

symptoms that ensued after the doses of quinine were the direct consequence of them, but will suffice to raise a question, and to direct the attention of the profession to the point, as well as to induce caution in the present indiscriminate, and almost unlimited use of that medicine. To me they are exceedingly interesting as illustrative of a point of practical medicine to which my attention had for some time been directed. If it be allowed that the sufferings of a patient may be increased by the suppression of a paroxysm of fever by quinine, there may be no limit to the extent of this suffering, or to its ultimate consequence. Had the disease in these cases been suppressed by the quinine, we would at once have attributed this to the effect of the medicine. There was nothing in any of them to lead one to expect a different result, or to say that the fatal symptoms might have come on had no quinine been given. The proof of either supposition may be about equal, yet, in every one of them we have the farther fact of the modification of the paroxysm, tending to show the susceptibility of the constitution to quinine and its ardent effects on the disease.

Considering the free manner in which quinine is now being used in fevers, both of a continued and paroxysmal type, it becomes an object of importance to ascertain the particular symptoms and appearances in paroxysmal cases, that may render its effects dangerous, if not occasionally fatal. These cannot be pointed out in an adequate manner by stringing together certain symptoms as contra-indicative of the use of quinine. They must be gathered from a correct knowledge of the character of the disease itself, and of the functional derangements and organic changes with which it is accompanied, or on which it may depend; as well as of the effects of quinine in its different stages, and in the varied and complicated forms it may assume.

In the most simple cases of this fever we have the bilious symptoms and functional derangements of the process of digestion, as well as the phenomena of fever, and this perfect, and recurring at distinct intervals. In the treatment, these two states must be separated, and looked on as cause and effect, for though it may be difficult to reconcile this with the theories of the disease, it is yet a practical view that will seldom lead to error. In slight cases of ague, quinine will generally stop the paroxysm, but seldom entirely remove the bilious symptoms so that it may not return after a time, or never aid in an attack of fever. When the secretions become extensively altered, and the blood consequently diseased and loaded with excrementitious matters—either with or without inflammatory action in some of the organs or tissues, and with such inflammatory action in otherwise simple cases, the ague will cease; the fevers become remittent or continued, passing from the one to the other,