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Eightly. It was considered essentially necessary to keep a large fire, both night and day, in every room where there was a patient with Cholera. It is now well known that in by far the majority of cases, the collapse commences betwixt two o'clock in the morning and six A. M., or, in other words, at the period of the twenty-four hours when the atmosphere is coldest: from which it appears that external cold acts as an exciting cause to the state of asphyxia. But independent of this, we have seen that the degree of force, with which oxygen can remove carbonic acid through the medium of a membrane, depends, in a great degree, on the temperature of the two fluids.-- Now, when the temperature of the blood is so very low, as it is during the state of collapse, and if the air which the patients then breathe be also cold, the small quantity of carbonic acid which exists in the black venous blood, will not be attracted by the cold air, and consequently this of itself may be one cause of the sudden death.

Ninthly. It is necessary to be very careful not to dismiss the patients as cured until they have been, at least, several days completely out of danger. Two of the cases, which proved fatal in the prison, at Cold-Bath Fields, were lost from our not having been at that time sufficiently aware of the importance of this.

Tenthly. The patients ought not to be allowed to use one particle of solid or indigestible food, for at least five days after they have recovered from the state of collapse. We nearly lost more cases than one, from the too early use of solid indigestible food; and one woman, a nurse in the London Free Hospital in Greville-street, actually died from this cause, after having been considered as completely out of danger from a most violent attack of Cholera accompanied with collapse.

Eleventhly. Those who put their patients under the saline treatment, ought to trust almost entirely to this; for if they use calomel, brandy, or other destructive agents at the same time, they will do little good; but above all, not one particle of opium ought to be given internally; for, from what I have seen, I consider this to be as fatal in Cholera, as it is in the last stage of either the African typhus or the seasonal fever of the West Indies. Where the stomach, however, is extremely irritable, about twenty-five or thirty drops of laudanum, diffused in a little tepid water, may be injected with a small syringe into the rectum, not only with impunity but considerable advantage.

When the stomach is very irritable, small quantities of milk with carbonate of soda, may be given occasionally; and when we use the saline powders in such cases, they ought to be dissolved in a very small portion of water.

When the case is exceedingly malignant, or where we are called in late in the disease, and find the patient already in collapse, we ought then to have recourse to the most active measures. An ounce of the muriate of soda, with half a drachm of the chlorate, or the muriate of potass, should be given immediately in cold water, and repeated, if necessary, every half hour, until the patient has taken about three doses of this strong solution. Should reaction be brought on by this, it may then be kept up by the common saline powders; but should this experiment fail, we may then, as a last resource, give the patient another chance for life, by injecting a saline fluid into the veins.

The ejections, and every other source of impurity ought to be immediately removed from the room

where the patients are; and the infected wards should be fumigated at least twice a day with gunpowder, and every particle of suspicious clothing, bedding, &c., should be boiled, for at least half an hour, in a strong solution of common soda.

Those who are recovering from the disease are liable to a relapse, and such cases are generally fatal; but from what I have seen, my belief is, that those who have completely recovered, after having had the Cholera once, have an immunity from any future attack of this disease.

The above is an outline of the treatment and means which were used; the following is, I believe, a fair statement of the outline of the result:—

The three first cases which occurred in the prison were treated by Mr. Wakefield in the common way—with opium, brandy, the hot-air bath, &c.; but they all died after a very short illness. Almost immediately after this, another case was treated in a similar way by another practitioner, who had been sent for to the prison during the night, in consequence of Mr. Wakefield being unwell at the time. This gentleman was not then aware that any new practice had been adopted in the prison. He treated the patient *secundum artem*, with brandy, opium, and chalk; but the result was, that this patient was past all hopes of recovery before either Mr. Wakefield or myself saw him in the morning;—consequently, in the four cases that were treated in the prison in that way, there were four deaths and not one recovery under the common practice.

It may be proper to state that previous to the beginning of April there were no bowel complaints in the prison, and the whole of the prisoners were then as healthy as they generally are at that season of the year. The first case that was reported to the Board of Health occurred on the 5th of April;—the saline treatment was commenced on the 8th. There were in all at that period about one thousand three hundred souls in the prison; and from the 8th of April to the cessation of the first epidemic, there were at least one hundred individuals who were evidently more or less, under the influence of the poison.

In about fifty of the above cases, the patients were attacked with a bowel complaint, and most of them had, more or less, irritation at the stomach. The fluids that were ejected, were generally deficient in bile; and the bowel complaint was attended with the following peculiarities:—

First. The inclination to go to the night-chair came on more suddenly than it generally does in cases of common diarrhoea.

Secondly. The ejections were less bilious than in common diarrhoea; and opium, chalk, astringents, &c., which are generally useful in cases of common bowel complaints, were of no use in checking the diarrhoea, which occurs when the patients are under the influence of the Cholera poison. These remedies were chiefly used in cases which occurred out of the prison; but they evidently had no effect in checking the specific ejections which are produced by the Cholera poison; and this I presume was the cause of the diarrhoea which occurred in the fifty cases in the prison to which I refer. The whole of these were immediately put under the saline treatment, and this appeared to give an immediate check to the disease; and I believe it was by this means, that the patients were saved. The saline treatment was continued until the patients were able to take food, and then they were gradually brought back to their ordinary diet. Consequently, though they were constantly breathing in an atmos-