

tained, it is the duty of every member of society, and particularly of every member of the medical profession, to discourage the inoculation of the small-pox.

*** Communications of real importance, relating to the vaccine practice, will meet with ready attention by the Medical Council of the Royal Jennerian Society.—It is requested that they be drawn up concisely, and well authenticated.*

CHAP. XXIV.

OF THE MEASLES.

THE measles appeared in Europe about the same time with the small-pox, and have a great affinity to that disease. They both came from the same quarter of the world, are both infectious, and seldom attack the same person more than once. The measles are most common in spring season, and generally disappear in summer. The disease itself, when properly managed, seldom proves fatal; but its consequences are often very troublesome.

CAUSE.—This disease, like the small-pox, proceeds from infection, and is more or less dangerous according to the constitution of the patient, the season of the year, the climate, &c.

SYMPTOMS.—The measles, like other fevers, are preceded by alternate fits of heat and cold, with sickness, and loss of appetite. The tongue is white, but generally moist. There is a short cough, a heaviness of the head and eyes, drowsiness, and a running at the nose. Sometimes indeed the cough does not come before the eruption has appeared. There is an inflammation and heat in the eyes, accompanied with a defluxion of sharp rheum and great acuteness of sensation, so that they cannot bear the light without pain. The eyelids frequently swell so as to occasion blindness. The patient generally complains of his throat; and a vomiting or looseness often precedes the eruption. The stools in children are commonly greenish; they complain of an itching of the skin, and are remarkably peevish. Bleeding at the nose is common, both before and in the progress of the disease.

About the fourth day, small spots, resembling flea-bites, appear first upon the face, then upon the breast, and afterwards on the extremities: these may be distinguished from the small-pox by their scarcely rising above the skin. The fever, cough, and difficulty of breathing, instead of being removed by the eruption, as in the small-pox, are rather increased: but the vomiting generally ceases.

About the sixth or seventh day from the time of sickness, the measles begin to turn pale on the face, and afterwards upon the body; so that by the ninth day they entirely disappear. The fever however, and difficulty of breathing, often continue, espe-

cially if the patient has been kept upon too hot a regimen. Petechiae, or purple spots, may likewise be occasioned by this error.

A violent looseness sometimes succeeds the measles; in which case the patient's life is in imminent danger.

Such as die of the measles generally expire about the ninth day from the invasion, and are commonly carried off by a peripneumony, or inflammation of the lungs.

The most favourable symptoms are a moderate looseness, a moist skin, and a plentiful discharge of urine.

When the eruption suddenly falls in, and the patient is seized with a delirium, he is in the greatest danger. If the measles turn too soon of a pale colour, it is an unfavourable symptom, as are also great weakness, vomiting, restlessness, and difficulty of swallowing. Purple or black spots appearing among the measles are very unfavourable. When a continual cough, with hoarseness, succeeds the disease, there is reason to suspect an approaching consumption of the lungs.

Our business in this disease is to assist Nature, by proper cordials, in throwing out the eruption, if her efforts be too languid, but when they are too violent, they must be restrained by evacuations, and cool diluting liquors, &c. We ought likewise to endeavour to appease the most urgent symptoms, as the cough, restlessness, and difficulty of breathing.

REGIMEN.—The cool regimen is necessary here as well as in the small-pox. The food too must be light, and the drink diluting. Acids however do not answer so well in the measles as in the small-pox, as they tend to exasperate the cough. Small-beer likewise, though a good drink in the small-pox, is here improper. The most suitable liquors are decoctions of liquorice with marsh-mallow roots and sarsaparilla, infusions of linseed or of the flowers of elder, balm-tea, clarified whey, barley-water, and such like. These, if the patient be costive, may be sweetened with honey; or if that should disagree with the stomach, a little manna may occasionally be added to them.

MEDICINE.—The measles being an inflammatory disease, without any critical discharge of matter, as in the small-pox, bleeding is commonly necessary, especially when the fever runs high, with difficulty of breathing, and great oppression of the breast. But if the disease be of a mild kind, bleeding, which in few diseases is more necessary, may be omitted.

Bathing the feet and legs frequently in lukewarm water, both tends to abate the violence of the fever, and to promote the eruption.

The patient is often greatly relieved by vomiting. When there is a tendency this way, it ought to be promoted by drinking lukewarm water, or weak camomile-tea.

When the cough is very troublesome, with dryness of the throat, and difficulty of breathing, the patient may hold his head over the steam of warm water, and draw the steam into his lungs.

He may likewise lick a little spermaceti and sugar candy pounded

together; or take now and then a spoonful of the oil of sweet almonds, with sugar-candy dissolved in it. These will soften the throat, and relieve the tickling cough.

If at the turn of the disease the fever assumes new vigour, and here appears great danger of suffocation, the patient must be bled according to his strength, and blistering-plasters applied, with a view to prevent the load from being thrown on the lungs, where, if an inflammation should fix itself, the patient's life will be in imminent danger.

In case the measles should suddenly disappear, it will be necessary to pursue the same method which we have recommended when the small-pox recede. The patient must be supported with wine and cordials. Blistering-plasters must be applied to the legs and arms, and the body rubbed all over with warm flannels. Warm poultices may likewise be applied to the feet and palms of the hands.

When purple or black spots appear, the patient's drink should be sharpened with spirits of vitriol; and if the putrid symptoms increase, the Peruvian bark must be administered in the same manner as directed in the small-pox.

Opiates are sometimes necessary, but should never be given except in cases of extreme restlessness, a violent looseness, or when the cough is very troublesome. For children the syrup of poppies is sufficient. A tea-spoonful or two may be occasionally given, according to the patient's age, or the violence of the symptoms.

After the measles are gone off, the patient ought to be purged. This may be conducted in the same manner as directed in the small-pox.

If a violent looseness succeeds the measles, it may be checked by taking for some days a gentle dose of rhubarb in the morning, and an opiate over night; but if these do not remove it, bleeding will seldom fail to have that effect.

Patients recovering after the measles should be careful what they eat or drink. Their food for some time ought to be light, and in small quantities, and their drink diluting, and rather of an opening nature, as butter-milk, whey, and such like. They ought also to beware of exposing themselves too soon to the cold air, lest a suffocating catarrh, an asthma, or a consumption of the lungs, should ensue.

Should a cough, with difficulty of breathing, and other symptoms of a consumption, remain after the measles, small quantities of blood may be frequently let at proper intervals, as the patient's strength and constitution will permit. He ought likewise to drink asses milk, to remove to a free air if in a large town, and to ride daily on horseback. He must keep close to a diet consisting of milk and vegetables; and lastly, if these do not succeed, let him remove to a warmer climate.

THE scarlet fever is so called from the colour of the patient's skin, which appears as it were tinged with red wine. It happens at any season of the year, but is most common towards the end of summer; at which time it often seizes whole families. Whenever the scarlet fever is epidemical, it usually affects women two or three days after lying in, and often proves fatal to them. Children and young persons are most subject to this disease, which may be suppressed in its commencement by different means, as emetics of the wine of ipecacuanha; doses of equal parts of rhubarb and sal-polychrest, sufficient to procure two motions every day; but sometimes the person who thus escapes the formation of the disease is liable to be re-infected, a circumstance which otherwise rarely occurs. It appears also, from satisfactory evidence, that convalescents from scarlet fever are capable of communicating infection ten days, or longer, according to the previous violence of the disease, after their perfect recovery.

Scarlet fever, like other fevers, begins with coldness, shivering, and pains in the head, without any violent sickness. About the third day the skin is covered with red spots, which are broader, more florid, and less uniform than the measles: the whole skin becomes of a bright scarlet colour, which in three or four days disappears; after which the cuticle, or scarf-skin, falls off.

There is seldom any occasion for medicine in this disease. The patient ought however to keep within doors, to abstain from flesh, strong liquors, and cordials, and to drink freely of cool diluting liquors. If the fever runs high, the body must be kept gently open by emollient clysters, or small doses of nitre and rhubarb. A scruple of the former with six grains of the latter may be taken thrice a-day, or oftener, if necessary.

Children and young persons are sometimes seized at the beginning of this disease with a kind of stupor and epileptic fits. In this case the feet and legs should be bathed in warm water, and a large blistering plaster applied to the neck: his drink should be barley-water acidulated with lemon-juice or tamarinds; and a dose of the syrup of white poppies given every night till the patient recovers.

The scarlet fever however is not always of so mild a nature. It is sometimes attended with putrid or malignant symptoms, in which case it is always dangerous. In the malignant scarlet fever the patient is not only affected with coldness and shivering, but with languor, sickness, and great oppression; to these succeed successive heat, nausea and vomiting, with a soreness of the throat; the pulse is extremely quick, small, and depressed; the breathing frequent and laborious; the skin hot, but not quite dry; the tongue moist, and covered with a whitish mucus; the tonsils inflamed and ulcerated. When the eruption appears, it brings no relief; on the contrary, the symptoms generally grow worse, and fresh ones come on, as purging, delirium, &c.

When this disease is mistaken for a simple inflammation, and treated with repeated bleedings and strong cathartics, or too cooling medicines, it generally proves fatal. The medicines to be depended on in this case are cordials and antiseptics, as cinchona, wine, snake-root, and the like. The treatment must be in general similar to that of putrid fever, or of the malignant ulcerous sore throat.

In the year 1774 a very bad species of this fever prevailed during winter in Edinburgh. It raged chiefly among young people. The eruption was generally attended with a quinsey; and the inflammatory symptoms were so blended with others of a putrid nature, as to render the treatment of the disease very difficult. Many of the patients, towards the decline of the fever, were afflicted with large swellings of the submaxillary glands, and not a few had a suppuration in one or both ears.

If soreness of the throat accompanies this fever, it may perhaps be the *putrid* or *malignant sore throat*, which will probably require the utmost exertions of the most able physician. Wine, cordials, and food which are pernicious in *measles* and the *scarlet fever*, are absolutely necessary, and to be exhibited with perseverance.

When the scarlet fever is succeeded by anasarcaous swelling, the greatest care is required, since should it be neglected, an incurable dropsy may be the consequence.

Washing the hands and feet with tepid water, or vinegar, nay sometimes washing the whole body daily with equal parts of vinegar and water, has been practised with success, particularly in the treatment of typhus fever; nevertheless, bathing in fevers has not been reckoned among the regular means of regular physicians, till it was lately brought into notice by Dr. Jackson and the late Dr. Currie of Liverpool. To their useful writings we owe the revival of a practice of great antiquity; for this remedy was not unknown in the time of the Emperor Augustus, and its use and management were well known to Galen, and accurately defined by him.

The cold and tepid affusion is now employed as a remedy in fever, confluent small-pox, measles, and influenza. Of its use in scarlet fever, Dr. Gregory, Professor of Medicine at the University of Edinburgh, gives the following striking instance, in a letter to the late Dr. Currie.

"THIS day se'nnight (1st November) my eldest son, a boy of six years of age, of a sanguine temperament and very irritable constitution, was taken ill about noon, when out at his walk. Your friend Benjamin Bell saw him before I did; for having called on me to speak about a patient, he enquired for my wife, and found the child with her lying on a settee. She anxiously begged of him to examine the child, and see whether he had got the scarlet fever, which she suspected to be the case. Mr. Bell had no difficulty in pronouncing the disease was the scarlet fever; for even by that time (within two hours from the invasion) the erup-

tion of red prominent points was very copious and evident, so as to give a general roughness and redness to the skin of the breast. In that state I found him soon after Mr. Bell had left him; his pulse frequent and small; his skin but just beginning to grow hot, and his hands rather cold. He complained of general oppression, uneasiness, and head-ach. The velum pendulum, uvula, and tonsils, were of a dark purple red; but there were no ulcers or aphthæ on them that I could see. Before six at night, he had much more severe head-ach and oppression, with nausea, vomiting, and diarrhœa; his pulse 140 and very strong; his skin very hot, and of a bright red, with a considerable degree of roughness all over it.

"Conceiving this to be a case of the most imminent danger, and in every respect, proper for your cold practice, I lost no time in getting him taken out of bed, stripped and set erect in a tub, in which situation I poured a gardener's watering pan full of cold water all over him, from head to foot. This relieved him a good deal, and, as you may believe, cooled him very effectually; but before ten at night the symptoms had recurred with more violence than ever. His pulse was 160, and very strong; his face turgid, his eyes growing red, his skin very red from head to foot, and very hot. I did not measure the heat of his skin by the thermometer; but I think it must have been at least 104 degrees of Fahrenheit. I immediately repeated the cold effusion as before, and with the same good effect. He was immediately cooled and refreshed, and half an hour after I found his pulse 120, and the heat of his skin very moderate. He had a pretty good night; but before eight next morning, was become very hot again; on which account the effusion was repeated in the same manner. He said he did not like my way of bathing, and would rather be bathed in his own tub; and as I thought, from the state of the symptoms, that there was occasion for it, he was bathed in his tub, and fairly laid under water, over head and ears, between eleven and twelve at noon, and again at six in the evening of the second day.

"These five good sousing in twenty-four hours seemed to have done the business completely. The eruption was not repelled, but the progress of the local affection in the throat seemed to be stopped. I could never see any ulcerations in it, though I looked carefully for them, in consequence of having observed much fœtor of his breath on the second evening. The force of the fever, as to heat and frequency, and strength of pulse, was quite broken after the fifth ducking; to such a degree even, that I began to have some fears that the *vis vitæ* might fail, and had actually provided wine to be at hand, to give him from time to time in case of need; and I saw him several times during the night, between the second and third day of his disease. But I found no occasion to give him any of it; nor has he had a grain of medicine, or even a drop of wine, during his illness; so that you must allow it has been a very fair experiment of the cold affusion, as a remedy for the scarlet fever. His throat was quite well the morning of the fourth day: the same day he had some slight swelling of the hands, but not the

twentieth part of what I have often seen after a severe attack of the *scarlatina*. He is losing his cuticle by desquamation, as was to be expected; he has been washed with tepid water and soap for three or four nights, to promote that desquamation, and relieve the itching of his skin. He has not yet recovered his flesh, strength, or colour, but seems in a fair way to do so soon, for he has a keen appetite and digestion. This is only the ninth day of his disease.

"You may be sure, from this detail, that I am perfectly well pleased with your practice in this disease, and that I shall gladly follow it in any proper case of the same kind that may come under my care, if I am allowed to do so. It is more than possible that I shall soon have occasion to try it on two other of my sons, one of them past four, the other of them almost two years of age, and both of them of the same sanguine temperament of their eldest brother. Both of these young children were exposed to the contagion from their cousin, as much as my eldest son was, and both of them were with him when he sickened, and for two hours after, so that I could have no hope of preserving them from the contagion: they have both had the *cow-pox*."

"Wednesday, Nov. 9.

"Yesterday afternoon my youngest son sickened, and had the usual symptoms of oppression, sickness, vomiting, diarrhoea, frequent crying, frequent pulse; copious red eruption on the skin in less than three hours after he began to be uneasy, flushing of the face, and increase of heat: his voice is somewhat affected, and hoarse; but he swallows liquids and solids without difficulty, so that I have no great fears for his throat.

"Though he was never so hot as his brother, he was washed in a tub with cold water about seven o'clock, and again about eleven, last night, and twice to-day already with tepid water, as he was still less hot than yesterday, and his feet even cool. He has been relieved by the washing all the four times, and has always gone to sleep after it for a longer or shorter time.

"My other son (the four year old gentleman) has not yet sickened, but I expect him to be taken ill to-night or to-morrow; for last night he had very little sleep, and frequently through the night and to-day he has complained of being tired. *Lassitudines spontaneæ morbos denunciant* is one of the oldest maxims that I know of in physic. Whenever he sickens, I mean to treat him as I have done his brothers.

"Your's, most truly,

"J. GREGORY."

To the same.

Edinburgh, 10th Dec. 1803.

"Dear Sir,

"I AM sure it will give you satisfaction to know that my children have ALL done very well under your practice for the *scarlatina*. The eldest and youngest, though they have not yet fully recovered their strength, are recovering very fast, are in excellent spirits, and on the whole so well that they have been out of doors repeatedly, both in the carriage and on foot, though the weather

has been very cold, even with frost and snow for some days. Both of them have still some swelling of the lymphatic glands on both sides of the neck, extending from the ear almost to the shoulder. This I think the more remarkable, as I could see no ulceration of the throat, and no particular cutaneous affection on the hairy scalp of either of them. The swelled glands are no longer painful, and are already growing smaller and softer, so I presume they will disengage themselves completely without any difficulty.

"The four year old gentleman whom you enquire after, sickened on Monday morning, 14th of November. He had been complaining for five days, much and frequently, both day and night, of being tired: at day-break on Monday he complained much of the head-ach, and, upon looking at his skin, he was found to be from head to foot as red as a boiled lobster. His pulse for two days was nearly as quick as his elder brother's had been (from 130 to 150), but it was not near so strong; nor was his skin ever so hot as his elder brother's had been. He had no vomiting, or diarrhoea, as both the others had, but his body continued quite open as in his perfect health. Supposing the head-ach, which in him was very severe, to proceed from the stomach or bowels being in some measure loaded, I gave him, on the afternoon of the second day, three grains of calomel, which did not operate as a purge, but soon and very effectually as an emetic, and seemed to remove his head-ach; but as this returned on the morning of the third day, after being suspended about sixteen hours, two good leeches were applied to his temples, by which he lost a good deal of blood, with great and immediate relief to the head-ach, which has not returned.

"The cure in this boy, as in the other two, was trusted to the washing; but as his pulse was not very strong, nor his heat very great, the water was not perfectly cold, though very gently tepid; so little warm as to make him shiver. It seems to have succeeded as well with him as with either of his brothers.

"I have had much pleasure in observing repeatedly in the youngest child (the two year old gentleman) the great and immediate good effects of the cold or tepid washing, not only in lessening the frequency of the pulse and heat of the skin, but in relieving the febrile oppression and uneasiness. The little patient, who just before was crying very much, unable to hold up his head, incapable of being pleased or amused with any thing, nay almost incapable of looking at any thing, immediately after being washed (I mean in two or three minutes), would begin to look up and take notice of the people near him; then amuse himself with his playthings; then get upon his legs, and run about upon the floor; and at last go quietly to sleep."

The safest and most advantageous time for using the cold affusion is when the exacerbation is at its height, or immediately after its declination has begun. This is generally from six till nine o'clock in the evening; but may be safely used at any time of the day *when there is no sense of chilliness present; when the heat of the*

surface is steadily above what is natural; and when there is no general or profuse perspiration.

The late Dr. Currie, for several of the last years of his useful life, invariably employed this "DOMESTIC" remedy, viz. the affusion of water, cold and tepid, in the diseases above-mentioned. Used in the three first days of fever, the cold affusion generally stops the disease: the same happy effect sometimes follows its use on the fourth or even the fifth day, but seldom later. Even in the subsequent stages, where the heat continues preternaturally great, and the skin dry, it is of great and manifest advantage, almost immediately relieving the most distressing symptoms, particularly restlessness and delirium, and conducting the disease to a safe and speedier issue.

The tepid affusion (the water being 87° to 97° of Fahrenheit's thermometer) is applicable to all the diseases to which the cold affusion is applicable, and possesses very considerable though inferior efficacy. It is, however, very safe, easy of application, and in a high degree grateful, and Dr. Currie extended its employment to almost the whole class of febrile diseases." "In my practice" (said he) the cold and tepid affusions are very often combined in the same disease. While the heat is great, the skin dry, and the vascular action strong, I use water perfectly cold; when these symptoms diminish, I use it cool (87° to 75°), and as they subside still farther, I make it tepid."

In fevers *arising from or unaccompanied by topical inflammation*, Dr. Currie's experience does not justify the use of the cold affusion: though in a great variety of those cases the warm affusion may be used with advantage. "And," says he, "though I have used the cold affusion as late as the twelfth and even the fourteenth day of contagious fever, with safety and success, yet it can only be employed in this advanced period in the instances in which the heat keeps up steadily above the natural standard, and the respiration continues free. In such cases I have seen it appease agitation and restlessness, dissipate delirium, and, as it were, snatch the patient from impending dissolution."

Every arrangement should be made for the affusion before the patient is moved at all, and much fatigue, as well as disquiet, should be particularly avoided. And after all, the tepid affusion may be substituted for the more powerful remedy, in cases where the delicacy of the system, or the apprehensions of the by-standers, prevent the other from being employed.

Three years ago, Mr. Braithwaite, surgeon at Lancaster, published some observations on the utility of the oxygenated muriatic acid in the cure of the scarlet fever, which well deserve the attention of medical practitioners. We shall state the mode of practice he recommends:—

"When called to a patient, in whatever stage of the scarlet fever, my practice," says he, "for two years past has uniformly been as follows:—One drachm of oxygenated muriatic acid is mixed with eight ounces of distilled water in a phial, and shaken

together. This quantity should be taken every twelve hours by a patient from fourteen to twenty years of age. But it is preferable to administer it in draughts, divided from the quantity above-mentioned; from two ounces to half an ounce, as the patient's age and situation require; ordering them to be taken at such periods as, for an adult, to consume the quantity in the time mentioned; and to younger patients smaller doses, as half a drachm or two scruples of the acid to eight ounces of water. By this method the oxygen gas is not separated and lost each time the phial is opened, as may easily be perceived by its smell in the apartment. It is also absolutely necessary that the medicine be placed in a dark situation, wrapped in a paper, to prevent the disoxygenating influence of light.

Since the use of this medicine, Mr. B. says he never had recourse to emetics, purgatives, blisters, or diaphoretics. A regular perseverance in the oxygenant remedy has universally succeeded. "My patients," says he, "rapidly recovered, and are seldom afflicted with those complaints succeeding the scarlet fever, such as pain of the joints, paucity of urine, and universal anasarca swellings. Even when these follow, I recommend a continuance of the medicine until these symptoms entirely disappear, which will be found much earlier than by the usual mode of treatment. Indeed, if the oxygenated preparation be duly persevered in, I am of opinion those painful and distressing affections will rarely occur. It is also possessed of this desirable property, that it may be easily taken by children, who generally are the most numerous patients in this disease, and to whom all medicines are administered with difficulty. I have heard them repeatedly cry for that stuff which mended their throat as they expressed it. Indeed, in that respect, its effects are truly admirable, far surpassing the disagreeable practice of gargling and syringing, which in numerous instances, even if possible to do it, is productive of mischief. How far superior, then, must be a remedy, which by passing immediately over the infected and frequently ulcerated part, not only gives instantaneous relief, but entirely removes that foetid smell originating, in severe cases, from these parts!

"Patients often wish to be frequently sipping a little of the oxygenant liquid, which is not improper; but it must always be done out of a wine-glass, as admeasurement with a spoon is dangerous; the oxygen rapidly oxydating the metal of which it is composed, and by that means conveying into the stomach a poisonous fluid from which death might ensue."

Besides the internal use of oxygenated muriatic acid, Mr. Braithwaite, following Guyton Morveau and others, recommends the vapour of this acid for destroying contagious miasmata, even in rooms where the sick are present, without the slightest inconvenience.

The gaseous oxygenant, he observes, possessed of amazing expansibility, diffuses itself over the most extensive apartments, leaving nothing untouched, and touching nothing it does not

appropriate, rapidly oxydating metallic bodies, particularly iron and steel, which on that account should be removed; and radically destroying the most offensive odours, thereby rendering innocuous perhaps deadly contagious poisons.

To completely purify any apartment where a patient suffers in the scarlet fever, or any other contagious disease, so as to render it perfectly safe, not only to the attendants, but to the rest of the family, take a china tea-cup and saucer; put into the tea-cup two ounces of common culinary salt, and half an ounce of the black oxyd of manganese, previously powdered, with one ounce of water; then take an ounce and a half of *sulphuric acid* (spirit of vitriol or nitriolic acid), and pour a little of it now and then into the tea-cup among the other ingredients. Immediately an amazing quantity of oxygenated muriatic acid gas will be disengaged and diffused through the apartment. This should be suffered to remain only a few minutes, removing it out of the room into the staircase, by which means the whole house will become impregnated with this geous oxygenant. It will be proper to take it into the room frequently in the course of the day, adding to it a little fresh *sulphuric acid*, and then replacing it in its former situation.

By this simple plan, any prudent and attentive nurse may, with the utmost facility and safety, destroy contagion in any private apartment, or ward of an hospital. The gas extricated from common salt by sulphuric acid has been employed in the Royal infirmary at Edinburgh with very great benefit.

OF THE BILIOUS FEVER.

WHEN a continual, remitting, or intermitting fever is accompanied with a frequent or copious evacuation of bile, either by vomit or stool, the fever is denominated bilious. In Britain the bilious fever generally makes its appearance about the end of summer, and ceases towards the approach of winter. It is most frequent and fatal in warm countries, especially where the soil is marshy, and when great rains are succeeded by sultry heats. Persons who work without doors, lie in camps, or who are exposed to the night air, are most liable to this kind of fever.

If there are symptoms of inflammation at the beginning of this fever, it will be necessary to bleed, and to put the patient upon the cool diluting regimen recommended in the inflammatory fever.—The saline draught may likewise be frequently administered, and the patient's body kept open by clysters or mild purgatives. But if the fever should remit or intermit, bleeding will seldom be necessary. In this case a vomit may be administered, and, if the body be bound, a gentle purge; after which, the Peruvian bark will generally complete the cure.

In case of a violent looseness, the patient must be supported with chicken broths, jellies of hartshorn, and the like; and he may use the *compound decoction of chalk* for his ordinary drink. If a bloody flux should accompany this fever, it must be treated in the manner recommended under the article *Dysentery*.

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When there is a burning heat, and the patient does not sweat, that evacuation may be promoted by giving him three, four, or six times a-day, a table-spoonful of *acetated water of ammonia* (Mindererus's spirit) mixed in a cup of his ordinary drink.

If the bilious fever be attended with the nervous, malignant, or putrid symptoms, which is sometimes the case, the patient must be treated in the same manner as directed under these diseases.

After this fever, proper care is necessary to prevent a relapse. For this purpose the patient, especially towards the end of autumn, ought to continue the use of the Peruvian Bark for some time after he is well. He should likewise abstain from all trashy fruits, new liquors, and every kind of flatulent aliment.

CHAP. XXV.

OF THE ERYSIPELAS, OR ST. ANTHONY'S FIRE.

THIS disease, which in some parts of Britain is called *the rose*, attacks persons at any period of life, but is most common between the age of thirty and forty. Persons of a sanguine or plethoric habit are most liable to it. It often attacks young people and pregnant women; and such as have once been afflicted with it, are very liable to have it again. Sometimes it is a primary disease, and at other times only a symptom of some other malady. Every part of the body is liable to be attacked by an erysipelas, but it most frequently seizes the legs or face, especially the latter. It is most common in autumn, or when hot weather is succeeded by cold and wet.

CAUSES.—The erysipelas may be occasioned by violent passions or affections of the mind; as fear, anger, &c. When the body has been heated to a great degree, and is immediately exposed to the cold air, so that the perspiration is suddenly checked, an erysipelas will often ensue. It may also be occasioned by drinking to excess, by continuing too long in a warm bath, or by any thing that overheats the blood. If any of the natural evacuations be obstructed, or in too small quantity, it may cause an erysipelas. The same effect will follow from the stoppage of artificial evacuations, as issues, setons, or the like.

The country people in many parts of Britain call this disease a *blast*, and imagine it proceeds from foul air, or ill wind, as they term it. The truth is, they often lie down to rest them, when warm and fatigued, upon the damp ground, where they fall asleep, and lie so long as to catch cold, which occasions the erysipelas. This disease may indeed proceed from other causes, but we may venture to say that nine times out of ten it is occasioned by cold caught after the body has been greatly heated or fatigued.

SYMPTOMS.—The erysipelas attacks with shivering, thirst,