

Original Communications.

Rheumatism being an inaugural dissertation presented to the Medical Faculty of the University of Bishop's College.—By JOHN T. DAVIS, of Barbadoes, West Indies.

It is not my intention to enter into a methodical disquisition of this subject; not because I do not appreciate *method* in writing on a medical subject,—quite the contrary. But I presume it will be generally admitted that in no branch of Science is the cry for “more light” more earnestly vociferated as in the Science of Medicine. But let me hasten to remark, that whilst what I may have to say on this subject will be very far from adding “anything new,” yet the line of thought I propose to follow will admit of a few statements peculiarly my own, as results of observation and reflection; and this too will prevent me from treating the subject in the usual manner, and with wonted detail.

What is *Rheumatism*? One author says it is an affection which “arises from some unknown abnormal condition of the blood.” The etymology of the word reminds us of the “humoral pathology”—being derived from a Greek word signifying “a humour floating in the body causing disease.” Another author says: “Under the term *rheumatism* are included several diseases which vary in every respect except one, which is their being always painful. The action of the poison is not limited to any texture or organ; although it particularly affects the *white fibrous tissue* which enters into the formation of the aponeurotic sheaths and fasciæ, ligaments and tendons as well as the fibro-serous membranes. Consequently the parts most frequently involved are the joints and surrounding structures with the pericardium and endocardium.” From these statements it will be seen that the condition expressed by the term “rheumatism” is not yet well understood; and most authors, so far as I have seen, substantially agree in the above descriptions.

All agree further in regarding it as a constitutional disease; but as to what is the prime cause of the disease we are yet to learn. Acute rheumatism is better described: “It is a disease characterized by fever, profuse acid sweats, and inflammation of the fibrous tissues surrounding one or several of the large joints. It is especially formidable from the suffering it causes, from the intensity of the fever and from the damage which is so frequently produced by it to the heart.” But still it will be observed we

are yet to learn what the essence of the disease is. Whilst I do not attach overmuch importance to names of diseases, and hence very little to the term “rheumatism,” yet it does seem to me a matter of some moment to be acquainted if possible with the rationale of those conditions of the system which as a common occurrence often lead to inflammation of such important structures as the membranes of the heart, and not unfrequently of the heart-substance itself. But it might be asked: *qui bono*? What is the practical benefit to be derived from such knowledge? I hope to shew ere I close that upon it will depend a proper estimate of the treatment which generally obtains notoriety as being about the most rational mode of practice in this affection. Now I question very much the correctness of a part of the description above given of rheumatism, viz. that it is an affection which “arises from some abnormal condition of the blood”—this is doubtless true when looked at *in result*, and as being the immediate pathological cause of rheumatic fever, for instance. But the question arises: What is the nature of that abnormal condition? The answer is, no doubt: it consists in “the presence in the blood of a poisonous material,” or “in the presence of a superabundance of lactic acid.”

Now another question: Whence the origin of this poisonous material? I believe we shall find the ultimate cause of rheumatism (using this term as comprising the acute and subacute varieties of the disease) to consist in a disturbance of the *nutritive and eliminatory* processes.

Let us now observe the following cases:—

“The patient, John Kennedy, age 14, was a plasterer's boy, in which situation he was much exposed to cold damp atmospheres, and also to standing and kneeling in moist places. His parents are both alive and well; his mother has had rheumatism. He was quite well up to a fortnight ago (excepting an illness that resulted from a blow on forehead 3 years ago.) On the 9th June he had pain in all his joints, which so increased as to interfere with his getting about. He had to leave work and go to bed. The parts were very red. He perspired very much, was very feverish and had many rigors. He kept his bed until his admission to the hospital. He is a patient in good condition, sanguineous.”

Another case:—Alfred Trew, age 19, was a waiter at an hotel and had much to do with alternations of heat and cold; now perspiring in the kitchen and then in the parlor in a draught. He is of sober habits, and has not been exposing himself to night