

On dyspepsia : with remarks, submitted in support of the opinion that, the proximate cause of this, and of all other diseases, affecting the general system, is vitiation of the blood / by John Burdett Steward.

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ON

DYSPEPSIA,

WITH REMARKS,

SUBMITTED IN SUPPORT OF THE OPINION,

THAT,

THE PROXIMATE CAUSE OF THIS, AND OF ALL
OTHER DISEASES, AFFECTING THE
GENERAL SYSTEM,

IS,

VITIATION OF THE BLOOD.

BY

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P R E F A C E.

To those of the medical public, who shall condescend to read the following remarks, no apology is necessary, as they will approve or condemn them according to their merits ;—but as all now are readers, and particularly they who have most cause to feel interested in this inquiry, it may be necessary to offer some reason, why the author should attempt a subject, by many so ably treated,—or how he can expect to add any thing beneficial to what has already been written. To such questions his answer is, that, in addition to extensive experience in the treatment of others, he has had the misfortune of being himself a sufferer from the most severe form of dyspepsia.

Every valetudinarian is said to be half a physician, but every physician is not so unfortunate as to be a valetudinarian ; when he is so, interest as well as duty is concerned in the inquiry ; and, thus, impelled by the strongest motives which can call our energies into action, and aided by his medical knowledge—that constant and anxious attention to symptoms, which is baneful to the uninitiate, in him is highly useful ; since he not only considers his complaint with a view to his own recovery, but, in the hope of rendering available in alleviating the sufferings of others, the information he may gain in contemplating his own.

The medical man, then, assisted by his general knowledge of disease, and understanding, at the same time, the nature and usual action of remedies, compares his sufferings with the common and acknowledged symptoms of the complaint ;—his patient always with him, he marks every change, reasons upon every symptom ; based on reasoning he employs his remedies,—if successful, he repeats them, if not, he rejects them for others. The next step is, the con-

sideration of similar cases in practice : in these, he observes, varied only in description, symptoms, which, when occurring in himself, he is fully able to appreciate ; the resemblance established, he naturally concludes, if he can cure himself, he may be able to cure, or at least to benefit others. The remedies, therefore, which he finds effective in relieving his own sufferings, he adopts in theirs.

Acting upon this principle, the author's success, not only in his own case, but in dispensary as well as private practice, induces him to submit the following remarks to the consideration of the public, in the hope of further extending to others the relief he has effected in himself ;—for he may now, with truth, say that he is, and has for many years been, free from all the evils he has enumerated : he can eat, drink, and sleep like other persons, and no longer fears the moderate enjoyment of those social comforts, which, whilst they renovate the strength and fit us for exertion, stimulate the sullen to gaiety,—make the lively more cheerful—dissipate the cold formality which often enshrines talent ; and,

in the refinement which attends it, enables us to forget the animal necessity.

The cynic may curl his lip, the wise may moralize, but, as little will the latter be able to dissuade, as the former to deter, the great mass of mankind, from believing, that good eating and drinking form, at least part, of the recreations of life, and that the inability to participate in them is no less a privation.

Hence has dyspepsia ever been a subject of interest and inquiry, and if the experience, which the author thinks he possesses, prove useful either in explaining its nature, or directing its treatment, the reader will not, he trusts, set less value upon the information, because the manner in which it is conveyed may abound in those defects, to which inexperience, in attempts of this kind, frequently expose the writer.

CHAPTER I.

PREFATORY REMARKS.

Proximate cause of diseases affecting the general system—Superior advantages of reference to the blood, for the purpose of explaining and treating disease, as compared with the nervous system.

IN investigating the character of diseases for the purpose of treatment, it is evident that success depends entirely upon our knowledge of the proximate cause:—or a clear comprehension of that combination of circumstances, equal to produce those feelings or symptoms,—the causes of complaint to the patient, and the means of judgment to the medical attendant.

The truth of this remark is confirmed, no less by the confidence with which we employ our remedies, and the success usually attending them, in diseases in which the proximate cause

is understood, than by the variety and uncertainty of treatment in those cases, in which it still remains a question of doubt and debate.

The author's view of the subject leads him to entertain the opinion, that the cause of this uncertainty arises in the indiscriminate rejection of the humoral pathology; by the total banishment of which, not only were its inconsistencies got rid of, but with them, unfortunately, vanished all disposition to refer to the blood as a source of disease.

In later times the fear of attacking received opinions, closed to the inquirer a source of explanation, which held within itself the germ of truth.

This widely entertained prejudice has, however, gradually been receding before the light of chemistry; and most probably the day is not far distant, when a reference to the blood as a source of disease, so far from meeting ridicule, will be viewed as the truest and best,—if not the only means of explaining its phenomena and directing our treatment.

These preliminary remarks render it scarcely

necessary for the author to avow his opinions:—still, as the most simple and straightforward method of acting, he admits his conviction to be, that the proximate cause of all diseases consists in some alteration in the force, quantity, or quality of the circulating fluid; and that, of those affecting the general system, vitiation of the blood is an invariable accompaniment.

By the above principle, the author will be governed, in the remarks he is about to offer upon the nature and treatment of dyspepsia—that one of diseases affecting the general system, which he has chosen as the more immediate object of the present work—the proximate cause of which, the author, of course, assumes to be vitiation of the blood and the secretions eliminated from it.

Before he enters upon his subject, however, he feels bound, in justice to himself, to offer for the consideration of his readers, the reasons on which he founds his opinion as to the proximate cause of diseases affecting the general system, being vitiation of the blood.

It is to be remembered that only to two

sources, viz. the blood and nervous system, can we, with any chance of being understood, refer the origin of disease.

Why the author prefers reference to the former, rather than the latter, for the purpose of explaining the phenomena of disease, is because, in referring to the blood, he is enabled to found his arguments on premises simple, definite, and admitted : whereas, by referring to the nervous system, the reasoning must be based on theories instead of facts ; and the premises, therefore, from which the conclusions would be drawn, being themselves open to discussion, the deduction from them must necessarily fail to bring conviction to the mind of the sceptic.

In treating the subject, the author will endeavour to keep within the range of ascertained and admitted facts, rejecting everything as a basis of reasoning, which could itself become a subject of doubt.

He is fully aware this mode of reasoning is not perfect, nor does it offer to the mind all we might wish : but as it seems to effect all we can compass, he thinks himself justified in adopting

it, since in doing so, he in no way interferes with more extensive, and it may be, more satisfactory research. All he professes is, to assume the propriety of availing ourselves of what we do understand, for the purpose of explaining and treating disease, leaving it still open to that improvement, which a successful inquiry into the arcana of life would confer upon mankind. To do otherwise is to sacrifice the substance for the shadow.

When derangement of the system accompanies a particular state of the excretions, and—as far as we can judge—of the secretions, we are naturally led to the conclusion that such a state is an unhealthy one. And as we know that all secretions come from the blood, it necessarily follows that to restore health to the secretions, we must restore health to their source ; and in this view of our duty we have a point to start from—a question for consideration, the solution of which evidently involves the proper treatment of disease.

How different is our position if called upon to refer such derangement to affection of the nervous system.

If we attempt to reason, we are forced to the explanation of the term. What is a nervous affection? All we can answer is, That it is an affection of the nerves. Its strict nature we cannot explain. We cannot say whether it be congestion, inflammation, or disease of the nerves. We must be satisfied with the solution, that the term has been, and is considered applicable to that particular state of the system.

Thus we have nervous headache, nervous fever, &c.

But, I would ask, do we get any information by these terms, either tending to explain the nature of the disease, or useful in directing its treatment? Are they not rather a cloak for ignorance, and would it not be better to confess it, and leave the matter open to inquiry?

I am perfectly aware, supposing my remarks to be deemed at all worthy of attention, that, even in the present day, I court opposition, by attempting to refer to the blood the phenomena of disease; since in so doing I advocate a theory long exploded. I submit, however, that a great difference

exists, between the vague and ridiculous opinions founded by ancient authors upon the humoral pathology, and that view of it, which presents the blood as a fluid capable of alteration; and, as pervading so completely every part of the system, equal to producing effects—in proportion to such alteration—at variance with that state which we designate health.

To those who may condemn this mode of reasoning, I would say, can you cure those diseases called nervous, by their appropriate remedies, nervines?

Are you not always driven to the use of purgatives at the same time?

But why use them if the affection be purely nervous?

Can you show that the nerves either receive or distribute?

If not, *cui bono*, medicines, which evidently act upon the secretions through the medium of the blood?

If the disease be distinct from the blood, why should remedies be employed, evidently intended

to produce some alteration either in the quality, quantity, or force of that fluid ?

Can it be shown, or even guessed at, if not through the agency of the blood, how otherwise medicines produce their effects ?

Some we can actually trace, others elude our search ; but does it follow that the negative, as to their presence, is to be accepted upon the equivocal proof that we cannot find them ?

Is not the assumption of their presence, though our tests cannot detect them, as just—supported by analogy with reference to those which can be found—as the doubt of their presence is reasonable, resting merely upon the want of means to detect them ?

That the nervous system is the seat of suffering, and that it therefore reacts upon the circulation, cannot be doubted. That mind, too, in its conventional sense, exercises a most extraordinary influence over function, no one would dare to question. But reference to this principle, either alone or in conjunction with the nervous system, leads us further and further into mystery ; and, till the phenomenon of life is understood, the

nervous system can never be a source of useful information, for the purpose of explaining disease or directing our treatment. Grief will destroy the appetite and derange digestion, but will the strictest inquiry into this, as a cause, explain the symptoms, or enable us to remove them? Are we not driven to the confession of our ignorance, and for a knowledge of the disease, compelled to adopt an investigation from causes less mysterious?

Suppose a healthy man to receive an injury by the puncture of a thorn, evil seldom extends beyond the seat of mischief;—but the same accident happening to one in whom the excretions and secretions are unhealthy: in common language, whose general system is out of order, constitutional mischief, as all know, frequently follows.

Again, suppose by puncture, or other means, any morbid matter be received into the system, the constitutional symptoms ensuing, are, as is well known, modified or aggravated by the state of the general health at the time.

Now, in each of these cases, the injury to the

nervous system ; viz., the mere shock by the puncture, is the same ; and yet how different the effects !

Why they should be so, can only be explained upon the supposition that what we call derangement of the system, accompanied, as it is, by an altered state of the excretions evidently, and of the secretions by fair inference, is owing to an unhealthy state of their source ; and that deterioration of the blood is the cause of that susceptibility to mischief, which constitutes this wide difference in the effects of similar causes.

Chorea—placed among the class neuroses—from its symptoms, would really induce a belief, that it is some affection of the nerves, evidenced, as it is, by irregular muscular action. Yet the alvine excretions are black and offensive in the more severe forms of the disease, and no one, surely, would attempt to cure it without previous full and continued action upon the bowels ?

Nevertheless, supposing the cause of mischief to reside in the nervous system, purgation is a

mode of treatment wholly empirical ; for, if the cause be not in the actual state of the blood and secretions, why employ remedies, which, evidently producing a change in the character of the excretions, must as evidently and certainly effect a corresponding change in the source whence this character is derived. The blood is the fountain-head of all secretion.

Without secretion the ingesta would undergo no other change than that of fermentation, and would pass off undigested. The character of the excretion must be regulated by the nature of the secretion.

If the excretion be unhealthy, the secretion will be so ; and, if the secretions be unhealthy, the blood must be changed, and, being changed, must, in its character as a general stimulant, act injuriously according to the degree of change.

That the presence of the blood is necessary to function is too evident to admit of doubt ; equally clear is it, that its state must decide its character as a stimulant, and that each organ will be affected according to its susceptibility. If cir-

culatation be cut off from a part, it dies ; but if nervous communication be cut off, it only loses function. If the nervous system had a power independent, or, rather, not strictly dependent upon the blood, this could not happen.

But, if the nerves, for the purpose of function, require the stimulus of the blood, they must be alive to the kind of stimulus ; and any change in its nature must produce a corresponding change in function—leading to the irregularities which constitute the different shades of derangement, disorder, and disease.

Admitting, then, that the nerves, for the purpose of function, require the stimulus of the blood, does it not follow, that, in our search for the causes of disease, the state of this stimulating principle demands the fullest investigation ? The phenomena attending disorganization of the brain or other parts of the nervous system, offer no objection to the opinion, that the blood is the grand stimulus which preserves or impairs function ; for, if a part is diseased it is dead to stimulus : and paralysis of a part occurring, cannot be evidence that the nerves act independent of

that stimulus; for, if the nerve is diseased or destroyed, it cannot possess its natural susceptibility to stimulus of any kind.

In the most fatal kinds of fever, is not the change in the excretions, and, in the advanced stages of the disease, even in the blood itself, evident beyond contradiction, and is not the prostration of muscular power in accordance with it?

Now, suppose we refer this change to the nervous system, will it give us information useful for the purpose of treatment? will it justify the use of evacuants, without which it is well known the sufferer has no chance of safety?

If the blood be not altered, the secretions and excretions could not be altered; and if not, to supply the vital energy, when, as in these cases, deficient, ought to save life without other aids. It may be said stimulants have been tried and have succeeded; but inquiry would prove that seldom if ever have they been tried alone, purgatives or depletions having invariably preceded or accompanied them?

The majority of cases, too, in which success has been recorded, have been those in the advanced or last stages of fever, when—nature having struggled through a long attack—a state ensues, which is a balance, as it were, between life and death. At such a moment—no organic disease existing—stimulants, certainly, sometimes seem to turn the scale—to revive hope when hope is lost. But is it not the circulation that receives and transmits the stimulus? Very different, however, has been the effect of the same treatment in the incipient stages of fever, where, nevertheless, the prostration of strength is both great and sudden.

The sudden and great prostration of strength in fever of the typhoid kind, is, in truth, owing to a cause, for the removal of which stimulants are wholly inapplicable; and in cases where success seems to have attended them, it is doubtful whether nature would not, unaided, have struggled through the disease. One case of fever in St. Bride's workhouse, from the support it affords to the above opinion, the author is anxious to mention. The sufferer was a youth of about 23;

he had been ill three weeks. Apparently he was sinking, and all remedies, except a few grains of rhubarb and calomel occasionally, were omitted. The teeth were covered with sordes ; he lay upon his back ; his eye was glazed and hollow ; his cheek flushed ; his mouth partially open ; evacuations involuntary ; he was roused with difficulty, and, though for the moment made sensible, he could not comprehend or answer questions.

Stimulants were tried, but they appeared to do harm ; and nothing, as I have said, was given but a little rhubarb and calomel occasionally, during a fortnight. After that time he began to improve, and eventually recovered. Now had stimulants been persisted in by one confident in their use, and the man had recovered, they would have had the credit of curing him, when, in point of fact, all they would have deserved, would have been the negative quality of doing no mischief.

It is not because I think lightly of its influence, that I reject reference to the nervous system ; but, because, in referring to it, every step we take leads us further and further into mystery. Not

only is the power by which it works its effects hidden from us, but a knowledge of its changes during life being impossible, and after death doubtful, our reasoning must be hypothetical, and our treatment, therefore, uncertain.

CHAPTER II.

Arrangement of functions—Further remarks on the advantage of reference to the blood, rather than the nervous system, for the purpose of explaining and treating disease.

HAVING assumed the blood to be the best source of information, for the purpose of investigating, with a view to treatment, diseases affecting the general system, it is proper, now, to point out that train of causes and effects leading to this assumption, and from which the author infers the blood to be that source, to the alteration of which, we may fairly attribute the phenomena characterising the various changes between health and disease.

For this purpose, as the author has before observed, he will endeavour to keep within the limits of ascertained and admitted facts; and, acknowledging most readily its imperfection in a philosophical

point of view, but asserting its usefulness in a practical one, he will set out, in tracing causes and effects, from that period of human life, when existence commences independent of the mother; or, to make it plainer to the general reader, from the moment when the child is born, and respiration established. And this he will designate as the first function of independent life.*

When the child is separated from the mother, the evident phenomena of life are the following, and occur in the order set down, viz. :—

Respiration.

Circulation.

Sensibility.

Appetency.

Secretion.

* It may be said that changes and processes, similar in their effects, are going on in utero; this, however, did I doubt it, it is not my object to discuss. All I have in view is the best premises, divested of theory, to start from, for the purpose of proving the dependence of function upon circulation; and, for this purpose, I have chosen that instant, when a series of phenomena are established, preceded by a function evidently new, and without which the succeeding phenomena could have no existence.

Absorption.

Excretion.

Generation.

As on the strict dependence of each of these phenomena on the preceding one, rests the inference, that respiration established, circulation, or the blood, is the prime agent in the laboratory of life—that stimulus, in fact, from which is derived the functional power of the nerves, it is necessary to trace such phenomena in their progress, and, as far as possible, to show that each is really a consequence of the one which precedes it.

First, then, of *respiration*.

Till respiration is established, life remains dormant, and without aid is soon extinct.

That without respiration none of the subsequent phenomena could be established, must be well known to every one who has attended midwifery, and will be equally evident to the general reader, on marking the successive changes, as they occurred in the following instance of suspended animation in a new-born infant :—The child, when brought into the world, was to all appearance dead—the surface purple, and the limbs per-

fectly flexible. The warm bath, which was first employed, had no effect: bleeding from the cord was equally unavailing: inflation of the lungs and friction at last succeeded. For more than half an hour our efforts, though unremitting, were without effect, and we began to despair, when one convulsive gasp stimulated us to persevere; another and another followed; the stream of life seemed now in motion, the surface lost its purple hue, the heart began to pulsate, the muscles were no longer flaccid, every part became pregnant with life and action.

The child lived and did well.

This case shows sufficiently, that until respiration is established, the blood is stagnant, the nervous system dead to stimuli, life is dormant, and, unassisted by artificial means, would become extinct.

The first phenomenon, then, of independent life is *respiration*, and consequent upon this is *circulation*.

That circulation is a consequence of respiration is evident, since if respiration be impaired, it is well known circulation is impaired; if totally suppressed, circulation ceases

and with it life. Did we want further proof of the dependence of circulation on respiration, we have it in the evident fact, that circulation through the lungs is a necessary consequence of their inflation.

Sensibility is next in the chain of effects. No sooner is circulation established, than the nerves begin to exert their influence, the infant becomes alive to impressions, and instinct, or the first dawn of reason, is the consequence.

Thus hunger, the grand protective stimulus, impels the child to seek the breast; and, the different organs feeling their functional appetency, *Secretion* is established, preparing the ingesta for assimilation, and fitting them for the next in the train of consequences,—*Absorption*, which, appropriating the nutritive portions of the food, destined for reficiation and reproduction, leaves to the next function, *Excretion*, the removal of the useless and noxious residue.

Lastly, though not strictly a link, still, of all most important, is the generative function, destined to protect us from extinction. Since then respiration and independent life are co-existent,

and every other function subservient; and as the first of these phenomena which, for practical purposes, we are called upon to consider, is circulation, or the blood;—and since on its stimulating powers, acting upon the nervous system, seem to depend the phenomena of organic life; as, when withdrawn, the nerves lose their power to affect the organs to which they are distributed, the function ceases, and the part dies; it follows, that any alteration in the stimulus must affect, in the same proportion, the function of the part stimulated;—and if this be admitted, the deduction must be evident, that in the blood we are to seek the causes that lead to those irregularities in the system, which characterize the different distinctions of derangement, disorder, and disease.

That a power which we cannot define, and therefore do not understand, pervades the whole, and gives to each part fluid and solid, its functional ability may readily be imagined; but to assert this essence,—this life,—to be situated in or emanating from any particular organ, and thence distributing energy to the rest, is an

assertion too important in its consequences, to be received without proof far more convincing than any we possess at present. It must clearly be admitted that, to refer to this essence the distinctions between health and disease, to assume that in it are to be found the changes leading to such results, would be to assume a change without the most distant idea of the nature of that to which we refer it; possessing, in fact, not even the bare knowledge that it is capable of change. Great would be the triumph of science, could this doubt be solved; but, with our present means of knowledge, it seems far beyond our reach. In its solution, we should approach nearer, than seems to be permitted,—Him who formed this incomparable machine,—open in its organic structure to investigation; but of which, the mainspring—that etherial essence which, exalting it above every other mechanism,—constitutes it a living and sentient being,—that alone is hidden from our view, and from its very nature, is as little likely to be discovered in conjunction with the organs it animates, as by abstract reasoning upon itself.

We cannot restore it when lost, nor supply it where it does not naturally exist. We are driven to confess it is inexplicable; and that, however noble the exertions which attempt to unfold it,—the theories respecting it are at present too inconclusive, to render it a source of explanation, useful for the purpose of inculcating or directing the means of preserving its agents from destruction. As well might a person expect to find out and correct any cause of irregularity in the varied movements dependent upon the agency of steam, by an abstract investigation of the power that impels them.

This may appear irrelevant, but it is not so; for, in using the term nervous influence, and in attributing to it the phenomena of disease, we encounter the same difficulties.

Called upon to explain the term nervous influence, each step leads us further and further into mystery; till, at last, we find that before we can define nervous influence, we must say what is life. Whoever can satisfactorily solve this question, is justified in referring to nervous influence as a cause of disease; but, till

that is effected, its employment, for the purpose of directing treatment, can only lead us to empiricism and error. The author submits, then, that reference to the nerves for the purpose of explaining the phenomena we witness—particularly in diseases affecting the general system—cannot, with a view to treatment, lead to useful results.

On the other hand, by taking the blood as the primary influence, viz. that stimulus regulating the functional power of the nerves—which may readily be conceded, if we reflect, that its partial absence impairs, and its total absence annihilates, function—a system based on fixed principles, and therefore capable of improvement, might be established. For, as the liability to change in the blood, may not only be imagined, but can in many cases be proved by common observation, it is fair to infer that time alone is wanted to unveil the rest; and that attention once directed to the subject, the true character not only of these, but of other less evident changes, would be understood, and treatment thenceforward cease to be a subject of doubt.

As before observed, if the supply of blood be cut off from a part, it dies, though the nerves supplying that part remain perfect ; it follows, therefore, that nervous influence alone will not support life. We know that when the brain is deprived of its usual quantity of blood, syncope follows. We also observe, that when the blood does not undergo the required changes in the lungs, but, in its undecarbonised state, circulates through the brain, delirium, or stupor, or ill-arranged ideas follow, as is often seen in the last stages of phthisis.

It may be argued in support of the supremacy of the nervous system, that the division of certain nerves not merely annihilates function, but destroys life ; but this proves nothing against the assumption, that the blood is the prime source of function ; since the motive power, however efficient in itself, must necessarily be inoperative when its agent is destroyed. When a muscle, as the uterus, is called into increased action, there is a greater flow of blood to the part ; this could not be necessary, if the nerves had a power independent, or rather not actually dependent upon the stimulus of the blood.

I do not mean, upon these premises, to assert that the blood is the only agent through which the machine works ; but it does certainly appear to me, that the function of the nerves is more evidently dependent on the circulation than the circulation upon the nerves ; and, therefore, I submit, with deference to the opinion of others, that more useful information can be gained by referring to changes in the blood, the phenomena we witness in disease, than by applying our attention to a cause, to explain which, must involve us in a discussion upon the principle of life.

Experience proves, that, in almost every form of disease, the secretions as well as the excretions are altered ; but, if this be admitted, it follows of necessity that a corresponding alteration must have previously existed in their source. Since, then, whatever difference of opinion may exist as to its nature, no one for a moment can dispute, that, under certain circumstances, a demonstrable change does take place in the nature and character of the blood, is it not reasonable to assume different degrees of change, and to refer to such

altered states of the blood, those symptoms, which characterize diseases affecting the general system?

The nerves do not—evidently, at least—receive or distribute; but, we do know that the blood does both; and if so, how can disease exist independent of its contamination?

Again, if it be granted, that a particular state of the blood is necessary to perfect health; or if even the converse, viz., alteration in disease be admitted—then, health must be impaired by any variation from the state required for health. We know that in typhus fever, not only the excretions and secretions, but the blood itself is altered, and that when drawn in the advanced stages, it will not coagulate, and quickly becomes putrid. Now, as every effect must have a beginning, is it not fair to suppose that a change in the blood existed from the first moment of attack, and that the languor, loss of appetite, nausea, &c., the usual precursors of fever, had for their origin such alteration, which, though inappreciable by our senses, yet did actually exist, and was capable of increase?

Though by some disallowed, I shall assume a state of perfect health possible ; viz., where the vital and animal functions are so in equilibrio, as to leave us, as it were, unconscious of our being : when unfelt the heart performs its task, distributing warmth and vigour to the system, and the several organs, in constant and harmonious unison, lend their aid in the preservation of life and health.

The shades of variation from this state must, of course, be numerous,—from the slightest disturbance, to the most severe form of disease. In some diseases the changes follow so quickly, that, to a casual observer, distinction appears impossible : still are the changes quite evident.

In cholera, even, in which the stage of collapse seems to the inexperienced to constitute the disease, the preceding changes, though of such short duration—almost evanescent—are still most clearly marked.

Supposing this view correct, it follows that all diseases affecting the general system, are progressive, and no less evident, according to the author's belief, is the fact, that the intensity of

the symptoms is in exact proportion to the degree or suddenness of the deterioration of the blood ; that such deterioration is therefore the source of evil, and that upon success in correcting it, depends the certainty and efficiency of our treatment.

When we consider the endless varieties exhibited in the vegetable kingdom, differing in every sensible quality, yet, in ultimate principles, essentially the same, surely it is not too much to assume, that an alteration, however trifling, in the component parts of that fluid destined to secretion and reproduction, may effect alterations throughout our system, equally various, and capable of producing those irregularities in the system which characterize the different gradations of derangement, disorder, and disease. In proof of the truth—or at least probable truth—of the opinion, that an altered state of the blood precedes and attends all diseases affecting the general system, may be offered the fact, that in acute diseases, which, if not arrested quickly, destroy, a change of the blood is clearly demonstrable. No less corroborative of the fact, is the treatment

employed in these cases, which, as all know, is directed to produce, as soon as possible, an alteration in the blood, in quantity, quality, and force.

Again, in certain cases of violent death, as poisoning by opium, the blood remains fluid.

If, then, a certain state of the blood be required for the purpose of health, any variation from such state must be admitted a deterioration; and as the blood is the source of secretion, a corresponding deterioration in the secretions must result. Under such circumstances, the ingesta will not be properly prepared for assimilation. The gastric juice, bile, &c. will not produce upon the food the required changes, and we shall consequently have a chyle varying from the state consistent with perfect health, in direct proportion to the degree of change existing in the secretions.

Now this unhealthy chyle, being assimilated with the blood, must necessarily change the whole mass from what it ought to be, and the blood, pervading so completely every part of the system, that not the finest point can enter the

skin, without rupturing some of the myriads of tubes destined to convey it, every part must suffer by this deterioration—the effect being modified according to structure, function, and sensibility.

For the purpose of proving how under common and usual circumstances this deterioration may be produced, and how it may, and must, from its very nature, go on increasing, till, at last, the patient is painfully alive to its effects, let us suppose a case, by no means hypothetical ;—for instance, a person, at the time healthy, either from quantity or quality of the food or fluid taken, or from grief, or any other cause equal to produce it, has an attack of what is called indigestion,—that is to say, the food does not undergo the required changes ; weight, uneasiness, and nausea, are present ; the concoction is imperfect, and the chyme necessarily suffers in character from this imperfect concoction, being less fit to form the composition which it is destined to become, by the action of the bile. In other words, the chyme, the result of action upon the food by the secretion of the stomach—

the gastric juice—is less than perfect, and the chyme, thus altered, when acted upon in the duodenum by the bile, must produce a chyle also less than perfect, (one of its component parts viz. the chyme, being changed,) and which imperfectly formed chyle is assimilated with the blood and sent into circulation. The blood, therefore, with which this chyle, so changed, becomes mixed, must suffer deterioration in an equal degree.

Again, suppose that the same or other causes, equally efficient to produce indigestion, are in continued operation. In addition to the irritation produced by the food itself, and the consequent imperfect concoction, another source of derangement is in existence, viz., an adulterated secretion, occasioned by the deteriorated chyle lately received into circulation: and although only a shade, still it is an adulteration, and from the same or similar causes is capable of increase.

It is evident, therefore, that the chyme to be formed must be unhealthy, and the secretion,

viz., the bile, destined to convert it into chyle, having also suffered a change, its source being, as I have attempted to prove, less than perfect, a chyle evidently adulterated is carried into the system; and this being continued from day to day, the evil increases, till at last the effect becomes the cause; and though the primary exciting causes, viz., intemperance, grief, &c., be removed; though abstinence be enjoined, the blood itself has now become sufficiently unhealthy, to render the change evident, both in the secretions and excretions. The different organs become affected, and the patient is aware of symptoms which hitherto have escaped his notice.

Now the above is the most simple form of adulteration, but supposing the adulteration to be sudden, in consequence of the presence of some morbid principle received into the circulation, either by the lungs or absorption; then, in addition to an aggravated form of all the causes and effects above described, we have the specific effects of the poison present, which, as it is more

or less intense, varies in its effects from the prostration in fever, and the collapse in cholera, to the deadly consequences attending the inhalation of carbonic acid, the presence of arsenic, or the shock of lightning.

CHAPTER III.

DYSPEPSIA.

Division—Definition—Exciting Causes—Symptoms.

WITH the prefatory remarks contained in the preceding chapter, we may now direct attention—upon the principles already laid down—to the nature and treatment of that one of the diseases affecting the general system, which I have chosen as the chief object of the present work, viz., *Dyspepsia*.

Dyspepsia may be divided into accidental and continued; or that form of the disease, the consequence of some unusual irregularity of diet, or other circumstance capable of disordering the digestive functions,—ceasing with the removal of its cause,—and that form, which by neglect and a long-continued application of the exciting causes—whatever they may be—has become so rooted

in the system, that the mere removal of them, is not sufficient alone, to restore health. The nature and treatment of this latter form of dyspepsia, its tendency to simulate, and always to aggravate, other diseases, and particularly its close connexion with rheumatism, febrile, and other diseases, will be the subject for consideration in the following pages.

In naming a disease, we naturally employ that term which best conveys an idea of its nature.

Thus, the term, Dyspepsia, implies a want of power in the stomach and dependent organs, to concoct or convert the food received, in such a manner as shall fit it for assimilation. But this term, (Dyspepsia,) though it sufficiently points out certain effects, gives us no information as to the cause or causes in which they originate. Further inquiry, then, is necessary, before we can, with a well-founded hope of success, employ our remedies.

This leads us to the investigation of the proximate cause, which having assumed to be vitiation of the blood and, consequently, of the secretions eliminated from it, our next step is to in-

quire, by what means such a state of the system may be produced, as shall constitute the disease and give rise to the symptoms, which designate it.

This leads us to the examination of the exciting causes. Before doing so, however, it will be necessary to remind the reader, that the following observations refer entirely to true idiopathic dyspepsia; or that state of the system, constituting derangement, but not disease of the different organs. Disease in an organ, is an alteration not merely of function but of structure. Derangement or disorder in an organ, is simply an alteration in its function; whereby—supposing its office secretion—it either secretes less or more than it ought, or its secretion is unhealthy. Upon this principle, we may define Dyspepsia to be a disorder of the stomach and those organs destined to prepare the food for assimilation, producing derangement of the whole system, without disease of any part.

There may be two kinds of idiopathic dyspepsia, viz., accidental and permanent. The former of which—the cause producing it, not being repeated

—is only temporary, ceasing with its origin : the latter—the disease under consideration—in which by constant and long application of the exciting cause, a state of the system is produced incapable of spontaneous change, and requiring the remedies for its removal—even though the exciting causes cease to operate—to be continued in order to be effectual.

The exciting causes may be arranged under two heads.

1st. Those which we have the power to regulate.

2nd. Those which affect us independent of the will.

Of the former, we have intemperance and excess of whatever kind.

A sedentary life.

Imperfect mastication.

Indiscriminate use of emetics and purgatives.

The immoderate use of vegetables.

Drinking quantities of tea or slops of any kind.

The latter consist of affections of the mind, depressing or unusually exciting.

Excessive evacuations.

Derangement of particular organs, as the liver, uterus, &c.

I say derangement, because though disease of an organ will undoubtedly produce Dyspepsia, still, in such case, Dyspepsia is not the primary disease, and, consequently, not that to which our attention must be chiefly directed, for the purpose of treatment.

Next we come to "symptoms;" or those external and evident phenomena which mark the existence and character of the disease. However various the symptoms of Dyspepsia, though at different times imitating almost every other disease; yet those symptoms which are truly characteristic are few and constant.

On this fact I shall regulate my division—dividing the symptoms into those which are constant, and which are sufficient in themselves to indicate its presence; and those, which are only occasional, being present or absent according to the intensity and duration of the complaint, or the peculiar temperament of the individual.

Under the former of these divisions, are dis-

tention after eating, and a sense of weight and uneasiness in the stomach and bowels.

A feeling either of fluid at the bottom of the throat, as if the food had scarcely passed into the stomach ; or a feeling of heat referred to the same part ; eructations, flatulence and irregular action of the bowels.

Under the second class, viz., those symptoms sometimes present, sometimes absent, we have acid eructation, nausea, headache, flying pains, or a sensation of heat in the bowels, and other internal parts, particularly in females, and generally referred to the left side ;—vertigo ; indistinct vision ; an appearance before the eyes, especially after stooping, of small bodies floating in the air like flies ; drowsiness and weariness without exertion ; sometimes a sensation of cold referred to the pit of the stomach, giving the idea of emptiness, described by the patient as being like a hole at that part ; palpitation of the heart ; irritability ; a disposition to start at any sudden noise ; shortness of breath ; languor ; anxiety about trifles, lowness and dejection of spirits ; loss of appetite or a constant

disposition to eat, but without the comfort or satisfaction expected.

Of the symptoms just enumerated—in some patients all, in others some are wanting; and in others, again, they may one or all be present or absent, at different times, in the progress of the disease.

Some have a craving for food; some loathe the sight of it; some have acid eructations, nausea, and vomiting; others suffer nothing of the kind. Some complain of pain of the stomach or elsewhere; some are affected with giddiness, palpitation, and pyrosis, or, as it is called, water brash; others are free from such symptoms. Again: some are melancholic, others martyrs to rheumatism. Generally the tongue is foul; sometimes very red, but not unfrequently it is nearly, if not quite, natural. The sleep is generally disturbed, but even this symptom is not constant. In short, on no symptoms, together or individually, can we rely for the purpose of diagnosis, except those above enumerated as the constant and characteristic marks of the disease.* These symptoms, existing without fever, and unaccompanied by local disease, con-

* Page 41.

stitute true idiopathic dyspepsia. They appear at its commencement, they endure throughout its progress, and, removed, with them vanish their anomalous and less constant brethren.

Having given the symptoms of dyspepsia, distinguishing those which are constant, and which I, therefore, assume as characterising the complaint, from those, which though frequently present, are not always so, I shall now endeavour to explain the source and character of each. And first I shall speak of those which I describe as constant.

The food not undergoing the required changes when received into the stomach, and being incapable of remaining long in the same state as when received, fermentation accompanies the slow and imperfect concoction. Partial decomposition ensues, and this leads to the formation of acid and the extrication of gas. Hence we have a sense of uneasiness, and weight at the stomach ; also an uneasy sensation at the bottom of the throat, followed but not relieved by eructation ; next, as the food, only partially concocted, passes along the intestines, these changes are going on even more extensively. Distention of the canal follows ; and, suffering under this

evil, and at the same time wanting the stimulus of healthy bile, the intestines are unable to contract upon and force on their contents. The food becomes formed into insulated masses, separated by the flatus, so that relief from the bowels can never be perfect. The quantity in the lower part of the canal not being sufficient, therefore, to stimulate the intestine to daily action, constipation takes place.

But this is not the only evil consequent upon the distention produced by flatus: a state of atony in the muscular coat ensues, which deprives the intestines still further of their power, both muscular and elastic. The consequence is, that there is always present a quantity of air in the intestine, which acting as an extraneous body, interferes with its contraction upon the solid contents. The peristaltic action becomes irregular, and spasmodic contraction of the lower bowels, particularly about the sigmoid flexure, gives rise to that uneasiness and sense of distention complained of, however small the quantity of food received.

Having pointed out the constant symptoms of the disease, and endeavoured to explain their

character and origin, the next step is the consideration of those symptoms, which do not, necessarily, attend true idiopathic dyspepsia, but are sometimes present, sometimes absent, and therefore termed by the author occasional.

Of the occasional symptoms, some are simply the result of mal-concoction ; others can only be explained, by assuming as their cause, a vitiated state of the fluids.

Of those, the effect of mal-concoction, we have nausea, acid eructations, sensation of heat in the stomach or bowels ; sensation of cold at the pit of the stomach ; shortness of breath ; palpitation ; irregular appetite.

Nausea, which though not a constant, is a very frequent attendant upon dyspepsia, is caused by the ingesta—for want of the proper changes—undergoing spontaneous decomposition, and, in this state, acting upon the stomach as an extraneous body,—producing, in some cases, even vomiting. Acid eructations give evidence of mal-concoction and the formation of acid in the stomach ; but their absence is no proof that such operations are not in progress.

The different anomalous sensations of heat or cold, referred to the pit of the stomach, owe their origin to the formation of acid.

The flying pains in the stomach and bowels, are occasioned by the distention and spasm produced by flatus, one of the most common, as it is the most distressing, results of mal-concoction. To the distension produced by flatus may also be attributed that shortness of breath and palpitation, so often present in dyspepsia.*

The irregular appetite also attributable to mal-concoction, is caused by the food failing to supply to the stomach that satisfaction, best expressed by absence of feeling of every kind; which, in truth, is the only assurance of a good digestion. To be well, we must be conscious of nothing but existence.

* This may be the effect of mechanical pressure upon the diaphragm, occasioned by the distended viscera below;—still, so great and various are the sufferings, produced by distention, in bad cases, particularly after food, that we can only account for them, by supposing pressure upon the different nervous ganglions and plexuses, derived from the splanchnic, situated in front of the spine. The peculiar sensation, between the shoulders, caused by pressing upon the abdomen in these cases, can only be thus accounted for.

Those occasional symptoms which are alone explicable, on the assumption of a vitiated state of the fluids, comprehend the different affections of the sensorium, viz. vertigo—indistinct vision, or the appearance of objects floating in the air—listlessness and weariness without exertion—drowsiness—and other affections of a similar character.

Lastly, we have lowness and dejection of spirits.

By those who deem the author's opinions correct, a reference of the above symptoms to a vitiated state of the fluids, will be readily assented to ; but, as the majority may deny the propriety of such reference, the author is anxious, at least to attempt, to demonstrate the consistency of the opinion, by analogy between those assumptions, the truth of which he is seeking to establish, and those facts, which observation and experience have already made clear.

When, as in jaundice, bile is taken into the circulation, our patient becomes languid, drowsy, and wearied without exertion. Now in this case we have a cause in operation, which we can judge of by our senses ; viz. a vitiated state of

the blood, occasioned by the commixture of the bile. Would it be rational, to deny the association between the symptoms we witness and such adulteration?

But if not, why should we refuse assent to the opinion, that a vitiated state of the blood may occasion the symptoms in dyspepsia, which the author refers to; and that those symptoms should bear a strict proportion, as to intensity, to the duration of the disease, and degree of vitiation; for, if the cause of evil be admitted, the degree of evil must be regulated by the activity or intensity of such cause?

The pain of the head, often complained of by dyspeptics, would seem, reasoning by analogy, to arise from a vitiated circulation; since in fever of the typhoid kind, (in which vitiation of the blood,—though in the incipient stages it escape notice,—in the advanced stages of the disease, is capable of ocular demonstration,) pain or lightness, or uneasiness about the head is, with very few exceptions, an invariable symptom.

No less justifiable is it, in the absence of proof to the contrary, to refer the rheumatic

pains, so frequently present in the severe forms of dyspepsia, to a like vitiation,—knowing, as we do, that the earthy concretions, often deposited in the neighbourhood of joints, prove beyond doubt, the undue presence of acid in the circulation.

Nor is it more difficult to imagine, that the presence of acid in the circulation should cause the pain of rheumatism, than that the bite of the rattle-snake, or the sting of the wasp—the poison from which is found to be acid—should produce the results we witness.

The pain referred to the left side, as occurring in females, though a very common symptom, is not so easily explained. It might be referred to congestion in the spleen, and to the irritation produced by an adulterated circulation, in an organ carrying so large a quantity of blood through its numerous vessels. Its use, however, being unknown, it is idle to speculate upon the changes to which it is liable, as regards function.

The effect of an adulterated state of the blood upon the senses, is well shown by the results we

witness when alcohol is present in the blood, as in inebriety.*

No less convincing, are the consequences of undecarbonised blood circulating through the brain, as in the advanced stages of phthisis.

Irritability may easily be supposed as originating in the same cause, assisted, of course, by the constant presence of that state, so well described by the French, by the term "*mal-aise*."

The different affections of the mind, often attending long-continued dyspepsia,—approaching, sometimes, even to a loss of mind altogether,—may be attributable, partly perhaps, to the misery which the dyspeptic endures, but principally, it is submitted, to the vitiated state of the circulating fluids, which being so evidently influential in deranging function, may readily be supposed equally calculated, to disturb the mental phenomena; for, since physical causes, as in fever—in the advanced stages of which, as before

* When gin has been taken in quantity so as to produce death, its presence in the brain has been indisputable.

noticed, the blood is evidently diseased—will produce delirium, and, during the interval of suffering, annihilate memory,—why should not a state of the blood be possible, which, circulating through the brain of a person peculiarly constituted, may be capable of producing the phenomena of mania, as readily, as, that breathing the “laughing gas” should produce in different individuals, the various effects we witness :—composing some, exciting others ; raising one to the summit of happiness ; plunging another into the very abyss of misery ?

The author, in his *Notes on Insanity*, does not broach the opinion,—though by him long entertained and acted upon,—that the proximate cause of insanity is vitiation of the blood, because, having laid down as a principle, that his “*Notes on Insanity*” were strictly practical, he considered anything hypothetical would be a dereliction of that principle.

The reader will, he hopes, pardon this digression, having so far relation to the present subject, inasmuch as insanity is a disease of the general system, and, therefore, comes within

the pale of those diseases, having for their proximate cause, vitiation of the blood.

Why a disease so distressing to the patient as dyspepsia should seldom produce organic mischief, admits an easy explanation; for, by slow and almost imperceptible degrees progressing, the different organs become gradually accustomed to the irritation; and that state, which, suddenly produced—as in fever—endangers life, by its slow and gradual increase, is weakened in its power to affect life and structure, though so efficient in destroying health and comfort.

The modification of the effects of the same cause, under different modes of application, is sufficiently evident in many cases of chronic hydrocephalus. We all know sudden pressure upon the brain causes death, though a pressure, apparently much greater, accumulated slowly, will in some cases go on for years increasing, without any evident injury. In support of this I may mention the well known case of James Cardinal, a patient of Mr. Green, in Henry's

ward, St. Thomas's Hospital, in 1823, aged 28. The head in this case had increased in size from infancy to its then present dimensions, viz. thirty-six inches in circumference over the hair. Following the report given of it in the *Lancet* of the 8th March, 1823.—“ This increase, till the last four years—when he became subject to fits, which had since continued at intervals—was without any inconvenience to the patient.”

With the exception of these fits, he enjoyed good health, and complained of no uneasiness in his head, except just before the epileptic paroxysm.”

His appetite is stated to be good, and, as is well known, by all who recollect him, his faculties were unimpaired.

This case sufficiently proves that a cause which applied suddenly, would kill, commencing by a slight alteration, and progressing slowly, is not only insufficient to destroy life, but, judging from the above case, may be wholly innocuous.

CHAPTER IV.

TREATMENT.

Preparatory steps—System of treatment—Mental—Regimenal.

THE proximate cause of a disease admitted, still, preparatory to putting into operation the means proper for its removal, it is imperative, in order that our treatment may be successful, to inquire into, and, as far as possible, remove, whatever, by its presence, is calculated to establish or even to aggravate the existing evil.

This points out the necessity of removing or abating all exciting causes. Of the exciting causes, as before observed, some are within the will of the patient, and may, of course, be readily avoided; others exist independent of the will, and must, therefore, become objects of treatment. Of the former—those exciting

causes within our control—it is only necessary to observe, that one of them—sedentary occupation—is a fruitful source of mischief; and, whether self-imposed or not, ought most certainly to be avoided. As regards the latter—those acting independent of the will—we must bear in mind, that derangement of the uterine system is, of all other exciting causes of Dyspepsia, the most frequent, as, indeed, it is the most serious; and whether such derangement consist in the absence or partial appearance of the periodical returns; in their excess; or in any morbid action in the uterine vessels—often alternating with such irregularities—or from disease of the organ itself, we may be assured, that, so long as any one of these exciting causes does exist, it is in vain we employ our remedies for the restoration of health. The treatment applicable to these states, it would be out of place to describe, as the information could not be serviceable to the general reader, and would be unnecessary as regards members of the medical profession.

All I wish is, to impress upon my readers the

necessity of inquiring into and removing all states causing or aggravating mischief, before we can expect to succeed in restoring health to the digestive organs. Having discovered in which of the exciting causes the disease has originated, and having strictly enforced abstinence from it in future, we may, with a well-founded hope of success, direct our attention to the disease itself;—or in other words—to the removal of the proximate cause.

The remedies which, for the above purpose, the author is about to suggest as applicable, may be divided into MENTAL—REGIMENAL—and MEDICAL.

FIRST AS TO MENTAL TREATMENT.

There is no complaint which interferes more with the enjoyments of life, or destroys more completely tranquillity of mind, than Dyspepsia in its more aggravated form. Miserable days, restless nights, and the depression of spirits naturally resulting, are the never-failing attendants in these kind of cases.

Confidence in remedies fails—medicine and its professors are inveighed against; and, if

the patient escape the dangerous advice of quacks, the no less injudicious determination of self-treatment is but too often the substitute.

This or that nostrum is ineffectually tried, till, at length, hope, even,—that last anchorage of the human mind amidst misfortune,—ceases to influence ;—all idea of relief vanishes ; society is avoided ; and, not unfrequently, hypochondriacism, or even a more serious form of mania, completes the sum of evil, to which this miserable disease exposes its victims.

The less intense shades of mental disquietude attending Dyspepsia, though frequent, are, generally, temporary, and therefore more easily borne. In each form, our duty is evident.

We must, by every means in our power, abstract the individual from his morbid thoughts, always, however, bearing in mind, that, whilst a physical cause of evil exists, that cause must be removed before we can hope for benefit from change of scene or circumstances.

Another precaution, highly useful in preventing an aggravation of that disquietude ever present in Dyspepsia, is, as far as possible, to with-

draw the mind from the consideration of the remedies employed.

To this end we must avoid the use of medicines calculated to remind the patient that he is the object of treatment. This may appear difficult, but it is to a degree possible, and ought to be attempted.

NEXT OF REGIMENAL TREATMENT.

It is almost impossible to lay down any system for the guidance of the dyspeptic in this respect. As a general rule for regimen, the dyspeptic ought to avoid everything, which taken, produces uneasiness. Plain boiled or roast meat is best; and, of this kind of food, mutton is most easily digested. All young and white meats are bad; and equally so, salted meat. Fish—soup—broth—vegetables of all sorts, except potatoes, are bad; slops of all kinds are injurious.

The idea of their being lighter for the stomach is a mistake; since they produce that, which, of all other evils in Dyspepsia, leads to the most varied as well as most painful systems; viz. the formation of acid and consequent evolution of gas.

Made dishes of every description must be avoided ; as must also puddings and pastry ; for first, they induce us to eat more than is necessary, and, therefore, more than is right, and next, they almost always cause uneasiness.

Everything which comes under the head of dessert is bad.

Thirst, not habit, ought to regulate the fluid part of the meal. Drink, when we are not thirsty, interrupts digestion, and tends to the formation of acid. All diluted drinks are bad ; and none, in the author's opinion, worse than brandy and water :—a glass of wine, occasionally, may be useful ; but it is always likely to form acid ; and the notion that stimulants are calculated to restore the strength, can only be entertained by those, who forget or deny the cause of debility. The above directions may be summed up in the following axioms :

Never drink when not thirsty.

Never eat when not hungry.

Never attempt to create a false appetite by tempting, that is, savory dishes.

Water is the best beverage, because of it we

never drink more than we want ; but all cannot take it. When it offends the stomach, fresh beer may be substituted, but it must be what is called mild.

One evil which the dyspeptic suffers from, is disturbed sleep ; and this is frequently caused, or at least aggravated, by taking gruel or some other slop, equally bad, by way of supper.

The prejudice some dyspeptics have to animal food, it is very difficult to combat.

One lady, whom I attended, told me it was quite impossible to comply with my wish that she should take animal food ; her stomach, she said, was too weak to bear it. She often told me it was useless my pretending to relieve her, for that she had a burning fever within that was consuming her.

The diet of this lady was pudding at dinner, (light, as it is called,) and a glass of wine ; afterwards tea, and the evening closed with gruel. She was constantly complaining, yet no argument would convince her, that her diet was increasing her sufferings. One evening, being in the house, when the heat, which, to use her own

words, was consuming her, was even worse than usual, I told her she was suffering from one of the common results of indigestion, and that I could relieve it. She was angry at this, and said she was quite sure I was mistaken, for that what she felt was too severe for any thing quickly to relieve: besides, she had taken nothing but light pudding for dinner, one glass of wine, and some gruel, her usual supper, which she had just finished. I prevailed upon her at last, as a remedy, which if it did no good could do no harm, to take some carbonate of soda in solution—she did so, and for that night escaped her usual uneasiness. This made her believe, that her own opinion might possibly be wrong.

She afterwards acquiesced in other suggestions, comprehending, of course, an entire change of diet, and soon became convinced of her error by improvement. The imaginary fire within, was put out, and her general health rapidly improved.

Short as I have made the bill of fare for the dyspeptic, it is not more so than the severe forms of Dyspepsia require. But, let not the patient be disheartened; for, as the health im-

proves, these restrictive laws not only may, but require to be relaxed. Should the possibility of the change be doubted, the author might offer the testimony of his own case in support of the opinion, that, gradually and judiciously made, and the uneasiness, at first consequent upon the change, met by proper remedies, the return to a generous diet is as possible, as it is grateful; for, as regards himself, he can assure the reader, that, notwithstanding all his former privations and sufferings, good cheer is now as harmless to him, as to those who know not what dyspepsia means, and who laugh at the idea of consulting the stomach rather than the will. This leads me to refer, by way of caution, to those persons, who, happily ignorant of the misery endured by the dyspeptic, and, therefore, unable either to comprehend, or to sympathize with, his feelings, are but too ready to ridicule his complaints. Such persons, reasoning from themselves, try to convince the dyspeptic that his disease is medicine, and his enemy the doctor. Eat and drink as I do, will say one of these happy mortals,—it's all

stuff, you fancy yourself ill, and, therefore, you make yourself so.

Let the dyspeptic beware, lest he discover, when too late, the error he has been guilty of in listening to this dangerous though well meant advice. Let him remember that neglected dyspepsia has amongst its sequelæ some of the most painful afflictions to which humanity is subject.

CHAPTER V.

MEDICAL TREATMENT.

NEXT we come to the medical part of the treatment; and this I shall divide into *permanent* and *temporary*. The former, the adoption of those means from which we are to expect the removal of the proximate cause. The latter, those remedies merely calculated to allay, for the moment, the pressing symptom.

To answer the first indication, alteratives and purgatives are necessary, with occasional bleeding, should there be a full state of habit or a disposition to determination of blood to the head.

We must, however, as before observed, always bear in mind the necessity of interfering, as little as possible, by remedies, with the habits or pur-

suits of our patient. Drastic purgatives, therefore, except during the first three or four days of treatment, are injurious ; for not only by the frequent action do they produce irritation of the intestinal canal, but, by interfering with the occupations of business, they become a source of annoyance, exceeding any advantage they are capable of affording.

We must never forget that dyspepsia, in its more aggravated form, is a disease which cannot be taken by storm. Its gradual progress and constant increase, require that the means adopted for its removal, should be also gradual. We must, therefore, after the first three or four days of treatment, solicit action, as it were, rather than compel it,—increasing or diminishing the strength of our remedies, as we find them unavailing or excessive. Action upon the bowels once, or at farthest, twice a day, is all that is required. By urging the intestines to greater action, we lose in irritation more than we gain by the increased secretion. No complaint requires more constant attention than Dyspepsia ; though simple the remedies, they depend for

their success wholly upon the time and manner of their administration. As to the kind of purgatives to be employed,—calomel, that valuable, but much abused medicine, ranks foremost: without the judicious use of this medicine, there is little hope of permanent relief to the really dyspeptic. It is the only medicine we can rely upon for altering the secretions of the liver, and, without healthy bile, we can neither expect the required change in the chyme, nor a healthy stimulus to the intestines.

In giving calomel, we must, of course, bear in mind the temperament of the patient. Some are unable, under any circumstances, to bear its action; others suffer from its specific effects, in the smallest doses; but with the majority it agrees. When this peculiarity of temperament exists, we may much diminish the evil arising out of it, by combining the two forms; viz., blue pill and calomel, in small doses; by which, at the same time that we obtain more perfectly its purgative, we escape, in a great degree, the danger of suffering from its specific effects.

As soon as the excretions evince an alteration

in the secreting system, we may substitute for the calomel, the different combinations of aloes, camboge, colocynth, and rhubarb. Indeed when the use of calomel is no longer necessary, it matters little what aperient is employed. All we want, is action upon the bowels once a day without irritation. The old plan of trying to make the bowels act at stated hours, is injurious; for, without the natural stimulus, the action is incomplete, and the bowels still remain loaded, giving rise to flatus and other evils.

Next of those remedies, which are merely adjuncts, and which, though we could not dispense with them, are applicable only to individual symptoms.

The first object for attention, in the use of these, because, from its injurious tendency, it is of all other symptoms the most important, is the neutralization of the acid, formed in the stomach, by the absence, imperfection, or delay, of the

changes, the food ought to undergo, for the purpose of health and ease.

When these changes are not effected in the manner and time required, fermentation takes place, acid is formed, and gas is extricated.

The combined effects of these constant results of mal-concoction, have been already noticed in speaking of symptoms.* It is only necessary, therefore, in this place, to observe, that such being the varied effects of acid, its removal is of

* The author having, in every instance, where he has had occasion to refer to it, recognised the formation of acid as an uniform result of mal-concoction, he may be accused of discrepancy, in not placing it amongst the constant symptoms of dyspepsia. To protect himself from such a remark, he feels it proper to observe, that the omission has been intentional; and that he has done so, in consequence of having noticed, in practice, that many patients, although perfectly alive to the existence of those sensations, resulting from the formation of acid, will, from associating the term with the idea of a sour taste, which is frequently absent, stoutly deny the existence of acidity itself. It is on this account, therefore, that the author, in enumerating the constant symptoms, has mentioned those which the patient is most likely to be conscious of. For the same reason, in stating the occasional symptoms, he uses the term "acid eructation" instead of "acidity," as being

the first importance, and ought not to be delayed beyond the moment when uneasiness commences.

There are several remedies answering this indication, but I shall only mention two of them, viz., carbonates of soda and magnesia, being those most easily obtained. As the above antacids contain a gas, which is liberated on the neutralization of the acid in the stomach, it is important that only so much be taken at a time, as is necessary to produce the desired effect; since, if more than necessary be taken, the excess passes, unchanged, into the intestines, and there, being decomposed, and the gas given off, the bowel becomes distended, the passage of the food for want of contraction is rendered more difficult, and the sufferings of the patient greater.*

more easily understood by the non-medical reader, the term "acidity," being, by the generality of persons, understood to convey the idea of acid in the stomach, rather than the evidence of its presence by eructation.

* There never was a greater mistake than the supposition, by some entertained, that distention facilitates the passage of the food along the intestines. So far from this being the case, the spasm, produced by the distention, checks the progress of the mass and prevents the intestine from being, ever, fully emptied.

Though carbonate of soda and carbonate of magnesia might seem, from their properties, equally to answer the indication required, viz., the neutralization of the acid; yet, by their indiscriminate employment, we lose much of their individual value. Each must be used with reference to its particular qualities. Carbonate of magnesia acts better when added to our fluid aperients. It is chiefly serviceable during the commencement of treatment, when a tolerably free action of the bowels is required. But, when uneasiness is less constant,—when the excretions become healthy—when mild, is to supersede active treatment,—then, the best remedy is the carbonate of soda; for, as, during this state, our object is to neutralize the acid before it passes out of the stomach, and, at the same time, to relieve that organ from the flatus, produced by the decomposition of the ingesta,—(constantly going on, when there is a want of power in the secretions of the stomach to produce a healthy chyme,) the carbonate of soda, by its solubility and facile decomposition, best answers our purpose. The carbonic

acid being immediately given off stimulates the stomach, and thus, enables it to throw off, by eructation, not only the gas itself, but the flatus already present.

Had we the means of preventing the accumulation of flatus, our patient's suffering would be comparatively trifling.

All we can do is, as far as possible, to remove the cause of this evil ; the evil itself, and the efficacy of our remedies for its removal, rest with our patient :—it is only necessary, here, to observe, that the Dyspeptic should always take his meals alone, and that he should subject himself as little as possible, to the restraints of society.

The distressing feelings produced by flatus, being, as before noticed, in speaking of symptoms, much aggravated, by partial spasmodic contractions of the large intestines, particularly about the caput coli and sigmoid flexure, and the power to relieve themselves being proportionally diminished, it is useful to combine carminatives and antispasmodics with the medicines given during the day.

An important point for consideration in the

choice of fluid remedies, in addition to the neutralization of acid and the alleviation of spasm, is the supplying that degree of stimulus to the intestine, which shall, without irritation, insure daily, and, during the commencement of treatment, free action.

The dyspeptic must expect occasional relapses ; but these will become less and less severe, provided, on their approach, they are met by prompt and efficient treatment.

Pyrosis, or water brash, is generally relieved by small doses of nitrate of silver.

During convalescence Tonics may be useful—but in the progress of the disease they are of little if any benefit :—without the employment of purgatives at the same time, they are, according to the author's experience, injurious.

CHAPTER VI.

Treatment during convalescence—Prophylactic treatment.

WHEN craving for food is replaced by appetite, when the stomach receives with satisfaction and digests with comparative ease, still, it often happens, that flatus is complained of, the bowels remain sluggish, and their contents are retained longer than is compatible with health.

To remove this consequence of long-continued Dyspepsia is extremely difficult, without, at the same time, impairing the restored tone of the stomach, by the use of medicines which, as respects that organ, are no longer necessary.

Our duty, then, is so to choose our remedies, that we may, as far as possible, avoid the use of

any thing calculated to weaken or derange the stomach.

The choice of aperients must depend, therefore, upon the individual. Whatever disagrees we must abstain from. The aperient which experience shows best to afford relief, we must be satisfied with, whether (as is often the case) it be the favourite remedy of the patient or our own.

If, as a substitute for aperients, enemata be suggested, the instrument used should be of silver, so constructed, as to prevent the possibility of air being injected. The quantity of fluid—tepid water is the best—employed, should be as small as is convenient; not, generally speaking, exceeding three or four ounces; and it ought only to be used when the bowel is loaded.

Should the means above suggested fail, or be objected to, we may try mustard-seed.

A table spoonful should be swallowed whole—taking a small quantity in the mouth at a time, and washing it down with water.

This may be repeated about an hour after each meal.

The novelty, if there be any, is not in the em-

ployment of the remedy, but, in the explanation about to be given of its *modus operandi* ; and which, if correct, stamps it as useful.

Being inclosed by a tough pellicle, it passes the stomach little, if at all, changed ; but, by the long maceration, to which it is subject, in its course through the intestines, this pellicle, which incloses its aromatic and stimulating properties, becomes softened, and, as the seed passes along, it stimulates the different parts of the canal, just in proportion as their state of atony, and its own stimulating qualities are the greatest,—that is, becoming most developed at that portion of the bowel, where the highest stimulating powers are required, to induce the natural and periodical action.

By its aromatic qualities it also promotes the expulsion of flatus ; and by its presence as an extraneous body, it keeps the mass together. Stimulating the intestine to contraction, the mass is carried onward, and, by full relief when expulsion does take place, one great source of mischief is prevented ; viz., the retention of insulated portions, forming what are called *scyballa*, lead-

ing, of course, to further decomposition, and producing those wretched sensations of weight and distention, so constantly complained of by the dyspeptic.

Sometimes mustard-seed, taken as recommended, produces a peculiar sensation of pain referred to the bottom of the throat, or under the sternum. When this is perceived, all required for its removal, is to omit the remedy.

From what has been said, it would appear, that there are two stages of medical treatment; viz., the active, and the mild; the former, that by which we endeavour to restore the blood and its secretions to a healthy state;—the latter, that by which we hope to secure the improvement we have effected. Our labour, however, does not end here. There is another stage of treatment, of equal, if not greater importance; viz., to strengthen and confirm the health against the contingencies of the future; and this we may designate the *prophylactic stage of treatment*.

Under this head we are called upon to lay down general rules for future management; and

I shall do so, without being careful to avoid the necessary repetitions which it may involve.

First, of regimen. When the health is sufficiently restored to make the change, a varied diet is best, as a too nicely regulated diet makes offences against it, doubly injurious. We must not, however, forget, that, in relaxing the severity of regimen, we must be careful not to make the change from a spare to a full diet too suddenly; and any sort of food which experience proves to be constantly injurious, should be avoided.

We must at the same time urge the avoidance of that foolish custom, of drinking without being thirsty,—a habit, which seriously interrupts the progress of digestion. On this account, as before noticed, water is the best beverage; because of water we never drink, but when we require it.

The medical treatment of this stage consists, merely, in taking, when there is any uneasiness after eating, a wine-glass-full of the solution of carbonate of soda—made in the proportion of an ounce to a quart of water, and keeping the bowels open.

The advantages of early habits, and such exercise as the strength of the individual will permit, are too well known to need remark.

In connexion with this part of the subject, there are two points to which I would direct particular attention, as being of the first importance; and without a due observance of which, our previous efforts to restore health, would, at least, be imperfect, if not unavailing.

The points above alluded to are,

The state of the surface, and clothing.

As regards the former, it is well known, that nothing controls the health or feelings more than the state of the skin.

Any interruption to its healthy state, produces a corresponding derangement of the general system.

That it should be so, is sufficiently evident to all who are acquainted with its varied functions, and the myriads of vessels ramifying throughout, and in fact, occupying every point of its surface. It is unnecessary, therefore, to speak of the importance of doing so; but simply to point out the means by which we may obtain an active and

uniform circulation : and thus secure to the surface a healthy performance of its functions.

To effect this purpose, our first duty is cleanliness.

We must not, however, be satisfied with the usual ablutions ; for, though the parts covered appear clean, strictly speaking, they are not so : and the occasional use of the warm bath is, therefore, necessary.

Next, we must give tone to the superficial vessels, which mere cleanliness, without other aid, would fail in effecting,—so that by quick reaction the surface and system may be protected from the injurious effects of wet and cold.

The best known agent for this purpose is the daily application of cold water to the surface ; or, as it is called, cold ablution:—its best adjuvant is proper clothing.

One circumstance, the author submits, demands attention in the employment of cold ablution ; viz., that, the object of cold ablution being to promote a habit of quick reaction,—and, as in the upper parts of the body—particularly the head—circulation has a tendency to exceed, rather than

otherwise, the degree of action necessary for health,—we ought on no account to include the head in our directions.

It is in the extremities, where the blood has to ascend against gravitation, that the stimulus is most required.

Without warm feet and a cool head, health is impossible.

The circulation in the dyspeptic being generally languid, and its equilibrium, therefore, imperfectly preserved, the complaint of cold feet is very common.

To correct this evil, can only be effected by giving tone to the superficial vessels; and for this purpose cold ablution seems universally to be admitted the best remedy.

The author's opinion of the shower-bath has been fully expressed elsewhere.* He will here, therefore, only observe that it is a most dangerous remedy in many, if not the majority of cases; and that *in no case* does it afford the same benefit, or is it equally manageable, as the more simple means of ablution about to be suggested.

* Notes on Insanity, pp. 64—69.

The ablution should be begun in warm weather with luke-warm water, the temperature of which should be gradually lowered each morning, till it is that of the atmosphere; and to do good, the ablution should be continued throughout the winter.

The mode of application is important. It should not be applied by means of a sponge, but by a towel; and the head, as before observed, should not be touched.

We should commence with the lower extremities; then the front of the body and arms; and then, opening the towel, it should be applied to the back. This should be done as quickly as possible, and the process of drying ought to commence and end in the same way.

By following these directions, the reaction below is assisted by the collapse of the vessels above, as we proceed in applying the cold water; and, by the drying, which ought to follow the same rule, reaction is first produced where most required, viz., in the extremities.

What we want to effect, be it remembered, is to accustom the extreme vessels,—in other words, those furthest from the centre of circulation, and

in which the blood has to ascend against gravitation,—to quick reaction, thus giving them the habit of carrying upon the surface a sufficient quantity of blood, to preserve an equable temperature ; and, at the same time, to keep the surface, by cleanliness, in that state, which shall ensure its healthy function.

The rationale of the process is, as all know, founded upon the fact, that, when cold is applied to the surface, if not sufficient to produce permanent constriction of the vessels, but merely to contract their diameter, and thereby for the moment, partially empty them ; the blood, which leaves the vessels on the moment of application, returns with an increased force ; and reaction, as it is called, is established. This, at first, is feeble, and requires the stimulating influence of friction in drying to induce it ; but after a time reaction becomes more evident ; until, at length, the heat produced upon the surface would, of itself, be sufficient to evaporate the moisture.

Now the habit of reaction, which the extreme vessels thus obtain, enables them, under common circumstances, to carry upon the surface an increased volume of blood.

At the same time, accustomed to a stimulus, which we can regulate, the vessels acquire the power to react, also, under accidental circumstances; and the danger, therefore, of cold from wet feet or other causes, is proportionally diminished.

Cold, in point of fact, is no more than a state of the system produced by a sudden alteration in the equilibrium of the circulating medium, expressed by the term congestion.

The presence of a greater quantity of blood in an organ, than it is accustomed to, must call for a proportionate effort to drive the blood through the over-distended vessels.

If the effort be effectual, and reaction accomplished, no evil consequences follow; but if the vessels are unable to unload themselves, the congestion is perfect, and the first step in the process of inflammation is set up.

If the congestion be partial, the effect will be partial; if general, as in freezing to death, the effect will be general; or, in other words, organic life must cease.

Now these two states, viz., where the loss of

equilibrium in the circulation is only productive of slight, or, at least, partial derangement ; and that, where the congestion is destructive of life, are the two extremes of the same cause ; viz., the want of power in the system to react quickly, and thus remove the effects of the sudden revulsion of the blood from the surface to internal organs.

The intermediate shades of mischief, characterize the different effects produced by what, in common language, is called “ cold.”

Thus inflammation of the lungs, bowels, &c., are said to be the effect of “ cold ;” though, in fact, any cause equal to destroy the equilibrium of the circulation, may and does lead to the same result. From exposure to the sun, for instance, we have inflammation of the brain, in consequence, the author submits, of the expansion of its vessels by the sudden and intense heat, which, producing a preternatural flow of blood, leads to congestion—the proximate cause of inflammation.

Again, if a person, having been for some time in the cold air, come suddenly into a hot room, he has a cold and sore-throat : —how is this ? Why,—

the cold air having constricted the vessels ramifying upon the membrane covering the air passages and neighbouring parts—on the sudden admission of heated air, these vessels dilate, a supply of blood rushes to the part much beyond the usual quantity, the calibre of the vessels is preternaturally increased, their power of contraction in the same degree diminished, and the necessary consequence is partial or entire congestion.

If, then, cold ablution be a remedy calculated to render the surface less morbidly alive to impressions: and at the same time is capable of increasing the power of reaction in the superficial vessels; we possess in it a means admirably fitted to diminish our liability to suffer from the effects of external stimuli—a means of protection, in fact, against our common enemy “cold.”

CHAPTER VII.

CLOTHING.

As regards clothing it is to be observed, that in this, our fitful climate, the clothing ought to vary as little as possible. It ought to be sufficient to keep us warm in cold weather, without being such as to encumber us in warm. The extra covering of a great coat is all very well, but wrappers about the throat are bad.

The greatest objection to wrapping and extra clothing, is during exercise.

In expressing these opinions, so far am I from forgetting the force of habit, or, that persons accustomed to wrappings find it difficult to do without them, that I agree most fully with Dr. Paley, that man is, indeed, a bundle of habits; and it is on this account, that I am anxious to

induce my readers to adopt those, which, on experience, I can recommend as protective.

Why does the face resist cold, but by the habit of being exposed ; and no less free would the throat be from the effect of cold, but for those things called wrappings. The covering on the throat ought never to be altered, if we would escape cold. Whatever renders the surface sensitive, makes it constantly liable to sudden chills. To prove what habit will do, is exemplified by the well-known fact, that fishmongers, in the coldest weather, can bear to have their hands in water for a considerable time, not only without any injurious consequence, but even with little or no inconvenience ;—a thing quite impossible to one unaccustomed to it.

This power of endurance can rest, alone, upon quick reaction, and the consequent supply of heat by the superficial vessels,—which is well illustrated by the familiar instance of what is called “hotache,” the effect of playing snowballs.

That this increased circulation should, in the hand, produce no evil, is readily explained by

the fact, that constant exposure, whilst it gives to the hand, as it does to the face, a habit and power of increased action as well as reaction—which parts unaccustomed to exposure do not possess;—so does it enable the vessels when preternaturally distended by the effort to overcome the sedative effects of cold,—to relieve themselves of such distention—i. e. to overcome the congestion, and to return to their natural state.

It is not, however, to be inferred that the parts constantly exposed, possess any innate power of resisting cold; since there is a point beyond which, even in these, the power of reaction is lost, (as when parts are frozen.) What the author is anxious to call attention to is the force of habit:—well shown in the lower order of Scotch, who, in the coldest winter, are seen without the protection of shoe or stocking, not only to escape evil, but even to suffer little or no inconvenience.

Since, then, we are creatures of habit, it is, surely, our interest to encourage those habits best calculated to protect us from danger; and

as immunity from danger is evidently best secured, by the degree of power in the system to resist the effects of external stimuli; and as, reasoning from known facts, we are forced to the conclusion, that the degree of safety is in exact accordance with the power of endurance; it follows, as a matter of course, that whatever is calculated to diminish this power, increases the danger to which we are exposed; wrappings, therefore, at least about the throat, are not desirable, unless upon the understanding, that they are worn only in a state of rest, and removed on coming into a higher temperature. Those who never use extra wrappers, nor alter the usual covering about the throat, seldom if ever suffer from sore throat. Were coverings of the throat, indeed, wholly done away with, sore throats—to many, such serious sources of suffering—would be seldom heard of. Why, I would ask, should the throat call for covering more than the face itself—prejudice alone can support it; but prejudice is a powerful opponent.

As flannel has frequently been a subject of discussion, the author may be excused a brief notice

of his opinion respecting its use. Flannel is objectionable, because it keeps up an unnatural action upon the skin, and thereby renders it morbidly susceptible of external impressions; or, to use a common phrase, it makes us tender. Flannel may remove rheumatism for a time, but it is neither a cure for it, nor, for long, a protection against its recurrence. Those who have worn flannel all their lives, have rheumatism just as much as those who have never worn flannel at all.

“Cold,” as it is termed, arises from the repellant of the blood from the surface to the interior. This state may be the result either of a sudden chill, or of a slow but continued abstraction of heat from the surface,—such as by sitting in wet clothes. Whilst the body or surface is able to supply heat, no chill, and, therefore, no mischief is produced; but, the moment this fails, then the blood leaves the surface, the covering next to it, whatever it be, soon cools, and chilliness, the forerunner of evil, ensues. In intense perspiration, whilst the flannel is warm, it is a protection, the clothes above it

being dry, and therefore absorbing the vapour as it arises ; but should the individual be obliged to stand still for a time, the heat is not so quickly supplied, the external covering becomes colder, the steam it imbibes, instead of passing off, is condensed, the drying process soon ceases, the flannel itself cools ; and no longer acting as a stimulus to the superficial vessels, a collapse takes place, heat is, if at all, feebly supplied, the flannel becomes cold, and, holding more moisture when wet than linen or cotton, the danger is even greater than when we have no flannel ; for, as the heat required is in accordance with the number and thickness of the coverings, the failure of its supply, and the consequent danger of a collapse, are in proportion to such demand.

The rule for flannel is the habits of the individual.

In advanced life it may be useful, provided the individual is not exposed to vicissitudes.

For those exposed to vicissitudes of weather, or to laborious exercise, and who, as the sailor

or soldier, have no means of changing their clothes, the only safe covering is a single one;—of course of materials fitted for the purpose—for then evaporation is never interrupted, and the heat supplied by the body, is assisted by the air, in evaporating the moisture of the clothing. Whereas, when there are several media or coverings between the body and the air, the external covering is always of lower temperature than the internal one, the moisture, therefore, as—evaporated by the heat of the body—it passes off in the form of steam, is condensed by the colder medium offered by the external covering, and falls in the shape of water, again and again upon the covering in contact with the skin, prolonging, of course, the time required for drying, and, in the same degree, increasing the danger of a collapse.

For soldiers or sailors, as well as for all persons engaged in laborious pursuits, the most comfortable and safest covering—provided it be the only one—would be a shirt and trousers of the thickest kind of flannel. Let those who

doubt the advice offered, try it, before they condemn.

The above opinions are founded on experience.

CHAPTER VIII.

The protean character of Dyspepsia—Its influence in aggravating other diseases, and its sequelæ.

THERE is scarcely a disease, the symptoms of which do not, directly or indirectly, bear reference to those, characterising, or, at least, at one time or other, attending Dyspepsia. There is no disease, local or general, which it does not aggravate. Its symptoms, suddenly produced, are those of fever of the typhoid kind, their progressive increase alone marking a distinction.

In proof of this, we have—setting our own experience and opinion aside—only to observe the resemblance in symptoms, as recorded by different authors, between dyspepsia and typhus. Let us take one of them:—according to Hooper,—

In Dyspepsia we have "debility, languor, and aversion to motion."

In Typhus, "languor, lassitude, and other marks of debility," are precursors to the attack.

In Typhus, we have "dejection of mind."

In Dyspepsia, "dejection of spirits."

In Typhus, "alternate chilliness and flushing."

In Dyspepsia, "hectic fever."

In Typhus, "dulness and confusion of thought," "giddiness, and pain of the head, with aching pains over the whole body."

In Dyspepsia, "various affections of the senses, pains in the head and breast."

In Typhus, "nausea and vomiting."

In Dyspepsia, "nausea."

In Typhus, "short anxious respiration, frequent weak and intermittent pulse."

In Dyspepsia, "small low pulse, and palpitation."

In Dyspepsia, we have either constipation or diarrhœa.

In Typhus, one or other of these is always present.

In the approach of Typhus we have the surface often bedewed with cold, clammy perspiration.

In Dyspepsia, we have these symptoms frequently present.

The affection of the head cannot be depended upon, as in some of the worst cases of Typhus it is only described as lightness: in fact, in some bad cases this symptom is altogether wanting. The tongue in the commencement of Typhus is covered with a white mucus, the pulse small, weak, and rapid. In dyspepsia this state of the tongue and pulse is frequently to be seen. In truth, Dyspepsia might even be considered a chronic form of fever of the typhoid kind, rendered comparatively innocuous by its gradual progress.

The evil arising from mistaking the incipient stage of Typhus as merely a form of dyspepsia—a thing more common than might be supposed—is, that the means which might cut short fever in its early stages, are neglected. The patient is prescribed for merely as a dyspeptic, he is allowed to follow his usual occupations, with the germ of fever within him, till—the symptoms becoming too urgent for him to bear up against

them—he takes to his bed, never perhaps again to rise from it.

In illustration of the above remarks, the author begs attention to the following case:—

In the year 1826, when he was assisting Dr. Wray, then of Salisbury Square, Fleet Street, a Mr. W. called one day at the surgery, complaining of an attack of indigestion; he said he had been often subject to the same attack, and that all he wanted was some opening medicine. He said he had felt some degree of nausea and uneasiness after eating, and slight pain in the head, which he said was nothing unusual. He was told that typhus was prevalent, and that he had better remain at home, as it might be an incipient attack of fever; he, however, neglected the advice, confident in his opinion, that it was one of his usual attacks of indigestion. A few days after he called again to say he was worse, and that now he would stay at home. The pain in the head had increased, and the prostration of strength, and the state of the pulse and tongue now left no doubt of the nature of the case,

which became typhus of the worst kind : in truth, for a long time his recovery was very doubtful. Now had an emetic been given when this gentleman first called, followed by an active purgative, he might have escaped much and long suffering.

Every one knows, however, how difficult it is to convince a person that he is worse than he chooses to think himself. In fact there is only one equal difficulty, and that is, to convince a person, determined in his own mind that he is very ill, that in truth there is little or nothing the matter with him. In either case his medical man is set down as an ignoramus.

Dyspepsia may be sometimes mistaken for affection of the liver, and this leads to most injurious error in treatment ; for where the case is purely dyspeptic, the remedies employed for affection of the liver, must invariably increase the dyspeptic suffering.

Dyspepsia (particularly when combined with hysteria) may be mistaken for disease of the heart, and, in some cases, diagnosis is extremely difficult, since palpitation—intermittent pulse—

anxious countenance—difficult respiration, and flying pains about the chest, are evils in these cases frequently complained of.

Disease of the brain may be mistaken for dyspepsia. In evidence of this, I give the following case, which came under my notice whilst in attendance at the Welbeck Dispensary, in the year 1830.

An Irishman, æt. 35, applied at the dispensary, stating, that he had for a great length of time suffered from constipation, and difficulty in digesting his food. He said he could not afford to buy opening medicine, and therefore he came to the dispensary; but, beyond the necessity for purgative medicine, he said he had no complaint. He was questioned whether he had any pain in his head, but he said “no.” He continued his attendance at the dispensary for some time before what I am about to mention occurred. One morning, the apothecary came into the physician’s room, and said, there was a man in a fit; Dr. B. requested me to go to him, when I found it was the individual whom I have mentioned. He was immediately bled from the arm and

cupped, but very little blood was obtained, and before any other measure could be adopted, the patient was dead.

I examined the head in company with Dr. B. On removing the cranium a great quantity of blood flowed, and on cutting into the ventricles, they were found completely filled with coagulated blood.

On removing the coagulum, we found the right corpus striatum deeply ulcerated, the edges of the ulceration raised, and as well defined as if it had been in the leg. There was a considerable quantity of blood, too, at the base of the brain.

I inquired of the people whether they recollected ever to have heard him complain of his head, or whether they had at any time observed any thing peculiar about him: the answer was "nothing," except that he could never take anything strong without being tipsy.

Another case I may mention, for the purpose of illustrating that disease of the brain may exist without other symptoms indicating its presence, than those we constantly witness in dyspepsia; and that it is therefore always prudent, whenever,

with dyspeptic symptoms, we have *unusually obstinate* interruption of function, to bear in mind the possibility of mischief about the brain; and above all to impress the fact, that, such an evil once established, the incipient is the only stage, when treatment can be beneficial.

A young girl æt. 22, living in St. John's Wood, came to the dispensary on the Wednesday.

She stated that she had been out of health for some time;—that she was troubled with nausea, heart-burn, *slight* pain in the head, and other dyspeptic symptoms; but nothing indicative of the mischief which followed.

The catamenia were partially suppressed;—having appeared, but in consequence, as she said, of cold caught in washing, being checked.

No symptom was complained of which appeared to demand active measures.

It seemed to be a case of amenorrhœa accompanied by dyspepsia. She was prescribed for, and on the alternate day (Friday) she came again, and expressed herself as being better.

She was desired to continue her medicine, and nothing was heard of her till the following Satur-

day, when the report by messenger was, that she was very ill, and begged she might be visited.

On the request of Dr. B. I went.

When I got to the bed-side, I found her in a state approaching stupor. I could rouse her, and she would answer questions—but in a confused manner, and immediately she sank into a sort of half-sleep.

She was evidently suffering under affection of the brain. I ordered blood to be taken from the arm; but, as is too often the case, the friends exercised an opinion, and decided that it was unnecessary. They omitted, therefore, to send the letter and order to the dispensary. On the following day, however, the aggravation of the symptoms caused alarm, the order was sent, and she was bled; but the moment of safety had passed, the relief was partial.

On Sunday, by order of Dr. B., she was cupped, after which, for the first time since her relapse, she recognized her friends:—the benefit, however, was only temporary. She soon became comatose, and on the Tuesday morning following, about 3 o'clock, P.M., she expired.

On removing the skull, we found the membranes adherent in one spot—near the falx—corresponding with an old ulceration in the right hemisphere. Beneath was a sinus containing a little chocolate-coloured fluid. The boundaries of this sinus, to the depth of an inch, had a yellow appearance.

The ventricles were filled with fluid, which was the proximate cause of death—the disorganization, above alluded to, being evidently of long standing.

One anomaly in Dyspepsia is, that it may and frequently does itself become an exciting cause, aggravating and even producing evils, which, when the result of other and totally different causes, are capable of disordering the digestive function, and which are, therefore, enumerated amongst its exciting causes.

Gout, rheumatism, cutaneous affections, and even mania, are aggravated, and frequently called into action, by a long continued disorder of the digestive functions. Gout has long been treated in connexion with the digestive organs.

In rheumatism also,—not strictly traceable to

cold,—the dyspeptic symptoms are equally well marked :—not only do they usher in the attack, but they accompany it.

The secretion from the kidneys is sufficiently indicative of this, and gives to the rheumatic, equally as to the gouty patient, the first notice of an approaching attack. There is, however, a form of rheumatism, which we always trace to cold, and, in this form, there is little or no disturbance of the digestive organs. The attack commences and progresses, in a manner quite different from what may be designated dyspeptic rheumatism.

In rheumatism from cold the pulse is different, the tongue is different, the invasion of pain is more sudden, and the privation of power in the part attacked more complete. In these attacks, too, there is seldom a remission. This form, moreover, is benefited by bleeding, which the other forms are not.

The rheumatism accompanied by leucorrhæa, as also gonorrhæal rheumatism, is constantly preceded and attended by dyspeptic symptoms.

In most cutaneous affections, attention to the

state of the digestive organs, is one of the most important indications to answer, as but few of them are purely local, and, when they are not so, yield only to remedies calculated to act upon the secretions.

Calculous affections almost invariably owe their origin, as well as increase, to derangement of the digestive organs; and the different amorphous sediments are chiefly attributable, according to Dr. Prout, to errors of diet.

Lastly, we have to mention as a possible, though, happily, not frequent consequence, of long continued dyspepsia, organic disease of the stomach itself. Let not the Dyspeptic, therefore, suffer unchecked the progress of a disease leading to such results.

Let him reflect, that whilst it renders the meridian of life one of suffering, it seems, as it were, to accumulate all its injurious powers, to load with infirmity its victims, at that period, when the system is least able to bear up against disease:—when energy diminishes;—when the thought of death begins to occupy the mind;—when we feel, that—the extremest term of life

accomplished—a few, a very few years must close the scene;—when the sources, from which we formerly derived comfort and enjoyment, no longer interest;—then it is, the effects of long neglected dyspepsia become painfully evident; and the crippled and suffering victim—surrounded though he be by affluence,—supplied with every external comfort,—drags on a miserable existence, and sinks at length, worn out by suffering, into a welcome grave.

THE END.

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