

sudden approach of collapse at any stage of the disorder, evinced a choleraic tendency; it also seemed to be substituted for the ordinary diseases of miasmatic origin, that usually prevailed during former years, at the same season, and when those did declare themselves, they invariably assumed "the livery of the prevailing epidemic."

So universal was this complaint, that scarcely one-fifth of the population escaped some form of it, either very mild, or presenting all the symptoms above described; the majority were, however, of by no means an aggravated kind, most persons whom one encountered after their mid-day meal were flushed, and complained of transitory griping pains.

In a great number the exciting cause was, conclusively, of a contagious nature; upon one member of a family contracting the disease, the remainder, notwithstanding all due precaution in diet, cleanliness, and ventilation, one by one also succumbed, and not a few well ascertained instances occurred, of visitors who had arrived from a healthy locality receiving the disease when exposed to intercourse with those laboring under it, or upon their return or departure from the neighborhood.

Duration;—this, in fatal cases, was never less than from five to ten days, sometimes three weeks elapsed before its termination, in death or recovery, but in a large number, the symptoms were relieved in the space of two or three days.

The history of the following cases may serve to illustrate the semiology more fully, and afford a sketch of the treatment practised.

CASE A.—A married lady, ætat 34, full habit of body, of a decided strumous diathesis, the mother of seven children.

1st Day.—A few days previous, she experienced slight catarrhal symptoms, for which she was at a loss to account, wandering pains, occasional cramps in the gastrocnemii and adductors of the thighs; last night she passed several dark watery stools, containing scybala tinged with blood, attended with no pain, she has one now every thirty or forty minutes; no pain on pressure; vomiting of ingesta immediate upon their reception in any quantity; tongue clean and red; pulse frequent and tense; cool extremities, and much prostration.

R. Mist. Camph. C. Chloroform, comp. 3i.
Morph. Sulph. gr. i.
Aque, q. s. pro. mist. Statim sumend et repetat. dos. bis per horas tres.
Cataplasma. sinap. ad epigastrium.
Etiam **R.** Hyd. chlorid gr. ss. semihorio capiend. donec emesis sublevanda erit.

The vomiting was allayed after the third dose of calomel, and one repetition of the camphor mixture.

R. Plumbi acetatis, gr. v.
Hyd. chlorid, gr. i.
Pulv. opii, gr. ss. m.
Fiat. pulv. 3 tiis. horis adhibend. Mitte. iij.

2nd Day.—Bowels moved less often, and evacuations less watery; has a febrile exacerbation about 9

o'clock, a.m.; pulse 120, small; capillary circulation improved; complains of tormina; urine scanty; distressing thirst; vomiting at intervals. To be confined strictly to the horizontal posture, and the dejections received upon cloths placed for the purpose; to be allowed to swallow small pieces of ice occasionally; a blister to be applied over the stomach; one grain of calomel to be laid upon the tongue and swallowed, followed by a little gum water, with liq. opii sedat. mixv., every hour or every second hour, according to the urgency of the symptoms.

3rd Day.—Vomiting and chilliness, followed by high fever, at 9 o'clock; bowels very frequently moved, dejections consisting principally of fluid, containing blood, in large quantity and mucus.

Repetat. pulv. acet. plumbi., &c., ut ante.

Capiat quinae disulph gr. x. proxima hora.

4th Day.—Bowels not opened for twelve hours; vomiting wholly subdued; tormina; fever in the afternoon; tenesmus and bloody stools four or five times. Repeat the quinine to-morrow at day-light.

5th Day.—The remittent fever has been successfully interrupted; dysenteric symptoms increasing; urine nearly suppressed; copious enemata of cold water, with a drachm of laudanum in each, were ordered at intervals of four or six hours.

R. Ferri persesquinitrat. sol. (form. Mr. Ker) m. xx.
Omni vel 2 da. q. q. h. sumend. ex. aq. q. v.

6th Day.—Urine copious; stools nearly free from blood tinged with oxyde of iron, and more purulent. Ut heri.

7th Day.—Improvement continues; evacuations now consistent and feculent, colored highly by the iron, recurring only every sixth hour.

8th Day.—Dysenteric symptoms removed; *omitte remedia.*

9th Day.—Convalescing; complains of exhaustion; quinine in small doses, &c.

CASE B.—A female, ætat 39. Burning heat at scrob. cordis; vomiting and faintness; tenderness over the course of the colon; evacuations very frequent, serous, mixed with sanguinolent mucus, tenesmus.

R. Ferri persesquinitrat. sol. 3iv.
Infus. quassia 3iv.
Capt. cochl. comp. 2 dis. horis.
Mist. camph. c. chloroform comp. p. r. n.

2nd Day.—The same as yesterday.

3rd Day.—Improving. Enema, decoct. amyli et opii post sedes sing. liquida. Ferri persesquinitrat. ut ante 3tiis v. 4tiis horis.

4th Day.—The same as last report.

5th Day.—No discharge from the bowels for 14 hours.

6th Day.—Convalescing. Prescribed infus. calumbæ.

CASE C.—Laborer, ætat 40. Has been suffering from diarrhœa for three days, for which he treated himself with some of the compounds of laudanum and