

have previously endeavored to point out; and the following letter from Dr McPherson of Caledonia will further illustrate a view of disease that is daily brought more prominently before the profession by some of the writers on cholera:—

Caledonia, 1st July, 1851.

My Dear Jarron,—I regret very much not having kept notes of the cases of which you requested me to furnish the history, as they would have corroborated, in most essential particulars, the views entertained by you on the subject of cholera, as it occurred in this neighborhood.

You must, therefore, be content with such information as I can furnish from memory.

I have read your paper on the Endemic Fever of Canada, and can bear testimony to the faithful description of disease contained in it; and with which, as described by you, I have had a long practical acquaintance, and which, let me add, I have for the first time seen in print.

During the month of July, 1849, diarrhœa and dysentery prevailed to a greater extent than usual at that early period of the season. Fever also made its appearance there three weeks earlier than usual, and, in most cases with an amount of prostration, that in several instances approached near to a perfect state of collapse, and required the most energetic treatment to rouse the patients.

This state of prostration was not confined to the cases of fever, but was common to those attacked with diarrhœa and dysentery; and these affections were almost invariably accompanied with fever of an intermittent type; the period of prostration occurring during the intermission, and which in some cases of children proved rapidly fatal.

I may remark, that most of these cases occurred in the immediate neighbourhood of an artificial swamp, fed by a mill dam, which lays under water some eight hundred acres of land.

The first case of cholera that I met with was in this tract. It proved rapidly fatal, and the history of this family will illustrate what occurred elsewhere in the neighbourhood.

This family consisted of a recently arrived immigrant, his wife and child; their employer, his wife and child. The immigrant was the sufferer by cholera before alluded to, and his case terminated fatally in a few hours. His child had diarrhœa for ten days previous to his death, and this terminated fatally three days after that event. His wife had a severe attack of remittent fever during the month of August, from which she recovered.

The employer had diarrhœa, followed by ague. His wife was attacked on the 1st of August, under which she rapidly sank, not having had any previous diarrhœa, but was just recovered from ague, and very weak at the time she was attacked with cholera. Her child was attacked about the same time with dysentery, accompanied with fever of a well marked intermittent type, of which it died about ten days after.

From about the 1st of July till the cold weather set in, late in October, bowel complaints were more than commonly prevalent, and most of the cases that came under my notice were attended with characteristic prostration and fever, the prostration usually corresponding with the period of intermission.

I may further remark, that I had observed the same symptoms in former seasons, and have for many years treated these cases of bowel complaints, under the impression that they had their origin in the same cause which produced our common endemic fever.

Truly yours

WM. MCPHERSON.

Dr. Jarron, Dunville.

In the treatment of bowel complaints, we will find the benefit of attending to their exciting cause, as well as to their