

A dissertation on the puerperal fever ... / [Pierre de Sales Laterrière].

Contributors

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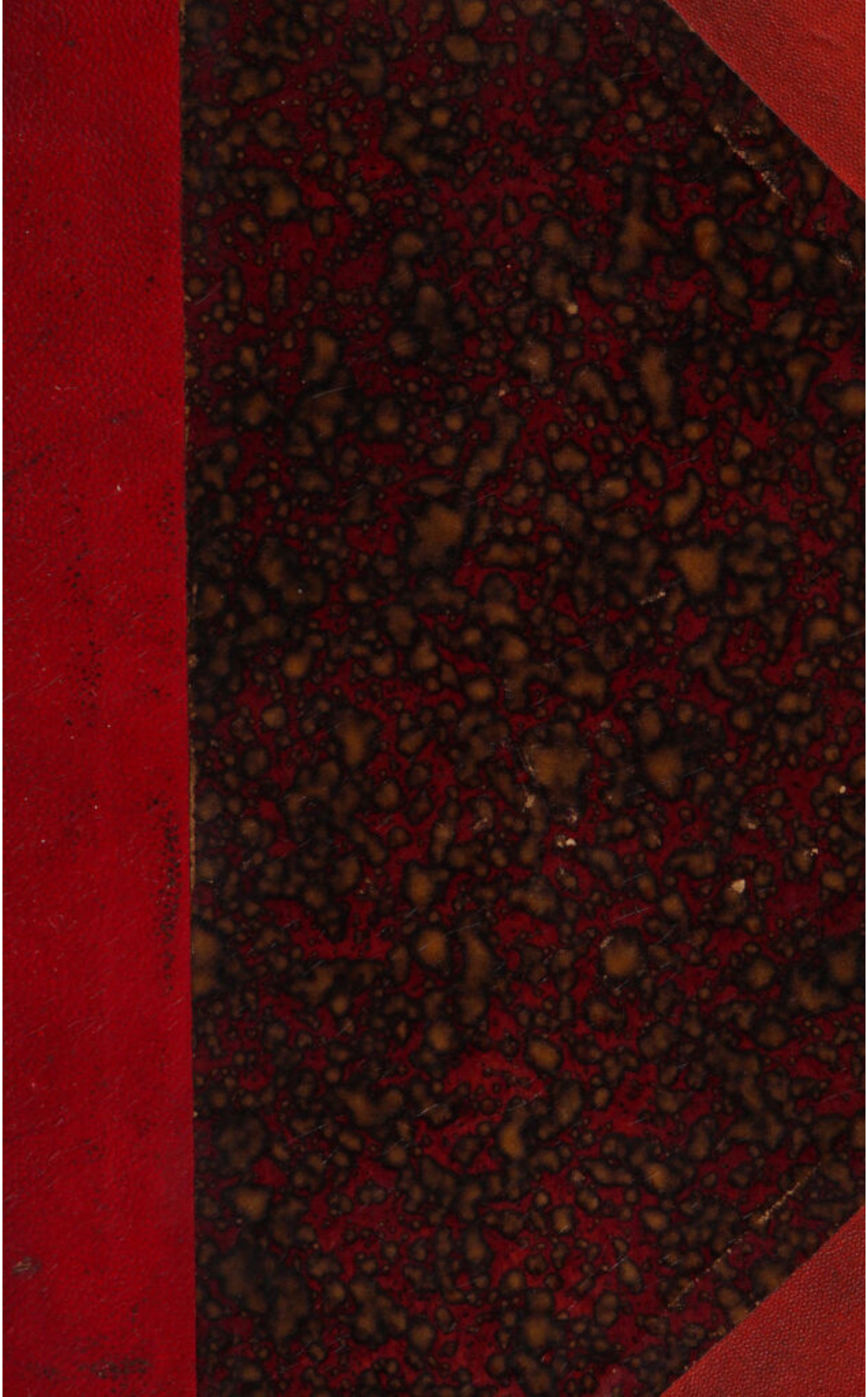
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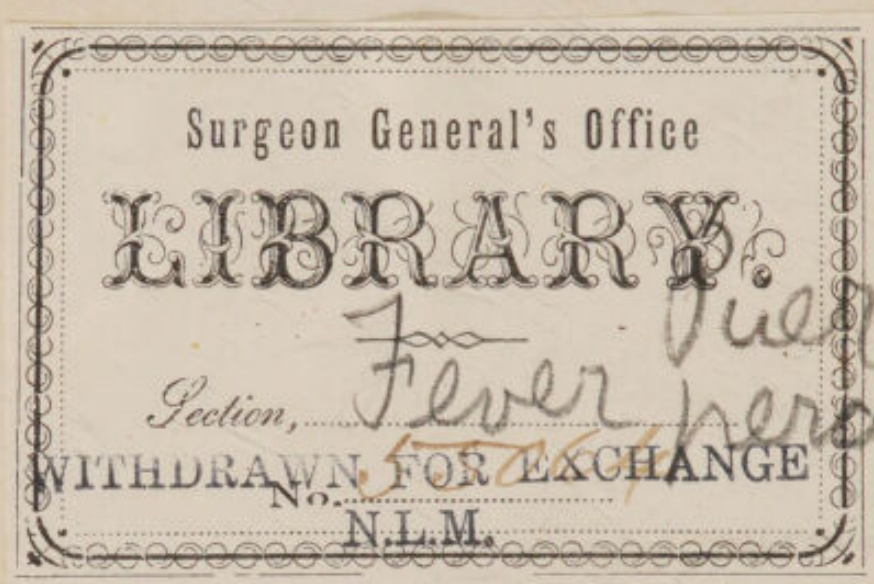
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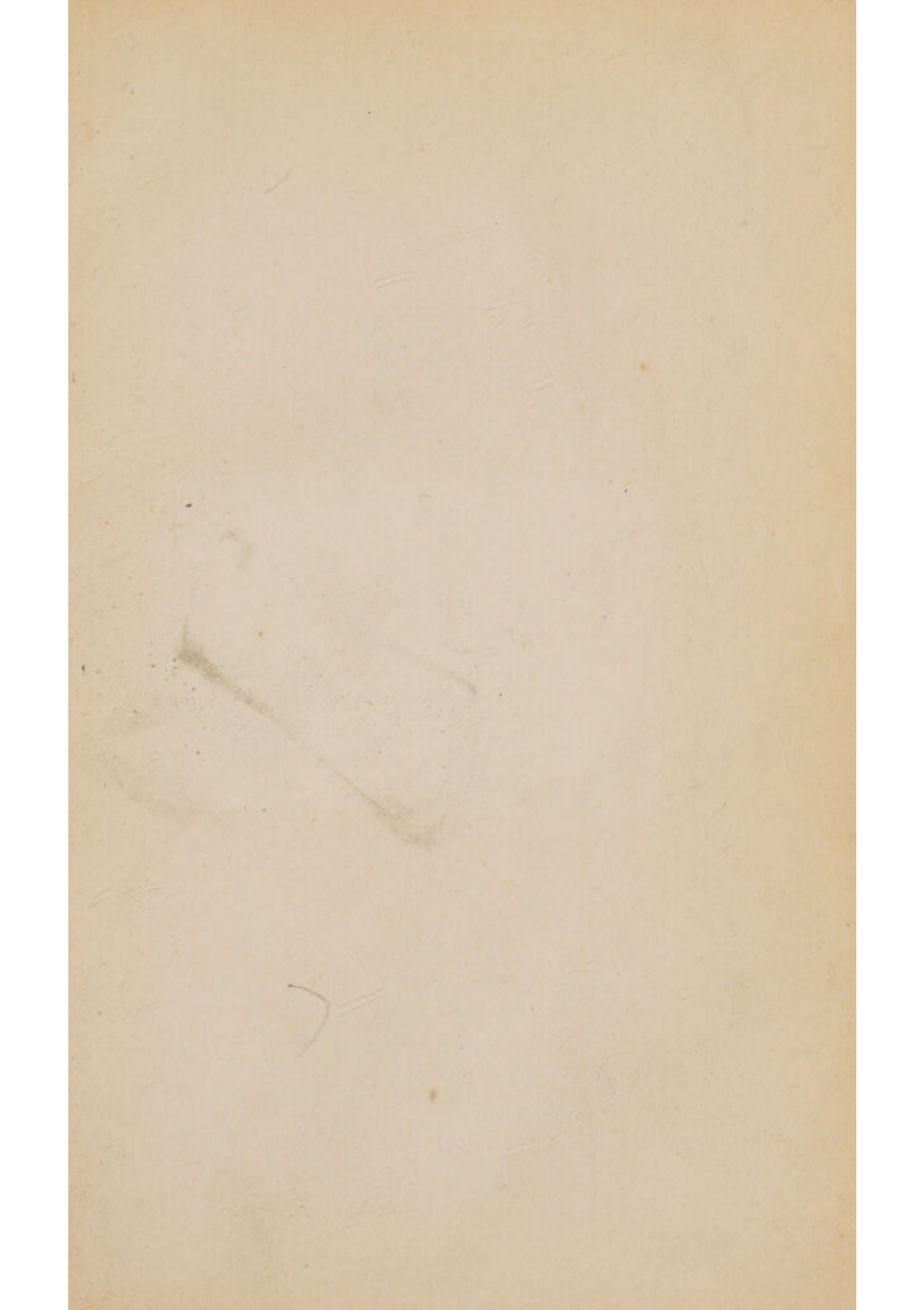


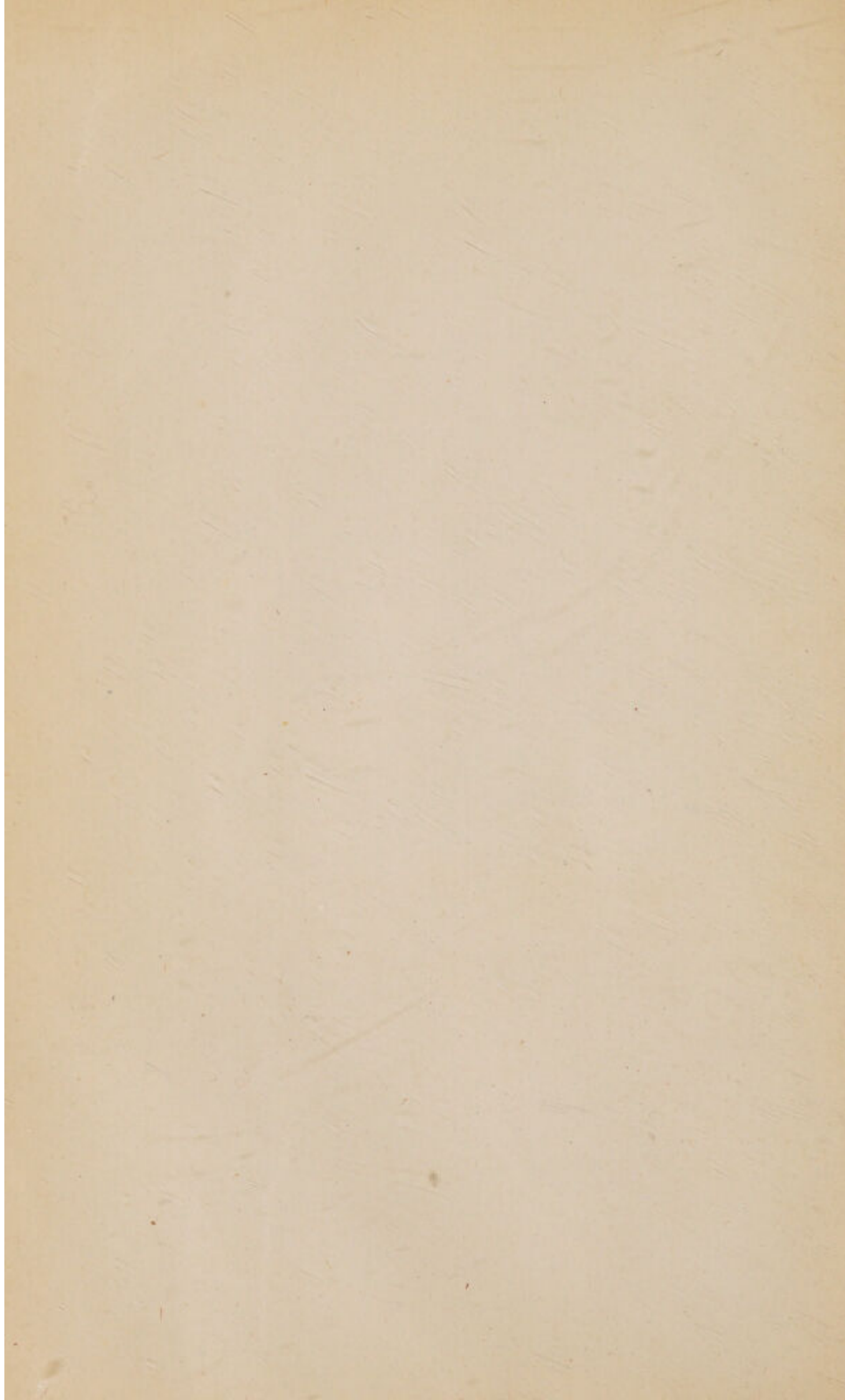
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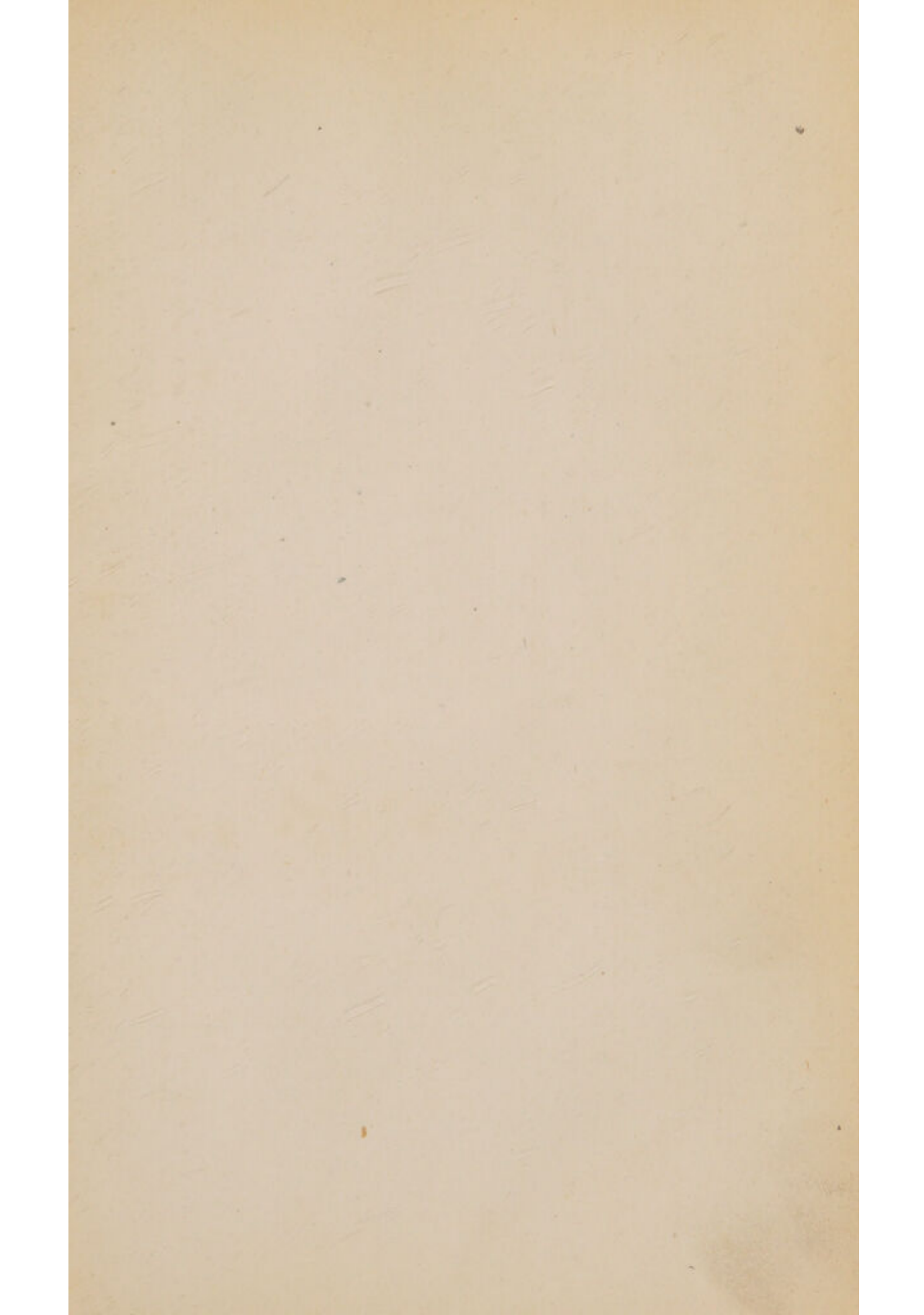


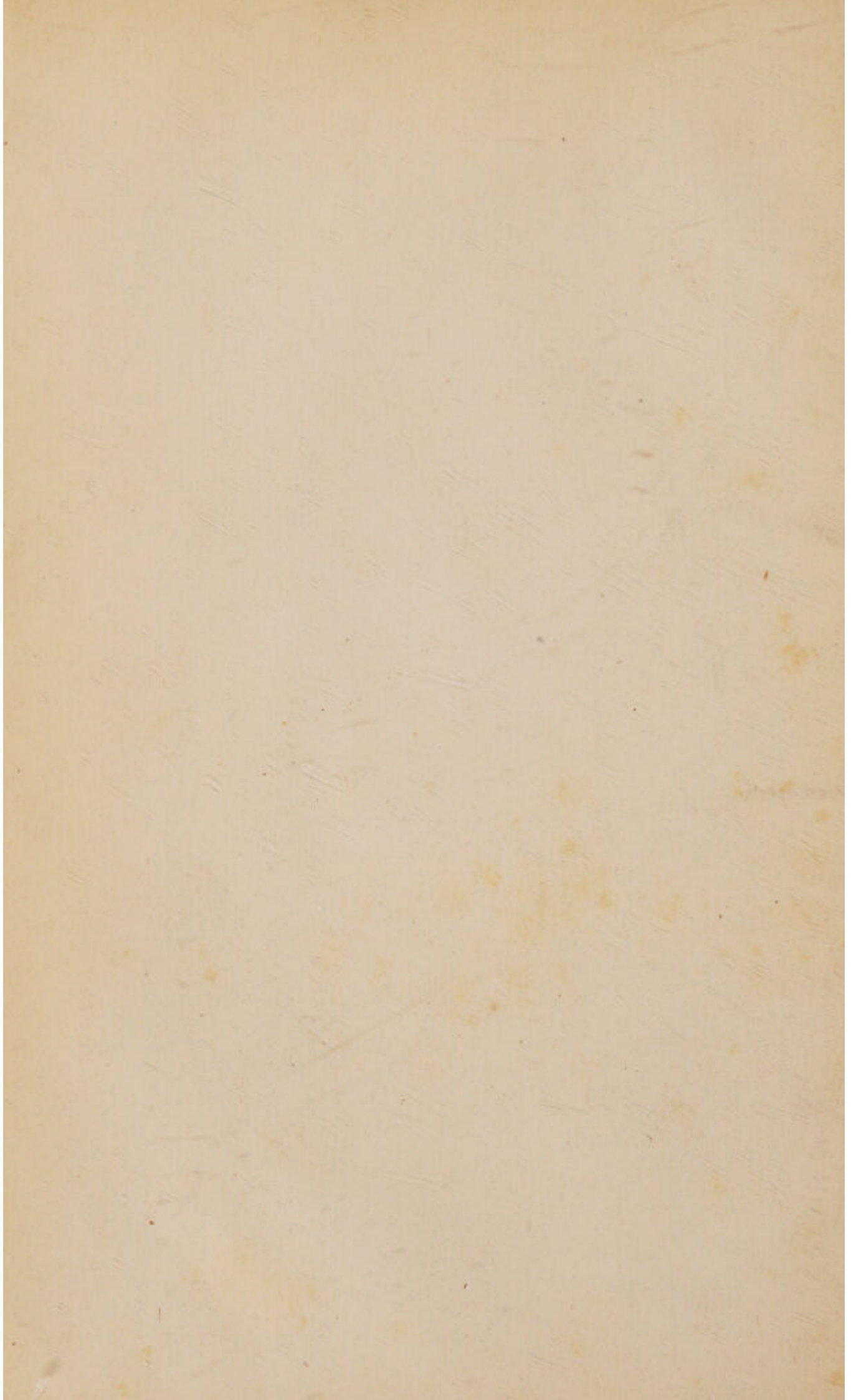


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THIS DISSERTATION
IS DEDICATED, WITH ALL RESPECT,

TO

JOHN WARREN, *M. D.*

Professsor of Anatomy and Surgery ;

BENJAMIN WATERHOUSE, *M. D.*

Professsor of the Theory and Practice of Physic ;

AARON DEXTER, *M. D.*

Professsor of Chemistry, and Materia Medica ;

GENTLEMEN not more distinguished by their
LITERARY ACCOMPLISHMENTS, and their
PROFESSIONAL ABILITIES, than respected
for their ATTENTION to STUDENTS, and
their TALENTS for INSTRUCTION ;

By their

Humble Servant,

PETER DE SALES LA TERRIERE.

THE
JOURNAL
OF
THE
AMERICAN
MUSEUM
OF
NATURAL
HISTORY
NEW YORK
1881



IT is not without diffidence that I appear before this HONOURABLE and REVEREND ASSEMBLY, in conformity to the laudable custom established in the University.

To produce a dissertation in a language I have never professedly studied, before I entered these walls, is not so easy a task as some perhaps may imagine : but relying on that candor which distinguishes a polite education, I am emboldened to offer you this specimen of my studies, hoping that every deficiency of language will be excused.

I shall say a few words for the information of those who may wonder to see a person of my age engaging in the study of Physic. The occasion of it is this ;—Canada, like most provinces at a great distance from the mother country, has become very deficient in medical knowledge. Not only the most approved English authors are unknown to most of us, but even the late French writers on physic and surgery are scarcely seen among us.

Ignorance and quackery having, from these and some other causes, spread among us, to the great detriment of the lives of his Britannic Majesty's subjects, it excited the attention of the legislature, and particularly of the humane *Lord Dorchester*, who, touched with a tender feeling for the sufferings of others, issued an Ordonnance, obliging
 every

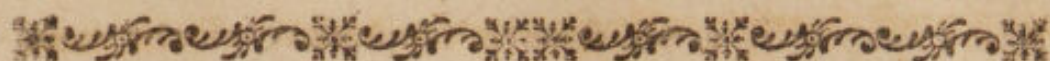
every practitioner to undergo an examination before a committee of physicians and members of the legislative council.

The result of this plan was,—A certain number having been examined, were approved, and permitted to go on in practice : a number were rejected as unqualified, and prohibited practising ; and some were passed conditionally, that is, they were recommended to pass some time at any university, where medicine was taught with regularity, according to the most improved British systems.

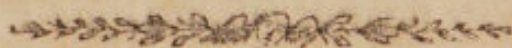
Finding myself included among the last, I took from the register's office what concerned myself only, and set off for the University of Cambridge, which had been strongly recommended to me as a medical school, where I could obtain every thing the ordonnance required of me.

Although I had formed an high idea of the University of Cambridge, and of the medical lectures in particular, yet I am happy in declaring that they far exceed my most sanguine expectations, and I shall account those circumstances, which I once was ready to conceive as grievances, among the most fortunate events of my life, inasmuch as they have made me acquainted with a set of truly learned men, whose urbanity, as well as abilities, I shall never cease to revere.





A
 DISSERTATION
 ON THE
 PUERPERAL FEVER.



THE puerperal fever is a disorder peculiar to women in child-bed ; and although it is probable it hath happened in all ages of the world, its cause is still involved in much obscurity, and its mode of treatment left, in a great measure, undecided.

The numbers cut off by this disease, in Canada, have moved my compassion, and excited me to enquire into its nature, and to try to ascertain the proper method of cure ; but alas ! I find even the most celebrated English physicians, who have written on the subject, differing in judgment with each other, and the same appearances after death explained in a different, and sometimes opposite manner.

Some practitioners doubt, whether it be a primary or a secondary disease. Some consider it as arising from an inflammation of the *uterus* ; others suppose it to be occasioned
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by an obstruction of the secretion of the milk, while many others imagine it arises from a suppression of the *lochia* merely.

It commonly begins, like other fevers, with rigour on the 1st, 2d, and 3d day after delivery, which is followed by great pain and foreness over the whole hypogastric region ; there is a sense of heat and throbbing about the region of the *uterus*. There is much thirst, pain in the head, chiefly in the parts about the eye-brows, a flushing in the face, anxiety, a hot, dry skin, quick and weak pulse, though sometimes it will resist the finger strongly, accompanied with other signs of inflammation ; a shortness in breathing, high coloured urine, and a suppression of the *lochia*.

A change in the quality of the *lochia* takes place, together with a tenesmus. Sometimes the patient vomits, from the beginning, a matter resembling what is discharged in the *cholera morbus*.

When the fever has continued a few days, the symptoms of inflammation usually subside, and the disease takes a putrid form ; a bilious or putrid diarrhoea supervenes, the stools become involuntary, and the patient dies.

Although this disorder begins sometimes like a regular fever, and at others shows symptoms of genuine inflammation ; yet it seems to differ from both, and exhibits those symptoms of irritation, with sudden depression of strength, quick and low pulse, dizziness, glazy eyes, and that species of delirium which denote a diminished energy of the brain ; the symptoms are such as commonly arise when the mucous
membrane

membrane of the throat, intestines, bladder or uterus are inflamed, which the skilful practitioner knows to be very different from the symptoms that arise when a thick, muscular part is inflamed. I cannot express my meaning better than by saying, that it is that kind of inflammation in which blood-letting is contra-indicated, and in which tonics are chiefly to be relied on.

The puerperal fever may be distinguished from the military, by the rigour being more violent, and without interruption: and the eruptions, which are critical in the military fever, procure no mitigation in the puerperal.

Physicians have differed nearly as much in their judgment respecting the method of cure, as in the nature of the disease. *Dr. Denman* supposes it to arise from a redundancy or preternatural acrimony of the bile, the secretion of which is irregular during pregnancy. *Dr. Manning* is of the same opinion, only he lays much stress on unwholesome air and bad diet.

Dr. Hulme differs from both these respectable physicians, says it is owing to an inflammation of the omentum and intestines, and maintains his argument by a variety of dissections; and the celebrated *Dr. John Hunter* is so far of this opinion, that he thinks it is possible even for men to have a disorder like it, and says that he has known similar appearances in the omentum and intestines of men, whose abdomens have been distended by dropfy.

Dr. Hulme readily admits, that unwholesome air, and bad diet, may powerfully operate in causing the disease. With this idea, *Dr. Hulme* proceeds to the cure by

emollient injections, and, if the abatement of pain is not soon procured, he recommends *sal catharticus amarus*, *oleum ricini*, and, in the intermediate spaces, the saline draughts of *Riverius*. The complication of inflammatory and putrid symptoms often puzzles the practitioner, who hesitates in doubt, whether he should bleed or not ; nay more, whether he should adopt an antiphlogistic course of remedies, or give the bark.

The equivocal appearances of the vomiting and purging, whether they be symptomatical or critical, is another cause of perplexity in the physician ; for what are the salutary efforts of nature, and what the ragings of a destructive disorder, he is unable to determine ; and this disease is too acute to allow him time to hesitate long.

As many women who die of a puerperal fever are afflicted with a diarrhœa, some have supposed this symptom as the most alarming, and have accordingly bent all their attention to restrain it ; and yet the experienced physician knows that numbers of women have recovered, apparently, through the intervention of this symptom. Some instances have occurred of hæmorrhage carrying off the disease, and this has been thought sufficient to justify venesection ; but *Dr. Denman* thinks we are warranted, by experience, to reject the practice as very hazardous, if not fatal ; and when we consider the situation of child-bed women, we should be apt, reasoning *a priori*, to conclude, that venesection was unnecessary.

Whether there may not occur cases in the coldest seasons, in such a climate as Canada, where bleeding would be beneficial, future experience must determine.

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In this view of the matter, let us examine in what form it may be expected to make it's appearance.

The state of pregnancy may be considered as having certain effects on the viscera of the abdomen in particular, and on the whole system in general. The pressure of the gravid uterus is the principal agent in producing them.

The evident consequences of this pressure are, 1. retention of fæcal matter in the intestines, and perhaps in the bladder; 2. diminished excretion of the bile, or difficult entrance into the duodenum; 3. an obstruction to the free course of the chyle; and 4. impeded circulation in the abdominal viscera. The last of these may perhaps be considered as the only one in which the viscera in particular are immediately interested.

The circumstances affecting the system in general, are,—Distension of the fibres of the uterus, which, from an extensive sympathy of parts with this organ, must necessarily increase the irritability of the nervous system:—From an accumulation of putrid matter in the intestines, an absorption of putrescent juices:—The collection of bile in the receptacles of the liver, which, by stagnating, will be exposed to the absorption of it's thinner and most diluting parts, and which will be the means of inducing constipation:—Debility through the want of a nutritious, cooling fluid in the blood.

A combination of these causes with certain peculiarities of the habit may heighthen the predisposition.

The causes dependent on parturition itself are,

1. Irritation

1. Irritation upon the uterus.
2. Accelerated circulation, and increased heat.
3. Sanguineous evacuation.
4. Suspension of the requisite discharges.

The first of these may very readily be conceived as exciting disease, by means of the sympathy of parts with the uterus; and it will conspire with the already increased irritability.

The second by giving activity to the retained stagnant fluids, as the bile or thinner parts of the fæces.

The third, by increasing the absorption of those fluids, the vessels of the receptacles being rendered more bibulous by the depletion. And

The last, by augmenting the quantity of colluvies, and by an application of putrid matter to the orifices of the uterine vessels, in addition to that contained in other parts.

That these may operate differently in different cases of predisposition, seems agreeable to the dictates of reason and common sense. The *degrees of violence* in the attack are allowed to depend much on constitution and on predisposing causes; and why may not the *nature* of the symptoms be dependant on them also? If it is granted that they may, are we not then justified in concluding, that the forms of this disease may be various in different cases, according to the predisposition of the habit? and may not the jarring opinions, and dissentient theories which the ingenious of our profession have advanced, be readily reconciled by these considerations?

Of the two leading theories that have been advocated by physicians, the one makes it an inflammatory, the other a putrid affection. Probably, in most cases, it is primarily inflammatory, and finally putrid ; but may it not easily be conceived, that a puerperal fever which, in a plethoric habit, where the vessels being turgid are less disposed to absorption, would in it's origin be highly inflammatory, might in a thinner habit, where the irritability is great, assume from the very beginning, a putrid type ?

I have been informed of an instance, in this Commonwealth, of two ingenious practitioners of eminence widely differing in sentiment on this disease, tenaciously supporting their opinions upon fact and experience, and yet supporting them in direct opposition to each other. Might not both of them be in the right, and even the method of cure adopted by each of them be perfectly justifiable, though the one recommended an antiseptic, and the other an antiphlogistic course ? They both practised according to the obvious symptoms of the malady ; the one, under appearances actually putrid, prescribed antiseptics ; the other, under those that were inflammatory, prescribed antiphlogistics.

The many causes of absorption indeed should render us cautious of phlebotomy ; but I conceive, it may sometimes be indicated.

It may, perhaps, be objected to what I have advanced, that if my theory is right, there is nothing specific in the puerperal fever.—

To this I answer—That from the irritable state of the

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uterus

uterus in particular ; from its vicinity to the sources of absorption ; and other peculiarities in it's situation immediately after parturition, I conceive such a variety in the character of the disease to be established, as may so far render it a disease *sui generis*, as to require a treatment very different from that of either the *synocha*, *typhus* or *synochus* ; and, if I dared, I would venture to give it a name that should designate it as a *puerperal variety of the genus synochus*.

Dr. Hulme's dissections have proved that in many cases of what is called the puerperal fever, an inflammation of the omentum and intestines was the *proximate cause*. This might have been combined with a diathesis phlogistica ; and from some of the *remote causes* above mentioned, they assumed this form. It is to be presumed, however, that Dr. Hulme did not mean to consider it as a simple enteritis ; but as a disease, the character of which depended on the connexion of the parts which were the seat of it, with the uterus ; thus constituting a distinct species in a manner similar to that which I have adopted above.

As to any inflammation of the uterus which may take place in consequence of parturition, I have neglected to speak of it as connected with this disorder, for this is another disease, and it is that which has been considered by Dr. Cullen under the name of a hysteritis.

I shall pay due attention to this subject, as cases occur, and hope, some time or other, to lay before you some farther observations, in addition to this imperfect sketch.



ERRATUM, in the title page. For *sæpa* read *sæpè*.



