruvian bark—Wine.

Observations on the treatment of different sequelæ of the disease—swelling of the glands about the neck—affection of the skin—dropical symptoms—hectic symptoms.

G. 58. *Influenza.*

OBSERVATIONS on the different appellations given to Influenza in the nosological systems—Reasons for considering it as a genus distinct both from catarrhus and synocha—Account of the symptoms commonly attending influenza—Circumstances in which it agrees with other epidemical febrile contagions—Circumstances in which it differs from them.

Observations on the practice in influenza—Circumstances claiming attention with respect to diet—Objects principally claiming attention in the treatment of the disease—The mitigation of the fever—the mitigation of the pneumonic symptoms—the counteracting a tendency to phthisis.

Observations on particular remedies employed in influenza—Emetics—Blood-letting—Epispastics—Demulcents—Opiates—Refrigerant cathartics—Gentle diaphoretics—Peruvian bark—Cicuta—Milk diet—Country air—Gentle exercise.

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G. 59. *Dy-*

G. 59. *Dysenteria.*

OBSERVATIONS on the circumstances in which dysenteria differs from other epidemics—Reasons why dysenteria occurs both as a sporadic and epidemic disease—Account of the common progress of symptoms in this affection—Account of the appearances on the dissection of those dying of dysenteria—Conjectures concerning the progress of the local affection of the intestines—Principles on which the symptoms are to be accounted for.

Observations on the difference respecting the general principles of cure, between dysenteria and those epidemics which have a natural termination after a determined course — Remarks on the principal indicantia at different periods of the disease—the peculiar acrid matter during the first period—the debilitated and irritable state of the intestines during the last.

Objects to be principally aimed at during the first period.

I. The

1. The discharge from the alimentary canal of the acrid matter already separated.
2. The counteracting the influence of this matter where it cannot be evacuated.
3. The obviating the effects resulting from such acrid matter as can neither be evacuated nor destroyed.
4. The prevention of the farther separation of this matter.

Objects to be aimed at during the last period of the disease.

1. The giving a proper defence to the intestines against irritating causes.
2. The diminution of morbid sensibility of the intestinal canal.
3. The restoration of due vigour to the intestines.

Observations on particular remedies employed in dysentery—Emetics—Vitrium antimonii ceratum — Emetic tartar — Ipecacuanha—Advantages of the conjunction of ipecacuanha and emetic tartar — Cathartics — Rhubarb—Rhubarb conjoined with calomel — Glauber's salt—Diluent—Demulcent—

Blood-letting—Blisters—Fomentation of the abdomen—Warm bathing—Opiates—Diaphoretics—Wine—Peruvian bark—Samarouba—Radix Indica Lopeziana—Succus Japonicus—Gum Kino—Alum—Nutritious diet—Free air.

G. 60. *Pestis.*

ACCOUNT of the common progress of the symptoms occurring in the plague—Symptoms especially occurring at the attack of the disease, or during its first period—Symptoms occurring during the second period of the disease, terminating at the height of the affection—Symptoms attending the decline of the disease, or its third period—Comparison of the disease as it appeared in London in the year 1665, and as described by Dr Sydenham, with that which raged at Moscow 1771, as described by Dr Mertens.

Observations on the circumstances by which the plague is chiefly to be distinguished

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ed from other affections—the severity of the attack of the fever—the appearance of buboes, or carbuncles—the symptoms of putridity—Observations on the influence of contagion, as inducing this affection—Inquiry how far the circumstances producing the greatest severity in this disease may be mitigated by inoculation.

Observations on the measures generally directed for the prevention of the plague—Means of guarding against the communication of the infection from those subjected to the disease—Means of guarding against the infection as attached to cloaths or other inanimate matters—by the destruction of the activity of the infectious matter—by the removal of it.

Observations on the treatment of the plague after it has taken place—Remarks on the effects of particular remedies used in the plague—Emetic tartar—James's powder—Sudorifics—Opiates—Blood-letting—Cathartics—Blisters—Means of promoting the tendency to suppuration in the buboes—Emollient cataplasms—Blisters—Warm fomenta-

tions—Observations on the use of cordials and antiseptics—Wine—Cold drinks—Peruvian bark—Mineral acids—Means of preventing the retention of infectious matter about the patient.

O R D E R X. PHLEGMASIÆ,

Or Topical Inflammations.

OBSERVATIONS on active inflammation in general—Circumstances essential to such a state—Symptoms which serve to characterise inflammation—pain—heat—red colour—swelling—Induction of these from increased action of the small vessels—Inquiry how far spasm can be considered as having any influence in inducing it.

Observations on the causes more immediately giving rise to the increased action of the small vessels—State of sensibility in the part—state of stimulating powers applied to it—Observations on the means of removing the increased action which takes place in inflammation.

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I. By

1. By the diminution of the stimulating power in the part affected.
2. By the diminution of sensibility.

Means of diminishing morbid stimulus in the case of internal inflammations.

1. By diminishing the impetus of the blood in general.
2. By derivation from the affected part.

Measures for diminishing morbid sensibility.

1. By an immediate action on the diseased part.
2. By affecting the state of sensibility in general.

G. 61. *Phrenitis.*

ACCOUNT of the different ways in which Phrenitis begins—Commencement by a sudden attack—by a slow progress—Symptoms of the first stage of the disease—feelings referred to the head—changes in the appearance of the countenance—affections of vision and hearing—Symptoms attending the disease in its more advanced stages—affection
of

of the head—affection of the system in general—Natural terminations of phrenitis in recovery—Consequences of phrenitis.

Observations on the affections referable to the head, as affording a distinction between phrenitis and other diseases—Distinction between the phrenitic delirium when idiopathic and symptomatic—Observations on the habits most frequently attacked with this disease—on the occasional causes acting immediately on the brain—causes acting on the system in general—Remarks on the influence of the remote causes as inducing inflammation of the brain—Principles on which the chief symptoms may be explained from this inflammation.

Objects principally to be aimed at for obtaining a resolution of the inflammation of the brain.

1. The removal of such exciting causes as continue to operate.
2. The diminution of the momentum of the blood in the circulating system in general.
3. The diminution of impetus at the brain in particular.

4. The

4. The avoiding circumstances which tend either to accelerate the motion of the blood, or to give determination to the head.

Remarks on particular remedies employed with these intentions—Blood-letting—Cathartics—Blisters—Wet cloths applied to the head—Clay caps—Refrigerants taken internally—Nitre—Camphor—Opium—Pediluvium—Fomentation of the feet—Low diet—Diluents—The avoiding the stimulus of light—The avoiding motion—The enjoining an erect posture.

G. 62. *Ophthalmia.*

OBSERVATIONS on the nature of the affection to be treated of under the term Ophthalmia—The divisions which have been instituted in this genus—Utility of the division into idiopathic and symptomatic ophthalmia—Account of the common progress of idiopathic ophthalmia—Remarks on the circumstances affording a distinction between ophthalmia and other diseases—Distinction

Distinction from the appearance of the eye—
from the heat and pain—from the effect of
the impression of light—Distinction between
idiopathic and symptomatic ophthalmia from
the knowledge of preceding diseases.

Remarks on the circumstances giving pre-
disposition to ophthalmia—on the exciting
causes which act immediately on the eye
itself—on the causes operating as giving a
determination of fluids to the eye—on the
manner in which active inflammation of the
eye is induced—Explanation of the principal
symptoms from this inflammation.

General intentions of cure in the treat-
ment of ophthalmia.

1. The resolution of the inflammation of
the eye.
2. The removal of consequences which
frequently occur from such inflamma-
tion.
3. The induction of such a state of the
eye as to prevent the return of oph-
thalmia where there is a disposition
to it.

Observations on the regimen necessary in
ophthalmia—on the measures necessary for
diminish-

diminishing the impetus of the blood in the system in general, or at the eye in particular—on the means which tend to forward the natural resolution of this inflammation.

Observations on the practices principally employed for obtaining an artificial resolution of this inflammation—General blood-letting—topical blood-letting—Discharge of blood from the temporal artery—from the jugular vein—from the parts in the neighbourhood of the eye by leeches—by cupping with the scarification—discharge of blood from the vessels of the adnata by incision of these—from the vessels of the palpebræ.

Remarks on the use of cathartics—Glauber's salt—Infusion of tamarinds with fenna—Cream of tartar—Lenitive electuary—Blisters—Issues—Errhines—Asarum—Pulvis sternutatorius—Infusion of hypocaustanum—Diluents—Anodynes.

Observations on the topical applications principally employed—Emollient fomentations—Tepid vapours—Emollient cataplasms Cold applications—washing with cold water—application of rotten apples—Saturnine applications—Astringents—Solution of white vitriol

vitriol—Ointment containing articles not soluble in the fluids of the eye—Emollient ointments—Emollient ointment with vitriolic acid—with preparations of copper—with mercurial preparations.

Observations on the practices intended with the view of counteracting the consequences of ophthalmia—Means of removing offuscation of the cornea—by operation—by ointment with verdigrise—Burnt alum—Cream of tartar under the form of the pulvis ophthalmicus of Dr Baldinger—Measures for preventing the return of ophthalmia—Peruvian bark—Cold bathing.

G. 63. *Cynanche.*

OBSERVATIONS on the different affections included under the term *Cynanche* by nosologists—on the affection here to be treated of under that title—Account of the ordinary commencement and progress of the symptoms in *cynanche*—Remarks on the symptoms chiefly characterising this disease—Painful sensation referred to the affected part

part—Obvious appearance of the tonsils and fauces—Fever—State of deglutition and respiration.

Observations on the predisposition to cynanche from peculiarity of habit—from tendency to inflammation in general—Period of life and state of the habit with which predisposition is connected—Remarks on the principal exciting causes—Stimuli acting immediately on the seat of the disease—Cold—from its action on the fauces—from its action on external parts in the neighbourhood of the fauces—from its action on remote parts—Effect resulting from the remote causes as inducing topical inflammation—Explanation of the principal symptoms from the topical inflammation induced.

Remarks on the objects principally to be aimed at in the treatment of cynanche.

1. The obtaining a resolution of the inflammation in the throat.
2. The obviating urgent symptoms resulting from it before resolution can be effected.
3. The promoting a favourable suppuration

tion where resolution cannot be obtained.

4. The proper management of suppuration after it has taken place.

Observations on the particular practices to which recourse is chiefly had in this affection — General blood-letting — topical blood-letting—blood-letting from the venæ raninæ—from the vessels of the tonsils themselves—Cathartics—of the emollient or refrigerant kind—taken by the mouth—in the way of injection—Refrigerants which have no influence as purgatives taken by the mouth—Gargarisms—of the emollient kind —Gargarisms increasing excretion by the fauces—Solution of nitre—Squill vinegar—Infusion of roses—Vinegar with honey—Steams of different fluids—Injections into the throat—Rubefacientia applied externally —Blisters—Gentle diaphoretics.

Observations on the measures employed for obviating the most urgent symptoms—Difficulty in respiration—Remarks on the employment of bronchotomy—Means of counteracting difficulty in deglutition—means of promoting suppuration where it is unavoidable

voidable—Remarks on the treatment of suppuration after it is induced.

G. 64. *Pleuritis.*

OBSERVATIONS on the different senses in which the term Pleuritis has been employed—Reasons for considering pleuritis and peripneumonia as different affections—Account of the symptoms principally occurring in pleuritis—Manner in which the pain in general commences—Aggravation from coughing—from inspiration—Varieties in the situation of the pain—Concomitant fever—Ordinary duration of the disease—State of expectoration—Different ways in which this affection has a fatal termination.

Observations on the ground for distinguishing pleuritis from peripneumonia by the nature of the pain of the side—Remarks on the remote causes—Connection of the disease with the previous state of the lungs—with the shape of the chest—Exciting causes capable of inducing the disease with any habit—those operating from altering the balance

lance of circulation—those operating by an immediate action on the lungs—Influence of the remote causes as producing inflammation in the membranes and viscera of the thorax — Explanation of the symptoms of the disease from the inflammation which occurs.

Observations on the objects principally to be aimed at in the treatment of pleuritis.

1. The obtaining a resolution of the inflammation in the thorax.
2. The mitigation of urgent symptoms before resolution can be effected.
3. The counteracting or obviating the consequences of the disease.

Observations on the particular modes of cure chiefly employed in this affection—General blood-letting—topical blood-letting—Blisters—Cathartics—Cool regimen—Diluents — Refrigerants — Diaphoretics — Warm bathing—Opiates—Bandages round the chest—Emollient and anodyne applications externally—Oily or mucilaginous mixtures—Inspiration of the steams of warm water—Observations on the treatment of suppuration in the thorax succeeding pleuritis.

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G. 65. *Pe-*

G. 65. *Peripneumonia.*

OBSERVATIONS on those circumstances which have led some practitioners to consider both pleuritis and peripneumonia under the general head of Pneumonic Inflammation — Foundation for considering them as different genera—from a difference in the symptoms—Difference with respect to the seat of the pain in the breast—Difference in the nature of the pain—in the affection of respiration—in the cough—in the state of the matter expectorated—in the state of the concomitant fever—Inquiry respecting the principles on which this diversity of symptoms may be explained—Evidence of active inflammation in the case of pleuritis—Evidence of accumulation of blood in the pulmonary vessels, and effusion into the cells of the lungs, without active inflammation, in the case of peripneumonia—from the symptoms of the disease—from dissection—Appearances on dissection where pleuritis and peripneumonia are conjoined—differences where they exist separately.

Inquiry

Inquiry how far this supposition respecting peripneumonia corresponds with the most successful plan of cure in that disease—Advantage derived from those measures giving derivation from the breast—Observations on the practices principally employed in this affection—Blood-letting—Blisters—Expectorants—Emetics—Inspiration of vapours promoting expectoration.

G. 66. *Enteritis.*

REASONS for including under the term Enteritis, active inflammation of any part of the intestinal canal—Account of the ordinary progress of the symptoms in this affection—Different ways in which it has a favourable termination—progress of this inflammation to a favourable resolution.

Observations on the symptoms distinguishing this affection from inflammation of the thoracic viscera—on the distinction between enteritis and nephritis—on the distinction between inflammation of the ali-

mentary canal and other affections of that organ.

Remarks on the exciting causes as depending on acrimony immediately acting on the intestinal canal—Acrid substances taken by the mouth—Acrid matters furnished by the system itself—Causes giving obstruction to the free passage of matters through the intestines—Explanation of the symptoms of this disease from the inflammation thus induced.

Remarks on the objects principally to be aimed at in the treatment of enteritis.

1. The obtaining a resolution of the inflammation of the intestinal canal.
2. The obviating the most urgent symptoms which occur in the disease.

Means of obtaining a resolution of inflammation, in common to enteritis with other affections—means of combating it by the removal of irritating causes.

1. By the destruction of the acrid matter where its nature is known.
2. By the expulsion of it from the alimentary canal.

3. By

3. By the diminution of its activity from dilution.
4. By defending sensible parts against its action.

Indications to be aimed at with a view of removing the consequences of enteritis, when it does not terminate fatally—Indications when it terminates in resolution—when it terminates in suppuration.

Remarks on the principal remedies employed in enteritis—Articles intended to counteract acrimony of an acid nature—lime-water—solution of vegetable alkali—Articles counteracting acrimony of an alkaline nature—vegetable acid—acetous acid—mineral acids—Articles intended for the expulsion of acrimony where its nature is unknown—Gentle emetics—Infusion of camomile—Titillation of the fauces—White vitriol—Gentle laxatives taken by the mouth—Laxative injections—Diluents—Fluids lubricating and defending the intestinal canal—Mucilaginous decoctions—Oily draughts—Milk.

Observations on the practices intended with the view of obtaining resolution of the

inflammation — Blood-letting — Cupping—
Leeches—Blifters—Fomentation of the abdo-
men—Emollient and laxative injections—
Nutritious injections—Gentle cathartics by
the mouth—Meafures employed for obvia-
ting particular fymptoms—for restraining
vomiting—for alleviating pain.

G. 67. *Hepatitis.*

OBSERVATIONS on the accounts which
have been given of the diverfity of
fymptoms taking place in different cafes of
hepatitis — Suppofition of the affection of
oppofite fides of the liver—of the fubftance
of the liver or its membranes—of the ex-
treme branches of the hepatic artery or vena
portarum.

Account of the fymptoms commonly oc-
curring in hepatitis, and of the ordinary
progrefs of the difeafe—Different ways in
which it terminates—in recovery—in death
—Variety of the fymptoms in different cafes
of hepatitis — Diverfity in the pain—Ex-
planation of this variety, from active inflam-
mation

mation in some cases, and simple accumulation in others.

Observations on the marks distinguishing hepatitis from other diseases—from affections of the abdominal muscles—from affections of the pleura and diaphragm—from affections of the stomach.

General heads to which the cure of hepatitis may be referred.

1. The treatment during the state of active inflammation.
2. The treatment after a state of suppuration has either taken place or cannot be avoided.
3. The treatment where there is an evident tendency to scirrhoty, or where such a state has already occurred.

Observations on the remedies principally employed during the first of these states—Blood-letting—Blisters over the affected part—Laxative injections—Refrigerant cathartics—Refrigerants which do not possess a laxative power—Nitre—Nitre in conjunction with camphor.

Remarks on different modes of treatment referable to the second head—Means of pro-

moting suppuration where it is unavoidable
 —fomentations—opening of the abscess by
 incision—Means of aiding the discharge of
 pus where the abscess is ruptured naturally
 —Means of counteracting the effect of pu-
 rulent absorption—Means of promoting the
 healing of ulcerations in the liver—Reme-
 dies referable to the third head—mercury
 —cicuta—hyosciamus—electricity.

G. 68. *Nephritis.*

OBSERVATIONS on the different distinc-
 tions attempted to be established in
 nephritis—Account of the symptoms and
 progress of the disease as they occur in all
 the species—Different cases taking place
 when nephritis terminates in suppura-
 tion—Rupture into the cavity of the abdo-
 men—into the pelvis of the kidney—Rup-
 ture externally through the integuments of
 the back.

Remarks on the diagnosis between nephri-
 tis and other diseases—Means of distinguish-
 ing nephritis from an inflammatory affec-
 tion

tion of the alimentary canal—from spasmodic affections of the intestines—from inflammation of the psoas muscle—from calculus producing obstruction in the ureter.

Observations on the different causes by which inflammation of the kidney may be excited—Explanation of the principal symptoms from this inflammation when it has occurred.

General heads to which the treatment in cases of nephritis may be referred.

1. The removal of the causes of inflammation when these continue to operate.
2. The resolution of the inflammation which has taken place.
3. The promoting a discharge of purulent matter, and the healing of ulceration in the kidney, when the disease has landed in suppuration.

Remarks on practices commonly employed in this affection referable to the first of these heads—gentle diuretics—diluent—warm bathing—semicupium—opiates—Practices referable to the second head—blood-letting—cathartics—emollient injections—blisters—fomentation of the region of the
kidney

kidney—Practices referable to the third head—Means of promoting a free discharge of purulent matter—Means of sheathing acrimony—Means of healing ulceration in the urinary passages—Balsam of copaiba—Balsam Racafiri—Gum myrrh—Peruvian bark—Uva ursi—Treatment of nephritis where the suppuration points externally.

G. 69. *Erysipelas.*

OBSERVATIONS on the different places which have been assigned to this genus in nosological systems—Reasons for here referring it to the order of phlegmasiæ—Different names which have been assigned to this genus.

Account of the febrile symptoms occurring at the commencement of erysipelas—Progress of the obvious local affection—Period at which the disease in general begins to decline—Symptoms taking place during the decline—Appearances in the progress to a salutary termination—Appearances attending the termination in gangrene—Symptoms

toms attending the transition of erysipelas from one part of the body to another—Observations on the marks distinguishing erysipelas from other diseases—Period of life and habit of the body with which it most frequently occurs—Causes by which it has been alledged to be more immediately excited—Remarks on the influence of contagion as inducing it—Controversies among practitioners respecting its proximate cause—Conjecture on this subject.

Observations on the general objects to be had in view in the treatment of erysipelas—The local inflammation—the fever.

Intentions to be aimed at with a view to the mitigation of the inflammation.

1. The diminution of the general impetus of the circulation.
2. The diminution of the impetus at the part principally affected.

Intentions to be aimed at in the treatment of the concomitant fever.

1. The restraining increased action at the first period.
2. The obviating a septic tendency during the latter period.

Remarks

Remarks on particular practices to which recourse is principally had in erysipelas—Antiphlogistic regimen—Avoiding heat—Avoiding the action of external cold—Blood-letting—Controversies among the best practitioners respecting the employment of it—Diaphoretics—Cathartics—Practices intended with a view to topical action—leeches—dry powders—covering with light cotton-cloth or fur—application of cabbage-leaves gently bruised—saturine ointment—saturine lotions—linimentum cereum—liniment of oil and lime-water.

Observations on the treatment where the disease terminates in suppuration—Remarks on the remedies employed for counteracting the septic tendency in the concomitant fever—Peruvian bark—Port-wine.

G. 70. *Rheumatismus.*

OBSERVATIONS on the different names given to Rheumatismus from the different parts of the body which happen to be affected—Changes which this affection undergoes

undergoes in its nature at different periods of the disease—Division of rheumatism into acute and chronic.

Account of the symptoms occurring in the earlier stages of this affection—Topical affection of particular parts—Affection of the system in general—Different spontaneous evacuations indicating a natural crisis where the disease does not run on to a great length—Account of the symptoms occurring in the advanced stages of rheumatism when it runs on to a great length—Habits in which this affection principally takes place—Accidents more immediately inducing it.

Observations on the symptoms distinguishing rheumatism from other affections—Diagnosis between rheumatism and gout—Difference in the seat of the pain—in the concomitant fever, particularly with respect to the *anxietas febrilis*—in the extent of the local affection—in the period of life—in the sex—in the hereditary disposition—in the exciting causes.

Observations on the theory of rheumatism—Evidence of a state of active inflammation at the earliest stage—evidence of atonia at
the

the more advanced stages—Explanation of the leading symptoms of the disease on these principles.

Observations on the necessity of attending to the nature of the morbid affections at different periods of the disease for the conduct of successful practice—Division of this disease into different stages with a view to practice—Characteristics of the first stage, or state of inflammation—characteristics of the second stage, or state of irritability—characteristics of the third stage, or state of atonia—characteristics of the fourth and last stage, or state of paralysis.

Observations on the intentions of cure principally to be aimed at in the different stages of rheumatism.

I. In the state of inflammation.

To diminish the increased action of the vessels in the part affected.

a. By diminishing the general impetus of the circulation.

b. By diminishing the impetus at the part particularly affected.

II. In the state of irritability.

1. The

1. The removal of a disposition to increased action of the vessels.
2. The prevention of the action of causes exciting painful sensations.
3. The obviating their influence on the part.
 - a. By altering the condition of the nervous power in the part.
 - b. By supporting a determination of the fluids from diseased to sound parts.
 - c. By counteracting the effects of morbid sensibility.

III. In the state of atonia.

The restoration of due vigour to the affected parts.

- a. By increasing the tone of the moving fibres.
- b. By giving condensation of the simple solid.

IV. In the state of paralysis.

1. The restoration of a due condition to the nervous energy in the part affected.
 - a. By increasing excitement through the system in general.
 - b. By stimulating the sensible extremities of the nerves in the affected part.

2. The

2. The obtaining free circulation of blood through the vessels of the part.
 - a. By removing obstruction to the passage of blood through the vessels that have been affected.
 - b. By augmenting action in those vessels in which it may happen to be morbidly diminished.
3. The removal of rigidity in the membranes and ligaments.
 - a. By relaxing the simple solids.
 - b. By facilitating the motion of parts on each other.

Observations on the operation and use of particular remedies principally employed in rheumatism—General blood-letting—Topical blood-letting—Antiphlogistic regimen—Moderately warm temperature—Refrigerant cathartics—Laxative injections.

Remarks on the use of sudorifics—on the different directions given respecting the administration of sweating—Gum guaiac—Volatile alkali—Mezereon—Blisters—Rubefacientia—Camphorated oil—Volatile liniments—Ointment with vitriolic acid—Ward's volatile essence—Æther—Sedatives topically applied

applied—Sedatives taken internally—Opium
Hyofciamus—Aconitum—Cicuta.

Remarks on the account given of the advantages which are said to be derived from the use of the *Rhododendron chrysanthum* in Siberia—Effects observed from it in Britain—Its employment in the form of infusion—of powder—Effects of Peruvian bark—Mercurial preparations—Electricity—Vapour bath.

G. 71. *Arthritis.*

OBSERVATIONS on the distinctions of gout into different species attempted to be established by nosological and practical writers—Attempt to describe the appearances which take place in gout under two general heads—The regular paroxysm of gout—Gouty symptoms.

View of the appearances in the regular gouty paroxysm as referred to three different stages.

1. The symptoms of the commencement, or those preceding the affection of the
S foot,

foot, which may be called the stage of anorexia.

2. The symptoms of the acme, or violence of the disease, which may be styled the inflammatory stage.
3. The symptoms of the decline, or what may be termed the atonic stage.

Account of the various morbid appearances included under the head of gouty symptoms, which have been described by authors under the title of anomalous, wandering, retrocedent, or misplaced gout—Attempt to afford a more distinct view of these, from referring them to different cases.

1. Cases where there are symptoms of local inflammation from the gout, but where the pain is not fixed to the foot.

2. Cases where symptoms of local inflammation occurring in the foot, or other parts alternate with gout, putting on the appearance of other diseases.

3. Cases where gout assumes the appearance of other diseases, and is not characterised by any evidence of topical inflammation.

Observations on the marks distinguishing
gout

gout from other diseases—Distinction in the case of a regular paroxysm of gout—Distinction in the case of gouty symptoms—Observations on the nature of the predisposition to gout—On the circumstances from which this predisposition may derive its origin—Causes of predisposition connected with the constitution itself, whether hereditary or connate—Causes of predisposition acquired in after-life—Circumstances tending to excite fits of gout where predisposition previously exists—Exciting causes acting immediately on the alimentary canal—Exciting causes acting on those parts in which the local inflammation is chiefly seated—Exciting causes acting on the system in general.

Observations on the different opinions proposed by practitioners concerning the proximate cause of the gout—Remarks on the hypothesis on this subject proposed by Dr Cullen—View of the arguments brought in support of this hypothesis—Objections to the different positions attempted to be established in support of this theory.

1. That a vigorous and plethoric habit

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exists

exists previous to the occurrence of the disease.

2. That this vigorous and plethoric habit is at a certain age liable to a loss of tone in the extremities.

3. That this loss of tone communicates its influence to the whole system, but more especially to the stomach.

4. That the general loss of tone thus occurring will excite the *vis medicatrix naturæ* to restore tone.

5. That the *vis medicatrix naturæ* restores tone by exciting an inflammatory affection in some part of the extremities.

General conclusions respecting this theory from a review of the arguments in support of it—Observations on different facts and phenomena occurring in gout which are irreconcilable to this hypothesis.

General heads to which the treatment in gout may be referred.

I. The treatment of the regular paroxysm in gout.

II. The treatment of gouty symptoms.

General intentions of cure to be aimed at
in

in the treatment of a regular gouty paroxysm.

I. Intentions of cure to be aimed at during the continuance of the paroxysm.

1. The counteracting affections of the alimentary canal during the stage of anorexia.

2. The obviating violent pain during the second or inflammatory stage.

3. The restoring due vigour, during the third or atonic stage, to the parts left in a debilitated state.

II. Intentions during the interval between paroxysms—The prevention of a return of the fits.

a. By avoiding occasional causes.

b. By medicines supposed to be capable of removing predisposition.

c. By such regimen as tends to counteract predisposition.

General heads of cure in the treatment of gouty symptoms when not appearing under the form of a regular paroxysm.

1. The mitigation or removal of such particular symptoms as may occur.

2. The induction, when it can be brought about, of a regular paroxysm.

Remarks on particular practices employed in gout.

Observations on the practices which have been principally used and recommended during the different stages of a regular paroxysm of gout—Emetics—Cathartics—Blood-letting—Topical bleeding—Blisters—Burning with moxa—Whipping with nettles—Volatile liniment—Camphorated oil—Emollient cataplasm—Fomentation with tepid water—Tepid vapours—Anodyne applications—Anodynes taken internally—Diaphoretics—Soft coverings giving gentle warmth—flannel—wool—furr—Regimen to be directed on the conclusion of the pain—The avoiding all stimulating causes—The avoiding causes of evacuation—The attention to be bestowed on the part in which the pain is seated.

Observations on the practices which have been chiefly recommended and employed against gouty symptoms—Measures employed against the affections of the alimentary canal—measures employed where affections
of

of the lungs occur — measures employed where gout produces affections of the head — measures used for soliciting the gout to the extremities.

Observations on the regimen and medicines principally recommended with gouty habits during the intervals from the disease, with the view of preventing a return of the affection—The arcana of different empirics—The Portland powder—Gum guaiac—Regimen proposed by Dr Cadogan—Regimen proposed by Dr Grant—Food—Drink—Excretions—Air—Exercise—Passions of the mind.

G. 72. *Phthisis.*

INQUIRY how far phthisis can be considered as an idiopathic disease—Observations on the different species into which phthisis has been divided—Attempt to refer all the various instances of this affection to three species—Catarrhal consumption—Ulcerous consumption—Tuberculous consumption—Arrangement of the symptoms occurring in

each of these species under three heads—
The pulmonary or pneumonic symptoms—
the symptoms of hectic fever—the conse-
quent or supervening symptoms.

Account of the pneumonic symptoms oc-
curring in the different species—in the ca-
tarrhal consumption—in the ulcerous con-
sumption—in the tuberculous consumption.

Account of the symptoms constituting the
hectic fever in common to all the different
species of consumption—Supervening symp-
toms or affections consequent on the hectic
fever which constitute the last stage of
phthisis.

Observations on the diagnosis in phthisis
—Distinction between phthisis and other dis-
eases—Circumstances distinguishing phthisis
from catarrh—Observations on the different
criteria proposed for determining when
expectorated matter contains pus—Account
of the criterion discovered by Mr Darwin—
Observations on the symptoms which serve
to distinguish the different species of phthisis
from each other.

Remarks on the prognosis in phthisis—
Grounds from which the danger may be
estimated

estimated in particular cases—from the species of phthisis which takes place—from the causes inducing the affection—from the symptoms with which the case is attended—Observations on the appearances discovered in the lungs on the dissection of those dying of phthisis—Different symptoms in phthisis which may be explained from the purulent absorption which takes place.

Remarks on the different intentions of cure in different species of phthisis.

I. In the catarrhal consumption.

1. To produce an alteration in the state of separation at the surface of the lungs.

a. By a diminution of the impetus of the blood through the system in general.

b. By a diminution of the impetus at the lungs.

2. To restore the natural condition of the superficial vessels from which this separation is afforded.

a. By strengthening the tone of these vessels.

b. By giving such a condition to the system in general, that this restoration

tion may be accomplished by its own operations.

II. In the ulcerous consumption.

1. To discharge the purulent matter collected in a vomica.

a. By such measures as have a tendency to burst the vomica.

b. By promoting expectoration after a rupture.

2. To prevent farther separation of purulent matter.

By inducing the adhesive inflammation.

III. In the tuberculous consumption.

1. To bring about a resolution of the tubercles while they remain in an ulcerated state.

2. To alter the state of action in the vessels of the tubercle and surrounding parts in such a manner as to produce the separation of proper purulent matter.

Observations on some of those practices on which the greatest dependence has been put in cases of phthisis—Remarks on the practices which have been principally employed during the incipient stage of phthisis, and on the administration of them as applicable

cable to the different species of the disease—
 Blood-letting—Topical bleeding—Blisters—
 Issues—Emetics—Refrigerants—Acids—Nitre
 —Cream of tartar—Asses or mares milk—
 Milk diet—Goat whey.

Remarks on the remedies to which re-
 course is had in the more advanced stages of
 phthisis—Peruvian bark—Vegetable balsams
 —Balsamum Gileadense—Canadense—Co-
 paibæ—Gum ammoniac—Benzoin—Myrrh
 —Objections which have been made to the
 heating balsams in general—Testimonies in
 favour of them—Late observations respect-
 ing the use of gum myrrh—mercury—sar-
 saparilla—mezereon—cicuta—dulcamara—
 tuffilago—lichen islandicus—sea water—mi-
 neral waters—The inspiration of fixed air—
 of resinous effluvia—of the vapour of æther
 —the banos de tierra, or earth baths.

Remarks on the different directions which
 have been given respecting regimen in phthi-
 sis—Diet—Diversity in the effect of diet—
 from its influence on the stomach—stimulant
 —refrigerant—From its influence on the
 system—nutritious—spare—Observations on
 the general recommendation of refrigerant
 and

and spare diet in consumptive cases—Inquiry how far it is adapted to the different species of phthisis—Remarks on the diet best suited to each species—to the ulcerous—to the catarrhal—to the tuberculous—General remarks with respect to the diversity of diet in the different stages of each species—Remarks on the liquors to be employed as drink in phthisis—Observations with respect to air—Temperature—Sea air—Cloathing—Regulation of the state of excretions—Attention to the state of the mind—Exercise—riding on horse-back—in a chaise—sailing—swinging.

Observations on the remedies employed for obviating the most urgent symptoms—Cough—Diarrhoea—Colliquative sweats.

ORDER XI. FEBRES,

Or Fevers, strictly so called.

Observations on the general Doctrine of Fevers.

OBSERVATIONS on the view which is proposed to be taken of this order of diseases — Observations on the symptoms which are essential to every idiopathic fever — On the principal modifications of fever — On simple fever or ephemera — On fever conjoined with that condition of the habit which gives a disposition to inflammation — On fever conjoined with a putrescent tendency — On fever alternating with intervals of health — Sameness in the nature of all fevers.

Observations on the general symptoms characterising all fevers — Order in which these
these

these symptoms commonly occur—their progress—their termination—Marks portending particular terminations—Doctrine of critical days—Opinion of the ancients with respect to them—Sentiments of some distinguished moderns—General conclusion tending to show the unsatisfactory nature of the evidence brought in support of their existence.

Observations on the most common remote causes of fever—View of different theories which have been offered respecting the proximate causes—Supposition of the introduction, assimilation, and expulsion of morbid matter—Supposition of the existence of debility, spasm, and increased action—Attempt to show that these theories are inadequate to the explanation of the phenomena of fevers—that they are irreconcilable to the causes by which fevers are induced, or the remedies by which they are cured—that they are inconsistent with the natural terminations in recovery which take place in fevers.

Observations on the general plan of cure in fevers—Heads to which the practices employed may be referred—Measures for obtaining

taining an artificial termination—Measures for aiding a natural termination in a favourable manner—Measures for the mitigation of particular urgent symptoms.

G. 73. *Ephemera.*

OBSERVATIONS on the symptoms constituting what may be called Simple Fever—Account of the ordinary progress of these symptoms in a single febrile paroxysm—Remarks on the causes from which such paroxysms have been observed to arise—Conjectures on the influence which these exert on the system.

Different ways in which ephemera has had a fatal termination—Accidents tending to produce a transition from this to other affections—Progress of the symptoms when such a change occurs—Means by which it may be most readily conducted to a favourable conclusion—Regimen aiding such a conclusion.

G. 74. *Sy-*

G. 74. *Synocha.*

OBSERVATIONS on the nature of inflammatory fever—Account of the ordinary progress of symptoms—Remarks on the particular symptoms distinguishing it from other fevers—on the habits with which it is most common—on the causes immediately exciting it—on its different terminations—on the symptoms indicating these terminations.

General intentions of cure principally to be aimed at in the inflammatory fever.

1. The removing or moderating stimulating causes which tend to induce or support the fever.
2. The diminution of the increased action of the sanguiferous system.
3. The restoration of a natural condition to the different secretions and excretions from the body.
4. The obviating such urgent symptoms as may occasionally occur.

Observations on the different remedies which have been chiefly employed in synocha

cha—Blood-letting—Emetics—Cathartics—
 Laxative injections—Refrigerants—Acids—
 Diluents—Diaphoretics—Antimonial—Pedi-
 luvium—Fomentation of the feet—Tepid
 bath—Antispasmodics—Blisters—Opiates—
 Mercurials—Observations with respect to
 the regimen in this fever—Diet—Drink—
 Temperature—Cloathing—Position of the
 body.

G. 75. *Typhus.*

GENERAL observations on the combina-
 tion of fever with a disposition to a pu-
 trescent state—Account of the ordinary pro-
 gress of symptoms in such a state—Periods
 and terminations of this disease—Symptoms
 distinguishing this from other fevers—Symp-
 toms indicating a favourable termination,
 or the contrary.

Observations on the condition of the habit
 with which typhus is most apt to take place
 —On the causes which have most frequently
 been observed to induce it—On the accidents
 which render the influence of these causes

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most

most powerful—On the most effectual means of preventing this disease.

General heads to which the treatment may be referred.

1. The removal of such accidents as can have any tendency to produce or support a putrescent state.
2. The obviating or correcting a putrescent tendency in the system.
3. The supporting the vigour of the system.
4. The removal or alleviation of the most urgent symptoms which may occur during the course of the disease.

Observations on particular remedies employed in this affection—Emetics—Antimonial—Cathartics—Purgative injections—Blood-letting—Topical bleeding from the temples—Blisters—Antiseptics—Peruvian bark—Mineral acids—Vegetable acids—Cold air—Cordials—Wine—Spirits—Aromatics—Camphor—Asafoetida—Opium—Tonics—Nutrients.

Observations on the regimen in typhus—Regulation of the different excretions—by stool

stool—by urine—by the surface—State of bed-chamber—of bed-clothes—air—food—drink—state of the mind.

G. 76. *Intermittens.*

ACCOUNT of the symptoms occurring in an intermittent paroxysm—Observations on the different types of the intermittent fever—Sameness in the nature of the fever in all these states—Remarks on the state of the season and climate during which intermittents are most common—Habits with which intermittents chiefly occur—Causes more immediately observed to induce them—Symptoms indicating an unfavourable conclusion—Conditions leading to a favourable termination.

General heads to which the treatment in an intermittent may be referred.

1. To mitigate and shorten the paroxysm.
2. To obviate urgent symptoms, particularly those of an inflammatory and putrid nature.

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3. To

3. To obtain a complete apyrexia.
4. To prevent the return of the paroxysm.
5. To prevent the return of the disease.

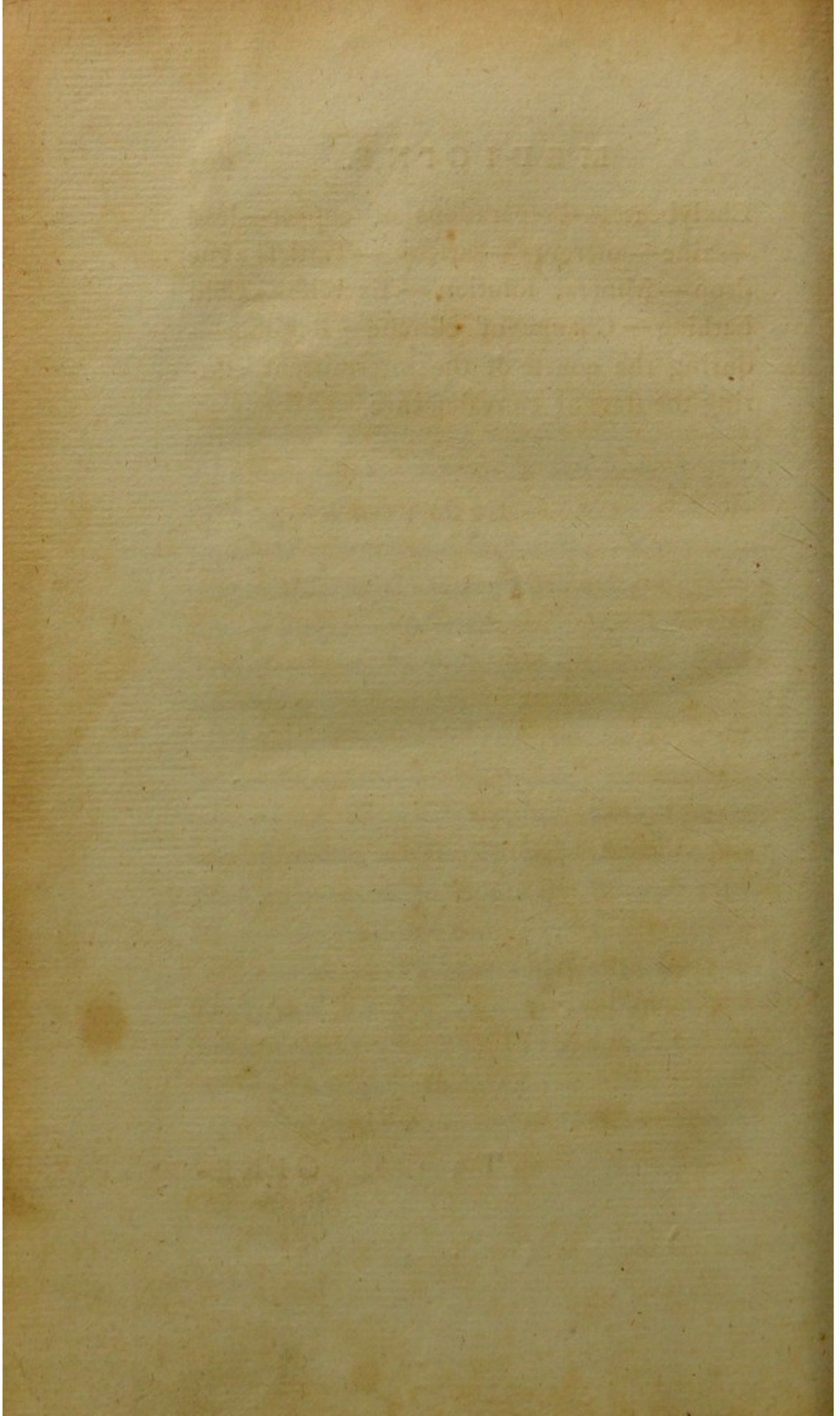
Observations on particular remedies principally employed in the cure of intermittents—Emetics—Antispasmodics—of a stimulant nature—of a sedative nature—Opium—Pediluvium—Fomentation of the feet—Warm bathing—Warmth in bed—Diluents—Neutrals—Diaphoretics—Sudorifics—Blood-letting—Blisters—Laxative injections—Cathartics—Bitters—Astringents—Aromatics—Tonics—from the vegetable kingdom—from the mineral kingdom.

Observations on the use of the Peruvian bark—Controversies respecting the administration of it—Comparative advantages of the different modes of administration—in substance—as acted upon by different menstrua—in combination.

Remarks on different articles employed as substitutes for Peruvian bark—*Salix alba*—*Salix fragilis*—*Prunus padus*—*Prunus spinosa*—*Fraxinus excelsior*.

Observations on mineral tonics—Alum—
Chaly-

Chalybeates—Preparations of copper—lead
— zinc — mercury — arsenic — Tasteless ague
drop — Mineral solution — Exercise — Cold
bathing — Change of climate — Regimen—
during the course of the intermittent—du-
ring the state of convalescence.



GENERAL VIEW
Of the BUSINESS of the
COLLEGIUM CASUALE,
OR
CASE-LECTURES.

The PRACTICE.

The general Heads to be followed in drawing up the Histories of the Cases.

I. An account of the condition of the patient.

1. Age.
2. Sex.
3. Temperament.
4. Condition in life.

II. A description of the symptoms with which the patient is affected at the time of drawing up the history.

1. Evident symptoms.

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2. Feelings

2. Feelings of the patient.
 3. The state of the principal functions.
 - a. Pulse.
 - b. Heat.
 - c. Respiration.
 - d. Excretions.
- III. An account of the progress of the disease.
1. The manner of attack.
 2. The symptoms which have already disappeared.
 3. The duration of the present symptoms.
- IV. An enumeration of the remote causes which may be supposed to have had a share as inducing the affection.
1. The patient's conjectures respecting these.
 2. The accidents to which the patient may have been exposed previous to the commencement of the disease.
 3. The patient's former state of health.
 4. The diseases with which the parents or near relations of the patient may have been affected.
- V. An account of the influence of the remedies which have already been employed.
1. An

1. An enumeration of the medicines which have been used.
 2. The effects which have resulted from these.
 3. The regimen and situation of the patient from the time of the attack.
 4. The effects which have resulted from thence.
- VI. The general heads to be followed in giving reports.
1. The obvious effects from the medicines that have been employed.
 2. The condition of the symptoms.
 3. An account of new occurrences.
 4. The state of the principal functions.
 5. The prescription of medicines.

The LECTURES.

I.

A general view of the case of each patient on beginning the treatment of the case.

1. Some account of the name and nature of the disease.
2. Conjectures

2. Conjectures respecting the probable event of the disease.
3. A brief view of the intended plan of cure, and of the method in which it is proposed that it shall be prosecuted.
4. An account of schemes which may afterwards be adopted, should that which is tried at first prove unsuccessful.

II.

Practical observations on the case of each patient after the treatment is terminated.

1. Observations on the view which was given of the case when the treatment was begun.
2. Remarks on those parts of the plan of cure then proposed, which were afterwards prosecuted during the course of the disease.
3. Remarks on methods of cure afterwards prosecuted, in consequence of changes in the appearance of the disease.
4. Observations on the effects resulting from particular remedies used in the case.

III. A

III.

A particular consideration of cases in their nature singular and important, after they are terminated.

1. *Remarks on the History.*

- a. Observations on the detail of symptoms introduced into the register.
- b. A view of such symptoms as indicate any particular affection.
- c. A comparison of the history of the case with that of the disease to which it has the greatest resemblance.

2. *Remarks on the Theory.*

- a. Observations on the action of remote causes.
- b. An attempt to investigate the proximate cause.
- c. An explanation of some of the principal symptoms.
- d. Observations on the grounds of prognosis occurring during the course of the disease.

3. *Remarks*

3. *Remarks on the Practice.*

a. Observations on the general plan of cure.

aa. Indicantia.

bb. Indications.

cc. Indicata.

b. Observations on the particular remedies employed.

aa. A view of the principles on which they were expected to operate.

bb. Observations on the obvious effects resulting from them.

cc. Remarks on the changes which they produced on the disease.

F I N I S.

**MED. CHIR. SOC.
ABERDEEN.**

MEDICAL LECTURES at Edinburgh,

By Dr DUNCAN.

ON the first Monday of May, Dr DUNCAN begins annually his Lectures on the MATERIA MEDICA: On the last Thursday of October, he begins his Lectures on the THEORY and PRACTICE of MEDICINE; and on the first Saturday of November, he begins his CASE-LECTURES on the Patients treated at the Public Dispensary.

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