

ART. XV.—*Additional Remarks on the Endemic Fever of Upper Canada.* By JOHN JARRON, Surgeon, Dunnville.

(Continued from page 150.)

Until the last three years, I have not found bowel complaints in adults to be of frequent occurrence in our malarious districts. A bilious flux would now and then show itself, and be attributed to cold, or irregularity in diet; and, if severe and continued, feverish symptoms would be manifested.

At other times, during a course of fever, the bowels would become relaxed; the stools, though frequent, and attended with more or less of tormina and tenesmus, would still be feculent; neither inflammatory symptoms nor dysenteric discharges would show themselves, and the affection would readily yield to proper treatment. I have only seen a few cases running on and assuming the appearance of inflammatory dysentery.

During the last three years, such complaints have become much more frequent and various in their aspect. They have usually put on the appearance of diarrhœa or bilious flux, the discharges from the bowels being feculent, but varying in character and color: a little blood and mucus would occasionally pass, but dysenteric discharges and inflammatory symptoms have been rare. Cold chills and irregular feverish paroxysms are usually present, and the prostration of strength is well marked and much complained of. The features will shrink, with dark rings round the hollow eyes; a soft weak pulse, partial perspiration, and other appearances of chill fever are also common; indeed, this va-

riety of fever is more likely than any other to be accompanied with bowel complaints.

Now and then the tenesmus will become excessive, and the discharges of a small quantity of bloody slime almost incessant. A strict investigation will show that these discharges are the effects of disease or irritation in the rectum and lower part of the colon; there will be little pain or tenderness in the abdomen; the usual dysenteric discharges will seldom appear, and when fœces do pass, they will generally resemble the unhealthy secretions in cases of fever.

Cramps in the abdominal muscles and in those of the extremities are common to all severe bowel complaints.

During the prevalence of an epidemic cholera, even in localities where that disease does not itself appear, diarrhœas of all kinds are frequent, and the loose feculent discharges show a tendency to assume a light color, being watery and deprived of the bile, and approaching more or less to the rice-water discharges of cholera. Such attacks are usually attended by sickness at the stomach, and more or less of vomiting. The discharges, both from the stomach and the bowels take place without tenesmus, or even much pain. There is always a peculiar sense of uneasiness in the abdomen, but tenderness on pressure, or tenesmus are rarely present. The general depression and tendency to sinking are well marked, and frequently pass into a species of collapse, with other symptoms approaching very nearly to a state of epidemic or Asiatic cholera.

The connection of epidemic cholera and choleroïd diarrhœa with common fever, or rather the identity of the affections, I