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ART. XXXII.—OBSERVATIONS ON THE CLIMATE OF BARBADOES, AND ITS INFLUENCE ON DISEASE: TOGETHER WITH REMARKS ON ANGEOLEUCITIS OR BARBADOES LEG.

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Before entering on the history of the cases which form the basis of this communication, I may premise, that the prejudice existing against the performance of surgical operations in Barbadoes is now, at least, altogether unfounded, and that as far as regards ulterior consequences, they may be undertaken with the same degree of confidence as in Europe.

To the British or American reader acquainted with the writings of the older surgeons who have recorded the results of their experience on the peculiarities of the diseases of the West Indies, and the effect produced on disease by climate, this may appear a rather bold assertion, for the doctrine hitherto universally taught has been that, except as the only remaining chance of saving life, operations of every kind should be carefully avoided. And in cases of severe injury, amputation was frequently attempted as affording a greater chance of escape from tetanus, from the opinion existing that a clean wound was less likely to be followed by tetanus than a contused or punctured one,—that this rule applied not only to such as are considered capital operations, but even to those of a minor character, is very evident, from the instructions on this head given by old practitioners, and, indeed, so great was their aversion to the use of the knife, and so terrible the dread of tetanus, that even injection for the cure of hydrocele was always undertaken with extreme reluctance. Sir Astley Cooper, in his great work on "The Diseases of the Testis," has published a letter which he received from Mr. Caddell, of Bath,—but formerly a leading surgeon in Barbadoes,—in which Mr. Caddell states that "He lost some patients from erysipelas and a few from tetanus. The latter is, I believe, a danger unknown in England, but in Barbadoes it occurs often enough to make a man avoid operations of every kind as much as possible." Twenty years ago, and, perhaps, at a more recent period, there can be no doubt but that the dangers consequent on surgical operations were very great, and it seems equally certain that the fatal results of cases submitted to the knife at that period, were attributable to causes over which the science of surgery exercised but little or no control, having their origin out of the peculiarities of

climate; and, perhaps, much influenced by the social relations of the population.

Perhaps the scientific improvements in modern surgery deserve to be credited with a portion of our gratitude for present immunity from such fatal results after operations; but while we admit this, and acknowledge the simplicity and rationality of modern treatment, it is nevertheless certain that some of Mr. Caddell's contemporaries are still actively engaged in practice, pursuing similar methods of operating, but with more successful results than awaited their early practice.

Mosely, writing in A. D. 1795, says, "I have lost many patients from locked-jaw after amputation, and never found, leaving out the nerves, or whether ligatures were made or not, caused the slightest difference in the event, nor were any security against tetanus, nor diminished the symptomatic fever." He further adds, "Negroes who are most subject to it, whatever the cause may be, are void of sensibility to a surprising degree—they are not subject to nervous diseases—they bear chirurgical operations better than white people; and what would be the cause of insupportable pain to a white man, a negro would almost disregard. I have amputated the legs of many negroes who have held the upper part of the limb themselves." To the truthfulness of this latter assertion, we can bear testimony. The negro that has not been brought under the influence of domestic civilization and refinement, (if we may use the expression,) who has continued the life of the husbandman and field-labourer, does seem less susceptible of pain than the white man, and it would appear that nature has given them this power as a bountiful provision, enabling the African to expose himself freely to the sun's rays, which exert no unpleasant influence on his skin, while the white suffers severely from a temporary exposure. But in those Europeans long resident in the tropics, a darkening of the cutis takes place, which seems to be an effort of nature to establish the pigment which prevents that severe blistering so painful to those not accustomed to the influence of the sun's rays. There are at present in the Island two persons who, from constant exposure to the sun, are as dark as the Demerara Indian, and whose skin, under cover of the clothes, is very fair: on these, the sun now exerts as little influence as on the negro, and considerably less than on the refined descendant of Africa, and in this class there seems to be a diminished sensibility also. On the other hand, we cannot support the opinion advanced, of the greater susceptibility of the black person to tetanus, since there are not in existence data wherewith to construct tables sufficiently accurate to enable us to arrive at a