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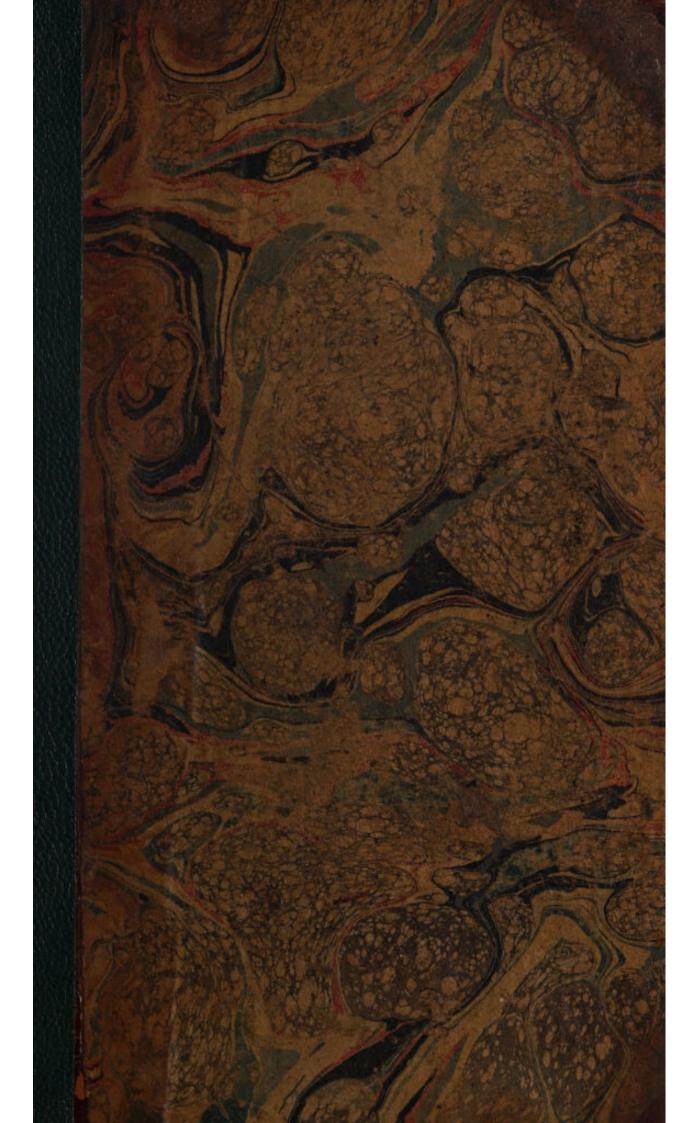
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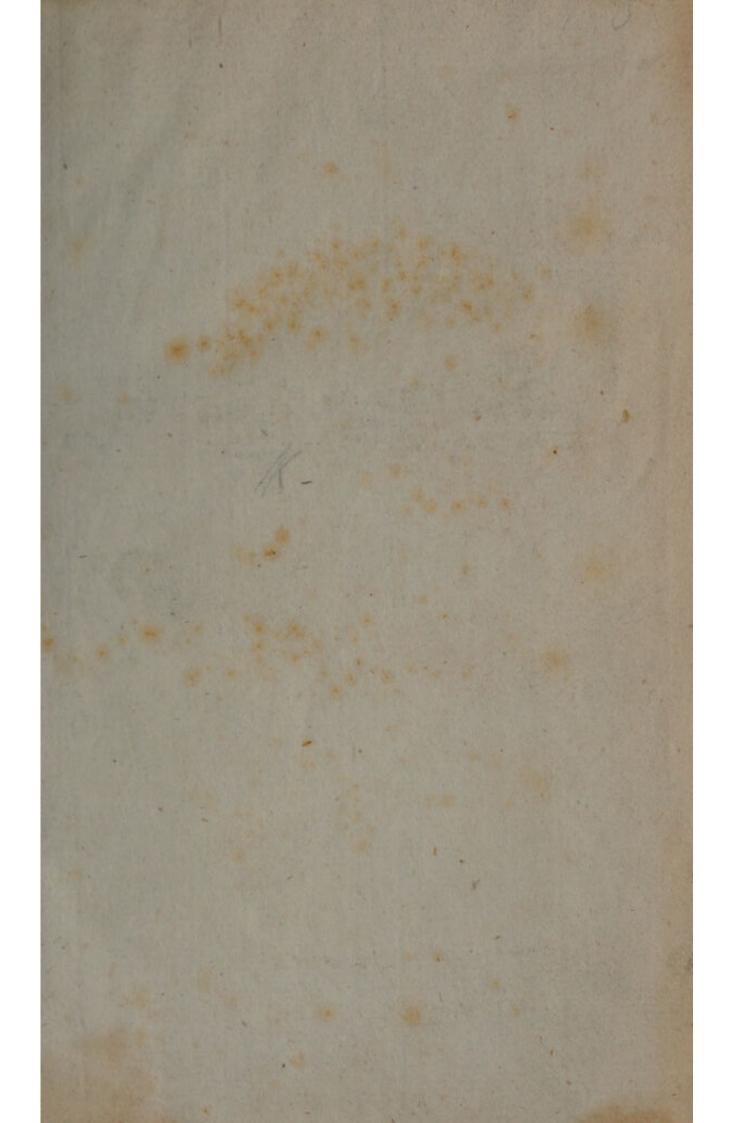
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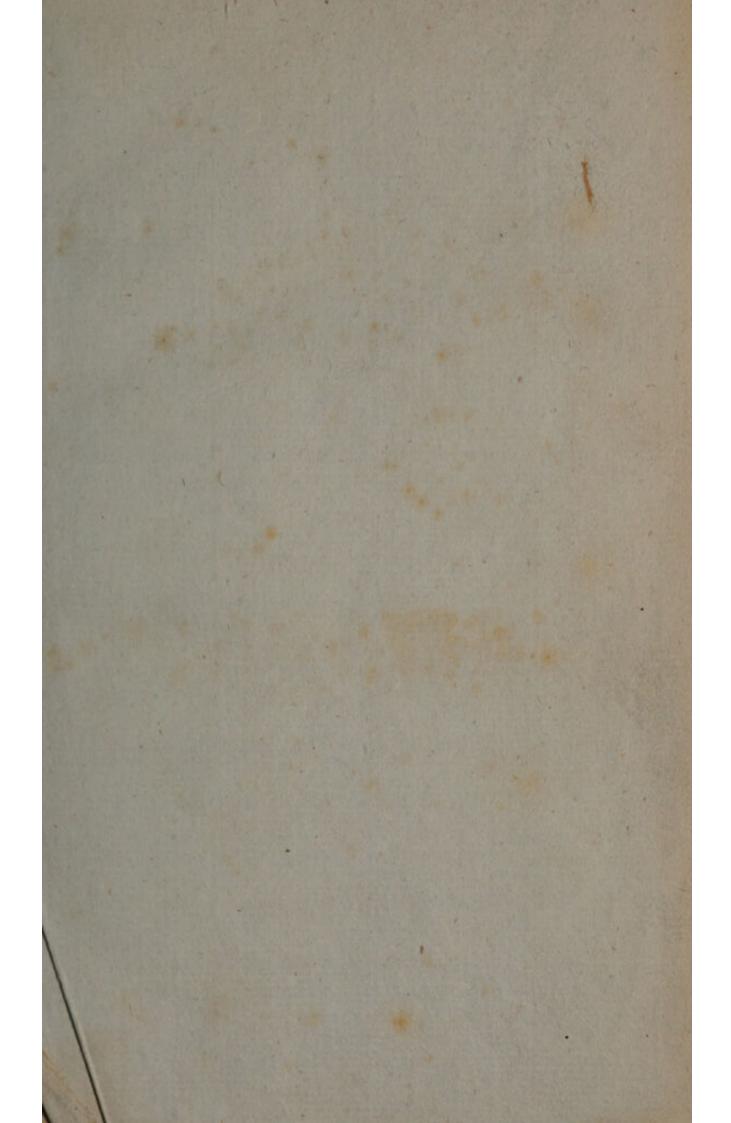
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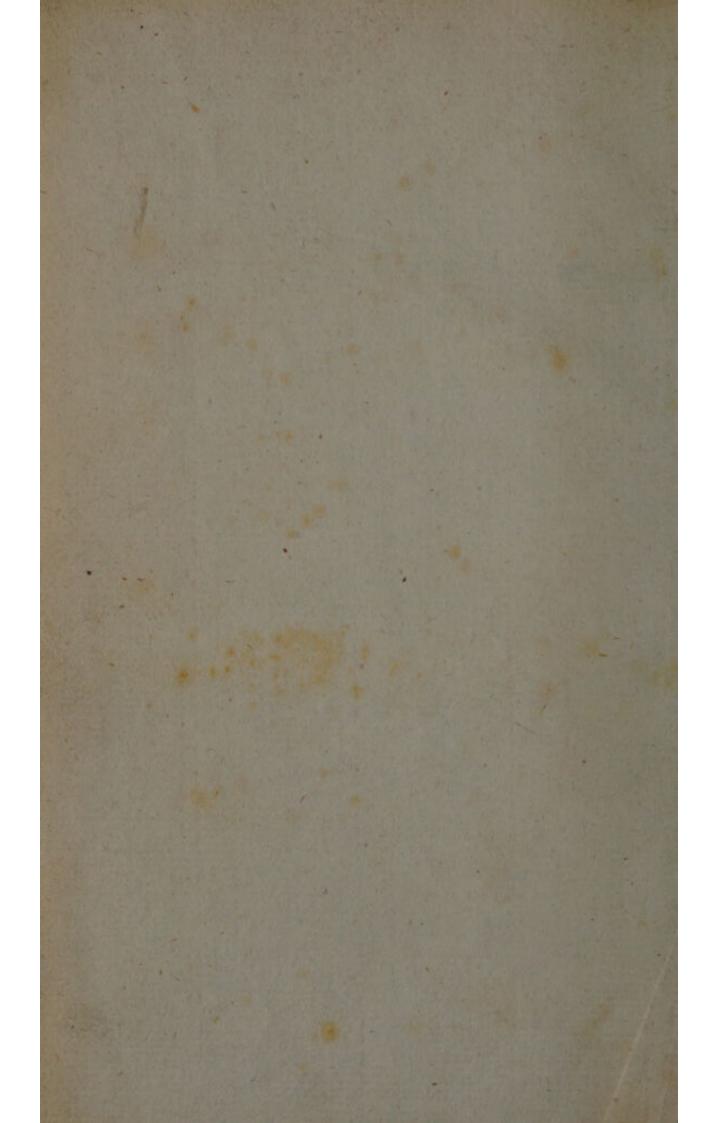


Gellen 1856.









A

DISSERTATION

ON

SIMPLE FEVER,

OR ON

FEVER CONSISTING OF ONE PAROXYSM ONLY.

Medicina igitur adhuc taliter comparata est, ut suerit magis ostenta, quam elaborata: etiam magis elaborata quam amplisi-cata

BACON, Aug. Sc. Lib. ii. Ch. i.

Solent autem homines naturam tanquam ex præalta turri et e longe despicere, et circa generalia nimium occupari; quando si decendere placuerit et ad particularia accedere, resque ipsas attentius et deligentius inspicere, magis vera et utilia sieret comprehensio.

IBID.

BY GEORGE FORDYCE, M.D. F.R.S.

SENIOR PHYSICIAN TO ST. THOMAS'S HOSPITAL, AND READER ON THE PRACTICE OF PHYSIC IN LONDON.

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MDCCXCIV.



GENERAL OBSERVATIONS.

TEVER is a disease, the existence of which no man could have the least fuspicion of, supposing him acquainted with the structure of the body, the properties of the folids and fluids, the various operations which go on in it in health, the manner in which they take place, the powers which produce them, the connection of the body and the mind, as well as thefe are known at this day to phisiologists, anatomists, or those who have studied medicine itself, or any of the branches of knowledge conducive, or which have been thought conducive to it. It is therefore only to be known by observing it in the diseased bodies of men afflicted with this distemper. Many are the authors

authors who have described it, both ancient and modern. It may therefore be supposed that the history of sever should have been rendered very perfect by this time, since it is one of the most frequent diseases, and has been in all ages, and in all countries, more especially as it is likewise one of the most satal; and as it so occupies the whole system, as to absorb during its continuance all the faculties, both of the body and the mind, in a greater or less degree.

Every man, however, who has read the various descriptions of sever which have been given by authors ancient or modern, of one country or of another, becomes immediately sensible, that neither its causes, rise, progress, or termination, are thoroughly known, or perfectly described, and of this he will be more fully persuaded, if he has frequently had occasion to see the disease.

The history of fever, therefore, is by no means thoroughly understood. That its treatment is not understood thoroughly appears clearly, as the practitioners of dif-

ferent countries, who attend patients in this disease, nay of the same country, town, and even district, although men of great learning in medicine, employ very different modes.

This subject, therefore, is not exhausted. Many physicians have laboured, if I may use the metaphor, in the geography and culture of this country. But the geography is far from being delineated, the culture is far from being brought to perfection. The author of this treatise can only measure a few bases, carry on a few triangles, examine perhaps the soil of a few fields, cultivate some yards on the surface, or bring out some of those treasures which lie deeper. Many and many new observers, many and many new laborers must be employed to bring the whole knowledge and cultivation of it to perfection.

Since, as has been already faid, nothing but the observation of the appearances which take place in a person afflicted with

B 2

fever,

fever, nothing but seeing the effects of medical instruments employed in the disease, can give mankind any idea, either of its history, or treatment. Nothing can give any man a power of improving the knowledge in this disease, either as to its history, or cure, excepting having seen it frequently; and one not acquainted with the previous knowledge of it, which exists in the world, cannot tell whether he has made any improvement or no. What has gone before, as far as has been related, is open to every man who will take the pains to read and give attention to what is written on the disease.

It is natural for a reader to enquire, what opportunities of observation a man has had who pretends to make some improvement, that he may not waste his time in perusing what contains nothing but dreams. Therefore, it is not impertinent to say, that besides all other opportunities of observing this disease, the author has been for upwards of twenty years one of the three physicians

of St. Thomas's Hospital, whose walls have contained nearly four thousand patients every year, where the proportion of fevers to other diseases is much greater than the general proportion. As fevers, and indeed all acute diseases give a preference in the admission of a patient, and many fevers originate in this, as well as in all hospitals. His attention has been particularly drawn to this, and other diseases, by describing them, and pointing out the manner of their treatment to students in medicine, three times a year, for thirty years. He hopes therefore, that it may not be thought improper in him to try to contribute his mite to forward the power of medicine, by endeavouring to distinguish this disease, and affift in extricating mankind from its painful and fatal effects.

Fever has obtained its name, in Greek, Latin, Arabic and Persian, principally from the idea of heat, *Pur*, in Greek, fire; *febris*, in Latin, from *fervere*, to burn, &c.

In

In the language of this country, the vulgar, if they are hot, fay that they are in a fever. The intolerable fensation of heat, which is often expressed by patients afflicted with this disease, I not only know by the complaints of patients, but have felt the excruciating effects of it myself.

It has been an idea that many practitioners in the art of healing have cherished, that in every difease there is some appearance, which being present, the disease is present; being absent, the disease is absent. It is indeed fo flattering a prospect, and would render a knowledge of the difease so perfectly easy, that men who have considered themselves in the line of medicine, have constantly been extremely apt to give way to the delufion. It is as if, whenever a failor approached an island, where there were chalk cliffs, he should immediately conclude them to be the fnowy cliffs of Albion, and the island therefore of Great Britain; or on the contrary, if he fell in with the Columns of Stafa, that he had fallen

fallen in with the Giants Causeway, of Irene. There are few appearances (symptom is the Greek name for appearance) that never take place excepting in one particular disease; and still sewer particular diseases which do not often take place without any one peculiar symptom. An inflammation, to give a strong instance, but perfectly grounded on anatomical dissection, may take place in the pleura without pain, since not only adhesions have been found on dissection, but suppuration both above and below the pleura, when the patient has never complained of any pain in the side.

Fever, of all other diseases, is that one in which a pathognomic symptom is least to be depended upon; that is to say, an appearance which does not take place when there is no fever, or a sever does not take place when there is no such appearance.

Let me examine those appearances which have been considered as pathognomic.

Heat,

Heat, that symptom which I have shown as preponderating in the ideas of all those nations whose medical knowledge we are acquainted with, certainly is not a pathognomic symptom of sever.

Until the time of Van Helmont, there was no means of measuring what many Chemists call at present the apparent heat of the body. He first invented a measure of heat by the expansion of air contained in a glass globe, pushing up when heated a fluid through a fmall cylinder, and allowing when cold the fluid to descend in the same cylinder, and by that means, measure the degree of heat by the expansion or contraction of bodies. This instrument has been fince much improved; fo that by the difference between the expansion of glass and mercury, as well as between other folids, fluids and vapors, we can measure very exactly what has been called the apparent heat of bodies. By the application of this instrument to the bodies of patients afflicted with fever, the author has often found the heat less than that which was found in the bodies of men in perfect health, although all the other appearances which constituted fever were prefent, even when there was foulness of the tongue, dryness of the skin, frequency of the pulse, delirium, and the patient felt himself very hot. That is to fay, the heat of the human body being measured by a very fmall thermometer, the ball being only the fourth part of an inch in diameter, and the cylindric stem proportionally small; the ball being put under the tongue, the mouth kept thut for four or five minutes, and the respiration carried on through the nostrils, the thermometer has been at 96°, 95°, or even 94°, in some cases. On the other hand, when a patient has felt himfelf very cold, this measure of heat has shown that the apparent heat of the body, by a thermometer applied in the same manner, was 104° or 105°. This kind of measure of heat being totally unknown till the time of Van Helmont, and not being brought to any kind of perfection till long after his time, we cannot ground any reasoning upon it that can be at all connected with the ideas of Greece, or upon any description of the feelings feelings of mankind with regard to heat in fevers, where this instrument was not known nor employed.

Bring next into confideration the feel of the patient, with regard to heat and cold. Although his feel of heat is more frequent and of greatly longer continuance than his feel of cold in any fever, which is not fatal in a few hours, yet he undoubtedly feels himself frequently excessively cold; very often, at the beginning of the first attack of fever; often at the beginnings of the attacks, when fevers have intermissions; not frequently, but not very uncommonly, in the middle of fevers, in which the patient, during the course of the disease, is never free from fever.

Another person applying his hand, &c. to the body of a person afflicted with sever, seels a part of the body hot sometimes, when the patient himself seels it cold: sometimes it may be felt to change from hot to cold in almost an instant, or from cold to hot in the same small period of time; and this by no means consonant, either to the feel of the person afflicted or to the thermo-

Heat therefore, considering it in any way that it can be measured, cannot be taken as a pathognomic symptom of sever; that is, an appearance which always takes place when a sever is present, and is always absent when a fever is absent.

It will hardly be thought necessary here to consider heat in the body, which is not shown by any of those measures which I have pointed out, and which has lately been conceived to exist in matter, without being sensible, by producing expansion of solids, sluids or vapors, or sensible to the feelings of mankind or other animals.

Some authors and practitioners have conceived, that cold followed by heat constituted a fever; but every man who has been conversant in this disease, and has attended to its attacks, knows perfectly that it often begins without any cold, measured either by

the thermometer, the sensation of the patient, or feel of a by-stander.

A lesser degree of heat, measured by the thermometer, the seel of the patient, or of a by-stander, we call cold: In some cases of sever the author has measured the heat, at the first approach of an attack, in all these ways, and very frequently throughout the disease, without ever finding a greater degree of cold than the heat natural to the body, from the first beginning, till the final end of the disease. This will be undoubtedly confirmed by the observation of practitioners and relations of authors.

On the other hand, cold, confidered in the sense I have explained, has frequently taken place, according to all the above measures, in diseases, which no practitioner has ever confidered as fever; in hysteric affection for instance. Cold therefore cannot be deemed a pathognomic symptom of this disease.

Frequency of the pulse has been more generally confidered as a pathognomic symptom

fymptom of fever. The pulse, that is to fay, the contraction and relaxation of the arteries, which is readily felt in any artery lying near the skin, especially if it be only covered by the skin, enumerates almost always the number of contractions of the left ventricle of the heart. In persons in health, indeed in animals in general in health, the number of contractions of the left ventricle of the heart is wonderfully uniform; in mankind, at an adult age, it is most commonly 73 strokes in a minute, so that it might be almost taken as a measure of time: in men hurried with business of large towns, it varies a little, tho' very little; in perfect health, the number of contractions is rarely found to be less than 70, or more than 75 in a minute. We find not uncommonly idiofyncrasies; that is, dispositions in particular persons, where the number of contractions of the ventricle is fewer; others where there are more than 73 contractions in a minute; but in those persons, in which this takes place, whatever be their number of contractions in a given time, it remains uniform; that is to fay, if the number of contractions

tractions of the ventricle be 60, then it is always 60 in health; if it be 80, then it is always 80 in health: it is very rare to find in fuch idiofyncrafies the number less than 60, or more than 80, and these idiosyncrasies are very uncommon, one not happening in an hundred times; or if we take those in which the number is more than 75, or less than 70, not one in a thousand. The contractions in children are more numerous, and more easily disturbed; in old men not uncommonly less. I felt the pulse of an old man in the Charter House, whose natural number did not exceed 26 contractions in a minute. The number of contractions in old persons is also less regular. In the present enquiry, we may lay afide what happens in children and in old men, and confider the natural number of contractions to be 73 in a minute.

When then frequency of the pulse is taken as a pathognomic symptom of fever, it is meant, that the pulsations of the arteries, that is the contraction of the left ventricle of the heart, is more than 73 in number in a minute. But it is by no means agreed by authors or practitioners, that any encrease above 73 in a minute is fever.

It has therefore been a question, what the increase is that constitutes the pathognomic symptom of fever; some have taken 90 pulfations in a minute, or any greater number, as the number which constituted fever. Fever, therefore, according to their fentiments, is always present, when in a perfon whose natural number of pulsations is 73 in a minute, become 90 or more in a minute: this has induced many to call all diseases sever, in which the pulsation of the arteries arose to go strokes or more in a minute. Every man may employ any term, in any fense he chooses, provided he defines Suppose therefore we admit that all difeases in which the number of pulsations are above go in a minute to be fevers, let me examine what difeases must be included under this name.

Supposing that there is a spasmodic contraction of the intestines, it frequently happens, that the pulfations become more than 100 in a minute; then this man must be faid to be afflicted with fever. If we exhibit to this man a dose of spices, the contraction of the intestines is carried off, and the pulse soon returns to its natural state. If a person goes down a dance, with more than ordinary velocity, the pulfations are frequently more than 100 in a minute, and therefore this person is afflicted with fever. If a woman should suddenly meet the object of her love, her pulsations are often 100 in a minute, she then likewise is afflicted with fever. But thefe, and an hundred other cases which might easily be brought, are very far from the disease which I am about to describe, very far from the fevers of all the great practitioners of Greece, Arabia, or even among the majority in modern times.

Frequency of the contractions of the left ventricle of the heart may be present without sever; on the other hand, sever may be present

present without more numerous contractions of the ventricle of the heart. The author has feen in many instances a fever take place, and go on as a continued fever, fo that in the middle of the fecond week, the pulse has been frequent from 100 to 110, or even more, the tongue covered with a brown fur and dry, the skin dry, great depression of strength, costiveness, violent pain in the forehead, the eyes stupid, delirium, strong evening exacerbations; in fuch cases the Author has known the pulfations become as few as 60, 50 or 45, even in a minute, all the other appearances of the difease remaining the same, that is to say, as they are above described, the fever even encreasing in all other respects. This small number of pulsations, after continuing for two or three days, has given place to a number of pulfations as great as before, fo that if a man had attended to the other circumstances of the disease, and not felt the pulse, he would have had no reason to suspect that the pulfations had been fewer during that This the author has frequently shewn to the pupils attending St. Thomas's HofHospital, as it was shown to him by Dr. Cullen, Sir John Pringle, &c. &c. It has been observed by many practitioners, and some authors. We certainly should not in this case affirm, that during this time a patient is free from sever: therefore a sever may be present, and that in a great and even satal degree, without an encrease of the number of pulsations of the arteries, that is, contractions of the left ventricle of the heart.

The number of the pulsations of the arteries is therefore not a pathognomic symptom of fever, since they may be numerous without a fever being present, and less numerous than they are naturally, even in the worst case of sever.

If we examine the restlessness, anxiety, state of the tongue, head-ach, or any other of the symptoms which often take place in sever, we shall find that they also may be present when there is no sever, and absent in a patient afflicted with this disease, and therefore we cannot allow that there is any pathognomic symptom of sever.

DEFINITION OF FEVERS.

ANY diseases have been called fever, even by practitioners of great knowledge and observation, which the author does not mean to include in the number of fevers. In the first place, he excludes all affections of the system which depend upon any other disease. Thus, in phlegmonous inflammations, in pleurify, for instance, there is often frequency of the pulse, greater strength of the pulse, and hardness; foulness of the tongue; loss of appetite; want of fleep. If the inflammation be carried off, all these appearances fubfide of themfelves, they only depending upon the inflammation of the pleura, and therefore are, according to this rule, not to be confidered as fever. So in inflammation of the intestines there is frequency of the pulse, with contraction, hardness, and frequently

quently obstruction, pain in the forehead, dryness, and dusky colour of the skin; the tongue is covered with a brown fur, with great depression of muscular strength, convulfive contractions in the extremities, naufea and vomiting, costiveness; &c. If the inflammation of the intestines is carried off, these appearances all go off, they depending entirely upon the inflammation of the inteftines, and, therefore, according to this rule, cannot be confidered as fever. In eryfipelitous inflammation, that is inflammation of the skin, all the last enumerated symptoms may arife. This inflammation may be cured by the application of alkahol diluted with water, and all the fymptoms affecting the other parts of the fystem disappearing, they cannot be confidered as fever. The fame fymptoms may arise in the dysentery, and if the intestines are restored to their natural state, go off, and therefore cannot be confidered as fever. In gangrene and mortification, fimilar fymptoms may arife, and continue, notwithstanding that the dead part is cut off; still I do not include them in fever, because the wound has a tendency

to gangrene and mortify, and does actually, in a great proportion of cases, gangrene and mortify. It is this disposition to gangrene and mortification which keeps up these appearances, and therefore they depend upon another disease, and are not to be included in fevers, for fever does not give a wound a tendency to gangrene and mortify. If these appearances then constituted a fever, they would not give a wound a tendency to gangrene and mortify. If a phlegmonous inflammation rifes in the parts furrounding the dead part when it is not cut off, thefe fymptoms do not appear at all, or if they have 'taken place they fubfide. So in like manner, if the dead part be amputated, and the wound has a disposition to good suppuration, which it has fometimes, although rarely, then the appearances, which I have last enumerated, go off if they had taken place, or if they had not taken place before, they do not arise. So in rheumatism, afflicting a particular part of the body, or taking place in various parts by metastasis, it happens frequently that the pulse becomes hard, full, strong, and frequent; the tongue is covered with a white crust,

crust, loss of appetite, great increase of all the fymptoms in the evening, and great relaxation in the morning; but these all depend upon the rheumatism affecting particular parts of the body, and if all the topical affections should be carried off, then these appearances which have been enumerated likewife fubfide, and are not therefore according to the rule laid down a fever. So in tetanus there is frequency together with obstruction of the pulse, head-ach, loss of appetite, naufea, not uncommonly want of fleep, delirium; but these symptoms depending on the spasmodic contraction, or disposition to spasmodic contraction in different muscles of the body, do not constitute a fever. There are many other diseases which might be enumerated that produce affection of the fystem, generally depending upon the continuance of the disease that gave occasion to them, none of these are for the same reafon to be called fever.

When a disease of a part of the body produces an affection of the whole system, in which there are many appearances similar to those which take place in fever, if upon removing such disease, the affection of the system does not immediately go off, but begins to subside, and continues gradually to subside, such affection, for the same reason, cannot be called sever.

The next rule is, that a disease which affects a part of the body only, that is, any particular member of the body, such as an arm, the head, stomach, &c. and does not affect the other parts of the system, or which produces affection of other parts of the system, depending only on the affection of that part, cannot be called sever.

Practitioners not well versant in this disease, have frequently supposed themselves sagacious in discovering such diseases to be severs. Thus an hemicrania, which takes place by paroxysms, which sometimes begin with coldness, and produce frequency of the pulse, soulness of the tongue, loss of appetite, heat, and which observes sometimes a quotidian, tertian, or quartan type, has been

been called and conceived to be a fever, of which it has nothing of the essence.

It is not to be concluded from what has been faid, that a fever cannot exist along with any other disease. A fever may begin first, continue for some time, and another disease may arise afterwards without carrying off the fever; it may continue along with it; the going off of the fecond disease may not carry off the fever; but the other disease being carried off, all the symptoms of fever may still remain, and it may go through its course. This seems to be a case which has been with difficulty understood by practitioners. For example, a man shall be seized with a coldness, anxiety, depression of strength; the coldness may be followed by heat, frequency of the pulse may take place, head-ach, foulness of the tongue, and other febrile symptoms; then there shall arise after some hours, or even after some days, pain in the fide, encreafed on inspiration, and constant with cough, difficulty of breathing, hardness, fullness

fullness and strength of the pulse, and all the other symptoms of pleurisy: the pain in the side, and all the pleuritic symptoms may be removed by bleeding, and other remedies; yet after there is no longer any pain in the side, the pain in the forehead, the soulness of the tongue, depression of strength, and all the febrile symptoms may continue, and the disease may go through the remaining part of its progress just as if no pleurisy had arisen in it.

Such cases are rendered more difficult, in as much as it happens, not uncommonly, that another disease arising in sever cures the sever, and all the appearances which continue afterwards are entirely produced, or kept up by this second disease, the sever having entirely left the body. Thus, if a sever should take place, with coldness followed by heat, frequency of the pulse, pain in the forehead, great depression of mustial rength, and the other symptoms of sever; in two or three hours an instammation of the intestines may arise, and cure the sever, although, however, the sever is car-

ried off, the head-ach continues, and foulness of tongue, the pulse becomes more frequent, as well as small, and contracted;
but these appearances, although they may
be the same with those which took place in
the sever, yet depend upon the inflammation
of the intestines alone. If the inflammation of the intestines be cured by general or
topical bleedings, somentations, and other
remedies, which have no tendency to carry
off the sever, all these appearances will gradually subside, and cease in a very short time
after the inflammation of the intestines is
cured.

It was thought necessary, before entering into a description of sever, to consider these preliminary subjects. The description of the disease is next to be entered upon.

A fever is a disease which no knowledge of the structure of the human body, as far as it is at present known, no knowledge of the properties of the fluids, as far as they have hitherto been investigated, no knowledge of the action of the moving parts, as far as they have hitherto been observed, could give the smallest ground of supposition, that this disease could ever have existed. In showing its history, therefore, observation of the discase is to be entirely adhered to, without any reasoning why, or how any thing in it takes place, or without any theory, as it has been called. It would be just as fruitless, at least for any useful purpose, as if a geographer were not to describe a country, but reason why an hill should be placed in one region, valley in the other; why one shore is rocky, another sandy; instead of actually giving the situation of the hills and valleys, the rockyness or sandyness of the shores.

A fever is a disease which affects the whole system; it affects the head, the trunk of the body, the extremities; it affects the circulation, the absorption, and nervous system; it affects the skin, muscular sibres, the membranes; it affects the body and affects likewise the mind. It is therefore a disease of the whole system, in every kind of sense, but it does not affect the various parts of the system uniformly and equally; but on the

the contrary, fometimes one part is much more affected in proportion to the affection of another part; sometimes those parts which were most affected at one time, are least affected at other times, fo that the appearances which are the principal ones in one fever, are by much the flightest in another fever, or fometimes are totally absent. This has given great ambiguity to this disease. To describe it, it is necessary to suppose a case, in which all the apppearances which ever take place as effential to the disease should be present, and in an equal degree, though no fuch case ever happened, especially as the presence of one appearance does not, in any degree, necessarily imply the absence of another. For instance, in most fevers there is pain in the forehead, in some there is no pain in the forehead; in most fevers there is foulness of the tongue, in some the tongue is of its natural appearance; but the presence or absence of head-ach has no influence on the foulness of the tongue, and the presence or absence of the foulness of the tongue has no influence on the head-ach; fo that there may be great head-ach, and great foulness of the

or there may be no great head-ach, and great foulness of the tongue in one patient; or there may be little foulness of the tongue, and great head-ach in another patient; or there may be but little foulness of the tongue, and little head-ach in another patient; or there may be head-ach in another patient; or there may be head-ach with no foulness of the tongue in one patient; or there may be foulness of the tongue, and no head-ach in another patient; or there may be neither head-ach nor foulness of the tongue in another patient; and so it may be of any other two symptoms whatever, which occur in this disease.

Fevers take up different times in their natural duration; sometimes they go through the whole of their natural course in eight, ten or twelve hours, so that the patient is seized with the disease, all the symptoms arise which constitute the essence of it, the natural cure takes place, terminates the disease; or in other words, a variety of different appearances take place, the disease is entirely terminated, and health restored in

this period of time. This, therefore, must be confidered as a complete fever, fince every thing which is effential to fever happens in it. If a man making a journey goes with the velocity of the wind, and another with that of a fnail, the journey is equally performed, although in different times. If the journey confifts of one stage, or of many stages; in the first instance; the journey will be completed in one stage as perfectly as in the other, it will be completed in the feveral stages. When a fever goes through its whole course in eight, ten, or twelve hours, it has completed its existence as perfectly as if it had taken eight or ten months. If it completes its course in one stage, it has completed it as perfectly as if it had gone through many fimilar, or even diffimilar stages. This is clearly the idea of Sydenham, one of the very first authors for accurate observation, as well as many other great authors and practitioners.

If a disease completes its course in a short time in some cases, and in others takes a longer time in completing its course, it is sometimes best to consider its history in the one case, and sometimes in the other.

other. If there is not time for the appearances to be observed distinctly, then undoubtedly we should take those cases where the course of the disease occupies a longer period of time. If, on the contrary, there is sufficient time for observing with great enough accuracy, all the different appearances in that case, it is better to take the disease which occupies a smaller period of time in its course, because it is less subject to be mixed with any other disorder, the appearances of which may be improperly taken for the appearances of the disease which is meant to be described.

A fever which goes through its course, and is completely terminated in eight, ten, or twelve hours, gives sufficient time to obferve all the essential appearances which take place in the disease, and therefore it is to be first attended to.

A fever which terminates in less than a twenty-four hours, terminates in less than a day and night, therefore was called by the Greeks ephemera. Many modern authors,

fuch

fuch as Boerhaave, have confidered any little disorder that arises from exercise, eating too large a quantity of food of difficult digestion, drinking too much wine, or any other fuch cause of a disease, which terminated in lefs than twenty-four hours, an ephemera; but these, like Boerhaave himfelf, have not been clinical practitioners, that is practitioners who attended any confiderable number of patients confined to their beds with fevers. The author has feen feveral fevers in which all the effential appearances took place, and terminated in eight, ten, or twelve hours. It is fuch a fever that I am now, therefore, in the first place to describe, taking afterwards all the other varieties which occur.

A fever frequently begins with very marked fymptoms all at once; that is, a man in perfect health feels himself diseased to a great degree, in less than a minute. For example, supposing a man sitting down to dinner with a great appetite, feels himself instantly so much affected with this disease as not to be able to touch a morsel. He may be thus suddenly affected at any time in the twenty-four hours, but not equally; a great many more fevers begin between eight in the morning and eight in the evening, than take place between eight in the evening and eight in the morning. There is a remarkable difference; according to the author's observation, at least ten fevers take place between eight in the morning and eight in the evening, for one that takes place between eight in the evening and eight in the morning.

It is to be remembered, that the history of fever is to be given here as it arises from observation, and not from any supposition. It is not therefore pretended to be understood, why this difference of proportion should take place. Some have supposed that the sun's passage over the meridian has an effect, but there does not appear to be any ground for this, because the number of first attacks of sever, which take place at noon, or near it, are not remarkably greater than those which take place two or three hours sooner or later. In short, sever is a disease, the whole of the appearances of which

which have been in no ways accounted for.

The first appearance which generally takes place is uneafiness and restlessness, a general uneafiness, the patient feeling himself ill, but incapable of fixing upon any particular pain in any part of the body. This uneafiness affects the mind at the same time. Perhaps in this case it is the mind which is first affected. It is indeed a proposition risked with great doubt, that a difease should be in the mind, not in its moral fense; those disorders which are found in the mind, connected with bodily disease, having been confidered as arising from fome derangement in the body. This Jubject will be confidered more fully afterwards, the author offering it with the greatest diffidence. Along with this uneafiness there is a restlessness, the patient wishing to change his place or posture frequently; the mind likewise cannot rest upon one object, it often wanders from one to another subject. At the same time there is a feel of weariness which resists the disposition in the patient to change his place and posture, and resists the dispofition

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fition of the mind to alter the object of its attention, rendering the wish for such constant changes ineffectual: with these arises an actual inability of exerting the muscular powers, or performing any of the functions of the body; and also an actual inability of exercising the great faculties of the mind, the powers of perception, memory, arrangement of ideas, and of the judgment, in the same degree that they existed in health. The degree in which these take place is extremely different in the attacks of different fevers; but these appearances are very rarely absent, although indeed they may also happen in other diseases.

This inability, which is common both to the body and mind, has been called weakness or debility. It appears to the author, that it ought rather to be called depression of strength, as he believes it has been by some authors. That is, it is not that the powers of the body are lost, but they are prevented from acting by the disease. If the powers of the body were really taken away, then this inability of exerting the powers of the

body and the mind would remain after the disease was removed; but it does not remain, for if the disease ceases in eight, ten, or twelve hours in any of the ways hereafter described, the inability ceases likewise, and both the body and mind can exert themselves with a vigour nearly equal to what they could have done just before the disease began, or in perfect health. If fuch a weight were laid upon a fpring moving a machine as to overcome it without destroying its elasticity, that fpring would be prevented, either altogether, or in a certain degree, from keeping up the motions of the machine; but that unufual weight being removed, the spring would immediately be enabled to perform all its former functions with the fame force and regularity as before fuch weight was laid on; whereas when application had been made which diminished the elasticity of the spring, then it could not produce its former effects until means had been taken to restore its temper and force.

Along with these, but more commonly after them, it frequently happens that the patient

patient feels a fense of cold, the same kind of sensation that he feels when surrounded by a colder medium than he is accustomed to; he wishes therefore to go near a fire, or into the rays of the sun, or to put on warmer cloathing; he does not therefore feel a sense of internal but external cold; it is not that sensation which is often called a feel of cold in the stomach; but it is, as it were, that the patient was in a cold atmosphere, or put on cold cloaths. This appearance is vastly more uncertain than the restlessness, sense of uneasiness, weariness, and inability.

It is not my intention to enter into any phisiological disquisition, because all phisiology, as far as it is hitherto known, is totally or nearly useless in explaining any thing which happens in sever; therefore, I do not enter here into any of the ideas that have been held with regard to the causes, which have been thought to govern the temperature of the bodies of animals. I proceed, therefore, to relate this singular circumstance, that when a thermometer, applied

plied to a part of the body, shows a greater degree of heat, the patient himself feels himself cold, and sometimes in that very part where the thermometer flows a greater degree of heat. Practitioners have not been fufficiently correct in relating this phænomenon; for if a man feels cold in the exterior parts of his body as if he were in a cold medium, which is a fensation, as has been already mentioned, which takes place in fever, he does not conceive that his tongue is cold; if then a thermometer be placed under the tongue, fo that the heat measured by it is greater than in the natural state; it is not to be taken as contradicting the patient's feeling, because he did not feel that part of his body cold. In the very parts which the patient feels cold, as in the hand, for example, a thermometer fometimes shows a greater degree of heat than it would have shown if it had been applied to the hand under all the fame circumstances when the patient was in health. This is by no means always the case, for it frequently happens, that in the exterior parts of the body, the thermometer accords cords with the feel of the patient, more frequently indeed in the exterior parts of the body than under the tongue, and as far as we can employ it within the body, or examine the heat of the interior parts by any means. The thermometer shows sometimes in the attack of sever a less degree of heat than takes places in the natural state of the body: 94° of Fahrenheit's thermometer is the lowest that has been observed by the author, in as far as the interior degree of heat could be ascertained with a sufficient degree of precision.

Bodies, by certain means, may be heated only. For example, the rays of the fun heat bodies; but the absence of the rays of the sun, or any action of the sun, does not cool bodies. In other words, the sun being on one side of the earth heats bodies, but the sun being on the other side of the earth does not cool them. The cold which takes place when the sun does not heat any part of the earth, arises always from causes which do not depend upon what part of the earth is objected to the sun. So

friction heats bodies, but the absence of friction employed in any way does not cool them; when the friction ceases, the loss of heat which it produced is totally dependant upon causes with which friction has nothing to do. In other cases, causes which produce heat have fimilar ones which produce cold. So in fevers, fever produces cold without any other means except the fever itself. A physician, or a by-stander, holding the hand of a person in the attack of a fever, feels, in less than five seconds, a great degree of cold in that hand. A thermometer applied, falls to a lower degree than it would have done if applied some seconds before, even if it had been previously brought up to fomething more than the ordinary heat of that part of the body, and therefore in a much less time than the heat of the body could possibly have diffused to the surrounding medium. In Europe, we always live in an atmosphere colder than the natural heat of the body, therefore the human body is always hotter. If the cause, whatever it may be, that produces this greater degree be removed, and prevents it from acting fufficiently

ficiently strong, a greater degree of cold, as shown by the thermometer, would certainly take place, from the heats being diffipated to the furrounding fubstances. But there are parts of the earth where it happens for feveral weeks, that the heat of the atmosphere, and other mediums in which men live, is greater than that of the human body. Whether in fuch cases the attacks of fever are attended with greater degree of cold, as pointed out by the thermometer, we have no observation; but the author has very good evidence of the fensation of cold taking place on the attack of fever, even when the heat of the atmosphere, in the shade, is considerably above the natural heat of the body. This heat is very nearly uniform, not varying a degree of Fahrenheit's thermometer in any climate in health, when measured under the tongue, or by fuch means as can be employed to afcertain the heat in the interior parts of the body. The author therefore would prefume that an attack of fever has the power of diminishing the heat, as far as can be judged of by a thermometer, without its being diffipated to furrounding bodies, or diminished by any method by which

which a leffer degree of heat is given, by any other means than by fever itself. We judge of cold by the feel; that is to fay, if a fubstance of a certain temperature of heat be applied to the skin, or the mouth, or the stomach, or some other parts of the body. We feel a fensation of cold on touching the skin of a patient in the attack of fever. This fensation very often neither accords with the fensation of the patient, nor the degree of heat shown by the thermometer. This is an appearance fo extremely unlikely in itself, that the author, when it was related to him, thought it quite impossible. It may be found in many authors, although not laid down with great precision, but frequent attention to the attacks of fevers has convinced him perfectly, that a part which the patient feels cold, feels hot to a by-stander, and è contra. But this is very far from being always the case; it happens often that the patient and the phyfician, when he has his hand upon the arm of his patient, shall agree with one another perfectly in their idea of coldness, and the thermometer shall sometimes agree, and fometimes disagree with them.

In the attack of a simple fever, which is at present attempted to be described, the degree of coldness measured by the feel of the patient, the feel of the bystander, or the thermometer, is extremely unequal in different parts of the body. It is most equal to the patient himself; but that is common to the general fensations of mankind in health; for if a man should sit in a warm room, and there should be an hole in the door blowing against a particular part of his body, although the cold air be not applied to a circle of above two or three inches diameter on the furface of his body, he feels univerfally cold. To a thermometer, or a by-stander, the cold of different parts of the body frequently feels very unequal, and very fluctuating.

With these symptoms, a diminution of sensation takes place. Sensation is partly an affection of the body, and partly of the mind. In the first place, it is necessary that some impression should be made on some part of the body, or at least that some mechanical

mechanical affection should be produced, in order that an idea should be excited in the mind. As for example, the picture of an object must be painted upon the retina by the lenses of the eye, in order that the senfation of vision should take place. It is true, that a man fometimes may, and does conceive that he sees an object, light for instance, although no fuch object is painted on the retina; but this is memory, and not fensation, for no new idea of any visible object was ever acquired by fuch a fensation. It is well known, and I believe univerfally allowed, that all new ideas arise in the human mind from impressions made on the fensible parts, except such as arise from the consciousness of its own operations; but an impression may be made on any sensible part without exciting any idea in the mind. A man, for example, fitting on the bench of a play-house, had no idea of the hardness of the bench when he saw Garrick in Lear bring the body of Cordelia upon the stage. mind must be vacant to draw its attention to the impressions made upon the body, in order that ideas shall be excited by such

impressions. When we speak, therefore, of the sensibility of the system, we must be careful to discriminate between these two functions, viz. the impression made on the organ, and the sensation excited on the mind.

The first thing that is to be treated of is, how far the impressions made upon the body have their power of exciting ideas in the mind in fever diminished.

In the first place, in some cases the impression upon the body must be much less, when an extremity is really much colder than in a natural state. A substance likewise colder to the thermometer cannot produce the same impression of cold upon the skin of that extremity that it would if the extremity had been warmer, for the sensation of cold depends upon the temperature which the skin has been accustomed to.

In the second place, the depression of the muscular power may render the impression upon the body less perfect. The muscles of the eyes, by changing the convexity of

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the lenses of the eye, adapt the focus of more or less distant objects, in such manner as to paint their picture distinctly and completely on the retina; but if the muscles of the eye have their strength depressed, they cannot so adapt the convexity of the lenses of the eye as to paint the picture of the object so perfectly and distinctly, therefore the mind cannot take so distinct and perfect an idea.

Perhaps the same thing may be said of the ear, where it is equally necessary that not only the tympanum should have its due tone, but that likewise all the muscles and moving parts which actuate the small bones may have their powers depressed, and so may the bones of the sibrils.

That crust which begins to be formed upon the tongue in general, in the very first beginning of the attack of sever, may put the substances which produce taste at a greater distance from the sensible surface of it, and so may prevent the same mechanical effect from being produced. With regard

to the nostrils, if there be any mechanical reasons why vapours, or steams producing the sensation of smell, should not have the same mechanical effect, they are not investigated; but one is disposed to suspect that there is, because the sensations communicated by this organ are more apt to be weakened than those of most of the others.

It is not worth while to pursue this subject of mechanical diminution of fensibility to other parts of the body: but the mind certainly is also in many cases affected in such manner as not to be capable of receiving fenfations, impressed with a sufficient degree of mechanical force upon the body; fince with regard to the feel, for instance, when an extremity is really colder, as when it has been made colder by immersion in cold water, an application of water of a less degree of heat than would otherwise have occasioned a sensation of warmth, would produce that fensation. Yet in the attack of a fever, fuch a degree of insensibility, with a feel of coldness, has in many cases taken place, that even hot substances have

have been applied in fuch manner as to coagulate, nay, perform the chemical analysis of the part, without any sensation of heat having arisen in the mind of the patient; and on the other hand, the eye is so formed, that however its lenses may be slattened, or rendered more convex, yet a very tolerable image of a substance at some greater or lesser distance must be formed upon the retina; yet sometimes, at almost the beginning of the attack of a simple sever, no impression is made upon the mind from such picture.

The faculty, therefore, of receiving impressions in the mind is also hurt in fever.

But sensation is again to be taken in two other lights, to wit, being distinct or indistinct.

It is an ordinary fallacy that the mind is capable of taking distinct impressions from the same picture made upon the eye, from the same vibrations of the fibrils of the ear, from the same impression of vapour, of steams on the nostrils, or of substances applied

plied to the tongue, or to the skin, or the other fenfible parts of the body. It requires an exercise of the mind to receive fuch ideas distinctly. There can be no doubt but that a picture of an object may be painted equally on the eye of the rudest Indian, and the most polished of mankind, but it does not give the Indian the same distinct idea. But to avoid any thing that might be conceived to arise, from refinement of the pasfions, no one would contend that the Indian would be equally sensible of the difference of the flower of tormentil, and a tetradynamous plant of Linne with a botanist. In the attack of fever, this power of distinct sensation is diminished in all the organs of the fenses: this is one of those things which renders it often difficult to a practitioner to get a clear and distinct account of what the patient actually feels. Perhaps this is a fource of greater error in the description of fevers than any other. Many practitioners have conceived it was even useful to suggest feelings to patients which they had previously imagined they ought to feel in a disease. Many, with a laudable but mistaken view, have put the

patient in mind of a feeling that he may not have attended to, which the patient affents to. Some few perhaps to make a show to the by-standers of their being able to feel for the patient, or to divine his feelings. This has rendered the conception of the disease very erroneous.

The diminution of the power of fensation in all these ways is very various in the attack of a simple sever; but this will be considered more fully afterwards.

At the beginning of the attack of a simple fever, sometimes as the very first symptom, a pain arises in the small of the back: it is rather a sense of uneasiness than acute pain. It seems to occupy the lumbar vertebræ, although it does not refer accurately to any particular part of the small of the back. It might even be considered as an affection of the muscles, and as arising from the depression of strength, in consequence of the want of sufficient power to sustain readily the weight of the upper parts; but in sever this pain is equally felt if a man is in an horizontal posture, where the upper parts

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of the body are fustained by the bed on which the patient lies. It is extremely fimilar to a pain which takes place from weakness; but the pain or uneafiness which takes place in the back from weakness, is greater when a man is in an erect pofture, whereas, in fever, there is frequently no difference. It is often the very first fymptom which takes place, and even continues for an hour or two before any other arises; but it is also very frequently absent. The cause of this pain is not at all known. In diffection of patients who have died of fevers, in which this symptom was very confiderable, nothing has been found in the part where the fensation was felt different from the appearances which take place on diffection of patients who have died of fever, where no fuch fymptom was present, nor different from what has been found in patients cut off by many other diseases,

Diminution of secretion takes place along with these appearances in every part of the body. Diminution of secretion may arise from contraction of the vessels through E 2 which

which the fecreted fluid flows from the blood veffels, or it may arise from want of fufficient force in those vessels which propel it through the fecreting veffels. As the powers of the body are all oppressed in the attack of fever, it might be supposed that this diminution of fecretion was owing to the depression of strength; but then it is to be observed, that the fecretions continue diminished when the next stage of the disease comes on, when the action of the heart and arteries is evidently confiderably increased; therefore it would feem most probable that it is contraction of the small vessels, through which the fecreted fluid passes from the blood vessels into the cavity of the gland.

Along with these appearances, and sometimes at the very first beginning of the attack of sever, the tongue becomes covered with a crust of a very particular kind. At first it has frequently the appearance of an extremely viscid shuid just covering the upper surface of the tongue, but sometimes at the very beginning it is a solid crust of a whitish colour, adhering so firmly to the

tongue

tongue as not to be capable of being scraped off. In a fimple fever, which is here described, the author has had no opportunity to examine it by diffection; but fimilar crusts formed in complicated fevers he has examined. This crust is solid, is so connected with the upper furface of the tongue as not to be capable of being separated from it by any diffection. Examined by a microscope, on making a transverse section of the tongue, it gives at first fight the idea of a number of little bags rounded at one end, and tapering off to a kind of stalk, much fuch an appearance as we fee in cutting any of the fruits of the orange kind; but these are not bags containing fluids, but folid maffes, having the ame properties as the ordinary folids of the body, fuch as a muscular fibre, &c. when chemically examined. Similar crusts are formed in a great number of other diseases: this crust must be formed upon the furface of the tongue itself, for the masses of which it consists are vastly too large to pass through the excretory ducts of the glands, which open upon the furface of the tongue.

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In a fimple fever, which is now treated of, this crust is sometimes white, sometimes verging towards brown. When a flimy crust is formed at the beginning, the tongue is apt to adhere by it to the roof of the mouth, in fome degree; but when the crust is folid at the very first, or when being slimy at first, it becomes afterwards folid, there is no more adhesion to the opposite parts than in the found state of the body, and often not so much, as it prevents the fecretion of fluids from the glands of the tongue, fo that the tongue is drier than in its natural state. The under furface of the tongue, below the point, is hardly ever covered with this matter. The upper furface is often not covered with it equally; but generally when the covering is unequal in a fimple fever, the edges and point are less covered than the middle, and towards the root. The membrane of the other parts of the mouth are not incrusted with the same kind of matter in a simple fever.

It happens at the beginning of the attack of the disease, that the patient has a sensation

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which rife from the skin, as if, for instance, a number of little insects were walking over the points of these small hairs. This sensation we have hardly an English term to express; it has been called horipelatio. This appearance takes place generally at the very first beginning of the disease, when it is noted at all; for the great sense of restlessness, uneasiness and anxiety, drown the perception of it in the patient in many cases where it is actually present, and render it exceedingly difficult to determine how far it is a constant or very common symptom.

The colour of the skin changes often at the very beginning of the attack. The skin itself is colourless, or, in other words, white; the scarf skin is also colourless, but transparent. The blood flowing in the blood vessels is scarlet, that is a mixture of red and yellow; in the arteries the yellow is more or less lost in its passage through the capillary vessels into the veins; but when the circulation is going on, it retains a small portion of its yellow, even in the veins. On the whole, therefore, a colour

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is given to the exterior furface of the body, by the blood circulating in the small arteries, capillaries, and fmall veins, which verges from a pure red to a tint of yellow; fo that the external furface of the body is what we call somewhat of a florid red, in as far as its colour depends upon the blood circulating in the skin, or perhaps even somewhat under it. Between the fcarf skin and true skin, there are several membranes which are called together rete mucofum, of which there is one which is of a lighter or deeper brown, which is a mixture of red with a less proportion of yellow and blue than constitutes white or grey. This mixture is not always the same in different men; sometimes it is such as to approach more to white, and fometimes to approach more to grey, and this governs what is commonly called the complexion in men. Besides this membrane there are numerous glands, which fecrete a kind of oily matter of a dirty yellow, that is, a yellow fomewhat contaminated by a mixture of red and blue. In the attack of fever, the colour of the skin itself is not altered, the transparency of the scarf skin is somewhat diminished, the colour acquired from from the blood is very much diminished; the colour of the brown membrane and the sebacious matter remain and predominate, and give a dirty look to the external surface, which is very conspicuous.

At the fame time another appearance takes place in the skin. By a common error in the human mind, it is apt to take up what first offers itself to us. It was long before it could be inculcated into rude nations, that the earth was not the centre about which the whole of the heavenly bodies revolved; fo on confidering the bodies of animals, finding that the muscles, which are the principle agents in producing the motions of the body, confifted of fibres, it was supposed that a part, in order to be capable of contraction, must confift of fibres; and as no fibres could be shown in the skin in the human body, it has been believed by many that the skin was perfectly inert, and incapable of contraction; while there is no man, who was not blinded by his mind being pre-occupied by fuch prejudice, who has not daily evidence in looking at his own skin, of its being fometimes contracted, and applied to the muscles.

muscles, and other parts under it, so as to press upon them with great tightness, and at other times loose and easily moveable; sometimes smooth, soft, and equal, at other times contracted in wrinkles. In the attack of sever, it is contracted in wrinkles, and applied closely to the muscles, and other parts below.

In describing the diminution of sensibility, that of the particular parts has been left to be considered along with the other alterations which take place in them.

The fensibility of the skin is very much diminished in the attack of a fever. Of this one great instance is its insensibility to heat, which has been so great in some instances, as not to impress any sensation on the mind, when hot bodies have been apto it so as to coagulate the scarf skin, or even decompose the true skin, as has been obferved.

This infensibility to heat is not from the fensation of coldness, which has been already described, for it extends to the sensa-

gree of what is called numbness, or indistinctness of the ideas which are obtained by the feel of the figures of bodies; of their smoothness, or roughness, their hardness, or softness, &c. It is even extended to other applications that give pain as well as heat, as to pricking with sharp instruments, the application of stimulating substances, &c. The degree in which this numbness, or want of sensibility in the skin takes place, is various, but exists almost always more or less in the attack of a simple fever, and among the first appearances in the disease.

The eye in its appearance is also very much changed. Often at the very beginning of a simple fever, the exterior skin of the eyelids is affected in the same manner as the skin in the other parts of the body. The interior surface is not readily exposed to view; it is the exterior surface of the eye itself, and what can be seen through its transparent membranes which have been taken notice of. The exterior surface consists of the tunica albuginia, and retina, covered by

the tunica conjunctiva, which is in itself very thin, perfectly transparent, and colourless. The eye may be divided, as in common language, into the white and pupil of the eye. In the white, the tunica albuginia is in itself of a white colour with somewhat too great a mixture of blue; there run great numbers of blood-veffels; many of these are visible to the eye, many others may be feen if we apply any magnifying apparatus to the living eye; and we know from anatomical enquiries, that there are vast numbers too minute to be discovered by any means in the living eye. These carry blood of a florid, red colour, which influence the general colour of the white of the eye. Besides thefe, there are a number of glands which fecrete either mucous, or sebaceous matter. The sebaceous matter is of a dirty yellow colour, like the colour of bile, and by many when predominant has been confidered as actually bile; every thing in the body, however, which is of this particular yellow colour, is not bile; the wax in the ear, for instance, is not only of a yellow colour, but bitter in taste, yet it is not bile, differing from

from it in most of its other properties effentially. In the attack of a fimple fever, there are fewer blood-veffels vifible to the eye; the florid red makes much less of the general colour, and leaves the colour more to be governed by the bluish white of the tunica albuginia, and brownish yellow of the sebaceous matter, fo that the white part of the eye is more obscure, or less brilliant than in health. The iris, as feen through the cornea, in the attack of a fimple fever, is fometimes more contracted, fometimes more dilated than it is in the natural state of the body, but almost always it is less sufceptible of contraction or dilation upon a larger or smaller quantity of light falling upon it; and the same want of disposition to contraction and dilation feems to affect all the muscles which govern the figure of the eye, for it is well known that the eye confifts of feveral lenses which paint external objects upon the retina, but to form a diftinct picture of distant and nearer objects, it is necessary that these lenses should be of different degrees of convexity, and there are muscles adapted to give them greater or

less degrees of convexity, as objects at a greater or less distance are looked at; the eye is accordingly constantly changing its figure as it looks at more distant or less distant objects. These changes are very apparent, when the eye so changing itself is looked at, and the more particular the attention to any object, and the quicker this attention is executed, it is the more observable, and gives an idea of what is called acuteness in the eye. But on the attack of fever the muscles are not so ready to give it this change of form, fo that it appears dull, and as if the patient was not attending to any particular external object. Further, it would feem, that in order to obtain a true picture on the retina, it is neceffary that the eye should be directed to the object, and the quickness with which this direction takes place, also shows to the by-stander the attention of the mind to that object, and gives an idea of acuteness to the eye; but on the attack of simple fever, this quick change in the direction of the eye does not take place, and gives occasion likewife to an appearance of stupidity in the eye, in the attack of a fimple fever; but

moreover, even when the eye is not directed, by the mind's attention to external objects, to change its figure and position, when the mind itself is occupied with strong ideas brought up by the memory, the eye is apt to put itself in those positions, both with regard to its figure, and direction, but especially with regard to its figure, that it did when it received these distinct impressions; it often has an appearance of acuteness, as if it was actually adapting itself to receive these impressions,; but this does not happen in the attack of a fimple fever; whether the inaction of the muscles depends upon their own depression of powers, or on the mind's not exciting them, or both, can, perhaps, be hardly determined; but the whole degree of appearance of stupor is, perhaps, very improperly apt to be ascribed to the mind, whose effusions are rendered more sensible from the eye than any other organ of the body; and those who have considered the mind as connected with the body by the brain only, have commonly confidered this inactivity of the eye as dependant upon the brain.

The whole fecretory vessels throughout the body, secrete a smaller quantity of fluids. In the first place, the urine consists naturally of water, in which is dissolved a mucilage which is foluble in water heated to the heat of the human body; but not foluble in water of a less degree of heat; it, therefore, separates when the heat is less than that of the human body. In health the urine is transparent when first evacuated; but upon standing to cool, it bebecomes cloudy, or deposits a sediment. But in the attack of fever, this substance is no longer found, fo that the urine continues transparent when it has stood to cool. Since in all countries where we have descriptions of fever, the air of the atmosphere is colder than the human body, this difference has been always observed; but whether it would take place where the atmosphere is of the same heat with that of the human body we do not know; certain it is that the urine in health is rendered again transparent by heating it to the heat of the body. It may be that the fecretory veffels of the kidneys are fo contracted as not

to let this substance pass through; or it may be that it is not in the blood, but is formed in the kidneys in health, but not in fever. The quantity is so very small, not above a grain in a pint, even when the appearance of it is great, that it is impossible to detect it in the blood in health, and, therefore, this question cannot be determined; but the contraction of the. fecretory vessels of the kidneys, during the attack of fever, is evident from the small quantity at that time fecreted, as well as from its fometimes being of a paler colour. That the urinary bladder is also contracted in the attack of a fimple fever is evident from the small quantity of urine evacuated at a time; for if the bladder be much disposed to contract when a small quantity of urine gets into it, it is stimulated to expel it. There is a fmaller quantity of fæculent matter evacuated from the intestines during the attack of a simple fever. The faculent matter in the intestines confists partly of that part of the food which is not digested; partly of the bile, and other fluids fecreted into the intestines, which are not used during the digestion; or if they are used F

used and decomposed, are not absorbed into the blood vessels. If a man has eat heartily before the attack of a fever, the food not being digested, in less than fix or eight hours, it is either rejected by vomiting, or passes into the intestines, or remains in the stomach. First, the stomach does not act upon it, so as to make it go through the digestion necessary in the stomach, or to throw it into the duodenum, but fometimes it remains for feveral days in the stomach as the author has feen it rejected on employing an emetic, three, or even four days afterwards; but this cannot be the case in a a simple fever which does not continue four and twenty hours: fecondly, if it passes into the intestines, from the inaction of the intestines, from their depression of strength, itdoes not undergo the changes necessary to convert it into chyle, and therefore must pass forwards undigested; but the same inaction prevents the peristaltic motion of the intestines from going on, so as to carry it or the excre.nentitious parts of the fluids fecreted in the intestines forward to the rectum, so as to

be evacuated. This is one cause of there being less evacuation during the attack of a fimple fever. In the second place, there is a less secretion of the fluids which flow into the intestines, and in consequence less to be carried downwards, or to stimulate the intestines so as to encrease their peristaltic motion; from both these causes costiveness takes place. There is one exception, however, which must here be made, that if such nausea should take place as to produce vomiting, a much larger quantity of bile, pancreatic juice, gastric juice, &c. are often evacuated; but the author thinks these evacuations should rather be attributed to the second than to the first stage of the fever, as it never happens that a fimple fever, or a paroxysm of an intermittent, is fatal, if vomiting takes place. The dryness of the Ikin, of the tongue and mouth, and the want of fufficient fecretion in other parts, has already been noticed. If there be an ulcer in any part of the body, or a wound during the attack of a fever, it becomes dry, as the author has frequently observed, fo that the vessels which throw out fluids,

even among the muscles, are also apparently contracted.

The contractions of the heart, and in consequence the pulsations of the arteries become more frequent in the attack of fever. It has already been observed, that the number of contractions of the left ventricle of the heart were very steady in adults in health, and very nearly 73 in a minute; it increases in the attack of a simple fever, but this increase is frequently not among the very first fymptoms. The fever has fometimes come on, and continued for half an hour before there is any increase of the number of contractions; fometimes, however, greater frequency takes place along with the very first appearances; but this hardly ever happens without other symptoms of the fever being present at the same time. The frequency does not change all at once, but gradually from 73 to 74, 5, 6, and fo on to 80, 90, as far as 100 at least. In a simple fever, which terminates in 8, 10 or twelve hours, it is varely less than 100, and sometimes in the course of the disease rises to 130 or 140. In a simple

a simple fever, the frequency of the contractions is generally greater than it is in compound fevers, which is remarked at present, because practitioners being much more accustomed to see compound than simple fevers, may be apt to be impressed with the idea that too great a number of pulsations is astroibed to simple fever, the number which takes place in a continued compound fever being generally about 100 in a minute. But the varieties which happen in compound fevers are not, however, at present to be discussed.

It has already been observed, that greater frequency of the contractions of the heart was not in appearance absolutely necessary to constitute fever; accordingly, as it has just been observed, the fever may have come on some time before the frequency takes place. It is not certain, even that a simple fever may not prove fatal before the contractions become more frequent. Certain it is however that if a simple fever, or a paroxysm of an intermittent fever be fatal in the attack, the contractions most commonly become very

frequent, even beyond what can be counted. This frequency of the contractions of the ventricle of the heart is certainly a part of the attack of the disease: when the frequency has once taken place, it never goes off again in a simple fever until the whole fever has gone off: it is otherwise in compound fevers not very uncommonly.

The number of the pulsations of the arteries depends almost always upon the number of the contractions of the ventricle of the heart, just as the number of contractions of the ventricle depend on the number of contractions of the auricle; for when the auricle contracts, it throws blood into the ventricle which distends it, and stimulates it to contract. So when the ventricle propels blood into the arteries, it distends them, and stimulates them to contract. The number of pulfations of the arteries, therefore, must depend in general upon the number of contractions of the ventricle. If they acted, not by a muscular power, but by their elasticity, this must always happen. But that the arteries act by a muscular power,

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power, has been sufficiently proved by experiments and observations foreign to the present purpose. It may happen then, that an artery may contract by another stimulus, besides the distention produced by the blood thrown into it by the ventricle, and the number of pulsations of the artery, therefore be greater than the number of contractions of the ventricle, or the distention of the blood thrown in from the ventricle may not be sufficient to stimulate the artery to contract. Hence it happens, although very rarely, that the number of pulsations of the artery does not accord with the number of contractions of the ventricle,

From the contraction of the arteries being a muscular action, arise other varieties in the feel of the pulsations of the arteries, independant of their number; for the arteries may not allow themselves to be dilated to so great a degree by the force with which the blood is thrown into them by the ventricle. In this case, the artery, although it be the same with regard to its elasticity, will feel larger or smaller in the attack

of

of fever. It feels generally smaller. This fmallness may, however, arise likewise from another cause; for the ventricle of the heart may be contracted at a time that the blood is thrown into it from the auricle, so as to receive blood in finaller quantity, and throw it out in smaller quantity, and in confequence distend the artery less, or it may contract more feebly, and so distend the artery less; or, as has been said, the artery itself may refist the dilatation, and it would feem that all thefe things contribute to the arteries feeling fmaller in the pulsation at the beginning of the attack. It is to be observed, that in those attacks of fever, which are fatal, the artery continues to feel very finall, and feels smaller and fmaller till the patient finks. This fmallness of the feel of the artery goes off very foon in general; but that will be confidered afterwards when we come to consider what happens after the the attack of the simple fever.

As has been faid, if an artery only acted by its elasticity there would be no difference in its pulsations, excepting those which arose from from the different numbers of contractions of the left ventricle of the heart, the quantity of blood thrown into it at each contraction of this ventricle, and the force and regularity with which the ventricle contracted: but many other fensations are given by the pulsations of the artery. These other fensations, indeed all the sensations arifing from the pulse that cannot be meafured by any mechanical instrument, as the frequency can be by a watch, but which we may judge of from the fenfation itself, require practice in order to make the diftinctions, although they should not be very nice, as it requires a practical eye to make distinctions in painting, and a practifed ear in music. As, therefore, there must be fomething arbitrary in determining the different fensations given by the pulsation of the arteries; they have been represented very differently by different practitioners, fome making them very numerous, others very few. There is, however, one fenfation which is very generally allowed, that of hardness, which seems to the author to be in the beginning of the contractions of the artery,

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artery, and to be somewhat similar to the thrill of a large musical chord vibrating. Others have described it differently. This state of the arteries producing this sensation gives a particular disposition to the blood.

The blood confifts effentially of three parts, the red particles coagulable, lymph, and ferum. Of these the coagulable lymph, when extravasated, coagulates, and gives solidity apparently to the whole mass of blood. After the whole mass of blood is apparently become solid, there cozes out from every part of it a sluid, consisting of the serum, the water that was contained in the coagulable lymph, and extraneous matters that are sluid or soluble in water. A solid mass swims in the middle, consisting of the mucilage of the coagulable lymph, and the red particles.

If blood be let flow from a blood-veffel into a bason, sometimes the coagulable lymph coagulates almost instantly. In this case, the red particles and coagulable lymph are blended very perfectly together, so that

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the coagulum appears an uniform mais. But if the coagulable lymph, or as is commonly faid, the blood does not coagulate instantaneously, but continues fluid for several minutes, the red particles fall down from the furface, so that the blood divides before it coagulates, the upper part of it being a fluid without any red colour in it, but transparent and yellowith, and the lower part forms a red fluid. When the blood coagulates flowly, there is an upper crust, therefore, which has no red particles in it, and the lower part is a red folid, and when the ferum oozes out, the coagulum has the appearance of being covered on the furface with a bluish or yellowish membrane.

The state of the arteries which gives their pulsations the feel of hardness, gives the blood a disposition to remain stuid for several minutes after it flows from the blood-vessels into a bason. That this is the case is proved by attending to the beginning of a pleurisy, acute rheumatism, or any other disease in which the pulse becomes hard soon after the beginning of the disease. If, just

just before the pulse becomes hard, a vein be opened, and the blood be received into a bason, it coagulates immediately, and no crust is found on the surface of the coagulum; but if the pulse remains hard for an hour or two, and then a vein be opened, the blood will remain for feveral minutes fluid after it is received into the bason. It is, therefore, the state of the arteries, when their contractions give the fenfation of hardness, that occasions the alteration in the state of the blood. If a vein be opened and blood be let flow from it fucceffively into three different basons, and these be let stand until the coagulation, and extrication of the ferum takes place, it happens frequently that the crust, which has been described, appears in the first bason, and not in the second or third; or it appears in the fecond, and not in the first or third; or it appears in the third, and not in the first or fecond; or it appears in any two of them, and not in the third. It may be, and has been faid, therefore, that this appearance can show nothing, but is entirely vague. It has been said above, that the appearance of this crust crust on the top of the coagulum is owing entirely to the blood's remaining longer fluid after it is received into the bason, and so giving time to the red particles from their gravity to fubfide from the top. There are circumstances in the figure of the vessel in which the blood is received in the manner and velocity in which it flows from the blood-veffel into the bason, which makes it fometimes become folid fooner or later, which is the occasion of this variety; but if the basons be of the same size and shape, and the blood flows into them from the blood-veffel with the fame circumstances exactly, and the fame velocity, fuch variety is never found. It would be too great a digreffion to describe these circumstances at present; it is only to be observed, that when there is a strong sensation of hardness, the disposition the blood acquires from thence of remaing longer fluid after its extravafation is fo strong as to overcome these accidental causes of variety, and a crust is always found upon the coagulum. But when the state of the arteries which gives the fensation of hardness is not strong, then these these external circumstances frequently overcome the disposition of the blood to remain longer sluid, and give the appearance of a crust on the surface of the coagulum.

The flate of the arteries in the attack of a fimple fever is fuch as to give a peculiar fenfation to the finger during their contraction. The greatest part of authors and practitioners have called this fensation hardness; it, therefore, undoubtedly approaches near, or actually is the fenfation of hardness; but it must be observed, that where there is this fensation strongly impressed upon the finger by the pulfation of the arteries in a fimple fever, and blood is taken from a blood-veffel, and received into a bason, under all the circumstances most conducive to keep it long fluid before it coagulates, it nevertheless coagulates soon, and no crust is found upon its furface. This being the case, it is clear that it is greatly to be suspected that the state of the arteries, which gives this sensation to the finger, is not that state which gives this fenfation of hardness, and the author thinks that he can determine the difference

difference between these sensations perfectly.

There is, therefore, another kind of fenfation which takes place, if the finger be applied over an artery in a fever, to which the author gives the name of obstruction, he not meaning to impress any idea with regard to the state of any part of the body, but merely as a name to distinguish it from hardness. This state of the arteries giving this feel of obstruction, is constant in the attack of simple fever, and remains at least till the fever begins to go off. By what has been faid, it is not meant by any means to fay that hardness of the pulse does not happen frequently in fever, but it does not happen immediately on the attack. When hardness of the pulse takes place, it is a symptom produced in a stage of the disease, which is to be taken notice of afterwards: but hardness and obstruction are fo little the same, that obstruction and softness are not at all incompatible; the more violent the attack, the greater the feel of ob-Aruction.

When the attack of a simple fever is very violent, the pulse is not only frequent, small, and obstructed, but the heart and arteries are otherwise deranged in their action. Generally, as has been faid, the times which the contractions take up are equal, but when the attack is very violent, they are fometimes unequal, and fometimes the time of a contraction is loft, then we fay that it intermits. This inequality of the action of the heart produces an inequality in the action of the arteries, whose pulsations become unequal and intermitent in fever fimple or compound, or in any stage of it; this is always a very dangerous fymptom, excepting where it also took place when the patient was in health, and before the disease arose, but in the attack it is particularly hazardous.

When these things have taken place, and often at the very first appearance of the disease, pain arises in the head. Pains arise in the head in sever from different causes, and in different manners, but that which forms part of the attack is that which is be treated of.

Many authors have described this pain as depending on the state of the brain; but in the author's opinion erroneously: its seat is most commonly in the forehead over the eyes, and feels to the patient as external; sometimes it likewise occupies the back part of the head, with an equal external sensation; sometimes it feels to the patient all round the head. It is a constant pain, inassemble as it does not go off entirely, but varies sometimes in degree, although it gradually encreases, for the most part, as the attack goes on. It is not accompanied with any external appearance.

Most uneasy sensations are called pain; they differ from one another, some being acute and pungent, some distensive, &c. But this is an uneasiness or pain which is accompanied with a sease of weight, and though often extremely violent, yet not acute, distensive, or sore, but resembling pain which arises from spasmodic contraction. It is encreased often very considerably by light falling upon the eyes. The same kind of pain takes place in hysteric G affection,

affection, and other diseases. A kind of similar pain or uneasiness arises all over the body, which a patient often describes a pain in all his bones, not being able to particularize in what part of the body it is felt.

This pain affects the extremities. It differs from that foreness which takes place in the second stage of the disease, although it likewise continues often during the second stage, and goes all through compound severs when their paroxysms run into one another. It occasions a great restlessiness and uneasiness.

Delirium is a fymptom which arifes frequently in fever. Some have confidered delirium as a disease of one species only; but the author thinks he can distinguish several different species which appear not to depend upon the same cause. Delirium is a derangement in the sensibility of the organs of sensation, and a derangement of the powers of the mind, and not uncommonly of the functions of the body. In its slightest degree, the sleep is attended with numerous

and diffreffing dreams, which renders it unrefreshing. The patient, when he just wakes, is some time before he can attend to the impressions made on the organs of senfation. He does not know at first his bed, his bed-chamber, or his attendants for some minutes, but feems to awake, as it were, a fecond time, and becomes perfectly fenfible. In a little greater degree the imagination is disturbed, and ideas float in the mind without train or connection, and rapidly; unless his attention be ftrongly excited to some one object, he does not attend to the impresfions made by the organs of the fenses, but rather takes his ideas from memory than from the objects around him. If his attention, however, be excited, he is capable of distinguishing the surrounding objects perfectly. As the delirium encreases, the faculty of distinguishing the objects that are around him gradually diminishes; he begins to talk incoherently; a number of disagreeable ideas run now rapidly through his mind without any kind of connection. He is sometimes in a church-yard, fometimes falling from a precipice, fometimes wandering in an un-

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known country, fometimes purfued by wild beafts, &c. An immense number of such ideas keep hovering in his mind; the difeafe still encreases; he becomes perfectly infensible to external objects; the evacuations take place involuntarily, and without consciousness; he has an uneasy feel in the skin, and in consequence picks the hairs, or rather attempts to pick the hairs from his bedcloaths; he sees a number of blackish spots flying in the air, which he attempts to catch: even in this state the patient may recover. But when it comes to its greatest pitch, the fwallowing and breathing come to be affected; when this is the case, he is almost always cut off. These appearances take place in all kinds of delirium, and that which takes place as a symptom of the first stage of fever, in a simple fever, is attended only by these appearances.

With these symptoms, a sense of weight, fullness and uneasiness takes place in the breast, sometimes tumour and hardness about the pit of the stomach. This anxiety and restlessness is totally different and independent

of that universal restlessness which takes place all over the body, already described; they are frequently in very different proportions to one another, the feel of the one is very diffimilar to the fenfation which the other excites. It is that kind of anxiety and restleffness which arises in grief, fear, and other paffions of the mind, which is, at the same time, attended with paleness, and diminution of fize of the veins, which are feen fuperficially. It would, therefore, be fufpected to take place from more blood in the large veins pressing on the heart than could well pass through the lungs. In those diffections which have been made of patients who have died in the attack of a fimple fever, the large veins going to the heart, that is the vena cava both fuperior and inferior, the right auricle of the heart, the veins of the lungs have been found distended with blood to a much greater degree than they are commonly, when death takes place from other causes.

Sometimes difficulty of breathing also takes place, and cough; but this is by no means constant.

While these derangements take place in the other parts of the body, the stomach has particular affections in itself, independent of those which it has in common with the other parts of the system. Besides the sensations of taste, smell, hearing, and feeling, there are others which do not depend upon, nor are received from the mouth, nostrils, eyes, ears, or skin.

No language has ever yet become fo copious as to express the varieties in the fenfes. Those sensations which we receive from other parts of the body than what are commonly called the organs of the fenses, are expressed by the term we apply to the fensation received by the skin. We say, for example, that we feel hunger and thirst. Although we say that we feel pain, yet the idea held generally, is not that pain is particularly attached to the skin, or other organs of the senses, but that it is in various parts of the body. Hunger is commonly referred to the stomach. It does not feem, however, that it is always clearly an affection of the stomach. When the bloodveffels

vessels have been greatly emptied, either by encreased secretions, or blood flowing immediately from the blood-veffels; by want of fufficient nourishment in health; by want of nourishment or wasting of the fluids during the progress of a disease: if the person should come into perfect health, and only remain weak, the appetite is generally very great, and even beyond the powers of digestion. The hunger, therefore, in this case seems rather to be an affection of the blood-veffele, a defire to fill themselves, than any particular affection of the stomach itself. On the contrary, when the vessels are very full, there is often no appetite, although the stomach is not in the least incapable of digesting a large quantity of food if thrown into it, without inconvenience. Although hunger, therefore, or want of it, is generally referred to the stomach, it may be doubted, in some degree, if it be an affection of the stomach at all times. It is not meant to be faid by any means, that hunger can take place when the stomach is diseased, excepting in that disease, the principal symptom of which has been

confidered as confishing in a voracious appetite.

In the attack of fever, the sensation of hunger not only does not take place, but if it was frong, the moment the attack begins, it ceases. The author has known several instances, where persons sitting down to table with a strong appetite; an attack of fever fuddenly taking place; in less than two minutes have been unable to eat any thing, and have been feized with perfect aversion even to the fmell of food. This aversion to the smell, or to the fight of food, or its even being mentioned, is often very ftrong during the attack of fever. What happens with regard to this in the other stages of fimple fevers, and during the continuance of compound fevers, will be taken notice of afterwards.

Nausea likewise happens often at the first attack, and this is encreased to such a degree, as to occasion vomiting. Commonly vomiting does not take place at the very beginning

ginning of the attack; but the difinclination to food encreases gradually to nausea, then to vomiting, which in some cases is very fevere, not only the contents of the stomach being evacuated, but likewise those of the duodenum, and of the glands, the fecretory ducts of which open into it; the principal of these are the ductus communis choledochus, and the duct of the pancreas. Bile, therefore, and the pancreatic juice are thrown up together, with the contents of the stomach, and the other fluids secreted into the stomach and duodenum. Of all these fluids bile is the most conspicuous from its colour, tafte, and fmell. This has often been observed by practitioners, while the gastric and pancreatic juices, and other juices fecreted into the duodenum, as they are not very conspicuous from their sensible qualities, have not been taken into the account. It has often been supposed that the redundancy of bile constituted an essential part of the attack of fever; whereas it is mere accident. If the pancreatic juice had been blue, and had any particular tafte or fmell, and the bile had been colourless, infipid,

fipid, inodorous, or as much fo as the pancreatic juice is, in that case, whatever has been faid of the redundancy of bile as an effential part of the attack of fever, would have been said of the pancreatic juice. It is clear that no experiment hitherto made public has shown that any bile was ever contained in the blood veffels, excepting in cafe of jaundice, and that, therefore, there can be no redundancy of bile, excepting as much as can be contained in the biliary ducts, and gall bladder. Much more than this is thrown out by twenty times in the attack of a fimple fever in half an hour. Therefore, the bile thrown out is a consequence of the fickness, exactly in the same manner as it is a consequence of the fickness arising from the agitation in a ship at sea, and is not at all to be taken farther than as a mere accident in the attack of fever. The loss of appetite encreases, and the nausea and vomiting takes place fo inftantly at the beginning of fever, that they can hardly be conceived otherwise than as an affection of the stomach itfelf.

Thirst we also express by the term, seeling; it is commonly referred to the mouth. Certainly, when the glands of the mouth do not secrete a sufficient quantity of sluid to keep the membranes moist, this sensation arises. Although the glands of the mouth may secrete their ordinary quantity of sluids, yet, nevertheless, a greater quantity of air passing backwards and forwards to the lungs, through the mouth, in speaking and breathing, so as to dry the membrane, excites this sensation. But thirst may arise the when membrane of the mouth remains persectly moist.

When the membranes of the mouth are perfectly moist, if a large quantity of watery study should be evaporated in the form of insensible perspiration, or exude from the skin in sweat, or be otherwise thrown out by any of the excretory organs which commonly throw off watery sluids (as, for instance, in diabetes) great thirst ensues, although there does not appear to be any particular affection of the mouth. We cannot say, therefore, that an affection of the mouth is the cause

cause of the thirst, because the sensation may be as well produced by a simple want of water in a sufficient proportion in the bloodvessels; and thirst, from this cause, commonly produces a defire to drink whether the mouth is disordered or not. At the time of an attack of fever, the mouth may fometimes be moist, thirst, nevertheless, ufually takes place. It frequently happens that attacks of fever come on when there is no reason to believe that the proportion of water in the fluids has been diminished, or is less than in the ordinary healthy state of the body; it may, therefore, proceed from affection of the stomach, for that this is capable of exciting thirst appears evidently, from that thirst, which often arises from falted food thrown into the stomach, while it certainly still remains there, or during the digestion of food used in too great quantity, or of difficult digestion. It would, therefore, appear that the loss of appetite, aversion to food, nausea, vomiting, and thirst arising in the attack of sever, indicate that the stomach is particularly affected.

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This might be supposed to be owing to the depression of its powers. The powers of the stomach may not be sufficiently great to digest a great quantity of food, yet the appetite may not be lost, as is often seen in convalescence from sever; where it frequently is great, although the powers of digestion are weak. Thirst can by no means be attributed to depression of the digestive powers of the stomach. It may, therefore, be concluded, that there is also a peculiar affection of the stomach in the attack of sever.

Fever in its appearances as have been enumerated, shows in its attack; deprefsion of the powers of the mind; of the sensibility of the organs of sensation; of the exertion, and disposition to be stimulated in the body; contraction in the vessels throughout the system, which being either confined to, or greater in the smaller vessels, occasions a larger quantity of blood to be accumulated in the larger vessels near the heart; together with some peculiar affection of the stomach. These external

appearances in this disease, seem so very independent upon one another, excepting the
quantity of blood accumulated in the larger
vessels in consequence of the greater contraction of the small ones, that they can
only be considered as some alteration of the
system which has not hitherto been investigated, therefore, every thing that has been
said relating to the essence of this disease has
only been conjecture following wild conjecture, to which the author does not mean
to add.

The fluids were totally unknown in their properties to the Greek and Roman physicians; every thing which they grounded upon their properties, or the properties of the solids, such as redundancy of bile, phlegm, blood, black bile, heat, and cold, moisture or dryness, was merely the phantom of their brain. Not but that their attention and accuracy in the history of the disease was extremely great. It is but very lately, and partly owing to the author's experiments, that the blood was known to consist of red particles insoluble in solutions of the neutral salts contained in the

other parts of the blood; coagulable lymph, a fluid coagulated on extravasation, which was discovered by Senac; serum, a fluid not coagulable on extravasation, but coagulable by heat, discovered by a student in anatomy, something more than two centuries ago; a solution of natron muriatum, ammonia muriata, and ammonia phosphorata, sometimes calx vitriolata, and calx muriata, a solution of putrescent mucilage, likewise water diffused through the other parts.

An attack of fever takes place when these parts of the blood are in various proportion to each other, as has been ascertained by experiment.

The red particles differ in their colour; in being perfect, or broken down into smaller or irregular shaped masses, which but rarely happens. The attack of sever takes place in any of these cases. The coagulable lymph sometimes coagulates immediately on being taken from a blood-vessel, sometimes it remains sluid for a few minutes, so as to allow the red particles to fall to the bottom before

before it coagulates. It sometimes coagulates more firmly, sometimes more loosely; the serum sometimes separates more completely from the mass than at other times. Heat coagulates it sometimes more, sometimes less readily and firmly. In all these cases attacks of sever take place. There is, therefore, no sensible state of the sluids contained in the blood-vessels peculiar to it.

An imaginary being, such as the spiritus archeus of Van Helmont, or as imaginary an obstruction, such as that of Paracelsus and Boerhaave, cannot be taken as a ground on which to found the phænomena or the practice in sever.

Although contraction of the small vessels is a part of the external appearance which takes place, converting the Latin word contraction into the Greek word spasm, does not make it the essential part in sever. This term has been applied so variously that it gives no strict or defined idea. There are certain parts of the body which are capable of becoming shorter in one direction, independent

properties; this shortening has been called contraction, it is produced by ideas of the mind, volition, or stimuli applied. When there is no appearance of any idea of the mind, volition, or the application of a stimulus, the moving part sometimes contracts; this contraction has been called spass. It has happened when a moving part contracts in consequence of an idea of the mind, volition, or the application of a stimulus, that the contraction continues long after these causes cease to act; when it continues longer than the usual time it has been called spass.

When any vessel has its sides shortened in the direction round the vessel, its diameter of course becomes less, and the vessel is said to contract. All the moving parts are contracted to a greater degree in a living body than they would be, were the body dead. This has been called the tone of the parts. This contraction is constant, but not always the same in degree. It is often greater or less without any alteration in the health. The blood-vessels are constantly pressing upon the blood in their endeavour to become

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fmaller, which they are prevented from doing by the blood contained in them. That this is the case is evident, for if any opening is made in a blood-veffel, blood is thrown out. It may be faid, that the power which forces it out is that of the circulation, but the pressure of the fides of the blood-vessels must be equal to the force of the circulation, otherwise they would be distended, and enlarged to a greater degree, as action and reaction are equal and contrary. If the action of the powers producing the circulation be weaker, the blood-vessels, if every other circumstance be the same, will be fmaller in their diameter; or, supposing the force of circulation in a blood-veffel should be the same, if the tone of the vessel should encrease, the vessel will contract, and become smaller in its diameter; but applications may be made to a part, in which the force of the powers of circulation continuing the same, and the tone the same, contraction in the veffels may take place in confequence of that application; as when we apply aftringents, for example, which act without affecting the chemical or mechanical properties of the part. When

When the blood-veffels of a part, in confequence of any fuch cause, contract, and the cause is removed, it sometimes happens that the contraction goes off, fometimes continues. A man fitting in a warm room shall have the blood-veffels of his hand of a confiderable fize; if he puts his hand out of the window into the cold air, its blood-veffels will contract; returning it into a warm air, they shall sometimes be enlarged again in a very short time, fometimes they shall continue contracted after this cause of contraction is removed: this has been called by fome spasm. If the blood-vessels should contract apparently without any cause, the force of the circulation, and their tone remaining the fame; it bears an analogy to the contraction happening in like manner in the muscles, without any apparent cause; and is also called spasm. As no effect, however, can take place without a cause, fuch contraction must arise from some cause, although it be not apparent. Again, there is a certain degree of regularity which takes place in the contractions of the various moving

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parts,

parts, if it does not, the irregularity has frequently been called spasm. For example, in the peristaltic motion of the intestines, there is a regular motion takes place spirally downwards. If two rings should remain contracted some time, so as a vapour is confined between them; or if one ring should contract strongly, and press the interior part, fo as to give pain; if either of these irregularities should take place, it is called spasm. Pains arising in any part of the body not referred to any apparent cause, as hemicrania, have been called spasm. The term has also been applied in a variety of other ways. Now the contraction which takes place at least in the small vessels, the appearances of which have been pointed out, if it can be called spasm, is of that kind where the veffels contract for some cause, and remain contracted after the cause is removed. But all the causes of fever do not apparently produce contraction, and contraction is by no means the only appearance that takes placein fever, and the otherappearances are totally unconnected with it, as far as can be judged. It is, therefore, much more probable that this contraction is not the essential part of fever, but is produced

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duced by the fever, continues as long as the fever which is its cause, and goes off when it is removed.

Others have taken the term spasin much more generally than in any one of these senses. That every preternatural motion, or affection of the system, which arose without any alteration in the chemical properties of the solids or sluids, or any introduction of extraneous matter into the system was spasin, under this definition, it would not, perhaps, be difficult to admit that sever was spasin, but for any purpose of understanding the history or manner of treatment of the disease, this would be useless.

Converting the Latin word contraction into the Greek word spasm, will not make the depression of the powers of the mind; of the sensation; of the exertion of the powers of the body; or of the diminution of the sufceptibility of being affected by external applications in the body, so as to excite motion, or produce rest dependent upon the contraction; nor will it make the peculiar affection of the stomach dependent on it.

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What, therefore, is the real derangement in the fystem which produces the external appearances in fever, it must be owned, is not at all known; therefore, without attempting to make conjectures, we are to pursue the history of the disease as it manifests itself by external appearances.

The fymptoms of the attack of fever which have been enumerated, however much they may be varied in degree or proportion, continue through the whole disease. The more numerous and violent they are, so is the fever itself more violent; when they are all gone off, the fever no longer exists.

Fever then is a disease, the essence of which is not understood. It manifests itself by a depression of the powers of sensation, irritability, and action in the body; and likewise of the power of memory, imagination and judgment in the mind; with contraction of the small vessels throughout the body; an accumulation of sluids in the large vessels; and some particular affection of the stomach.

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It may be a question, whether it be best to proceed to the description of the subsequent stages of the disease, or investigate the causes which produce it. The subsequent stages depend entirely upon the attack, and if the sever goes off, cease. Although these subsequent stages require much attention in the course of the disease; they are nevertheless no part of its essence.

The causes of diseases have very frequently been taken from hypothesis. It is not the author's intention to enter into metaphysical reasoning, yet precision of ideas has been so little attended to in medicine, where it is more necessary than in any other science or art, that he may be allowed to make the sollowing observations. The mind can form an idea that an effect can take place without any cause; that, for instance, the Almighty existed from all eternity, with all his powers, without any cause. It is from experience alone the doctrine springs that effects have causes. We find when the beams of the sun touch

the atmosphere in any particular part of the earth, day-light begins to appear, that the light continues to encrease until they fall upon the earth in a perpendicular direction; that as the sun descends the light diminishes, and when his beams no longer touch any part of the atmosphere in that part of the earth, day-light totally disappears. Of this we have constant and daily experience, therefore we are led to believe that rays coming from the sun, whatever they may be, are the cause of day-light. In this case, the reference of effect to cause depends entirely upon experience.

In treating of fever, nothing is to be admitted of as a cause, the knowledge of the action of which does not depend upon experiment. Our experience of cause producing effect rests entirely on one event happening, and another succeeding. It is no single event following another which can establish that the preceeding one is the cause of the other. If a noise produced by siring a musket should be heard, and immediately afterwards a man should

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should fall down dead, it might strike the mind with an idea that the noise of the musket was the cause of the man's death. Still it ought to be considered as in the very slightest degree of probability, that this was the cause of his death, which might have happened in confequence of apoplexy. It is only from finding men dead frequently after the report of musketry, that musketry can be considered as the cause of death. If the report of many muskets was heard, and a number of men were found dead upon the fpot from whence the noise seemed to proceed, we should immediately conclude that they had been killed by the muskets; but although this had a confiderable degree of probability, it might be erroneous, for the musketry might have fired at a review without ball, and the men might have been paffing over a piece of ground where a large quantity of gas was rifing up, without attending to their danger until they were suffocated. In the present instance, another very material circumstance must be adverted to; it often happens that two concomitant effects take place from the same cause; the noise of the gun, and the death

of the man are both the effects of the difcharge of the gun, but it is not the noise which is the cause of death. It may be fupposed, that a person may never have seen a gun fired, but may frequently have heard the noise occasioned by it, and have seen a man drop down immediately afterwards; his experience will have led him to believe that the noise killed the man, and have reached this person with an effect that did not fall upon himself, fince he remained unhurt. It requires, therefore, an extreme great caution in affigning an effect to a cause, not to be deceived; first, in believing that one thing happening before another that followed, the antecedent was always the cause of the confequent; because the precedent may be accident, or they may both be concomitant effects. It may be thought superfluous to have made these remarks, but it must be considered that the author is not writing for metaphyficians, but for practitioners in medicine, not one in a thousand of whom ever thought of paying the least attention to the operations of the human mind. Of the number of causes to which

fever

fever has been ascribed by the practitioners who have treated of severs, sew will bear the test of any strict enquiry. It is not worth entering into any resutation of many of these, but it is better to take a view of those causes which are most strongly marked.

The first to be noticed is infection. Fever has frequently taken place in a man who, came near a person afflicted with the disease, although he has not touched him. It is very possible that this person so taken ill of fever after he had been near a person ill of sever, might, from some other cause, have been feized with the disease. For example, he might have been inoculated for the smallpox some time before, and the fever which took place might have been in consequence of that inoculation; but by repeated experience it is now known, that although it very frequently happens that a man coming near another afflicted with fever, is not afterwards affected with the disease, yet it is well established, that of any number of men, one half of whom go near a person ill of this disease, and the other half do not go near

any one so diseased, a greater number of the former will be affected with sever than of the latter, in a short period afterwards. In some instances the proportion is not very different, in others, the author has known seven out of nine who went near a person afflicted with sever, seized with the disease in the space of three weeks afterwards. There is, therefore, a perfect ground from experience for believing, that coming near a person afflicted with sever is a cause of the disease.

The mind searches farther in this case: it will not be satisfied that the mere vicinity of a man afflicted with sever can be the cause of the disease, because it has no experience of vicinity having any effect excepting by attraction, and repulsion. The universal belief, therefore, has been, that there is some matter rising from the body when afflicted with sever, which, being applied to the body of another, gives occafion to the disease in him.

If it be any fuch matter, it is perfectly incapable of being discovered by any of the organs

organs of the fenses. Where a man is afflicted with the most infectious fever, if he be in a clean room, with clean bed-cloaths, neither the eye, the tafte, fmell, or feel give the smallest notice of there being any infection present. It is true, indeed, that a felon coming out of a dirty goal spreads noxious vapour very fenfibly, and very fatally, but the author has often experienced both in St. Thomas's Hospital, and in other places, that patients have lain ill of fevers very infectious, and from whom infection has been actually received, fo as to produce the difease in other persons, where there was no peculiar fmell or tafte, nor any thing fenfible to the eye in the atmosphere furrounding them, or to the feel.

Although this infectious matter is not fensible, that there does arise some matter from persons in sever, is farther rendered extremely probable, as a person coming from a man afflicted with it into another room, where there were persons in health, some of these have afterwards been seized with the disease; sometimes several, as the author has known instances

instances of. A peculiar matter, therefore, is generated in the body of a man in fever, which is carried by the atmosphere, and applied to some part of the body of a person in health, and causes sever to take place in him.

This matter has been supposed by some incapable of communication by other means than by the touch of some part of the body. That this is not the case is most certain, from the author's experience, for he has seen several persons affected who only accidentally came into the room where the patient lay ill, without coming near him, or touching any thing in the room, excepting the floor with the soles of his shoes.

The other properties of this infectious matter are not at all known, as its existence is only known by its effect in producing the disease. No chemical examination of any of the sluids or solids of the body has ever shown its existence.

This infectious matter is produced by all fevers whatever. However, as far as the author

author knows, no person has been seized with sever in consequence of coming near another afflicted with it, where the sever consisted of one paroxysm only.

That intermittent fevers produce this matter, or in other words, are infectious, the author knows from his own observation as well as from that of others. But intermitting fevers are not nearly so apt to produce it, or at least to propagate it as continued fevers, and the more violent the continued fever is in its febrile symptoms, the greater quantity of infectious matter is produced.

When a number of persons live in a small space, supposing even that they are kept as clean as possible, it happens frequently that sever arises in some, often in many of them. It has been in this case supposed, and is extremely probable, that some peculiar species of matter is produced capable of producing sever, on being applied to the body. If the air in such place be not frequently changed, the quality of the infection

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and its power are greatly encreased, and be-

This source of infection is not peculiar to the human species. If a number of sheep be confined in a small space without sufficient circulation of air, an infectious matter is generated, which produces fever in them. Fevers also arising in these animals occasion the formation of infectious matter. Of this the author had an opportunity of being well acquainted with during the American war, when live sheep were attempted to be transported from England to America, and it was necessary to confine a number of them together in one ship. Although they were selected from flocks in perfect health, where they throve at sea perfectly when taken in fmall numbers to ferve for fresh provisions for the officers, yet in many of the ships where numbers were confined, an infectious fever arose, even before they quitted the harbour. Whether it be that sheep are more subject to produce infectious matter when many of them are confined together,

or that it more frequently happens that many of them are oftener confined together in a small space, without sufficient ventilation, than quadrupeds of other species: infectious matter is much more commonly generated in them than in any other quadrupeds that are known.

Live hogs were also attempted to be exported in the fame manner, and infection was produced among them, although not fo frequently. It would appear that the infection which produces fever, either arifing from fever itself, or from numbers confined in a fmall space, in one species of animal, is not capable of producing fever in another fpecies; for it happened, that when one fide of a ship contained sheep, the other hogs, that if a fever broke out among the sheep, the hogs were not affected; and that when fever broke out among the hogs, the sheep in many cases were not at all infected, neither were the crews at all affected, being as healthy as the crews of other ships making the same voyage, loaded with different commodities.

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The infectious matter produced by a number of men living in a small space, as well as that produced by fever, may adhere to a person in persect health, so as to be brought into another place, and communicate the disease to a great part of a whole assembly, as has been too often proved by a felon brought from goal into a court of justice, and infecting almost the whole of the persons assembled, and that even when the felon himself was persectly free from sever, and never had been affected by the disease.

It often happens when numbers of persons are confined together in a small space, that putrescent substances are not thoroughly cleared away; hence, a person, brought out of a goal where putrescent substances have been accumulated, carries with him substances of a peculiar smell. Hence, some have supposed that the infectious matter produced in this last way had sensible qualities. This is, undoubtedly, not always the case, since infection has arisen from a person brought out of rooms in which numbers had been confined for several months.

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months, but kept clean from all putrescent matter, so that there was no particular smell, or any sensible quality. In one case that came under the observation of the author; a person under such circumstances from whom no peculiar smell arose, or any other sensible essured in a coach for about half a mile, so as to produce severs in all of them, which severs were violent and satal.

As, therefore, neither the infectious matter produced in the body of a man afflicted with fever, or produced by a number of men living for a certain time in a small space, have any other sensible quality but that of producing fever, it cannot be determined whether it be one species of infectious matter or different ones.

The vapour or other matter which arises from putrifying bodies, either animal or vegetable, being applied to a person in health also occasions fever. From putrifying substances, we know that there arise gas, in-

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flammable air, and a vapour, resembling in its fmell what has been fometimes called hepatic air. It does not appear, however, ever to have happened that fever has arisen foon after the application of either of these vapours, when produced in other ways; as for example, when gas arises from the earth, as it does in the caves near Pyrmont, or when it has been detached by acids from calcareous substances, it has never produced fever. Neither have men exposed to inflammable air fet loofe in diffolving metals in acids, nor when hepatic air has been extricated by acids from hepar fulphurus, or when it has arisen from the earth, been affected with fever more than under any other circumstances. It would not, therefore, appear that it was either of these vapours produced during putrefaction, which give occasion to fever. Whether, therefore, it be the same matter rising into the air from putrifying fubstances with that which is formed from a number of persons living in a small space, or in the body of a person labouring under a fever or not, cannot be determined. Certain it is, that the infectious matter which is thrown into the

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atmosphere from the body of a person infected with fever arises often without the fmallest appearance of putrefaction in the body of the man so affected, either in the appearance of the blood, of the folids, or any of the fecreted fluids, although it be true that it happens, not uncommonly, that very evident appearances of putrefaction take place in fevers, which are very infectious, yet in a great many fevers that are fo, there are no appearances of putrefaction. It is also true, that if a number of persons live in a small space, if care be not taken to remove all kinds of putrescent matters, fevers will arise much sooner, and more frequently; yet if the utmost care be taken to remove all putrescent matters, fevers will nevertheless arise. It would, therefore, seem probable that either the cause of fever, consisting of matter produced in the body of a person affected with this disease, was different from that produced by putrefaction, or might be generated without any putrefaction taking place, and that the matter capable of producing fever, generated by a number of persons living in a confined fituation, was different

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from that occasioned by putrefaction, or that it might be generated without any putrefaction taking place.

Infectious vapours produced in these ways occasion sever simply, which may, and often does go through its course without any disease necessarily happening afterwards. But there are other infectious matters which necessarily give occasion to another disease after the sever has taken place.

The first of these to be noticed is variolous matter. This matter, in as far as experience has shown us, has never been originally produced since the disease became known to Europeans from Asia, when the greatest part of it was under the dominion of the Abassides. If mankind had one origin, undoubtedly, it could not have existed from the beginning of the world, otherwise it must have descended to the Greeks and Romans, who, undoubtedly, were not a cquainted with the disease. The probability of its arising originally at any one period of time, or any other, is therefore, exactly

actly equal. The Romans were well acquainted with all the parts of Africa, Egypt, Arabia, and Afia, which were under the dominion of the Abaffides; therefore, certainly it did not exist in, and was not brought from any of those countries. It is more probable that it was first generated in Asia, during the reign of that dynasty. There is some fuspicion of one other source. It might have existed in, and have been brought from, Indostan. It is fingular that such a difease should be so little noticed in a country, with which not only England, but many other European nations have had fo much connection. The reason is, that all infants are inoculated by a fet of itinerants, whose fole business it is to traverse the country for that purpose. Although, therefore, the Greeks and Romans had fome intercourfe with Indostan, they might not, more than ourselves, have observed, or been infected with the disease. Variolous matter has its infection, like the infection produced by fever, confined to the human species. Whether other fimilar infections exist among other animals has not been ascertained. Va-

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riolous m tter is capable of producing fever applied floating in the air to fome part of the body which has not been ascertained. Some have contended, that it was necessary the matter should touch some part of the body by some substance covered with it being applied to it, and not floating in the air. But in the first place, the author has known several persons infected, certainly without any such contact; even perfons going into a room where the patients labouring under smallpox were confined, have brought the variolous matter adhering to their cloaths, or persons, into another place, where persons who never had been affected with the difeafe were, and have communicated the infection without contact. Moreover, the author has rubbed variolous matter upon the skins of persons who have never had the disease, where there was no wound without producing the disease in that person. If variolous matter be applied to the nostrils in a fluid form, the disease will frequently be produced. If the fearf skin be raised by the finallest puncture, and variolous matter be applied, the fever will enfue. When variolous matter produces the disease, the fever does not arise immediately, but when it is applied, by making an opening through the fcarf skin, or deeper, an inflammation takes place, and a suppuration ensues. As soon as this operation is completed, which is on the seventh or eighth day, the fever comes on. When the matter is applied, floating in the air, it is generally about fourteen days before the fever is produced. When any pustule is formed from applying variolous matter in a fluid form to a puncture, made so as to penetrate the scarf skin, or deeper, fuch matter is capable of propagating the disease. The quantity of matter so applied is certainly not necessarily more than the 1000 part of a grain, probably not more than one of a great many millioneth parts of a grain.

Another matter to which all the observations may be applied that have been made with regard to variolous matter, is that which produces fever followed by the measles, excepting that it seldom happens, although sometimes that the introduction of it into a wound wound penetrating the scarf skin produces fever.

There are other fuch matters producing fever, followed by what has been called chicken-pox, fwine pox, &c. which are much flighter difeases, and have not been well defined.

Another kind of infection which produces fever is that which produces the plague in Syria. Every disease which has, in a short time, been very fatal to a great number of the inhabitants of any country has been called the plague. A fever, for instance, accompanied with a dysenteric affection at Naples. A remittent, upon the Euphrates, as described in the Transactions of a Society for Promoting Medical and Chirurgical knowledge, in London. That which takes place in Egypt and in Syria, and of which a clear description has only been given by Dr. Ruffel, arises certainly from an infection of a particular species. It cannot be gathered from the accounts whether this may be originally produed without having been

been propagated as the first class of infections are. It is followed most frequently, if not always, by inflammations of the lymphatic glands. This infection has fometimes been brought into Europe, as was the case at Marseilles; but that disease called the plague, which ravaged this country, on confidering the histories of the disease, seems to have been a fever, produced by infections of the first class which have been enumerated. For the inhabitants of this country, it is undoubtedly a matter of great moment to decide this point, but it would make too great a digression. The author may, perhaps, lay the evidence before the public in an appendix.

All and every kind of infectious matter capable of producing fever, or any other difease, by floating in the air, and being applied to some part of the body, is capable of chemical combination with the vapours that constitute the atmosphere. In this as in all other chemical combinations that are perfect, the properties of the elements are lost, and new properties are acquired. The atmosphere

mosphere is found to consist of various vapours, of which air, or as it has been called pure air, or respirable air, forms at present about a fourth. Gas forms some part, but the greatest part confists of one or more vapours, which without any positive quality, but from that indolence, which makes mankind in their researches attempt to find a resting place, have been considered by many chemists as one individual species, under the names of phlogisticated air, &c. which, of these vapours that constitute the atmosphere, unite with the infectious substances creating diseases, is not known. If it were not for this combination, those infections would foon spread desolation over the whole earth. How far a quantity of infectious matter may be carried without being combined with fome of the vapours constituting the atmosphere is not known: certainly not to a great distance. It appears pretty clearly, that the infectious matter of the plague cannot reach more than twenty or thirty feet, fince men may converse with those afflicted with the disease at that distance with perfect safety. Variolous matter feems capable of reaching farther.

farther, fince there is an instance where foldiers passing through a town in which there were patients in the finall-pox being affected, although they passed through the middle of a broad street with celerity, in order to avoid the infection, were infected. It, however, isnot to a very great distance that it can reach without combining with the air, fo as to have its properties destroyed. The distance depends, undoubtedly, partly upon the disposi tion of the atmosphere; not only the infectious fubstances floating in the air capable of producing fevers, and other diseases; but likewife the effential oils rifing from vegetables, and vapours of other kinds, which affect the sense of sinelling, are so combined with air as to lose these properties before they reach that distance, where they should be so diluted as to become insensible. If the air be loaded with moisture, they reach to a much greater distance. Vapour arising from a field of beans, for instance, or a putrid ditch, is fensible to the nostrils at a greater distance if the air is moist. Hence it has been conjectured that those insectious substances which float in the air, producing fevers, and other

other diseases, may also be carried farther when the atmosphere is loaded with moifture. But this has not been determined by any accurate experiment. It is hardly worth noticing the superstitious idea, that meat raised up into the air would putrify, and other things of the same sort, founded on no ground of experiment.

There are many infectious substances which float in air, or may be applied to the human body otherwise, which produce difeases of a particular part, occasioning affection of the whole system; that has often been called fever; but these affections of the fystem are by no means the disease the author describes under that name. The matter which produces the erifipelitous fore throat, called the putrid, or fore throat attended with ulcers, &c. is a matter which, rifing from a person afflicted with that disease, communicates the difease to persons not affected. The disease produced in this case is an inflammation of the mucous membrane in the throat, and likewise sometimes in other parts of the body. In consequence of this, an affection

affection of the whole system takes place, which depends entirely on the disease in the mucous membrane; when this ceases, the affection of the system ceases likewise. Although, therefore, this affection of the system has many appearances similar to those which arise in fever, yet they differ most effentially from this disease.

In the fmallpox, if the infectious matter be applied to a wound, an inflammation is produced in that wound, in confequence of which a fever arises. If the poison of a bee be infused into a wound made by the sting of the ani- mal, or if the poison of any other animal be injected into a wound by its sting or tooth, an inflammation arises in the part where the wound is made, and that inflammation produces affection of the whole system, some of the symptoms of which may be similar to fever, but which are not the disease intended to be described here by that name. It might happen that a great inflammation might be immediately produced in a wound, into which variolous matter was infused; that such an inflammation may produce

duce affection of the whole system in a day or two afterwards; yet that affection is by no means to be called fever; the fever which takes place being only induced after the fuppuration of the wound is complete, which is on the feventh or eighth day. It is also to be observed, that when, in consequence of a fever produced by infectious matter, some topical inflammation arises, and the fever is carried off by it, that fuch topical inflammation, as in the small-pox, produces affection of the fystem, in which some of the appearances are similar to some of the appearances which take place in fever. Such affection of the system has frequently been called fever. In the small-pox, for instance, such affection has been called fecondary fever, although it in no way has any thing of the effence of this disease.

. It happens likewise that severs not produced by insectious matter of any kind give occasion to inflammation, and that inflammation produces affection of the system, which has been called by some authors sever. This will be considered fully afterwards.

What the author has been endeavouring to inculcate at present is, when infectious matter produces any topical affection, and that topical affection produces affection of the system, which depends entirely on the continuance of the topical affection, so that the affection of the system disappears or begins to diminish, and gradually goes off as soon as the topical affection ceases; such affection is not the disaste described in this treatise under the name of sever.

The next cause producing sever, is sudden exposure to cold. It happens, undoubtedly, that infectious matter may be applied to the body so as to produce sever, and it may be some time afterwards before the sever arises, but the author is not disposed to allow that sudden exposure to cold occasions sever to take place, unless some symptom of the disease appeares immediately. It must be observed, however, that it is not necessary when a sever arises from any cause, that a compleat attack of the disease should take place at once. It often happens that some slighter symptoms appear, and continue for several days, before

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a compleat paroxysm takes place, or the sever can be said to begin, as will be afterwards explained. When a man, for instance, is exposed to putrid vapour, it happens frequently that head-ach, languor, loss of appetite, and restlessness take place, and continue for two or three days, or even a much longer time, before a perfect paroxysm comes on.

A distinction at present wished to be made is, on the one fide, of the three first kinds of infection; viz. that which is produced in the body of a person afflicted with fever; that which is produced by many men living in a fmall space; and that which is produced by putrefaction; between these and variolous and other matters producing eruptive fevers, and perhaps pestilentious matter on the other fide; there is this difference, that when symptoms of the first stage of fever, fuch as head-ach, languor, &c. takes place from the first class, they frequently go off again without any fever enfuing; but if they take place from the fecond class, whether they continue or go off, the fever certainly enfues.

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When these partial sebrile symptoms arise from infectious matters, they frequently occupy only some part of the system at first; continue for a greater or less time, without forming a perfect paroxysm; go off suddenly, or slowly; or after continuing some time, all at once bring on a compleat attack of the disease.

The mind of man is so much impressed with the idea of referring effects to causes, that it will not be fatisfied without resting itself upon some cause. Sudden exposure to cold produces diseases so frequently, that when persons, at least in this country, are seized with disease, and cannot remember any thing which happened out of their ordinary course of living, they rest on the idea that they have caught cold. But if a man had been fuddenly exposed to cold, and continued in perfect health for four and twenty hours, the author would never allow that fever, or any other difease, was owing to it. A person may have come near another in very violent fever without catching the disease, so he may be suddenly K 2 exposed exposed to cold without having fever produced in consequence, We know that in Ruffia, as well as in other parts of the earth, men out of an heat of at least 160° of Fahrenheit's thermometer, plunge themselves fuddenly into fnow or water cooled to the freezing point, without fever or any other disease being the consequence. Some practitioners of great eminence have believed that fudden exposure to cold never produced fever, or any other disease. A rule of evidence must be applied here which has already been taken notice of, that a person may be exposed to a cause of disease without catching it, that every person exposed to the air near a patient afflicted with fever is not feized with the difease, yet a greater number of those exposed to it are feized with the disease, than of those who did not come near persons afflicted with fever; nevertheless this is a sufficient ground for believing that fuch exposure is the cause of the disease. So if a greater number of persons fuddenly exposed to cold have been feized with fever, than others who were in other respects in the same circumstances; it is a ground sufficient to establish that fudden exposure to cold is a cause of this

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this disease. But the evidence is much ftronger in this case than in that of infection, because the author has seen many instances, where, from the exposure to cold, the commencement of the difease was instantaneous, and many are to be found on the records of medicine. The author assumes that this cause only operates when its effects are to be immediately observed, either as instantly producing the disease, or such symptoms of it as afterwards spread over the whole fystem, so as to make a compleat attack; for, as has already been observed, when a cause of fever is applied, it happens not uncommonly, that head-ach, languor, and other symptoms of the attack, or first stage of fever take place, and continue for some days, as far even as fourteen, from the author's observation, before a compleat paroxysm has been formed; but this will be difcussed more fully afterwards.

The feel of heat or cold by no means indicates the real temperature of the atmosphere. This is a subject so well understood that it is sufficient to observe, that by sudden exposure to cold is meant the going out

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of a warmer into a colder medium, whether it be the same, excepting as to its temperature, or different in substance. For example, if it be going out of the air of the atmosphere into the same air, only of a lesser temperature, or going out of warm air into cold water. It is not of consequence that the change should be from one particular degree of heat shown by the thermometer to another. If, as it is not uncommon for feveral weeks together in the interior parts of Africa, the temperature of the atmofphere be at 130° of Fahrenheit's thermometer, and a person was brought from that heat suddenly to one of 100°, that, the author believes would be fufficient exposure to cold to produce fever, although he has no instance of this having actually happened, there having been very little intercourse between this country, and that part of Africa, or any other where the heat is continued of any thing near that temperature for any confiderable length of time. The instances are numerous where the heat is 100°, of fever being produced as well as various other diseases by a sudden diminution of heat to

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80°, and the author has known instances of fever produced by going suddenly from an heat of 60° to 40°.

Sudden exposure to a colder medium is apt to produce many diseases besides sever. It would seem that a sudden diminution of the temperature of the medium to which a person is exposed when the thermometer shows an high temperature of heat is most apt to produce severs, and this seems to be one cause why severs are more frequent in warm than in cold climates; the sudden diminution of the heat of the medium being more apt in colder climates to produce catarrhs, rheumatism, &c. Why this happens is not attempted to be explained, as it is meant in this treatise to adhere entirely to a relation of observations and experiments.

Supposing a person were to pass through a column of a warm atmosphere not an inch in thickness, and immediately again into an atmosphere of the same temperature he was in before, undoubtedly no fever would be produced. It is necessary, therefore, that

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he should remain some time in the warm atmosphere before his going into a cold one is fufficient to produce the difease. The heat of the atmosphere must put the system into some state, that the sudden exposure to cold may act upon it so as to occasion the disease. The obvious effect of remaining in the warm atmosphere is to produce a greater circulation in the exterior parts of the body, greater evaporation into the atmofphere, and a greater exudation from the skin. The obvious effect of exposure to cold is to produce contraction of the exterior vessels, of course, that a greater quantity of blood should be contained in the interior vessels, that there should be less evaporation from the body generally, and lefs or no exudation from the fkin. Sudden and flow exposure to cold produce these effects equally, therefore it cannot be from the simple contraction of the exterior vessels, the simple diminution of vapour rifing from the body, or the simple diminution of the exudation from the skin that the mischief arises; for it is certain, that gradual diminution of the heat of the medium has never been observed to produce

fever, or, indeed, any other disease. All other conjectures about the mode of fudden exposure to cold producing fever are so extremely nugatory as not to be worth the least notice. That checking the insensible perspiration, or producing contraction which has been called spasm, or by any other term, is the cause of sudden exposure to cold producing fever has been much received, and, perhaps, might require fuller discussion, were it not that contraction, and obstruction of the insensible perspiration may be equally produced by flow as by fudden exposure to cold, and without any mischief, which the author thinks sufficiently refutes this doctrine, especially as when a fever is actually produced it is independent entirely of its cause.

All the advantage which arises from the knowledge of the causes of sever, is the prevention of the disease, and this accounts for the slovenly manner in which authors have treated of its causes.

In order that fudden exposure to cold should produce fever, it is not necessary that the whole of the exterior surface of the body should be exposed to it. It is sufficient that a cold substance be applied to part of the furface, or that a cold fluid should be thrown into the stomach. It must be observed, however, that although there are many instances of cold being applied partially, or of a cold fluid thrown into the stomach producing fever, yet a partial exposure of cold is more frequently followed by other diseases, especially internal inflammation, as pleurify, &c. and farther, fudden exposure to cold is followed, perhaps an hundred times or more by other diseases, for once that is followed by fever. If a man, when fatigued, is suddenly exposed to cold, the exposure is much more frequently followed with disease, and particularly by fever. For example, if a man has been in a crowded affembly, where his attention has been strongly excited, and comes suddenly out into the cold air; or, if he has been fatigued by exercise, if he should throw himself into cold water, there are many instances of fever having immediately enfued.

enfued. It does not appear from any well attested evidence, that satigue encreases the powers of any of those substances which, sloating in the air, and being applied to the body, give occasion to the disease.

The next cause to be taken notice of is moisture. A man going into water of a moderate temperature, and remaining in it for some time, has not been found more frequently afterwards affected with fever, than after standing, walking, or any other indifferent circumstance. It is certainly, therefore, not the application of water to the body that gives occasion to the disease, but if the air has particles of water floating in it, and a man has continued for fome time in fuch an air, fever has enfued much more frequently than when he had lived in a dry air. It is to be observed, that water may be in the air in three different ways. Small particles of water may be fuspended in the air like any other matter reduced to very fine particles; for, although water be of greater fpecific gravity than the vapours which form the atmosphere, yet many other substances stances of much greater specific gravity than water are frequently feen suspended in the air. This is eafily demonstrated by allowing a small portion of the rays of the fun to pass through a small hole into a darkened chamber, these particles are at all times difcernable. The air, although of small specific gravity, is exceedingly viscid, and, therefore, if particles of any matters are blended with it by any power, they will fall down very flowly, or if there be any agitation will be altogether suspended, and the atmosphere is almost always agitated with various currents. A folution of gum arabic in water is not of much greater specific gravity than pure water; but while small particles of fand, clay, &c. fink readily in pure water, yet they they will be suspended a long time in a folution of gum arabic, in which, if there was any confiderable agitation, they would not fink at all. It is not necessary to fay how these small particles of water are thrown into the air.

When these particles are found in the atmosphere, they maintain all the properties of water, moisten substances, so as to lengthen or shorten them according to their texture, and the quantity of the particles of water may be ascertained in some degree by an hygrometer, an instrument commonly measuring the lengthening and shortening of substances.

Secondly, of the vapours which constitute the atmosphere, some one or other, or all of them are capable of combining with water chemically, fo that the properties of these vapours and the water are lost, and the water to combined does not affect substances so as to lengthen or shorten them, nor does it disturb the transparency of the atmosphere, which water suspended in the atmosphere in the manner first described does, and is often extremely fenfible to the eye without any aid, but much more perfectly if objects are viewed at a distance through a telescope of great magnifying powers. If the atmosphere is hot or dense, it is capable of combining chemically with a larger proportion of water. If it should be saturated with water, therefore, in any particular de-

gree of heat or denfity, if the heat or denfity should be diminished, it is separated, and mixed with the atmosphere in the first manner, as is easily observed. If the weather should become suddenly very warm, and the heated air should be made to pass through a large building, the walls of which have not had time to acquire the heat of the atmosphere, the water is not only condensed upon the walls, but the atmosphere of the building loses its transparency, and appears very moist by the hygrometer. Thirdly, if the vapours constituting the atmosphere should be heated to a degree equal to that in which water boils, which differs, according to the pressure on its surface, in that case, after the atmosphere had diffolved as much water as would faturate it, the remaining part of the water would not be in small fluid particles, but in the form of vapour, and would mix with the other vapours of the atmosphere exactly as they are mixed with one another. As foon as the heat should be so diminished, as to be less than that which water would boil at with that degree of pressure, then the water would return to its

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fluid form, and be suspended in small particles. Of these three different modes of suspension of particles of water in the atmosphere, the first only has been called moisture, and it is this only which has been found to occasion fever. It is true, that if water be contained in the atmosphere in either of the other states, it may easily be reduced to this by the means that have been already stated.

Some have contended that the application of water suspended in the atmosphere in the form of moisture did not produce sever. If those who have held this doctrine were to live a year or two in Batavia, they would be convinced, by fatal experience, that men living in a moist atmosphere are more frequently affected with sever than in a dry one.

Men wearing any moist covering have been more frequently affected with fever than those who have worn cloaths not moistened with water. Vast numbers of men have worn moist cloathing, and have lived in moist atmospheres without any fever having taken place immediately afterwards. Hence, many have conceived that these were not causes of fever. But the observation of so many men being immediately seized with sever, as well as other diseases, after being exposed to moisture, more than in those who have worn cloaths free from all moisture; the other circumstances being the same, both recorded in the annals of medicine, and that have come under the author's inspection, give as full evidence that moist cloaths are capable of producing sever, as any that can be generally procured with regard to the causes of diseases.

The frequency of fever immediately following a person's having been covered with moist cloaths, is not the same indiscriminately, whatever substance, or texture they are of. There are some substances, and certain textures which conduct heat and cold more readily, that is, on being brought near an heated body, receive heat from it more readily, or more slowly. A piece of lead, for instance, placed near an heated body will

will accuire the heat of that body fooner than a piece of chrystal, or cold if it be placed near a cold body; all other circumstances, excepting the species of matter, being made equal. Wool, although the fubstance be the same, if it be wove into a loose cloth fuch as flannel, will become hot or cold more flowly, if it be brought near an hot or cold body, than the same wool wrought into a cloth of a firm texture, fuch as camblet. If men are covered with fubstances, which either from their species or texture receive heat or cold more quickly, and these substances are moistened with water, fevers will more frequently enfue than if they were covered with substances that receive heat or cold more flowly.

Moisture in the air, or coverings of the body, produce more fevers, the warmer the atmosphere, but moisture produces fever in all temperatures. The Dutch have endeavoured to make the country of Batavia refemble Holland in the immense number of canals. The consequent moisture of the atmosphere is very-great in both places; but, although

although fevers, therefore, frequently occur in Holland, they bear no comparison to those which happen in Batavia, where the fatality, owing to the moisture of the climate, is so great, that it is wonderful any person should ever approach that settlement, but from the absolute impossibility of otherwise obtaining water or food.

When the air is moist in consequence of water evaporating from a marshy country, or from canals in which the water is stagnating, or moving with a very flow motion, fevers more frequently arise than when the moisture proceeds from the fea, large lakes, or rivers confined within their banks, and running with a confiderable degree of rapidity. While fevers are frequently produced in the fens of Lincolnshire, few arise on the banks of the Thames. This has given occasion to suppose that some other vapours proceed from fuch marshes besides water, and produced the disease. It certainly happens often that a confiderable degree of putrefaction takes place in marshy grounds, and more especially in warm climates, but it is by no means to be concluded, that moisture in the atmosphere always produces fever in consequence of putrefaction. Putrefaction can only take place in animal or vegetable fubstances. If water, therefore, not impregnated with either, should be in such a fituation as to produce moisture in the atmosphere, no putrefaction can take place, therefore, if fevers enfue, they are certainly in consequence of moisture, not putrefaction. Many instances of this may be brought, as in the war which took place in Flanders between the tenth and eleventh years of the present century, an army encamped upon fandy ground, in which water was found in digging less than a foot deep, and occasioned a great moisture in the air, which produced in a few days numbers of fevers, although the army was perfectly healthy before, and no more fevers were produced on shifting their ground. There are a vast many other instances of the same thing having taken place. Besides, sever has often arisen immediately in persons sitting in rooms, the floors of which had been just moistened with pure water. Although therefore substances arising from putrefying ani-

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mal and vegetable matters in marshes or other stagnating waters, may render the vapours arising from them more dangerous, yet it does not follow from thence, that the particles of the water forming the moisture of the atmosphere, may not of themselves be the cause of the disease.

Another idea suggests itself, that since water applied in a body, that is to fay, if a man immerses the whole, or any part of his body in water, of the temperature of the atmosphere, in which he has remained for fome time, or if he throws water of fuch heat into his stomach, no disease ensues; and fince water in small particles in the atmosphere applied to the body is of the same heat with the atmosphere, and is applied to parts of the body only, it cannot be the mere application of the particles of the water that produces the disease; it must, therefore, be fomething that they apply to the body which occasions it. What this may be is not very clear. As evaporation of water into the atmosphere produces cold, and folution of water in one or all the vapours which constitute the atmosphere, likewise produces cold; some have conceived, that it was the production of cold which is the cause of the disease, and that, therefore, moisture might only be a means of suddenly applying cold to the body, and that the effect of moisture was to be ascribed to cold. But this the author leaves to future experiment and discussion.

The next cause producing sever is eating certain food.

Putrid and infectious substances applied to the body, as has been already described, may either produce a fever immediately upon their application, or the body may be in perfect health for some time afterwards, to all external appearance, before the disease comes on; but when sever is brought on by cold, or moisture, the author has already stated that the disease took place immediately, that is to say, either a compleat paroxysm of the disease, or some of the symptoms of the first stage were very sensible, and continued, until in a short time

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afterwards, they spread over the whole body, so as to constitute a complete paroxysm. The same thing is to be observed with regard to food, for there is no species of food eaten, which after, it has gone through the digestive organs, has been found to be followed by fever.

When food, therefore, is the occasion of fever, it is by its action upon the stomach, or other organs of digestion.

Food of difficult digestion produces, undoubtedly, a variety of different diseases, of which however, sever is seldom one; the author has never seen it, excepting in one case. But when a person has been afflicted with sever, and recovered from it, either by a natural criss, the disease going through its natural course, or by medicinal application; if soon after he should make use of food too difficult of digestion for the powers of the stomach, which have been generally weakened by the disease, a new attack of it has taken place immediately, and before the food had passed through the stomach. Indeed, eat-

ing food difficult of digestion soon after fevers go off, feems to be one of the most frequent causes of the re-appearance of the difease. In a person who has not lately been affected with fever, purgative medicines have never been observed to have been followed more frequently with fever, than in persons who had not made use of any such medicines; but when a person has been lately afflicted with fever, which has been carried off naturally, or by medicines, it has often happened that a fever has returned on using a purgative medicine. This observation, although applicable principally to intermittents, also takes place in continued fevers.

A fudden excitement of any of the paffions of the mind, attended with great anxiety, has been immediately followed in some
cases with sever, yet these are so sew as to
render it doubtful, because some of the
causes of the first set, before described,
which do not produce the disease immediately upon their application, might have
been applied, and there may be a coincidence. Yet very immediate attacks of a

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compleat-first stage, or cold fit of the disease having happened on the excitement of such passions, renders it extremely probable that this is likewise a cause of the disease.

These are all the circumstances that have been observed, to which persons having been exposed, severs have afterwards more particularly taken place in them.

All the causes, therefore, to which severs can be ascribed from observations, are: certain substances applied to the body, as shoating in the atmosphere, or applied in a shuid form to some part of the body. Sudden exposure to cold. Moisture in the atmosphere. Moisture of the cloaths, or other covering of the body. Indigestible stood, or other substances affecting the intestinal canal. Sudden rising of the passions of the mind attended with anxiety. But it happens frequently, that severs arise without any of these circumstances having been known to precede them.

It is true, that many of these circumstances may have taken place without either the person in whom the fever arose, or any by-stander observing them. As the infectious matter, for instance, rising from a person affected with fever, has no smell, nor taste, nor fensible quality; a man may chance to come near another from whence this substance is rising without observing it, and having received the infection may remain in perfect health for a fortnight, or three weeks, when an attack of fever may fuddenly take place, without the patient himself, or any other person being able to imagine that it was in any manner owing to this cause. This is not so much the case with exposure to cold, or any of those causes which bring on fever immediately, or not at all. Even if it were, fevers arise so often without our being able to make out that the patient has been exposed to the causes that have been enumerated, that there must, undoubtedly, be other causes than these, which give occasion to the disease, but which are at present totally unknown. It may not be improper to con-

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fider some of these causes that have been supposed to operate.

Eating food of particular kinds has been thought by some to give occasion to the difease. It has been already noticed, that eating food of difficult digestion has often evidently produced relapses in fever, but hardly ever a fever originally, and that only while it remained on the stomach, for various nations live on various kinds of food. The Bramins eat vegetable food alone; many of the Laplanders animal food only; the inhabitants of some countries live on grain; of others on fruits; yet if all the other circumstances be the same, fevers are not more frequent in one of these than in the others. Instances there are very frequently in this town (London) of eating too large quantities of food, and that of very difficult digeftion; but fever is not the difease that follows more frequently than in those who have eat food in fmaller quantity, or more easy of digestion. The author has shown, in another treatise, that whatever be the food, the fluids produced

duced from it are the same. Those who have believed that eating food of any quality, or, in any quantity, produced fever, have formed the opinion upon mere conjecture, and not accurate observation. It is true, that a man who has already had a ground of fever, may have that fever come on immediately after eating food in too great a quantity, or of too difficult digestion, A man may have received the infection of the fmall-pox without any external or apparent fymptom, and the fever may have arisen a few hours after he had gorged himfelf with turtle and venison; but this fever certainly was not to be ascribed to the food. So it might be with any other infection or cause of fever that did not immediately bring on the difease. It requires a frequent succession of one event following another, before one can be considered as the cause of the other. Unfortunately too much stress has been laid upon fingle observations in medicine.

Men accustomed to wear moist cloaths by habit, acquire an indisposition to have disease produced in them by wet cloaths, while while those unaccustomed to such covering would be readily affected. So it may be thought that a man used from his infancy to eat any particular species of food might acquire an habit which would prevent him from being affected with disease in consequence of it. And certainly this is the case, for a man who has been accustomed to live on animal food alone (often even in a putrid state) has been found not to be affected with what is called fea fcurvy, or a tendency to putrefaction of the fluids, while a man who had lived on vegetable food entirely, if he had used animal only would, undoubtedly, have been afflicted with that disease in many instances. But although there be numberless instances of men changing the food from one species to another, yet there is none the author knows of in which fever has arisen more frequently, all the other circumstances being the same. Excepting, therefore, when food, by its action, while it is in the inteftines, produces fever, which happens rarely, excepting in convalescents from fever, there is no ground to believe that the use of food of any kind is a cause of the disease after it has passed the organs of digestion.

The state of the fluids, that is, the properties of the different species of fluids contained in the body, or their proportions, have been stated by many authors as the causes of fever; such as their viscidity, or thinness, their acrimony, or mildness, their different proportions to one another, putrescency, &c. The properties of any species of matter can only be known by experiment. It could not be known even that water was capable of fluidity to one who was conversant only with eternal ice. Whatever, therefore, was faid with regard to the fluids of the human body before experiments were made to ascertain their properties, must be passed over in oblivion. Every thing, therefore, that is faid with regard to the fluids before the time their properties were investigated by experiments, excepting fome of the external appearances of some of the secreted fluids, is to be entirely passed over, as not at all relevant to any explanation of the causes of this disease, or the history of it in any manner.

The first part of the blood which was distinctly marked was the ferum. or

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some person about a century and an half ago discovered the red particles. Even Boerhaave was unacquainted with the coagulable lymph, and the properties and varieties which take place in these three essential parts of the blood, are even not well known to the majority of practitioners in Europe. It would appear, therefore, that there is very little ground for resting the causes of difease, whether it be fever, or any other, on what has been affirmed of the properties of the fluids by many, even practical authors, for they knew them not, and did not examine them. The author will venture to affirm from many experiments, that the fluids being in any state of all those varieties which are known, the other circumstances being the same, fever will equally take place. One state only shall be specified which has been laid down by some great practical authors, such as Sir John Pringle as a cause of fever, viz. putrefaction of the fluids. Now we know that the blood in that difease, which is called the fea scurvy, frequently verges so near to putrefaction, that the red globules are broken down into smaller particles, and the coagulable

heat, yet fevers never arise from such putrefaction. Frequency of the pulse, and various other affections of the system, undoubtedly, arise, and have been called sever, but are by no means that disease meant by Galenand other Greek physicians, if we may call Galen a Greek, Lomius, and many other modern practical authors, and which the author is describing. There is then no ground from experience to believe, that any particular state of the sluids is followed by fever more frequently than any other state, all other circumstances being the same.

It has been already observed, that some of the causes of sever do not occasion it to come on immediately, it being often many days after their application before any symptom of it takes place. In the small-pox, when caught from variolous matter floating in the air, there is no experiment or observation on which we can depend to illustrate what happened in the system between the application of such causes, and coming on of the disease. But the mind of man, when

it cannot find causes from industrious experiment, or flow observation, takes them from imagination, and, more especially in medicine, which has been confidered as a divine art, and springing from inspiration, and many men, therefore, have believed that physicians could divine every thing relating to it, and this, although by no means confonant to the other arts and sciences, possesfed by mankind, has even entered into the minds of practitioners themselves. Many instances may be brought from the ancients, many from the ages of magic and romance. Nor has this idea subsided in modern times. The author has heard Dr. Fothergill and others, state, in a serious harangue, their inspiration not only in the knowledge of diseases, without enquiring into their external appearances, but in making prescriptions to flow from their pen without any previous composition in their mind; not in compliance with the prejudices of patients, but from their own belief.

Many authors have laid down, that when the causes of a disease, especially sever, was not

not followed immediately by the fever, but after feveral days that that cause produced some alteration in the proportion of the blood, or some of the other fluids, which was the occasion of the fever. The knowledge of medicine, however, like all other sciences and arts, is only to be acquired by experiment and observation, and neither experiment or observation has shown that any of the effential parts of the blood have been at all altered in their properties; or in other words, that the blood has been at all altered in its properties from the time of the application of a cause of fever not acting immediately to the time of the difease taking place. The whole experience of any alteration is in the inoculated fmallpox, that a small part of the matter in a particular and finall part of the body is converted into variolous matter, which being absorbed, produces the disease immediately. There is no reason, therefore, from experiment and observation, consequently, none whatever for believing that fever is ever brought on from any alteration of the quality of the fluids contained in the bloodveffels M

vessels produced by using any kind of food, or by any other means whatever, notwith-standing the very universal opinion so frequently brought forward by authors on this subject that there is.

Of the particular fecreted fluids which have been thought from their redundancy, or alteration of properties, to be causes of fever, bile has been the most frequent.

The ancients, whose knowledge of the properties of the matter of the body was very superficial, and depended solely on the external view, on which hypothesis were sounded, supposed that the sluids consisted of red blood, phlegm, bile, and black bile, as is well known to those who have looked into their writings, and that to a redundancy, or alteration of the qualities of these, diseases were principally owing, and this idea has continued down to the present day. Bile is conspicuous from its colour and taste, its colour is varied by substances that it meets with in the intestines. This difference of

appearance has made it be confidered still as of great importance in difeafe. But modern enquirers have shown that it is a fluid fecreted only by the liver, is not at all contained in the blood-vessels, but formed out of the substances which constitute the blood. There cannot, therefore, be any redundancy of bile in the blood-veffels, because generally there is no bile contained in them at all. Bile may, however, and sometimes does get into the blood-veffels. When it does, being capable of passing through all the fecretory organs, it foon shows itself in all the secreted fluids, by giving them a colour, and converting them into a yellow dye, and by tinging all the furfaces of the body that are exposed to the eye, of a yellow colour. When this happens, fever is never known to be produced, or to have followed, or taken place more frequently than in any other state of the body. Bile, therefore, when it does get into the blood-veffels, never can be accounted a cause of fever.

When the secretions of those glands which open into the intestinal canal are encreased M 2 from

from any cause, the secretion of bile is encreased along with that of the pancreatic juice, mucous, &c. When these encrease considerably, they are evacuated upwards or downwards. Bile being the only conspicuous one, from its colour and taste, has often been attended to while the others have been neglected. There is no evidence that in these cases the liver secretes a larger proportion of bile thant the other glands of the intestines their sluids. However that may be, apparently there is a great quantity of bile thrown out.

There is no instance upon record, nor none the author ever knew, where sever more frequently took place after such increased secretion and evacuation than in any other circumstance. In that sickness, for example, which is produced by the agitation of a ship, vast quantities of bile are often secreted, and evacuated, yet there is no instance of sever having taken place; in consequence therefore, bile getting into the blood-vessels, or secreted in any quantity, cannot be admitted as a cause of sever. When so much has been said by

fever, is their authority to be thrown aside entirely? Certainly no authority but that which rises from observation and experiment can ever be allowed in true science. It would be great pity to rob patients of their consolation in being bilious or nervous, but medicine is a science which never can be comprehended without much study, considerably more than can ever be given to it by persons following other occupations.

Another cause of sever frequently referred to is heat. Heat may be considered in two lights, one of which is when a man lives in a warm atmosphere, or hot medium. In the inhabitants who live in those regions of the earth, where the heat of the atmosphere is great, undoubtedly, many more severs take place than in the inhabitants of those countries where the heat of the atmosphere is less. It is by no means proved by this that the surrounding medium occasions sever; for it is to be observed, that in warm climates where there is no moisture in the atmosphere, from stagnating waters or other causes,

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fevers do not arise more frequently than in colder regions. In Egypt, where the Nile overflows its banks, with fertility to the foil it gives moisture to the atmosphere, which is frequently the cause of sever. The same thing happens from the overflowing of the Senegal and Gambia on that coast of Africa which borders upon the Atlantic Ocean. In the isthmus of America, when at particular times of the year there are great falls of rain, fevers take place frequently, and fo it happens in the rainy feafon in all other hot countries. Where hot countries have been over-grown with woods, filling the air with moisture, fevers very frequently arise, but when the country has been cleared, and the air, by that means, rendered dry, these fevers have diminished in proportion to the cultivation, as in the case of the sugar islands. In America, and the islands in the Pacific Ocean, which are neither subject to violent rainy seasons, nor kept moist by stagnating water, or close woods, although the inhabitants are numerous, fevers are not pre-The countries which lie to the north of the Cape of Good Hope, in Africa,

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are the hottest in the earth, but being likewise dry, severs are not prevalent. Artisicers employed in trade, where they are often for many hours in an atmosphere heated to more than 150°, are by no means peculiarly affected with sever.

Fever has never been observed to arise in those who have used a warm bath, nor were the baths of the ancients, though they remained a considerable length of time in air heated to a great degree, ever observed to produce the disease.

The remaining, therefore, in a warm medium, a shorter or a longer time, cannot simply be admitted as a cause of sever.

When a man remains for some time, that is to say, from a quarter of an hour to two hours, in a very great degree of heat above the common heat of the atmosphere of the country where he lives, as in England, in an heat of 120°, 130°, or 140°, or more, the pulse beats quicker to perhaps 120, 30, 40, or 50 strokes in a minute, the whole

culation is encreased, not only in rapidity but force, and this force of circulation fubfides very gradually afterwards, although a man goes fuddenly into a much colder medium. The Russians, for instance, from what they call the warm bath, which is remaining in a chamber moift, and heated often to more than 140°, plunge themselves into water nearly at the freezing point, or even into fnow, without fever or any other disease ensuing. It might be imagined in this instance, that disease was prevented by an habit from infancy, but the author has had experience of many persons coming out of mediums, heated to these degrees, without any disease whatever having taken place, although they exposed themselves suddenly to cold in fuch a manner, as many of them must have fallen into various diseases, if they had remained for an equal length of time in a chamber heated to 86°, or 90°, and then exposed themselves suddenly to cold in a fimilar manner. The author does not mean to attempt any explanation of this fact; he only observes, that the difference, when the appearances take place, is, that in cales

cases where a man has been in a considerable degree of heat for a great length of time, and suddenly comes into a colder medium, the exterior veins continue turgid, the skin feels warm to the person himself, remains of a florid colour, and not contracted; whereas, when a person has been in a more moderate degree of heat for an equal length of time, and comes into a colder medium, the exterior veins disappear, the skin contracts, coldness is felt in a great degree, considerable paleness appears on the body, or sometimes it assumes a livid hue.

Many other causes of sever have been assigned, but with so little foundation that they are not worth while noticing. Neither is it worth attending to the infinite quantity of absurd affertions that have every where been made in medicine, unsupported by observation, which is the only evidence. Who would make an experiment upon men, which would determine whether any application would produce a fever or no? and the diseases of brute animals, as well as their whole economy, is so different from that

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that of the human body, that no conclution can be drawn from the one to the other. This a maxim the author's experience has thown him to be perfectly true.

The next point to be examined in the causes of sever is, whether they are capable of co-operating with one another. This is a point very difficult to ascertain, particularly as all the causes of sever that we know are so frequently applied under apparently the same circumstances, without producing the disease. The evidence is so incompleat, that the author dare not venture to make any conjecture on the subject.

The next confideration with regard to the causes of this disease, although the author has treated it in a paper already published, yet it would not be proper to omit it here. If a body be put in motion by an impulse, and no resistance be made to that motion, it will continue to move on, in the same manner, and in the same direction with the same velocity, although no new impulse be made. In like manner, if a fever

fever be produced by any cause it will continue, although that cause is no longer applied. This proposition, as far as the author knows, has not been given by any writer on this disease; it is, therefore, brought forward with great diffidence. On the contrary, it has been laid down by Sydenham, very distinctly, as well as by almost all the authors who have treated this subject, both ancient and modern, that the original cause of the disease was constantly acting to keep it up. Sydenham, as well as various others, has faid that fome noxious matter had got into the body, exciting certain movements, which they call concoctive, by which it was destroyed, and thrown out of the system. It is true, indeed, Van Helmont supposes that there is a kind of spirit, which, however, was to be overcome, and expelled; and Dr. Cullen, that a spasm was induced, without entering into any confideration that the spasm, whatever it might be, required its cause to be constantly kept up or no.

The proposition is, when a cause of fever has been applied to the body, and produced the disease, whether the disease will go on if the the cause be entirely removed, or whether it requires the constant application of the cause for the continuance of the disease. The author, on confidering the history of the disease, as it has been laid down by authors who have frequently feen fever, and who have related particular cases of patients afflicted with it, or its general history, as deducted from their observations as well as from his own experience, is clearly of opinion, that a fever once produced will go on, although its cause be entirely removed, just as a body put in motion will continue in motion, although the impelling body be entirely removed, if it meet with no refistance. That is, if infectious matter of any kind be applied so as to produce fever, that fever will go on, although the infectious matter be entirely removed, fo that no particle of it is either contained in the body, or touches it externally. That if any of the passions of the mind, attended with anxiety, produces fever, the fever will go on, although

though fuch affection of the mind be entirely removed. That if fever should be produced by a fudden diminution of heat in the furrounding medium, fuppofing that the body is afterwards kept in a medium, the temperature of which was perfectly uniform, and of any degree of heat, the fever will go on perfectly. That if fever is produced by moisture in the atmosphere, it will go on if the patient is kept in a compleatly dry atmosphere. That if fever is produced by putrid matter applied in any way to the body, the fever will go on if no putrid matter of any kind is contained in or applied to the body. Each of these positions ought to be demonstrated by great numbers of particular instances adduced; but relating the observations that have been made by practitioners, as well as those which have occurred in the author's own practice, would render this work much too voluminous.

The next point to be observed in the action of the causes of sever is still newer. If a body be put in motion by any impelling power, and meets with no resistance after having

having received the impulse, it would continue its motion for ever with the same velocity in the fame direction. But if the same impelling power should be applied to it a fecond time in the same direction, the velocity of its motion would be encreased in that direction, and every time this was repeated, the velocity of the motion in that direction would be constantly encreased, and if any other impelling power should be applied in the same direction, the velocity and motion would also be encreased in the same direction. Therefore, in fever, if a cause was applied fo as to produce fever by analogy, we should expect that the same cause being again applied should encrease the disease; or that any other cause of sever being applied should also encrease the disease, and so it has always been taken by authors. As the author has already faid in the paper before alluded to, it occurred by accident in inoculating for the small-pox, making a puncture one day that he was not fure was fufficient to produce the disease, a puncture was made in the same patient a day afterwards; each puncture produced an inflammation which came

to suppuration. Although fever was produced when the first inflammation came to suppuration, when the second came to fuppuration, no encrease of fever took place; and it is farther observed in that paper, that the natural infection, as it is called, of the fmall-pox, requires generally thirteen or fourteen days after it is applied to produce the difease, while, if the matter be applied to a wound, as it is in inoculation, the difease takes place in seven or eight days after the matter is applied. If, therefore, a person has caught the infection of the small-pox in the natural way, that is, by the matter floating in the air being applied to some part of the body, if a wound be made two or three days afterwards, and variolous matter be applied, the fever will be produced in confequence of the matter applied to the wound, and when the fever would have arisen in consequence of matter applied in in the natural method, no additional fever, if one was already prefent, will take place, nor will any fever come on if it has gone off. Since the causes of fever are frequently applied to persons in health without producing the difease, a question

tion arises, whether in any given number of persons affected with fever, and an equal number of persons not affected with sever, any cause of fever should be applied? whether in the persons in persect health that cause would produce fever more frequently than it would produce a newfever in those who have been already affected with the disease, or would encrease the fever already existing? From analogy, in the common incidents of life, one would immediately conclude that fuch cause of fever would more readily encrease one already existing, and would be equally, or more ready to produce a new one. But observation, not only in the infection of the smallpox, but in other cases, contradicts this idea. In order, however, to investigate this point, two things are to be considered. In the first place, whether two fevers can be present at once? or whether one fever only? To those who are conversant only with those authors, who have written from their practice fince the revival of science in Europe, and have not grounded their arguments on the writings of the Greek physicians, which include likewise the Arabian, and a few Roman practitioners,

tioners. This may feem a question not to be worth confidering, yet the Greek authors who are extant describe diseases in most cases with greater precision than the modern Europeans, and it was with them an universal and decided opinion, that two fevers might exist at once. The proposition, therefore, to be recurred to is, whether a fever being once produced; a new cause, or a repetition of the same cause; is more likely to produce a second fever; or an encrease of a fever already existing; than to produce a fever in a person in persect health. In the small-pox, new variolous matter applied after a fever has been already produced, will neither produce a new fever, nor encrease that which has taken place, and farther, when it has once produced fever, it is never capable of producing another. The author has applied variolous matter to wounds in himself, and many others who have once been affected with the fever produced by this cause, without any new sever being produced, although inflammation in the wound has taken place. The same is true, when fever has been produced by any other particular

cular species of matter, has been applied any how to the body, so that inflammations have taken place on the skin, and matter has been formed, which, applied to a person who never has been afflicted with a similar sever, followed by such erruption, is capable of producing the disease.

When peculiar kinds of matter have been formed in the body (but not in consequence of inflammations of the skin), capable of producing fever when applied to a man in health, fuch matter, after having produced one fever, may produce a second, third, or fourth in the same person; as, for example, when the common infectious matter produced in the bodies of all persons affected with fever, has once produced the fever, the patient has gone through the disease and recovered. By a fresh application of the same species of infectious matter, a fecond fever may be produced in the same person, as almost every practitioner who has feen a great number of patients, must have found from his experience. But in the first place, if that infectious matter which is produced in the bodies of all per-

sons afflicted with fever, has produced the difease; according to the author's observation; as well as that of many other authors, who have frequently feen the disease; the repeated application of fuch infectious matter neither encreases the disease, nor brings on a new fever nearly fo often as it originally produces a fever in a man in perfect health. Proof of this depends on this circumstance. In hospitals, where persons ill of other diseases have a fever produced by fuch infectious matter; when they remain in the same ward where they received the infection, and where they are constantly exposed to it, during the progress of the disease, (it arifing from feveral other patients, in the fame ward,) go through the disease exactly with the same circumstances as those who have accidentally received the infection, and are in large rooms where they are exposed to no other infectious vapours excepting those which arise from themselves.

Every practitioner conversant in fevers, that have taken place from infection, such as is produced by fever, in the higher and

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lower ranks of life, will be perfectly convinced, upon reflection, that a fever taking place from infection in the most wealthy and noblest persons in the country, and treated with all attention, with regard to infection, goes through its course in the same manner as in a patient in an hospital, where there are many others afflicted with the same disease, provided that attention is paid that there shall be an equal change of the air in the atmosphere, and freedom from putrefaction.

It follows, therefore, that when matter which produces fever followed by cutaneous eruptions has once been applied to the body so as to produce the disease, a second application of it will neither encrease the fever already produced, nor occasion a new one. When matters of other kinds are applied to the body, so as to produce fever, a second application seldom encreases the disease, and is less apt to reproduce it than it is in persons never afflicted with the disease.

The same thing is also to be said of the other causes of sever.

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Since the application of the cause of fever is not necessary, for the continuance of the disease, the next thing to be enquired into is what happens farther in it.

The first attack of the disease may be fatal, in the first, or any subsequent paroxysm.

When the first attack of fever has been satal it has been classed among sudden deaths, and all of these have been called very erroneously apoplexy or syncopy. When subsequent paroxysms of the disease have been satal, the expectation of the disease at a certain time has shown it to be fever. The appearances, however, are the same, both when the parent dies in the first or subsequent paroxysms, viz. symptoms of depression of strength, contraction of the small vessels, and affection of the stomach.

When the attack is fatal it sometimes kills in five minutes, sometimes it requires half an hour, seldom longer than that time. While the patient is yet sensible, violent head-ach with great sense of chilliness take place, the ex-

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tremities

tremities become very cold, and perfectly insensible; there is great prostration of strength, so that the patient is incapable of fupporting himself in an erect posture; he becomes pale, his skin of a dirty brown, and he is foon insensible to external objects; the eyes are half open, the cornea somewhat contracted. If the patient goes off very foon, the pulse is diminished, and at last lost, without any frequency taking place, but if it be longer before he dies, the pulse becomes excessively small and frequent, all the appearances of life gradually fubfide, and the patient is carried off. Of this, the author has feen instances, sometimes at the first attack, oftener in the returns of the disease, although but very few; he believes them to be much more frequent in warm climates, where the moisture of the country occasions intermittents, than in colder regions.

Since, when the attack of fever cuts off the patient in eight or ten minutes, the pulse does not become frequent, it would seem that this frequency was not a symptom necessary to constitute sever; for if a disease should should kill without a symptom, that symptom undoubtedly cannot be essential to the disease.

It is rare, however, that fever is fatal in its attack. It has been already shown, that its continuance does not depend upon its original cause, it must therefore have some progress of its own; either it must remain exactly in the fame fituation in which it was produced, or some variation must take place. It is true, indeed, that if the fubject be taken up a priori, it would prima facie be concluded, that if a cause produced an effect, and was no longer applied, that that effect would continue precifely the fame. this is not the case with the human body, there are powers in it which retard or repel those variations that are produced by the causes of disease, and so it happens in fever. There are powers in the body, which, when the fever is once produced, repel it, and bring the patient back again to the healthy state. It is very true, that what these operations are which repel fever is not known, as far as the author is able to judge,

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but the external appearances which take place during their operation are perfectly known. The author has, therefore, only to enumerate the appearances which take place during the time that the natural powers of the body are repelling the attack of a fever, from whatever cause it may arise.

The first of these is horror and rigor, in English shuddering and shaking, although the Latin words express the sense better. It is an observation the author heard from Dr. Cullen, which has been confirmed from his own experience and reading, that when in any paroxysm of fever, rigor and horror take place, the patient is never carried off by the accession of that paroxysm. Many obfervations are however to be made with regard to these symptoms. They are very far from always taking place in every fever, fo as to be fenfible either to the patient or the bye-standers, or to a practitioner well versed in the disease. When they do take place they happen very commonly in the first accession of a continued fever, not so frequently afterwards;

wards; they take place oftener in the subsequent accessions of intermittent sever; but is very far from being constant in them, although it be true, that when it does take place the patient is not destroyed in that paroxysm by the sever itself, yet it is also true, that many patients escape during the accession of a paroxysm without any horror or rigor taking place.

It is next to be enquired to what part of the body this horror and rigor is to be afcribed. Sensations are generally felt in that place where the cause of the sensation is applied, but this is by no means an univerfal rule; there are many fensations which are felt in parts of the body different from those where the application is made, as pain is felt in the forehead, for example, when fubstances are introduced into the stomach which disagree with it; it is therefore difficult to judge from whence this horror and rigor arises. The author's own feelings lead him to suppose, that they arise from affection of the stomach, he does not however mean to infift upon this. As rigor and horror are fometimes

fometimes absent, so they take place in various degrees. Sometimes the external parts of the body are much affected, and considerable motion takes place in them, and especially in the extremities, in consequence of alternate contraction and relaxation of the muscles; sometimes the other moving exterior parts of the body are put in motion; sometimes, although all the external parts are at rest, contractions and relaxation of the interior parts take place, which patients express by saying they shake inwardly. In which ever of these ways it be, the patient is not carried off, after they begin, by that accession.

When it is observed, that if rigor and horror take place the patient is free of danger from that accession, it is not meant that he is free of danger from that paroxysm, because there are many dangers which may arise during a paroxysm besides that at the accession; yet a patient is rarely if ever cut off in any way in a paroxysm of sever, in which a considerable degree of horror and rigor have taken place, if it be in a simple fever.

Frequency of pulse is not a necessary part of fever, fince the disease can exist without it, and as an attack of fever may prove fatal to the patient without any frequency of the pulse above its ordinary rate, it follows that this frequency of the pulse is to be confidered, not as an appearance of the attack of the difease necessary to constitute the accession, and is therefore to be enumerated among the appearances of the fecond stage. Not but that it happens often, when a patient is carried off by the first stage of fever, that his pulse becomes much more frequent than its ordinary rate, sometimes 140, 150, or 160 strokes in a minute, or as frequent as can be counted. That, however, does not prevent the author from deeming frequency of the pulse, an accident only in the first stage depending on the flow of blood upon the heart; it seems to be a more decided appearance of the fecond stage, for a second stage of a simple sever, or an intermittent, it is believed has never been feen without it; yet in continued fevers, the author has frequently feen all the other fymptoms of the fecond stage, without any frequency frequency of the pullation of the arteries above the common rate, which is 73 strokes in a minute; and he has often seen it much below 73, when all the other symptoms of the second stage were present in an high degree. He believes, however, that this is only that the heart is not affected with the disease, or rather that a greater degree of insensibility has taken place in it, than in the other parts of the system, therefore frequency of the pulse should properly be enumerated among the appearances of the hot sit of sever.

The pulsations encrease as the hot fit comes on to 100 or more strokes in a minute, and continue frequent during the whole of the hot fit, and often much fuller and stronger than in the first stage of the disease.

Along with this frequency of the pulse a greater degree of heat takes place, but independent of it, because it bears no proportion to the frequency of the pulse. Sometimes when the pulse is very frequent, the heat to the feel of the patient, to the thermometer,

and to the practitioner, is less than the natural temperature. Sometimes the heat is greater, when the pulse is by no means very frequent, full, or strong.

The heat of the human body if taken by a small Fahrenheit's thermometer under the tongue, with the mouth shut, is 97° and a half in a person in persect health. It is the same, if an opportunity should offer of examining it, in any of the interior parts of the body, seldom altering a degree, as long as a man remains in health, whatever temperature the external atmosphere or surrounding bodies may be. How such an exact temperature should be maintained, it is not the object at present to discuss.

The greatest degree of heat the author ever observed in sever, and he has paid attention to this point, is 105°; he has seen in many authors much greater degrees, 110° and 112°, but never found in any sever either simple, continued, or intermittent, an higher degree than 105°. It varies very much in the hot sit of the paroxysm of a simple and intermitting

intermitting fever. During the hot fit, it is always above the natural temperature, although fometimes not more than 100° or 102°. In the hot fit of the paroxysms of continued fevers it falls fometimes below the natural standard. The heat by the thermometer in different parts of the body is very unequal in fever. It can be best observed under the tongue. In the extremities it can never be taken perfectly, unless there should be a wound or ulcer into which the thermometer can be introduced; in that case the heat is nearly the fame as under the tongue. But, in the hot fit, especially at the beginning, it varies confiderably in different parts of the body. In some parts it is 4 or 5 degrees below the natural standard, while in other parts it is as many above it, although the whole body be equally defended from external exposure to heat or cold; and although the circulation appears to be the fame in the hotter and colder parts of the body. This happens only in the beginning of the hot fit after it has completely taken place, whether the fever be continued, remittent, or intermittent, or fimple, the heat comes

comes to be equal over the whole body, except that it cannot be perfectly measured in the extremities, unless there should be a wound into which the thermometer can be introduced.

Although frequency of the pulse and encreased heat are often found in the first stage of the fever, yet, it has been shown, that neither of them were effential to this stage, not even when it proved fatal. But both frequency in the pulse, and greater heat are always found in the hot fit, or fecond stage of a simple fever. It is, therefore obvious, that they constitute a principal part of this fecond stage, which is evidently a natural cure or means of carrying off the first stage of the disease. This is especially proved by the pulse not only becoming more frequent, but likewise for the most part fuller and stronger in this second stage or hot fit. This indicates a greater difference between the fize of the ventricle of the heart, when dilated and contracted, therefore a more extensive contraction of it; and likewife that it exerts itself with greater energy,

or in other words contracts with greater force, fo as to throw a larger quantity of blood into the aorta at each contraction, and to throw it in with greater force, and encrease the circulation throughout the whole fystem. For certainly, if there be a greater difference between the contracted and relaxed state of the ventricle, fo that more blood is thrown into the aorta at each contraction, and the contractions are more numerous, a larger quantity of blood must circulate through the whole body. It is true, indeed, that when it passes from the aorta, it may not circulate through every branch of it, and every capillary veffel with greater velocity; but it must pass through some of its branches, and some of the capillaries with greater velocity. If some of the capillaries, and fome of the branches of the aorta are contracted, then it must pass through the others' with still an additional velocity, in confequence meet with a greater relistance, which will force it to attempt to pass through those vessels which are contracted with greater force. Since then a number of the veffels are evidently contracted in the first stage of the

the disease, this would render the solution of the effects of the hot fit, or second stage, in carrying off sever easy, for it would resolve itself into this; that the small vessels being contracted throughout the system, propel a large quantity of blood upon the heart, which stimulates the heart to make stronger exertions, and so throw the blood with greater force into these contracted small vessels, force them open, and thus carry off the disease. And such has been the solution given by those who have precluded any alteration in the sluids from being the cause of the disease.

of a simple fever, is a point to be determined only by experiment. But no alteration in them has ever been shown in any fever, much less in a simple one, which continues only 8, 10, or 12 hours. On the other hand, it does not require any precise time to produce an alteration in the chemical properties of the sluids; it may take place instantaneously, much more may it happen in two or three hours. But the possibility of such

tuch alteration of the properties of the fluids by no means proves that it has actually taken place, any more than the possibility of its not happening proves that it has not taken place.

Upon examining blood carefully taken in the first stage of fever, and blood taken in the second, or even in the crisis, the author in many instances has found no sensible difference. The spontaneous separation of the blood by which the coagulable lymph separates from its water, and the serum, entangling the red particles at the same time, so as to form a coagulum, has been found exactly the fame in all the stages, the red particles the same in all the sensible qualities, in as far as could be examined by any chemical process. The coagulum of the cogulable lymph being likewise the same, the ferum the same, the superfluous water, putrescent mucilage and falts contained likewife the same. It is useless to detail these experiments, as they are only negative proof that in many cases the fluids are not altered by the hot fit of a simple fever. In other cafes

cases alterations have taken place, but not in simple severs, as will be mentioned afterwards, yet more frequently there is no sensible alteration whatever.

It has indeed been faid that the fluids were attenuated, and a thousand things besides, the dreams of speculatists, not confirmed by one experiment, and as such to be entirely rejected.

Until then it is otherwise proved, which there is no reason to imagine it will be, after the attention which has already been paid to the properties of the fluids in fever without discovering any alteration in them; it is concluded that the hot fit makes no alteration in the fluids.

It is next to be confidered whether this greater action of the heart, propelling the blood with additional force into the small vessels, really removes the contraction, and so carries off the disease.

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There are two distinct parts in the attack of fever; contraction of the small vessels, and depression of the powers of the body. These two are not in proportion to one another, but fometimes when there is a great degree of contraction, there is very little depression of the powers of the body, and depression of strength is not necessarily attended with greater contraction of the fmall veffels. There is also affection of the stomach, apparently independent of the other external appearances, which contraction, depression, and affection of the stomach together, are possibly no more than the exterior indications of some other alteration, of which no probable conjecture has hitherto been formed. If contraction of the vessels is one of these appearances only, it occasions some hefitation in allowing that removing it, or as it has been called by fome taking off the spasin, would cure the disease.

It is first to be considered whether the disease is carried off in proportion to this strong action of the heart; for here a distinction must be made, without which great

great error may be fallen into. Fullness and strength of the pulse, which frequently take place in the hot fit of fevers, as well as in other diseases, has often been called hardness, as has already been observed of the obstruction. Hardness of the pulse is undoubtedly a feel of action in the arteries, and not in the heart; it may exist with a small pulse when the ventricle throws out a small quantity of blood at each contraction, with a weak pulse, as in hectic cases near their end; when the pulse is flow, as in chronic rheumatism; therefore does not at all depend upon the action of the heart; and it has this concomitant symptom, that it produces in the blood a disposition to remain fluid after extravalation, so that the red particles shall fall from the furface before any coagulation takes place, and the upper part shall confift of coagulated coagulable lymph, forming what is commonly called a buff upon the blood. This takes place not unfrequently in a paroxysm of simple fever, but is not necessary, or even common. When it does, it always gives a great disposition to prolong the paroxysm, and convert it into a compound

compound fever. This appearance then must at present be entirely laid aside.

It is fo obvious to suppose, that the strong action of the heart propelling a great quantity of blood with force into the small veffels is that part of the hot fit, which carries off the disease; that this opinion has on first view been universally adopted, and in all the rude ages of medicine stimulants have been constantly employed to encrease this action of the heart, so as to shorten the paroxysms, produce crisis, and render them fimple fevers. But on the contrary, when the art has been more refined as by Sydenham in our country; these stimulants have been rejected, as tending to prolong what would otherwise be a simple fever, and converting it into a compound one. It may be affirmed, therefore, that although in rude ages the idea has been formed, that the greater exertion of the heart is the natural cure of the disease; yet when practitioners became more conversant in it, the opinion was entirely thrown afide. Many practitioners who have not confidered the subject maturely fill

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still retain this notion, certainly errone-

It must be owned, however, that although the encreased action of the heart produced by spices, wine, and other stimulants, very often prolongs the paroxysm, and converts a simple into a compound sever; nevertheless, sometimes it has happened, that on exhibiting these stimulants a paroxysm has been sooner, and more perfectly carried off, but this is so seldom, not once in sifty times, and on the other hand the paroxysm has been so frequently prolonged by them, that they do not seem of such utility, as to authorise our employing them in practice.

However the increased action of the heart is certainly greater in simple than in compound fevers, in intermittents whose paroxysms are shorter (and the encrease of action of the heart, by means of stimulants, now and then makes them still shorter) than in a continued sever, so that it can be hardly doubted, that the encreased action of the

heart is one means of the cure of the first stage, although far from the only one.

Other means are therefore to be fought, and the next which offers is some action of the stomach.

It frequently happens that fickness takes place in a fimple fever, not in the attack, but in the beginning of the hot fit. Some have imagined that this had fuch an effect as to co-operate with the strong action of the heart, so as to carry off the disease. They have been led to this more particularly by observing, that certain remedies exhibited, which fometimes produce fickness, do frequently bring on a crisis sooner or more perfectly; fuch medicines, for instance, as tartarifed antimony, and ipecacuanha. But there are many fimple fevers in which no fickness ever takes place, and yet they terminate as perfectly, and the crifis is as complete as in other cases where sickness does take place; fickness therefore cannot be confidered as a cause existing in the hot fit which carries off the disease.

Medicines,

Medicines, such as tartarized antimony, and ipecacuanha, which certainly have a tendency to bring on a criss, and render that criss more perfect, frequently, while they do so, produce no sickness. When a large dose of these medicines can be borne upon the stomach, without occasioning nausea, they are more essicacious in rendering the paroxysm shorter, and converting the fever into a simple one, than when the stomach will bear but a small quantity without producing nausea; in this case, indeed, they rarely have any effect.

It is farther to be observed, that there are several other medicines which produce sickness in as violent a degree, such as squills, which, in whatever dose they are exhibited, have no effect in bringing on criss in fever.

Upon the whole, therefore, it seems evident that sickness does not tend to carry off the disease, but that the sickness is only a concomitant effect of that action of the stomach, which either naturally produces a

criss, or is excited by the action of certain remedies.

A patient not being carried off by the first stage of a simple fever after horror and rigor have taken place, which feem to arife evidently from affection of the stomach. Loss of appetite likewise, and sometimes nausea appearing at the beginning of the hot fit, affords fuspicion, that some affection of the stomach, produced in the first stage, has a power likewise of carrying off the contraction of the fmall veffels, and the inaction of the powers of the body throughout the fystem, or the cause on which these external appearances depend. For the ftomach has very great influence on the other parts of the system, as appears from the effect of many medicines which have their operation entirely on the stomach before they can reach any other part. Spices, fuch as nutmeg, cinnamon, &c. produce a glow of heat over the whole system the moment they are received into the stomach, when they have been thrown into it fix or eight hours their effects are entirely gone off, and instead

nstead of a stimulus, languor succeeds. It s well know, that the effects of spices depend entirely on the effential oil they contain; this is far from being volatile, and has no chance, therefore, of evacuation out of the body by evaporation in that time, and it often happens that no other takes place. They cannot, therefore, have their operation in the blood-veffels, or any of the fecretory organs. It has been supposed that the nerves of the stomach took them up, carried them to the brain, and from thence to the other parts of the body, but without the mallest proof of any kind whatever. It remains, therefore, that the whole of their operation is on the stomach. Opium likewise, by its operation on the stomach, affects the whole fystem, for it is not swallowed five minutes, in many cases, before the effects of it begin to be felt, and they are entirely gone off in eight or ten hours, although there be no reason to believe that any part of it has gone out of the fystem. Perhaps being diluted with the whole mass of fluids, it no longer produces any effect, while, if applied in a more concentrated

state to the other parts of the body, it would certainly have confiderable action. Peruvian bark, exhibited in substance, to the quantity of half an ounce, or an ounce, just before the attack of the paroxysm of an intermittent fever, the time of which is known, will, in many instances, prevent that paroxyfm from taking place. The effect, therefore, must be on the stomach, for there is not time for it in this space to be dissolved, and carried into the blood-veffels, it cannot get into the blood-veffels in the form of a powder, if it be exhibited already disfolved in water, or any other menstrum, it is not nearly fo efficacious as when employed in powder, the whole of its effect in this case must be on the stomach.

It is sufficient to have enumerated the effects of these medicines to show that the stomach has great influence over the other parts of the system; it is, however, by no means meant that the action of all medicines are entirely, or principally on the stomach. Mercury, for instance, may be exhibited so as to affect the stomach, and produce

which whole follow, for it is not fival-

duce fickness, but in consequence of this affection of the stomach none of its other powers are exerted. In order that they should be, it is necessary that it should be absorbed, and carried into the course of circulation. For it will equally produce its other effects if it be absorbed from the skin, or any other part of the body. All that is intended to be shown is, that affection of the stomach has very great power over the rest of the fystem, and very probably co-operates with the encreased action of the heart in carrying of the contraction of the small vessels, and inaction of the powers of the body, or the more unknown alteration from the natural state of the system on which these depend.

This encreased action of the heart, and affection of the stomach, may be the only efficient powers which take place in the hot sit of severs, or there may be others with which we are totally unacquainted.

In investigating the effects brought on by the hot fit, we must select those appearances which which take place in a fever, confisting of one paroxysm only, and which is terminated in eight, ten, or twelve hours, for there are many which happen in compound that do not appear in simple fevers.

The first that shall be taken notice of is fullness and strength of the pulse added to its frequency, which in many instances, is very much encreased above that which arises in, and is a part of the first stage of the disease. It is often much more frequent in a fimple fever than in the paroxysms of intermittents, and still more so in paroxyfms of intermittents than in continued fevers. In fimple fevers, it is not uncommonly 140 or 150 strokes in a minute, full, strong, and very much obstructed. In the paroxysms of intermittents and continued fevers, not unfrequently hard at the same time. But this feldom happens in the hot fit of a fimple fever. Some authors have mistaken the obstruction of the pulse for hardness. Sometimes the disease terminates in topical inflammation without any crifis happening, as is hereafter to be described,

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in which case, although the pulse be hard, the sever cannot be considered as simple.

The circulation is, therefore, universally encreased, although unequally. In some of the small vessels in every part of the body, it is encreased, so as to produce redness and fullness of all the parts, and an encreased fize of the veins. But then many of the small vessels in every part remain contracted; as may be gathered from the exterior parts, although they have a degree of redness, still retaining that dirty reddish brown; from the contracted state of the secretory organs, and thence the diminution of the fecretions, which still continues; and the dryness of the skin and tongue. It appears from these sufficiently evident, that although some of the small vessels are so far enlarged as to let more blood pass through them, yet others remain still contracted. The circulation, therefore, is encreased by the strong, and more frequent action of the heart, and greater difference between the contracted and relaxed state of the ventricle propelling the blood blood forward through some of the vessels, while others remain contracted.

At the beginning of the hot fit, and before it is perfectly formed, the circulation is variously affected in different parts of the body, that is, the circulation is evidently greater in one particular part. It frequently happens that one part shall become red and full, while others remain pale and contracted; one arm, for instance, shall be red and larger, while the other is pale and contracted. The veins of the one shall be full, and the blood flow in them more rapidly, while those in the other remain empty. This shall continue for a certain length of time, when that part which was red and full, and the veins distended, shall become contracted, pale, the veins contracted, and empty, while that which was pale, its veins contracted and empty before, shall become full, red, and it veins distended. This shifting, however, remains but a short time in simple fever, perhaps not above half an hour. In paroxysms of intermittents, it continues longer, and still longer in the first attack of

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continued fevers. Universal redness at length takes place in all cases of simple fever; to-gether with fullness, encreased size of, and greater circulation through the veins; accompanied however, with appearances of contraction.

The heat is frequently much greater in the cold fit, or first stage, than in the natural state of the body. Even when the patient feels himself very cold, the heat often arises to as great a degree as it ever does in fever. When the fecond stage comes on the patient begins to feel himself hotter, but unequally; fometimes one extremity is felt cold by the patient, the other extremity hot; fometimes the extremities feel cold, when the patient feels the parts about the thorax very hot. But this inequality fubfifts the least, and for the shortest duration in a fimple fever. The heat is more unequal in the paroxysm of intermittents, and frequently much more in the first attack of continued fevers. The heat over the whole body in a fimple fever feems intense to the patient, yet upon application of the ther-

mometer,

mometer, it is often found even less than it was when the patient felt himself cold. When the patient has felt himself universally cold, it has frequently been found 105° under the tongue, but when he felt himfelf extremely hot it has been reduced to 102° or 103. It is difficult in these cases to believe the thermometer a perfect measure of heat, did we not know that fensation of heat is extremely fallacious, while we have no reason to doubt that the different expansions of mercury and glass are uniform in shewing the variation of temperature, as they are always the same in every fixed point of heat; such as in the boiling of fluids under the fame degree of pressure, the becoming fluid of folids, &c. Notwithstanding, therefore, that the patient feels himself excessively hot in the hot fit of a simple fever, yet he is really not more so than he was in the cold fit. frequently not even fo hot.

There is considerable thirst in the beginning of the first stage of a simple fever, which is greatly augmented in the second stage. It is difficult to account for this

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augmentation. The tongue is not now drier, nor the mouth more affected with the disease. Perhaps, the exertion of the powers of the heart, which we have considered as one of the operations tending to carry off the disease, may possibly create thirst. There is as yet no evacuation by which the proportion of water can be diminished in the blood-vessels. Perhaps it may be the superior sensation of heat, although not accompanied by actual heat, that may occasion this superior sensation of thirst, but this cannot be determined.

The patient is sometimes so much depressed in the attack of simple sever as not to seel any degree of restlessiness, but at other times a considerable degree takes place; it never fails to come on most violently in the second stage. If it did take place in the first attack, it is very much encreased during the second stage. The patient seels the time gone through infinitely long; a minute seems to him more than an hour; he cannot six his attention on any object, he does not lie easy, and finds no relief in changing his

P 2

posture.

posture. It is difficult likewise to say, from what cause this takes place. It is certainly different from that anxiety and oppression which arises about the præcordia in the first stage of the disease.

There are two apparent causes of restleffness and anxiety in the system. One, an accumulation of blood in the lungs, in the auricles of the heart, and in the veins leading to them. The ventricles of the heart can never be faid to be oppressed with blood, since there is a period in each of their contractions in which the valve, which is fituated between the ventricle and auricle, is shut, no blood can be thrown into the ventricles during the time of their contraction, while they are clearing themselves by propelling the blood into the aorta, or pulmonary artery. In the auricles, there is no fuch provision, but the blood is pressing into them, even during the time of their contraction, and gives refistance to it. The veins near the heart, if the blood be thrown upon them by the contraction of the veins in the other parts of the body, and the auricles

auricles are not capable of conveying it away, but must be distended. This produces, evidently anxiety and restlessness. Or restlessness may arise in the first stage from universal contraction of the small vessels, and may continue in the second from the contraction remaining. In the fecond stage, the encrease of circulation, from the stronger action of the heart through fuch veffels as become of larger diameter, may add to the distension of the larger veins near the heart. The ventricles, being more dilated in the time of the dilatation, more contracted in the time of their contraction, as appears from the pulfation of the arteries being much greater, and fuller, may, on the contrary, take off the additional quantity of blood, so that, perhaps, the whole anxiety remaining from this cause may not be greater in the hot fit than it was in the first stage.

Another cause of restlessiness and uneasiness may arise from distension of the small vessels throughout the system. This produces uneasiness over the whole body, accompanied with anxiety, restlessiness, and the same idea

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of the prolongation of time. The author however, would not be confident that this was entirely the cause of restlessness in the hot sit of simple severs; especially at its commencement. There are various causes which may produce it; as many affections of the mind independant of the diseased state of the body; therefore, foreign to the present subject. Not but that the mind is affected in sever as well as the body, but this has been considered as part of the first stage.

There are many diseases in which independant of accumulation of blood, in the large veins near the heart, and tension of the small vessels throughout the system, restlessness, uneasiness, and the idea of the prolongation of time, may be produced. If, for instance, substances get into the stomach which disturb it, without producing sickness or nausea, the same sensation frequently takes place. When substances get into the stomach, which are disagreeable to it, the first operation that happens is, that the small vessels throughout the system are contracted, as appears from the universal palences

ness which takes place. The blood is thrown in large quantity upon the lungs, veins near the heart, and its auricles occafioning a fense of weight and anxiety: this may be faid to be owing to the fulness of the veins near the heart and in its auricles. After this paleness, universal heat, strength, and frequency of the pulse, fwelling every where, cutaneous eruption, inflammation of the head, great tension of the system, and uneafiness, which might be ascribed to the tension, take place. But there are many substances, such as food of high flavour, and producing viscid folution, which, without caufing a paleness, nausea, tension, &c. will, if eaten in too great quantity, or if thrown into a stomach not sufficiently powerful for their digestion, occasion the same sense of uneasiness, restlessness, and the idea of the prolongation of time. There may, therefore, be affection of the stomach, independant of fickness or nausea, and independant of any tension, which may occafion restlessness, uneafiness, and idea of prolongation of time. It is not impossible, P 4

fince the stomach is affected in fever, that it may be owing to this affection that these appearances take place.

Delirium may take place in the first stage of fever, and in consequence of either the depression of strength in the body, or in the mind, or contraction of the vessels of the brain. Delirium may also take place in consequence of the second stage of the disease, and that in a simple fever. This delirium happens much more frequently in a simple fever than it does in the paroxysms of intermittents. The delirium that takes place in the fecond stage, would appear to depend entirely on the encreased action of the heart; the pulse becoming very full, strong and frequent, there arises pain in the head, dissimilar from the pain which took place in the first stage. That which took place in the first stage is clearly a pain affecting the integuments of the head, perhaps the skin alone, at most the pericranium; but the pain which arises in the second stage, is felt by the patient internally, and gives him the idea that there is fomething distending the head or the brain,

brain, so as to attempt to burst the cranium. It is not more, nor often so violent as the pain taking place from the first stage of the discase. The delirium it produces, while it remains, is considerable; that is, the patient often mistakes one object for another, although the organs of sensation make still an impression on his mind. He can see, for example, but mistakes one man for another, or for a post. His organs of hearing are often more readily affected, but not with the ideas that would be produced by the same sounds were he in health. The same thing happens with regard to his other senses.

In the mean time, the carotid and temporal arteries beat full and strong, the eyes are rather red, and the face flushed; there is, therefore, reason to believe that this delirium arises from compression of the brain by the quantity of blood thrown up into it by the encreased action of the heat.

This delirium, if unaccompanied with hardness of the pulse, by no means retards the

the crisis. But if hardness of the pulse, independant of obstruction, should take place, it often converts the disease into a compound fever.

With these symptoms, as far as they are compatible with them, all the appearances which take place in the first stage of sever continue. Some, however, are incompatible; the pulse cannot be full and strong, and small at the same time, for instance. Otherwise the pain in the forehead, depression of strength, foulness of the tongue, and contraction of the secretory organs, &c. all continue.

Fevers generally differ from one another in the duration of the hot fit. A fever which has been called an ephemera, as lasting a day and a night, although described by Greek physicians as attended with as violent symptoms as any fever, yet by modern practitioners a disease under this name has generally been attributed to excess. Such as drinking too large quantities of wine; or the application of some other such stimulus, which occasions a frequency of pulse and heat, for a certain length of time, this

affection does not in any way resemble a fever, there being none of the other symptoms of that disease.

A simple sever, such as the author is describing, does not often last a day and a night, but is often terminated in eight, ten, or twelve hours; the disease going off does not return again, and then may be considered as persectly simple; or it does return again, and forms a compound sever, the history of which will be shown in a future differtation.

Nevertheless, the hot fit in simple fever may remain for a much longer time, may continue two days, or even run into the third, without any fresh exacerbation, and may be carried off. This happens from the prolongation of the second stage, but this is extremely rare.

Much more frequently in simple fevers, the first stage does not continue above two hours, the second stage rarely continues afterwards for more than two or three hours before the crisis begins to take place. It frequently happens that it continues a much

less time when the disease is not terminated by a crisis, but by an inflammation, or an hæmorrhage.

The first manner in which a simple fever terminates, has been called a crisis. Rome and Italy having acquired their science from Greece, were exceedingly apt to adopt Greek phrases, more particularly in medicine, because almost all the physicians among the Romans were Greeks. But the terms were employed very vaguely. Crisis, for example, was used for any termination of any difease, good or bad. Among the moderns, there is nothing so prejudicial to medicine as the introduction of Greek names, especially as they have been adopted by numbers who do not understand one word of the language. When the term crifis is made use of in the present work, it always means the going off of the first stage of fever in the manner here described.

The hot fit having continued a certain time is the occasion apparently of the crisis, either by means of the encreased action of the

the heart and arteries; the affection of the stomach; or both taken together; or, perhaps, by some other operation which has not as yet been discovered. Sometimes one of the symptoms of the first stage gives way first; sometimes another; so that it cannot be said which has the priority. When the symptoms of the first stage are carried off, those of the second stage go off of course, being produced by those of the first. So that if the first stage had never taken place, the second would never have come on. Nor does the second stage continue like the first independant of its cause, but leaves the patient as soon as its cause is removed.

It is the symptoms of the first stage that first apparently give way. Sometimes the great sense of weight about the præcordia, sometimes the obstruction of the pulse, sometimes relaxation of the secretory vessels takes place, &c. but the most striking appearance to the patient and by-stander, is relaxation of the vessels of the skin, in consequence of which profuse sweating takes place, which has been supposed by many eminent

eminent practitioners, to be an evacuation of something noxious to the system, and which was the cause of the disease.

It is difficult to procure a quantity of the fluid, so secreted, sufficient to determine its qualities; fome may be procured by taking it off from the skin by a spoon, or by wathing the linen in distilled water. By the first method it is difficult to procure more than two or three ounces, in most cases hardly one. It is a fluid not perfectly transparent; its want of transparency depends on an oily matter, which, on standing in a close phial, arises to the furface, and confifts partly of expressed oil, partly of the oil which gives the peculiar fmell to the body. In both these refpects it agrees with the oily matter commonly secreted in the sweat of a man in health. After this oil has rifen to the top fo that the water becomes transparent, on evaporating it, a mucilaginous matter is found; if the heat employed for the evaporation be under 150°, it is nearly colourless, and perfectly foluble in water again; with a greater degree of heat it acquires a brownish colour. Along

Along with this mucilaginous matter, faline substances are found, but in such small quantity, when the sweat is taken from the skin, by a spoon that it can hardly be determined what they are. When taken from the linen of a patient washed in distilled water, filtered and evaporated, natron muriatum, ammonia muriata, and ammonia phosphorata are found. All these substances are found in sweat excited in a healthy body, fo that in as far as can be judged from experiment, there is nothing in the matter evacuated by fweating which is not found in health. It is possible, indeed, that fomething may escape chemical experiment, but it must never be presumed that there is. Too often a possibility of substances or circumstances existing, that the nicest ferutiny could not detect, has been deemed a fufficient proof that fuch circumstances or fubstances did actually exist; a proof, and not a possibility, is always necessary to induce the smallest belief of their presence. There is, therefore, the highest probability that there is nothing in this evacuation different from the sweating that takes place in a person in health, and that it arises merely

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merely from relaxation of the vessels of the

Although profuse sweating most commonly takes place in the going off of a fimple paroxysm of fever, by crisis, there is sometimes only a gentle moisture on the skin which is at the same time relaxed. The skin returns likewife to its natural colour, but this happens only towards the end of the crifis, or we should rather say, that the true skin receives its natural florid colour from the blood circulating through the small vessels, and overcomes the colouring membrane of the skin, and the colour of the sebacious matter. Indeed there appears to be more colour in the first stage of fever, from the febacious matter of the glands, and the colouring membrane of the skin, than in the natural state, and that this was part of the disease; but this colour will be more concentrated in consequence of the contraction of the skin, fince the sebacious glands will be brought nearer to one another, and likewife the different parts of the colouring membrane of the skin, so as to give, as it were

were, a deeper tint. When the contraction of the skin goes off, this colour goes off likewise; but this never happens at first, whether there be much or little evacuation by sweating, but towards the end of the crisis, or when it has compleatly taken place.

The evacuation by fweating takes place very profusely in the greatest number of simple fevers for several hours. But as in some it is but trisling, it would not seem a necessary means of carrying off fever. Probably it is merely accidental, and in consequence of the relaxation of the skin, and continued strong action of the heart; it is to be remarked, however, that no simple sever is compleatly carried off by criss, without some degree of moisture of the skin.

The urine is also secreted commonly in larger quantity in the criss of sever; but what is most remarkable in it is, that if it be collected in sufficient quantity, and let stand for some time, it becomes turbid, and slaky chrystals are deposited of a dirty red colour. This deposition almost always takes

place on the going off of a fimple fever by crisis, and that even when the febrile appearances have been very flight, often when it was only an encrease of the natural evening paroxysm of fever. This matter seems constantly to be contained in the urine, even in health, with different appearances. urine, when first evacuated, is perfectly transparent, and, what is commonly called in liquors, bright, remaining fo while it stands in the heat of the human body. We are unacquainted with the state of it in those climates where the heat of the atmosphere is equal to that of the body. If this matter has separated from it by standing, it re-diffolves on being heated, provided no evaporation has taken place.

These dirty, red coloured, slaky chrystals appear constantly, in as far as the author knows, in that crisis of a simple fever, which entirely carries off the disease; if they were wanting, he would hardly hesitate to say, that it was not a paroxysm of simple sever, but that the sever would be repeated, although all the other symptoms denoted

a perfect crisis. The appearance of these staky chrystallizations seldom takes place towards the beginning of the crisis, but generally after the fweating has continued fometime. The matter of these chrystals has been considered by many authors as the matter that occasioned the disease, changed and made fit for evacuation, but that it is not, will appear from many confiderations. In the first place it is always present in health, only not in such quantities as to chrystallize in flaky chrystals, and that at all times in the twenty-four hours. The quantity, indeed, in health is so small as to be hardly weighable, but then when it is copious, if separated from the other parts of the fluid by filtration, and dried; it hardly ever weighs fo much as five grains, if we take it from all the urine secreted in twenty-four hours. From the quantity, it hardly can be supposed that it could produce any great variation in the fystem, much less such a disease as fever. It not only makes its appearance in the crifis of fever, but likewise in many other diseases, both of the fystem generally and of particular parts, and frequently in difeases where no frequency of the pulse, nor any derange-

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ment

ment whatever of the fystem generally, nor any particular affection of the organs of secretion takes place. The appearance of this substance, therefore, must be considered as not at all essential, but only accidental, perhaps from relaxation of the organs of secretion, although its appearance is of great importance in determining the crisis, not only of simple but of compound servers.

The mouth and tongue, which were dry in the attack, become moift during the crifis, and the tongue becomes clean. The tongue has been defcribed as covered with a particular kind of crust, which adhered to it as part of itself. In the crisis the crust falls off in a surprising manner. It is known that when any part of the body dies, or is killed by any means, a process immediately takes place, by which that part of the sibres where the living and dead were mechanically united, is converted into a sluid; in consequence the dead and living parts are separated from one another, and the dead parts of course, if they were on any external surface

of the body, or on the surface of any cavity that opens externally, are thrown off. It is true, indeed, that Mr. Hunter and some other pathologists have held an opinion, that the absorbents took up this part of the sibres; but it is impossible that an absorbent should take up part of a fibre, unless its continuity had been previously broken by some mechanical or chemical means. There is no mechanical power in the orifice of an absorbent vessel that can break the continuity of a fibre; it must be broken by the conversion of it, by some chemical means, into a sluid.

It is by a fimilar operation, that the crust which was formed on the tongue in a simple sever is thrown off, for the crust adheres to the surface as part of itself. This separation is much more conspicuous in the crisis of a simple sever, than in any other case, for the whole takes place in an hour or two, so as to leave the tongue compleatly clean. The edges of the tongue first become moist, but that is where the crust did not cover it, and their moisture is in common with that of the rest of the mouth.

The

The crust itself comes off in small slakes every where over the surface, leaving at first specks, as it were, where the tongue becomes clean, and others, where the crust still remains, until at last the whole surface of the tongue is entirely in its natural state.

When a dead part is exfoliated from a living part, it leaves the furface of the living part in many cases, in a state of exulceration; in fome cases, however, it is left in its natural state; as, for instance, when those sloughs which are formed in the eryfipelatous fore throat are exfoliated, an indentation remains in the furface of the membrane; but in this hollow the membrane is perfectly found, the hollow gradually rifes up, and is obliterated. The furface of the tongue is perfectly found when the crust is exfoliated in a simple fever, it is by no means always fo in compound fevers: In the crifis of a fimple fever the crust is entirely carried off from the tongue, and it is left perfectly clean, and in its natural state.

At the same time the mouth becomes moist, it was dry from the contraction of the secretory

fecretory vessels of the glands, whose excretory ducts open into the mouth in its natural state. There are four large glands, the two carotid, and the two fubmaxillary which secrete the faliva at a considerable distance, and their excretory ducts run a confiderable way before they terminate in the mouth. In the crisis of a simple fever these glands secrete a larger quantity of saliva, but not fo much as to be thrown out from the mouth. It is proper to observe that the fluid these glands secrete is destined to be employed in the stomach. If a larger quantity be fecreted than is useful in the stomach, it is evacuated by the mouth. The principal purpose for which the faliva is made use of in the stomach is for the digestion of the food. During the first and second stages of a simple fever no food is thrown into the stomach, or if it be it is not digested there; although little or no faliva be fecreted, there being no want of it no mischief ensues. When the crisis has taken place, the appetite is immediately restored, and a greater quantity of it passes into the stomach unperceived. A more copious Q 4

copious secretion of it has not therefore been observed in the criss of sever, especially in simple ones.

There are various other glands fituated in the mouth which fecrete mucus; perhaps faliva, or fome other fluids; these serve to keep the mouth moist, which it becomes by degrees in a very compleat manner, in the criss, especially at the end. But from none of the glands of the mouth is there any such remarkable or copious secretion, as from the skin or kidneys, nor is there any thing in those secreted different from what is found in health,

The thirst which takes place in fever arises partly from the dryness of the mouth. The thirst, so far as it depends on this cause, must, in consequence of greater secretion from these glands, be removed. But it also depends on the state of the stomach, and it also has been said to depend partly on the want of sluids in the blood-vessels. The large evacuation by sweating which takes place in the criss of a simple sever, evacuating large quantities of watery sluids, occasions a want of them in the blood-vessels, and therefore

therefore it might be expected to have the fame effect, as when sweating is produced by a warm atmosphere, exercise, or any such cause. But this is so far from being the case, that the stomach being relieved from the fever, the tongue being moist from a greater secretion of sluids into it; the thirst which took place in the first and second stages of the disease is carried off; so that although the sweating be profuse, the patient is relieved from this symptom towards the end of the criss of a simple fever.

In the attack of fever, supposing it to be compleat, less bile is secreted, less pancreatic juice, and there is also less secretion from the mucous glands, and other glands of the intestines through the whole intestinal canal. When the fever is present there is therefore less matter to be carried forward by the peristaltic motion. If food were in the stomach when the fever came on, or even if it had got in four or five hours before, no change being made in that food by the ordinary processes of digestion, during the paroxysim

paroxysim of simple fever, that part of it which is indigestible does not get into the intestines, and therefore cannot be carried forward by the peristaltic motion. The author likewise suspects, that the canal itself is contracted in the fever, that the food is hardly digested till after the fever if it continues only ten or twelve hours. From the food beginning to digest towards the end of the crisis, but more by the pancreatic juice, mucus, and other fluids fecreted into the intestinal canal being formed and thrown into it in greater quantity, from the contraction of the canal going off, and the peristaltic motion returning to its natural state, the evacuation from the intestines comes into its natural state, but is not much encreased in the crisis of a simple fever in common, although in the crisis of compound fevers it is often very confiderably encreased. There is no reason for believing any thing is evacuated from the intestines different from what is evacuated in health.

Every other secretion, besides those which have been now enumerated returns to its natural state, and very rarely exceeds it in quantity.

When

When a crifis takes place in a simple fever, the feel of obstruction of the pulse goes off, but very variously. Sometimes the feel of obstruction begins to diminish at the commencement of the crisis, and does not go off entirely until it is quite compleat; sometimes the crisis continues without any diminution of the feel of obstruction of the pulse, till the sweating has gone on for an hour or two, then goes gradually off, and is entirely removed before the end of the crisis.

The frequency of the pulse continues almost always until near the end of the crisis, and its return to the natural state is often not till towards the end; and after the encrease of sweating, and other secretions are entirely gone off. The sulness and strength if they took place, always begin to diminish at the very first beginning of the crisis, and go off before its termination; and indeed towards the end the pulse becomes weaker than it is in its natural state. The affection of the stomach, and depression about the pracordia begin to diminish at the beginning of the crisis, and gradually

gradually continue to diminish, until at last, all affection of this kind entirely ceases; the pain in the forehead begins to diminish at the beginning of the criss, and is totally carried off before its termination, as is also the depression of muscular strength.

It has already been observed, that this depression of muscular strength is very different from weakness, but the exertions that have taken place during the paroxysm leave the patient exhausted, so that the force of the system is not felt to revive, till sometime after the crisis has been quite compleated; it then often happens, that the patient falls into a prosound and quiet sleep, after which even the vigor of the body is not perfectly restored.

All the other appearances proper to the first stage of the disease are carried off compleatly, and then, or rather somewhat before, if there were any encreased secretions they begin to diminish, and are entirely restored to their natural state, so that the whole system returns perfectly to its natural state; if

although it may happen in compound fevers, that a crisis may take place, leaving some symptoms of the first or second stage, which may go off afterwards without repetition of the fever, yet it never happens in a sever, which compleats its course in 8, 10, or 12 hours, that the disease does not return, if any preternatural appearance whatever, excepting weakness, remains after the crisis. If there be any head-ach for instance, languor, pain in the small of the back, or in short any other slight symptom remaining, the fever recurs, and is not a simple fever.

Although simple fevers continue generally only 8, 10, or 12 hours, yet the first stage may continue an hour or two before the second takes place, and that may continue four and twenty hours before any appearance of criss; the criss may continue with slow progress twenty-four hours longer, but still it must be absolutely compleat, and the patient must be left in perfect health, otherwise the disease certainly recurs; but instances of so long a simple paroxysm of sever are rare.

A simple fever may be terminated in other ways than a criss, so as to be carried off, but then the patient is not freed from disease, so as to return to his natural healthy state. Its termination in other diseases will be noticed in a future differtation.

All fevers, according to the author's observation, are either the difease which has been described, or repetitions of it modified in a great variety of ways, and every enquiry into the history of the disease must be founded upon a knowledge of fimple fever. Galen is the only one who has argued whether all fevers are repetitions of fimple fever with different modifications. All the authors who have treated the subject of fever have fallen into confusion, which can only be avoided by a distinct idea of simple fever, a description of which has been endeavoured to be given in the above pages. In a future differtation the author proposes to point out the manner in which simple fever is repeated with various modifications, fo as to form all the varieties of the disease.



