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Wednesday, August 1st, 1832, by Various**

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*** START OF THE PROJECT GUTENBERG EBOOK THE CHOLERA GAZETTE, VOL. I. NO. 4.
WEDNESDAY, AUGUST 1ST, 1832 ***

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**THE
CHOLERA GAZETTE.**

Vol. I.

WEDNESDAY, AUGUST 1st, 1832.

No. 4.

Injection of Saline Solutions into the Veins.

The following documents relative to the treatment of cholera by the copious injection of a saline solution into the veins, communicated to the Central Board of Health of Great Britain, are of so interesting a character that we hasten to lay them before our readers; though we are far from participating in the sanguine estimate of the curative powers of the remedy, entertained by Drs. Lewins, Latta and others. The measure has been resorted to in New York, and on the whole, with but slender success, and the results of trials of it, in this city, so far as we have been able to obtain authentic information, have not been very encouraging. Some of the symptoms have been relieved, but we know as yet of no cure effected by it.

No. 1.

SIR,—I conceive it to be my duty to let you know, for the information of the Central Board of Health, that the great desideratum of restoring the natural current in the veins and arteries, of improving the colour of the blood, and recovering the functions of the lungs, in cholera asphyxia, may be accomplished by injecting a weak saline solution into the veins of the patient. To Dr. Thomas Latta, of this place, is due the merit of first having recourse to this practice. He has tried it in six cases, three of which I have seen, and assisted to treat. The most wonderful and satisfactory effect is the immediate consequence of the injection. To produce the effect referred to, a large quantity must be injected—from *five to ten pounds* in an adult—and repeated at longer or shorter intervals, as the state of the pulse, and other symptoms, may indicate. Whenever the pulse fails, more fluid ought to be thrown in, to produce an effect upon it, without regard to quantity. In one of the cases I have referred to, 120 *ounces* were injected at once, and repeated to the amount of 330 ounces in twelve hours. In another, 376 ounces were thrown into the veins between Sunday, at 11 o'clock, A. M., and this day (Tuesday) at 4 P. M.; that is, in the course of 53 hours, upwards of 31 pounds!

The solution that was used consisted of two drachms of muriate, and two scruples of carbonate, of soda, to sixty ounces of water. It was at the temperature of 108 or 110 degrees.

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The apparatus employed in injecting was merely one of Reid's common syringes, (the fluid being put into a vessel rather deep and narrow,) with a small pipe fitted, that it might easily be introduced into an incision in the veins of the usual size that is made in bleeding. It may, however, be well to keep in mind, that, in the event of the operation being frequently repeated, it may be advisable to inject by different veins.

I forbear at present to enter further into the particulars; nor have we had sufficient experience to speak decisively on the subject. I may, however, mention, that the idea of having recourse to this remedy in cholera, occurred to Dr. Latta, from being convinced, (which I am also,) that the evacuations upwards and downwards are in reality the serum of the blood; that it is the duty of the physician to replace it, as speedily as possible, by injecting a fluid, as similar to the serum as can be formed artificially, directly into the veins, which has been done here with wonderful, and, so far as we can yet judge, excellent effect. An immediate return of the pulse, an improvement in the respiration and in the voice, an evolution of heat, an improvement

in the appearance of the patient, with a feeling of comfort, are the immediate effects. The quantity necessary to be injected will probably be found to depend upon the quantity of serum lost—the object of the practice being to place the patient in nearly his ordinary state, as to the quantity of blood circulating in the vessels.—I have, &c.

(Signed)

ROBERT LEWINS, M. D.

To W. MACLEAN, Esq.

Secretary to the Central Board of Health.

No. 2.

SIR,—I did myself the honour to address a letter to you lately, on the effects of injecting a saline solution into the veins of a patient labouring under cholera. We have not frequent opportunities of trying this, which I denominate, admirable remedy, as the disease is decidedly less frequent here; but I have seen it employed in two other cases, in the course of the last two days, with the same excellent effect. Sixty ounces are generally thrown in at once, and repeated at the end of three or four hours. In a case to-day, where I saw fifty-eight ounces injected, (being the third time of performing the operation,) the patient's pulse, at the commencement, was 180, very small, and very feeble. She was excessively restless, with a feeling of great weakness and tormenting thirst. Before twelve ounces were injected, the pulse began to improve; it became fuller and slower, and it continued to improve until, after 58 ounces had been injected, it was down to 110. Before I left the patient, (a woman,) her condition was altogether amazingly amended. There was a fine glow and a slight perspiration on her face; the veins on the back of her head were well filled; the restlessness was removed, the feeling of excessive weakness gone, and the thirst ceased. The pulse was under 100, free, full, and soft! Verily, sir, this is an astonishing method of medication, and I predict will lead to wonderful changes and improvements in the practice of medicine! I have addressed you upon the subject, as the organ, from your high official station, of disseminating a knowledge of the extraordinary facts referred to. It will, of course, give me great pleasure to enter further into particulars upon any particular point on which you may require information, in reference to the cases that have come under my observation.—I have, &c.

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(Signed)

ROBERT LEWINS, M. D.

To W. MACLEAN, Esq. &c. &c.

In the hands of a man of ordinary dexterity, the common injecting apparatus alluded to in my last will be found to answer the purpose perfectly well; but if the practice I recommend is, as I hope it will be, generally adopted, it will, I conceive, be expedient to advise that a regular and perfect transfusion apparatus be used; at all events, to warn those who inject to beware of allowing air to get into the vein. The tubes, of course, must be filled with fluid, as well as the pipe in the vein, before commencing, and considerably more fluid than it is intended to use ought to be in the vessel from which it is pumped.

R. L.

No. 3.

Leith, May 23d, 1832.

Sir,—My friend, Dr. Lewins, has communicated to me your wish for a detailed account of my method of treating cholera by saline injection into the veins, with which I now most willingly comply. My scope for observation, since I commenced this treatment, has been too limited to allow me to be very copious on the subject, but I think I can adduce sufficient proof to the unprejudiced, not only of its safety, but of its unquestionable utility. I have never yet seen one bad symptom attributable to it, and I have no doubt that it will be found, when judiciously applied, to be one of the most powerful, and one of the safest remedies yet used in the second stage of cholera, or that hopeless state of collapse to which the system is reduced.

Before entering into particulars, I beg leave to premise, that the plan which I have put in practice was suggested to me on reading in *The Lancet*, the review of Dr. O'Shaughnessy's report on the chemical pathology of malignant cholera, by which it appears that in that disease there is a very great deficiency both of the water and saline matter of the blood. On which deficiency, the thick, black, cold state of the vital fluid depends, which evidently produces most of the distressing symptoms of that very fearful complaint, and is, doubtless, often the cause of death. In this opinion I am abundantly borne out by the phenomena produced on repletion by venous injection.

So soon as I learnt the result of Dr. O'Shaughnessy's analysis, I attempted to restore the blood to its natural state, by injecting copiously into the larger intestines, warm water, holding in solution the requisite salts, and also administered quantities from time to time by the mouth, trusting that the power of absorption might not be altogether lost; but by these means I produced, in no case, any permanent benefit; but, on the contrary, I thought the tormina, vomiting, and purging, were much aggravated thereby, to the further reduction of the little remaining strength of the patient; finding thus, that such, in common with all the ordinary means in use, was either useless or hurtful, I at length resolved to throw the fluid immediately into the circulation. In this, having no precedent to direct me, I proceeded with much caution. The first subject of experiment was an aged female, on whom all the usual remedies had been fully tried, without producing one good symptom; the disease, uninterrupted, holding steadily on its course. She had apparently reached the last moments of her earthly existence, and now nothing could injure her—indeed, so entirely was she reduced, that I feared I should be unable to get my apparatus ready ere she expired. Having inserted a tube into the basilic vein, cautiously—anxiously I watched the effects; ounce after ounce was injected, but no visible change was produced. Still persevering, I thought she began to breathe less laboriously; soon the sharpened features, and sunken eye, and fallen jaw, pale and cold, bearing the manifest

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impress of death's signet, began to glow with returning animation; the pulse, which had long ceased, returned to the wrist; at first small and quick, by degrees it became more and more distinct, fuller, slower, and firmer, and in the short space of half an hour, when six pints had been injected, she expressed in a firm voice that she was free from all uneasiness, actually became jocular, and fancied all she needed was a little sleep; her extremities were warm, and every feature bore the aspect of comfort and health. This being my first case, I fancied my patient secure, and from my great need of a little repose, left her in charge of the hospital surgeon; but I had not been long gone, ere the vomiting and purging recurring, soon reduced her to her former state of debility. I was not apprised of the event, and she sunk in five and a half hours after I left her. As she had previously been of a sound constitution, I have no doubt the case would have issued in complete reaction, had the remedy, which had already produced such effect, been repeated.

Not having by me the number of THE LANCET containing Dr. O'Shaughnessy's analyses, I adopted that of Dr. Marcet, only allowing a smaller proportion of saline ingredients. This I now find to be considerably less than natural, according to the more recent analyses. I dissolved from two to three drachms of muriate of soda, and two scruples of the sub-carbonate of soda in six pints of water, and injected it at temperature 112° Fah. If the temperature is so low as a hundred, it produces an extreme sense of cold, with rigors; and if it reaches 115°, it suddenly excites the heart, the countenance becomes flushed, and the patient complains of great weakness. At first there is but little felt by the patient, and symptoms continue unaltered, until the blood, mingled with the injected liquid, becomes warm and fluid; the improvement in the pulse and countenance is almost simultaneous; the cadaverous expression gradually gives place to appearances of returning animation, the horrid oppression at the præcordia goes off, the sunken turned up eye, half covered by the palpebræ, becomes gradually fuller, till it sparkles with the brilliancy of health, the livid hue disappears, the warmth of the body returns, and it regains its natural colour—words are no more uttered in whispers, the voice first acquires its true cholera tone, and ultimately its wonted energy, and the poor patient, who but a few minutes before was oppressed with sickness, vomiting, and burning thirst, is suddenly relieved from every distressing symptom; blood now drawn exhibits on exposure to air its natural florid hue.

Such symptoms, so gratifying both to the sick and the physician, must never allow the latter to relax in his care—the utmost vigilance is still necessary. At first the change is so great, that he may fancy all is accomplished, and leave his post for a while. The diarrhœa recurring, he may find his patient, after the lapse of two or three hours, as low as ever. As soon as reaction by the first injection is produced, mild warm stimulants, such as weak gin toddy, mixed with some astringent, should be freely and assiduously administered. An attempt should be made to fill the colon with some astringent fluid. That such is requisite, is evident from the watery diarrhœa returning with violence, and if not restrained, death will ultimately make sure of his victim, therefore, so soon as the pulse fails, and the features again shrink, the venous injection must be repeated, taking care that the fluid in use retains its proper temperature. The injection should be carried on very slowly, unless the patient is much exhausted, when it may be used more rapidly at first, until a little excitement is produced, after which it should not exceed two or three ounces per minute, and now is the time for the exhibition of astringents by the mouth, which will be retained; for in general the sickness entirely leaves during the operation.

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Such remedies must be persisted in; and repeated as symptoms demand, or until reaction is permanently established. I have witnessed no violent symptoms accompanying the rapid injection of the fluid; but I have thought that the hasty repletion of the system was followed by great increase of the evacuations, and, consequently, a more sudden depression of the powers of life. The quantity to be injected depends on the effect produced, and the repetition on the demands of the system, which generally vary according to the violence of the diarrhœa; the greater the degree of collapse, the greater will be the quantity needed, though not uniformly, for a very slight loss produces much depression in some systems; hence there is often great collapse, without much vomiting, purging, or cutaneous discharge.

Although in every case, even the most desperate, the cholera symptoms were removed, some of my cases failed, which I attributed to one or other of the following causes—either the quantity injected was too small, or its effects were rendered abortive by extensive organic disease, or its application was too late.

I have already given an instance where deficiency in quantity was the cause of failure, which I will now contrast with one in which it was used freely. A female, aged fifty, very destitute, but previously in good health, was on the 13th instant, at four A. M., seized with cholera in its most violent form, and by half-past nine was reduced to a most hopeless state. The pulse was quite gone, even in the axilla, and strength so much exhausted, that I had resolved not to try the effects of the injection, conceiving the poor woman's case to be hopeless, and that the failure of the experiment might afford the prejudiced and the illiberal an opportunity to stigmatize the practice; however, I at length thought I would give her a chance, and in the presence of Drs. Lewins and Craigie, and Messrs. Sibson and Paterson, I injected one hundred and twenty ounces, when, like the effects of magic, instead of the pallid aspect of one whom death had sealed as his own, the vital tide was restored, and life and vivacity returned; but diarrhœa recurred, and in three hours she again sunk. One hundred and twenty ounces more were injected with the same good effect. In this case three hundred and thirty ounces were so used in twelve hours, when reaction was completely reestablished; and in forty-eight hours she smoked her pipe free from distemper. She was then, for better accommodation, carried to the hospital, where probably, from contagion, slight typhoid symptoms were produced. She is now, however, convalescent.

The second cause of want of success is the presence of organic disease; this, probably, renders the possessor very liable to attacks of cholera; and the latent evil, which previously gave but little uneasiness, suffers aggravation in all its symptoms, more especially after reaction has been produced, and has evidently, in many cases, been the cause of death. A delicate young female, of strumous habits, who had been for some years subject to pectoral complaints, was rescued from a state of collapse by the injection of sixty ounces of the saline fluid, administered in separate portions, within the space of twelve hours. After lingering for ten

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days she died; the heart was found in a state of atrophy, covered with strong evidence of the existence of ancient disease, and floating in eight ounces of pus. In another case every internal organ was diseased; some of them so much so, that it was astonishing the individual lived so long.

The third case of the occasional want of success, is the late application of the remedy. Hitherto I have had opportunity of injecting only in extreme cases, after every other means had entirely failed, cases which apparently soon would have proved fatal. Here the obstacles to be overcome have been of no ordinary kind, notwithstanding the result of the practice is of the most encouraging nature, and the number of cases now convalescent or doing well highly gratifying. In every fatal case we have had an opportunity of examining, independent of organic disease, I have found a large quantity of fibrine in the cavities of the heart, especially on the right side, where it had extended from the auricle through the ventricle in the pulmonary artery. Such deposition must have formed a certain obstacle to recovery, and is, no doubt, from the interruption it gives to the pulmonary circulation, the cause of the heavings of the chest, and the inordinate action perceptible in the centre of circulation many hours before death. Now surely it is reasonable to suppose, that if this, the most simple of all remedies, were applied early, before the blood drained of its water has collected in the larger vessels, in fact before such fibrinous depositions have taken place in the cavities of the heart, is it not reasonable to suppose that such would be entirely prevented?

But not only is early injection adviseable on this account, not only is stagnation of the blood prevented by it, and the laborious breathing, and the præcordial oppression, the intense sickness, the burning thirst, the extreme depression of the vital powers, and the chances of aggravating chronic disease, or of producing new organic lesion, in a great measure avoided: but it is rational to suppose that the consecutive fever will be rendered much milder, and that this is the case, is supported by my own experience, even though the remedy has not been applied earlier, indeed the fact is very evident. In an ordinary attack of cholera, much fluid is lost; and if the individual is so fortunate as to get out of the stage of collapse, if consecutive fever of typhoid type comes on, the system, left to its own resources to replace the lost serum, must be but ill fitted for the task, for the debility is extreme, absorption goes on slowly, the fever will be much aggravated by the irritation of internal congestion; local inflammation will thereby be produced, and the chance of recovery will be but small. Much of this evil is to be mitigated or entirely avoided by injection into the veins, of which circumstance I can adduce living instances; and where the patient, who had been injected, has sunk under organic disease, the usual marks of congestion are not perceptible.

The apparatus I have used, is Reid's patent syringe, having a small silver tube attached to the extremity of the flexible injecting tube. The syringe must be quite perfect, so as to avoid the risk of injecting air; the saline fluid should never be injected oftener than *once* into the same orifice, and the vein should be treated with much delicacy to avoid phlebitis. The wound should be poulticed and carefully watched, if it does not heal by the first intention.

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I am, sir, your most obedient servant,

THOMAS LATTA, M. D.

(To be continued.)

Origin and Progress of Cholera at Albany.

The following report made by the medical staff of Albany to the Board of Health, furnishes some interesting information relative to the origin of the epidemic, and the character of the diseases which preceded its appearance in that city.

"In presenting to the Board of Health the following tables, showing the bills of mortality of this city from the 22d ult., when the board directed the deaths to be recorded, up to this day, we deem it our duty to make some remarks relative to the health of the city during the above period, and likewise in relation to our future prospects, and the measures we consider useful to accelerate the departure of the pestilence from among us.

"We stated in our last report to the board, that immediately prior to the breaking out of the epidemic, our city was unusually healthy. Until about the 20th of June, few diseases prevailed, and the mortality was less than common. From the 22d of June to the 3d of July, only eleven deaths occurred—of those, six were children. In a population of twenty-six thousand, an average of less than one death a day for near two weeks, indicates a degree of health almost without a parallel. From the 30th of June to the 3d of July, *not one single death was reported*. It was, however, but the calm which precedes the storm. All other diseases gave way to the silent but the irresistible march of the epidemic.

"Although but few deaths took place from the 20th of June to the 3d of July, there was considerable sickness; and experienced physicians foresaw the coming danger, in the usual prevalence of diarrhœa, and common cholera morbus—hence it was that your board was urged to make all ready—to be prepared with hospitals, physicians, nurses, &c. and to this timely warning, and the preparations made in consequence, we may, under Providence, attribute the limited ravages of this fell pestilence.

"On the 3d day of July, the epidemic assumed its malignant and characteristic form. From that time until now, it has maintained its residence among us. For the first week it gradually extended, and during the second it has been rather stationary, the number attacked varying a little from day to day and but little.

"It is now a fortnight since the first deaths took place. The number of cases reported within that period is two hundred and forty-five, and the deaths seventy-two—or a little over one-quarter of the whole. It must however be recollected, that during the same time hundreds had been attacked with *Cholérine*, or the slightest influences of the epidemic. None of these have

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been reported, *because by timely aid, the disease, in its more formidable shape, was prevented.* We can, we believe, say with truth, that few have entirely escaped the influence of the disease.

“From a consideration of all the circumstances connected with the visitation of Providence, we think our citizens have great cause for thankfulness, that we thus far suffered so little. Compared to our neighbours of Canada, we have suffered less than we had cause to anticipate. The disease has been among us for a fortnight; has passed all over the city, and in one form or other has affected more or less persons of all classes, and yet the deaths have not much exceeded five in a day, whilst at Quebec and Montreal, in a population not much exceeding ours, the deaths some days exceeded one hundred, when the disease had not been so long among them as it has been with us. From the history of the disease in other countries, and the circumstances connected with its progress in this city, we would fain indulge the hope, that it has already spent its venom, and that we shall ere long be free from it entirely. For the last two days, notwithstanding the number of cases reported and the high state of mortality, we are inclined to believe that we see, in the character of the prevailing disease, indications of returning health.

“We have as yet, had no cause to change our opinion respecting the nature of the prevailing disease—we consider it essentially epidemic. It continues to attack people in different parts of the city, and had not been traced from one person to another, as might have been done were its progress dependent on contagion. It is true, in some houses, several persons have been attacked and died; but this only shows that similar causes produce similar effects in individuals placed in like circumstances—all were equally exposed to the local and general causes which engender this disease. The disease *may*, under certain circumstances, be contagious, but no very striking instances of the kind has yet come to our knowledge in this city.

“We cannot reprehend in too strong language, the cold-hearted and inhuman conduct of many of our people, to the unfortunate victims of cholera. They are too often abandoned to their fate, even their friends being afraid to do to them the ordinary offices of charity. Were they labouring under the plague of the Levant they would not be looked upon with more dread. All this is folly. The risk of taking the disease from the sick is little or nothing; much more is to be dreaded from foul air by which the disease is engendered. The first care of friends should be, not to run away, but to take the sick into more healthy and airy lodgings.

“We would also protest against the indecent haste with which the scarcely cold remains of the dead are hurried to their last abode, without a neighbour to follow, or a friend to mourn. Such conduct is discreditable to the character of a Christian people. We trust that we shall not again have to complain of similar indifference to the performance of the duties of charity and humanity.

“To the members of the medical profession, and particularly its younger members, we willingly award due credit for their attention and diligence, under circumstances of no usual difficulty.

“We would again most earnestly entreat our citizens not to neglect to apply for medical aid the moment diarrhœa, or sick stomach and head-ache take place. We have not yet known one instance in which the disease in its malignant form, was not preceded by one or more of these symptoms, for some hours, if not days; and we have not seen or heard of a single instance where these premonitory symptoms were properly attended to, an attack was not prevented. It cannot be too strongly or too often impressed upon the minds of our citizens, that cholera, in its early stages, is easily cured; but that when neglected, in a majority of cases, no human aid will avail. Almost all the deaths have occurred in persons of intemperate habits, and of broken constitutions. A few estimable citizens have fallen victims to it, but these were either aged and infirm, or had neglected the premonitory symptoms, or had tampered with medicines, without proper advice.

“To our constituted authorities we would recommend the most assiduous attention to cleanliness in our streets, along our wharves and docks; to our citizens, strict attention to cleanliness in their houses and persons, to pay due attention to dress, avoid exposure to the night air, and observe strict temperance, not only in *drink*, but in *food*. We would caution them against the free use of *fruit, ripe or unripe*, and the employment of Glauber or Epsom salts as medicines. Several cases of cholera have been brought on by their operation. If due attention be paid to all these precautions, we have every reason to hope that the epidemic will soon cease to prevail among us.

“JONA. EIGHTS, Chairman.”

Bill of Mortality from 22d June to the 7th July, 1832.

June	22,	2—	1 poison,
			1 small-pox.
	23,		—
	24,		1 pneumonia,
	25,		1 convulsions,
	26,	2—	1 convulsions,
			1 marasmus,
	27,	2—	1 convulsions,
			1 consumption,
	28,		1 scarlatina,
	29,	2—	1 consumption,
			1 unknown,
	30,		—
			11 deaths from 22 June to July 3.
July,	3,		2 cholera,
	4,		—
	5,		4 cholera,

6,	2 cholera,
7,	3 cholera,
8, 4—	3 cholera,
	1 intemperance,
9,	5 cholera,
10, 8—	1 apoplexy,
	7 cholera,
11,	9 cholera,
12, 4—	1 consumption,
	3 cholera,
13, 8—	6 cholera,
	1 congestion of the brain, after cholera,
	1 typhus fever,
14, 7—	1 hydrocephalus,
	6 cholera,
15, 7—	1 debility,
	6 cholera,
16,	7 cholera,
17,	8 cholera,
	<u>78</u>
Cholera	72
Other diseases	6

CHOLERA REPORTS.

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July	Cases	Deaths	
3,		2	2
4,		1	0
5,		7	4
6,		12	2
7,		10	3
8,		11	3
9,		18	5
10,		22	7
11,		28	9
12,		10	3
13,		28	7
14,		27	6
15,		17	6
16,		29	7
17,		23	8
Total,		<u>245</u>	<u>72</u>

Board of Health, New York, July 20th, 1832.

To WALTER BOWNE, Esq. President, &c.

Sir—I have the honour to transmit to your Board of Health, an additional report of the Committee appointed to inquire into the history and origin of the disease at the Bellevue Alms-house, &c.

ALEX. H. STEVENS, M. D. President.

The committee consisting of Drs. Bailey, Macneven, and A. L. Anderson, to whom was referred the inquiry into the origin of the malignant cholera in the Alms-house and the different institutions connected with it, further report: the Penitentiary, situated about five hundred feet from the Alms-house, and containing three classes of criminals, have no communication with one another; but the Bridewell and Penitentiary prisoners have a common stairway to their apartments; and the yards of the Female State and Female Penitentiary prisoners are separated by a high open picket fence, near to which the Penitentiary prisoners pass to and from their work-house, and on the opposite side of the Female State prisoners yard, and at a little distance is situated the Cholera Hospital, first opened on the 5th or 6th of July. In this building were confined, on the 1st of July, fifty-four Female State, about one hundred and twenty Female Penitentiary, and about fifty Bridewell prisoners; and the first person who had malignant cholera in that prison was Ann Smith, taken up at the Five Points, and sent there July 2d—she sickened on the 5th, and died the next day, and on the 7th, four more Female Penitentiary prisoners had the disease. On the 8th of July, all the remaining prisoners of this class were sent to Blackwell's Island, and put into a fresh white-washed building prepared for them. The removal of those persons to a healthy residence, and an unrestrained exercise in the open country air, appear to have checked the development of that disease among them, for not until the 10th did any of them sicken, when four of them were taken with that disease, and since then seven more. Dr. Spring, the physician stationed there, informed us that the disease had become milder since their removal to the Island, two only having died of thirteen patients, and the remaining eleven, visited by us, were doing well, except one.

The first State prisoner had that disease on the 9th of July, and eight more on the 12th and 13th, four each day; and since that time five more, the greater part of whom have died. They are all in one very large apartment, having three tier of windows on one side only, but the three

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stories are one open space from the top to the bottom of the building.

The first two cases occurred in the Bridewell class also on the 9th, the next on the 11th instant; since then, six more have had the disease.

When at Blackwell's Island yesterday afternoon, pursuing our inquiries respecting the Female Penitentiary prisoners, sent there from Bellevue, we considered it appertaining to the duty assigned to us, to extend our inquiry to the occurrences relating to the same subject, which happened on that Island, the institution there being a part of the Bellevue establishment. We were informed by Dr. Spring, the physician stationed there, that the first case of malignant cholera which occurred on the Island, was an Alms-house pauper, who slept there, but worked on the Long Island farms; he was permitted to go as far as Brooklyn, July 1st, but he frolicked in the city all the next day, returned at night to Blackwell's Island, and slept out of doors all night, and sickened and died July 3d—no other case took place there until the 11th, (three days after the Female Penitentiary prisoners were removed from Bellevue,) when three persons sickened and died the same day; one, a very feeble black man, aged sixty-five; another, a black lad, who had been much reduced by medical treatment for rheumatism—both patients in the hospital, and able to take exercise out of doors. Their building is about one hundred yards from that occupied by the Female Penitentiary prisoners. The third, a white pauper, aged sixty-five, who worked on the Long Island farms, but slept on Blackwell's Island, formerly in the shanty now occupied by the sick blacks; but some days before he sickened, he slept in a small building at a considerable distance from his former lodging place; but he not being under confinement, would go to any part of the Island when unobserved, and without hindrance to the outside of the Black Hospital.—Since then, three blacks have had that disease.

We were also informed by Dr. Spring, that no case of malignant cholera had occurred among the two hundred and eight male Penitentiary prisoners—that a lad, aged sixteen, who frequently complained of being unwell, died on the 13th inst., after three or four hours sickness of common cholera. Those men are employed in the open air, and their prison is in the most perfect order; the air within was as free from any impure smell as the atmosphere without. We were informed by Col. Woodruff, the superintendent, that it was in contemplation to remove the Bridewell prisoners from Bellevue to this prison—and asked our opinion as to the propriety of the measure; we give it as our opinion, that as there was already a large number of men now confined there, and room only for about thirty more, that the crowding of the prison at this time, and especially from places where the malignant cholera existed, would be exposing the health of the prisoners to some hazard.

We were also informed by John Targee, Esq., one of the Commissioners of the Alms-house, that a boy, whose parents had both died in Laurens street with the malignant cholera, was sent from there in the beginning of July, to the house on Long Island Farms, where there are a large number of pauper boys; he sickened and died of that disease the day after, and no case of that disease has since occurred.

The foregoing being all the facts which have come to our knowledge after a strict examination, are respectfully submitted.

JOS. BAYLEY.

[60]

Magendie's Treatment of Cholera.

M. Magendie's success in the treatment of cholera has been vaunted in many of the journals, and we have been repeatedly applied to for information respecting the remedies prescribed by him. His treatment consisted in the administration during the cold stage of the following:—

1st. For common drink—R. Infus. chamomil. ℥iv.; acet. ammon. ℥ij.; sacch. alb. ℥j M.

2d. Half a glass every hour of the following punch—R. Infus. flor. Tiliæ Europææ, ℥iv.; limon. iv.; alcohol, ℥j.; sacch. alb. ℥j. M.

3d. From time to time he gives half a glass of the following—R. Vinum calefac. ℥ij.; tinct. cannell. ℥ij; sacch. alb. ℥ij. M.

By these stimulants, reaction was sometimes induced, and it was at once concluded that the patient was cured. But violent reaction is not less dangerous than collapse, and M. Magendie's patients relieved from the latter condition by internal stimulants, soon exhibited evidences of congestion of the brain or digestive organs, which resisted, for the most part, general and local bleeding, cold to the head, and the most active revulsives to the feet. The patient became delirious, coma supervened, and death closed the scene.

It is shown by authentic documents in our possession, that the result of M. Magendie's treatment was not less unfortunate than that of his colleagues; he lost more than one-half of his patients.

A careful examination of the results of the various modes of treatment adopted in India, Russia, Poland, Germany, Great Britain and France, has satisfied us that the internal administration of powerful stimulants in large doses, in the collapsed stage of cholera, has been eminently injurious, and such appears to have been ultimately the conviction of nearly all the practitioners who resorted to them. Panic struck, with the utter state of prostration of patients in the collapse of cholera, physicians appear every where to have at first been led to administer the most powerful stimulants in large and repeated doses, to rouse the action of the heart. Recovered from their first surprise, and admonished by their ill success, and by the violent and uncontrollable reaction sometimes induced, these remedies were subsequently abandoned, or only applied externally, and with incomparably better results.

[61]

Health of Philadelphia.

Bowel complaints continue to be the prevailing diseases, and within a few days several cases of cholera have assumed malignant characters.

July 27th	the Board of Health reported	2	cases of malignant cholera.
28th		6	
29th		6	
30th		15	
31st		19	

The whole number of cases, as near as can be ascertained, is 52, of which, 30 have occurred in the districts, 6 in the Alms-house, 1 in the Arch street prison, and the remaining 15, in the outskirts and dirtiest parts of the city.

Report of the Board of Health for the twenty-four hours, ending August 1st, noon:—

PRIVATE PRACTICE.

CASES.	RESIDENCE.	DEATHS.
1	No. 94 Dillwyn street, N. L.	1
1	No. 1 Clymer street, Moyamensing.	
1	No. 3 do. do. do.	
1	No. 16 Vine street, City.	1
1	Between Race and Vine and Tenth and Eleventh streets, City.	
1	Corner of Bedford and Twelfth streets, Moyamensing.	
1	South side of Cedar above Twelfth street, Moyamensing.	1
1	Peach between Green and Coates's, N. L.	
1	Parham's Alley, Southwark.	
1	Queen near Passyunk Road, do.	
1	Second below Carpenter st. do.	
1	Frankford Road above Bedford street, Kensington.	
1	St. John above Poplar Lane, N. L.	
1	Shirker's Alley, Moyamensing.	1
1	Third st. above Globe Mills, Kensington.	
1	Otter st. near William street, do.	
16		4

Hospitals.	Physicians.	New cases.	Died.	Cured.	Remaining.
Alms-house,	H. L. Hodge,	1	1	1	0
Jones' Alley,	Parrish,	1	0	0	2
Locust st. ^[1]	Chapman,	2	1	0	1
Moyamensing,	Thomson,	1	1	0	1
		5	3	1	4

[62]

[1] A white woman was brought from the Alms-house in a dying state, and expired soon after admission.

	NEW CASES.	DEATHS.
Private practice,	16	5
Hospitals,	5	3
Alms-house,	1	1
	22	9

By order,

WM. A. MARTIN, *Clerk.*

The following table exhibits the whole mortality, and also that from bowel complaints, for the 4th week in July for five successive years.

- 1828. 4th week, ending July 26th. Whole mortality, 127; of which, the
 - deaths from cholera morbus, were, adults, 3; children, 26; Total, 29.—
 - Diarrhœa, adults, 0; children, 3; Total, 3.—Dysentery, adults, 0;
 - children, 3; Total, 3.—Total from bowel complaints, 32.
- 1829. 4th week, ending August 1st. Whole mortality, 100; of which, the
 - deaths from cholera morbus were, adults, 1; children, 23; Total, 24.—
 - Diarrhœa, adults, 0; children, 4; Total, 4.—Dysentery, adults, 1;
 - children, 3; Total, 4.—Total from bowel complaints, 32.

1830. 4th week, ending July 31st. Whole mortality, 183; of which, the deaths — from cholera morbus were, adults, 0; children, 38; Total, 38.— Diarrhœa, adults, 0; children, 2; Total, 2.—Dysentery, adults, 2; children, 2; Total, 4.—Total from bowel complaints, 44.
1831. 4th week, ending July 30th. Whole mortality, 123, of which, the — deaths from cholera morbus were, adults, 0; children, 32; Total, 32.— Diarrhœa, adults, 0, children, 6; Total, 6.—Dysentery, adults, 1; children 3; Total, 4.—Total mortality from bowel complaints, 42.
1832. 4th week, ending July 28th. Total mortality, 147; of which, the deaths — from cholera morbus were, adults, 5; children, 27; malignant cholera, adults, 8; Total, 40.—Diarrhœa, adults, 3; children, 4; Total, 7.— Dysentery, adults, 2; children, 5; Total, 7.—Total from bowel complaints, 54.

Liability of Negroes to Cholera.

[63]

An impression appears somehow or other to have got abroad that negroes are not liable to be attacked with cholera; such a notion, however, has no foundation. In New York, it has been observed that they have enjoyed no greater immunity than the whites, and the natives of India, whose constitution much resembles that of the negro, were more liable to cholera than Europeans. There is ample grounds for fearing that the disease will be productive of terrible mortality among the slaves of the southern states, and proper measures of hygiene should be promptly adopted; and on the very first symptoms of derangement of the digestive organs, remedial measures immediately resorted to.

Cholera at New York.

It affords us pleasure to notice that the cholera is abating in our sister city. During the last few days, the number of cases have considerably diminished, and though accidental causes may occasionally interrupt their constant decrease, it is manifest that the epidemic has reached its height and is on the decline.

The report for the twenty-four hours, ending Tuesday, July 31st, at 12 o'clock, announces—

In private practice,	new cases,	59,	deaths,	23
Hospitals		52		20
Bellevue		1		3
Harlaem and Yorkville		9		2
	Total	121		48

The number of interments during the week, ending Saturday, July 28th, were 879; of which, there were from cholera morbus, 10; malignant cholera, 689; cramp in the stomach, 1; diarrhœa, 3; dysentery, 4; cholera infantum, 18; inflammation of the bowels, 4; inflammation of the stomach, 2.

Montreal.

[64]

The following is a statement of the cases and deaths from the commencement of the epidemic to the 14th of July inclusive:—

	Daily cases.	Daily burials.	Total cases.	Total deaths.
June 10th to 15			1328	175
16	381	86	1709	261
17	474	102	2183	363
18	261	128	2444	491
19	337	149	2781	640
20	165	94	2946	734
21	151	76	3097	810
22	109	52	3206	862
23	83	31	3289	893
24	51	21	3340	914
25	44	33	3384	947
26	27	23	3411	970
27	21	26	3432	996

	28	22	20	3454	1016
	29	37	21	3491	1037
	30	32	22	3523	1059
July	1	23	17	3546	1076
	2	13	20	3559	1096
	3	11	14	3670	1110
	4	23	17	3593	1127
	5	22	13	3615	1140
	6	19	4	3634	1144
	7	13	9	3647	1153
	8	14	11	3661	1164
	9	10	9	3671	1175
	10	7	6	3678	1184
	11	14	10	3692	1190
	12	15	10	3707	1200
	13	9	10	3716	1210
	14	8	10	3724	1220

NOTICE.

The American Journal of the Medical Sciences.

The August No. of this Journal will be delayed a few days in consequence of the illness of the Editor. The No. will contain copious details of the cholera of Paris by two American physicians who were in that city during the prevalence of the epidemic, a review of the principal works on cholera, and the Periscope will be enriched with various documents relative to that disease.

PHILADELPHIA—CAREY & LEA—CHESNUT STREET.

*** END OF THE PROJECT GUTENBERG EBOOK THE CHOLERA GAZETTE, VOL. I. NO. 4.
WEDNESDAY, AUGUST 1ST, 1832 ***

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