

symptoms. It is now fashionable to attribute the latter stages of fevers to a change in the state of the blood resulting from their course; but this throws little light on the effects of malaria on the human constitution, or the mode in which it acts in producing fevers.

The bilious derangements accompanying malarious fevers are too obvious to be denied; and the late Dr. James Johnson, in his admirable work "*On the Influence of Tropical Climates on European Constitutions*," has distinctly pointed out the vitiated state of the secretions of the liver, stomach, and small intestines; and suppressed perspiration as an effect of heat and malaria on the constitution; and the almost insensible manner in which these may pass into "*Cholera Morbus, Fevers, and Dysentery, &c.*"

In some cases of malarious fevers the attack is sudden, and the peculiar symptoms so simultaneously developed that it would be difficult to say whether this derangement of the secretions, or the febrile paroxysm were the first manifestations of the disease; while in others, and particularly in the intermittent form of our Canadian fever, the bilious derangement precedes the fever for a considerable time, and by proper attention to it the fever in almost all instances may be prevented; and even when it does show itself, will usually disappear upon these being restored to a healthy state, without the use of a single dose of quinine.

As these derangements take place without local lesions, it may be a question if malarious fevers be strictly idiopathic: they certainly exist for a long time without any apparent local lesion, and the various changes that take place in severe cases as plainly indicate that the symptoms are not the result of local

inflammation, but must be attributed to other changes co-existing with it.

Cullen, and the systematic writers who follow him, in looking on them as idiopathic fevers, have directed their attention chiefly to the paroxysms of the fever, and almost lose sight of the modifications of these by inflammatory symptoms, or the intestinal derangements with which they are always accompanied; while Dr. James Johnson and his followers look on the local inflammation and the derangement of the secretions as the real disease: the paroxysms and type of fever being the effect of its peculiar course, of which they become the distinguished characters.

In following up this view of malarious fevers, we will be led to notice symptoms not usually connected with such diseases, and to trace the disorder of the hepatic and intestinal secretions from a state almost within the range of health, to that in which we find them in the most fatal cases of the yellow and pernicious fevers, or even in cholera itself; and to include many of those affections to which the appellation of diarrhoea, hepatic flux, and dysentery have been given, as it will be easily shown that they originate from the same source as the fevers, and frequently accompany or even alternate with them.

The distinction often drawn between intermittent and remittent fevers may also be questioned; indeed, many authors who thus treat of them admit that they freely pass and repass into each other, and are in some measure one and the same disease. We look on them as identically the same; and that malarious fevers may either be continued, remittent, or intermittent, the type depending on the state of the intestinal secretions, and accompany local inflammatory affections. Inflammations of the liver and membranes of the brain, occurring