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THE CANADA LANCET.

A MONTHLY JOURNAL OF

MEDICAL AND SURGICAL SCIENCE, CRITICISM AND NEWS.

Vol. XXII.] TORONTO, FEB., 1890.

[No. 6.

TREATMENT OF ACUTE IDIOPATHIC PERITONITIS.

By JAMES NEWELL, M.D., L.R.C.P. AND S., DETROIT, MICH. *

I venture to make the assertion that no member of this Association will deny that acute Idiopathic Peritonitis is a disease of very grave significance, and that the physician (whose lot is may be) who is called upon to combat the malady, not only often meets a foeman worthy of his steel, but an enemy whose overthrow calls out every resource of his art, and all the available means which he can command. Therefore, unless he has both a Proper and distinct conception of the leading principles which are to govern him in his conflict with so dangerous and relentless an enemy, the result may frequently be both unpleasant to the physician and disastrous to his patient. As it is a disease in which I have taken a great interest for a number of years, during the most active period of my professional life, and in which I have (not without being probably thought egotistical) had unusual opportunities of observation and acquaintance, I shall endeavour (though feebly and im-Perfectly it be) to pourtray what I conceive to be the proper and essential treatment of the disease. As to the frequency with which acute idiopathic Peritonitis occurs, I must say that my experience is not in accord with the standard authors; for they state it is a disease rarely, if ever, encountered. However, I venture the opinion that certain portions or districts of country may and do exert a modifying influence on the prevalence of the disease, and in consequence in some localities it will be much more frequently met with than in otliers.

As examples—during the years intervening between 1871 and '78 I practised my profession in the County of Elgin, Ontario, and during these seven years saw but one or two cases of acute idiopathic peritonitis. I had during this time and since made frequent and numerous enquiries of physicians practising in other parts of that Province and been informed that they seldom if ever met the disease. In the year 1878 I removed to Wyoming, in the County of Lambton, Ontario, and followed my profession there until I came to Detroit about a year ago. Now, whether it was owing to some peculiarity in the constitution of the people, paludal or miasmatic causes, or to the geographical position of the county (being bounded on the north by Lake Huron, and on the west by the River St. Clair, and exposed to sudden cold moist winds), I am unable to say; but acute idiopathic peritonitis was a disease quite frequently met with, both in its mildest and severest forms. For some time after my arrival in that district I was very much inclined to doubt the accuracy of my diagnostic powers and those of my professional confreres, until the frequency with which the disease occurred forced me to the conclusion that it was acute idiopathic peritonitis, and that our diagnoses were correct. I am in a position therefore to assume that this is a disease with which I have had considerable familiarity and experience, and that the conclusions at which I have arrived regarding the principles of its successful treatment are based more upon experience rather than upon theories or ideas obtained from a reading of the standard books and treatises. The successful treatment of acute idiopathic peritonitis resolves itself, in my mind, into two leading principles or indications, and which are to be kept constantly before the mental eye :- Rest, and comparative freedom from pain. By rest I mean absolute quiet of body. That I may the better impress this cardinal fact upon the minds of mv hearers, I cannot forbear introducing the following extract from John Hilton's treatise on "Rest and Pain," as it is so appropriate to the subject. the indulgence and forbearance of those members of the society who are familiar with the work and the lesson it so admirably teaches; but lest there be any in this audience who may not have fully grasped and comprehended the beneficial significance of rest in restoring the lost integrity of

tion, Nov., 1889.